STATE OF ILLINOIS

OFFICE OF THE AUDITOR GENERAL

Release Date: July 13, 2022

Frank J. Mautino, Auditor General

SUMMARY REPORT DIGEST

SUPREME COURT OF ILLINOIS

State Compliance Examination For the Two Years Ended June 30, 2021

FINDINGS THIS AUDIT: 2				AGING SCHEDULE OF REPEATED FINDINGS						
	New	Repeat	<u>Total</u>	Repeated Since	Category 1	Category 2	Category 3			
Category 1:	0	0	0	2019		21-02				
Category 2:	1	1	2							
Category 3:	0	_0	0							
TOTAL	1	1	2							
FINDINGS LAST AUDIT: 1										

INTRODUCTION

Our compliance examination of the Supreme Court included Appellate Court Districts 1-5 and the Illinois Courts Commission.

SYNOPSIS

- (21-01) The Court did not maintain adequate internal controls related to its cybersecurity programs and practices.
- (21-02) The Court did not maintain adequate controls over its service providers.

Category 1: Findings that are **material weaknesses** in internal control and/or a **qualification** on compliance with State laws and regulations (material noncompliance).

Category 2: Findings that are significant deficiencies in internal control and noncompliance with State laws and regulations.

Category 3: Findings that have no internal control issues but are in noncompliance with State laws and regulations.

SUPREME COURT OF ILLINOIS STATE COMPLIANCE EXAMINATION For the Two Years Ended June 30, 2021

EXPENDITURE STATISTICS	2021	2020	2019
Total Expenditures	\$ 427,378,470	\$ 409,088,364	\$ 350,902,660
OPERATIONS TOTAL	\$ 277,474,733 64.9%	\$ 272,836,618 66.7%	\$ 264,771,522 75.5%
Personal Services Other Payroll Costs (FICA, Retirement) All Other Operating Expenditures	239,923,720 7,445,469 30,105,544	233,801,996 7,234,222 31,800,400	227,405,324 7,046,634 30,319,564
AWARDS AND GRANTS	\$ 149,889,145 35.1%	\$ 136,240,008 33.3%	\$ 86,127,861 24.5%
REFUNDS% of Total Expenditures	\$ 14,592 0.0%	\$ 11,738 0.0%	\$ 3,277 0.0%
Total Receipts	\$ 1,844,373	\$ 1,737,423	\$ 1,610,595
Average Number of Employees	1,562	1,550	1,552

AGENCY DIRECTOR

During Examination Period: Marcia M. Meis

Currently: Marcia M. Meis

FINDINGS, CONCLUSIONS, AND RECOMMENDATIONS

WEAKNESSES IN CYBERSECURITY PROGRAMS AND PRACTICES

The Court did not maintain adequate internal controls related to its cybersecurity programs and practices.

During our examination of the Court's cybersecurity programs and practices, we noted the Court had not:

Policies and procedures lacking

Annual cybersecurity training not

provided

- Established policies and procedures governing the controls related to the onboarding of staff and contractors.
- Ensured all staff and contractors received and acknowledged receipt of the security policies at least annually.
- Provided cybersecurity training to staff and contractors upon hiring and annually thereafter.
- Developed a project management framework to ensure new applications were adequately developed and implemented in accordance with management's expectations.
- Developed a comprehensive system development methodology.
- Developed a comprehensive cybersecurity plan.
- Developed a risk management methodology, conducted a comprehensive risk assessment, or implemented risk reducing controls.
- Developed a data classification methodology.
- Developed procedures for implementing and monitoring identified vulnerabilities. (Finding 1, pages 10-12)

Court lacked a comprehensive risk assessment

We recommended the Court:

- Establish policies and procedures governing the controls related to the onboarding of staff and contractors.
- Ensure all staff and contractors receive and acknowledge receipt of the security policies at least annually.
- Provide cybersecurity training to staff and contractors upon hiring and annually thereafter.
- Develop a project management framework to ensure new applications are adequately developed and implemented in accordance with management's expectations.
- Develop a comprehensive system development methodology, including details on the development phases, documentation requirements, user testing requirements and management approvals.
- Develop a comprehensive cybersecurity plan.

- Develop a risk management methodology, conduct a comprehensive risk assessment, and implement risk reducing controls.
- Develop a data classification methodology, including data classifications and details on determining the classifications are adequately secured.
- Develop procedures for implementing and monitoring identified vulnerabilities.

Management stated the Court agrees with limited parts of the finding and will continue to follow best practices to enhance its documentation and planning. Management also stated the audit finding as drafted does not acknowledge or reference the Court's many cybersecurity protocols and procedures that are in place.

In an accountant's comment, the accountants stated the Court failed to provide documentation to support the controls in place. The lack of documentation hinders our ability to review and assess the Court's cybersecurity program and practices.

INADEQUATE CONTROLS OVER THE REVIEW OF INTERNAL CONTROLS OVER SERVICE PROVIDERS

The Court did not maintain adequate controls over its service providers.

The Court did not provide documentation demonstrating their listing of service providers was complete and accurate. Due to these conditions, we are unable to conclude the Court's population records were sufficiently precise and detailed under the Professional Standards promulgated by the American Institute of Certified Public Accountants (AT-C § 205.35).

We performed testing over the one service provider identified by the Court. During our testing we noted for the period of July 1, 2020 through June 30, 2021, the Court had not:

- Obtained a System and Organization Control (SOC) report.
- Conducted an analysis of the Complementary User Entity Controls (CUECs).
- Obtained and reviewed SOC reports for subservice organizations or performed alternative procedures to determine the impact on its internal control environment. (Finding 2, pages 13-14)

We recommended the Court implement controls to identify and document all service providers utilized. We also recommended the Court obtain SOC reports annually. We further recommend the Court:

• Monitor and document the operation of the CUECs related to the Court's operations.

Court partially agreed

Court failed to provide documentation to support controls in place

SOC report not obtained and analyzed for Fiscal Year 2021

- Either obtain and review SOC reports for subservice organizations or perform alternative procedures to satisfy itself the existence of the subservice organization would not impact the 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 Court, and any compensating controls.

Court disagreed

Court management disagreed with the finding and stated the Court performs System and Organization Control (SOC) reviews for service organizations, which analyzes all service providers contracted by the Court's IT division. Contracts and vendor lists are reviewed to obtain a list of all potential service organizations. An assessment is completed for the service analysis organizations, including an of subservice organizations, to distinguish between service organizations and vendors. SOC reports are then reviewed and analyzed for all service organizations to ensure that controls exist and relate to the services provided.

Court did not provide SOC reports or analysis of SOC reports for Fiscal Year 2021

An accountant's comment stated although the Court reviewed the Fiscal Year 2020 SOC report performed by an independent service auditor, we were not provided the SOC reports or their analysis of the SOC reports for Fiscal Year 2021.

ACCOUNTANT'S OPINION

The accountants conducted a State compliance examination of the Court for the two years ended June 30, 2021, as required by the Illinois State Auditing Act. The accountants stated the Agency complied, in all material respects, with the requirements described in the report.

This State compliance examination was conducted by Adelfia LLC.

SIGNED ORIGINAL ON FILE

JANE CLARK
Division Director

This report is transmitted in accordance with Section 3-14 of the Illinois State Auditing Act.

SIGNED ORIGINAL ON FILE

FRANK J. MAUTINO Auditor General

FJM:lkw