

PALM BEACH COUNTY

2015 JAN -7 PM 2: 0"

BOARD of COUNTY COMMISSIONERS AGENDA ITEM SUMMARY

| Meeting Date: 2/3/2015 [X] Consent [] Regular [] Public Hearing |
|--|
| Department: Submitted By: Internal Auditor's Office |
| I. EXECUTIVE BRIEF |
| Motion and Title: Staff recommends motion to receive and file: A. Audit report reviewed by the Audit Committee at its December 17, 2014 meeting as follows: 1. 2015-01 Risk Management - Data Exchange Memorandum of Agreement with Florida Department of Highway Safety. B. Audit recommendation status follow-up report as of September 30, 2014 reviewed by the Audit Committee at its December 17, 2014 meeting. Summary: Ordinance 2012-011 requires the Internal Audit Committee to review audit reports prior to the summary. |
| issuance. Ordinance 2012-012 requires the County Internal Auditor to send those reports to the Board of County Commissioners. At its meeting on December 17, 2014, the Committee reviewed and authorized distribution of the attached audit report. The Committee also reviewed and authorized distribution of the Audit Recommendation Status Follow-up Report as of September 30, 2014. We are submitting these reports to the Board of County Commissioners as required by the Ordinance. Countywide (PFK) |
| Background and Policy Issues: The Internal Audit Committee reviewed and authorized distribution of audit report 15-01 and the Audit Recommendation Status Follow-up Report as of September 30, 2012 at its December 17, 2014 meeting. |
| |
| |
| Audit report as identified above Audit recommendation status follow-up report as of September 30, 2014 |
| Recommended by: Joseph 7 Bergeron 6 an 2015 Internal Auditor Date |
| Recommended by: Por County Administrator Date |

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

| Fiscal Years | 2015 | 2016 | 2017 | 2018 | 2019 |
|-------------------------|--------|------|------|------|------|
| Capital Expenditures | | | | | |
| Operating Costs | | | | | |
| External Revenues | | | | | |
| Program Income (County) | | | | | |
| In-Kind Match (County) | | | | | |
| NET FISCAL IMPACT | None W | | | | |
| # ADDITIONAL FTE | | | | | |
| POSITIONS (Cumulative) | | | | | |

| # AD | DITIONAL FTE | | | | | | |
|-------------|---|------------|------------------|---------------------------|--------------|----------------------------------|--------|
| POSI | TIONS (Cumulative) | | | | | | |
| Budge | m Included In Current Bu et Account No.: Fund _ rogram Number | Agency | Org. | Objeevenue Sourc | | | |
| R R | ecommended Sources of 1 | Funds/Sumn | ary of Fisca | l Impact· | | | |
| <i>2.</i> K | ₩ No fiscal impa | | .u.r.y 0.1 1.50u | · impue | | | |
| A. | Department Fiscal Rev | view: | , | | | | |
| Α. | OFMB Fiscal and/or C | | | DMMENTS: Comments: | | | |
| В. | Lusa 7/18 RO AM Budget | J OFMB | 1/8/15 | <u></u> | Contract Adr | wolou ministration wheeler | 1)1011 |
| | Assistant Coup | Attorney | 13/15 | | | | |
| C. | Other Department Rev | iew: | | | | | |
| | Department Di | rector | | | | | |

This summary is not to be used as a basis for payment.



Office of the County Internal Auditor Audit Report #2015-01

RISK MANAGEMENT DEPARTMENT

DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES DATA EXCHANGE MEMORANDUM OF AGREEMENT

DATED OCTOBER 24, 2014

WHY WE CONDUCTED THIS AUDIT

We conducted this audit to answer the following objective:

1. Did the Risk Management Director ensure that, for FY 2014 through September 30, 2014, internal controls over personal information obtained from the Florida Department of Highway Safety and Motor Vehicles (HSMV) pursuant to Memorandum

of Understanding (MOU) HSMV-0343-12 were adequate to protect the personal data from unauthorized access, distribution, use, modification or disclosure as required by the MOU?

WHAT WE FOUND

The Risk Management Director did ensure that, for FY 2014 through September 30, 2014, internal controls over personal information obtained from the HSMV pursuant to *Memorandum of Understanding HSMV-0343-12* were adequate to protect the

personal data from unauthorized access, distribution, use, modification or disclosure as required by the MOU.

WHAT WE RECOMMEND

The audit report makes no recommendations for improvement in relation to the audit objective. However, we noted several minor administrative matters we believed could be improved and communicated those items to management in a separate letter.

DETAILED FINDINGS AND RECOMMENDATIONS

None.

BACKGROUND

The Risk Management Department (Department) coordinates functions relating to risk identification and control exposures that may cause loss to Palm Beach County (County). The Employee Safety/Loss Control Division (Division) is responsible for providing programs and services to the departments of the Board of County Commissioners to prevent injury and illness to County employees, harm to the public, and property losses to the County. Division services are provided by four professionals including the Division Manager and one administrative person.

The Department has, for years, entered into Data Exchange Memorandums of Understanding (MOUs) with the Florida Department of Highway Safety & Motor Vehicles (HSMV) in order to allow access to information relating to driver's license contained in the State's Driver and Vehicle Information Database (DAVID). This information is retrieved through the electronic batch process known as the DSS600 process and is used to monitor the driving status of County employees. The Department delegated the DSS600 upload and download process to Information

System Services (ISS). Every Thursday, ISS manually runs a database process which creates the electronic batch file. The electronic file is zipped with a preset password and moved to a file transfer protocol (FTP) location. In return, the HSMV updates the electronic file and moves information to the FTP location. Every Friday, ISS retrieves the electronic batch file, unzips the file with a password, and then downloads the updated information from the file into their client server application known as RIMS (Risk Information Management System) DRIVARS. After the information is updated into the database, ISS notifies the Department when the process is complete.

According to the terms of the 2011 MOU, upon the request from the HSMV, the Department must submit an attestation that indicates the internal controls over personal data have been evaluated and are adequate to protect the personal data from unauthorized access, distribution, use, modification, or disclosure. The attestation can come from either a Certified Public Accountant, Internal Auditor, or Inspector General.

AUDIT SCOPE AND METHODOLOGY

The HSMV randomly selected the Department to submit an attestation ensuring the agency is using the data in accordance to the MOU agreement. The attestation must be submitted to the Department by November 23, 2014. Failure to submit the attestation by the aforementioned date will result in the cancellation of the agreement as stated in the MOU agreement.

Through interviews with Division officials and staff, review of *Drivers Privacy Protection Act* (18 U.S.C. & 2721), *Exemptions from Public Records Law* (State Statute 119.0712), Countywide PPM, MOU, and other pertinent documentation, we selected the specific audit objective above for review. The scope of the audit covered procedures from Fiscal Year 2014 through September 30, 2014.

In order to answer the audit objective, we met with appropriate staff to identify the activities, responsibilities, access

Joseph F. Bergeron, CPA, CIA, CGAP

Joseph & Bergeron

Internal Auditor October 24, 2014

Audit W/P No. 2014-09

management, and controls relating to safeguarding the driver information on the RIMS DRIVARS module and the DSS600. We examined the requirements specified in the MOU agreement. We examined and evaluated audit logs and the quality control monitoring process. We also referred to the Committee of Sponsoring Organizations of the Treadway Commission (COSO) for information on internal control documentation.

We conducted this performance audit in accordance with generally accepted government auditing standards. These standards 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.



Office of the County Internal Auditor

AUDIT RECOMMENDATION STATUS FOLLOW-UP REPORT AS OF SEPTEMBER 30, 2014

ISSUED DECEMBER 17, 2014

AUDIT RECOMMENDATION STATUS FOLLOW-UP REPORT AS OF SEPTEMBER 30, 2014

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Steven L. Abrams

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Jess R. Santamaria

County Administrator

Robert Weisman

"An Equal Opportunity Affirmative Action Employer" DATE: December 17, 2014

TO: The Audit Committee

FROM: Joseph F. Bergeron, Internal Auditor

SUBJECT: Transmittal Letter for Recommendation Follow-Up

Report Dated September 30, 2014

Attached is the Internal Auditor's Recommendation Follow-Up Report providing the status of audit recommendations as of September 30, 2014. These reports will be prepared semiannually for periods ending March 31 and September 30. The reports are submitted to the Audit Committee at its meeting following the report "as of" dates. We will submit the reports to the BCC (generally January and July) following Audit Committee review.

The report contains a Summary Status of Audit Recommendations followed by:

- Exhibit 1 Audit Recommendations Open at Beginning of the April 1, 2014 through September 30, 2014 Reporting Period
- Exhibit 2 Audit Recommendations Issued During the April 1, 2014 through September 30, 2014 Reporting Period
- Exhibit 3 Open Audit Recommendations by County Department at September 30, 2014
- Exhibit 4 Summary Aging of Open Audit Recommendations at September 30, 2014
- Exhibit 5 Audit Recommendations Submitted for Audit Committee Consideration
- Exhibit 6 Recommendation Status at September 30, 2014

The purpose of this report is to keep the Audit Committee, the BCC and County Administration informed of the status of recommendations made by the Internal Auditor's Office and to facilitate oversight by County Administration on departmental implementation activities.

Exhibit 5 includes recommendations which have had final management action without correcting the underlying condition where we believe additional action is necessary (Part A) or that have been open for at least two years (Part B).

Audit recommendation follow-up is conducted to determine if management has implemented the corrective action agreed to during the audit and to ensure the underlying condition has been corrected.

Audit Committee Audit Recommendation Follow-up Report Dated September 30, 2014 Transmittal Letter December 17, 2014 Page 2

Audit recommendations are proposed by the Internal Auditor's Office and either accepted by management as proposed or management proposes alternate solutions, which are acceptable to Internal Audit. An audit recommendation is "Open" from the time the audit report containing the recommendation has been reviewed by the Audit Committee until management has either implemented the recommendation or decided to take no further action. Audit recommendations remain in this report as long as the recommendation is open. If management chooses to take no further action, Internal Audit reports that in Exhibit 5 and recommends appropriate action to the Audit Committee.

This report tracks every audit recommendation from the date of issuance through to final disposition. Management establishes projected implementation dates for all recommendations during the audit. Internal Audit tracks the projected implementation dates and conducts follow-up on audit recommendations when management confirms the recommendation has been implemented.

If management has not implemented the recommendation by the scheduled implementation date, Internal Audit makes inquiries of management to determine:

- What actions, if any, have been taken by management;
- Why the recommendation has not been implemented as scheduled; and
- When will the recommendation be implemented?

Internal Audit will conduct limited due diligence reviews to determine the validity of management's responses and consult with County Administration to determine if the reasons for delay are reasonable and report delinquencies where appropriate. The recommendation implementation date will be adjusted as necessary based on the new information from management.

Recommendation status is listed in Exhibits 5 and 6 as either:

- Completed The recommendation has been fully implemented or management has implemented alternative actions that achieved the same purpose as the original recommendation, and the actions taken by management have corrected the underlying conditions. Internal Audit review confirms management's actions.
- In process Management has begun implementation of the audit recommendations but work is not yet complete. Internal Audit conducts limited review work to confirm the "in process" status of management's actions on a recommendation. Management provides a new projected implementation date for the corrective action.
- **Implementation pending** The implementation date established by management occurs after the date of this report and Internal Audit has done no review work on the recommendation.
- Follow-up pending The department has reported implementation of the audit recommendation. However, Internal Audit has not yet done the follow-up review work to confirm management's actions.

SUMMARY STATUS OF AUDIT RECOMMENDATIONS

SEPTEMBER 30, 2014

As of September 30, 2014, the Internal Auditor's Database of Audit Recommendations showed that management actions had not been completed on 48 recommendations. These recommendations are considered "Open". Of those 48 open recommendations, follow-up has been conducted on 11 showing that management action has started but was not yet complete. The other 37 open recommendations are scheduled for follow-up in the future and no audit evaluation has been conducted at this time.

Changes in the inventory of Audit Recommendations during the period April 1, 2014 through September 30, 2014 are shown below:

| Open Audit Recommendations as of April 1, 2014 | 62 |
|--|----|
| Additional Audit Recommendations from Audit Reports Issued April 1, 2014 through September 30, 2014 | 12 |
| Audit Recommendations Completed April 1, 2014 through September 30, 2014 | 27 |
| Open Audit Recommendations as of September 30, 2014 | 47 |

Recommendation follow-up work is generally conducted within one year of report issuance or earlier if management indicates that final action has been completed. Follow-up is done to determine the following:

- Was the recommendation implemented as agreed to by management? Or, if not, did alternative management action(s) correct the identified deficiency (ies)?
- Was the underlying cause (condition) corrected?

Sufficient audit evidence is developed to support a conclusion as to implementation of the recommendation and correction of the underlying cause (condition). If final management action has been taken on all audit recommendations in an audit report, the recommendations are considered "Complete" and are included in the current report, but not in future reports.

If management action(s) are not complete on any or all of the audit recommendations in an audit report, they are included in this report as 'In Process" and another audit follow-up will be scheduled. In those cases where final management action has been taken and the underlying cause (condition) has not been corrected, we show this recommendation as Completed, Not Implemented. These recommendations are included within Exhibit 5 for Audit Committee consideration.

Exhibit 1: Audit Recommendations Open at Beginning of the April 1, 2014 through September 30, 2014 Reporting Period

| Report | Issue Date | Number of Open Audit Recommendations Beginning of Reporting Period | Final Management Action Taken During Reporting Period | Number of Open Audit Recommendations End of Reporting Period |
|--|---------------|--|--|--|
| 10-23 Fire Rescue Bureau of Safety Services | Sep-10 | 1 | 1 | 0 |
| 11-09 Economic Sustainability Commission on Affordable Housing | Dec-10 | 1 | 1 | 0 |
| 12-06 Engineering & Public Works Traffic Division - Traffic Operations Section | Jun-12 | 8 | 4 | 4 |
| 12-07 Public Safety Emergency Management Division | Sep-12 | 1 | 0 | 1 |
| 12-10 Fire Rescue Accounting for Fuel Dispensed | Sep-12 | 1 | 1 | 0 |
| 13-06 Water Utilities Engineering Division | Jun-13 | 1 | 1 | 0 |
| 13-08 Facilities Development & Operations Electromic Services and Security | Sep-13 | 6 | 5 | 1 |
| 13-09 Public Affairs Graphics Division | Sep-13 | 14 | 0 | 14 |
| 13-10 Tourist Development Council TDC Administration | Sep-13 | 4 | 3 | 1 |
| 14-01 Public Safety Victim Services Division | Mar-14 | 9 | 0 | 9 |
| 14-02 Airports Department Airports Operations and Maintenance Division | Mar-14 | 10 | 5 | 5 |
| 14-03 Office of Financial Mgnt & Budget Town of Jupiter Impact Fee Review | Mar-14 | 1 | 1 | 0 |
| 14-04 Palm Tran Bus Bench and Bus Shelter Contracts | Mar-14 | 5 | 5 | 0 |
| Total | | 62 | 27 | 35 |

Exhibit 2: Audit Recommendations Issued During the April 1, 2014 through September 30, 2014 Reporting Period

| Report | Issue Date | Number of Audit Recommendations Issued this Reporting Period | Final Management Action Taken During Reporting Period | Number of Open Audit Recommendations End of Reporting Period |
|---|---------------|---|--|--|
| 14-05 Parks and Recreation Department Aquatics | Jun-14 | 4 | 0 | 4 |
| 14-08 Economic Sustainability Capital Improvements, Real Estate, & Inspection | Jun-14 | 4 | 0 | 4 |
| 14-09 Airports Department Jet Aviation | Jun-14 | 1 | 0 | 1 |
| 14-12 Facilities Development & Operations Facilities Management | Sep-14 | 3 | 0 | 3 |
| Total | | 12 | 0 | 12 |

Exhibit 3: Open Audit Recommendations by County Department as of September 30, 2014

| Department | Open Recommendations in Process | Open Recommendations Future Implementation with Follow-up Pending |
|-------------------------------------|---------------------------------------|---|
| Airports | 5 | 1 |
| Economic Sustainability | 0 | 4 |
| Engineering & Public Works | 4 | 0 |
| Facilities Development & Operations | 1 | 3 |
| Parks and Recreation | 0 | 4 |
| Public Affairs | 14 | 0 |
| Public Safety | 1 | 9 |
| Tourist Development Council | 1 | 0 |
| Total Open Recommendations | 26 | 21 |

Exhibit 4: Summary Aging of Open Audit Recommendations As of September 30, 2014

| Timeframe | Inventory at Beginning of Period (Exhibit 1) | i Pariaa (Byninif /) | Closed During this Period (Exhibits 1 and 2) | Open at the End of this Period | In Process | Follow-up Not Yet Scheduled |
|---------------|--|----------------------|--|-----------------------------------|------------|--------------------------------|
| 0 -6 Months | 0 | 12 | 0 | 12 | 0 | 12 |
| 6 - 12 Months | 25 | 0 | 11 | 14 | 5 | 9 |
| 1 - 2 Years | 25 | 0 | 9 | 16 | 16 | 0 |
| Over 2 Years | 12 | 0 | 7 | 5 | 5 | 0 |
| Total | 62 | 12 | 27 | 47 | 26 | 21 |

| 0 - 6 Months | April 2014 to September 2014 | | | |
|---------------|--------------------------------|--|--|--|
| 6 - 12 Months | October 2013 to March 2014 | | | |
| 1 - 2 Years | October 2012 to September 2013 | | | |
| Over 2 Years | Prior to October 2012 | | | |

Recommendations for which Final Management Action Has Been Taken Without Resolving the Underlying Condition

| None | |
|------|--|
| | |

Recommendations Which Have Been Open Longer Than Two Years

| 12-06 Engineering & Public Works | |
|--|---|
| Traffic Division – Traffic Operations Section | |
| Report Issued 7/18/2012 containing 16 | |
| recommendations | |
| First follow-up March 2013 | |
| Second follow-up September 2013 | |
| Third follow-up June 2014 | |
| #11 The Traffic Division Director should direct | Status - September 2014 |
| warehouse staff not to accept Issue Request | In process. |
| forms on which increases have been made to the | We examined 122 Issue Request forms for the |
| quantities requested. Alternatively, we suggest | month of May 2014. Two of the Issue |
| he implement a policy requiring that any | Request forms reviewed included quantity |
| increases in the quantities be initialed by the | increases - one was initialed and the other was |
| person making the change, such as is the | not. Consequently, management introduced |
| practice on a negotiable check, and be made in | an internal policy of not accepting any Issue |
| such a way as to not obscure the original | Request forms that are altered, X'ed out, lined |
| amount. | out or marked in any other way that is not |
| | clear, legible, and marked up in any way. |
| | Status - March 2014 |
| | In process. |
| | Status Cantambar 2012 |
| | Status - September 2013 In Process. |
| | In Process. |
| | Status – March 2013 |
| | In Process. Our review found that the |
| | Division Director directed staff to strike |
| | through and initial changes. However, we |
| | also found that 3 of 4 items with quantity |
| | increases had no approving initials. |

| | Status – September 2012 |
|--|--|
| | Implementation Pending. |
| | Implementation rending. Implementation scheduled for June 2012. |
| #13 The Traffic Division Director should ensure | - |
| | Status - September 2014 |
| that PPM ETL-006 is consistent with Countywide PPM CW-F-075. | In process. The Traffic Division is making progress in |
| wide 11 W C W -1 -0/3. | revising a draft PPM. The draft PPM will |
| | implement the recommendation by deleting |
| | the reference which indicate the discretion of |
| | management relative to payment for missing |
| | items. Our review found the draft PPM needs |
| | to be formally approved by authorized |
| | management. |
| | Status - March 2014 |
| | In process. |
| | Status - September 2013 |
| | In Process. |
| | Status – March 2013 |
| | Implementation Pending. |
| | Implementation scheduled for April 2013. |
| | Status – September 2012 |
| | Implementation Pending. |
| | Implementation scheduled for August 2012. |
| #14 The Traffic Division Director should work | Status - September 2014 |
| with Traffic Operations staff to determine an | In process. |
| appropriate definition of "tools and equipment" | The Traffic Division is making progress in |
| and initiate a review of the warehouse inventory | revising a draft PPM. The draft PPM will |
| to identify such items. | implement the recommendation by |
| | establishing the definition of tools & |
| | equipment. Our review found the draft PPM |
| | needs to be formally approved by authorized |
| | management. |
| | Status - March 2014 |
| | In process. |
| | Status - September 2013 |
| | In Process. |

Status – March 2013 **Implementation Pending.** Implementation scheduled for April 2013. Status – September 2012 **Implementation Pending.** Implementation scheduled for August 2012. #15 The Traffic Division Director should **Status - September 2014** identify an appropriate methodology for In process. determining the value of tools and equipment The Traffic Division is revising a draft PPM. subject to return or payment upon employee The draft PPM will implement the termination and require that such items are recommendation by addressing appropriate returned or paid for, in compliance with methodology to determine the value of tools Countywide and Divisional policies and and equipment upon employee termination. procedures. Our review found the draft PPM needs to be formally approved by authorized management. Status - March 2014 In process. Status - September 2013 In Process. Status – March 2013 **Implementation Pending.** Implementation scheduled for April 2013. Status – September 2012 Implementation Pending. Implementation scheduled for August 2012.

| 12-07 Public Safety | |
|--|---|
| Division of Emergency Management | |
| Report Issued September 2012 containing two | |
| recommendations | |
| First follow-up March 2013 | |
| #1 The EM Division Director should ensure that | Status - September 2014 |
| the 911 Coordinator review a sample of | In process. |
| invoices paid under the earlier contract with | |
| AT&T for Fiscal Year 2011 and 2012. The | Status - March 2014 |
| review should include a determination that | In process. |
| payments made were in accordance with | |
| contract requirements for the individual PSAP. | Status - September 2013 |
| | Follow-up pending. |
| | G |
| | Status – March 2013 |
| | Follow-up pending. Management reported |
| | completion of the invoice review. Audit |
| | follow-up scheduled for June 2013. |
| | To do a de de De de de |
| | Implementation Pending. |
| | Implementation scheduled for August 2012. |
| | |

| Audit Report Number, Title and Recommendation(s) | Recommendation Status |
|---|---|
| | |
| 10-23 Fire Rescue | |
| Bureau of Safety Services | |
| Report Issued 09/15/2010 containing two recommendations | |
| First follow-up October 2011 | |
| Second follow-up March 2012 | |
| Third follow-up September 2012 Fourth follow-up March 2013 | |
| Fifth follow-up July 2014 | |
| #2 The Bureau of Safety Service Deputy Chief should establish | Status - September 2014 |
| and implement internal controls to ensure that fire inspections are | Completed. |
| billed in accordance with the Code. | Internal controls have been |
| blifed in accordance with the Code. | established and strengthened |
| | with the implementation of |
| | the FDM software and |
| | added management reports |
| | and oversight. |
| | |
| | Status - March 2014 |
| | In process. |
| | |
| | Status - September 2013 |
| | Follow-up pending. |
| | |
| | Status – March 2013 |
| | In process. Implementation |
| | of the new computer system |
| | is not yet complete. A |
| | process of testing a sample |
| | of fire inspection reports on |
| | a monthly basis has been |
| | implemented and will be |
| | continued once the new computer system is fully |
| | implemented. |
| | implemented. |
| | Status – September 2012 |
| | In process. Fire Rescue |
| | management opted to |
| | implement new controls in a |
| | new computer system which |
| | is expected to be fully |
| | implemented in March |
| | 2013. The module is in |
| | place and scheduled for |
| | implementation testing |

| Audit Report Number, Title and Recommendation(s) | Recommendation Status |
|--|--|
| | following completion of work on the fire reporting module. Next follow-up scheduled for April 2013. |
| | Status - March 2012 Implementation Pending. Implementation scheduled for May, 2012; follow-up scheduled for June, 2012. |
| | Status – September 2011 In process. New software system has been purchased and, according to Department official, should be implemented by December 2011. |
| 11-09 Economic Sustainability | |
| Report Issued 12/08/2010 containing nine recommendations First follow-up May 2012 Second follow-up September 2012 Third follow-up March 2013 Fourth follow-up June 2014 | |
| #5 The Economic Sustainability Department Director should ensure that follow-up actions on the remaining 130 SHIP program recipients are completed in a timely manner, and that any recipient found to be ineligible be referred to the County Attorney's Office for evaluation as to whether action is appropriate. | Status - September 2014 Completed. We confirmed evidence of post-award monitoring for the remaining 18 recipients without exception. |
| | Status - March 2014 In process. |
| | Status - September 2013 In Process. |
| | Status – March 2013 In Process. Follow-up in February 2013 showed that, while there has been significant improvement, there are still 18 of the |

| Audit Report Number, Title and Recommendation(s) | Recommendation Status |
|--|--|
| | original 130 recipients yet to be completed. |
| | Status – September 2012 Implementation pending. |
| | Status – March 2012 In Process. Follow up in May 2012 showed that management had not yet completed action on the 130 SHIP program recipients. Management believed final action will be taken by September 30, 2012. |
| 12-06 Engineering & Public Works | |
| Traffic Division – Traffic Operations Section | |
| Report Issued 7/18/2012 containing 16 recommendations First follow-up March 2013 Second follow-up September 2013 Third follow-up June 2014 | |
| #2 The Traffic Division Director should initiate a review of the warehouse inventory to identify general purpose items in order to distinguish them from items intended for work projects. | Status - September 2014 Completed. The implementation of the Issue Request form (mentioned in #3 below) will identify items issued for work orders. |
| | Status - March 2014 In process. |
| | Status - September 2013 In Process. |
| | Status – March 2013 In Process. Division management decided not to segregate inventory items between those used for work orders and other items. They are working to ensure that all items issued for work orders are charged to those |

| Audit Report Number, Title and Recommendation(s) | Recommendation Status |
|---|--|
| | work orders. This item also relates to #3 below. |
| | Status – September 2012 Implementation Pending. Implementation scheduled for August 2012. |
| #3 The Traffic Division Director should reestablish the practice of recording the project location and/or work order number on the Issue Request form, in compliance with Division policies and procedures. This would apply to those items judged as nongeneral purpose in nature. | Status - September 2014 Completed. The Issue Request form has been revised to include the work order number. We examined 4 Issue Request forms submitted during April 2014 and found the forms had recorded work order numbers. |
| | Status - March 2014 In process. |
| | Status - September 2013 In Process. |
| | Status – March 2013 Implementation Pending. Our review showed none of the 106 requisitions reviewed had work order or location numbers. The Director stated he had discussed this matter in a staff meeting in June 2012 and that this item would be completed by 4/30/13. |
| | Status – September 2012 Implementation Pending. Implementation scheduled for June 2012. |
| #8 The Traffic Division Director should ensure that all Traffic Operations staff complete signature cards and that these cards are provided to the warehouse staff for accurate identification of authorized signatures. | Status - September 2014 Completed. We verified Signature Cards are complete and have been provided to warehouse staff. |

| Audit Report Number, Title and Recommendation(s) | Recommendation Status |
|---|---|
| | Status - March 2014 In process. |
| | Status - September 2013 In Process. |
| | Status – March 2013 In Process. Our review found that signature cards had been completed but have not been provided to warehouse staff. Manage- ment plans to have the cards available to warehouse staff by 4/30/13. |
| | Status – September 2012 Implementation Pending. Implementation scheduled for June 2012. |
| #11 The Traffic Division Director should direct warehouse staff not to accept Issue Request forms on which increases have been made to the quantities requested. Alternatively, we suggest he implement a policy requiring that any increases in the quantities be initialed by the person making the change, such as is the practice on a negotiable check, and be made in such a way as to not obscure the original amount. | Status - September 2014 In process. We examined 122 Issue Request forms for the month of May 2014. Two of the Issue Request forms reviewed included quantity increases - one was initialed and the other was not. |
| | Consequently, management introduced an internal policy of not accepting any Issue Request forms that are altered, X'ed out, lined out or marked in any other way that is not clear, legible, and marked up in any way. |
| | Status - March 2014 In process. |
| | Status - September 2013 In Process. |

| Audit Report Number, Title and Recommendation(s) | Recommendation Status |
|---|---|
| | Status – March 2013 In Process. Our review found that the Division Director directed staff to strike through and initial changes. However, we also found that 3 of 4 items with quantity increases had no approving initials. |
| | Status – September 2012 Implementation Pending. Implementation scheduled for June 2012. |
| #13 The Traffic Division Director should ensure that PPM ETL-006 is consistent with County-wide PPM CW-F-075. | Status - September 2014 In process. The Traffic Division is making progress in revising a draft PPM. The draft PPM will implement the recommendation by deleting the reference which indicate the discretion of management relative to payment for missing items. Our review found the draft PPM needs to be formally approved by authorized management. Status - March 2014 |
| | In process. Status - September 2013 In Process. |
| | Status – March 2013 Implementation Pending Implementation scheduled for April 2013. |
| | Status – September 2012 Implementation Pending Implementation scheduled for August 2012. |

| Audit Report Number | er, Title and Recommendation(s) | Recommendation Stat |
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| #14 The Traffic Division Director should work with Traffic Operations staff to determine an appropriate definition of "tools and equipment" and initiate a review of the warehouse inventory to identify such items. | Status - September 2014 In process. The Traffic Division is making progress in revising a draft PPM. The draft PPM will implement the recommendation by establishing the definition of tools & equipment. Our review found the draft PPM needs to be formally approved by authorized management. |
| | Status - March 2014 In process. |
| | Status - September 2013 In Process. |
| | Status – March 2013 Implementation Pending. Implementation scheduled for April 2013. |
| | Status – September 2012 Implementation Pending. Implementation scheduled for August 2012. |
| #15 The Traffic Division Director should identify an appropriate methodology for determining the value of tools and equipment subject to return or payment upon employee termination and require that such items are returned or paid for, in compliance with Countywide and Divisional policies and procedures. | Status - September 2014 In process. The Traffic Division is revising a draft PPM. The draft PPM will implement the recommendation by addressing appropriate methodology to determine the value of tools and equipment upon employee termination. Our review found the draft PPM needs to be formally approved by authorized management. |

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| #16 The Traffic Division Director should review the cases of tools not returned by the three terminated employees identified in the audit report, and seek the return of such tools or reimbursement for the value thereof. | Status - March 2014 In process. Status - September 2013 In Process. Status - March 2013 Implementation Pending Implementation scheduled for April 2013. Status - September 2012 Implementation Pending Implementation scheduled for August 2012. Status - September 2014 Completed. Management has accounted for tools and equipment for two out of the three terminated employees. The Traffic Department provided documentation indicating that they forwarded the remaining lost tools and equipment to Risk Management. Status - March 2014 In process. Status - September 2013 Im Process. Status - March 2014 In process. Status - March 2013 Implementation Pending. Implementation scheduled for April 2013. |
| | Implementation scheduled |

| Audit Report Number, Title and Recommendation(s) | Recommendation Status |
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| 12-07 Public Safety Division of Emergency Management Report Issued September 2012 containing two recommendations | |
| #1 The EM Division Director should ensure that the 911 Coordinator review a sample of invoices paid under the earlier contract with AT&T for Fiscal Year 2011 and 2012. The review should include a determination that payments made were in accordance with contract requirements for the individual PSAP. | Status - September 2014 In process. Status - March 2014 In process. Status - September 2013 Follow-up pending. Status - March 2013 Follow-up pending. Management reported completion of the invoice review. Audit follow-up scheduled for June 2013. Implementation Pending. |
| 12-10 Fire Rescue | Implementation scheduled for August 2012. |
| Accounting for Fuel Dispersed Report Issued September 2012 containing three recommendations First follow-up November 2012 Second follow-up March 2013 Third follow-up September 2014 | |
| #1 The Fire Rescue Administrator should review the actions suggested in this audit report and consider taking action as needed to better account for fuel dispersed to Department vehicles at both Department and Fleet Management sites. | Status - September 2014 Completed. Fire Rescue has taken action to improve the current system's tracking of fuel consumption by automatically transferring the detail of fuel dispensed at Fleet Management fuel sites into Fire Rescue's IBEM system. In addition, steps have been taken toward the implementation |

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| | of an automated fuel system that tracks fuel consumption from all decentralized agency fuel sites. The department anticipates all forty-one fueling sites will be automated by the end of FY 2018. |
| | Status - March 2014 In process. |
| | Status - September 2013 In process. |
| | Status – March 2013 In process. Fire Rescue scoped an automated fuel system for its 40+ fueling sites. The estimated cost to install the system is \$700,000. Management believes this system is not cost beneficial and is exploring other methods of improving fuel accountability. |
| | Status – September 2012 Implementation Pending. Implementation scheduled for January 2013. |
| 13-06 Water Utilities | |
| Engineering Division | |
| Report issued June 2013 containing 7 recommendations First follow-up September 2013 Second follow-up May 2014 | |
| #2 The Department Director should ensure that one full-time employee is assigned primary responsibility for collecting and recording fees received in the Division and that the assigned person is appropriately trained in fiscal matters. | Status - September 2014 Completed. We confirmed that a new person was hired as a clerical specialist by the Division and assigned the cashier role and |

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| | responsibility. We confirmed that the new SOP procedures were functional and that the reconciliation process was effective. Status - March 2014 In process. Status - September 2013 In Process. Our review showed that WUD and Human Resources have approved a Clerical Specialist position to be filled. |
| | filled. |
| 13-08 Facilities Development and Operations Electronic Services and Security | |
| Report issued September 2013 containing 6 recommendations First follow-up September 2014 | Status Sontombor 2014 |
| #1 ESS should develop and implement a plan that ensures that the items listed in the Maximo inventory module are in agreement with the items of actual inventory items located in the physical store rooms. Management should consider balancing the inventory by sections or small segments on a regular basis until the inventory count per the Maximo inventory module equals the actual inventory count of items located in the physical storerooms. | Status - September 2014 Completed. ESS has a plan to monitor and control inventory. Our review of the 2013 inventory count found the Maximo inventory module equals the actual inventory count of items located in the physical storerooms. The tested sample of the physical item count of ESS Main storehouse agreed with Maximo inventory listing. |
| | Status - March 2014 In process. |
| | Status - September 2013 |

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| #2 The ESS Director should design and implement controls to monitor stock levels by identifying and reacting to stock replenishment requirements determined by stock-out, minimum order quantity reports and back order conditions. | Status - September 2014 In process. This recommendation has been partially implemented in that management has created a process to identify and monitor stock levels but the review of actual min and max amounts in report would not be helpful in managing stock amounts because 98% of items had a min of 0 and max of 1. Several others items had a min and max of 1 or 2. Other items had a min greater than the max. |
| | Status - March 2014 In process. Status - September 2013 Follow-up pending. |
| #3 The ESS Director should design and implement controls to identify obsolescent and surplus stock and the proper disposal of such stock. This should include a periodic examination and evaluation of items and comparing on hand quantities to their usage. These procedures should be implemented prior to the annual physical inventory. | Status - September 2014 Completed. Our review found a Policy has been established and items have been transferred to Surplus. |
| | Status - March 2014 In process. |
| #4 The ESS Director should design and implement controls to | Status - September 2013 Follow-up pending. |
| #4 The ESS Director should design and implement controls to review the accounting for the value of capital project items and reclaimed equipment. | Status - September 2014 Completed. A procedure has been established for all projects starting on 8/15/13 or later. FDO will provide ESS with costs on all added stock turn-over. |

| Audit Report Number, Title and Recommendation(s) | Recommendation Status |
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| | Status - March 2014 In process. |
| | Status - September 2013 Follow-up pending. |
| #5 The ESS Director should design and implement controls to more clearly define roles, responsibilities and documentation requirements relating to the storekeeping function, cycle counts and inventory adjustment transactions. Also, compensating controls should be established to address the lack of separation of duties. For example, compensating controls can include management oversight of operations or review and reconciliation of reports by an independent party. | Completed. Our review found compensating controls established include oversight of various process by the FDO Fiscal Manager 1 and ESS Director (especially the Store Keeper position). Report structures and automatic printing of all reports has been implemented. An internal review process and separation of duties for requested inventory changes to fiscal section. (via inventory adjustment form) has also been implemented. |
| | Status - March 2014 In process. |
| #6 The ESS Director should design and implement controls to review the use of virtual stores rooms in the Maximo inventory module and eliminate the storerooms that do not represent items for trucks/vans and physical inventory locations. | Status - September 2013 Follow-up pending. Status - September 2014 Completed. A plan to control virtual storerooms was developed and implemented in July 2013. Virtual storerooms (inactive storerooms) are monitored and no inventory values will be carried in these. Inactive storerooms are printed semi-annually and automatically sent to each Section's Manager and Storekeeper for review. If items are found in those |

| Audit Report Number, Title and Recommendation(s) | Recommendation Status |
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| | reports, a review will be conducted to determine how that storeroom was populated and any item that is non-existent or needs transfer or removal will be handled via an inventory adjustment form which is sent through Section Manager or Storekeeper for Division Director approval. Upon Division Director approval it is forwarded to fiscal for completion of necessary adjustment. Status - March 2014 In process. Status - September 2013 Follow-up pending. |
| 13-09 Public Affairs Graphics Division | |
| Report issued September 2013 containing 14 recommendations First follow-up scheduled for January 2014 | |
| #1 The Division Manager should ensure that procedures addressing the issues described above are either prepared or updated (as appropriate) in a timely manner. | Status - September 2014 In process. |
| | Status - March 2014 In process. Status - September 2013 Follow-up pending. |
| #2 The Division Manager should ensure billing rates are adjusted to recover the cost of service, and continue to be submitted annually to OFMB for review as required by Countywide PPM CW-F-044. | Status - September 2014 In process. Status - March 2014 In process. |
| #3 The Division Manager should consider implementing | Status - September 2013 Follow-up pending. Status - September 2014 |
| procedures to track the current cost related to work orders, and to | In process. |

| Audit Report Number, Title and Recommendation(s) | Recommendation Status |
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| determine if documents are produced in a cost effective manner. | |
| | Status - March 2014 |
| | In process. |
| | Status - September 2013 |
| #4 The Department Director should review with the County | Follow-up pending. Status - September 2014 |
| Administrator and the OFMB Director the Division's current | In process. |
| practice of non-billing for one entity outside the General Fund. | Status - March 2014 |
| | In process. |
| | Status - September 2013 |
| #5 The Department Director should review with the County | Follow-up pending. Status - September 2014 |
| Administrator and the OFMB Director the inventory valuation | In process. |
| amount that requires perpetual inventory records be maintained. We believe the current threshold of \$50,000 may be too low and | Status - March 2014 |
| result in higher administrative costs to maintain perpetual records | In process. |
| for assets that may not be warranted. | Status - September 2013 |
| | Follow-up pending. |
| #6 The Division Manager should ensure vulnerable assets and | Status - September 2014 |
| inventories of higher cost materials and supplies are physically secured with limited access to them. | In process. |
| secured with infined access to them. | Status - March 2014 |
| | In process. |
| | Status - September 2013 |
| | Follow-up pending. |
| #7 The Division Manager should implement procedures to ensure that the reported performance measure data is accurately captured | Status - September 2014 In process. |
| and reported. | |
| | Status - March 2014 In process. |
| | |
| | Status - September 2013 Follow-up pending. |
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| #8 The Division Manager should implement controls and procedures in accordance with Countywide PPM CW-F-018 and | Status - September 2014 In process. |
| procedures in accordance with Countywide PPM CW-F-018 and | in process. |

| Audit Report Number, Title and Recommendation(s) | Recommendation Status |
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| update their departmental PPM to more appropriately manage transactions involving sales tax exemptions. The revised | Status - March 2014 |
| departmental PPM should address obtaining, reviewing and maintaining sales tax exemption certificates and exemption numbers; and ensure that sales taxes are charged as appropriate. | In process. Status - September 2013 Follow-up pending. |
| #9 The Division Manager should ensure security roles assigned to Graphics staff in the County's financial system (Advantage) provide for the adequate segregation of duties where feasible; and | Status - September 2014 In process. |
| should not allow any one individual to be able to both (1) process (validate) and (2) approve (submit) procurement documents for ordering (purchasing) and receiving. | Status - March 2014 In process. |
| | Status - September 2013 Follow-up pending. |
| #10 The Division Manager should ensure that purchasing duties are adequately segregated so that no one person is approving purchases, receiving purchased items, and handling the related | Status - September 2014 In process. |
| invoices for payment. If necessary, compensating controls should be established to address the lack of separation of duties. For example, compensating controls can include management | Status - March 2014 In process. |
| oversight of operations, or review and reconciliation of reports by an independent party. | Status - September 2013 Follow-up pending. |
| #11 The Division Manager should ensure that duties are segregated between receiving checks and the accounts receivable function by allowing Finance to assume these responsibilities, as | Status - September 2014 In process. |
| opposed to the Division. | Status - March 2014 In process. |
| #12 The Division Manager should implement appropriate controls | Status - September 2013 Follow-up pending. |
| #12 The Division Manager should implement appropriate controls over cash receipts to ensure all payments are accounted for when received and are adequately safeguarded. | Status - September 2014 In process. |
| | Status - March 2014 In process. |
| #13 The Division Manager should implement reconcilistion | Status - September 2013 Follow-up pending. Status - September 2014 |
| #13 The Division Manager should implement reconciliation procedures to ensure cash receipts (checks) received and forwarded to Finance for deposit are appropriately recorded in the County's Financial System. | Status - September 2014 In process. |

| Audit Report Number, Title and Recommendation(s) | Recommendation Status |
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| #14 The Division Manager should consider implementing procedures to record all receivables for external customers in the County's financial system to promptly record all transactions, and to allow Finance to invoice and collect the related payment, relieving the Division of that responsibility. | Status - March 2014 In process. Status - September 2013 Follow-up pending. Status - September 2014 In process. Status - March 2014 In process. Status - September 2013 Follow-up pending. |
| 13-10 Tourist Development Council Tourist Development Administration | |
| Report issued September 2013 containing 4 recommendations First follow-up scheduled for April 2014 #1 The TDC Executive Director should ensure written procedures are prepared outlining the steps necessary to review the contracts between the County and the agencies, review grants administered by the agencies, review reimbursement requests submitted by the agencies, and administer Special Projects. The procedures should include sufficient information to permit an individual that is unfamiliar with the operations to perform the necessary activities. These procedures should also assign responsibilities for performing and approving these steps and identify the backup documents to be maintained by TDC Administration. | Status - September 2014 In process. Procedures for the review of grants, reimbursement requests, and administration of Special Projects include assigning responsibilities for performing the reviews, approving the reviews, and identifying the backup documents to be maintained by TDC. However, the procedures for the review of the contracts between the County and the agencies do not include assigning responsibilities for performing the reviews and approving the reviews. |
| | Status - March 2014 In process. |

| Audit Report Number, Title and Recommendation(s) | Recommendation Status |
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| | Status - September 2013 Follow-up pending. |
| #2 The TDC Executive Director should retain a copy of the checklists used to review agency contracts and expand the use of the checklists to document the reason and turnaround times for exhibits returned to the agencies and include the review of all updates to the contracts. Retaining the checklist would provide management with information that could be used to justify concerns with exhibits being returned and improve the efficiency of the process by reducing the probability of future returns. | Status - September 2014 Completed. Checklists used to review agency contracts are retained in the contract file. The Checklists include the reason and turnaround times for exhibits returned to the agencies and a review of all updates to the contracts. |
| | Status - March 2014 In process. |
| | Status - September 2013 Follow-up pending. |
| #3 The TDC Executive Director should ensure the credibility of all reviews by including a place for the signature of the TDC Administration reviewer and the TDC Director on the checklists and requiring the checklists be signed and dated. | Status - September 2014 Completed. All Checklists are signed and dated by the reviewer and the TDC Director. |
| | Status - March 2014 In process. |
| | Status - September 2013 Follow-up pending. |
| #4 The TDC Executive Director should expand the use of the checklist included with the reimbursement requests to document the review of requests performed by TDC Administration. The checklist should include a place for results or comments from the review performed by TDC Administration. In addition, retaining the checklists in the Department would provide management with information that could be used to justify concerns with insufficient backup and improve the efficiency of the process by ensuring the reimbursement requests have sufficient backup before they are sent to Finance. | Status - September 2014 Completed. The Checklists used for reimbursement requests include a place for results/comments from the reviewer. The checklists are retained in the file at TDC Administration. |
| | Status - March 2014 In process. |

| Audit Report Number, Title and Recommendation(s) | Recommendation Status |
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| | Status - September 2013 Follow-up pending. |
| 14-01 Public Safety | |
| Victim Services | |
| Report issued March 2014 containing nine recommendations | |
| Follow-up scheduled for October 2014 | |
| #1 The Victim Services Division Director should strengthen | Status - September 2014 |
| existing controls to protect the inadvertent disclosure of sensitive | Follow-up pending. |
| client information. Consideration should be to the following | a |
| when distributing documents with client information: | Status - March 2014 |
| A. Documentation provided to external parties should be | Follow-up pending. |
| thoroughly reviewed to ensure sensitive and confidential victim (client) information is fully redacted prior to its release. | |
| B. A client ID should be utilized, when possible, in-lieu of | |
| the client's (victim) name on documentation and/ or records | |
| maintained and provided to parties outside of the Division (i.e. | |
| Clerk's Finance Section). | |
| C. Documentation provided to support reimbursement | |
| request from the Victims of Crime Emergency Support fund | |
| should be limited to what is necessary to substantiate the purpose | |
| of the expenditure. In addition, the County Attorney's Office | |
| should be consulted to assist in identifying with the Clerk's | |
| Finance Section the specific information needed to support | |
| reimbursement requests from this fund. | |
| D. Electronic mail containing sensitive and confidential | |
| victim (client) information should be tagged utilizing the | |
| Microsoft Outlook "confidential" message setting in order to alert ISS in the event of a public records request. | |
| #2 The Victim Services Division Director should ensure a client | Status - September 2014 |
| confidentiality agreement is signed and maintained for all | Follow-up pending. |
| individuals, contractors, and staff whom are given access to | Tonow up penuing. |
| sensitive and confidential client information in their roles. This | Status - March 2014 |
| includes assurances that a complete and most up-to-date version | Follow-up pending. |
| of the form is signed prior to access being given to client | |
| information. | |
| #3 The Department Director should ensure that receivables are | Status - September 2014 |
| recorded consistently, appropriately, and promptly. | Follow-up pending. |
| | C4-4 N/1 2014 |
| | Status - March 2014 |
| #4 The Department Director should ensure funds are drawn down | Follow-up pending. Status - September 2014 |
| from the grant on a timely basis. Consideration should be given | Follow-up pending. |
| to implementing request for payment quarterly to be congruent | Tonow-up penuing. |
| with the grantor's financial status reporting requirements. | Status - March 2014 |
| with the grantor's infancial status reporting requirements. | Diatus - Mai Cli 2017 |

| Audit Report Number, Title and Recommendation(s) | Recommendation Status |
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| | Follow-up pending. |
| #5 The Department Director should ensure the imprest checking account for the <i>Victims of Crime Emergency Support</i> fund is reconciled and that copies of reconciliations are forwarded to the | Status - September 2014 Follow-up pending. |
| OFMB Director in accordance with Countywide PPM CW-F-041. | Status - March 2014 Follow-up pending. |
| #6 The Division Director should ensure (1) the custodian on record for the imprest checking account for the <i>Victims of Crime Emergency Support</i> fund is the same individual who controls the security, records and disbursements of the fund; and (2) the | Status - September 2014 Follow-up pending. Status - March 2014 |
| checkbook (imprest fund) is maintained in a secure location in accordance with Countywide PPM CW-F-041. #7 The Division Director should reduce the balance maintained | Follow-up pending. |
| in the imprest checking account for the Victims of Crime Emergency Support fund to be in-line with the current need | Status - September 2014 Follow-up pending. |
| pursuant to Countywide PPM CW-F-041. | Status - March 2014 Follow-up pending. Status - September 2014 |
| #8 The Department Director should ensure the petty cash account for the <i>Victims of Crime Emergency Support</i> fund are reconciled, signed by the custodian's supervisor, and kept on file in the | Follow-up pending. |
| Department in accordance with the Countywide PPM CW-F-041. | Status - March 2014 Follow-up pending. |
| #9 The Division Director should ensure that the existing resolution is amended to reflect the adopted annual budget funding changes to the <i>Victim of Crime Emergency Support</i> fund. | Status - September 2014 Follow-up pending. |
| | Status - March 2014 Follow-up pending. |
| 14-02 Airports | |
| Operations & Maintenance Report issued March 2014 containing ten recommendations First follow-up September 2014 | |
| #1 The Division Director should develop and implement written policies and procedures for preventive maintenance work orders that include such things as: recording dates work orders are assigned and expected to be completed; requiring complete data be included on work orders for resources used to complete the | Status - September 2014 In process. The Division had developed a new PPM relating to the Preventive and Corrective |
| work orders; and monitoring open work orders to ensure timely completion. | Maintenance functions. Our review found that the new requirements as they relate to the implementation of this recommendation are in the process of being implemented. |

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| #2 The Division Director should develop and implement written policies and procedures for the preventive maintenance system that would include such things as: standard frequencies for required work; standard definitions of the type and level of work required for the work; and monitoring the status of preventive maintenance activities to ensure that appropriate actions are being taken as defined in the preventive maintenance system. | Status - March 2014 Follow-up pending. Status - September 2014 Completed. The Division has developed a PPM relating to the Preventive and Corrective Maintenance functions. Our review found that the new PPM address the issues identified in the audit report. A review of the processes and related documents found the PPM requirements are implemented and functional. |
| #3 The Division Director should develop and implement written policies and procedures for corrective maintenance work orders that include such things as: recording dates work orders are assigned and expected to be completed; requiring complete data be included on work orders for resources used to complete the work orders; and monitoring open work orders to ensure timely completion. | Status - March 2014 Follow-up pending. Status - September 2014 In process. The Division has developed a new PPM relating to the Preventive and Corrective Maintenance functions. Our review found that the new requirements as they relate to the implementation of this recommendation are in the process of being implemented. |
| #4 The Division Director should develop and implement written policies and procedures regarding the facility inspection program to ensure that recommendations are reviewed and prioritized in a timely manner, that plans to address the necessary corrective actions are implemented, and to monitor progress on the plan to ensure that all maintenance action items identified in the annual facility inspection reports are adequately addressed. | Status - March 2014 Follow-up pending. Status - September 2014 In process. The Division has developed a new PPM relating to the Preventive and Corrective Maintenance functions. No implementation was in place since no inspection program was done. Our review found that the new requirements as |

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| | they relate to the implementation of this recommendation are in the process of being implemented with the next inspection report. |
| #5 The Division Director should develop and implement written policies and procedures regarding monitoring stock levels to ensure that appropriate minimum stock levels are established to support maintenance needs, and that there are appropriate monitoring and reporting methods to support timely reordering of materials. | Status - March 2014 Follow-up pending. Status - September 2014 Completed. The Division has developed a new PPM relating to the Warehouse functions. Our review found that the new PPM addresses the issues identified in the audit report. A review of the processes and related documents found the PPM requirements are implemented and functional. |
| #6 The Division Director should develop and implement written policies and procedures regarding monitoring materials to ensure that items with limited shelf lives and items that have had little or no use for a certain period of time are identified and appropriate actions are taken. | Status - March 2014 Follow-up pending. Status - September 2014 In process. The Division has developed a new PPM relating to the Warehouse functions. Our review found that the new PPM addresses the issues identified in the audit report. However we found that the Division is in the process of implementing a process for the monitoring of these items. |
| #7 The Division Director should develop and implement written policies and procedures regarding conducting periodic cycle counts of warehouse. | Status - March 2014 Follow-up pending. Status - September 2014 Completed. The Division has developed a new PPM relating to the |

| Audit Report Number, Title and Recommendation(s) | Recommendation Status |
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| | Warehouse functions. Our review found that the new PPM addresses the issues identified in the audit report. A review of the processes and related documents found the PPM requirements are implemented and functional. |
| #8 The Division Director should develop and implement written policies and procedures regarding documentation of material receipt in the warehouse. | Status - March 2014 Follow-up pending. Status - September 2014 Completed. The Division has developed |
| receipt in the warehouse. | a new PPM relating to the Warehouse functions. Our review found that the new PPM addresses the issues identified in the audit report. A review of the processes and related documents found the PPM requirements are implemented and functional. |
| | Status - March 2014 Follow-up pending. |
| #9 The Division Director should review the warehouse and procurement function and take action to ensure there is either an appropriate segregation of duties between the ordering, receiving, stocking and issuing personnel, or appropriate supervisory oversight of those critical activities. | Status - September 2014 Completed. The Division has implemented actions relating to the receiving and procurement functions to make them segregated. Our review found that the new organization structure addresses the issues identified in the audit report. A review of the processes and related documents showed this recommendation to be implemented and functional. |

| Audit Report Number, Title and Recommendation(s) | Recommendation Status |
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| | Status - March 2014 Follow-up pending. |
| #10 The Division Director should develop and implement written policies and procedures regarding 'Z' tag assets assigned to the Division to ensure these assets are controlled and accounted for. These policies and procedures should include such things as: an accurate perpetual inventory listing of all asset items held at each location; a signed acceptance of all inventory by asset custodians; accurate backup documentation for lost, missing or surplus items; and an annual reconciliation of items to inventory listing. | Status - September 2014 In process. Our review found that the Division is in the process of developing a PPM relating to the 'Z' tag items, similar to the Fixed Asset PPM, which when implemented will address the audit concerns reflected in the audit finding. Status - March 2014 |
| | Follow-up pending. |
| 14-03 Office of Financial Management and Budget Jupiter Impact Fees Report issued March 2014 containing one recommendation | |
| #1 The Impact Fee Coordinator's Office should impose the late fees specified in Article 13 for those deposits which were not timely made as defined by Article 13. | Status - September 2014 Completed. The Impact Fee Office collected the imposed late fees from the Town of Jupiter on March 6, 2014. |
| | Status - March 2014 Follow-up pending. |
| 14-04 Palm Tran | |
| Report issued March 2014 containing five recommendations First follow-up scheduled for May 2014 | |
| #1 The Palm Tran Executive Director should consult with the County Attorney's Office and determine appropriate action to be taken to bring both vendors into compliance with the contracts' ADA and FDOT provisions. | Status - September 2014 Completed. Palm Tran consulted with the County Attorney and followed appropriate actions. Documentation and certification were received for all shelters. |

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| | Status - March 2014 Follow-up pending. |
| #2 The Palm Tran Executive Director should incorporate a date stamping requirement into both policies regarding payment processing for the bench and shelter contracts. | Status - September 2014 Completed. A PPM was issued February 28, 2014 addressing the procedure requirement for date stamping regarding payment processing for the bench and shelter contract. |
| #3 The Palm Tran Executive Director should collect the outstanding late payment penalties from the vendors. | Status - March 2014 Follow-up pending. Status - September 2014 Completed. We verified that Palm Tran had collected \$182.30 outstanding late payment penalties from COA. |
| | Status - March 2014 Follow-up pending. |
| #4 The Palm Tran Executive Director should ensure that staff implements the time frame requirements of the contracts exactly as specified in the contracts. | Status - September 2014 Completed. Copies of checks received from vendors and reports from vendors were examined to ensure staff implemented time frame requirements specified in the contract. |
| | Status - March 2014 Follow-up pending. |
| #5 The Palm Tran Executive Director should consult with the County Attorney's Office to determine appropriate action to be taken relative to the practice of allowing the vendors to pay municipalities directly for benches and shelters located in municipalities covered by interlocal agreements. | Status - September 2014 Completed. In an e-mail to the Internal Auditor from the acting Palm Tran Director on September 5, 2014 we were informed that Palm Tran has decided it is not cost effective to spend the time to amend the contract. |

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| | Status - March 2014 Follow-up pending. |
| 14-05 Parks and Recreation | |
| Aquatics Division | |
| Report issued June 2014 containing four recommendations Follow-up scheduled for January 2015 | |
| #1 The Parks and Recreation Department Director should modify departmental PPM PRO-J03 to include controls needed to prevent opportunities for abuse including, cursory reviews by Facility Management of voided transactions for detection of irregularities or excessive voids, of the condition(reason) | Status - September 2014 Implementation Pending. Implementation scheduled for December 2014; follow- up scheduled for January 2015. |
| under which the transaction was voided to ensure the proper process was followed, and requiring a customer's signature on voided cash transactions as a compensating control when the onduty manager is unavailable. In addition, voided transactions should be monitored by documenting these transactions to help detect patterns of abuse or excess use of voids. | Status - June 2014 Follow-up pending. |
| #2 The Parks and Recreation Department Director should ensure that a separate cash drawer is provided to each cashier in order to avoid sharing of cash drawers and that each cashier has been instructed on their responsibility for the security of the cash that has been assigned to them as defined in PPM CW-F-041. | Status - September 2014 Implementation Pending. Implementation scheduled for December 2014; follow- up scheduled for January 2015. |
| | Status - June 2014 Follow-up pending. |
| #3 The Parks and Recreation Department Director should modify departmental PPM DOF-005 to include a cursory review by Facility Management of the checks accepted for payment to ensure all the requirements for accepting a check have been met. | Status - September 2014 Implementation Pending. Implementation scheduled for December 2014; follow- up scheduled for January 2015. |
| | Status - June 2014 Follow-up pending. |
| #4 The Parks and Recreation Department Director should ensure the Facility Managers are maintaining the Log Sheets as required by PPM PRF-J03. In addition, all Log Sheets should be submitted to the Waterpark Coordinator for monthly review. | Status - September 2014 Implementation Pending. Implementation scheduled for December 2014; follow- up scheduled for January 2015. |

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| | Status - June 2014 Follow-up pending. |
| 14-08 Department of Economic Sustainability CIREIS | |
| Report issued June 2014 containing four recommendations Follow-up scheduled for September 2015 | |
| #1 The DES Director and the CIREIS Section Manager should ensure formal monitoring reviews are conducted in accordance with Departmental monitoring handbooks (NSP, DRI). | Status - September 2014 Implementation Pending. Implementation scheduled for August 2015; follow-up scheduled for September 2015. Status - June 2014 Follow-up pending. |
| #2 The DES Director and the CIREIS Section Manager should consider conducting annual monitoring reviews of CDBG subrecipients; and officially adopting or developing a monitoring handbook to address formal monitoring of CDBG sub-recipients. | Status - September 2014 Implementation Pending. Implementation scheduled for August 2015; follow-up scheduled for September 2015. Status - June 2014 Follow-up pending. |
| #3 The CIREIS Manager should ensure sub-recipient project files are documented to substantiate DES compliance with Federal regulations, grant requirements, and sub-recipient adherence to its agreements with the County. | Status - September 2014 Implementation Pending. Implementation scheduled for August 2015; follow-up scheduled for September 2015. Status - June 2014 |
| #4 The CIREIS Manager should ensure procedures to address the CIREIS Section's construction administration and contract oversight are in writing. | Status - June 2014 Follow-up pending. Status - September 2014 Implementation Pending. Implementation scheduled for August 2015; follow-up scheduled for September 2015. |
| | Status - June 2014 Follow-up pending. |

| Audit Report Number, Title and Recommendation(s) | Recommendation Status |
|--|---|
| 14-09 Department of Airports Jet Aviation | |
| Report issued June 2014 containing one recommendation Follow-up scheduled for January 2015 | |
| #1 The DOA Director should formally notify the FBOs of the approved rates annually. | Status - September 2014 Implementation Pending. Implementation scheduled for December 2014; follow- up scheduled for January 2015. |
| | Status - June 2014 Follow-up pending. |
| 14-12 Facilities Development and Operations Facilities Management | |
| Report issued September 2014 containing three recommendations Follow-up scheduled for April 2015 | |
| #1 The Division Director should take actions to ensure the accurate recording of labor and material resources used for the work order functions. | Status - September 2014 Implementation Pending. Implementation scheduled for March 2015; follow-up scheduled for April 2015. |
| | Status - June 2014 Follow-up pending. |
| #2 The Division Director should design and implement inventory management controls and policies addressing the issues addressed in the finding above that comply with Countywide PPM CW-F-059. | Status - September 2014 Implementation Pending. Implementation scheduled for March 2015; follow-up scheduled for April 2015. |
| | Status - June 2014 Follow-up pending. |
| #3 The Facilities Management Division Director should ensure that all tools/specialized equipment assigned to the Division are controlled and accounted for. | Status - September 2014 Implementation Pending. Implementation scheduled for March 2015; follow-up scheduled for April 2015. |
| | Status - June 2014 Follow-up pending. |