

**Summit County Executive Office**  
*Human Resources Department*  
**4<sup>th</sup> Audit Follow-up General Report**

**Prepared For:**

**Russell M. Pry**  
**Audit Committee**

**Approved by Audit Committee**  
**March 25, 2015**



**Summit County**  
**Internal Audit Department**  
**175 South Main Street**  
**Akron, Ohio 44308**

*Lisa L. Skapura, Director*  
*Meredith Merry, Assistant Director*  
*Jaime Mayo, Senior Auditor*  
*Brittney Manful, Internal Auditor*

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**Auditors:**

Lisa Skapura, Director; Meredith Merry, Assistant Director; Jaime Mayo, Senior Auditor; Brittney Manfull, Internal Auditor.

**Objectives and Methodology:**

To determine if management has implemented their management action plans as stated in the previously issued Preliminary and Follow up Audit reports.

Audit follow-ups are not required to be conducted under GAO Yellow Book Standards. Due to the nature of this engagement (e.g., following up on issues noted in the prior audit reports with limited planning/assessment of risk and no new issues identified), this audit follow-up was not conducted in accordance with generally accepted government auditing standards.

**Scope:**

An overview and evaluation of policies, processes, and procedures implemented by the department/agency because of management actions stated in the management action plans during the Preliminary and Audit Follow up process.

**Testing Procedures:**

The following were the major audit steps performed:

1. Review the final Preliminary report to gain an understanding of IAD issues, recommendations, and subsequent management action plans completed by the audited department/agency.
2. Review the work papers from the Preliminary Audit.
3. Review any departmental/agency response documentation provided to IAD with management action plan responses following the Preliminary Audit.
4. Identify management actions through discussions/interviews with appropriate departmental personnel to gain an understanding of the updates/actions taken.
5. Review applicable support to evaluate management actions.
6. Determine implementation status of management action plans.
7. Complete the first Follow up Audit report noting the status of previously noted management actions.

**Summary:**

Of the one (1) issue and the corresponding management action plan which required follow-up, one (1) was fully implemented.

Based on the above-noted information, IAD believes the HRD has made a positive effort towards implementing the management action plans as stated in response to the issues identified in the preliminary audit and no further follow up is needed.

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Listed below is a summary of the issues noted in the prior audit, first follow-up, second follow-up, and third audit follow-up reports and their status. Each issue number is in reference to the initial audit report:

**Items Not Requiring Follow-up:**

**Previously Implemented:**

- **Observation 6-** Upon review of the NeoGov system as well as discussion with the Deputy Director of the HRD, IAD noted that access to scanned documents, which may contain confidential information, is not restricted.
- **Issue 1-** The Executive HRD does not have formal written policies and procedures for many administrative processes and day-to-day functions of the department (e.g., expenditures/procurement, Form I-9, etc.). Additionally, there are several policies and procedures that require updating (e.g., incorporating a personnel file checklist into the personnel file policy). Therefore, the HRD is not able to ensure that the administrative processes/work flows are being followed consistently, appropriately, or in accordance with policies.
- **Issue 2-** Upon discussion with the Administrative Assistant, it was noted that the same person places orders, receives the goods ordered and receives vendor invoices causing an improper segregation of duties.
- **Issue 4-** Upon review of the EEO files, there were several instances where IAD was not able to determine the status of the allegations; therefore, making it difficult to determine if the allegations became formal complaints, were still pending, or were dismissed because the allegation did not pertain to discrimination.

**Not Applicable:**

- **Observation 1-** Upon discussion with the Deputy Director of HRD, IAD noted that a policy and procedure manual for the hiring process regarding the NeoGov system does not exist. IAD recognizes that hiring policy is established by Codified Ordinance 169; however, this does not address hiring procedures related to NeoGov including, but not limited to:
  - a. General NeoGov hiring process,
  - b. Making/reviewing overrides,
  - c. Comparison of requisitions to the Staffing Report spreadsheet,
  - d. User addition/removal procedures.
- **Observation 2-** Upon review of the NeoGov training manual, IAD noted several discrepancies between steps in the manual and the actual NeoGov system.
- **Observation 3-** Upon discussion with the Deputy Director of HRD, IAD noted that the addition/removal of users as well as permission changes are initiated verbally.
- **Observation 4-** Upon discussion with the Deputy Director of HRD, IAD noted that a process is currently not in place for the comparison of personnel requisitions to the annual Staffing Report adopted by Council.
- **Observation 5-** Upon discussion with the Deputy Director of HRD as well as observation of the NeoGov “Password Preferences” screen, IAD noted that there is currently no password policy in place for the NeoGov system.

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**Items Requiring Follow-up:**

**Management Action Plans Fully Implemented:**

- **Issue 3-** Upon review of seventy employee personnel files selected for detailed testing, IAD noted the following:
  - a. Thirty-two out of seventy personnel files did not contain a Policy and Procedure manual sign-off,
  - b. Five out of twenty-one applicable personnel files did not contain a Declaration of Material Assistance form (the sample size was reduced because the form is only required for employees hired after 4/16/06),
  - c. Six out of thirty applicable personnel files did not contain a Form SSA-1945 (the sample size was reduced because the form is only required for employees hired after 1/1/05),
  - d. Six out of seventy personnel files did not have confidential information segregated.

*Upon detail testing of personnel files, immaterial exceptions were noted (3% error rate).*