### STATE OF ILLINOIS DEAF AND HARD OF HEARING COMMISSION STATE COMPLIANCE EXAMINATION

For the Two Years Ended June 30, 2021

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### STATE OF ILLINOIS DEAF AND HARD OF HEARING COMMISSION COMPLIANCE EXAMINATION

For the Two Years Ended June 30, 2021

#### **COMMISSION OFFICIALS**

Director (11/02/20 – Present) Mr. Benro Ogunyipe Director (Interim) (07/01/19 – 11/01/20) Ms. Tonia Bogener

Legal Counsel (11/02/20 – Present) Ms. Tonia Bogener

Legal Counsel (07/01/19 – 11/01/20) Vacant

Personnel Manager/Fiscal Officer Ms. Patty Greene

#### **GOVERNING COMMISSION MEMBERS**

Commission Chair Mr. Dennis O'Brien

Commissioner Ms. Amy Blough

Commissioner Mr. Joseph Culpepper

Commissioner Ms. Susan Dramin-Weiss

Commissioner (05/17/21 – Present) Mr. Michael Dubowe

Commissioner (11/05/19 - 05/16/21) Vacant

Commissioner (07/01/19 - 11/04/19) Mr. Bryen Yunashko

Commissioner Mr. David Frazier

Commissioner Ms. Lori Krakora

Commissioner (06/10/21 – Present) Ms. Jennifer Sender

Commissioner (05/22/21 - 06/09/21) Vacant

Commissioner (07/01/19 - 05/21/21) Mr. Jarom Matheson

Commissioner (04/30/21 – Present) Mr. Kevin Smith

Commissioner (11/02/19 - 04/29/21) Vacant

Commissioner (07/01/19 - 11/01/19) Mr. Joseph Obermaier

Commissioner (07/01/19 – Present) Vacant

Commissioner (07/01/19 – Present) Vacant

#### **COMMISSION OFFICE**

The Commission's office is located at:

528 South Fifth Street, Suite 209 Springfield, Illinois 62701

### BENRO OGUNYIPE DIRECTOR

#### MANAGEMENT ASSERTION LETTER

December 9, 2022

Honorable Frank J. Mautino Auditor General State of Illinois 740 East Ash Street Springfield, Illinois 62703-3154

#### Auditor General Mautino:

We are responsible for the identification of, and compliance with, all aspects of laws, regulations, contracts, or grant agreements that could have a material effect on the operations of the State of Illinois, Deaf and Hard of Hearing Commission (Commission). We are responsible for and we have established and maintained an effective system of internal controls over compliance requirements. We have performed an evaluation of the Commission's compliance with the following specified requirements during the two-year period ended June 30, 2021. Based on this evaluation, we assert that during the years ended June 30, 2020, and June 30, 2021, the Commission has materially complied with the specified requirements listed below.

- A. The Commission has obligated, expended, received, and used public funds of the State in accordance with the purpose for which such funds have been appropriated or otherwise authorized by law.
- B. The Commission has obligated, expended, received, and used public funds of the State in accordance with any limitations, restrictions, conditions, or mandatory directions imposed by law upon such obligation, expenditure, receipt, or use.
- C. The Commission has complied, in all material respects, with applicable laws and regulations, including the State uniform accounting system, in its financial and fiscal operations.
- D. State revenues and receipts collected by the Commission are in accordance with applicable laws and regulations and the accounting and recordkeeping of such revenues and receipts is fair, accurate, and in accordance with law.
- E. Money or negotiable securities or similar assets handled by the Commission on behalf of the State or held in trust by the Commission have been properly and legally administered, and the accounting and recordkeeping relating thereto is proper, accurate, and in accordance with law.

Yours truly,

Deaf and Hard of Hearing Commission

#### SIGNED ORIGINAL ON FILE

Mr. Benro Ogunyipe, Director

#### SIGNED ORIGINAL ON FILE

Ms. Patty Greene, Personnel Manager/Fiscal Officer

#### SIGNED ORIGINAL ON FILE

Ms. Tonia Bogener, Legal Counsel

#### **STATE COMPLIANCE REPORT**

#### **SUMMARY**

The State compliance testing performed during this examination was conducted in accordance with attestation standards established by the American Institute of Certified Public Accountants; the standards applicable to attestation engagements contained in *Government Auditing Standards* issued by the Comptroller General of the United States; the Illinois State Auditing Act (Act); and the *Audit Guide*.

#### **ACCOUNTANT'S REPORT**

The Independent Accountant's Report on State Compliance and on Internal Control Over Compliance does not contain scope limitations, disclaimers, but does contain a modified opinion on compliance and identifies material weaknesses in internal control over compliance.

#### **SUMMARY OF FINDINGS**

Number of	<u>Current Report</u>	<u> Prior Report</u>
Findings	11	10
Repeated Findings	7	5
Prior Recommendations Implemented or Not Repeated	3	1

#### **SCHEDULE OF FINDINGS**

Item No.	<u>Page</u>	Last/First Reported	<u>Description</u>	Finding Type		
Current Findings						
2021-001	12	New	Inadequate Controls over Property Control	Material Weakness and Material Noncompliance		
2021-002	14	2019/2017	Inadequate Controls over Receipts	Material Weakness and Material Noncompliance		
2021-003	16	New	Weaknesses in Cybersecurity Programs and Practices	Material Weakness and Material Noncompliance		
2021-004	18	2019/2019	Failure to Submit Internal Control Certifications	Significant Deficiency and Noncompliance		
2021-005	19	2019/2017	Inadequate Controls over Reconciliations	Significant Deficiency and Noncompliance		

2021-006	21	2019/2017	Voucher Processing Weaknesses	Significant Deficiency and Noncompliance
2021-007	23	2019/2019	Noncompliance with the Interpreter for the Deaf License Act	Significant Deficiency and Noncompliance
2021-008	24	New	Lack of Adequate Controls over the Review of Internal Controls for Service Providers	Significant Deficiency and Noncompliance
2021-009	26	2019/2019	Inadequate Controls over Personal Services	Significant Deficiency and Noncompliance
2021-010	28	2019/2019	Failure to Submit Debt Transparency Act	Significant Deficiency and Noncompliance
2021-011	29	New	Disaster Recovery Plan	Significant Deficiency and Noncompliance
			Prior Findings Not Repeated	
A	30	2019/2019	Failure to Provide Requested Engagement Documentation	
В	30	2019/2017	Inadequate Segregation of Duties	
С	30	2019/2017	Inadequate Controls over Agency Fee Imposition Reports	

#### **EXIT CONFERENCE**

The findings and recommendations appearing in this report were discussed with Commission personnel at an exit conference on November 30, 2022.

#### Attending were:

<u>Deaf and Hard of Hearing Commission</u> Benro Ogunyipe, Director Tonia Bogener, Legal Counsel

Office of the Auditor General
Courtney Dzierwa, Statewide Single Audit Manager
Leah Borntreger, State Auditor

The responses to the recommendations were provided by Mr. Benro Ogunype, Director, in a correspondence dated December 9, 2022.

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### OFFICE OF THE AUDITOR GENERAL FRANK J. MAUTINO

### INDEPENDENT ACCOUNTANT'S REPORT ON STATE COMPLIANCE AND ON INTERNAL CONTROL OVER COMPLIANCE

Honorable Frank J. Mautino Auditor General State of Illinois

and

Governing Board State of Illinois, Deaf and Hard of Hearing Commission

#### **Report on State Compliance**

We have examined compliance by the State of Illinois, Deaf and Hard of Hearing Commission (Commission) with the specified requirements listed below, as more fully described in the *Audit Guide* for Financial Audits and Compliance Attestation Engagements of Illinois State Agencies (Audit Guide) as adopted by the Auditor General, during the two years ended June 30, 2021. Management of the Commission is responsible for compliance with the specified requirements. Our responsibility is to express an opinion on the Commission's compliance with the specified requirements based on our examination.

#### The specified requirements are:

- A. The Commission has obligated, expended, received, and used public funds of the State in accordance with the purpose for which such funds have been appropriated or otherwise authorized by law.
- B. The Commission has obligated, expended, received, and used public funds of the State in accordance with any limitations, restrictions, conditions, or mandatory directions imposed by law upon such obligation, expenditure, receipt, or use.
- C. The Commission has complied, in all material respects, with applicable laws and regulations, including the State uniform accounting system, in its financial and fiscal operations.

- D. State revenues and receipts collected by the Commission are in accordance with applicable laws and regulations and the accounting and recordkeeping of such revenues and receipts is fair, accurate, and in accordance with law.
- E. Money or negotiable securities or similar assets handled by the Commission on behalf of the State or held in trust by the Commission have been properly and legally administered and the accounting and recordkeeping relating thereto is proper, accurate, and in accordance with law.

Our examination was conducted in accordance with attestation standards established by the American Institute of Certified Public Accountants, the standards applicable to attestation engagements contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the Illinois State Auditing Act (Act), and the *Audit Guide*. Those standards, the Act, and the *Audit Guide* require that we plan and perform the examination to obtain reasonable assurance about whether the Commission complied with the specified requirements in all material respects. An examination involves performing procedures to obtain evidence about whether the Commission complied with the specified requirements. The nature, timing, and extent of the procedures selected depend on our judgement, including an assessment of the risks of material noncompliance with the specified requirements, whether due to fraud or error. We believe that the evidence we obtained is sufficient and appropriate to provide a reasonable basis for our modified opinion.

We are required to be independent and meet our other ethical responsibilities in accordance with relevant ethical requirements relating to the engagement.

Our examination does not provide a legal determination on the Commission's compliance with the specified requirements.

Our examination disclosed material noncompliance with the following specified requirements applicable to the Commission during the two years ended June 30, 2021. As described in the accompanying Schedule of Findings as items 2021-001 through 2021-003, the Commission had not complied, in all material respects, with applicable laws and regulations, including the state uniform accounting system, in its financial and fiscal operations. In addition, as described in the accompanying Schedule of Findings as item 2021-002, the Commission had not ensured the State revenues and receipts collected by the Commission were in accordance with applicable laws and regulations and the accounting and recordkeeping of such revenues and receipts was fair, accurate, and in accordance with law.

In our opinion, except for the material noncompliance with the specified requirements described in the preceding paragraph, the Commission complied with the specified requirements during the two years ended June 30, 2021, in all material respects. However, the results of our procedures disclosed instances of noncompliance with the specified requirements, which are required to be reported in accordance with criteria established by the *Audit Guide* and are described in the accompanying Schedule of Findings as items 2021-004 through 2021-011.

The Commission's responses to the compliance findings identified in our examination are described in the accompanying Schedule of Findings. The Commission's responses were not subjected to the procedures applied in the examination and, accordingly, we express no opinion on the responses.

The purpose of this report is solely to describe the scope of our testing and the results of that testing in accordance with the requirements of the *Audit Guide*. Accordingly, this report is not suitable for any other purpose.

#### **Report on Internal Control Over Compliance**

Management of the Commission is responsible for establishing and maintaining effective internal control over compliance with the specified requirements (internal control). In planning and performing our examination, we considered the Commission's internal control to determine the examination procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the Commission's compliance with the specified requirements and to test and report on the Commission's internal control in accordance with the *Audit Guide*, but not for the purpose of expressing an opinion on the effectiveness of the Commission's internal control. Accordingly, we do not express an opinion on the effectiveness of the Commission's internal control.

Our consideration of internal control was for the limited purpose described in the preceding paragraph and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies and, therefore, material weaknesses or significant deficiencies may exist that have not been identified. However, as described in the accompanying Schedule of Findings, we did identify certain deficiencies in internal control that we consider to be material weaknesses and significant deficiencies.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with the specified requirements on a timely basis. A material weakness in internal control is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material noncompliance with the specified requirements will not be prevented, or detected and corrected, on a timely basis. We consider the deficiencies described in the accompanying Schedule of Findings as items 2021-001 through 2021-003 to be material weaknesses.

A significant deficiency in internal control is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance. We consider the deficiencies described in the accompanying Schedule of Findings as items 2021-004 through 2021-011 to be significant deficiencies.

As required by the *Audit Guide*, immaterial findings excluded from this report have been reported in a separate letter.

The Commission's responses to the internal control findings identified in our examination are described in the accompanying Schedule of Findings. The Commission's responses were not subjected to the procedures applied in the examination and, accordingly, we express no opinion on the responses.

The purpose of this report is solely to describe the scope of our testing of internal control and the results of that testing based on the requirements of the *Audit Guide*. Accordingly, this report is not suitable for any other purpose.

#### SIGNED ORIGINAL ON FILE

JANE CLARK, CPA Director of Financial and Compliance Audits

Springfield, Illinois December 9, 2022

#### 2021-001. **FINDING** (Inadequate Controls over Property Control)

The Deaf and Hard of Hearing Commission (Commission) did not maintain adequate documentation and control over its State property during the examination period.

During the current examination period, the Commission failed to maintain documentation to substantiate it performed annual inventories of equipment as required. In addition, the Commission implemented the Enterprise Resource Planning (ERP) system during the examination period for its property control records; however, the Commission continued to use the legacy equipment system balances on its quarterly Form C-15 reported to the Office of Comptroller. The total equipment reported on the Form C-15 as of June 30, 2021 totaled \$50,334 while the ERP property control system totaled \$75,790 on June 30, 2021.

Due to these conditions, we were unable to conclude whether the Commission's population of property control records were sufficiently precise and detailed under Attestation Standards promulgated by the America Institute of Certified Public Accountants (AT-C § 205.36) to test the Commission's equipment.

Even given the population limitations noted above which hindered our ability to conclude whether the selected sample was representative of the population, as a whole, we selected a sample of items from the property listing and performed testing. During testing, we noted the following:

- 2 of 24 (8%) equipment items selected for list to floor testing, totaling \$1,706, were not located.
- The Commission submitted 2 of 8 (25%) Quarterly Report of State Property (Form C-15) 4 and 49 days late.

The Illinois Administrative Code (44 III. Admin. Code 5010.460) requires the Commission to make an annual physical inventory of State owned equipment in its possession. The Statewide Accounting Management System (SAMS) (Procedure 29.10.10) requires the Commission to maintain detailed property records for each property item in its possession, including location. Additionally, SAMS (Procedure 29.20.10) requires the Commission to submit the quarterly C-15 reports no later than the last day of the month following the last day of the quarter.

Commission officials attributed the problems with its property control records to competing priorities and the effects of Covid-19 on its operations.

Without the Commission conducting an adequate annual inventory and maintaining property control records that can be traced to its underlying accounting records, we were unable to complete our procedures and provide useful and relevant feedback

to the General Assembly regarding the Commission's property control. Furthermore, failure to maintain accurate property and equipment records represents noncompliance with State laws and regulations and increases the potential for fraud and the possible loss or theft of State property. (Finding Code No. 2021-001)

#### **RECOMMENDATION**

We recommend the Commission maintain complete and accurate property control records and ensure that it files its Quarterly Report of State Property timely.

#### **COMMISSION RESPONSE**

The Commission accepts the above recommendation. The Commission will implement controls for adequate property records and timely reporting.

2021-002. **FINDING** (Inadequate Controls over Receipts)

The Deaf and Hard of Hearing Commission (Commission) had inadequate controls over its receipts.

During testing, we noted the following:

- Five of 60 (8%) receipts tested, totaling \$13,025, were deposited 7 to 38 days late. The State Officers and Employees Money Disposition Act (Act) (30 ILCS 230/2a) requires the Commission to deposit receipts collected into the State Treasury within a specific number of business days, depending on the value of receipts on hand.
- For 27 of 60 (45%) receipts tested, totaling \$13,752, the Commission untimely submitted the Receipt Deposit Transmittals (RDTs) to the Office of Comptroller. The associated RDTs, totaling \$227,206, were submitted from 2 to 238 days after the Commission received the Treasurer's Drafts. The Act (30 ILCS 230/2a) requires the draft or notification of the electronic funds transfer to be provided to the Office of Comptroller to allow deposit into the appropriate fund. Good business practice would require deposits be processed timely to increase the balance of funds available for expenditure.
- The Commission did not have backup personnel for their receipt processing functions resulting in delays in receipt and RDT processing when an employee was absent. The Fiscal Control and Internal Auditing Act (30 ILCS 10/3001) requires the Commission to establish and maintain a system, or systems, of internal fiscal and administrative controls to provide assurance that revenues, expenditures, and transfers of assets, resources or funds applicable to operations are properly recorded and accounted for to permit the preparation of accounts and reliable financial and statistical reports and to maintain accountability over the State's resources.

This finding was first reported in the Commission's State Compliance Examination for the two years ended June 30, 2017. In subsequent years, the Commission has been unsuccessful in implementing adequate corrective action.

Commission officials indicated the problems noted were due to competing priorities. In addition, Commission officials noted when an employee had an extended unplanned leave, the Commission's other employees were unable to access the Enterprise Resource Planning (ERP) system for an extended period of time.

Failure to establish and maintain internal control over receipt processing increases the risk of revenue loss or theft, could delay the recognition of available cash within

the State Treasury, and represents noncompliance with State laws, rules, and regulations. (Finding Code No. 2021-002, 2019-006, 2017-003)

#### **RECOMMENDATION**

We recommend the Commission improve controls over the receipts process to ensure complete recording and timely deposit of receipt transactions and transmittal of receipt deposit forms. Further, we recommend the Commission ensure that there is backup personnel for the receipt processes.

#### **COMMISSION RESPONSE**

The Commission accepts the above recommendation. The Commission will implement procedures for formal reconciliations to be documented and completed in a timely manner.

2021-003. **FINDING** (Weaknesses in Cybersecurity Programs and Practices)

The Deaf and Hard of Hearing Commission (Commission) had not implemented adequate internal controls related to cybersecurity programs, practices and control of confidential information.

In order to meet its primary role of "promoting education and awareness of the legal requirements for effective communication on behalf of people with hearing loss in Illinois," the Commission utilized several Information Technology (IT) applications which contained confidential and personal information.

The Illinois State Auditing Act (30 ILCS 5/3-2.4) requires the Auditor General to review State agencies and their cybersecurity programs and practices. During our examination of the Commission's cybersecurity program, practices, and control of confidential information, we noted the Commission had not:

- Developed a formal, comprehensive, adequate and communicated security program (including policies, procedures, and processes as well as clearly defined responsibilities over the security of computer programs and data) to manage and monitor the regulatory, legal, environmental and operational requirements.
- Developed a risk management methodology, conducted a comprehensive risk assessment, and implemented risk reducing internal controls.
- Established a data classification methodology for classifying its data to ensure adequate protection of the data.

In addition, we noted the Commission had not established a process to review and ensure security incidents identified by the Department of Innovation and Technology (DoIT) involving the Commission's systems or data were fully remediated and related vulnerabilities were assessed.

The Framework for Improving Critical Infrastructure Cybersecurity and the Security and Privacy Controls for Information Systems and Organizations (Special Publication 800-53, Fifth Revision) published by the National Institute of Standards and Technology requires entities to consider risk management practices, threat environments, legal and regulatory requirements, mission objectives and constraints in order to ensure the security of their applications, data, and continued business mission.

The Fiscal Control and Internal Auditing Act (30 ILCS 10/3001) requires the Commission to establish and maintain a system, or systems, of internal fiscal and administrative controls to provide assurance funds, property, and other assets and resources are safeguarded against waste, loss, unauthorized use and misappropriation and maintain accountability over the State's resources.

The Commission indicated the weaknesses were the result of the temporary vacancy of the Commission's IT Coordinator.

The lack of adequate cybersecurity programs and practices could result in unidentified risk and vulnerabilities, which could ultimately lead to the Commission's confidential and personal information being susceptible to cyberattacks and unauthorized disclosure. (Finding Code No. 2021-003)

#### **RECOMMENDATION**

We recommend the Commission:

- Develop a formal, comprehensive, adequate, and communicated security program to manage and monitor the regulatory, legal, environmental and operational requirements.
- Develop a risk management methodology, conduct a comprehensive risk assessment, and implement risk reducing internal controls.
- Develop a data classification methodology.
- Establish a process to review and ensure security incidents identified by DoIT involving the Commission's systems or data are fully remediated and related vulnerabilities are assessed.

#### **COMMISSION RESPONSE**

The Commission accepts the above recommendation. The Commission will work with DoIT to ensure adequate cybersecurity programs and practices are implemented.

#### 2021-004. **FINDING** (Failure to Submit Internal Control Certifications)

The Deaf and Hard of Hearing Commission (Commission) did not comply with the Fiscal Control and Internal Auditing Act (Act).

During testing, we noted the Commission did not prepare or transmit its Fiscal Year 2020 and Fiscal Year 2021 internal control certifications to the Auditor General as required by the Act.

The Fiscal Control and Internal Auditing Act (30 ILCS 10/3003) requires the Commission's Director to prepare and submit to the Auditor General a certification that the systems of internal fiscal and administrative controls of the Commission either comply or do not comply with the Act by May 1<sup>st</sup> of each year.

Commission officials indicated, as they did during the prior examination, the failures were due to competing priorities.

Failure to complete and submit the required certification to the Auditor General may result in weaknesses in internal control going undetected and represents noncompliance with the Act. (Finding Code No. 2021-004, 2019-007)

#### **RECOMMENDATION**

We recommend the Commission ensure they complete and submit their internal control certifications to the Auditor General by May 1 of each year.

#### **COMMISSION RESPONSE**

The Commission accepts the above recommendation. The Commission will implement procedures to ensure timely processing of certifications.

2021-005. **FINDING** (Inadequate Controls over Reconciliations)

The Deaf and Hard of Hearing Commission (Commission) did not ensure all monthly reconciliations of the Commission's cash, receipt, and expenditure records to the records of the Office of Comptroller (Comptroller) were timely performed and fully documented.

During testing, we noted the following:

- The Commission did not document the monthly reconciliation of its internal records to the Comptroller's *Monthly Appropriation Status Report* (SB01) and the Comptroller's *Monthly Cash Report* (SB05) during the examination period.
- The Commission's monthly reconciliations of its receipt records to the Comptroller's *Monthly Revenue Status Report* (SB04) were not dated. Additionally, the Commission failed to document management reviews of the reconciliations so we were unable to determine if the reconciliations were performed timely or properly approved.

This finding was first reported in the Commission's State Compliance Examination for the two years ended June 30, 2017. In subsequent years, the Commission has been unsuccessful in implementing adequate corrective action.

The Statewide Accounting Management System (SAMS) (Procedure 07.30.20) notes the effectiveness of any accounting and financial information system is very much dependent on the accuracy of data submitted and the confidence of its users that the system handles that data properly. Commission reconciliation is the primary control that insures these requirements are being satisfied. As such, SAMS (Procedures 25.40.20, 07.30.20, and 11.40.20) requires the Commission to perform a reconciliation of the monthly reports generated by the Comptroller to its internal accounting records. These reconciliations must be completed within 60 days of each month's end.

Commission officials indicated the reconciliations were not documented as required due to staffing issues.

Failure to timely and properly document reconciliations of the Commission's records to the Comptroller's reports hinders the ability of staff to identify and correct errors which could result in incomplete or inaccurate financial information and represents noncompliance with SAMS requirements. (Finding Code No. 2021-005, 2019-003, 2017-002)

#### **RECOMMENDATION**

We recommend the Commission comply with Comptroller procedures and perform monthly reconciliations in a timely manner. In addition, we recommend the Commission ensures they document the date the reconciliation was completed and approved.

#### **COMMISSION RESPONSE**

The Commission accepts the above recommendation. The Commission will implement procedures for formal reconciliations to be documented and completed in a timely manner.

2021-006. **FINDING** (Voucher Processing Weaknesses)

The Deaf and Hard of Hearing Commission (Commission) did not exercise adequate control over their vouchering process.

During testing, we noted the following:

- For 32 of 87 (37%) vouchers tested, totaling \$82,001, the Commission failed to document the date the invoice was received. The Illinois Administrative Code (74 Ill. Admin Code 900.30) requires the Commission to maintain written or electronic records reflecting the date or dates on which the goods were received and accepted or the services were rendered.
- 28 of 87 (32%) vouchers tested, totaling \$71,086, were approved from 13 to 210 days late. The Illinois Administrative Code (74 Ill. Adm. Code 900.70) requires the Commission to approve proper bills or deny bills with defects, in whole or in part, within 30 days after receipt.
- For 15 of 87 (17%) vouchers tested, totaling \$54,324, the Commission failed to pay accrued interest charges, totaling \$1,001. The State Prompt Payment Act (30 ILCS 540/3-2(1.05)) requires any bill approved for payment under this Section must be paid or the payment issued to the payee within 90 days of receipt of a proper bill or invoice. If payment is not issued to the payee within this 90-day period, an interest penalty must be calculated and paid as required.
- For 12 of 87 (14%) vouchers tested, totaling \$32,529, the information on the top third of the voucher was not accurately entered into the Enterprise Resource Planning (ERP) system. The Fiscal Control and Internal Auditing Act (30 ILCS 10/3001) requires the Commission to establish and maintain a system, or systems, of internal fiscal and administrative controls to provide assurance that revenues, expenditures, and transfers of assets, resources, or funds applicable to operations are properly recorded and accounted for to permit the preparation of accounts and reliable financial and statistical reports and to maintain accountability over the State's resources.

This finding was first reported in the Commission's State Compliance Examination for the two years ended June 30, 2017. In subsequent years, the Commission has been unsuccessful in implementing adequate corrective action.

Commission officials indicated the issues were due to a lack of staff, staff absences, and competing priorities.

Failure to timely approve, accurately enter, and maintain documentation to support the timely approvals of vouchers as well as the interest owed and paid, could lead

to the misuse of State funds and inaccurate and incomplete expenditure records. (Finding Code No. 2021-006, 2019-004, 2017-005)

#### **RECOMMENDATION**

We recommend the Commission:

- Document invoice received dates;
- Approve proper bills or return bills with identified defects to vendors timely;
- Pay interest charges when applicable; and,
- Carefully review data entered into the ERP system for accuracy.

#### **COMMISSION RESPONSE**

The Commission accepts the above recommendation. The Commission has already implemented procedures for backup personnel and will review procedures to ensure timely processing of receipt transactions.

2021-007. **FINDING** (Noncompliance with the Interpreter for the Deaf License Act)

The Deaf and Hard of Hearing Commission (Commission) did not comply with statutory requirements enumerated in the Interpreter for the Deaf Licensure Act of 2007 (Act).

During testing, we noted the following:

- The Commission used fiscal year information to report new and renewal interpreter licenses, instead of calendar year information, as required.
- The Commission's report was not timely prepared or filed. We could not determine when the Commission filed the reports; however, we noted the reports were both printed in April 2021.

The Act (225 ILCS 443/47) requires, by May 1 of each year, the Commission to prepare and publish a report of statistical information related to new and renewal license applications during the preceding calendar year. The information required to be presented in this report includes the number of new or renewal applications where the applicant had previous criminal convictions and whether the application was approved or denied.

Commission officials indicated competing priorities, along with staffing limitations, contributed to the issues noted with the reports.

Failure to timely prepare and submit the required statistical information inhibits the ability of interested parties to obtain the required statistical information relating to new and renewal licenses. (Finding Code No. 2021-007, 2019-005)

#### **RECOMMENDATION**

We recommend the Commission ensure it timely reports all required statistical information as required. In addition, we recommend the Commission retain documentation to support the timely reporting of the information.

#### **COMMISSION RESPONSE**

The Commission accepts the above recommendation. The Commission will implement procedures to ensure compliance with statutory requirements.

2021-008. **FINDING** (Lack of Adequate Controls over the Review of Internal Controls for Service Providers)

The Deaf and Hard of Hearing Commission (Commission) had not implemented adequate internal controls over its service providers.

In order to carry out its mission, the Commission utilized service providers for hosting services and software as a service. We requested the Commission to provide the population of services providers utilized to determine if they had reviewed the internal controls over their service providers. In response to our request, the Commission provided a listing; however, they did not provide documentation demonstrating the population was complete and accurate.

Due to these conditions, we were unable to conclude the Commission's population records were sufficiently precise and detailed under the Professional Standards promulgated by the American Institute of Certified Public Accountants (AT-C § 205.36).

Even given the population limitations noted above, we performed testing over the service providers identified by the Commission. During our testing, we noted the Commission had not obtained System and Organization Control (SOC) reports or conducted independent internal control reviews of the two (100%) service providers identified by the Commission.

The Fiscal Control and Internal Auditing Act (30 ILCS 10/3001) requires the Commission to establish and maintain a system, or systems, of internal fiscal and administrative controls to provide assurance funds, property, and other assets and resources are safeguarded against waste, loss, unauthorized use and misappropriation and maintain accountability over the State's resources.

The Security and Privacy Controls for Information Systems and Organizations (Special Publication 800-53, Fifth Revision) published by the National Institute of Standards and Technology (NIST), Maintenance and System and Service Acquisition sections, requires entities outsourcing their IT environment or operations to obtain assurance over the entities internal controls related to the services provided. Such assurance may be obtained via System and Organization Control reports or independent reviews.

Commission officials indicated competing priorities contributed to the conditions noted.

Without having obtained and reviewed a SOC report or another form of independent internal controls review, the Commission does not have assurance the service providers' internal controls are adequate. (Finding Code No. 2021-008)

#### **RECOMMENDATION**

We recommend the Commission strengthen its controls in identifying and documenting all service providers utilized. Further, we recommend the Commission obtain SOC reports or conduct independent internal control reviews at least annually. In addition, we recommend the Commission:

- Monitor and document the operation of the Complementary User Entity Controls (CUECs) related to the Commission's operations.
- Either obtain and review SOC reports for subservice organizations or perform alternative procedures to satisfy itself that the existence of the subservice organization would not impact its internal control environment.
- Document its review of the SOC reports and review all significant issues with subservice organizations to ascertain if a corrective action plan exists and when it will be implemented, any impact to the Commission, and any compensating controls.

#### **COMMISSION RESPONSE**

The Commission accepts the above recommendation. The Commission will review and implement necessary procedures to obtain and review the necessary reports related to its services providers.

2021-009. **FINDING** (Inadequate Controls over Personal Services)

The Deaf and Hard of Hearing Commission (Commission) did not maintain adequate controls over personal services.

During testing, we noted the following:

- The Commission certified its listing of employees required to file economic interest statements 17 days after the deadline. The Illinois Governmental Ethics Act (5 ILCS 420/4A-106) requires the Chief Administrative Officer to certify the names and mailing addresses of those required to file statements of economic interest on or before February 1 of each year.
- The Commission did not complete annual evaluations for 2 of 4 (50%) employees tested. The Illinois Administrative Code (80 Ill. Admin. Code 302.270(d)) requires agencies to conduct performance evaluations at least annually.
- The Commission filed its Fiscal Year 2020 Agency Workforce Report with the Secretary of State 7 days after the deadline. The State Employment Records Act (5 ILCS 410/20) requires the Commission to file an annual Agency Workforce Report with the Secretary of State and the Governor by January 1 of each year.

Commission officials indicated the issues noted were mainly due to unfilled vacancies in the Commission's staff. Commission officials also noted the Fiscal Year 2020 Agency Workforce Report was prepared timely but was filed late due to COVID restrictions.

Failure to timely certify the employees who are required to file a statement of economic interest is noncompliance with the Illinois Governmental Ethics Act. Performance evaluations should be performed in a timely manner as they are an important component of the communication between the employee and employer on the performance and future expectations of the employee in the workplace. Failure to timely file the Agency Workforce Report is noncompliance with the State Employment Records Act. (Finding Code No. 2021-009, 2019-009)

#### RECOMMENDATION

We recommend the Commission strengthen its internal controls over personal services to ensure all required employee evaluations are administered. In addition, we recommend the Commission timely file their listing of economic interest filers and Agency Workforce Report.

#### **COMMISSION RESPONSE**

The Commission accepts the above recommendation. The Commission will implement procedures to ensure timely completion of evaluations and reports.

2021-010. **FINDING** (Failure to Submit Debt Transparency Reports)

The Deaf and Hard of Hearing Commission (Commission) did not comply with held invoice reporting requirements established by the State Finance Act (Act).

During testing, we noted the Commission did not prepare and file 24 of 24 (100%) Debt Transparency Act Reports (SCO-961) as required.

The State Finance Act (Act) (30 ILCS 105/9.08(a)) requires the Commission to provide a report to the Office of Comptroller identifying: (1) current State liabilities held at the Commission, by fund source; (2) whether the liabilities are appropriated; and (3) an estimate of interest penalties accrued under the State Prompt Payment Act. In addition, the Statewide Accounting Management System (SAMS) (Procedure 33.17.20) requires reports to be submitted to the Office of Comptroller by the 10<sup>th</sup> day of each month.

Commission officials indicated the reports were not prepared and filed due to competing priorities.

Failure to report the aggregate dollar amount of bills held is noncompliance with the Act and reduces governmental oversight. (Finding Code No. 2021-010, 2019-010)

#### RECOMMENDATION

We recommend the Commission strengthen its controls and procedures to ensure it complies with held invoice reporting requirements established by the State Finance Act.

#### **COMMISSION RESPONSE**

The Commission accepts the above recommendation. The Commission will implement procedures to submit reports in a timely manner.

#### 2021-011. **FINDING** (Disaster Recovery Planning Weaknesses)

The Deaf and Hard of Hearing Commission (Commission) had not developed a Disaster Recovery plan.

In order to carry out its mission, the Commission utilizes several IT applications. During our examination, we requested the Commission's disaster recovery plan to ensure timely recovery of its applications and data. However, the Commission had not developed a disaster recovery plan.

The Contingency Planning Guide for Information Technology Systems published by the National Institute of Standards and Technology requires entities to have an updated and regularly tested disaster contingency plan to ensure the timely recovery of applications and data.

The Fiscal Control and Internal Auditing Act (30 ILCS 10/3001) requires the Commission to establish and maintain a system, or systems, of internal fiscal and administrative controls to provide assurance funds, property, and other assets and resources are safeguarded against waste, loss, unauthorized use and misappropriation and maintain accountability over the State's resources.

The Commission indicated the weakness was the result of the temporary vacancy of the Commission's IT Coordinator.

Without an adequately documented and tested contingency plan, the Commission cannot ensure its critical systems could be recovered within an acceptable period, and therefore minimizing the impact associated with a disaster. (Finding Code No. 2021-011)

#### RECOMMENDATION

We recommend the Commission develop a disaster recovery plan to ensure the timely recovery of their application and data. Additionally, once developed, we recommend the Commission periodically test the disaster recovery plan.

#### **COMMISSION RESPONSE**

The Commission accepts the above recommendation. The Commission will work with DoIT to implement a comprehensive disaster recovery plan.

### STATE OF ILLINOIS DEAF AND HARD OF HEARING COMMISSION SCHEDULE OF FINDINGS – PRIOR FINDINGS NOT REPEATED For the Two Years Ended June 30, 2021

#### A. **FINDING** (Failure to Provide Requested Engagement Documents)

During the prior examination, the Deaf and Hard of Hearing Commission (Commission) did not provide requested documentation regarding its operation of the petty cash fund, property control operations, and policies and procedures governing confidential information.

During the current examination, the Commission provided the requested documentation and support for our examination testing. (Finding Code No. 2019-001)

#### B. **FINDING** (Inadequate Segregation of Duties)

During the prior examination, the Commission did not have adequate segregation of duties over its non-payroll expenditure processing function.

During the current examination, our sample testing showed the Commission implemented changes to its procedures to address the lack of segregation of duties in its non-payroll expenditure processing. (Finding Code No. 2019-002, 2017-001)

#### C. **FINDING** (Inadequate Controls over Agency Fee Imposition Reports)

During the prior examination, the Commission reported the incorrect number of fees collected on its *Agency Fee Imposition Reports* (Report). In addition, the Commission did not maintain copies of the Reports filed.

During the current examination, our sample testing showed the Commission reported accurate information and maintained copies of its Reports. (Finding Code No. 2019-008, 2017-004)