

ANNUAL INTERNAL AUDIT REPORT

FOR FISCAL YEAR ENDED AUGUST 31, 2024

OFFICE OF

Audit Services



October 31, 2025

Carine M. Feyten, Ph.D., Chancellor and President, Members of the Board of Regents

We are pleased to submit the annual report of the Office of Audit Services for the fiscal year ended August 31, 2025. This report is required by the Texas Internal Auditing Act and provides information on the assurance services, consulting services, and other activities of the internal audit function.

If you have any questions about the contents of this report, please do not hesitate to contact me.

Sharon Delgado, CIA, CFE Sharon Debpolo Chief Audit Executive

Report Distribution:

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PURPOSE

The purpose of this annual report is to provide information on the assurance services, consulting services, and other activities of the internal audit function. In addition, the annual internal audit report assists oversight agencies in their planning and coordination efforts.

The <u>Texas Internal Auditing Act</u>, Texas Government Code, Chapter 2102, requires that an annual report on internal audit activity be filed by November 1st of each year and submitted to the Governor, the Legislative Budget Board, the Sunset Advisory Commission, the State Auditor's Office, and the entities' governing boards and chief executives. The State Auditor's Office prescribes the form and content of the report.

The annual report was prepared using the guidelines provided by the Texas State Auditor's Office. Additional information regarding the Texas Woman's University (TWU) Office of Audit Services can be found at the following website: www.twu.edu/audit-services.

I. COMPLIANCE WITH TEXAS GOVERNMENT CODE, SECTION 2102.015

In accordance with Texas Government Code, Section 2102.015, the following information is posted on the TWU Audit Services' website www.twu.edu/audit-services.

- The approved Fiscal Year 2025 Audit Plan, as provided by Texas Government Code, Section 2102.008, and
- The Fiscal Year 2024 Internal Audit Annual Report, as required by Texas Government Code, Section 2102.009.

II. INTERNAL AUDIT PLAN FOR FY 2024

24-02	Grant Management	Carry Forward	
24-05	PCI Audit	Completed	7/25/2024
24-06	General IT Controls	Completed	8/8/2024
24-07	Contract Administration	Completed	7/31/2024
24-08	Bursar	Carry Forward	
24-01	JAMP	Completed	10/31/2023
24-04	Investment Audit	Completed	1/4/2024
24-09	THECB Facilities Audit	Completed	8/31/2024
24-10	Purchasing Compliance	Completed	8/12/2024

Figure 1 Fiscal Year 2024 Audit Plan

INTERNAL AUDIT PLAN FOR FY 2024 – Continued

Reserve and Investigations	As Requested.
Annual Internal Audit Report	
Board of Regents Meetings	
Executive Management and Leadership of the	
Department	
FY25 Audit Plan	
Staff Meetings	
Reporting and Requests for Information	
Website Maintenance	
Internal Quality Assurance and Improvement Program	
Peer Review	
СРЕ	
 Participation in Professional Organizations	
Participation on University Committees	

Figure 2 Fiscal Year 2024 Audit Plan - Continued

Texas Education Code (TEC) Section 51.9337(h)

The Purchasing Compliance Audit (Report 22-06) was completed on August 12, 2024. The audit is required by the Texas Education Code, Section 51.9337(h).

Texas Government Code (TGC), Section 2102.015

TGC Section 2102.015, requires entities to include the following on their website:

- A "detailed summary of the weaknesses, deficiencies, wrongdoings, or other concerns, if any, raised by the audit plan or annual report."
- A "summary of the action taken by the agency to address the concerns, if any, that are raised by the audit plan or annual report."

Office of Audit Services

To address these requirements, an entity can summarize fiscal year 2024 internal audit recommendations and report on its action and progress toward implementing those recommendations. The following represents the status of implementation of the FY 2024 audit recommendations, as well as any outstanding prior audit recommendations from previous fiscal years.

Report					
Numb	Report Date	Title	Recommendation	Status	Responsible Area
20-08	April 29, 2021	Network Firewall	Enhance Configurations	Incomplete/Ongoing	Information Technology
20-08	April 29, 2021	Network Firewall	Enhance Policies and Procedures	Incomplete/Ongoing	Information Technology
21-03	July 8, 2021	TAC 202 Compliance	Enhance Logical Security Processes	Incomplete/Ongoing	Information Technology
22-01	December 3, 2021	Safety and Security	Develop Annexes to Support the Comprehensive Emergency Management Plan (CEMP)	Implemented	Finance & Administration
22-01	December 3, 2021	Safety and Security	Review, Update and Approve the CEMP and Annexes	Implemented	Finance & Administration
22-01	December 3, 2021	Safety and Security	Consistently Perform and Document Drills	Implemented	Finance & Administration
22-01	December 3, 2021	Safety and Security	Complete and Monitor Training	Implemented	Finance & Administration
22-01	December 3, 2021	Safety and Security	Update the CEMP for Coordination Measures and Audit Requirements	Implemented	Finance & Administration
22-03	March 11, 2022	College of Business	Perform Account Reconciliations	Implemented	Academic Affairs
22-03	March 11, 2022	College of Business	Monitor Completion of Training	Implemented	Academic Affairs
22-03	March 11, 2022	College of Business	Enhance Conflicts of Interest Reporting	Implemented	Academic Affairs
22-03	March 11, 2022	College of Business	Enhance Asset Procedures	Implemented	Academic Affairs
22-03	March 11, 2022	College of Business	Perform User Access Reviews	Implemented	Academic Affairs
22-04	March 3, 2022	Information Technology Change Management	Enhance Separation of Duties	Implemented	Information Technology
22-04	March 3, 2022	Information Technology Change Management	Enhance Change Management Documentation	Implemented	Information Technology
22-04	March 3, 2022	Information Technology Change Management	Implement Change Management Metrics	Implemented	Information Technology
22-04	March 3, 2022	Information Technology Change Management	Review and Update the Charter and Related Procedures	Implemented	Information Technology
22-04	March 3, 2022	Information Technology Change Management	Implement Detective Controls	Management Accepts Risk	Information Technology
23-02	August 3, 2023	Pcard Program Audit	Update the Procurement Card Manual.	Implemented	Finance & Administration
23-02	August 3, 2023	Pcard Program Audit	Enhance Monitoring of Pcard Holders	Implemented	Finance & Administration
23-02	August 3, 2023	Pcard Program Audit	Strengthen Monitoring of Pcard Transactions and Enforce Pcard Policies and Procedures.	Implemented	Finance & Administration
23-03	September 11, 2023	Purchasing Compliance	Monitor annual completion of ethics training and the Non-Disclosure and Conflict of Interest forms.	Implemented	Finance & Administration
24-07	July 31, 2024	Contract Administration	Update URP 04.310 Independent Contractor and the Requisition for Individual Services form.	Not Started	Finance & Administration
24-07	July 31, 2024	Contract Administration	Require supplier qualification support.	Not Started	Finance & Administration
24-07	July 31, 2024	Contract Administration	Classify individual suppliers prior to contract processing.	Not Started	Finance & Administration
24-05	July 25, 2024	PCI Comliance	Formalize Procedures for PCI Process Exceptions	Not Started	Finance & Administration
24-05	July 25, 2024	PCI Comliance	Centralized Payments Environment Training	Not Started	Finance & Administration
24-05	July 25, 2024	PCI Comliance	Office and Departmental PCI Procedures	Not Started	Finance & Administration
24-05	July 25, 2024	PCI Comliance	PCI Vendor Monitoring Process	Not Started	Finance & Administration
24-06	August 8, 2024	General IT Controls	Restrict Unauthorized Personal Devices from the VPN	Not Started	Finance & Administration
24-06	August 8, 2024	General IT Controls	Encrypt Data at Rest	Not Started	Finance & Administration
24-06	August 8, 2024	General IT Controls	Establish Data Classification and Governance	Not Started	Finance & Administration
24-06	August 8, 2024	General IT Controls	Enhance Online Content Filtering	Not Started	Finance & Administration
24-06	August 8, 2024	General IT Controls	Review Remote Acces User Listings	Not Started	Finance & Administration
24-06	August 8, 2024	General IT Controls	Limit Access to Server Rooms	Not Started	Finance & Administration
24-06	August 8, 2024	General IT Controls	Secure Generator Panels After Inspections	Not Started	Finance & Administration

Figure 3 FY 2024 Recommendation Status

III. CONSULTING SERVICES AND NON-AUDIT SERVICES COMPLETED

No consulting services were completed in FY 2024, as defined in the Institute of Internal Auditors' International (IIA) Standards for the Professional Practice of Internal Auditing. Consulting services are advisory in nature and are generally performed at the specific request of an engagement client. The Office of Audit Services did not perform any non-audit services, as defined in the Generally Accepted Government Auditing Standards (GAGAS) during FY 2024.

IV. EXTERNAL QUALITY ASSURANCE REVIEW (PEER REVIEW)



August 27, 2021

TO: Ms. Kathleen Wu, Board of Regents Chair and Presiding Officer

Ms. Stacie D. McDavid, Board of Regents Finance and Audit Committee Chair, Vice Chair and

Assistant Presiding Officer

Dr. Carine M. Feyten, Ph.D., Chancellor and President

Texas Woman's University P.O. Box 425587 Denton, TX 76204

Ms. Wu, Ms. McDavid and Dr. Feyten:

We have completed the quality assurance review (QAR) of the internal audit function at Texas Woman's University (TWU) which is required by the Texas Internal Auditing Act, the Institute of Internal Auditor's (IIA) International Professional Practice Framework (IPPF), and the U.S. Government Accountability Office's Generally Accepted Government Auditing Standards (GAGAS). For the purposes of this review, we collectively refer to these as the Standards.

We conducted an independent validation of the assertions and conclusions made in the QAR Self-Assessment Report issued by Ms. Shannon South, Director of Audit Services, on January 28, 2021. We conducted the validation using the State Agency Internal Audit Forum Peer Review Guidelines and the Master Peer Review Program as guidance. The review included internal audit activities for the period December 1, 2017 through June 30, 2020. We reviewed the QAR Self-Assessment Report, reviewed supporting documentation, and interviewed audit staff, TWU leadership, and TWU Board of Regents representatives.

The rating system used for expressing an opinion for this review provides a scale of three ratings, "generally conforms," "partially conforms," and "does not conform." "Generally conforms" is the top rating and means that an internal audit activity has a charter, policies, and processes that are judged to be in conformance with the Standards. "Partially conforms" means deficiencies in practice are noted that are judged to deviate from the Standards, but these deficiencies did not preclude the internal audit activity from performing its responsibilities in an acceptable manner. "Does not conform" means deficiencies are judged to be so significant as to seriously impair or preclude the internal audit activity from performing adequately in all or in significant areas of its responsibilities.

Based on our independent validation of the QAR performed by Ms. South, we agree with the overall conclusion that the internal audit function "Generally Conforms" with the Standards, with specific conformance noted in the following chart.

OFFICE OF AUDIT AND CONSULTING SERVICES

The University of Texas at Arlington Box 19112 Student & Administration Bldg. 841 W. Mitchell St. Arlington, TX 76013 T 817-272-0150 F 817-272-5359 www.uta.edu/internalaudit

Standard Type and Description	Opinion
Texas Internal Auditing Act	Generally Conforms
Generally Accepted Government Auditing Standards	Generally Conforms
ILA's Code of Ethics	Generally Conforms
IPPF's Attribute Standards	
1000 - Purpose, Authority, and Responsibility	Generally Conforms
1100 - Independence and Objectivity	Generally Conforms
1200 - Proficiency and Due Professional Care	Generally Conforms
1300 - Quality Assurance and Improvement Program	Partially Conforms
IPPF's Performance Standards	
2000 - Managing the Internal Audit Activity	Generally Conforms
2100 - Nature of Work	Generally Conforms
2200 - Engagement Planning	Generally Conforms
2300 - Performing the Engagement	Generally Conforms
2400 - Communicating the Results	Generally Conforms
2500 - Monitoring Progress	Generally Conforms
2600 - Communicating the Acceptance of Risks	Generally Conforms

We agree with the goals set by the Office of Audit Services as stated in the QAR Self-Assessment Report.

In addition, the following are recommendations for you and the Office of Audit Services' consideration:

- Perform an annual Quality Assurance and Improvement review. Due to the recent changes in audit leadership, this was not consistently performed.
- 2) Continue strategic efforts to maintaining audit department director and staff consistency. Perform an annual review of audit department staffing (e.g. Compensation, staffing levels, staff certification and experience requirements and organization should be reviewed annually for entire team by Director of Audit Services with a summary provided to the Finance & Audit Committee. Director of Audit Services compensation package should be reviewed by Human Resources on a regular basis (1-3 years).
- Provide formal 1:1 Finance & Audit Committee training for all new members related to their internal audit responsibilities.
- Continue developing audit department strategic readiness for the shift to a System environment.
- Consider adding the Director of Audit Services to the Cabinet.
- Consider elevating the Director of Audit Services position to Chief Audit Executive.

We appreciate the assistance provided to us during this review by the Board of Regents, the Chancellor and President, TWU leadership, and the Office of Audit Services.

Sincerely,

David Price, CPA, CIA Chief Audit Executive

The University of Texas at Arlington

Justin McAninch, MBA, CIA, CFE

Audit Manager

The University of Texas Health Science Center at Tyler

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V. INTERNAL AUDIT PLAN FOR FY 2025

The FY 2025 Internal Audit Plan was approved by the TWU Board of Regents on August 9, 2024. The FY 2025 Internal Audit Plan was submitted to the State Auditor's Office and posted on the TWU website. Quarterly updates provided to the Finance and Audit Committee can be obtained by reviewing Reports of the Office of Audit Services from the <u>Board of Regents</u> meeting agendas.

The Fiscal Year 2025 audit plan was prepared using a risk-based approach as required by the Texas Internal Auditing Act (Government Code 2102). The plan was prepared by identifying auditable areas of the University, and performing a self-assessment of risks that affect the significant processes.

As part of the assessment, we formed a risk assessment team with key individuals from across the university. The team was responsible for:

- Developing a risk rating scale (Figure 3)
- Identifying key risk categories and developing customized definitions for them (See Figure 4), and
- Categorizing the key processes and activities for the university (this included operational, financial, administrative, and strategic processes).

Somewhat Likely (>10%-<40% Chance)	Somowhat Likely />10% <40%		Р	A risk ranking of " low" or "below average" for any specific area indicates an event with a somewhat likely probability of occurrence.
	Below Avg.	1	A risk ranking of "low" or "below average" for any specific area also indicates an event, which if to occur, would have a slightly moderate implact on assets and strategic Objectives, would gradually impact the organization, and that intermittently	
2 Likely (>40%<70% Chance)		ı	A risk ranking of "moderate" for any specific area indicates an event with an average probability of occurrence.	
	,	Moderate	erate P	A risk ranking of "moderate" for any specific area also indicates an event, which if to occur, would have a noticeable , and possibly material , impact on assets and strategic objectives and would quickly impact the organization.
		Above Avg.	-	A risk ranking of "above average" for any specific area indicates an event that is probable and/or likely to occur.
3 Probable (>70%-<90% Chance)	Р		A risk ranking of "above average" for any specific area also indicates and event, which if to occur, would have a material impact on assets and strategic objectives, regularly exists in normal operations, and would rapidly impact the organization.	
			Р	A risk ranking of "high" for any specific area indicates an event with a very likely probability of occurrence.
4 High Probable (>90% Chance	High Probable (>90% Chance)	High Probable (>90% Chance) High	I	A risk ranking of "high" for any specific area also indicates an event, which if to occur, would have a significant material impact on assets and strategic objectives, an ongoing duration of existence, and would immediately impact the organization.

Figure 4 Risk Rating Scale

We held a risk assignment meeting with select individuals across campus. During this meeting, risk ratings were assigned to the significant processes identified by the risk assessment team. The meeting resulted in the creation of an audit universe ranked by risk which was then used to develop a three-year audit plan (FY 2024, FY 2025, and FY2026) with priority given to high-risk areas.

The risk-ranked audit universe will be reviewed each fiscal year and based on the operating conditions present at the time of the assessment.

The risk categories utilized during the risk assessment process included:

- Information Technology
- Student Relations
- Reputational
- Governance
- Operation and Regulatory Compliance

Risk Category	Risk Definition	Risk Considerations
Financial Stability and	The risk that TWU's financial resources will not be adquate to meet the	Availability of Capital
Fraud Risk	obligations of the University. This includes the risk that TWU will fail to	Budgeting and Planning
	adquately forecast and plan to achieve necessary cash flow and operating margins, manage liquidity, and accurately report financial results. The risk that	Cash Management
	changes in outisde economic factors and changes in vendors, structure, and	Disposable Income Factors
	factors outside of TWU's control result in TWU's funding not covering	Consumer Debt Levels
	operating costs.	Investment Strategy Alignment
		Deceit and Concealment of Fraud
Operational, Regulatory	The risk that TWU's daily processes are not effectively designed to adquately	Expansion of Services
and Compliance Risk	process transactions timely, efficiently, and prevent/detect errors or fraudulent	Outsourcing or Co-Sourcing
	activity. This indicates the function of identifying and directing the needs of stakeholders to ensure adequate response and prioritization, specifically	Member Service
	including the ability to execute startegic goals that could be impaired by	Scalability
	regulatory action and changes beyond TWU's control.	Technology Advancements
		Relationships with Outside Parties
Student Relations Risk	The risk that the internal operations within TWU do not adquately identify and provide for the educational and career needs of its students. This includes student interactions with TWU employees, ongoing student needs, and	Student Morale
		Customer Service
	assessments of student outcomes and success.	Degree and Post-Graduate Programs
		Student Retention and Completion
Information Technology	The risk that TWU's IT strategy is not aligned with the business model to	Technology Reliance
Risk	embrace and rely on technology. This includes the risk that TWU is highly reliant on technology to execute startegic operations, that IT infratstructure	Information Security
	and systems are not consistently available and reliable, and that TWU does	Data Integrity
	not evolve with the changing cybersecurity environment.	Deployment of Online Learning
		Application Deployment
		Reliance on Third Parties
Reputational Risk	The risk of TWU having a tarnished image, poor public opinion and/or	Data Privacy
	reduced employee commitment caused by an event in the marketplace. This includes actual situations, future and historical events generating true and	Customer Relations
	false impressions, or misunderstandings of internal and external stakeholders.	Internal and External Communications
		Social Media
		Competition

Figure 5 Risk Categories

The risk-rated audit universe was calculated by weighting the risk factors on the basis of inherent risk. Inherent risk is the risk related to a process without any consideration for control activities.

The Office of Audit Services has posted the 2025 Audit Plan on the departmental website at www.twu.edu/audit-services.

Risk areas ranked as "high" but not scheduled to be audited during fiscal year 2025 are:

- Admissions
- Database Administration/ERP
- Advising
- Application Selection/Development
- Online Learning
- Human Resource Administration
- Financial Aid
- Accreditation Standards

The following items were considered as part of the risk assessment:

- Title I, Texas Administrative Code, Chapter 202 (Information Security Standards),
- · Benefits proportionality, and
- Compliance with processes and controls according to TGC §2102.005(b) and TEC §51.9337(h).

General IT Controls Phase II	30	Review of IT internal controls
Tuition and Fees Revenue	250	Ensure tuition and fees are properly assessed
Payroll	125	Review accuracy and completeness of payroll cycle processing
Budget and Planning	125	Review Budgeting process as it relates to payroll expenditures.
FERPA	310	Ensure compliance with the Family Educational Rights and Privacy Act (FERPA)
Carry Forward Audits		
Bursar - carryforward	165	Review of internal controls
Purchasing Compliance	75	Required annual audit.
Investments Review	250	Required annual audit.
Safety and Security	300	Review compliance with Texas Education Code (TEC) 51.217
Reserve and Investigations	300	As Requested.

Figure 6 Fiscal Year 2025 Audit Plan

Annual Internal Audit Report	50	Required report of Internal Audit Activity - Texas Internal Auditing Act.
Board of Regents Meetings	150	Preparation and presentation of materials for BOR Meetings
Executive Management and Leadership of the IA Department	120	Includes hiring, development, budgeting, performance appraisals, administrative duties, leadership, promoting the internal audit
-Y26 Audit Plan	125	Development of the FY26 risk assessment and audit plan
Staff Meetings	50	Staff meetings
Reporting and Requests for Information	50	Requests for information and reporting to SAO other external organizations.
Website Maintenance	10	Updating and maintaining website
nternal Quality Assurance and mprovement Program	75	Reviewing and updating internal processes
Peer Review	75	Assistance and meetings with Peer Review Team
CPE	200	Based on two full-time auditors
Participation in Professional Organizations	30	Participation as members and board members of IIA and ACFE.
Participation on University Committees	100	Includes Cabinet Meetings, Executive Policy Committee and ERM
General Administration	450	
Holidays	224	Based on 14 holidays
/acation & Sick Leave	320	Based on vacation and sick leave accruals

Figure 7 Fiscal Year 2025 Audit Plan - Continued

VI. EXTERNAL AUDIT SERVICES PROCURED IN FY2024

The following external audit services, including financial and performance audits and attestation engagements, reviews, and agreed-upon procedures, were procured during FY2024.

External Auditor	Services Provided
Weaver and Tidwell, L.L.P	Grants Management Audit
Forvis Mazars, LLP.	General IT Controls Audit
Weaver and Tidwell, L.L.P	PCI Audit

VII. REPORTING SUSPECTED FRAUD AND ABUSE

The General Appropriations Act (88th Legislature), Section 7.09 Fraud Reporting

Actions taken to implement the requirements of Section 7.09, Fraud Reporting, General Appropriations Act (88th Legislature Conference Committee Report) are noted below:

- TWU has placed a link on the TWU homepage that states "Report Fraud, Waste, or Abuse". The <u>link</u> on the TWU homepage takes a user directly to the State Auditor's Office webpage for reporting fraud, waste, and abuse.
- TWU has also incorporated into its University Regulation and Procedure (<u>URP: 01.215</u>)
 "Fraud and Fraudulent Activities" policy information on how to report suspected fraud involving state funds to the State Auditor's Office. This information includes a <u>link</u> to the State Auditor's Office website.

Texas Government Code §321.022 Coordination of Investigations

- a) If the administrative head of a department or entity that is subject to audit by the state auditor has reasonable cause to believe that money received from the state by the department or entity or by a client or contractor of the department or entity may have been lost, misappropriated, or misused, or that other fraudulent or unlawful conduct has occurred in relation to the operation of the department or entity, the administrative head shall report the reason and basis for the belief to the state auditor. The state auditor may investigate the report or may monitor any investigation conducted by the department or entity.
- b) The state auditor, in consultation with state agencies and institutions, shall prescribe the form, content, and timing of a report required by this section.
- c) All records of a communication by or to the state auditor relating to a report to the state auditor under Subsection (a) are audit working papers of the state auditor.

If a situation were to occur where this code is applicable, Texas Woman's University would report such activities to the State Auditor's Office through its webpage for reporting fraud, waste, and abuse.