

PALOMAR COMMUNITY COLLEGE DISTRICT

INTERNAL AUDIT

ANNUAL AUDIT PLAN

FISCAL YEAR 2025-26

JULY 1, 2025 through JUNE 30, 2026









Mission

To help Palomar Community College District leaders assess and mitigate risks by providing auditing services for the benefit of the taxpayers, students, and community.

Vision

Transforming risks into opportunities to strengthen Palomar Community College District's future.

Core Values

Integrity ★ Teamwork ★ Accountability ★ Growth



Fraud, Waste, & Abuse



760-744-1150 Ext. 7210, fraudhotline@palomar.edu

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SECTION A: RISK ASSESSMENT AND ANNUAL AUDIT PLANING

INTERNAL AUDIT

The Internal Audit Department conducts: (1) performance audits; (2) management advisories; (3) agreed upon procedures engagements; and (4) hotline investigations. A performance audit is an objective analysis with findings, conclusions, and audit recommendations designed to help Palomar Community College District leaders improve operations; reduce costs; facilitate decision-making; and contribute to public accountability. A performance audit includes an indepth evaluation of internal controls, compliance with applicable laws and regulations, and an assessment of program's effectiveness and efficiency.

A management advisory is an immediate analysis to evaluate whether a risk requires prompt and immediate action by district leaders. The risk may be in connection with an audit or engagement. For example, if the Internal Audit Department identified potential ghost students receiving financial aid during a performance audit of nonresident tuition fees, then the Internal Audit Department will perform an analysis of the risk and report the risk on a management advisory memorandum.

In an agreed-upon procedures engagement, the Internal Audit Department agreed with management to perform specific procedures on a subject matter. At the conclusion of the engagement, we report on the findings based on specific procedures, but do not provide an opinion, conclusion, or audit recommendation.

The Palomar Community College District's Fraud Hotline was established for individuals to report, in confidence, any allegations of fraud, waste, and abuse to the Internal Audit Department. An allegation is a statement of wrongdoing or impropriety that includes the following elements: who, what, when, where, how, and why. The Internal Audit Department will perform an initial investigation of the allegation to determine whether the allegation can be substantiated and recommend a course of action to the Superintendent/President. We will refer the investigation to a 3rd party if we cannot be independent in fact or in appearance.

RISK ASSESSMENT PROCESS

The Internal Audit Department conducts an annual risk assessment to develop an internal audit plan each fiscal year (FY). The risk assessment process starts with discussions with the Governing Board President, the Governing Board Vice President, and Senior Executive Leaders¹

¹ Senior Executive Leadership: Superintendent/President Dr. Star Rivera-Lacey; Interim Assistant Superintendent/Vice President of Finance and Administrative Services Christopher Yatooma; Assistant Superintendent/Vice President of Instructional Services Dr. Tina Recalde; Assistant Superintendent/Vice President of Human Resource Services Anna Pedroza; and Assistant Superintendent/Vice President of Student Services Nicholas Mata.

during the April-June timeframe² of each FY. The purpose of the discussions is to assess, identify, and prioritize risks. Senior Executive Leaders may use a risk score card to systematically prioritize risks. A risk is scored based on a calculation of the likelihood of the risk occurring multiplied by the severity of consequences if the risk occurred. Exhibit A shows the Risk Score Card.

Although this is true, the Internal Audit Department considers risks identified by staff and external stakeholders for inclusion in the annual audit plan throughout the FY. Additionally, we may initiate audit topics for inclusion in the annual audit plan upon review or analysis of internal or external documents.

ANNUAL AUDIT PLAN

The Annual Audit Plan details audits and engagements to be conducted by the Internal Audit Department each FY. The Superintendent/President approves and promulgates the Annual Audit Plan each FY. The plan is a dynamic document that the Governing Board, Senior Executive Leaders, or the Internal Audit Department may modify to respond to unanticipated risks and events. We may also revise the audit objectives within the plan as necessary. When significant modifications are made, the Superintendent/President will re-approve and re-promulgate the Annual Audit Plan. Exhibit B shows the approved FY 2025-26 Annual Audit Plan.

AUDIT PROCESS

Planning Phase

The audit process consists of four phases: (1) planning; (2) fieldwork; (3) reporting; and (4) follow-up. During the planning phase, the Internal Audit Department informs pertinent management personnel that an audit has been initiated. During this phase, we gather initial background information to gain an understanding of the audited area. Although we may begin to conduct one-on-one interviews with pertinent employees, we will make every effort to minimize disruptions to employees' workloads and schedules.

Fieldwork Phase

The fieldwork phase includes an assessment of internal controls, compliance with laws and regulations, and testing transactions. During this phase, we continue to conduct one-on-one interviews and analyze additional data to develop findings, conclusions, and audit recommendations. We communicate preliminary audit results and recommendations with the relevant personnel on an ongoing basis. Additionally, we obtain feedback from relevant personnel on feasible corrective actions to address the audit recommendations.

² This timeline reflects the general process and may vary due to scheduling availability.

Reporting Phase

During the reporting phase, we write an audit report summarizing findings, conclusions, and audit recommendations. Corrective actions taken by auditees during the audit and planned corrective actions to address audit recommendations are incorporated into the report.

Follow-up Phase

There will be occasions when corrective actions to resolve an audit issue will not be accomplished until after the audit report is finalized. In these cases, we will perform follow-up on previously reported recommendations to determine whether planned corrective actions were implemented.

BIENNIAL REPORT

The Internal Audit Department submits a biennial report to the Governing Board and the Superintendent/President summarizing the results of audits and engagements performed every 2 years. We will make the biennial reports publicly available on the Palomar Community College District's website. The biennial reports serve to apprise the Government Board, leadership, staff, students, and community of noteworthy findings, recommendations, and corrective actions implemented to strengthen Palomar Community College District's future. The work throughout the biennial reporting period is a testament to the dedication of the district leadership and hard work of its employees.

Mai Logan MAI LOGAN, C.F.E. Internal Auditor

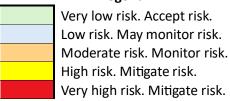
STAR RIVERA-LACEY, Ph.D. Superintendent/President

EXHIBIT A: RISK SCORE CARD

Risk Score Card		Impact Scale Consequences if risk occurred					
		Very Low (1 point)	Low (2 points)	Moderate (3 points)	High (4 points)	Very High (5 points)	
_	Almost Certain (5 points): Expected to occur (90%)	Low 5	Moderate 10	High 15	Very High 20	Very High 25	
hood	High Likely (4 points): Probably will occur (70%)	Very Low 4	Low 8	Moderate 12	High 16	Very High 20	
<u>:=</u>	Possible (3 points): May occur (50%)	Very Low 3	Low 6	Moderate 9	Moderate 12	High 15	
Like	Unlikely (2 points): Not likely to occur (30%)	Very Low 2	Very Low 4	Low 6	Low 8	Moderate 10	
	Rare (1 points): Not likely to occur (10%)	Very low 1	Very Low 2	Very Low 3	Very Low 4	Low 5	

Risk Score = Likelihood X Impact³

Legend



³ We considered risk score 1-4 a very low risk (blue), risk score 5-8 a low risk (green), risk score 9-14 a moderate risk (gold), risk score 15-19 a high risk (yellow), and risk score 20-25 a very high risk (red).

Impact Examples by Palomar Community College District's Division

Division	Very Low	Low	Moderate	High	Very High
	(Accept)	(May Monitor)	(Monitor)	(Mitigate)	(Mitigate)
Superintendent/ President's Office	Unconfirmed rumorNo news item	ConfirmedLow one-time coverage	Confirmed, public embarrassmentModerate news profile	Confirmed, public embarrassmentHigh news profile	Loss of public trustNational news attention
Finance and Administrative Services	 Negligible financial loss 	 Low financial loss 	 Moderate financial loss Requires allocation of resources 	 High financial loss Requires priority allocation of resources 	 Extreme financial loss Requires immediate allocation of resources
Instructional Services	 Minor downturn in student enrollment Negligible impact on teaching 	 Short-term reduction in student enrollment Temporary problems meeting teaching targets 	 Significant reduction of students in a course Significant problem meeting teaching targets Loss of key course 	 Major reduction in student enrollments Major problem meeting teaching targets Loss of key program 	 Serious reduction in student enrollment Serious and sustained problems meeting teaching targets
Human Resource Services	 Multiple negotiations required to finalize collective bargaining agreements with unions Unlikely to result in adverse action 	 Minor non-compliance with collective bargaining agreement (CBA) For example, district discovered and corrected an overtime calculation error Unlikely to result in adverse action 	 Breach of CBA Union files a grievance Potential for allegations of criminal / unlawful conduct 	 Major breach of CBA Fines possible Litigation possible 	 Serious breach of CBA Fines likely Litigation likely

Division	Very Low	Low	Moderate	High	Very High
	(Accept)	(May Monitor)	(Monitor)	(Mitigate)	(Mitigate)
Student Services	 ■ Cohort default rates (CDR)⁴ increased steadily each fiscal year but are below the national average and the 30% threshold ■ District proactively monitor and notify members of the CDR ■ No delay in financial aid award 	 Degradation of financial aid services outside of district's controls, such as the Free Application for Federal Student Aid (FAFSA) form update Delay in financial aid award 	 Noncompliance with Title IV requirements. For example, external auditors found that district did not always make timely return to Title IV funds⁵ District took corrective action to address finding Department of Education (ED) unlikely to impose sanctions, such as fines 	 Major noncompliance with Title IV requirements For example, district disbursed Title IV funds to ineligible students ED likely to impose sanctions, such as fines, limitations, and suspension 	 Serious noncompliance with Title IV requirements

⁴ A school's cohort default rate (CDR) is the percentage of a school's students who had certain federal student loans enter repayment in a federal fiscal year and then default before the end of the cohort default rate period.

⁵ A school must always return any unearned Title IV funds it is responsible for returning within 45 days of the date the school determined the student withdrew.

EXHIBIT B: FY 2025-26 ANNUAL AUDIT PLAN

PROJECT NO.	PROJECT TYPE	TOPIC	PRELIMINARY OBJECTIVE	NEW OR CARRY OVER
2025/26-01	Audit	Payroll	OBJECTIVE: To verify that selected payroll payments were in compliance with applicable guidance, and internal controls were in place and functioning as intended.	Carry Over
2025/26-02	Agreed Upon Procedures Engagement	Funding Sources	OBJECTIVE: To determine whether the appropriate funding sources were used for selected departments.	New
2025/26-03	Audit (Follow-Up)	Position Control	OBJECTIVE: To verify that previously identified risks have been mitigated and that internal controls have been strengthened as recommended in the position control audit completed in FY 2024-25.	New