Performance Based Funding
Data Integrity Audit

Florida Gulf Coast University

December 8, 2015
Carol Slade, Director, Internal Audit
Executive Summary

At the direction of the Florida Board of Governors (BOG), audit procedures were performed to determine whether Florida Gulf Coast University (University) has effective internal controls, processes and procedures in operation to ensure the completeness, accuracy, and timeliness of the data submissions to the BOG which support the University’s Performance Funding Metrics. Certain procedures were applied to the data submitted during the period October 1, 2014 through September 30, 2015. The procedures were established jointly by the State University Internal Audit leaders so that all universities would address in a similar manner the audit guidelines provided by the BOG.

Specifically, responsible management and other personnel were interviewed, detailed narratives related to data compilation and submission were reviewed, and various samples of data reported to the BOG were verified. These procedures were performed by Mauldin & Jenkins, an independent audit firm, as an Agreed Upon Procedures Engagement. The Mauldin & Jenkins report, which appears as Appendix A to this report, is intended solely for the information and use of Florida Gulf Coast University.

It is the University’s responsibility to conclude on the completeness, accuracy, and timeliness of the data submissions based upon the procedures applied. The University was involved in the development of the appropriate audit procedures to be applied and the implementation of the agreed upon procedures. Internal Audit personnel acted as liaison between the Mauldin & Jenkins auditors and University management and staff. Our responsibilities included ensuring that accurate information was provided by University personnel to Mauldin & Jenkins and that any initial anomalies during testing were appropriately resolved.

*Our audit, including the Agreed Upon Procedures Engagement, was conducted in accordance with the Institute of Internal Auditors International Standards for the Professional Practice of Internal Auditing.*

Background

The Florida Board of Governors (BOG) has broad governance responsibilities that affect administrative and budgetary matters for Florida’s 12 public universities. Beginning in fiscal year 2013 – 2014, the BOG instituted a performance funding program which is based on 10 performance metrics used to evaluate the institutions on a range of issues including percentage of bachelor’s graduates employed and/or continuing their education further one year after graduation, average cost per undergraduate degree to institution, and bachelor degrees in strategic emphasis (including STEM), among other metrics. According to information published by the BOG in May 2014, the following are key components of the funding model:

- Institutions will be evaluated on either Excellence or Improvement for each metric.
- Data is based on one-year data.
The benchmarks for Excellence were based on the Board of Governors 2025 System Strategic Plan goals and analysis of relevant data trends, whereas the benchmarks for Improvement were determined after reviewing data trends for each metric.

The Florida Legislature has approved $400 million in new funding for performance funding: $250 million would come from each university's recurring state base appropriation and another $150 million from other system initiatives.

**Key Observations**

1. Two data submission files were not submitted by the required due dates.

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2. Two pieces of data were incorrectly reported in the Spring 2015 Student Instruction file (SIF). Two students did not obtain a higher education degree before coming to FGCU; therefore, the "Metric #01411" data field should have been blank.

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<tr>
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<th>PIDM</th>
<th>Demo Time Frame &amp; Data Source</th>
<th>Degree Highest Held</th>
<th>Data Reported in Metric #01411 Institution Granting Highest Degree</th>
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<td>498917</td>
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</tr>
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</table>

*Neither of these observations affected the overall integrity of the data submissions.*

**Corrective Management Action Plan**

1. To ensure that future data submissions to the BOG are timely, University data stakeholders affected by new software will participate in the project implementation committee in order to disclose their data needs and to take timely action to implement successfully. Action by management will strengthen data submission process documentation to ease future implementations.

2. There was a data review of “schools attended” on admissions applications. These data elements have been corrected for future submissions.
Corrective actions have been implemented by University management. As required by the FGCU Board of Trustees and by the BOG, compliance with the corrective action plans will be reviewed as part of Internal Audit’s work plan.

Conclusion

In my opinion, based upon the work performed, the internal controls, processes and procedures Florida Gulf Coast University has in place to ensure the completeness, accuracy, and timeliness of data submissions to the BOG that affect performance based funding metrics are operating effectively.

Audit Report Prepared by Carol Slade, CIA, CPA, CGFM, Director, Internal Audit
APPENDIX A
FLORIDA GULF COAST UNIVERSITY
INDEPENDENT ACCOUNTANT’S REPORT
ON APPLYING
AGREED-UPON PROCEDURES

DECEMBER 3, 2015
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<tr>
<td>Attachment 1</td>
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</tbody>
</table>
INDEPENDENT ACCOUNTANT'S REPORT ON APPLYING AGREED-UPON PROCEDURES

Wilson G. Bradshaw, Ph. D.
Florida Gulf Coast University
Fort Myers, Florida 33965-6565

We have performed the procedures enumerated below, which were agreed to by the Board of Trustees of Florida Gulf Coast University (the “University”), solely to assist the University in determining whether the University has processes established to ensure the completeness, accuracy and timeliness of data submissions to the Board of Governors (BOG) which support the Performance Funding Metrics of the University as of September 30, 2015. The University is responsible for all processes and procedures for the complete, accurate and timely submission of data to the BOG. This agreed-upon procedures engagement was performed in accordance with attestation standards established by the American Institute of Certified Public Accountants. The sufficiency of these procedures is solely the responsibility of the parties specified in this report. Consequently, we make no representation regarding the sufficiency of the procedures described below either for the purpose for which this report has been requested or for any other purpose.

Our procedures and findings are as follows:

We reviewed all of the BOG submissions relating to the Performance Funding Metrics identified and published by the State University System of Florida specific to the certification. See Attachment I for a listing of the submissions tested as provided by the University to us.

a) Verify the appointment of the Data Administrator by the University President and that duties related to these responsibilities are incorporated into the Data Administrator’s official position description.

1. Review the Data Administrator’s position description; note details of the description, paying special attention to responsibilities related to coordinating the gathering of data from departmental sources, quality assurance procedures applied and other data integrity checks prior to submission to the BOG.
2. Determine if the Data Administrator was appointed by the President.
3. Conclude on whether the Institutional Data Administrator’s responsibilities include the requirements identified in BOG Regulation 3.007, SUS Management Information System. (For example, verify the Data Administrator’s data submission statements indicated, “I certify that this file/data represents the position of this University for the term being reported.”).
Procedures Performed

- Reviewed the Position Description for the Director of Institutional Research and Analysis dated October 20, 2015. Verified description included the requirements identified in the BOG Regulation 3.007.
- Reviewed the original appointment for the Director of Institutional Research by the Provost dated April 23, 2004. Also, reviewed the re-affirmation appointment by the President dated September 8, 2014.
- Observed the SUDS submission screen and the “Submit for Approval” button that represents the College’s certification of complying with BOG regulation 3.007.

Findings

No exceptions were identified as a result of applying these procedures.

b) Review the processes used by the Data Administrator to ensure the completeness, accuracy and timely submission of data to the Board of Governors.

1. Interview the Data Administrator and other key data managers to understand the internal processes in place to gather, test and ensure that only valid data, as defined by the BOG, is timely submitted to the BOG.
2. Identify and evaluate key processes over data input and submission. Consider evaluating the processes from the point of incoming information to the submission of the data file to the BOG.
3. Review internal records such as time management schedules and relevant correspondence which purport to demonstrate that complete and accurate data is timely submitted to the BOG. (See due dates addressed in the SUS data workshop). http://www.flbog.edu/resources/doc/FHES-14/2014_Workshop_Proceedings.pdf
4. According to BOG Regulation 3.007, prior to submitting the file, the universities shall ensure the file is consistent with the criteria established in the specifications document by performing tests on the file using applications/processes provided by the BOG Information Resource Management (IRM) office. Review process for timely and accurately addressing data file error reports.
5. Evaluate the results and document your conclusion on the data administrator’s processes.
Procedures Performed

- Interviewed the following people who are key in the data being reported and submitted to the BOG:
  - Director of Institutional Research and Analysis
  - Assistant Vice President, Business Technology Services
  - Asst. Director, Management Information Resources
  - Director, University Budgets
  - University Registrar
  - Associate Vice President, Academic and Curriculum Support
  - Associate Director, Undergraduate Admissions
  - Director, Student Financial Services

- For those interviewed, we discussed key internal controls and processes in place over data input, Banner access, State University Database System (SUDS) access, validation tables, data submission procedures, error resolution, staff training, and other controls specific to the department and submission of accurate and timely data.

- Reviewed the metrics specific to each department to ensure controls are in place and a clear understanding exists to ensure only valid data is being submitted based on the data definitions.

- Reviewed weekly email communications (the HitList) from the Institutional Research and Analysis (IRA) department to department heads. These emails detail the upcoming submissions due in the next two months to the BOG and who is responsible for the data being submitted. Department heads review the data requests and are responsible to ensure the data is accurate and ready for timely submission.

- Reviewed submission schedule maintained by the IRA department.

- Verified submission files tested were submitted by the Due Date as published by the State University System of Florida (SUS) and identified on the SUDS website.

- Tested the submission file criteria definitions used by the University to ensure they meet the data definitions published by the SUDS.

- Obtained the data definition tables from the SUDS website and verified tables documented in the University processes agreed to the SUDS tables.

- Reviewed processes over testing and validating data submissions and procedures for the resolution of errors prior to the final submission.
Findings

We identified the following files that were not submitted by the required due date:

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c) Evaluate any available documentation including policies, procedures, and desk manuals of appropriate staff, and assess their adequacy for ensuring data integrity for University data submissions to the Board of Governors.

1. Request the Data Administrator provide its policies, procedures, minutes of meetings, and any other written documentation used as resources to ensure data integrity; note whether these documents are sufficiently detailed, up-to-date, and distributed to appropriate staff.
2. Evaluate the results and document your conclusion. If necessary, consider benchmarking with peer universities.

Procedures Performed

- Discussed key processes with those interviewed to ensure procedures are in place to ensure data accuracy for their department.
- Ensured each department, that is key to the submission process, had written policy and procedures regarding data they are responsible for.
- Reviewed the project meeting minutes for each meeting that was held in regards to the Performance Funding project and verified data integrity was a significant objective.

Findings

No exceptions were identified as a result of applying these procedures.

d) Review system access controls and user privileges to evaluate if they are properly assigned and periodically reviewed to ensure only those authorized to make data changes do so.

1. Obtain a list of individuals that have access to the State University Database System (SUDS).
3. Review the procedures to grant system access and/or initiate, monitor and cancel user privileges.
4. Perform a test of system access controls and/or user privileges to determine if only appropriate employees have access or need the privilege.
5. Consider other IT systems and related system access controls or user privileges that may impact the data elements used for each measure reviewed.
6. Evaluate the results and conclude on the reasonableness of procedures and practices in place for the setup and maintenance of system access, specifically addressing employees with SUDS access.

**Procedures Performed**

- Obtained a current listing of all those individuals who have access to the SUDS system from the BOG’s application portal manager.
- Obtained the role definitions in the SUDS system for each type of user.
- Discussed procedures with the Director of Institutional Research and Analysis for granting access to the SUDS system and monitoring to ensure user privileges are cancelled in a timely manner. Verified only said Director, has administrative authority to change users in the system.
- Reviewed user listing and discussed with the Director of Institutional Research and Analysis to ensure only personnel that need access have access to the SUDS system and only a limited amount have the ability to submit data.
- Reviewed Banner access/termination procedures with each department listed in section b. and ensured procedures are in place for authorization of adding a new user and timeliness of terminating personnel access.
- Reviewed Banner Security Class Reports that are sent to department heads on a quarterly basis and used to monitor Banner access.
- Selected one user from each department who is significant to the submissions being tested and verified authorization was obtained for the new user, proper workorder was initiated by an authorized person and determined the class approved, agreed to their current Banner access privileges.
- Discussed procedures for terminating a Banner user with the Assistant Vice President, Business Technology Services.

**Findings**

No exceptions were identified as a result of applying these procedures.

e) **Testing of data accuracy.**

1. Identify and evaluate data validity controls to ensure that data extracted from the primary systems of record are accurate and complete. This may include review of controls over code used to create the data submission. Review each measure’s definition and calculation for the consistency of data submissions with the data definitions and guidance provided by the BOG.

2. As appropriate, select samples from data the University has submitted to the BOG for its Performance Funding Model. Vouch selected data to original source documents (this will most likely include the University’s student and financial systems used to capture relevant information).

3. Evaluate the results of the testing and conclude on the completeness and accuracy of the submissions examined.
Procedures Performed

For each submission file listed in Attachment I we performed the following procedures for the specific metrics identified in the Performance Funding Metrics published by the SUS:

- Obtained complete submission file for time period being tested.
- Selected a sample size of thirty (30) data items to test for each file submission and each metric specific to the performance funding testing.
- Verified data reported in the submission files specific to the metrics identified by the SUS agreed to the source system Banner.
- Verified the data reported for each metric agreed with the SUDS data dictionary.

To ensure completeness of the files being submitted we performed the following procedures:

- For each term and reported time frame, we obtained from the Business Technology Services department a file which was extracted from Banner and compared to submission files extracted by the Institutional Research and Analysis department:
  1. All student’s enrolled were compared to the Student Instruction (SIF) files submitted;
  2. All students who received Pell grants were compared to the Student Financial Aid (SFA) files submitted;
  3. All students who had a degree awarded were compared to the Degrees Awarded (SIFD) files submitted;
  4. All students admitted were compared to the Admissions (ADM) files submitted.

For each comparison we identified any person that was on the Banner report that was not in the file submission. We then selected a sample size based on the size of the file and errors returned and verified the student was properly omitted for the specific submission based on the current data definitions. Sample sizes: student’s enrolled – all; students receiving Pell grants – no errors returned; degrees awarded – 10, students admitted – 10.

Findings

The following data was incorrectly reported in the Spring 2015 Student Instruction file. These students did not obtain a higher education degree; therefore, the “Metric #01411” data field should have been blank.

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f) **Evaluate the veracity of the University Data Administrator’s data submission statements that indicate, “I certify that this file/data represents the position of this University for the term being reported.”**

1. Interview the University data administrator to consider the reasonableness of the various coordination efforts with the data administrators staff, the other data custodians' staff, BOG IRM, and other knowledgeable individuals which form the basis for personal and professional satisfaction that data submitted to the BOG is complete, accurate and submitted timely.

2. Inquire how the Data Administrator knows the key controls are in place and operating effectively. If not already done, consider verifying these key controls are in place and adequate to support the Data Administrator’s assertions.

**Procedures Performed**

- Interviewed personnel listed in section b. and verified communication with the Institutional Research and Analysis is on-going and clear to ensure accurate and timely data submission. Also verified controls are in place specific to the metrics being tested.
- Verified with the Director of Institutional Research and Analysis his communication with the BOG and IRM to ensure data being submitted meets the data definitions.

**Findings**

No exceptions were identified as a result of applying these procedures.

g) **Review the consistency of data submissions with the data definitions and guidance provided by the Board of Governors through the Data Committee and communications from data workshops.**

1. Evaluate the University’s procedures for periodically obtaining and communicating definitions and due dates as provided by the BOG through the Data Committee and communications from data workshops.

2. Verify with the University Data Administrator that the most current data file definitions are used as a basis for preparation of data to be submitted to the BOG.


4. Request evidence of the most recent formal staff training/workshops, internal discussions or communications with other responsible employees and the BOG Data Committee necessary to ensure the overall integrity of data to be submitted to the BOG.

5. Conclude as to the consistency of the submissions.
Procedures Performed

- Reviewed weekly email communications (the HitList) from the Institutional Research and Analysis (IRA) department to department heads. These emails detail the upcoming submissions due in the next two months to the BOG and who is responsible for the data being submitted. Department heads review the data requests and are responsible to ensure the data is accurate and ready for timely submission.
- Obtained the most recent data definition tables on the SUDS website and verified data definitions outlined in the file processes agreed to the SUDS data tables.
- Verified process with the Institutional Research and Analysis department of their communication to department heads of the data definitions and communication of any new or changed metric.
- Obtained the SUDS release notes and workshop agenda’s during the testing period and verified any changes were properly incorporated into the data file submissions.
- Reviewed staff training with each personnel interviewed as listed in section b. in relation to both Banner and SUDS security and knowledge training.
- Our testing was performed on all file submissions since October 1, 2014 for the specific metrics tested to review for consistency among data submissions.

Findings

No exceptions were identified as a result of applying these procedures.

h) Review the University Data Administrator’s data resubmissions to the Board of Governors with a view toward ensuring these resubmissions are both necessary and authorized. This review should also evaluate how to minimize the need for data resubmissions.

1. Interview the University data administrator about the types and quantity of recent data resubmissions and the level(s) of approvals necessary for corrective action.
2. Request and examine any correspondence between the University and the BOG IRM office related to data resubmissions that pertain to the performance metrics. Determine if these resubmissions problems tend to be reoccurring and what, if any, actions management has taken or plans to take in order to reduce them.
3. Conclude as to the frequency, need and authorization of the resubmission process.

Procedures Performed

- Interviewed the Director of Institutional Research and Analysis about the resubmission process followed by his department. During the testing period there was one file resubmission made to correct information that was reported in the original file. This was a result of the BOG identifying a potential error in a data field in the Fall 2014 SIF file.
- Reviewed data resubmission correspondence from the BOG and verified file was properly resubmitted with no outstanding errors.
- Reviewed resubmissions to identify if there are reoccurring submission problems.
Findings

No exceptions were identified as a result of applying these procedures.

i) Provide an objective basis of support for the president and board of trustees chair to sign the representations made in the Performance Based Funding—Data Integrity Certification.

1. Review the Performance Based Funding Data Integrity Certification statement to identify additional procedures that should be designed to support the representations. (For example, #11 requests a certification that University policy changes and decisions impacting the PBF initiative were not made for the purposes of artificially inflating performance measures).

Procedures Performed

- We reviewed the Data Integrity Certification and performed procedures agreed upon by Florida Gulf Coast University’s Board of Trustees to meet the objectives of the certification.

Findings

Mauldin & Jenkins was engaged to perform procedures that were provided by you and were outlined in our engagement letter, that management has identified to meet the objectives of the certification. The Board of Trustees must conclude as to the adequacy of these procedures and findings in meeting their certification objectives.

We were not engaged to and did not perform an audit, the objective of which would be the expression of an opinion on the processes and procedures for the complete, accurate and timely submission of data to the BOG. Accordingly, we do not express such an opinion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to management.

This report is intended solely for the information and use of Florida Gulf Coast University’s Board of Trustee’s and management and is not intended to be and should not be used by anyone other than these specified parties.

Mauldin & Jenkins, LLC

December 3, 2015
## Submissions Tested

<table>
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<th>Rept Time Frame</th>
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<thead>
<tr>
<th>University_Row_ID</th>
<th>PIDM</th>
<th>Demo Time Frame &amp; Data Source</th>
<th>Degree Highest Held</th>
<th>Data Reported in Metric #01411 Institution Granting Highest Degree</th>
</tr>
</thead>
<tbody>
<tr>
<td>C-000900</td>
<td>523007</td>
<td>201505 SIF</td>
<td>N</td>
<td>F200000000</td>
</tr>
<tr>
<td>H-975766</td>
<td>498917</td>
<td>201505 SIF</td>
<td>N</td>
<td>F200000000</td>
</tr>
</tbody>
</table>

Neither of these observations affected the overall integrity of the data submissions.

Corrective Management Action Plan

1. To ensure that future data submissions to the BOG are timely, University data stakeholders affected by new software will participate in the project implementation committee in order to disclose their data needs and to take timely action to implement successfully. Action by management will strengthen data submission process documentation to ease future implementations.

2. There was a data review of “schools attended” on admissions applications. These data elements have been corrected for future submissions.
Corrective actions have been implemented by University management. As required by the FGCU Board of Trustees and by the BOG, compliance with the corrective action plans will be reviewed as part of Internal Audit’s work plan.

Conclusion

In my opinion, based upon the work performed, the internal controls, processes and procedures Florida Gulf Coast University has in place to ensure the completeness, accuracy, and timeliness of data submissions to the BOG that affect performance based funding metrics are operating effectively.

Audit Report Prepared by Carol Slade, CIA, CPA, CGFM, Director, Internal Audit