



**New College of Florida Board of Trustees  
Audit and Compliance Committee Meeting  
February 9, 2024 at 3:30pm**

**Meeting Agenda**

- 1. Call to Order**
  - A. Confirm Public Notice of Meeting**
  - B. Roll Call**
    - Amy Reid
    - Lance Karp, Chair
    - Mark Bauerlein
    - Matthew Spalding
    - Ron Christaldi
  - C. Establish Quorum**
- 2. Consideration of Draft Minutes from September 15, 2023 Meeting**
  - A. Committee Action:** Approve minutes.
- 3. 2023 Performance Based Funding Audit**
  - A. Committee Action:** Review and accept the 2023 Performance-based Funding audit report. Approve the execution of the annual Performance Data Integrity certification.
- 4. Approve Audit and Compliance Committee Charter Update**
  - A. Committee Action:** In accordance with Board of Governors regulation 4.002, State University System Chief Audit Executives, approve update to the Audit and Compliance Committee Charter. (redline version provided to show proposed changes).
- 5. Approve Office of Audit and Compliance Charter Update**
  - A. Committee Action:** In accordance with Board of Governors regulation 4.002, State University System Chief Audit Executives, approve update to the Office of Audit and Compliance Charter. (redline version provided to show proposed changes)
- 6. 2023 Identity Theft and Red Flags Annual Report**
  - A. Information Item:** Review the annual Identity Theft and Red Flags audit report.
- 7. Instructional Evaluations Audit**
  - A. Information Item:** Review Instructional Evaluation Audit with Management Responses.
- 8. Enterprise Risk Management Program Update**
  - A. Information Item:** Review strategic business objective risk rating changes and addition. Individual Risk Evaluation Forms provided for objectives with rating changes and the Revenue objective addition.
- 9. Follow-up on Foundation Investment and Budget Audit**
  - A. Information Item:** Review status of findings reported in the Foundation Investment and Budget Audit Report.
- 10. Florida Department of Risk Management Report**
  - A. Information Item:** Review report and status of findings in the Florida Department of Risk Management Report.



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**11. State of Florida Auditor General Operational Audit Update**

- A. Information Item:** Briefing on status of State Operational Audit. (no attachment)

**12. Annual Compliance Partner Reporting**

- **Information Item:** Ten of thirteen university departments have provided their Annual Compliance Reports. Working with Registrar, Student Affairs and Communications to complete their reports. (No Attachments)

**Other Business**

**Adjournment**

**NEW COLLEGE OF FLORIDA  
INDEPENDENT ACCOUNTANT'S REPORT ON APPLYING  
AGREED-UPON PROCEDURES**

**SEPTEMBER 30, 2023**

**NEW COLLEGE OF FLORIDA  
INDEPENDENT ACCOUNTANT’S REPORT ON APPLYING  
AGREED-UPON PROCEDURES**

**SEPTEMBER 30, 2023**

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## INDEPENDENT ACCOUNTANT'S REPORT ON APPLYING AGREED-UPON PROCEDURES

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Board of Trustees  
New College of Florida  
Sarasota, Florida 34243

We have performed the procedures enumerated below, which were agreed to by the Board of Trustees of New College of Florida (the "College"), solely to assist the College in determining whether the College has processes established to ensure the completeness, accuracy, and timeliness of data submissions to the Board of Governors (the "BOG") which support the Performance Funding Metrics of the College as of September 30, 2023. The College is responsible for all processes and procedures related to the complete, accurate and timely submission of data to the BOG.

New College of Florida has agreed to and acknowledged that the procedures performed are appropriate to meet the intended purpose of the College. This report may not be suitable for any other purpose. The procedures performed may not address all the items of interest to a user of this report and may not meet the needs of all users of this report and, as such, users are responsible for determining whether the procedures performed are appropriate for their purposes. Consequently, we make no representation regarding the sufficiency of the procedures described below either for the purpose for which this report has been requested or for any other purpose.

### **Our Procedures and Findings were as Follows:**

We reviewed the BOG submissions relating to the Performance Funding Metrics identified and published by the State University System of Florida (the "SUS") specific to the certification. See Attachment I for a listing of the submissions management selected for testing in the current year.

#### a) Testing of data accuracy.

1. Identify and evaluate data validity controls to ensure that data extracted from the primary systems of record are accurate and complete. This may include review of controls over code used to create the data submission. Review each measure's definition and calculation for the consistency of data submissions with the data definitions and guidance provided by the BOG.
2. As appropriate, select samples from data the College has submitted to the BOG for its Performance Funding Model. Vouch selected data to original source documents (this will most likely include the College's student and financial systems used to capture relevant information).
3. Evaluate the results of the testing and conclude on the completeness and accuracy of the submissions examined.

## Procedures Performed

- For each metric and submission file identified, listed in Attachment I, we performed the following procedures for the specific metrics identified in the Performance Funding Metrics published by the SUS:
  - Obtained complete submission file for time period being tested;
  - Selected a sample size of thirty (30) data items, or other representative sample, to test for each file submission and each metric specific to the performance funding testing;
  - Verified data reported in the submission files specific to the metrics identified by the SUS agreed to the source system Banner;
  - Verified the data reported for each metric agreed with the SUDS data dictionary.
  
- To determine the completeness of the files being submitted, we performed the following procedures:
  - For each term and reported time frame, we obtained a file which was extracted from Banner and compared to submission files extracted by the Institutional Research and Analysis department. For each comparison we identified any person that was on the Banner report that was not in the file submission. We then selected a sample size based on the size of the file and errors returned and verified the student was properly omitted for the specific submission based on the current data definitions. Selected files and corresponding sample sizes are as follows:
    1. All students who were enrolled were compared to the Student Instruction Files (SIF) submitted. There were no students on the Banner report that were not in the submission file.
    2. All students who received Pell grants were compared to the Student Financial Aid (SFA) files submitted. No differences were identified.
    3. All students who had a degree awarded were compared to the Degrees Awarded (SIFD) files submitted. There were three (3) students on the Banner report that were not in the submission file. Per inquiry of New College, this was due to late degree awards and the BOG instructed them to include them on the next submission. Mauldin & Jenkins, LLC verified these students were included in the next submission file.
    4. All students who were admitted were compared to the Admission (ADM) files submitted. There were no students on the Banner report that were not in the submission file.

## Findings

No exceptions were identified as a result of applying these procedures.

- b) *Evaluate the veracity of the College Data Administrator's data submission statements that indicate, "I certify that this file/data represents the position of this College for the term being reported."*
1. Interview the College Data Administrator to consider the reasonableness of the various coordination efforts with the Data Administrator's staff, the other Data Custodians' staff, BOG IRM, and other knowledgeable individuals which form the basis for personal and professional satisfaction that data submitted to the BOG is complete, accurate and submitted timely.
  2. Inquire how the Data Administrator knows the key controls are in place and operating effectively. If not already done, consider verifying these key controls are in place and adequate to support the Data Administrator's assertions.

## Procedures Performed

- Interviewed the following people who have significant responsibility for the data being reported and submitted to the BOG:
  - Director of Institutional Research and Assessment, Office of Institutional Research and Assessment;
  - Director of Administrative Computing, Office of Information Technology;
  - Registrar, Office of the Registrar;
  - Associate Dean of Enrollment Services and Director of Admissions, Office of Admissions and Financial Aid;
  - Director of Financial Aid, Office of Admissions and Financial Aid.
- Verified communication with the Institutional Research and Assessment department is on-going and clear to ensure accurate and timely data submission. Also, verified the Data Administrator understands the key controls specific to the metrics being tested and that they are functioning. This was performed through review of emails, various correspondence between departments, and discussions with each personnel.
- Verified with the Director of Institutional Research and Assessment their communication with the BOG and IRM to ensure data being submitted meets the data definitions. This was performed through review of correspondence and emails.

## Findings

No exceptions were identified as a result of applying these procedures.

We were engaged by New College of Florida to perform this agreed-upon procedures engagement and conducted our engagement in accordance with attestations standards established by the American Institute of Certified Public Accountants. We were not engaged to and did not conduct an examination or review engagement, the objective of which would be the expression of an opinion or conclusion, respectively, on the processes and procedures for the complete, accurate and timely submission of data to the BOG. Additionally, the specific accuracy of the current year data submissions was not a part of our review. Accordingly, we do not express such an opinion or conclusion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

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

This report is intended solely for the information and use of New College of Florida's Board of Trustees and management and is not intended to be and should not be used by anyone other than these specified parties.

*Mauldin & Jenkins, LLC*

Bradenton, Florida  
January 16, 2024

**NEW COLLEGE OF FLORIDA  
METRIC RELATED SUBMISSIONS  
OCTOBER 1, 2022 THROUGH SEPTEMBER 30, 2023**

**ATTACHMENT I**

<b>Performance Based Funding Metrics Tested</b>	
5	Academic Progress Rate
6	Bachelor's Degrees within the Programs of Strategic Emphasis
7	University Access Rate
8b	Percentage of Newly Admitted FTICs with High School GPA of 4.0 or Higher

For the above metrics, the data elements specific to those metrics were tested in the below submission files.

<b>Submissions Tested</b>				
<b>Due Date</b>	<b>Submission</b>	<b>Term or Year</b>	<b>Rept Time Frame</b>	<b>Sample Tested</b>
10/7/2022	SIFD - Degrees Awarded	Summer 2022	202205	1
10/21/2022	ADM- Admissions	Fall 2022	202208	30
1/18/2023	SIF - Student Instruction File	Fall 2022	202208	60
1/27/2023	RET - Retention File	Annual 2021	20212022	None*
3/10/2023	ADM- Admissions	Spring 2023	202301	30
6/14/2023	SIF - Student Instruction File	Spring 2023	202301	30
6/30/2023	SIFD - Degrees Awarded	Spring 2023	202301	30
9/22/2023	SIF- Student Instruction File	Summer 2023	202305	5
9/29/2023	SIFD - Degrees Awarded	Summer 2023	202305	4
10/14/2022	SFA - Student Financial Aid File	Annual 2021	20212022	30

\* There were no required submissions for the retention file for 2021/2022.





# Data Integrity Certification

## March 2024

In accordance with Board of Governors Regulation 5.001(8), university presidents and boards of trustees are to review, accept, and use the annual data integrity audit to verify the data submitted for implementing the Performance-based Funding model complies with the data definitions established by the Board of Governors.

Given the importance of submitting accurate and reliable data, boards of trustees for those universities designated as preeminent or emerging preeminent are also asked to review, accept, and use the annual data integrity audit of those metrics to verify the data submitted complies with the data definitions established by the Board of Governors.

**Applicable Board of Governors Regulations and Florida Statutes:** Regulations 1.001(3)(f), 3.007, and 5.001; Sections 1.001.706, 1001.7065, and 1001.92, Florida Statutes.

**Instructions:** To complete this certification, university presidents and boards of trustees are to review each representation in the section below and confirm compliance by signing in the appropriate spaces provided at the bottom of the form. Should there be an exception to any of the representations, please describe the exception in the space provided.

Once completed and signed, convert the document to a PDF and ensure it is ADA compliant. Then submit it via the Chief Audit Executives Reports System (CAERS) by the **close of business on March 1, 2024**.

**University Name: New College of Florida**

### Data Integrity Certification Representations:

1. I am responsible for establishing and maintaining, and have established and maintained, effective internal controls and monitoring over my university's collection and reporting of data submitted to the Board of Governors Office which will be used by the Board of Governors in Performance-based Funding decision-making and Preeminence or Emerging-preeminence Status.
2. In accordance with Board of Governors Regulation 1.001(3)(f), my Board of Trustees has required that I maintain an effective information system to provide accurate, timely, and cost-effective information about the university, and shall require that all data and reporting requirements of the Board of Governors are met.
3. In accordance with Board of Governors Regulation 3.007, my university provided accurate data to the Board of Governors Office.

## Data Integrity Certification, March 2024

4. In accordance with Board of Governors Regulation 3.007, I have tasked my Data Administrator to ensure the data file (prior to submission) is consistent with the criteria established by the Board of Governors. The due diligence includes performing tests on the file using applications, processes, and data definitions provided by the Board Office. A written explanation of any identified critical errors was included with the file submission.
5. In accordance with Board of Governors Regulation 3.007, my Data Administrator has submitted data files to the Board of Governors Office in accordance with the specified schedule.
6. I am responsible for taking timely and appropriate preventive/ corrective actions for deficiencies noted through reviews, audits, and investigations.
7. I recognize that Board of Governors' and statutory requirements for the use of data related to the Performance-based Funding initiative and Preeminence or Emerging-preeminence status consideration will drive university policy on a wide range of university operations – from admissions through graduation. I certify that university policy changes and decisions impacting data used for these purposes have been made to bring the university's operations and practices in line with State University System Strategic Plan goals and have not been made for the purposes of artificially inflating the related metrics.
8. I certify that I agreed to the scope of work for the Performance-based Funding Data Integrity Audit and the Preeminence or Emerging-preeminence Data Integrity Audit (if applicable) conducted by my chief audit executive.
9. In accordance with section 1001.706, Florida Statutes, I certify that the audit conducted verified that the data submitted pursuant to sections 1001.7065 and 1001.92, Florida Statutes [regarding Preeminence and Performance-based Funding, respectively], complies with the data definitions established by the Board of Governors.

Exceptions to Note: Zero Exceptions Noted

# Data Integrity Certification, March 2024

## Data Integrity Certification Representations, Signatures:

*I certify that all information provided as part of the Board of Governors Data Integrity Certification for Performance-based Funding and Preeminence or Emerging-preeminence status (if applicable) is true and correct to the best of my knowledge; and I understand that any unsubstantiated, false, misleading, or withheld information relating to these statements render this certification void. My signature below acknowledges that I have read and understand these statements. I certify that this information will be reported to the board of trustees and the Board of Governors.*

Certification: \_\_\_\_\_  
University President

Date: \_\_\_\_\_

*I certify that this Board of Governors Data Integrity Certification for Performance-based Funding and Preeminence or Emerging-preeminence status (if applicable) has been approved by the university board of trustees and is true and correct to the best of my knowledge.*

Certification: \_\_\_\_\_  
University Board of Trustees Chair

Date: \_\_\_\_\_

# NEW COLLEGE OF FLORIDA BOARD OF TRUSTEES AUDIT AND COMPLIANCE COMMITTEE CHARTER

## I. Purpose

The Audit and Compliance Committee (the "Committee") Charter outlines the authority, responsibilities, and operation of the Committee to assist the New College of Florida (New College) Board of Trustees (the "Board") in fulfilling its responsibilities.

## II. Membership and Meetings

The Committee shall be comprised of at least three members of the New College Board as appointed by the Chair of the Board. At least one Committee member shall be designated as the Committee's financial expert<sup>1</sup>. The Chair and members of the Committee shall be independent and objective in the discharge of their responsibilities and be free of any business or other relationship that could materially interfere with, or reasonably be perceived to materially interfere with, the independent exercise of their judgment. The Chair of the New College Board may not serve as the Chair of the Committee. The Vice President for Finance and Administration and Chief Audit Executive (CAE) and Chief Compliance Officer (CCO) serve as the New College's staff liaisons to the Committee.

The Committee shall meet at least twice per calendar year in connection with regularly scheduled meetings of the Board and at other times as deemed necessary. Meeting agendas will be prepared and provided to Committee members in advance of meetings, along with appropriate briefing materials. The Committee is subject to the requirements of Article I, Section 24 of the Florida Constitution and Chapter 286, Florida Statutes. As such, meetings will be noticed and open to the public, and minutes will be recorded and published for public inspection. The Committee may invite members of management, auditors, or others to attend meetings and provide pertinent information.

A majority of Committee members present at a meeting will constitute a quorum for the transaction of Committee business.

## III. Public Records Requirements

Most matters addressed by the Committee are public records subject to Chapter 119, Florida Statutes. However, Chapter 119.07, Florida Statutes, provides that limited exceptions apply, and certain records are confidential and exempt from the public record. The Chief Audit Executive and Chief Compliance Officer will communicate directly with the Committee on matters considered to be confidential and exempt. Exemptions include, but are not limited to:

- A. Documents and reports created pursuant to Florida's "Whistle-blower Act," Chapter 112, Florida Statutes.
- B. Complaints of discrimination and misconduct pursuant to Chapter 119.071, Florida Statutes.
- C. Enterprise security of data and information technology pursuant to Chapter 286, Florida Statutes.

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<sup>1</sup> Under SEC Regulations and NYSE Rules, a financial expert is defined as a person who has the following attributes: (i) an understanding of generally accepted accounting principles and financial statements; (ii) the ability to assess the general application of such principles in connection with the accounting for estimates, accruals, and reserves; (iii) experience preparing, auditing, analyzing or evaluating financial statements or experience actively supervising one or more persons engaged in such activities; (iv) an understanding of internal controls and procedures for financial reporting; and (v) an understanding of audit committee functions.

## **NEW COLLEGE OF FLORIDA BOARD OF TRUSTEES AUDIT AND COMPLIANCE COMMITTEE CHARTER**

### **IV. Committee Responsibilities**

In accordance with State University System of Florida Board of Governor's regulations sections 4.001, 4.002 and 4.003, the Committee responsibilities shall include:

- A. Assisting the Board in fulfilling oversight responsibilities in relation to financial reporting, sound business practices, internal and external audits, enterprise risk management, financial and fraud related compliance, investigations, and the Program of Compliance and Ethics.
- B. Reviewing and approving the Committee Charter and the Internal Audit and Compliance Charter.
- C. Functionally overseeing the Chief Audit Executive and Chief Compliance Officer, including the review of external quality assessments as required by Board of Governor's regulations 4.002 State University System Chief Audit Executives, 4.003 State University System Compliance and Ethics Programs, and professional auditing standards.
- D. Directing the CAE/CCO to conduct investigations into any matters within its scope of responsibility and obtaining advice and assistance from outside legal, accounting, or other advisers, as necessary, to perform its duties and responsibilities. Meeting with and seeking any information it requires from employees, officers, directors, or external parties.
- E. Meeting with and seeking any information it requires from employees, officers, directors, or external parties.
- F. Reviewing and approving for submittal required reports to the Board of Governors as necessary.

### **V. Financial Reporting**

The Committee shall receive and review the Auditor General's independent financial statement audits for the purpose of determining whether the New College:

- A. Presented the basic financial statements in accordance with generally accepted accounting principles;
- B. Established and implemented an adequate system of internal controls over financial reporting and compliance including information system reliability and security;
- C. Complied with the various provisions of laws, rules, regulations, contracts, and grant agreements that are material to the financial statements; and
- D. Has taken corrective action to appropriately address any findings and recommendations contained in the Auditor General financial statement audits.

### **VI. Internal Audit**

With regard to the Office of the Chief Audit Executive (Office), the Committee shall:

- A. Review the Office's continuous enterprise risk assessment of the New College and affiliated organizations.

## **NEW COLLEGE OF FLORIDA BOARD OF TRUSTEES AUDIT AND COMPLIANCE COMMITTEE CHARTER**

- B. Review the Office's risk-based plan, including plans to contract for audit assistance, and the impact of any resource constraints.
- C. Review the Office's annual summary of activities for the preceding fiscal year.
- D. Review the Office's reports of significant risk exposures, control issues, fraud risks, governance issues and other matters as requested.
- E. Review the Office's receipt and investigation of all significant and credible allegations and known occurrences of waste, fraud, mismanagement, and/or abuse.
- F. Provide support to the Office in the event timely access to records, data, personnel or other New College information is not provided or there is an actual or perceived impairment to the independence of the Chief Audit Executive and Compliance Officer.
- G. Meet with the Chief Audit Executive no less than twice a year to review significant matters.
- H. Review with management and concur in the appointment, compensation, replacement, reassignment, and/or dismissal of the Chief Audit Executive.
- I. Review, at least every three (3) years, the Officer of Internal Audit Charter.

### **VII. External Audit**

With regard to external audits, the Committee shall review the scope and approach of external audit engagement and all external auditors' reports of New College's operations, including reports from the Auditor General and the Office of Program Policy and Governmental Accountability (OPPAGA). The Committee shall follow up to ensure New College takes timely and appropriate actions to correct reporting deficiencies.

### **VIII. Program of Compliance and Ethics**

With regard to compliance, the Committee shall review the effectiveness of New College's efforts to comply with Board of Governor regulation 4.003 State University System Compliance and Ethics Programs. Specifically, the Committee shall:

- A. Review the New College's Compliance and Ethics Program Plan and other Office efforts to prevent or detect non-compliance with Board of Governor, federal, state, and New College regulations; unethical behavior; and/or criminal conduct, as appropriate to New College's mission, size, activities, and unique risk profile.
- B. Ensure the Office has an external peer review at least once every five years.
- C. Review the Officer of Compliance Charter at least every three (3) years.

### **IX. Investigative Responsibilities**

With regard to investigations, the Committee shall:

- A. Ensure a process is publicized for individuals to anonymously report potential or actual fraud, waste, abuse, misconduct and/or violations of university policy, regulations, or laws; and, that no individual faces retaliation for reporting a good-faith concern.

**NEW COLLEGE OF FLORIDA BOARD OF TRUSTEES  
AUDIT AND COMPLIANCE COMMITTEE CHARTER**

- B. Conduct or authorize investigations within its scope of responsibilities and is empowered to retain and compensate independent counsel, accountants, experts, and other advisors as it deems necessary.
- C. Oversee an independent investigation in those instances where significant and credible allegations of fraud, waste, mismanagement, misconduct and other abuses are made against the Chief Audit Executive and Chief Compliance Officer. The investigation may be conducted by an independent outside firm or the Board of Governors Office of Inspector General and Director of Compliance.

**X. Other Responsibilities**

The Committee's other responsibilities shall include but not be limited to performing activities consistent with this Charter, regulations, rules and governing laws that the Board or Committee determines are necessary or appropriate.

**Review**

The Committee shall review this Charter at least every three years for consistency with applicable Board of Governors and New College regulations, professional standards, best practices and assess its adequacy in achieving the goals and objectives of the Board. A copy of the approved charter and any subsequent changes are to be provided to the Board of Governors through the Office of Inspector General and Director of Compliance.

Adopted by the New College Board of Trustees at its regular meeting duly assembled on the 22<sup>th</sup> day of February, 2024

ATTEST

By: \_\_\_\_\_  
Bill Galvano,  
Clerk to the  
New College of Florida  
Board of Trustees

By: \_\_\_\_\_  
Debra Jenks  
Chairperson  
New College of Florida  
Board of Trustees

Seal



## Office of Internal Audit and Compliance Charter

This Charter identifies the purpose, authority, and responsibilities of the Office of Internal Audit and Compliance for New College of Florida (New College).

### I. Purpose

The Office of Internal Audit and Compliance (OIAC) provides New College with independent and objective assurance, investigation, and advisory services to promote accountability, integrity, and efficiency in the programs and operations of New College. Through the evaluation and enhancement of governance, risk management, internal control and compliance, the OIAC will seek opportunities to assist New College management and the Board of Trustees in the effective discharge of their responsibilities and achievement of New College's strategic plan, mission, goals and objectives.

### II. Authority

The OIAC is mandated by State University System of Florida Board of Governor's regulation 4.002. In accordance with the regulation, the OIAC reports functionally to the Board of Trustees Audit and Compliance Committee and administratively to the President of the university. This reporting relationship ensures the organizational independence and objectivity of the Chief Audit Executive and Chief Compliance Officer (CAE/CCO). The Board of Trustees Audit and Compliance Committee will approve the Internal Audit and Compliance Charter, annual risk-based audit and Compliance and Ethics Program Plan (Compliance Plan), annual budget and resource plan, and the appointment, remuneration, and removal of the Chief Audit Executive and Chief Compliance Officer.

OIAC has timely, full and unrestricted timely access to all New College functions, including Direct Support Organizations (DSO), records, systems, data, property, and personnel in possession or control of New College. Any restrictions or barriers which limit the scope or access of information or people necessary to perform the OIAC functions will be remediated through the President and the Board of Trustees (Board). If remediation is unsuccessful, the CAE/CCO shall timely notify the Board of Governors through its Office of the Inspector General and Director of Compliance (OIGC) to remedy any such restrictions, barriers, or limitations. The Chief Audit Executive and Chief Compliance Officer will confirm to the Board, at least annually, the organizational independence of the internal audit and compliance activities.

OIAC is responsible for ensuring confidential records obtained in the course of its activities are adequately secured and are only disclosed in accordance with Florida and Federal statutes.

OIAC has no direct operational responsibility or authority over any reviewed activities. Participation of the OIAC in the planning, development, implementation, or modification of New College systems, operations, or processes is limited to an advisory role. This role is managed so as to provide independence and objectivity when conducting future assessments.



### **III. Professionalism**

All OIAC personnel shall adhere to the Institute of Internal Auditor's mandatory guidance including the definition of Internal Auditing, the Code of Ethics, and the International Standards for the Professional Practices of Internal Auditing; as well as the Florida Code of Ethics for Public Officers and Employees, *Government Accounting Standards*, published by the US Government Accountability Office; the Standards for Complaint Handling and Investigations for the State University System of Florida, as adopted by the State University Audit Council ("SUAC Investigative Standards"); *Information Systems Auditing Standards*, published by the Institute of Information System Audit and Control Association, and the Committee of Sponsoring Organization's (COSO) Risk Management Framework. The Institute of Internal Auditors' Practice Advisories, Practice Guides, and Position Papers will also be adhered to as applicable to guide operations. In addition, the internal audit activity will adhere to New College's regulations, policies and procedures.

### **IV. Responsibilities**

The scope of the OIAC encompasses, but is not limited to, the examination and evaluation of the adequacy and effectiveness of New College's governance, risk management, internal controls, and Compliance Plan as well as the quality of New College's performance in achieving the institution's stated mission, goals and objectives. The OIAC will also promote accountability and conduct investigations of allegations of misconduct. The OIAC responsibilities include, but are not limited to, the following activities:

#### **A. Internal Audit**

1. Develop a COSO risk assessment based annual Internal Audit and Compliance Plan to:
  - a. evaluate material exposures to the achievement of New College's mission, goals, and strategic plan objectives.
  - b. evaluate the reliability and integrity of information provided to management, the Board, and outside regulatory authorities including the means to collect, input, verify, identify, measure, classify and report on the data.
  - c. evaluate plans and systems used to assure compliance with government and New College regulations as well as policies, plans, procedures and statutes which could have a material impact on the success of the institution.
  - d. evaluate the safeguarding of material assets and authorization of material liabilities including the verification of existence and proper financial reporting of such.
  - e. evaluate the effective and efficient use of New College resources.
  - f. evaluate operations or programs to ascertain whether results are consistent with established objectives and goals and whether the operations or programs are being carried out as planned.
  - g. monitor and evaluate governance processes.
  - h. monitor and evaluate the effectiveness of the organization's risk management processes.
  - i. evaluate the quality of performance of external auditors and the degree of coordination with internal audit.
  - j. performing consulting and advisory services related to governance, risk management and control as appropriate for the organization.

- k. evaluating specific operations at the request of the Board or management, as appropriate.
  - l. provide training and outreach, to the extent practicable, designed to promote accountability and address topics such as fraud awareness, risk management, controls, and other related subject matter.
2. Submit an annual Audit and Compliance Plan to the Board for approval. The Audit and Compliance Plan will include a schedule of audit and compliance activities as well as budget and resource requirements. The Audit and Compliance Plan will be developed based on a prioritization of the audit universe using the COSO risk framework methodology, including input of senior management and the BOT. The Chief Audit Executive will review and adjust the Audit and Compliance Plan, as necessary, in response to changes in New College's business, risks, operations, programs, systems, and controls. Any significant deviation from the approved Audit and Compliance Plan will be communicated to senior management and the Board through periodic activity reports. The approved Audit and Compliance Plan and substantive changes will be forwarded to the Board of Governors through the Office of Inspector General and Director of Compliance (OIGC).
3. Provide audits, advisory services, and compliance oversight based on the International Professional Practices Framework, published by the Institute of Internal Auditors, Inc. (IIA); the Government Auditing Standards, published by the United States Government Accountability Office; and/pr the Information Systems Auditing Standards published by the ISACA. All audit reports will describe the extent to which standards were followed.
4. Prepare a report at the conclusion of each audit, review, investigation, management assist or other formal OIAC activity to communicate the results including any substantive findings including material exposures and control issues, including fraud risks, and/or governance issues. These reports shall include management's action plans and the extent to which the applicable standards, as referenced above in the Professionalism section, were followed. Reports with substantive findings will be forwarded to the Board of Governor's OIGC, consistent with BOG Regulation 1.001(6)(g).
5. The OIAC will periodically follow up on the extent to which management has completed their proposed action plans for Board OIAC findings as well as those in reports and assessments issued by external audit entities. Such follow up will determine whether the corrective actions have either been effectively implemented or Senior Management and/or the Board have chosen to accept the risk. In those instances where significant risk of waste, fraud, and/or financial mismanagement remain, the OIAC will notify the Board of Governor's OIGC.
6. Report to the president, Board of Trustees, and Board of Governors annually, by September 30<sup>th</sup> of each year, on the internal audit activities, purpose, authority, responsibility, and performance relative to its Annual Audit and Compliance Plan.
7. Arrange for an objective external assessment of its programs every five (5) years in accordance with the IIA standards and BOG regulation 4.002. The assessment results and any related recommendations for improvement shall be provided to New College's

Board and the Board of Governor's OIGC.

8. Promote, in collaboration with other appropriate university officials, effective coordination between the university and the Florida Auditor General, federal auditors, accrediting bodies, and other governmental or oversight bodies.

## **B. Compliance**

1. Develop and implement a Compliance and Ethics Program Plan (Compliance Plan). The Compliance Plan and any substantive changes shall be approved by the Board and a copy provided to the Board of Governor's OIGC.
2. Communicate routinely to the President and the Board regarding the results of Compliance Plan activities and provide an annual report on the effectiveness of the Compliance Plan. A copy of the annual report shall be provided to the Board of Governor's OIGC.
3. Facilitate the designation of compliance partners for various program areas throughout New College. Such designations will be based on an assessment of risk for a program area. If so designated, the individual shall coordinate and communicate at least annually with the Chief Audit Executive and Chief Compliance Officer on matters relating to the Program.

## **C. Investigation**

1. Pursuant to Board of Governor's Regulation 4.002 State University System Chief Audit Executives, the OIAC shall initiate, conduct, supervise, or coordinate investigations of significant and credible allegations that fall within the purview of the OIAC and be designated as the employee to review statutory whistle-blower information and coordinate all activities of New College as required by the Florida Whistle-blower's Act. Investigative assignments will be performed in accordance with professional standards discussed in the Professionalism section. All final investigative reports shall be submitted to the appropriate action officials, BOTs, and if in the Chief Audit Executive's judgment, the allegations are determined to be significant and credible, to the BOG through OIGC. Such reports shall be redacted to protect confidential information and the identity of individuals, when provided by law.
2. Keep the president and board of trustees informed concerning significant and credible allegations and known occurrences of fraud, waste, abuses, mismanagement, and deficiencies relating to university programs and operations; recommend corrective actions; and report on the progress made in implementing corrective actions.

## **IV. Charter Review and Approval**

The Board of Trustees approved Office Internal Audit and Compliance Charter shall be reviewed at least every three (3) years for consistency with applicable Board of Governors and New College of Florida regulations, professional standards, and best practices. A copy of the approved charter and any subsequent changes shall be provided to the Board of Governors.

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Debra Jenks, Chair, Board of Trustees

Approved on: February 9, 2024

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Richard Corcoran, President

Approved on: February 9, 2024

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Alexander G. Tzoumas, CAE/CCO

Approved on: February 9, 2024