



**Office of Internal Audit
External Quality Assurance Review**

November 2024



Office of Internal Audit

FLORIDA INTERNATIONAL UNIVERSITY

DATE: January 22, 2025

TO: Alan Gonzalez, Audit and Compliance Committee Chair
FIU Board of Trustees
Kenneth A. Jessell, University President

FROM: Trevor L. Williams, Chief Audit Executive

A handwritten signature in blue ink, appearing to read 'Trevor L. Williams', is written over the printed name of the Chief Audit Executive.

**SUBJECT: Office of Internal Audit External Quality Assurance Review –
November 2024**

The Office of Internal Audit is required to undergo an external quality assurance review (QAR) at least every five years. A team of independent external reviewers was engaged to complete an external QAR of the Office of Internal Audit to assess the Office's conformance with The Institute of Internal Auditors' (IIA) *International Standards for the Professional Practice of Internal Auditing* ("Standards") and Code of Ethics. The review also sought to identify opportunities to enhance the Office's operations with recommended best practices.

The IIA has provided two different approaches, without prejudice or preference, which audit departments could employ to satisfy this requirement, having a full external assessment completed or allowing audit departments to perform an internal self-assessment with validation by an independent external assessor or team of assessors. We selected the internal self-assessment with external validation model for this review engagement. It is much less costly and has the same recognition, validity, and usefulness, as does a full external assessment.

The independent external reviewers performed their review of the Office's internal auditing function during the months of October and November 2024, and issued their final report in December 2024. The report concluded that the FIU Office of Internal Audit "**Generally Conforms**," with the IIA's Standards and Code of Ethics—the highest of three possible ratings that can be achieved. The report further noted that the Office of Internal Audit is regarded as a highly professional and valuable function at FIU, an acknowledgment of which we are very proud of. The reviewers also offered a few recommended best practices as opportunities for enhancement. In response to the recommendations, we have developed an action plan to address the matters noted. The final external QAR report and action plan are attached for your review and approval.

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**Review of the Independent Validation
of the Quality Self-Assessment of the
Florida International University
Office of Internal Audit**

November 2024

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Mr. Trevor Williams, Chief Audit Executive
Florida International University

In August 2024, the Florida International University (FIU) Office of Internal Audit (OIA) completed a self-assessment of internal audit activities in accordance with guidelines published by the Institute of Internal Auditors (IIA) for the performance of a quality assessment review (QAR). The OIA engaged us as an independent review team of internal audit professionals with extensive higher education experience to perform an independent validation of their QAR self-assessment. We appreciate the opportunity to provide the insight and engagement results in the report which follows.

The primary objective of the validation was to verify the assertions made in the QAR self-assessment report concerning OIA's conformity to the IIA *International Standards for the Professional Practice of Internal Auditing* (Standards) and Code of Ethics. The review covered the internal audit activities of the OIA during the period between July 1, 2019, and June 30, 2024. Our independent validation followed the guidance contained in the IIA *Quality Assessment Manual for the Internal Audit Activity* (Quality Assessment Manual), 2017 edition.

We addressed the objective through review of the self-assessment report and supporting documents prepared and made available to us by the OIA; review of the OIA work papers and periodic quality assurance and improvement program (QAIP) results; and interviews of selected OIA stakeholders and OIA staff members. These activities were performed between August and October 2024.

Based on our independent validation of the QAR performed by the OIA, we agree with the overall conclusion that the FIU internal audit function **"Generally Conforms"** with the IIA Standards and Code of Ethics. Additionally, we noted that OIA is regarded as a highly professional and valuable function at FIU, indicating that the team is accomplishing its mission. In our review we noted strengths as well as opportunities for enhancing the internal audit function, as outlined in the report.

We appreciate the cooperation and assistance provided to us throughout the course of our review by the members of the OIA and the FIU community.

Very truly yours,



Agnessa Vartanova

CPA, CIA, CISA, CFE, CRMA
Associate Vice President
Department of Internal Audit
University of Colorado



Reuben Iyamu

CIA, CFE, CIGA, CIG
Inspector General
Office of Inspector General
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Glenn Murray

CPA, CIA, CISA
Director of Audit
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Background

The IIA Standards require that an external QAR of an internal audit activity is conducted at least once every five years by a qualified, independent assessor or assessment team from outside the organization. The qualified assessor or assessment team must demonstrate competence in both the professional practice of internal auditing and the QAR process. The QAR can be accomplished through a full external assessment or a self-assessment with independent validation.

At the request of the FIU Chief Audit Executive (CAE), we conducted an independent validation of the OIA self-assessment of conformance with the IIA Standards and Code of Ethics. The primary objective of the validation was to verify the assertions noted in the attached self-assessment report concerning adequate fulfillment of the organization's expectation of the internal audit activity and its conformity to the IIA Standards.

The principal objectives of the independent validation included:

- Assessment of current internal audit activities in relation to the IIA Standards and Code of Ethics.
- Evaluation of OIA's effectiveness in carrying out its mission (as set forth in its charter and expressed in the expectations of management and the Audit and Compliance Committee of the FIU Board of Trustees).
- Identification of opportunities to enhance the internal audit function.

The independent validation included the following procedures:

- Interviews with stakeholders of the internal audit function, including the President and other members of the FIU leadership team, the chair and the immediate past chair of the Audit and Compliance Committee, and OIA personnel.
- Review of the self-assessment report, supporting documentation, and a sample of OIA work papers related to fiscal years 2022, 2023, and 2024.

We performed our work in August-October 2024.

Conclusions of the Independent Review Team

Based on our independent validation of the QAR performed by OIA, it is our overall opinion that the internal audit function "**Generally conforms**" with the IIA Standards and Code of Ethics. The *IIA Quality Assessment Manual* suggests a scale of three ratings:

- "**Generally conforms**" is the top rating and means that an internal audit activity has a charter, policies, and processes that are judged to be in conformance with the IIA Standards.
- "**Partially conforms**" means deficiencies in practice are judged to deviate from the *Standards*, but these deficiencies did not preclude the Internal Audit activity from performing its responsibilities in an acceptable manner.
- "**Does not conform**" means deficiencies are judged to be so significant as to seriously impair or preclude the internal audit activity from performing adequately in all or in significant areas of its responsibilities.

In our review we noted strengths as well as opportunities for enhancing the internal audit function and processes that affect the OIA effectiveness.

Observations

Strengths and Leading Practices

During our review we noted several strengths, including the following:

- **Reputation and professionalism of OIA** – OIA is consistently referred to by leadership as a trusted advisor, a helpful provider of education, and a facilitator of strong risk management practices across campus. OIA is included in key leadership conversations and is viewed as an integral part of FIU and its ability to achieve its strategic goals. OIA team members are highly experienced and possess relevant professional certifications.
- **Impactful audits and collaboration with leadership** – OIA’s work is perceived as valuable, timely, and relevant to the achievement of the FIU objectives. All stakeholders interviewed commented on the comprehensive university-wide risk assessment conducted by the CAE and agreed that the OIA annual plan addresses appropriate areas of risk and supports FIU’s objectives. Interviewees also noted that OIA provides actionable recommendations to improve processes and controls across campus. The Trustees and FIU leadership are highly supportive of OIA and committed to enacting recommended changes.
- **Team morale and engagement** – The OIA team is engaged, excited, and highly motivated to provide quality work and add value to FIU. There appears to be a high level of collaboration, idea-sharing, and camaraderie among team members. One staff member called it a “wonderful, cohesive teamwork environment with opportunities to learn and grow.” Interviewed leadership consistently commented that the team is professional, collaborative, and generally competent.
- **Follow up process** – OIA developed a platform to track the status of management action plans (MAPs) and validate their implementation. This platform has improved process effectiveness through accountability, stakeholder engagement, and ease of use. Several interviewees also shared positive comments on the existing methodology for risk rating the findings and the complexity associated with the MAP implementation.

OIA stays abreast of changes and emerging risks. They take time to understand the stakeholders’ needs.

The Internal Audit plan is aligned to FIU’s objectives. It is strategic in nature. The reports are well-structured, transparent, and easy to follow.

The Internal Audit practice has flourished [under the current CAE leadership] and is advanced, welcoming, and brings a broader perspective.

[The OIA team member] is outstanding and we are a better unit because of her recommendations!

FIU’s OIA is top notch! They are dedicated, ethical, collaborative, and I have great confidence in them.

For a further sense of positive feedback from stakeholder interviews, see Appendix G for key words captured.

Opportunities for Enhancement

The review team agrees with the IIA Standards assessment and opportunities for enhancement identified in the OIA August 2024 self-assessment report, included in **Appendix B**. Additionally, we offer the following observations and recommendations to continue to build on OIA's strong performance:

- **OIA Governance Documents** – to remain in compliance with the professional expectations, the OIA Charter and the OIA Operations Manual (Manual) should be updated for the newly released IIA Global Internal Audit Standards. Specifically, we recommend the clarification of the OIA mandate, as required by Standard 6.1 Internal Audit Mandate, and references to additional CAE responsibilities. Additionally, we recommend considering the use of “should” vs. “will” throughout the Manual to strengthen expectations and add precision to the delineation of responsibilities.
- **Audit Process** – although the OIA audit process is well-established and consistently executed, there is an opportunity for the team to be mindful of “scope creep,” which may negatively impact project timelines and stakeholder experience. Additionally, several interviewees shared occasional lack of pragmatism in audit findings, which may be driven by the auditors’ lack of understanding for the FIU business model, processes, or existing risk versus investment in implementation of management action plans. Specifically, there seems to be an interest in bifurcating compliance violations, which could potentially result in a tangible risk to the university, from best practices which, if implemented, help to further strengthen the internal control environment. That said, several interviewees noted a positive change with the implementation of the MAP complexity scale, which more clearly highlights the effort required to address the risk noted by the auditors. We encourage the CAE to continue to invest in the team’s understanding of higher education and FIU business processes, consistently evaluate the risk to the operational objectives of the finding versus the complexity and cost of MAP implementation, and consider additional engagements instead of expanding the scope of projects underway.
- **Succession Planning** – all interviewees spoke highly of the competence, presence, and the collaborative partnership that they have with the CAE. With that, several interviewees reflected on the potential opportunity to invest in the professional development of the staff by including them in annual risk assessment and other periodic meetings with leadership. The review team also suggests assigning to staff specific tasks related to the audit plan development in the spirit of professional growth.
- **OIA Marketing and Promotion** – the review team would like to encourage OIA to continue to communicate with the FIU community their role in the organization. Whether through newsletters, training, road shows, or partnering with other critical business operational areas, there is an opportunity to continue to articulate the positive impacts internal audit has on accomplishment of organizational objectives and improvement of strength of the internal control environment.

Appendix A: IIA Standards Rating

Overall Evaluation		IIA Standards Rating		
Standard		Generally Conforms	Partially Conforms	Does Not Conform
Attribute Standards (1000 through 1300)				
1000	Purpose, Authority, and Responsibility	X		
1010	Recognizing Mandatory Guidance in the Internal Audit Charter	X		
1100	Independence and Objectivity	X		
1110	Organizational Independence	X		
1111	Direct Interaction with the Board	X		
1112	Chief Audit Executive Roles Beyond Internal Auditing	X		
1120	Individual Objectivity	X		
1130	Impairment to Independence or Objectivity	X		
1200	Proficiency and Due Professional Care	X		
1210	Proficiency	X		
1220	Due Professional Care	X		
1230	Continuing Professional Education	X		
1300	Quality Assurance and Improvement Program	X		
1310	Requirements of the Quality Assurance and Improvement Program	X		
1311	Internal Assessments	X		
1312	External Assessments	X		
1320	Reporting on the Quality Assurance and Improvement Program	X		
1321	Use of “Conforms with the International Standards for the Professional Practice of Internal Auditing”	X		
1322	Disclosure of Nonconformance	X		
Performance Standards (2000 through 2600)				
2000	Managing the Internal Audit Activity	X		
2010	Planning	X		
2020	Communication and Approval	X		
2030	Resource Management	X		
2040	Policies and Procedures	X		
2050	Coordination and Reliance	X		
2060	Reporting to Senior Management and the Board	X		
2070	External Service Provider and Organizational Responsibility for Internal Auditing	X		
2100	Nature of Work	X		
2110	Governance	X		

Overall Evaluation		IIA Standards Rating		
Standard		Generally Conforms	Partially Conforms	Does Not Conform
2120	Risk Management	X		
2130	Control	X		
2200	Engagement Planning	X		
2201	Planning Considerations	X		
2210	Engagement Objectives	X		
2220	Engagement Scope	X		
2230	Engagement Resource Allocation	X		
2240	Engagement Work Program	X		
2300	Performing the Engagement	X		
2310	Identifying Information	X		
2320	Analysis and Evaluation	X		
2330	Documenting Information	X		
2340	Engagement Supervision	X		
2400	Communicating Results	X		
2410	Criteria for Communicating	X		
2420	Quality of Communications	X		
2421	Errors and Omissions	X		
2430	Use of “Conducted in Conformance with the International Standards for the Professional Practice of Internal Auditing”	X		
2431	Engagement Disclosure of Nonconformance	X		
2440	Disseminating Results	X		
2450	Overall Opinions	X		
2500	Monitoring Progress	X		
2600	Communicating the Acceptance of Risks	X		
Code of Ethics				
	Code of Ethics	X		

Appendix B: Excerpts from the OIA Quality Self-Assessment Report



Date: August 20, 2024

To: Members of the Florida International University Board of Trustees
Kenneth A. Jessell, University President

From: Trevor L. Williams, Chief Audit Executive

A handwritten signature in blue ink that reads "Trevor L. Williams".

Subject: Quality Assurance and Improvement Program Review – Internal Assessment 2024

The Institute of Internal Auditors' International Professional Practice Framework (IPPF) requires the Chief Audit Executive to implement and maintain a Quality Assurance Improvement Program (QAIP) for the audit activity. The Office of Internal Audit (OIA) has implemented a QAIP, which includes the completion of an independent, external quality assessment review (QAR) every five years and ongoing monitoring of the audit activity, as required by the IPPF. An independent, external QAR of the OIA audit activity is scheduled to be completed in December 2024, five years after the Office's last QAR, wherein the Office received a rating of "generally conforms," the highest rating that can be achieved. The Office's quality assurance monitoring activity includes a detailed review of the working papers and report for each engagement completed. This review is completed by multiple levels of OIA's staff. The Office's monitoring activity also include a periodic internal assessment of the Office's compliance with its standards for engagement quality, operating procedures, and charter.

In July and August 2024, a senior staff member of the OIA completed an internal quality assessment of the Office's internal audit activity and concluded that the OIA generally conforms with The Institute of Internal Auditors *Standards* and Code of Ethics. The reviewer also offered several recommendations, which she believed could enhance certain operational matters. I have developed a plan of actions to address all recommendations offered.

As recommended by the IPPF, I am providing you with the complete internal self-assessment report, with my corrective action plans included, to the Board of Trustees and senior management for your review.

Attachment – Office of Internal Audit Internal Self-Assessment 2024

C: Elizabeth M. Béjar, Provost, Executive Vice President, and Chief Operating Officer
Aime Martinez, Chief Financial Officer and Vice President for Finance and Administration
Javier I. Marques, Vice President for Operations & Safety and Chief of Staff, Office of the President

FIU | Office of Internal Audit

Date: August 19, 2024

To: Trevor L. Williams, Chief Audit Executive

From: Vivian F. Gonzalez, Assistant Audit Director

Subject: Internal Self-Assessment 2024

According to the University's Office of Internal Audit (OIA) Policy & Charter ("Charter"), audit engagements conducted by the OIA must adhere to the International Professional Practice Framework published by The Institute of Internal Auditors (IIA). The Charter also mandates that the Chief Audit Executive (CAE) establish and maintain a quality assurance and improvement program (QAIP) for the OIA. This program requires periodic internal assessments and independent external assessments to ensure compliance with IIA standards, with these external reviews occurring at least once every five years.

Accordingly, I conducted an internal self-assessment of the OIA in accordance with the IIA's latest Quality Assessment Manual for the Internal Audit Activity. This self-assessment took place between July and August 2024.

Based upon this review, I have concluded that the OIA "Generally Conforms" with the *Standards* and Code of Ethics. This means that the relevant structures, policies, and procedures of the OIA, as well as the processes by which they are applied, comply with the requirements of the individual standards or elements of the Code of Ethics in all material respects. An Evaluation Summary, which summarizes the results of my review, and Rating Definition can be found in Appendix A.

In addition to determining whether the activities of the OIA comply with the *Standards* and Code of Ethics, the quality assurance review process seeks to identify areas for continuous improvement. To that end, through the self-assessment, I have identified successful internal audit practices employed in our Office and opportunities for operational improvement.

OBJECTIVES, SCOPE, AND METHODOLOGY

The OIA performed a periodic internal assessment of its internal audit activity. The primary objective of the assessment was to assess the OIA's conformance with the *Standards*. Additional objectives included identifying opportunities for continuous improvement to enhance the department's internal audit function.

The periodic internal self-assessment concluded on August 15, 2024, and provided senior management with information about the OIA. The *Standards* and the Code of Ethics in place and effective as of January 1, 2017, is the basis for the assessment.

I performed the following tasks during the periodic internal assessment:

- confirmed the review of the Code of Ethics by all OIA staff.
- confirmed that all OIA staff met the IIA and/or OIA minimum Continuing Professional Education (CPE) requirements (for unlicensed staff).
- reviewed a sample of three engagements and their associated workpapers and reports.
- reviewed relevant processes of the OIA activity along with administrative and supporting documentation, policies, and procedures, and other relevant documents.
- compared the OIA's practices to the requirements of the *Standards*.

SUMMARY OF OBSERVATIONS & CORRECTIVE ACTION PLANS

Our evaluation did not identify any gaps to conformance with the *Standards* or the Code of Ethics or areas for continuous improvements. However, we did identify areas for operational improvements.

The observations of the periodic internal assessment are summarized as **Operational Improvements** – Ideas that could enhance the department's efforts toward maintaining an efficient and effective internal auditing function. The observations are followed by management's correction action plan.

We observed that all OIA professional staff confirmed an annual review of the Code of Ethics and confirmed their general independence, the last one completed in April 2024.

All employees met the requirements to align with Standard 1230 – Continuous Professional Development. For those with licenses, we ensured they completed the required credits for their license. However, 2 out of 10 employees did not meet departmental requirements per the *OIA Operations Manual*, which mandate 40 hours of continuing professional education for all staff.

The *OIA Operations Manual* was updated in May 2023 and distributed to all OIA staff for review on June 13, 2023. Additionally, a 'work-in-progress' version of the Manual is continuously available to OIA staff, allowing for ongoing revisions as necessary.

Summary of Operational Improvements

The following observations are intended to assist the Office of Internal Audit in maintaining an efficient and effective internal audit function.

- **Proficiency** - The *Standards* require that internal auditors must possess knowledge, skills, and other competencies needed to perform their individual responsibilities. (Standard 1210)

The OIA has a very good understanding of the appropriate governance structure. However, currently, there are new auditors on staff who have opportunity to grow in their understanding of institutional knowledge. Ensure new auditors receive broad exposure to University operations in order to enhance their institutional knowledge.

Corrective Action Plan

When planning our engagements, care is taken to match the skills and experience of the team member(s) with the knowledge required for the subject matter being audited or advised on. Along with rotating assignments among staff, having all staff participate in each engagement's brainstorming and post-audit meetings, as

well as the office's monthly staff meetings will provide more opportunities for staff to broaden their exposure to University operations. This is an ongoing effort.

- **External Assessment** - The *Standards* require that the CAE discuss with the board the form and frequency of external assessment. (Standard 1312)

The CAE has discussions with senior management and the Board of Trustees regarding the frequency and type of external assessments required. To enhance transparency, explicitly listing the scheduled external Quality Assurance Review (QAR) in the OIA's multi-year audit plan and risk assessment would provide the Board and management with clearer visibility of upcoming assessments.

Corrective Action Plan

Although I have kept senior management and the Board of Trustees informed about the timing, performance, and outcome of the five-year external quality assurance review, I will add the review to the five-year audit plan as a distinct project. This will be reflected on the revised plan for Fiscal Years 2025-2029 and thereafter.

- **Engagement Planning** - The *Standards* require that internal auditors develop and document a plan for each engagement. In addition, the internal audit policies and procedures manual may include templates related to planning the engagement that could demonstrate conformance to the *Standards*. (Standard 2200)

The OIA has developed various templates and forms for assurance engagements. However, there is an opportunity to create standardized templates and forms for advisory engagements, similar to those used for assurance engagements.

Corrective Action Plan

I will review the requirements and OIA operational guidance pertaining to advisory engagement and will create standardized templates and forms for such engagements, accordingly.

- **Performing the Engagement** - The *Standards* require that internal auditors identify, evaluate, analyze, and document sufficient information to achieve the engagement's objectives. (Standard 2300)

All workpapers include a description of the conclusions and opinions reached. To further ensure that the engagement objectives were met, post-engagement surveys or other feedback mechanisms could be used to gather confirmation from the auditees' perspective.

Corrective Action Plan

The May 2023 revision of the OIA *Operations Manual* incorporated an avenue for soliciting client feedback via a post-engagement survey. The survey tool was being developed. However, being aware that the office would be undergoing an independent, external quality assurance review in 2024 that include surveying our engagement clients, I deferred the implementation of the post-engagement survey to the engagements that are on the 2025 fiscal year plan. Post-engagement surveys will be sent for engagements that are completed during Fiscal Year 2025.

- **Quality of Communications** - The *Standards* state that communications must be accurate, objective, clear, concise, constructive, complete, and timely. (Standard 2200)

The reports adhere to these standards, ensuring that observations and recommendations are presented with accuracy, clarity, and objectivity. Additionally, the reports organize observations and recommendations by significance and assess the complexity of their implementation. However, further improvement could be made by also rating each observation for its criticality and urgency.

Corrective Action Plan

Our audit reports have evolved over the years toward providing context to the observations reported. Going forward, our audit reports will not only rate the criticality and urgency of recommendations but of findings, too. We will implement this with our audit reports that are completed in Fiscal Year 2025.

Appendix C: Work Performed by the Independent Assessment Team

In completing the review, the independent review team:

- Conducted interviews with 28 individuals from positions across FIU (see list in Appendix D) to understand their perspectives of the current internal audit function in relation to strategic goals, major initiatives, and challenges.
- Reviewed documentation, including:
 - OIA charter
 - Organizational charts
 - Recent annual audit plans
 - Recent annual risk assessments
 - Departmental policies and procedures
 - Staff training plans and qualifications
 - Reports to the Audit and Compliance Committee
 - Sample internal audit reports
 - Quality assurance and improvement plan (QAIP) documentation
 - QAR program guides
 - Work papers for OIA projects performed during the past three fiscal years
- Considered the current internal audit function in relation to the IIA Standards in the areas of:
 - Structure and reporting relationships
 - Roles and responsibilities
 - Degree of independence and objectivity
 - Education, training, qualifications, and experience of personnel
 - Management of the OIA
 - Quality of the OIA deliverables
- Assessed additional materials, as necessary, to further validate the self-assessment completed.

Appendix D: Interviews Conducted

Audit and Compliance Committee

Alan Gonzalez, Trustee, Audit and Compliance Committee Chair (immediate past Audit and Compliance Committee Vice Chair)

Chanel T. Rowe, Trustee, immediate past Audit and Compliance Committee Chair

Executive and Senior Leadership

Kenneth Jessell, President

Elizabeth Bejar, Provost, Executive Vice President, Chief Operating Officer

Aime Martinez, Chief Operating Officer and Senior Vice President (SVP) for Finance and Administration

Andres Gil, SVP of the Office of Research and Economic Development; Dean, University Graduate School

Juan Carlos Cendan, Dean, Herbert Wertheim College of Medicine; SVP, Health Affairs

El Pagnier Hudson, SVP Human Resources

Carlos B. Castillo, General Counsel

Scott Carr, Athletic Director

Javier Marques, Vice President (VP) Operations and Safety; Chief of Staff

Robert N. Grillo, VP and Chief Information Officer

Bridgette Cram, VP for Academic Affairs, Office of Student Success Operations and Integrated Planning

Jennifer LaPorta Baker, Chief Compliance and Privacy Officer

Alexandra Mirabal, Assistant Vice President and Controller

Helvetiella Longorio, Chief Information Security Officer

Eneida Roldan, Chief Executive Officer, FIU Healthcare Network; Associate Dean for International Affairs; Associate Dean of Master in Physician Assistant Studies Program; Professor

Osmel Delgado, Chief Operating Officer

Sonia Benitez, Sr. Associate Dean of Finance, College of Medicine

OIA Staff

Trevor Williams, CAE

Vivian Gonzalez, Assistant Audit Director

Natalie San Martin, Audit Manager

Dayan Borges, Audit Project Manager

Leslie-Anne Triana, Audit Project Manager

Henley Louis-Pierre, Senior Information Systems Auditor II

Saturnino Germosen, Senior Information Systems Auditor

Ibis Alcala, Senior Auditor

Emily Murillo, Senior Auditor

Appendix E: Survey Results – FIU Leadership and Management

Scoring scale: 4 – Strongly Agree; 3 – Agree; 2 – Disagree; 1 – Strongly Disagree

Question	Average Score
Internal audit activity staff has free and unrestricted access to records, information, locations, and employees during the performance of their engagements.	3.89
Internal audit activity staff respects the value and ownership of information they receive and do not disclose information without appropriate authority unless there is a legal or professional obligation to do so.	3.75
Organizational placement of the internal audit activity ensures its independence and ability to fulfill its responsibilities.	3.71
The internal audit activity management adequately assesses the effectiveness of risk management processes employed by management to achieve objectives.	3.69
The internal audit activity management effectively promotes appropriate ethics and values within our organization.	3.60
The internal audit activity management competently assesses the adequacy and effectiveness of our organization’s system of internal controls.	3.53
The internal audit activity demonstrates sufficient knowledge of fraud to identify “red flags,” indicating possible fraud when planning its audit engagements.	3.50
Internal audit activity management keeps up to date with changes in our business, our industry, and the relevant regulatory issues.	3.44
The internal audit activity staff is viewed as a viable source of talented individuals who can successfully transfer to other parts of our organization.	3.42
The internal audit activity management sufficiently communicates its audit plans to management of areas being reviewed. This includes descriptions of audit objectives and scope of review.	3.42
The integrity of the internal audit activity establishes confidence, providing the basis for its role as a trusted advisor within our organization.	3.39
Internal audit activity staff exhibits the highest level of professional objectivity in performing their work, makes a balanced assessment of all relevant circumstances, and are not influenced by their own interests or by others in forming judgements.	3.37
Internal audit activity staff keeps up to date with changes in our business, our industry, and the relevant regulatory issues.	3.35
Internal audit activity management communicates effectively (oral, written, and presentations).	3.35
The internal audit activity management establishes annual audit plans to assess areas or topics that are significant to our organization and consistent with our organizational goals.	3.35
Internal audit activity staff exhibits effective problem-identification and solution skills.	3.32
Internal audit activity audit reports are accurate, objective, clear, concise, constructive, complete, and timely.	3.32
Internal audit activity staff communicates effectively (oral, written, and presentations).	3.30
Internal audit activity exhibits proficient project management and organizational skills to the timely completion of its audit engagements.	3.30

Question	Average Score
Internal audit activity demonstrates sufficient knowledge of key information technology risks and controls in performing its audit engagements.	3.28
Internal audit activity is perceived as adding value and helping our organization accomplish its objectives.	3.26
Internal audit activity staff displays adequate knowledge of the business processes, including critical success factors.	3.26
Internal audit activity management demonstrates effective conflict-resolution and negotiating skills.	3.11

Appendix F: Survey Results – FIU OIA Staff

Scoring scale: 4 – Strongly Agree; 3 – Agree; 2 – Disagree; 1 – Strongly Disagree

Question	Average Score
My CAE effectively promotes the value of our internal audit activity within our organization.	4.00
Our internal audit activity has a conflict of interest policy to report any perceived or actual issues that may have an influence on the independence and objectivity of the auditors.	4.00
Our internal audit activity management provides us with opportunities to keep up to date with changes in our business, industry, and relevant regulatory issues.	4.00
Our audit assignments provide internal audit activity staff with opportunities to develop adequate knowledge of key business processes, including critical success factors.	4.00
Our internal audit activity management provides ample opportunities to develop the skills and knowledge necessary to perform all of my audit engagements.	4.00
I have ample opportunity to enhance my knowledge, skills, and competencies through in-house training sessions and/or outside seminars.	4.00
My performance is reviewed on a regular and sufficiently frequent basis; the criteria used are adequate and the reviews are meaningful and helpful.	4.00
Our internal audit activity management has established policies and procedures that clearly guide the operation of our internal audit activity.	4.00
Our internal audit activity actively encourages collaborative effort between internal audit management and staff for effective completion of our engagements in a timely manner.	4.00
Our internal audit activity effectively promotes appropriate ethics and values broadly across our total organization.	4.00
Our internal audit activity adequately assesses the effectiveness of governance processes, including ethics-related programs and activities.	4.00
Our internal audit activity management and staff demonstrate effective conflict resolution and negotiating skills.	4.00
Our internal audit activity is perceived as adding value and helping our organization accomplish its objectives.	3.88
Our internal audit activity staff has free and unrestricted access to records, information, locations, and employees during the performance of their engagements.	3.88
Our internal audit activity staff is fully aware of and completely conforms to both the Principles and the Rules of Conduct that comprise the Code of Ethics established by the IIA.	3.88
Our internal audit activity staff is fully aware of and completely conforms to The IIA's International Standards for the Professional Practice of Internal Auditing relating to objectivity and due professional care and the Code of Ethics.	3.88
I have sufficient knowledge of fraud to identify "red flags," indicating possible fraud when planning my audit engagements.	3.88
Our internal audit activity management encourages and supports the internal audit activity staff in demonstrating its proficiency by obtaining appropriate professional certifications, such as designations offered by the IIA or other designations related to internal auditing.	3.88
Our internal audit activity competently assesses the adequacy and effectiveness of our organization's system of internal controls.	3.88
Our internal audit activity adequately assesses the effectiveness of risk management processes employed by management to achieve our organization's objectives.	3.88

Question	Average Score
Our internal audit activity management provides ample opportunities to develop skills and knowledge, and acquire experience that enables me to develop professionally and advance my career.	3.75
Our internal audit activity is viewed as a valuable developmental assignment by individuals from other parts of our organization.	3.75
Our internal audit activity develops and documents a plan for each engagement based on a preliminary assessment of risks relevant to the area being reviewed (including the probability of fraud), and our engagement objectives reflect the result of this risk assessment.	3.75
I receive appropriate, timely, and constructive feedback regarding my performance in completing engagements, enabling me to continue developing my knowledge, skills, and competencies.	3.75
Our internal audit activity management and staff exhibit proficient project management and organizational skills to assure the timely completion of our audit engagements.	3.50
I have sufficient knowledge of key IT risks and controls to perform my audit engagements.	3.29
Our internal audit activity uses computer-assisted audit techniques, including data mining, to facilitate data collection and analysis during completion of our engagements.	3.13

Appendix G: Positive Sentiments from FIU Leadership and Management Interviews



Note: The relative size of the words correlates to their occurrence/use by interviewees

Appendix H: Independent Review Team Background Information

Agnessa Vartanova has been serving as the associate vice president and chief audit executive at the University of Colorado (CU) since February 2021. Prior to joining CU, Ms. Vartanova held leadership roles in global internal audit functions at Ball Corporation and DaVita, Inc., Colorado-based Fortune 500 companies. She earned a Bachelor of Science and Master of Science degrees in accounting from University of Wyoming, and a professional graduate certificate in corporate sustainability and innovation from Harvard University Extension School. Ms. Vartanova is a Certified Public Accountant in Colorado, and has professional certifications in internal auditing, information systems auditing, fraud examination, and risk management assurance. In 2014, the Institute of Internal Auditors recognized Ms. Vartanova as an “Emerging Leader” in the internal audit profession. In her practice, she strives to elevate the role of internal audit by consistently delivering pragmatic and meaningful insight to stakeholders. Ms. Vartanova currently serves as the Association of College and University Auditors’ Best Practices Committee Chair.

Reuben C. Iyamu has been serving as the Inspector General for Florida Atlantic University (FAU) Office of Inspector General since March 2021. In that role, he serves as the chief audit executive, responsible for planning, directing, and coordinating auditing; investigations; consulting services; and reviews of the university's operations and activities. Mr. Iyamu has over 20 years of experience conducting and leading audits, investigations, and consulting projects. Before joining FAU, he served as the Deputy Inspector General for the Polk County Clerk’s Office of Inspector General and as the Director of Internal Audit for the Monroe County Clerk and Comptroller. Mr. Iyamu earned his bachelor’s in information technology science from Florida State University and a master’s degree in business administration from the University of Maryland Global Campus. He is a Certified Internal Auditor, Certified Fraud Examiner, and a Certified Inspector General. Mr. Iyamu is a member of various professional associations relating to accounting, auditing, investigation, and information technology, including The Institute of Internal Auditors, the Association of Certified Fraud Examiners, the Association of Inspectors General, the Florida Audit Forum, and the Association of College and University Auditors. He is also a member of the State University Audit Council.

Glenn Murray has been with the University of South Carolina (USC) Audit and Advisory Services department since March 2013. Currently, he serves as the Director of Audit and Advisory Services. Prior to joining USC, Mr. Murray worked for many years at a Fortune 500 gas and electric utility and in public accounting. Those years of experience included 14 years in the Audit Department at SCANA, 10 of which were as a manager. Prior to SCANA, he worked at Tourville, Simpson & Henderson, CPAs as an auditor. Mr. Murray’s career also includes significant work with The Institute of Internal Auditors, including South Carolina District Representative, prior to joining USC. Mr. Murray earned a Bachelor of Science in Business Administration (Accounting) from the College of Charleston. He is a Certified Public Accountant and a Certified Internal Auditor.



Office of Internal Audit

Date: January 21, 2025

To: Agnessa Vartanova, CPA, CIA, CISA, CFE, CRMA
Reuben C. Iyamu, CIA, CFE, CIGA, CIG
Glenn Murray, CPA, CIA, CIGA

From: Trevor L. Williams, Chief Audit Executive

Subject: Review of the Independent Validation of the Quality Self-Assessment of the Florida International University Office of Internal Audit – November 2024

Thank you for conducting the external quality assurance review of the FIU Office of Internal Audit (OIA). We appreciate you taking the time away from your other responsibilities to conduct this thorough and thoughtful review of our operations. I am pleased the review team concluded that the FIU Office of Internal Audit “**Generally Conforms**”—the highest rating that can be achieved—with The Institute of Internal Auditing (IIA) Standards and Code of Ethics. We are equally pleased that the review team noted that the Office of Internal Audit is regarded as a highly professional and valuable function at FIU.

Your assessment will help OIA improve our internal audit activity, and to that end, we appreciate and accept the best practices you have recommended as opportunities for enhancement. In response to the recommendations, I am providing you with my corrective action plan to address the issues noted.

External Quality Assurance Review – November 2024 Corrective Action Plan

The following describes the measures OIA will take to implement the recommendations offered in the External Quality Assurance report. The recommendations are presented in terms of their subject matter.

Summary of opportunity for enhancement

OIA Governance Document – We concur with this observation. In anticipation of implementing the newly released IIA Global Internal Audit Standards, the OIA began a review of the Standards, the Audit and Compliance Committee Charter, the OIA Charter, and the OIA Operations Manual with the objective of revising these operational documents to incorporate relevant requirements contained in the Standard. Over several months, we have alerted the Audit and Compliance Committee about the need for this action. Additionally, while “should” is used in the OIA Operations Manual as a “presumptive mandatory,” as we update our Operations Manual, we will review its use and clearly articulate the associated expectation for its use as well as consider the use of “will” where appropriate. We expect to complete these actions no later than June 30, 2025.

Audit Process – We concur with this observation and value this feedback immensely. We have made efforts to keep our audit scope as defined as possible to address known significant relevant risks. However, we acknowledge that “scope creep” could at times become an issue. Audit managers and supervisors will receive frequent reminders during monthly staff meetings to be alert to “scope creep.” Additionally, beginning in FY 2024-2025, we revised our audit report format to specifically categorize audit issues based on their underlining criteria, for example, regulatory, compliance, internal control, best practices, etc. This was done as part of our efforts toward early adoption of the newly issued IIA Global Internal Auditing Standards. We believe this new report format provides the bifurcation that enables management to distinguish the nature of the issues being reported.

Succession Planning – We concur with this observation. Developing the internal audit staff professionally is invaluable to the function. Currently, I encourage staff to become involved with leadership roles in the various professional member organizations. With intentionality, staff are charged with fully managing their engagements, including directly communicating and interacting with the audited area management. However, including staff in the annual risk assessment process and other periodic meetings with leadership would be good experiences to enhance staff development further. This will be implemented during the upcoming annual risk assessment and meeting cycle. Additionally, I will continue to identify opportunities for staff to present agenda items to the Audit and Compliance Committee.

OIA Marketing and Promotion – We concur with this observation and accepts the review team’s encouragement to continue to communicate with the FIU community about our role in the organization. We believe that with the regular publishing of our newsletter, *Risks|Controls|Compliance Alerts*, building upon the partnerships we have initiated, and developing and delivering training in content within our field of expertise, that the positive impact OIA brings to the University’s operations will be known. These are ongoing efforts. However, greater focus will be given to developing training material.

I take this opportunity to express my appreciation to you for providing our office with this important and valuable feedback.