



Business Services Division Memo

To: OUSD Audit Committee
Elizabeth Ross, Chair

From: Lisa Grant-Dawson, Chief Business Officer
Ryan Nguyen, Controller

Subject: 2022-23 Audit Findings Tracker

Date: February 5, 2024

Dear Chair Ross and the members of the OUSD Audit Committee,

Please find a copy of the Audit Findings tracker summarizing our findings status as of the 2022-23 audit. District staff will also be present to provide any updates from the staff if requested.

In Community,

Lisa Grant-Dawson
Chief Business Officer
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Ryan Nguyen
Controller
Ryan.Nguyen@ousd.org

Audit Committee Audit Findings Tracker

Audit Year						2021	2022	2023	Audit Finding Description	Views of Responsible Officials Planned Corrective Action Summary 2022	Responsible parties, departments and/or assigned director	Additional mechanisms, rules, procedures implemented to ensure integrity, accountability and prevent fraud and/or additions to monitoring process	2022-23 Corrective Action Plan	2020-21 Corrective Action Form
2016	2017	2018	2019	2020	2021									
x	x	x	x	x	X	2021-001	Resolved	Resolved	2020-001 Associated Student Body (ASB) Accounts auditable summary lacking and therefore ASB accounts are not included in the financial accounts. Material weakness in internal control.	ASB Works, an ASB accounting system, is being rolled out and training scheduled for February 2021.	Ryan Nguyen, Controller All Principals with ASB Accounts	The Business Services Department has and will continue to provide training for all sites that have and are considering ASB Accounts. Monthly reconciliations and documentation.		
			x	x	X	R 2021-002	R 2022-001	Implemented	2020-002 The District provided less than the complete audit sample of supporting documentation establishing that census information and payroll amounts reported to pension providers are complete and accurate. Therefore, we could only complete some of the procedures required by the AICPA SLG for testing the census information of employers participating in a PERS. We could not conclude if the information on which pension payments are based is complete and accurate.	A designated area of focus by district management. Resolution requires both systems changes and procedural changes followed by training.	Nicole Caldwell, Director Payroll			
			x	x	X	R 2021-003	R 2022-002	Implemented	2022-02 The District provided only some documentation that we requested to support that vacation usage is accurately recorded in the payroll system, and that balances do not exceed the maximum allowed per District policy.	Leadership team is revising procedures.	Lisa Grant-Dawson, Business Services, Jenine Lindsey, Labor Relations, & Tara Gard, Human Resources	The District is aligning its practices to the Contractual Bargaining Agreements and working with Labor Relations, Human Resources, and Bargaining Unit Leadership.		
x		x	x	x				Resolved	2020-004 Documentation to support vendor selection is pursuant to District policy lacking. Significant deficiency in internal control.	District is developing new procedures which may result in recommendation to board for revised purchasing policies.	Kimberley Rane, Director Purchasing, Transportation and Warehouse, Ryan Nguyen, Controller and Lisa Grant-Dawson			
		x	x	x	X	R 2021-005	R 2022-004	Implemented	Health Benefits Governing Board: The formula to calculate the District's health and welfare obligations per the HBGB agreement is unclear and has been interpreted differently with substantially varying outcomes.	HBGB negotiations in progress.	Lisa Grant-Dawson, Business Services, Jenine Lindsey, Labor Relations, & Tara Gard, Human Resources, Josh Daniels, General Counsel			
			x	x	X	R 2021-006	R 2022-005	Resolved	Audit adjustments were necessary for the financial statements to be presented to conform with generally accepted accounting principles.	Accounting controls and procedures will be part of training.	Corrected			
x	x	x	x	x				Resolved	2020-007 Documentation required to support employee time allocation for federal programs is insufficient. Material weakness in internal control.	Procedure implementation began January 2021.	Lisa Spielman, Director Strategic Resource Planning	Implemented and in progress		
				x				Resolved	2020-008 Evidence that vendors for child nutrition and food service programs were selected according to Uniform Guidance is lacking. Material weakness in internal control.	Procedures being centralized under Director of Transportation and Purchasing.	Preston Thomas, Chief Systems & Services Officer & Kimberly Rane, Director Purchasing, Transportation and Warehouse			
	x	x		x				Resolved	2020-009 Students incorrectly identified as qualifying for free or reduced price meals. Material weakness in internal control.	Technology staff to work with child nutrition staff to ensure documentation is complete, reviewed and reconciled.	Lisa Grant-Dawson, Preston Thomas, and Susan Beltz, Director of Technology			
x	x	x	x	x	X	R 2021-007	R 2022-006	2023-001	Twenty-First Century Attendance Reporting: A material weakness in internal control and material noncompliance with attendance reporting Code 50000.	Federal and State compliance department to develop procedures.	Martha Pena, Coordinator After School Program	The District must Continue it's implementation of it's new accounting system.		
				x				Resolved	2020-011 Funds spent on early intervention services for special education should be tracked separately from other special education services. Material weakness in internal control.	TBD	Jennifer Blake			
		x	x	x	X	R 2021-008	Resolved	Resolved	2020-012 Average daily attendance (ADA) would have been overstated but for an audit adjustment. There is a known glitch in the attendance system that requires a technology fix. There are policies in place to manually correct these errors, but processes and policies to ensure that the corrections are made at secondary sites need to be enforced.	Policies and procedures will be revised as identified.	Lisa Grant-Dawson, Preston Thomas, Susan Beltz and Ryan Nguyen			
x		x	x	x	X	2021-010	2022-007	2023-002	EDC §35186(d) requires that a school district report summarized data on the nature and resolution of all complaints quarterly to the county superintendent of schools and the school district's governing board. The summaries shall be publicly reported quarterly at a regularly scheduled meeting of the school district's governing board.	Central office staff are developing procedures and evaluating staffing needs as a gap has existed since 2018.	Lisa Grant-Dawson	The District did not provide the quarterly summaries described in the criteria paragraph.		
				x				Resolved	2020-014 School accountability report card - failure to provide an adequate facility inspection tool or equivalent to document conditions reported in facilities for 11 out of 18 sites sampled.	Identified by district as a gap in assignment and will take corrective action.	Lisa Grant-Dawson			
x	x	x	x	x				Resolved	2020-015 Unduplicated local control funding formula (LCFF) pupil count audit sample incorrectly classified one English learner (EL) and two free or reduced price meal (FRPM), one EL (2019) and FRPM (2018). Internal control process has inadequate monitoring.	District to review assignments and data validation procedures.	Lisa Grant-Dawson, Preston Thomas, and Susan Beltz, Director of Technology			

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x	x	x	x	x	x	2021-001	Resolved	Resolved	2020-001 Associated Student Body (ASB) Accounts auditable summary lacking and therefore ASB accounts are not included in the financial accounts. Material weakness in internal control.	ASB Works, an ASB accounting system, is being rolled out and training scheduled for February 2021.	Ryan Nguyen, Controller All Principals with ASB Accounts	The Business Services Department has and will continue to provide training for all sites that have and are considering ASB Accounts. Monthly reconciliations and documentation.		
						R 2020-001	Resolved	Resolved	2021-001 A material weakness in internal control over financial reporting – The District cannot provide documented evidence that all student body activity is captured within its accounting records. Furthermore, the District is developing the controls to ensure that student activity funds are expended for allowable activities and accordingly were not auditable for the year ended June 30, 2021.					
						R 2020-002		Resolved	2021-002 - A material weakness in internal control over financial reporting – The District could not supply documentation to satisfy us that census information and payroll amounts reported to pension providers are complete and accurate. We analytically recalculated these expenses, noting that the payment made to pension providers during the year appears correctly recorded in the accounting records of the District. However, since we could not verify if the underlying data on which those charges are based is complete and accurate, we cannot confirm if the eventual payments are for the correct amounts.					
						R 2020-003		Resolved	2021-003 - A material weakness in internal control over financial reporting – The District was unable to supply documentation to prove that vacation usage is accurately recorded in the payroll system and that balances do not exceed the maximum allowed per District policy. Furthermore, we noted that the controls over the calculation of accrued vacation on separation do not include documentary evidence of an independent reviewer. The District verbally informed us that someone independent of the preparer reviews each calculation. However, because evidence of the control is not documented, we consider this to be evidence of a material weakness. In substantive testing of general ledger account balances, the reported payroll expenditures are fairly stated based on the amounts paid upon separation. However, we cannot conclude if the District has a complete and accurate accounting of vacation balances on which to base payments upon separation.					
						2021-004	2022-003	Implemented	2021-004 Payroll Internal Control Process, Vacation Payments A material weakness in internal control over financial reporting – The District was able to pay \$7 million to employees for vacation accumulated; however, it is unable to assert that the amounts paid were actually due to the employees.					
						R 2020-006	2022-005	Implemented	2021-006 A material weakness in internal control over financial reporting – Audit adjustments was necessary for the financial statements to be presented to conform with generally accepted accounting principles.					

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					X	R 2020-010	R 2022-007	Resolved	School Accountability Report Card: EDC §35186(d) requires that a school district shall report summarized data on the nature and resolution of all complaints on a quarterly basis to the county superintendent of schools and the governing board of the school district. The summaries shall be publicly reported on a quarterly basis at a regularly scheduled meeting of the governing board of the school district. The District did not provide us with the quarterly summaries described in the criteria paragraph and accordingly we could not complete all State compliance procedures regarding the SARC.					
						R 2020-012		Resolved	2021-008 - If not for audit adjustments, reported attendance, and by extension, state funding that is based on ADA would have been overstated. Aeries defaults students as present unless specially marked absent by the classroom teacher. The District's internal control process requires site clerks to verify that a "single period" attendance is correct. We identified instances where the verification occurred, but the necessary revisions to the Aeries attendance records did not happen. Furthermore, various designations are used to record when students are absent because of, for example, illness, vacation, field trip, unexcused. We identified instances where students were counted as "present" when multiple absence codes were used on a single day.					
					X	2021-009	Resolved	Resolved	2021-009 Teacher Certification and Missignments - From a sample of 100, we identified two possible instances of noncompliance. One sample was identified with an attempted transfer out of state credential but not valid currently, and the last sample was identified showing no credential.					
					X	R 2020-013	2022-07	Resolved	Audit Finding 2021-010 School Accountability Report Card - The District did not provide us with the quarterly summaries described in the criteria paragraph.					
							2022-008	2023-003	Criteria: The District must maintain certain written agreements required by the State for pupils enrolled in an independent study program and make the contracts available during the annual State compliance audit. Condition: The independent study agreement did not sign in the required timeline.			We recommend that the District periodically revisit its procedures for compliance and remind site personnel of them.		
							2022-009	2023-004	Criteria: Per the State compliance audit guide: "If a pupil in any sample attended less than the full day, verify the reason for early release was consistent with the established early release policy." Condition: District policy is to document the reason for "early release" with a "code" corresponding to a permissible basis per the District's established early release policy. However, our audit procedures identified that all sites did not use early-release codes.			Cause and Recommendation: We recommend that management responsible for compliance periodically remind site personnel of the District's policies and provide training as necessary. We suggest direction periodically monitor the attendance recording		
							2022-010	2023-005	Criteria: The District evidences student participation in the after-school program by reporting attendance to the California Department of Education. The daily attendance is recorded for all the students attending the after-school program on each school day the program operates. Condition: We identified errors in the attendance reported to the CDE.			Cause and Recommendation: In response to prior audit findings, the District transitioned to a new attendance accounting system for the after-school program during the year. Although management of the District expects the new system will ultimately increase the accuracy of attendance reporting, there were challenges as the system was new this year. We program. Lessons learned from the year of implementation should be used to improve the process going forward.		

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							2022-011	2023-006	Criteria: The LEA audit guide requires us to verify if the District has specific information on file regarding immunization records of pupils attending public school. Condition: The District could not provide all the information necessary to establish full compliance.			Cause and Recommendation: We recommend that management responsible for compliance periodically remind site personnel of the District's policies and provide training as necessary. We suggest direction periodically monitor the attendance recording policies and provide training as necessary. We also suggest that management periodically monitor immunization compliance on a sample basis for timely identification of deviation from District policy.		
								NEW: 2023-007	Criteria: As a condition of receiving apportionments under Section 41850.1, a local educational agency shall develop a plan describing the transportation services it will offer to its pupils, and how it will prioritize planned transportation services for pupils in transitional kindergarten, kindergarten, and any of grades 1 to 6, inclusive, and pupils who are low income. Condition: The District did not have a plan adopted as per the requirement of on or before April 1, 2023.			Cause and Recommendation: There is no opt-option for District that do not adopt a plan. The District must, however, pay the amount back to the State and therefore the District reports an accounts payable for that amount.	The District is preparing it's engagement and adoption plan for the 2023-24 Funding Cycle and has booked the Payable Liability for the funds to be returned. The District lost the momentum to complete this task last year due to the shift in focus due to the Board's rescinded school closure resolution in January.	
9	12	14	13	15	10	10	11	7						