County of Summit
Veterans Service Commission
Performance Audit
General Report

Prepared for:

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Audit Committee

Approved by Audit Committee
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Table of Contents

EXECUTIVE SUMMARY

Total Number of Issues – 19

Policies and Procedures

Weaknesses:

Section	# Issues	Issue Description	Page Ref.
Policies and Procedures	2	• Miscellaneous (no effective dates, management approval, etc.) • Insufficient or no written policies and procedures for several areas/processes	7

Internal Controls

Strong Internal Controls:

Testing Section	# Issues	Issue Description	Page Ref.
Fringe Benefits	0	N/A	12
Vehicle Log	0	N/A	15

Weaknesses in Internal Controls:

| Testing Section	# Issues	Issue Description	Page Ref.
Cash Receipts	3	• Untimely deposits • Receipts not issued for funds received via check • Receipt issued for unrelated VSC transaction	9
Expenditures	1	• Petty cash request form not submitted	10
Asset Inventory	1	• Segregation of duties	11
Payroll	2	• Improper approval in Kronos • Written request not submitted for leave donation; recipient did not exhaust accrued leave	11
ORC	1	• Ineligible relative was utilized to obtain VSC employment	13
Personnel Files	3	• Checklist not maintained for personnel file documents • Employee performance evaluations not completed within the last year • Limited training over the Human Resource functions	14
Commission Meetings	1	• Commission votes not documented and executive sessions not properly defined	16
Financial Assistance	5	• Denied claims not properly documented • Improper segregation of duties • Summit County non-resident received assistance • Incomplete case file • Employee names utilized to test functionality of the system • Financial assistance approval not documented	16

GENERAL BACKGROUND

Veterans Service Commissions (VSCs) are state agencies ordered by Title 59 of Ohio law and funded by county property taxes.

VSC Commissioners are chosen by the Judges of Summit County Court of Common Pleas from Veteran organizations such as American Legion, Veterans of Foreign Wars, Vietnam Veterans of America or the Military Order of the Purple Heart, American Veterans and the Disabled American Veterans.

The VSC provides financial assistance to eligible veterans and family members who have a demonstrated need and meets agency requirements. Also, The VSC represents and assists veterans, family members and survivors when they apply to the Veterans Affairs (VA) for benefits. Other services offered by VSC include transportation to and from VA medical facilities, a mobile meal program, school clothes and the flag and markers for veteran gravesites on Memorial Day.

The VSC consists of five (5) commissioners and twenty (20) support staff (1% of Summit County employment). Support staff consists of Administrators, Service Officers, Benefits Coordinators and Drivers/Investigators. The VSC 2013 and 2014 budget totalled $2,850,700 and $2,845,400, respectively (0.6% of the 2013 and 2014 County operating budgets).[1]

2014 operating budgets, staffing levels, and 2013 financial assistance, VA claims filed, and county veteran totals were compared to Lucas and Montgomery counties. The comparisons are represented in the graphs below:
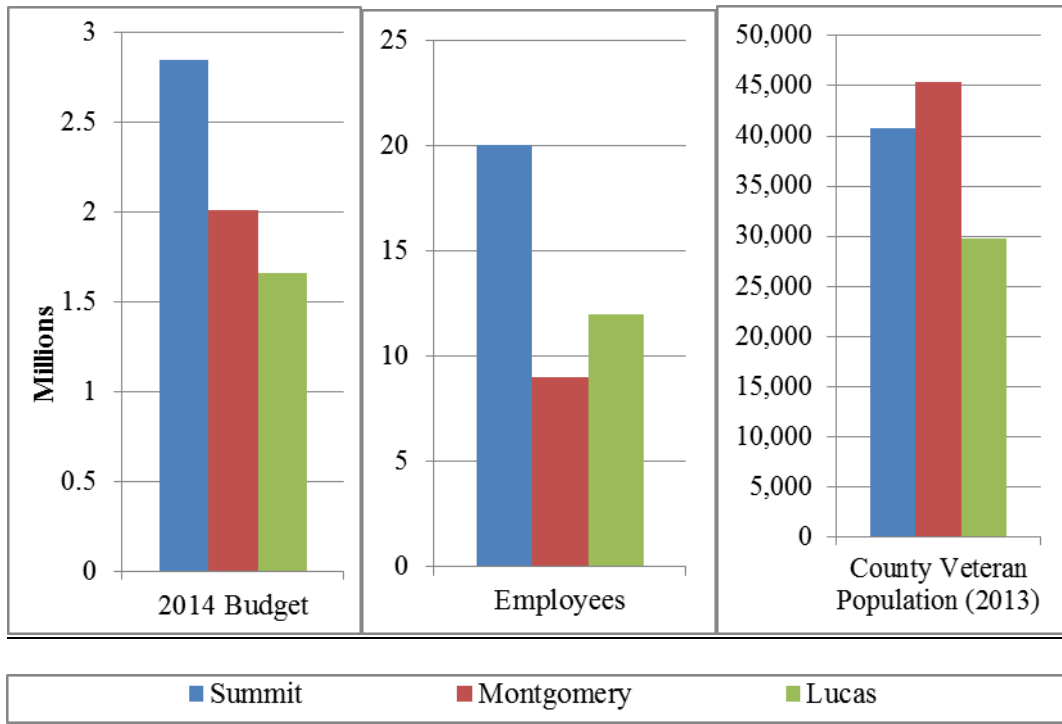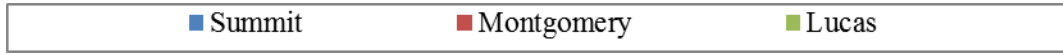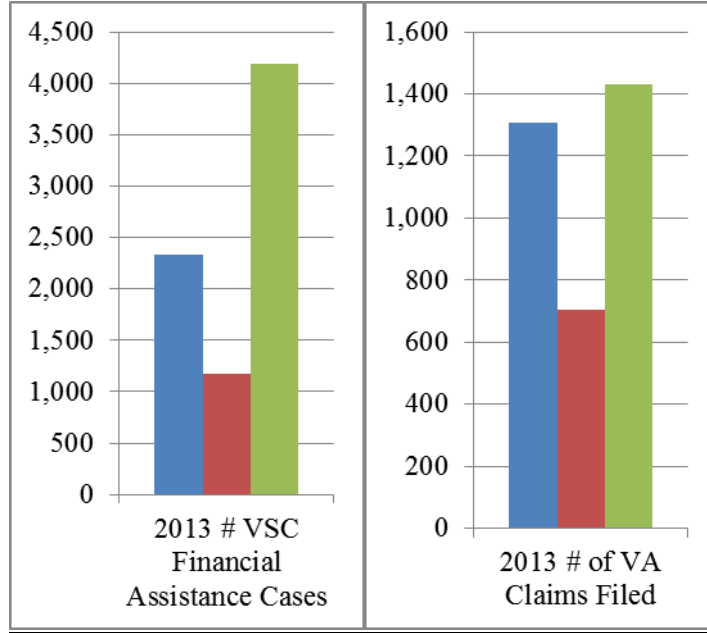
Note: Benchmarking statistics may vary based on demographics and affluence of each county.

AUDIT OBJECTIVES, SCOPE, AND METHODOLOGY

The primary focus of this review was to provide the VSC with reasonable assurance, based on the testing performed, on the adequacy of the system of management control currently in effect for the audit areas.

Management controls include the processes for planning, organizing, directing, and controlling program operations, including systems for measuring, reporting, and monitoring performance. Management is responsible for establishing and maintaining effective controls that, in general, include the plan of organization, as well as methods and procedures to ensure that goals are met. Specific audit objectives include evaluating the policies, procedures, and internal controls related to the VSC.

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

Based on the results of our review, we prepared specific issues and recommendations for improvement that were discussed with management. These recommendations, as well as management's unaltered written response, can be found in the following sections of this report.

Objectives:

- To obtain and review the current policies and procedures.
- To review the internal control structure through employee interviews and observations.
- To perform a general overview of the physical environment and security of the facilities, data, records and departmental personnel.

Scope:

An overview and evaluation of the existing policies, processes, procedures, contracts and internal control structure utilized by the VSC from June 1, 2013 through May 31, 2014.

The following were the major audit steps performed:

OBJECTIVE 1 – POLICY AND PROCEDURES REVIEW

1. Obtain and review the current policies and procedures.
2. Meet with the appropriate personnel to obtain an understanding of the current department processes and procedures. Compare those existing processes to the policies and procedures manual for consistency, noting all exceptions.
3. Obtain and review the document retention policy and determine if policies and procedures are currently in place and being followed.
4. Test procedures for mandatory compliance where applicable.
5. Identify audit issues and make recommendations where appropriate.

OBJECTIVE 2 – REVIEW OF INTERNAL CONTROLS

1. Meet with the appropriate personnel to obtain an understanding of the control environment.
2. Document the existing control procedures in narratives and/or flowcharts.
3. Compare existing processes to the policies and procedures manual for consistency.
4. Test procedures for compliance where applicable, noting all exceptions.
5. Investigate discrepancies and summarize results.
6. Make recommendations where appropriate.

OBJECTIVE 3 – REVIEW OF SECURITY (covered in a separate report in compliance with ORC §149.433).

1. Perform a general overview of the physical environment and security of the department/agency being audited.
2. Interview various personnel to determine that confidential information is secure and processed only by appropriate parties.
3. Test security issues where appropriate.
4. Analyze current policies and make recommendations.

DETAILED COMMENTS

Interviews:

To gain an understanding of the VSC, IAD performed interviews with the following positions:

- Executive Director
- CVSO Supervisor
- Project Manager
- Administrative Supervisor
- Systems Administrator
- Veterans Service Officer
- Benefits Coordinator
- Driver/Investigator
- Account Clerk

Any issues noted are addressed in the respective sections of this report.

I. Policies and Procedures:

Policies and procedures for the VSC were reviewed for each of the applicable testing sections within the audit for accuracy and completeness and compared to current processes for consistency.

The following issues were noted:

1. Issue:

    - Financial Assistance Manual
      o Manual has not been updated and no evidence of review within the last two years,
      o Staff sign-offs do not exist for the manual,
      o The manual has several duplicate policies as well as sections that are not labeled; therefore, IAD could not determine the completeness of the manual,
    - Transportation Manual
      o Manual has not been formally approved by management,
      o Staff sign-offs do not exist for the Transportation Manual.

    Recommendation:

    IAD recommends that all policies and procedures be updated or reviewed with management approval and employee receipt and acknowledgement of policies and procedures be documented. Additionally, IAD recommends that all duplicate policies be removed and sections of the manual be labeled for ease of use and accuracy. This will help to ensure that approved policies and procedures are accurate and consistently followed by employees.

    Management Action Plan:

    F. A. Manual: policies and procedures be updated or reviewed with board approval and employee Receipt and acknowledgement of policies and procedures be documented. Staff will remove duplicates and ensure all sections are labeled.

Transportation Manual: policies and procedures be updated or reviewed with board approval and employee's receipt and acknowledgement of policies and procedures be documented.

Target Implementation Date: F.A. Manual 03/01/2015, Transportation Manual 10/01/2014

2. Issue:

Upon review of VSC policies and procedures, no written or insufficient policies and procedures were noted for the following areas:

- Personal usage of laptops and cell-phones
- Maintaining or disposing of assets (reference to county policy)
- Expenditures
- Reference to County procurement card policy
- Cash receipts
- Petty cash
- Incorporation of leave donation and interaction with the press policies into the Personnel Manual
- Financial assistance claim process for confidential clients in the system (e.g., VSC employees applying for benefits)
- Account Clerk ability to enter and approve medical vouchers in eVetAssist
- Manager and Director approval for claims where income exceeds deficit amount

Recommendation:

IAD recommends that the VSC create/update, approve, and disseminate written policies and procedures for all functional areas within the agency. This will help to ensure that proper procedures are being consistently followed within the department.

Management Action Plan:

All policies and procedures as listed will be addressed, reviewed and updated with approval of the board.

Target Implementation Date: 03/30/2015

II. Internal Control Testing:

Risk-based internal control testing and/or observations were performed in the following areas:

- Cash Receipts
- Expenditures
- Asset Inventory
- Payroll
- Fringe Benefits
- ORC Compliance
- Personnel Files
- Vehicle Log
- Commission Meetings
- Financial Assistance

CASH RECEIPTS

VSC policies and procedures and applicable legislation were reviewed, an observation was performed, staff interviews were conducted, and a flowchart was created and approved to gain an understanding of the cash receipts cycle, the laws and regulations that govern it, and internal controls in place.

A sample of cash receipts was judgmentally selected for detail testing to ensure timely deposit in accordance with ORC §9.38. Additionally, IAD reconciled transactions from the cash receipt book to banner to ensure accuracy. The following issues were noted:

3. Issue:

Upon discussion with Administrative Supervisor and Project Manager and detail testing of cash receipts, IAD noted three (3) out of three (3) instances where the receipts were not timely deposited in accordance with ORC §9.38.

Recommendation:

IAD recommends that all funds received by the VSC be deposited by the next business day or a policy be written to allow up to three (3) days for deposits less than $1,000. This will help to ensure compliance with ORC §9.38.

Management Action Plan:

All funds received by the VSC are deposited by the next business day or a policy be written to allow up to three (3) days for deposits less than $1,000 with board approval.

Target Implementation Date: 11/01/2014

4. Issue:

Upon reconciliation of Banner deposits to the cash receipt book, IAD was unable to verify the issuance of $140 in cash receipts. Additionally, upon discussion with the Project Manager, it was noted that receipts are not issued for funds received via check.

Recommendation:

IAD recommends that all funds be receipted regardless of payment type and a periodic reconciliation be performed between the cash receipt manual and Banner to ensure completeness and accuracy of the deposit.

Management Action Plan:

Will adopt policy and procedures for issuing of receipts for all cash or check donations regardless of payment type. All deposits will be reconciled with Banner to insure accuracy.

Target Implementation Date: 11/01/2014

5. Issue:

Upon detail testing of cash receipts and discussion with the Executive Director and Project Manager, IAD noted that a receipt was issued from the VSC receipt book for an unrelated VSC transaction.

Recommendation:

IAD recommends that the VSC receipt book be used for VSC transactions and not comingled with unrelated business. This will help to ensure accountability over cash receipts.

Management Action Plan:

VSC receipt book to be used for VSC transactions only and not comingled with unrelated business. The receipt book will used for check payments/donations.

Target Implementation Date: 09//01/2014

EXPENDITURES

VSC policies and procedures and applicable ORC sections were reviewed, staff interviews were conducted and flowcharts were created and approved to gain an understanding of the expenditure cycle, the laws and regulations that govern it, and internal controls in place. A sample of expenditures was judgmentally selected and detail expenditure testing was performed to verify that funds do not remain encumbered on prior year purchase orders, proper approval and authorizations are in place, funds were encumbered prior to incurring the expense, and the appropriate vendor and amount were paid. Expenditures over $1,000 were reviewed to ensure that a purchase order was created, in accordance with Codified Ordinances.

Banner User and Banner Class Form reports were obtained and reviewed to gain an understanding of employee permissions and detail testing was performed to assess reasonableness and proper segregation of duties.

An interview was conducted to gain an understanding of the procurement card (p-card) process. A sample of p-card purchases was selected and detail testing was performed to ensure the purchase was exempt from sales tax, reasonable and properly recorded, approved by the appropriate employee, and supported by proper documentation

The following issue was noted:

6. Issue:

Upon detail testing of petty cash receipts, IAD noted two (2) out of three (3) instances where a petty cash request form was not submitted.

Recommendation

IAD recommends that petty cash request forms be submitted and approved, prior to the disbursement of petty cash. This will help to ensure proper approval and compliance with departmental procedures.

Management Action Plan:

No petty cash will be issued without prior submittal of proper petty cash forms and approval.

Target Implementation Date: 09/01/2014

ASSET INVENTORY

VSC policies and procedures were reviewed, staff interviews were conducted and flowcharts were created and approved to gain an understanding of the asset and IT inventory processes and internal controls in place. A sample of asset and IT inventory was judgmentally selected and detail testing was performed to verify the existence of the assets and the accuracy of the asset tracking system.

The following issue was noted:

7. Issue:

    Upon discussion with the Systems Administrator, IAD noted ordering and receiving of all IT assets is conducted by the same employee who maintains the IT asset inventory listing, creating an improper segregation of duties.

    Recommendation:

    IAD recommends the VSC assign the ordering, receiving, and maintenance of the asset inventory functions to separate individuals and designate backup employees so that no one person is responsible for all three functions. This will provide an appropriate segregation of duties and help ensure proper control over and safeguarding of assets.

    Management Action Plan:

    Procedures will be implemented to provide an appropriate segregation of duties and help ensure proper control over and safeguarding of assets. To include ordering, receiving and maintaining inventory assets.

    Target Implementation Date: 12/01/2014

PAYROLL

An interview was conducted to gain an understanding of the payroll process. A payroll approval report was generated and detail testing was performed to confirm appropriate authorizations and proper segregation of duties. Employee leave reports were reconciled to Kronos to ensure accuracy. In addition, leave donation policies and procedures were reviewed and detail testing was performed to ensure compliance with program policies.

The following general recommendation and issues were noted:

General Recommendation:

Upon discussion with the Administrative Supervisor, IAD noted the VSC utilizes two (2) time tracking systems, creating a duplication of efforts. Additionally, during detail testing, three (3) of one hundred twenty-nine (129) instances were noted where employee leave forms did not agree to the time keeping systems. IAD recommends that Kronos be utilized as the VSC's only Timekeeping System to record employees' work, vacation, sick, and personal leave hours. Additionally, IAD recommends that the electronic leave function be utilized within Kronos for request and approval of employees' leave. This will help to ensure accuracy of time and minimize duplication of efforts.

8. Issue:

Upon review of payroll approval and sign-off in Kronos, IAD noted eight (8) out of eight (8) pay periods with improper approval (e.g., the same employee approving and signing off).

Recommendation:

IAD recommends that payroll be approved and signed off by the appropriate parties (e.g., same employee does not approve and sign-off). This will help ensure the accuracy and accountability of payroll records.

Management Action Plan:

Payroll will be approved and signed off by the account clerk and the sign off will be completed by the Administrative Supervisor.

Target Implementation Date: 09/09/2014

9. Issue:

During detail testing of the one (1) VSC employee who requested and received donated leave under the leave donation program, IAD noted the following, in accordance with the VSC leave donation Policy:

- One (1) out of one (1) instance where the recipient did not submit a written request
- One (1) out of one (1) instance where the recipient had accrued paid leave at the time of donation.

Recommendation:

IAD recommends that the VSC receive a written request from the employee requesting leave donations and that leave donation recipients exhaust all other paid leave options before receiving donated leave. This will help to ensure compliance with the VSC leave donation policy.

Management Action Plan:

VSC will require that a written request from the employee requesting leave donations must be received in a timely manner and that leave donation recipients exhaust all other paid leave options before receiving the donated leave.

Target Implementation Date: 09/01/2014

FRINGE BENEFITS

Detail testing of the following areas was performed, if applicable, to confirm that the VSC is properly processing taxable fringe benefits in accordance with IRS tax code:

- Travel and meals reimbursement
- Cash incentives, awards, gift awards and/or bonuses
- County paid life insurance policies over $50,000
- Uniforms and clothing allowances
- Employment contracts
- Agency vehicle usage

- Allowances for firearms or tasers and/or any other non-lethal weapon
- Tuition assistance and reimbursement
- Subcontracted employees
- Domestic partner health insurance

No issues were noted.

ORC COMPLIANCE

ORC §5901 was reviewed, attributes were developed, and detail testing was performed to ensure the following:

- The Commission is composed of five (5) residents of the county.
- Each member of the Commission appointed and each service officer shall be honorably discharged or an honorably separated veteran, supported by evidence of form DD-214 within sixty (60) days of appointment.
- The Executive Director and each Service Officer is a veteran.
- Each investigator, clerk, stenographer and other personnel assisting the Officers is a veteran or the spouse, surviving spouse, child or parent of a veteran.
- No Commission member shall be an employee of the Commission or hold an elective or other appointive office of the County.
- Commission members are part of the applicable veteran organization and the terms expire in accordance with ORC.
- The Commission selects a president, vice-president and a secretary.
- The Commission meets at least once each month.
- The Commission appoints three (3) persons who are residents of the county to serve on the veterans service committee.
- The Commission prepares a probable amount necessary for financial assistance by the established deadline.
- The VSC budget is submitted to the County.
- Within thirty (30) days of petition for burial or reinternment assistance the Commission acts upon the request.
- The payout of petition for burial or reinternment assistance does not exceed $1,000.
- The petition for burial or reinternment assistance complies with indigence requirements.

The following issue was noted:

10. Issue:

Upon review of VSC employment eligibility, IAD noted one (1) instance where an employee was hired, under the prior administration, without a qualifying relative. Per ORC §5901.06, only certain relatives (e.g., spouse, surviving spouse, child, or parent of a veteran) can be used to qualify for employment with the VSC.

Recommendation:

IAD recommends that the VSC obtain an opinion from the Prosecutor and/or State of Ohio Attorney General's Office to ensure the Commission is in compliance with ORC §5901.06.

Management Action Plan:

The VSC will request an opinion from the Summit County Prosecutor.

Target Implementation Date: 10/15/2014

PERSONNEL FILES

The VSC Personnel policy and procedure manual was reviewed and staff interviews were conducted to gain an understanding of the personnel file structure. A sample of employees was judgmentally selected and detail testing was performed to verify that the personnel files contained the required documentation. Additionally, verified that an employee file was created for each employee.

OAC §5902 was reviewed, attributes were developed, and detail testing was performed to ensure the following:

- Newly appointed VSC members attend a special course of instruction and sign a standards of conduct form.
- Re-appointed Commissioners attend and complete a minimum of four (4) credits of formal instruction annually.
- Veterans Service Officers meet minimum qualifications for hiring.
- Veterans Service Officers are certified by the Department of Veterans Services within thirty (30) months of becoming a Service Officer.
- Veterans Service Officers are accredited by the Federal Department of Veterans Affairs.
- Veterans Service Officers earn five (5) credits per calendar year.

The following general recommendation and issues were noted:

General Recommendation:

Upon discussion with the Administrative Supervisor, IAD noted a tracking mechanism is not utilized for requests to review personnel files. IAD recommends that the VSC create and maintain a tracking mechanism for review of personnel files. This will help to ensure accountability over personnel files.

11. Issue:

Upon discussion with the Administrative Supervisor, IAD noted that the VSC does not maintain a checklist of required personnel file documents in each file. In addition, during detail testing of the personnel files, IAD noted five (5) of five (5) files that appeared to be incomplete.

Recommendation:

IAD recommends that the VSC create and implement a checklist of required personnel file documents (e.g., DD-214, car insurance declaration form, department sign-offs, current performance evaluations, etc.) to be maintained in each employee's personnel file. This will help to ensure completeness and accuracy of personnel files.

Management Action Plan:

The VSC will create and implement a checklist of required personnel file documents be maintained in each employee's personnel file. Which will guarantee completeness and accuracy of files.

Target Implementation Date: 10/01/2014

12. Issue:

Upon discussion with the Administrative Supervisor, and through detail testing, IAD noted five (5) of five (5) employees whose performance evaluations had not been completed within the past year, in accordance with the VSC Policy and Procedure Manual.

Recommendation:

IAD recommends that all employee performance evaluations be documented and conducted annually, in accordance with the VSC Policy and Procedure Manual. This will help to ensure review and documentation of employee performance and compliance with the Veterans Service Policy and Procedure Manual.

Management Action Plan:

All employee performance evaluations will be documented and conducted annually, in accordance with the VSC Policy and Procedure Manual.

Target Implementation Date: 03/01/2015

13. Issue:

Upon discussion with VSC personnel, IAD noted limited training over the Human Resource functions (e.g., unaware of updated HR rules and regulations, etc.).

Recommendation:

IAD recommends that HR related training be made available to and attended by the appropriate VSC personnel. This will help to ensure proper employee training and reduction in potential HR liability to the VSC.

Management Action Plan:

VSC will elect the appropriate staff members to attend HR training offered by the county.

Target Implementation Date: 10/01/2014

VEHICLE LOG

An interview was conducted to gain an understanding of the vehicle log process within VSC. Vehicle logs were reviewed and detail testing was performed to ensure compliance with Codified Ordinance §169.25. The 2014 SambaSafety report (showing employees authorized to operate a County vehicle) was obtained and reviewed to ensure that employees operating a County vehicle were properly authorized, in accordance with Codified Ordinance §169.25(i)(3).

No issues were noted.

COMMISSION MEETINGS

VSC policies and procedures, Ohio Open Meetings Act, and Robert's Rules of Order were reviewed to gain an understanding of VSC meetings and the rules and legislation that govern it. A sample of VSC meeting minutes was judgmentally selected and detail testing was performed to determine compliance with applicable legislation and policies.

The following issue was noted:

14. Issue:

Upon detail testing of the VSC meeting minutes, IAD noted six (6) out of six (6) instances where the Commission votes were not documented in accordance with Robert's Rules of Order. Additionally, IAD noted six (6) out of six (6) instances where executive sessions were not properly defined with appropriate motions, stated purpose, and roll call, in accordance with the Ohio Open Meetings Act.

Recommendation:

IAD recommends that the VSC document the votes that occur during each Commission meeting as well as properly defining all executive sessions. This will help to ensure compliance with applicable rules and regulations.

Management Action Plan:

VSC will insure proper documentation of votes that occur during each Commission meeting as well as properly defining all executive sessions.

Target Implementation Date: 09/01/2014

FINANCIAL ASSISTANCE

VSC policies and procedures and applicable legislation were reviewed, staff interviews were conducted, and a flowchart was created to gain an understanding of the financial assistance process and internal controls in place. A sample of granted and denied financial assistance cases was selected and detail testing was conducted to ensure compliance with policies and procedures. Confidential (e.g., VSC employees' financial assistance cases) and test case files were reviewed and samples were selected to ensure completeness of files, reasonableness, and compliance with policies and procedures.

The following general recommendation and issues were noted:

General Recommendation:

Upon discussion with the Account Clerk, IAD noted that financial assistance expenditures (e.g., vendor payments) are manually tracked by the Account Clerk in various systems (e.g., automated and manual) other than eVetAssist, where information is originated, creating a duplication of efforts and incomplete data within eVetAssist. IAD recommends that the VSC review the functionality of eVetAssist to determine if all related data/information can be entered and reporting can be generated in the system. This will help to ensure accuracy and completeness of financial assistance information within the system and help minimize duplication of efforts.

15. Issue:

Upon detail testing, IAD noted that the Systems Administrator is entering/approving vouchers in the eVetAssist system. Per the VSC's Financial Assistance Policy and Procedure manual, only Service Officers and Managers have the ability to enter and approve vouchers. Additionally, the Systems Administrator is the administrator of the system, creating an improper segregation of duties.

Recommendation:

IAD recommends that the System Administrator not be able to perform supervisory/operational functions within the system. This will help to ensure proper approvals and procedures are being followed as well as proper segregation of duties.

Management Action Plan:

VSC will insure the System Administrator has only operational function authority.

Target Implementation Date: 09/01/2014

16. Issue:

Upon detail testing, IAD noted one (1) instance where a client received financial assistance and was not a resident of Summit County for the prior three (3) months, in accordance with financial assistance policies and procedures.

Recommendation:

IAD recommends that Service Officers review all supporting documentation for Summit County residency to verify clients are eligible to receive financial assistance. This will help to ensure proper documentation of eligibility and compliance with financial assistance policies and procedures.

Management Action Plan:

VSC will ensure proper documentation of eligibility and compliance with financial assistance policies and procedures are followed by service officers. Target Implementation Date: 09/01/2014

17. Issue:

Upon detail testing, IAD noted one (1) of one (1) instance where case information was not transferred to the physical case file for a duplicate client, creating the appearance that the client was not provided financial assistance.

Recommendation:

IAD recommends that the VSC review all confidential duplicate clients in the system to ensure applicable information is transferred to the physical case file. This will help to ensure the accuracy and completeness of case files.

Management Action Plan:

Staff will review all confidential duplicate clients in the system to ensure applicable information is transferred to the physical case file.
Target Implementation Date: 03/01/2015

18. Issue:

Upon review of the eVetAssist system, IAD noted instances where an employee's name was utilized to test the functionality of the system, creating inaccurate production data and the appearance of vouchers issued to an employee.

Recommendation:

IAD recommends that the VSC test functionality in a test environment or use names that would easily be recognized as a test client. This will help to ensure accuracy of the production data.

Management Action Plan:

VSC will ensure that all employees during computer training use non recognized names as test clients.

19. Issue:

Upon detail testing of confidential clients receiving financial assistance, IAD noted one (1) of one (1) instance where financial assistance approval was not documented by the Executive Director.

Recommendation:

IAD recommends that applicable approval be documented for all confidential financial assistances cases. This will help to ensure proper approval and compliance with policies and procedures.

Management Action Plan:

VSC will recommend that all documented confidential financial assistances cases will be approved by the director or the board.

Target Implementation Date: 09/01/2014

II. **Security:**

Security issues noted during fieldwork are addressed under separate cover in the accompanying report in compliance with ORC §149.433.