

**State of Illinois
Deaf and
Hard of Hearing
Commission**

**STATE COMPLIANCE
EXAMINATION**

**FOR THE TWO YEARS ENDED
JUNE 30, 2023**

**Performed as Special
Assistant Auditors
for the Auditor General,
State of Illinois**

**STATE OF ILLINOIS
DEAF AND HARD OF HEARING COMMISSION
STATE COMPLIANCE EXAMINATION
For the Two Years Ended June 30, 2023**

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**STATE OF ILLINOIS
DEAF AND HARD OF HEARING COMMISSION
STATE COMPLIANCE EXAMINATION
For the Two Years Ended June 30, 2023**

COMMISSION OFFICIALS

Director	Mr. Benro Ogunyipe
Legal Counsel	Ms. Tonia Bogener
Personnel Manager/Fiscal Officer	Ms. Patty Greene

GOVERNING COMMISSION MEMBERS

Commission Chair	Mr. Dennis O'Brien
Commissioner	Mr. Michael Dubowe
Commissioner	Mr. David Frazier
Commissioner	Ms. Lori Krakora
Commissioner	Ms. Jennifer Sender
Commissioner	Mr. Kevin Smith
Commissioner (04/04/22 to present)	Mr. Tyrone Barnes
Commissioner (07/01/21 to 04/03/22)	Vacant
Commissioner (09/10/21 to present)	Ms. Jean Draths
Commissioner (07/01/21 to 09/09/21)	Vacant
Commissioner (09/27/21 to present)	Mr. John R. Jun
Commissioner (07/01/21 to 09/26/21)	Vacant
Commissioner (05/22/23 to present)	Mr. Joshua D. Sevier
Commissioner (11/11/22 to 05/21/23)	Vacant
Commissioner (07/01/21 to 11/10/22)	Mr. Joseph Culpepper
Commissioner (03/01/22 to Present)	Vacant
Commissioner (07/01/21 to 02/28/22)	Ms. Susan Dramin-Weiss

COMMISSION OFFICE

The Commission's office is located at:

528 South Fifth Street, Suite 209
Springfield, Illinois 62701



528 South 5th Street, Suite 209 • Springfield, Illinois 62701

MANAGEMENT ASSERTION LETTER

June 14, 2024

Roth & Company LLP
540 West Madison St., Suite 2450
Chicago, Illinois, 60661

Ladies and Gentlemen:

We are responsible for the identification of, and compliance with, all aspects of laws, regulations, contracts, or grant agreements that could have a material effect on the operations of the State of Illinois, Deaf and Hard of Hearing Commission (Commission). We are responsible for and we have established and maintained an effective system of internal controls over compliance requirements. We have performed an evaluation of the Commission's compliance with the following specified requirements during the two-year period ended June 30, 2023. Based on this evaluation, we assert that during the years ended June 30, 2022, and June 30, 2023, the Commission has materially complied with the specified requirements listed below.

- A. The Commission has obligated, expended, received, and used public funds of the State in accordance with the purpose for which such funds have been appropriated or otherwise authorized by law.
- B. The Commission has obligated, expended, received, and used public funds of the State in accordance with any limitations, restrictions, conditions, or mandatory directions imposed by law upon such obligation, expenditure, receipt, or use.
- C. The Commission has complied, in all material respects, with applicable laws and regulations, including the State uniform accounting system, in its financial and fiscal operations.
- D. State revenues and receipts collected by the Commission are in accordance with applicable laws and regulations and the accounting and recordkeeping of such revenues and receipts is fair, accurate, and in accordance with law.
- E. Money or negotiable securities or similar assets handled by the Commission on behalf of the State or held in trust by the Commission have been properly and legally administered, and the accounting and recordkeeping relating thereto is proper, accurate, and in accordance with law.

Yours truly,

State of Illinois, Deaf and Hard of Hearing Commission

SIGNED ORIGINAL ON FILE

Mr. Benro Ogunyipe, Director

SIGNED ORIGINAL ON FILE

Ms. Tonia Bogener, Legal Counsel

SIGNED ORIGINAL ON FILE

Ms. Patty Greene, Personnel Manager/Fiscal Officer

**STATE OF ILLINOIS
DEAF AND HARD OF HEARING COMMISSION
STATE COMPLIANCE EXAMINATION
For the Two Years Ended June 30, 2023**

STATE COMPLIANCE REPORT

SUMMARY

The State compliance testing performed during this examination was conducted in accordance with attestation standards established by the American Institute of Certified Public Accountants; the standards applicable to attestation engagements contained in *Government Auditing Standards* issued by the Comptroller General of the United States; the Illinois State Auditing Act (Act); and the *Audit Guide*.

ACCOUNTANT’S REPORT

The Independent Accountant’s Report on State Compliance and on Internal Control Over Compliance does not contain scope limitations or disclaimers, but does contain a modified opinion on compliance and identifies material weaknesses over internal control over compliance.

SUMMARY OF FINDINGS

<u>Number of</u>	<u>Current Report</u>	<u>Prior Report</u>
Findings	12	11
Repeated Findings	10	7
Prior Recommendations Implemented or Not Repeated	1	3

SCHEDULE OF FINDINGS

<u>Item No.</u>	<u>Page</u>	<u>Last/First Reported</u>	<u>Description</u>	<u>Finding Type</u>
Current Findings				
2023-001	9	2021/2021	Inadequate Controls over State Property	Material Weakness and Material Noncompliance
2023-002	12	2021/2017	Receipt Processing Internal Controls Not Operating Effectively	Material Weakness and Material Noncompliance
2023-003	14	2021/2017	Voucher Processing Internal Controls Not Operating Effectively	Material Weakness and Material Noncompliance
2023-004	17	2021/2021	Weaknesses in Cybersecurity Programs and Practices	Material Weakness and Material Noncompliance

**STATE OF ILLINOIS
DEAF AND HARD OF HEARING COMMISSION
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SCHEDULE OF FINDINGS (CONTINUED)

<u>Item No.</u>	<u>Page</u>	<u>Last/First Reported</u>	<u>Description</u>	<u>Finding Type</u>
Current Findings				
2023-005	19	2021/2017	Inadequate Controls over Reconciliations	Significant Deficiency and Noncompliance
2023-006	21	2021/2019	Failure to Submit Internal Control Certifications	Significant Deficiency and Noncompliance
2023-007	22	2021/2019	Noncompliance with the Interpreter for the Deaf License Act	Significant Deficiency and Noncompliance
2023-008	23	2021/2021	Lack of Adequate Controls over the Review of Internal Controls for Service Providers	Significant Deficiency and Noncompliance
2023-009	25	2021/2019	Inadequate Controls over Personal Services	Significant Deficiency and Noncompliance
2023-010	28	New	Inadequate Controls over Census Data	Significant Deficiency and Noncompliance
2023-011	30	2021/2021	Disaster Recovery Planning Weaknesses	Significant Deficiency and Noncompliance
2023-012	31	New	Inadequate Controls over Travel	Significant Deficiency and Noncompliance
Prior Finding Not Repeated				
A	33	2021/2019	Failure to Submit Debt Transparency Reports	

EXIT CONFERENCE

The Commission waived an exit conference in a correspondence from Mr. Benro Ogunyipe, Director, on June 4, 2024. The responses to the recommendations were provided by Mr. Benro Ogunyipe, Director, in a correspondence dated June 14, 2024.



INDEPENDENT ACCOUNTANT’S REPORT
ON STATE COMPLIANCE AND ON INTERNAL CONTROL OVER COMPLIANCE

Honorable Frank J. Mautino
Auditor General
State of Illinois

and

Governing Board
State of Illinois, Deaf and Hard of Hearing Commission

Report on State Compliance

As Special Assistant Auditors for the Auditor General, we have examined compliance by the State of Illinois, Deaf and Hard of Hearing Commission (Commission) with the specified requirements listed below, as more fully described in the *Audit Guide for Financial Audits and Compliance Attestation Engagements of Illinois State Agencies (Audit Guide)* as adopted by the Auditor General, during the two years ended June 30, 2023. Management of the Commission is responsible for compliance with the specified requirements. Our responsibility is to express an opinion on the Commission’s compliance with the specified requirements based on our examination.

The specified requirements are:

- A. The Commission has obligated, expended, received, and used public funds of the State in accordance with the purpose for which such funds have been appropriated or otherwise authorized by law.
- B. The Commission has obligated, expended, received, and used public funds of the State in accordance with any limitations, restrictions, conditions, or mandatory directions imposed by law upon such obligation, expenditure, receipt, or use.
- C. The Commission has complied, in all material respects, with applicable laws and regulations, including the State uniform accounting system, in its financial and fiscal operations.
- D. State revenues and receipts collected by the Commission are in accordance with applicable laws and regulations and the accounting and recordkeeping of such revenues and receipts is fair, accurate, and in accordance with law.

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- E. Money or negotiable securities or similar assets handled by the Commission on behalf of the State or held in trust by the Commission have been properly and legally administered and the accounting and recordkeeping relating thereto is proper, accurate, and in accordance with law.

Our examination was conducted in accordance with attestation standards established by the American Institute of Certified Public Accountants, the standards applicable to attestation engagements contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the Illinois State Auditing Act (Act), and the *Audit Guide*. Those standards, the Act, and the *Audit Guide* require that we plan and perform the examination to obtain reasonable assurance about whether the Commission complied with the specified requirements in all material respects. An examination involves performing procedures to obtain evidence about whether the Commission complied with the specified requirements. The nature, timing, and extent of the procedures selected depend on our judgement, including an assessment of the risks of material noncompliance with the specified requirements, whether due to fraud or error. We believe that the evidence we obtained is sufficient and appropriate to provide a reasonable basis for our modified opinion.

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

Our examination does not provide a legal determination on the Commission's compliance with the specified requirements.

Our examination disclosed material noncompliance with the specified requirements applicable to the Commission during the two years ended June 30, 2023. As described in the accompanying Schedule of Findings as items 2023-001 through 2023-004, the Commission had not complied, in all material respects, with applicable laws and regulations, including the State uniform accounting system, in its financial and fiscal operations.

In our opinion, except for the material noncompliance with the specified requirements described in the preceding paragraph, the Commission complied with the specified requirements during the two years ended June 30, 2023, in all material respects. However, the results of our procedures disclosed instances of noncompliance with the specified requirements, which are required to be reported in accordance with criteria established by the *Audit Guide* and are described in the accompanying Schedule of Findings as items 2023-005 through 2023-012.

The Commission's responses to the compliance findings identified in our examination are described in the accompanying Schedule of Findings. The Commission's responses were not subjected to the procedures applied in the examination and, accordingly, we express no opinion on the responses.

The purpose of this report is solely to describe the scope of our testing and the results of that testing in accordance with the requirements of the *Audit Guide*. Accordingly, this report is not suitable for any other purpose.



Report on Internal Control Over Compliance

Management of the Commission is responsible for establishing and maintaining effective internal control over compliance with the specified requirements (internal control). In planning and performing our examination, we considered the Commission's internal control to determine the examination procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the Commission's compliance with the specified requirements and to test and report on the Commission's internal control in accordance with the *Audit Guide*, but not for the purpose of expressing an opinion on the effectiveness of the Commission's internal control. Accordingly, we do not express an opinion on the effectiveness of the Commission's internal control.

Our consideration of internal control was for the limited purpose described in the preceding paragraph and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies and, therefore, material weaknesses or significant deficiencies may exist that have not been identified. However, as described in the accompanying Schedule of Findings, we did identify certain deficiencies in internal control that we consider to be material weaknesses and significant deficiencies.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with the specified requirements on a timely basis. A material weakness in internal control is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material noncompliance with the specified requirements will not be prevented, or detected and corrected, on a timely basis. We consider the deficiencies described in the accompanying Schedule of Findings as items 2023-001 through 2023-004 to be material weaknesses.

A significant deficiency in internal control is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance. We consider the deficiencies described in the accompanying Schedule of Findings as items 2023-005 through 2023-012 to be significant deficiencies.

As required by the *Audit Guide*, immaterial findings excluded from this report have been reported in a separate letter.

The Commission's responses to the internal control findings identified in our examination are described in the accompanying Schedule of Findings. The Commission's responses were not subjected to the procedures applied in the examination and, accordingly, we express no opinion on the responses.

The purpose of this report is solely to describe the scope of our testing of internal control and the results of that testing based on the requirements of the *Audit Guide*. Accordingly, this report is not suitable for any other purpose.

SIGNED ORIGINAL ON FILE

Chicago, Illinois
June 14, 2024



**STATE OF ILLINOIS
DEAF AND HARD OF HEARING COMMISSION
SCHEDULE OF FINDINGS - CURRENT FINDINGS
For the Two Years Ended June 30, 2023**

2023-001. **FINDING** (Inadequate Controls over State Property)

The Deaf and Hard of Hearing Commission (Commission) did not maintain adequate documentation and control over its State property during the examination period.

During testing, we noted the Commission did not maintain detailed supporting documentation for its quarterly Agency Report of State Property (Form C-15) filed with the Office of Comptroller (Comptroller). As of June 30, 2022 and June 30, 2023, the Commission reported total equipment of \$26,465 and \$26,465, respectively. The property listing provided by the Commission in response to audit requests could not be reconciled with the ending balances reported in the Form C-15 Reports for the fourth quarters ended June 30, 2022 and June 30, 2023 and to the balances reported in the annual inventory certifications submitted to the Department of Central Management Services (CMS).

Due to these conditions, we were unable to conclude whether the Commission's population of property control records were sufficiently precise and detailed under Attestation Standards promulgated by the America Institute of Certified Public Accountants (AT-C & 205.36) to test the Commission's equipment.

The State Property Control Act (Act) (30 ILCS 605/4) requires the Commission to be accountable for the supervision, control, and inventory of all property under its jurisdiction. In addition, the State Records Act (5 ILCS 160/9) requires the Commission to establish and maintain a program for agency records management, which should include effective controls over the maintenance of records. The Statewide Accounting Management System (SAMS) Manual (Procedure 07.30.20) states the effectiveness of any accounting and financial information system is very much dependent on the accuracy of data submitted and the confidence of its users that the system handles that data properly.

Even given the population limitations noted above which hindered our ability to conclude whether selected samples were representative of the population as a whole, we selected a sample of items from the property listing and performed testing. During testing, we noted the following:

List to Floor and Floor to List Testing:

- One of 25 (4%) equipment items, totaling \$2,606, was not found in the Annual Inventory Certification submitted to CMS for Fiscal Year 2022.
- One of 25 (4%) equipment items, totaling \$3,295, was not included in the Form C-15 Report and in the Annual Inventory Certification submitted to CMS for Fiscal Year 2023.

**STATE OF ILLINOIS
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2023-001. **FINDING** (Inadequate Controls over State Property) (Continued)

The Illinois Administrative Code (Code) (44 Ill. Admin. Code 5010.220) requires the Commission to report to CMS all equipment with an acquisition value greater than the nominal value of \$2,500.

Form C-15 Testing:

- One of 8 (13%) Form C-15 Report was not submitted timely. The Form C-15 Report was submitted one day late.

The SAMS Manual (Procedure 29.20.10) requires the Commission to submit the quarterly C-15 reports no later than the last day of the month following the last day of the quarter.

Voucher Testing:

- Three of 3 (100%) equipment vouchers tested, totaling \$4,680, pertained to purchases of equipment with individual prices of \$500 or more, were not found on the Commission's property control records. Further, one of these vouchers has an individual equipment priced at \$2,500 or more but was not reported to the CMS.

The SAMS Manual (Procedure 29.10.10) requires the Commission to maintain detailed property records for each property item in its possession. Additionally, equipment with a value that is greater than \$2,500 and equipment that is subject to theft with a value less than \$2,500 must be reported to CMS by the agency holding the property. Further, the Code (44 Ill. Admin. Code 5010.400) requires the Commission to adjust property records within 90 days of acquisition, change, or deletion of equipment. Finally, the Commission's policy requires all purchased items with an acquisition cost of at least \$500 to be added to the Commission's property control records.

- Two of 3 (67%) equipment vouchers tested, totaling \$3,102, pertained to purchases of new furniture of \$500 or more, did not have a New Furniture Affidavit filed with the State Surplus Administrator.

The State Property Control Act (30 ILCS 605/7a) requires the Commission, prior to purchasing new furniture, to first check with CMS to determine if any surplus furniture can be used in place of new furniture. If the Commission finds it is unable to use available surplus furniture, it must file

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2023-001. **FINDING** (Inadequate Controls over State Property) (Continued)

an affidavit prior to any purchase specifying the type of furniture, the quantities of each type, the cost per type, and the total cost per category with a clear statement identifying why the furniture must be purchased new.

In addition, we noted the Commission had not adopted a policy delineating categories of equipment that are subject to theft with less than the nominal value. The Code (44 Ill. Admin. Code 5010.210(c)) requires equipment that is subject to theft with a value less than the nominal value be marked with a unique identification number to be reported. Additionally, the Commission is responsible for adopting policies clearly delineating categories of equipment considered to be subject to theft.

During the prior examination, Commission officials attributed the problems in its property control records to competing priorities and the effect of Covid-19 on its operations. During the current examination, Commission officials attributed the problems with its property control records to transition to ERP System and employee oversight related to competing priorities and staffing shortages.

Failure to maintain accurate property and equipment records and submit Form C-15 Reports timely represents noncompliance with State laws and regulations and increases the potential for fraud and the possible loss or theft of State property. Further, failure to adopt a policy delineating the categories of equipment that are subject to theft results in an inconsistent understanding and application of the requirements of the Code. (Finding Code No. 2023-001, 2021-001)

RECOMMENDATION

We recommend the Commission maintain complete and accurate property records and ensure timely filing of Form C-15 Reports. In addition, we recommend the Commission adopt a policy delineating categories of equipment that are subject to theft.

COMMISSION RESPONSE

The Commission accepts the recommendation. The Commission will review and strengthen internal procedures to ensure adequate controls over its property records and ensure C-15 Reports are submitted timely. In addition, the Commission will implement an internal property control policy which delineates the categories of equipment considered subject to theft.

**STATE OF ILLINOIS
DEAF AND HARD OF HEARING COMMISSION
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2023-002. **FINDING** (Receipt Processing Internal Controls Not Operating Effectively)

The Deaf and Hard of Hearing Commission's (Commission) internal controls over its receipt processing function were not operating effectively during the examination period.

Due to our ability to rely upon the processing integrity of the Enterprise Resource Planning (ERP) System operated by the Department of Innovation and Technology (DoIT), we were able to limit our receipt testing at the Commission to determine whether certain key attributes were properly entered by the Commission's staff into the ERP System. In order to determine the operating effectiveness of the Commission's internal controls related to receipt processing, we selected a sample of key attributes (attributes) to determine if the attributes were properly entered into the ERP System based on supporting documentation. The attributes tested were (1) amount, (2) fund being deposited into, (3) date of receipt, (4) date deposited, and (5) SAMS Source Code.

Our testing noted 28 of 140 (20%) attributes for receipts testing, specifically the date of receipt, were not properly entered into the ERP System. Therefore, the Commission's internal controls over receipt processing **were not operating effectively**.

The State Officers and Employees Money Disposition Act (Act) (30 ILCS 230/2(a)) requires the Commission to maintain a detailed record of all moneys received, which is to include date of receipt, the payor, purpose and amount, and the date and manner of disbursement. Additionally, Statewide Accounting Management System (Manual) (Procedure 25.10.10) requires the Commission to segregate the moneys into funds and document the source of the moneys. Further, the Fiscal Control and Internal Auditing Act (30 ILCS 10/3001) requires the Commission to establish and maintain a system, or systems, of internal fiscal and administrative controls to provide assurance revenues, expenditures, and transfers of assets, resources, or funds applicable to the operations are properly recorded and accounted for to permit the preparation of accounts and reliable financial and statistical reports and to maintain accountability over the State's resources.

Due to this condition, we qualified our opinion because we determined the Commission had not complied, in all material respects, with applicable laws and regulations, including the State uniform accounting system, in its financial and fiscal operations.

**STATE OF ILLINOIS
DEAF AND HARD OF HEARING COMMISSION
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2023-002. **FINDING** (Receipt Processing Internal Controls Not Operating Effectively)
(Continued)

Even given the limitations noted above, we conducted an analysis of the Commission's receipts data for fiscal years 2022 and 2023 to determine compliance with the Act. We noted the Commission's receipts data did not document the date on which the payment was received for 113 of 141 (80%) receipts. As such, we were unable to determine if the Commission deposited the receipts timely.

The Act (30 ILCS 230/2(a)) requires the Commission to maintain a detailed record of all moneys received, which is to include date of receipt, the payor, purpose and amount, and the date and manner of disbursement.

During the prior examination Commission officials indicated the problems noted were due to competing priorities. During the current examination, Commission officials indicated the issues were due to data entry errors and oversight. Commission officials also indicated payment receipt dates were not entered into the ERP System, but were documented manually.

Failure to properly enter the key attributes into the State's ERP System when processing a receipt hinders the reliability and usefulness of data extracted from the ERP System, which can result in improper recording of revenues and accounts receivable. (Finding Code No. 2023-002, 2021-002, 2019-006, 2017-003)

RECOMMENDATION

We recommend the Commission design and maintain internal controls to provide assurance its data entry of key attributes into the ERP System is complete and accurate.

COMMISSION RESPONSE

The Commission accepts the recommendation. The Commission will review and strengthen its internal controls to ensure receipt processing functions are operating effectively. Staff will be provided with additional training as needed.

STATE OF ILLINOIS
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2023-003. **FINDING** (Voucher Processing Internal Controls Not Operating Effectively)

The Deaf and Hard of Hearing Commission's (Commission) internal controls over its voucher processing function were not operating effectively during the examination period.

Due to our ability to rely upon the processing integrity of the Enterprise Resource Planning (ERP) System operated by the Department of Innovation and Technology (DoIT), we were able to limit our voucher testing at the Commission to determine whether certain key attributes were properly entered by the Commission's staff into the ERP System. In order to determine the operating effectiveness of the Commission's internal controls related to voucher processing and subsequent payment of interest, we selected a sample of key attributes (attributes) to determine if the attributes were properly entered into the State's ERP System based on supporting documentation. The attributes tested were (1) vendor information, (2) expenditure amount, (3) object(s) of expenditure, and (4) the later of the receipt date of the proper bill or the receipt date of the goods and/or services.

Our testing noted nine of 140 (6%) attributes were not properly entered into the ERP System. Therefore, the Commission's internal controls over voucher processing **were not operating effectively**.

The Statewide Accounting Management System (SAMS) Manual (Procedure 17.20.20) requires the Commission to, after receipt of goods or services, verify the goods or services received met the stated specifications and prepare a voucher for submission to the Office of the Comptroller to pay the vendor, including providing vendor information, the amount expended, and object(s) of expenditure. Further, the Illinois Administrative Code (Code) (74 Ill. Admin. Code 900.30) requires the Commission to maintain records which reflect the date goods were received and accepted, the date services were rendered, and the proper bill date. Finally, the Fiscal Control and Internal Auditing Act (30 ILCS 10/3001) requires the Commission establish and maintain a system of internal fiscal and administrative controls to provide assurance expenditures are properly recorded and accounted for to maintain accountability over the State's resources.

Due to this condition, we qualified our opinion because we determined the Commission had not complied, in all material respects, with applicable laws and regulations, including the State uniform accounting system, in its financial and fiscal operations.

Even given the limitations noted above, we conducted an analysis of the Commission's expenditures data for fiscal years 2022 and 2023 to determine compliance with the State Prompt Payment Act (Act) (30 ILCS 540) and the Code (74 Ill. Admin. Code 900.70). We noted the following noncompliance:

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2023-003. **FINDING** (Voucher Processing Internal Controls Not Operating Effectively)
(Continued)

Commission officials indicated, as they did in the prior examination, exceptions were due to ongoing staff vacancies, employee oversight, competing priorities, and delay in obtaining certification of vendors' Employer Identification Numbers and W-9 forms.

Failure to properly enter the key attributes into the State's ERP System when processing a voucher for payment hinders the reliability and usefulness of data extracted from the ERP System, which can result in improper interest calculations and expenditures. Further, failure to timely process proper bills and approve vouchers for payment of interest due, and failure to maintain adequate documentation represent noncompliance with the Code and the Act. (Finding Code No. 2023-003, 2021-006, 2019-004, 2017-005)

RECOMMENDATION

We recommend the Commission design and maintain internal controls to provide assurance its data entry of key attributes into the ERP System is complete and accurate. We also recommend the Commission strengthen its internal controls to ensure bills are processed within 30 days of receipt, vouchers are approved for payment of interest due to vendors, and expenditures are properly documented.

COMMISSION RESPONSE

The Commission accepts the recommendation. The Commission will review and strengthen its internal controls to ensure voucher processing functions are operating effectively. Staff will be provided with additional training as needed.

**STATE OF ILLINOIS
DEAF AND HARD OF HEARING COMMISSION
SCHEDULE OF FINDINGS - CURRENT FINDINGS
For the Two Years Ended June 30, 2023**

2023-004. **FINDING** (Weaknesses in Cybersecurity Programs and Practices)

The Deaf and Hard of Hearing Commission (Commission) had not implemented adequate internal controls related to cybersecurity programs, practices, and control of confidential information.

In order to meet its primary role of “promoting education and awareness of the legal requirements for effective communication on behalf of people with hearing loss in Illinois,” the Commission utilized several Information Technology (IT) applications which contained confidential and personal information.

The Illinois State Auditing Act (30 ILCS 5/3-2.4) requires the Auditor General to review State agencies and their cybersecurity programs and practices. During our examination of the Commission’s cybersecurity program, practices, and control of confidential information, we noted the Commission had not:

- Developed a formal, comprehensive, adequate, and communicated security program (including policies, procedures, and processes as well as clearly defined responsibilities over the security of computer programs and data) to manage and monitor the regulatory, legal, environmental, and operational requirements.
- Developed a risk management methodology, conducted a comprehensive risk assessment, and implemented risk reducing internal controls.
- Established a data classification methodology for classifying its data to ensure adequate protection of the data.

In addition, we noted the Commission had not established a process to review and ensure security incidents identified by the Department of Innovation and Technology (DoIT) involving the Commission’s systems or data were fully remediated and related vulnerabilities were assessed.

The *Framework for Improving Critical Infrastructure Cybersecurity* and the *Security and Privacy Controls for Information Systems and Organizations* (Special Publication 800-53, Fifth Revision) published by the National Institute of Standards and Technology requires entities to consider risk management practices, threat environments, legal and regulatory requirements, mission objectives and constraints in order to ensure the security of their applications, data, and continued business mission.

The Fiscal Control and Internal Auditing Act (30 ILCS 10/3001) requires the Commission to establish and maintain a system, or systems, of internal fiscal and

**STATE OF ILLINOIS
DEAF AND HARD OF HEARING COMMISSION
SCHEDULE OF FINDINGS - CURRENT FINDINGS
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2023-004. **FINDING** (Weaknesses in Cybersecurity Programs and Practices) (Continued)

administrative controls to provide assurance funds, property, and other assets and resources are safeguarded against waste, loss, unauthorized use and misappropriation and maintain accountability over the State's resources.

Commission officials indicated, as they did in the prior examination, the weaknesses were the result of the reassignment of the IT Coordinator's responsibilities and implementation of new policies due to competing priorities and ongoing staff vacancies.

Lack of adequate cybersecurity programs and practices could result in unidentified risk and vulnerabilities, which could ultimately lead to the Commission's confidential and personal information being susceptible to cyberattacks and unauthorized disclosure. (Finding Code No. 2023-004, 2021-003)

RECOMMENDATION

We recommend the Commission implement internal controls related to cybersecurity programs, practices, and control of confidential information. Specifically, we recommend the Commission:

- Develop a formal, comprehensive, adequate, and communicated security program to manage and monitor the regulatory, legal, environmental, and operational requirements.
- Develop a risk management methodology, conduct a comprehensive risk assessment, and implement risk reducing internal controls.
- Develop a data classification methodology.
- Establish a process to review and ensure security incidents identified by DoIT involving the Commission's systems or data are fully remediated and related vulnerabilities are assessed.

COMMISSION RESPONSE

The Commission accepts the recommendation. The Commission will continue to work with the DoIT to develop and implement an appropriate and comprehensive cybersecurity program, practices, and control of confidential information.

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DEAF AND HARD OF HEARING COMMISSION
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2023-005. **FINDING** (Inadequate Controls over Reconciliations)

The Deaf and Hard of Hearing Commission (Commission) did not ensure all monthly reconciliations of the Commission's cash and contract or obligations activity records to the records of the Office of Comptroller (Comptroller) were performed.

During testing, we noted the following:

- Eight of 8 (100%) monthly reconciliations of *Cash Reports* (SB05) selected for testing were not prepared.
- Three of 8 (38%) monthly reconciliations of *Agency Contract Reports* (SC14) or *Obligation Activity Reports* (SC15) selected for testing were not prepared.

This exception was first reported in the Commission's State Compliance Examination report for the two years ended June 30, 2017. In subsequent years, the Commission has been unsuccessful in implementing adequate corrective action.

The Statewide Accounting Management System (SAMS) (Procedure 07.30.20) notes the effectiveness of any accounting and financial information system is very much dependent on the accuracy of data submitted and the confidence of its users that the system handles that data properly. Commission reconciliation is the primary control that insures these requirements are being satisfied. As such, SAMS (Procedures 09.40.10, 09.40.30, 15.30.10, and 15.30.20) requires the Commission to perform a reconciliation of the monthly reports generated by the Comptroller to its internal accounting records. These reconciliations must be completed within 60 days of each month's end.

Additionally, the Fiscal Control and Internal Auditing Act (30 ILCS 10/3001) requires the Commission to establish and maintain a system, or systems, of internal and fiscal administrative controls, to provide assurance revenues, expenditures, and transfers of assets, resources, or funds applicable to operations are properly recorded and accounted for to permit the preparation of accounts and reliable financial and statistical reports to maintain accountability over the State's resources.

During the prior examination, Commission officials indicated the reconciliations were not documented as required due to staffing issues. During the current examination, Commission officials indicated they only maintained the SC14 and SC15 reports from the Comptroller website since it only contains one (1) contractual obligation, which appeared in both reports. Thus, they did not maintain

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2023-005. **FINDING** (Inadequate Controls over Reconciliations) (Continued)

separate reconciliation records. Commission officials also indicated the failure to prepare monthly reconciliations of SB05 is due to changes in management and system migration.

Failure to prepare monthly reconciliations could lead to discrepancies between the Commission and Comptroller's records and could result in inaccurate financial reporting and errors not being corrected timely and represents noncompliance with SAMS requirements. (Finding Code No. 2023-005, 2021-005, 2019-003, 2017-002)

RECOMMENDATION

We recommend the Commission comply with Comptroller procedures and perform monthly reconciliations.

COMMISSION RESPONSE

The Commission accepts the recommendation. The Commission will review and strengthen its procedures for its monthly reconciliations to the records of the Comptroller to be documented and completed in a timely manner.

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2023-006. **FINDING** (Failure to Submit Internal Control Certifications)

The Deaf and Hard of Hearing Commission (Commission) did not comply with the Fiscal Control and Internal Auditing Act (Act).

During testing, we noted the Commission could not provide documentation to support submission of its Fiscal Year 2022 internal control certification to the Auditor General, as required by the Act. In addition, the Auditor General does not have record of receiving it.

The Act (30 ILCS 10/3003) requires the Commission's Director to prepare and submit to the Auditor General a certification that the systems of internal fiscal and administrative controls of the Commission either comply or do not comply with the Act by May 1st of each year.

Commission officials indicated, as they did during the prior examination, the failure to submit was due to competing priorities.

Failure to submit the required certification to the Auditor General may result in weaknesses in internal control going undetected and represents noncompliance with the Act. (Finding Code No. 2023-006, 2021-004, 2019-007)

RECOMMENDATION

We recommend the Commission ensure they submit their internal control certifications to the Auditor General by May 1 of each year.

COMMISSION RESPONSE

The Commission accepts the recommendation. The Commission has reviewed and strengthened its procedures to ensure the internal control certifications are timely submitted.

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2023-007. **FINDING** (Noncompliance with the Interpreter for the Deaf License Act)

The Deaf and Hard of Hearing Commission (Commission) did not comply with statutory requirements enumerated in the Interpreter for the Deaf Licensure Act of 2007 (Act).

During testing, we noted the following:

- The number of applicants for new, renewal, and restoration licenses reported in the Calendar Year 2022 statistical report did not agree with the Commission's records.
- The Commission did not maintain documentation supporting the Calendar Year 2021 statistical report. As such, we were unable to determine if the number of issued and denied applications for various types of licenses were accurate. In addition, the Commission published the Calendar Year 2021 report, 345 days late.

The Act (225 ILCS 443/47) requires the Commission to prepare and publish a report of statistical information related to new and renewal license applications during the preceding calendar year, by May 1 of each year. The information required to be presented in this report includes the number of new or renewal applications where the applicant had previous criminal convictions and whether the application was approved or denied.

During the prior examination, Commission officials indicated competing priorities, along with staffing limitations, contributed to the issues noted with the reports. During the current examination, Commission officials indicated exceptions were due to oversight and human error from collecting the data.

Failure to timely publish accurate and adequately supported statistical information inhibits the ability of interested parties to obtain the required statistical information relating to new, renewal, and restoration licenses. (Finding Code No. 2023-007, 2021-007, 2019-005)

RECOMMENDATION

We recommend the Commission ensure all required statistical reports are accurately and adequately supported and timely published.

COMMISSION RESPONSE

The Commission accepts the recommendation. The Commission has reviewed and strengthened its internal procedures to ensure compliance with statutory requirements.

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2023-008. **FINDING** (Lack of Adequate Controls over the Review of Internal Controls for Service Providers)

The Deaf and Hard of Hearing Commission (Commission) did not have adequate controls over the review of internal controls over its service providers.

The Commission entered into agreements with various service providers to assist with significant processes such as: (1) management of the procurement, retention, installation, maintenance, and operation of information technology (IT) used by the Commission, (2) security protection, privacy of IT information as provided by law, and back-up facilities, (3) installation and operation of IT systems, (4) credit card and online payments processing, and (5) license and permit processing.

During testing of three service providers, we noted the Commission had not:

- Obtained and reviewed the System and Organization Control (SOC) report for one (33%) service provider.
- Maintained documentation of the independent review of SOC reports for two (67%) service providers.
- Monitored and documented the operation of the Complementary User Entity Controls (CUECs) relevant to its operations for two (67%) service providers.
- Conducted an analysis to determine the impact of noted deviations within the SOC reports for two (67%) service providers.

The Commission is responsible for the design, implementation, and maintenance of internal controls related to its operations to assure its critical and confidential data are adequately safeguarded. This responsibility is not limited due to the processes being outsourced.

The *Security and Privacy Controls for Information Systems and Organizations* (Special Publication 800-53, Fifth Revision) published by the National Institute of Standards and Technology (NIST), Maintenance and System and Service Acquisition sections, requires entities outsourcing their information technology environment or operations to obtain assurance over the entities' internal controls related to the services provided. Such assurance may be obtained through SOC reports or independent reviews.

Additionally, the Fiscal Control and Internal Auditing Act (30 ILCS 10/3001) requires the Commission to establish and maintain a system, or systems, of internal fiscal and administrative controls to provide assurance funds, property, and

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2023-008. **FINDING** (Lack of Adequate Controls over the Review of Internal Controls for Service Providers) (Continued)

other assets and resources are safeguarded against waste, loss, unauthorized use, and misappropriation.

During the prior examination, Commission officials indicated competing priorities contributed to the conditions noted. During the current examination, Commission officials indicated the weaknesses were the result of the reassignment of the IT Coordinator's responsibilities and implementation of new policies due to competing priorities and ongoing staff vacancies.

Without adequate controls over the review of internal controls over its service providers, the Commission does not have assurance the service providers' internal controls are adequate to ensure its critical and confidential data are secure and available. (Finding Code No. 2023-008, 2021-008)

RECOMMENDATION

We recommend the Commission obtain SOC reports or conduct independent internal control reviews at least annually. In addition, we recommend the Commission:

- Monitor and document the operation of the Complementary User Entity Controls (CUECs) related to the Commission's operations.
- Either obtain and review SOC reports for subservice organizations or perform alternative procedures to satisfy itself that the existence of the subservice organization would not impact its internal control environment.
- Document its review of the SOC reports and review all significant issues with subservice organizations to ascertain if a corrective action plan exists and when it will be implemented, any impact to the Commission, and any compensating controls.

COMMISSION RESPONSE

The Commission accepts the recommendation. The Commission will implement necessary procedures to obtain and review the necessary reports related to its services providers.

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2023-009. **FINDING** (Inadequate Controls over Personal Services)

The Deaf and Hard of Hearing Commission (Commission) did not maintain adequate controls over personal services.

During testing, we noted the following:

- The Bilingual Needs and Bilingual Pay Survey for Fiscal Year 2021 was not submitted to the Department of Central Management Services (CMS) which was necessary to prepare the State’s 2022 Bilingual Needs Survey Report.

The Civil Administrative Code of Illinois (Code) (20 ILCS 405/405-120) requires CMS to “...develop and implement plans to increase the number of Hispanics employed by State government and the number of bilingual persons employed in State government at supervisory, technical, professional, and managerial levels.” The Code (20 ILCS 405/405-125) further requires all agencies to “...implement strategies and programs in accordance with State Hispanic Employment Plan, the State Asian-American Employment Plan, and the Native American Employment Plan to increase the number of Hispanics employed by the State, the number of Asian-Americans employed by the State, the number of bilingual persons employed by the State, and the number of Native American persons employed by the State at supervisory, technical, professional, and managerial levels.” CMS develops the plan required by the Code through its assimilation of the needs noted in the Bilingual Needs and Pay Survey completed by each agency.

- The Agency Workforce Reports (Reports) were not accurately completed. Specifically, we noted:
 - For the Fiscal Year 2021 Report, the count of Caucasian males was overstated by one.
 - For the Fiscal Year 2022 Report, the count of minorities was understated by one and the percentage of males with physical disabilities in the income range of \$80,000 - \$99,999 should be 50% instead of 100%.

The State Employment Records Act (Act) (5 ILCS 410/20) requires the Commission to collect, classify, maintain, and report adequate information regarding the number of minorities, women, and persons with physical disabilities employed by the Commission on a fiscal year basis.

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2023-009. **FINDING** (Inadequate Controls over Personal Services) (Continued)

Furthermore, the Fiscal Control and Internal Auditing Act (30 ILCS 10/3001) requires the Commission to establish and maintain a system, or systems, of internal fiscal and administrative controls to provide assurance that resources are utilized efficiently, effectively, and in compliance with applicable law and that funds are safeguarded against waste, loss, unauthorized use and misappropriation. Effective internal controls should include procedures to ensure accurate reports are submitted to the Governor's Office and the Office of the Secretary of State.

- Notices of State employee protection under the Whistle Blower Protection Article of the State Officials and Employees Ethics Act were not conspicuously displayed in the Commission's office.

The State Officials and Employees Ethics Act (5 ILCS 430/15) requires the Commission to conspicuously display notices of State employee protection under the Whistle Blower Protection Article of the State Officials and Employees Ethics Act (5 ILCS 430/15).

- Accrued benefit time was not properly calculated. Specifically, we noted:
 - One of 3 (33%) employees' sick time accrual had mathematical errors resulting in the employee's balance being overstated by 19.75 hours.
 - One of 3 (33%) employees' vacation time accrual had mathematical errors resulting in the employee's balance being understated by 46.50 hours.

The Illinois Administrative Code (80 Ill. Admin. Code 303.340) requires the Commission to maintain accurate daily attendance records. Effective internal controls over time and attendance include ensuring accrued benefit time is properly calculated.

During the prior examination, Commission officials indicated the issues noted were mainly due to unfilled vacancies in the Commission's staff. During the current examination period, Commission officials indicated exceptions were due to oversight and competing priorities.

Failure to comply with the CMS Bilingual Needs and Bilingual Pay Survey request represented a disregard for the reporting process and represents noncompliance with the Code. In addition, failure to include accurate information in the Report could deter efforts by the State to achieve a more diversified workforce. Failure to

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2023-009. **FINDING** (Inadequate Controls over Personal Services) (Continued)

post notice of State employee protection under the Whistle Blower Protection Article represents noncompliance with the State Officials and Employees Ethics Act. Further, failure to ensure accrued leave balances are properly calculated can result in employees using benefit time they do not have and reduces the overall reliability of Statewide financial reporting of the compensated absences liability. (Finding Code No. 2023-009, 2021-009, 2019-009)

RECOMMENDATION

We recommend the Commission strengthen its internal controls over personal services to ensure compliance with the Civil Administrative Code of Illinois, State Employment Records Act, and State Officials and Employees Ethics Act. In addition, we recommend the Commission ensure accurate calculation of accrued benefit time.

COMMISSION RESPONSE

The Commission accepts the recommendation. The Commission will review and strengthen its internal controls over personal services including the reconciliation of accrued benefit time between Central Time and Attendance System and eTime applications.

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2023-010. **FINDING** (Inadequate Controls Over Census Data)

The Deaf and Hard of Hearing Commission (Commission) did not timely complete a census data reconciliation to provide assurance census data submitted to its pension and other postemployment benefits (OPEB) plans were complete and accurate.

Census data is demographic data (date of birth, gender, years of service, etc.) of the active, inactive, or retired members of a pension plan or OPEB plan. The accumulation of inactive or retired members' census data occurs before the current accumulation period of census data used in the plan's actuarial valuation (which eventually flows into each employer's financial statements), meaning the plan is solely responsible for establishing internal controls over these records and transmitting this data to the plan's actuary. In contrast, responsibility for active members' census data during the current accumulation period is split among the plan and each member's current employer(s). Initially, employers must accurately transmit census data elements of their employees to the plan. Then, the plan must record and retain these records for active employees and then transmit this census data to the plan's actuary.

We noted the Commission's employees are members of both the State Employees' Retirement System of Illinois (SERS) for their pensions and the State Employees Group Insurance Program sponsored by the State of Illinois, Department of Central Management Services (CMS) for their OPEB. In addition, we noted these plans have characteristics of different types of pensions and OPEB plans, including single employer plans and cost-sharing multiple-employer plans. Finally, we noted CMS' actuaries use SERS' census data records to prepare the OPEB actuarial valuation.

During testing, we noted the Commission did not timely submit Fiscal Year 2021 census data reconciliation to SERS by September 1, 2021. The reconciliation was submitted 232 days late.

For employers participating in plans with multiple-employer and cost-sharing characteristics, the American Institute of Certified Public Accountants' *Audit and Accounting Guide: State and Local Governments* (AAG-SLG) (§ 13.177 for pensions and § 14.184 for OPEB) notes the determination of net pension/OPEB liability, pension/OPEB expense, and the associated deferred inflows and deferred outflows of resources depends on employer-provided census data reported to the plan being complete and accurate along with the accumulation and maintenance of this data by the plan being complete and accurate. To help mitigate against the risk of a plan's actuary using incomplete or inaccurate census data within similar agent multiple-employer plans, the AAG-SLG (§ 13.181 (A-27) for pensions and § 14.141 for OPEB) recommends an employer annually reconcile its active members'

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2023-010. **FINDING** (Inadequate Controls Over Census Data) (Continued)

census data to a report from the plan of census data submitted to the plan's actuary, by comparing the current year's census data file to both the prior year's census data file and its underlying records for changes occurring during the current year.

Further, the Fiscal Control and Internal Auditing Act (30 ILCS 10/3001) requires the Board establish and maintain a system, or systems, of internal fiscal and administrative controls to provide assurance funds applicable to operations are properly recorded and accounted for to permit the preparation of reliable financial and statistical reports.

Commission officials indicated the delay in submission was due to installation and activation of specific encryption software by SERS.

Failure to timely reconcile and submit active members' census data reported to and held by SERS to the Commission's records could result in each plan's actuary relying on incomplete or inaccurate census data in the calculation of the State's pension and OPEB balances, which may result in a misstatement of these amounts. (Finding Code No. 2023-010)

RECOMMENDATION

We recommend the Commission timely complete and submit the SERS annual reconciliation process of its active members' census data from its underlying records to a report of the census data submitted to each plan's actuary.

COMMISSION RESPONSE

The Commission accepts the recommendation. The Commission has established internal procedures to ensure the census data reconciliation is timely reported to SERS.

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2023-011. **FINDING** (Disaster Recovery Planning Weaknesses)

The Deaf and Hard of Hearing Commission (Commission) had not developed a Disaster Recovery plan.

In order to carry out its mission, the Commission utilizes several information technology (IT) applications. During our examination, we requested the Commission's disaster recovery plan to ensure timely recovery of its applications and data. However, the Commission had not developed a disaster recovery plan.

The *Contingency Planning Guide for Information Technology Systems* published by the National Institute of Standards and Technology requires entities to have an updated and regularly tested disaster contingency plan to ensure the timely recovery of applications and data.

The Fiscal Control and Internal Auditing Act (30 ILCS 10/3001) requires the Commission to establish and maintain a system, or systems, of internal fiscal and administrative controls to provide assurance funds, property, and other assets and resources are safeguarded against waste, loss, unauthorized use, and misappropriation and maintain accountability over the State's resources.

During the prior examination, Commission officials indicated the weaknesses was the result of the temporary vacancy of their IT Coordinator. During the current examination, Commission officials disagrees with the exception and indicated the development of a disaster recovery plan is contingent upon the work of the Department of Innovation and Technology (DoIT) since DoIT maintains the systems.

Failure to adequately plan for the recovery of applications and data could result in the loss of data and the inability to recover within an acceptable time period. (Finding Code No. 2023-011, 2021-011)

RECOMMENDATION

We recommend the Commission work with DoIT to obtain a detailed understanding of each agency's roles and responsibilities. We also recommend the Commission develop a detailed disaster recovery plan in order to recover all its applications and data. Lastly, we recommend the Commission conduct detailed recovery testing at least annually.

COMMISSION RESPONSE

The Commission accepts the recommendation. As the Commission does not maintain any independent agency applications, the Commission will coordinate with the DoIT to ensure a disaster recovery plan is in place and conduct detailed recovery testing on an annual basis.

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2023-012. **FINDING** (Inadequate Controls over Travel)

The Deaf and Hard of Hearing Commission (Commission) did not exercise adequate controls over travel.

During testing, we noted the following:

- Six of eight (75%) travel vouchers tested, totaling \$1,367, were submitted between 73 and 119 days after the last day of travel.

The Internal Revenue Service (IRS) Publication 535, *Business Expenses*, requires travelers' travel expense reimbursements to be considered taxable wages if the travel expenses are not submitted within a reasonable period, typically within 60 days of the expense being incurred.

- One of eight (13%) travel vouchers tested, totaling \$320, contained an error in calculating the mileage submitted for reimbursement, resulting in an overpayment of \$26.

The Fiscal Control and Internal Auditing Act (30 ILCS 10/3001) requires the Commission to establish and maintain a system, or systems, of internal fiscal and administrative controls to provide assurance funds and resources are safeguarded against waste, loss unauthorized use, and misappropriation. Effective internal controls require a thorough review of all travel vouchers and comparison to support to ensure accuracy prior to approving the vouchers for payment.

- Two (100%) employees tested using privately owned vehicles for State business, did not timely certify that they were properly licensed and insured in Fiscal Year 2022, as required. The employees' certifications were completed in Fiscal Year 2023.

The Illinois Vehicle Code (Code) (625 ILCS 5/10-101(b)) requires every employee of the State, who operates a personal vehicle for the purpose of State business to procure insurance in the limit of liability not less than required in Section 7-203 of the Code.

- The Commission did not timely file 1 of 4 (25%) Travel Headquarter Reports (Form TA-2) with the Legislative Audit Commission for the period from July 1 through December 31 for Fiscal Year 2022. The report was filed 146 days late.

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2023-012. **FINDING** (Inadequate Controls over Travel) (Continued)

The State Finance Act (Act) (30 ILCS 105/12-3) states the Commission shall file reports of all of its officers and employees for whom official headquarters have been designated at any location other than that at which their official duties require them to spend the largest part of their working time. The reports shall be filed with the Legislative Audit Commission no later than each July 15 for the period from January 1 through June 30 of that year and no later than each January 15 for the period from July 1 through December 31 of the preceding year. Agencies with no officers or employees in this status shall file negative reports.

Commission officials indicated competing priorities, employee oversight, and ongoing staff vacancies resulted in the issues noted.

Failure to ensure travel vouchers are accurate and timely submitted increases the risk that errors or irregularities could occur and would not be identified by employees performing their functions in the normal course of business. In addition, failure to obtain certifications of employee licensure and automotive liability coverage timely represents noncompliance with the Code and could result in increased risk of loss to the State due to injury or damage. Finally, failure to timely file Form TA-2 with the Legislative Audit Commission limits legislative oversight and results in noncompliance with the Act. (Finding Code No. 2023-012)

RECOMMENDATION

We recommend the Commission enhance its controls to ensure travel vouchers and Form TA-2 are accurate and timely submitted. We also recommend the Commission timely obtain proper certifications of licensure and automotive liability coverage for all employees using a privately owned vehicle for State business. Further, we recommend the Commission seek reimbursement for overpayment.

COMMISSION RESPONSE

The Commission accepts the recommendation. The Commission will review and strengthen its internal controls to ensure adequate controls over travel including timely obtaining certification of licensure and automotive liability coverage for all employees.

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A. **FINDING** (Failure to Submit Debt Transparency Reports)

During the prior examination, the Deaf and Hard of Hearing Commission (Commission) did not comply with held invoice reporting requirements by preparing and filing Debt Transparency Act Reports (SCO-961) with the Office of Comptroller.

During the current examination, our sample testing resulted in fewer exceptions which were reported in the Commission's *Independent Accountant's Report of Immaterial Findings*. (Finding Code No. 2021-010, 2019-010)