

Appendix Materials - August 2018 Quarterly Board Meeting

A. ACADEMIC AFFAIRS & STUDENT SUCCESS

- UNT Academic Quality Measures - Page 2
- UNT Student Access & Success Measures - Page 3
- UNT Research Measures - Page 4
- UNT Dallas Academic Quality Measures - Page 5
- UNT Dallas Student Access & Success Measures - Page 6
- UNTHSC Student Access & Success Measures - Page 7
- UNT CEXM Program Proposal DRAFT - Page 8

B. FINANCE & FACILITIES

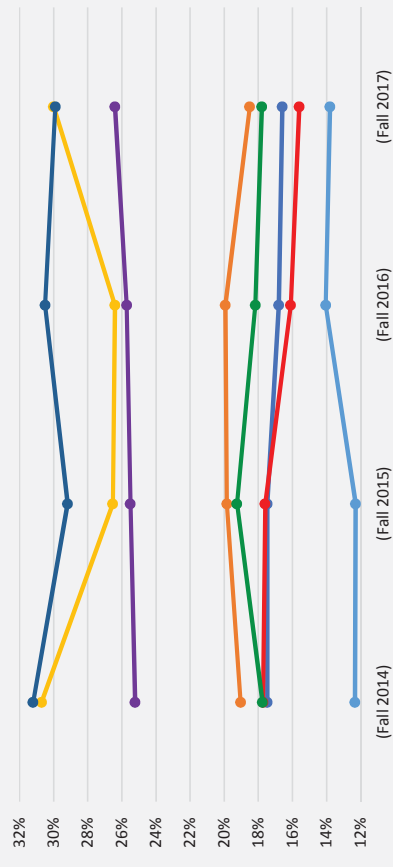
- 20a. 2019 Consolidated Operating Budget FINAL - Page 105
- 21a. FY2019 CIP With Signatures - Page 169
- 22b. UNTHSC 2018 Campus Master Plan - Page 196

C. AUDIT

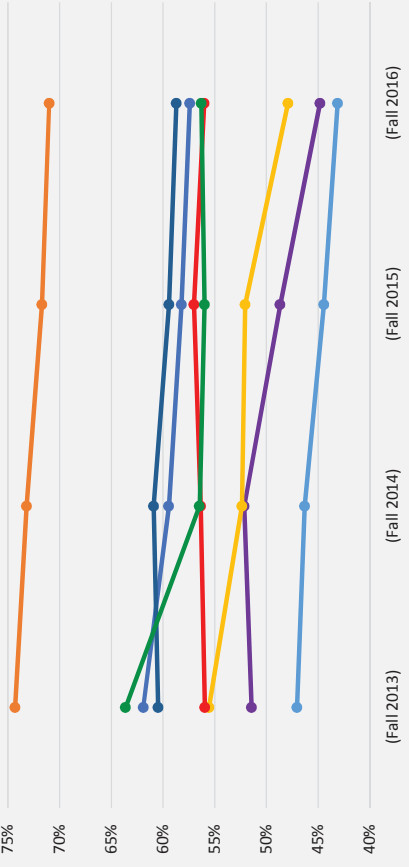
- UNTS Enterprise Audit Report Inventory - Page 402
- UNTS 3rd Quarter FY18 Consolidated Compliance Report- Memo - Page 819
- UNTS 3rd Quarter FY18 Consolidated Compliance Report- Attachment - Page 821

Academic Quality Metrics

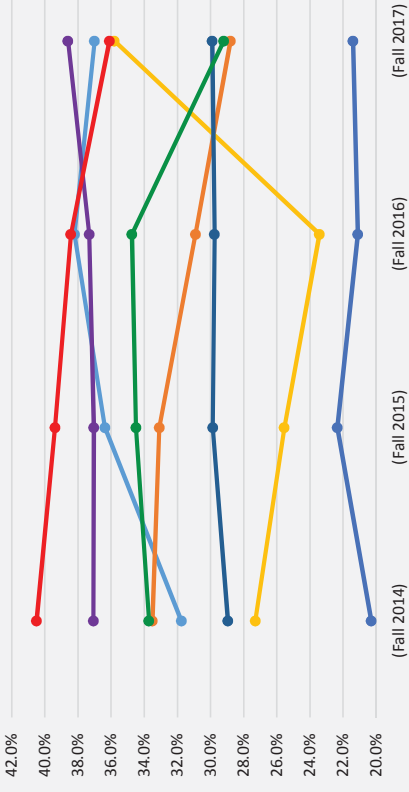
First Time Students in Top 10% of High School Class



Percentage FTE Teaching Faculty Who Are Tenured/Tenure Track

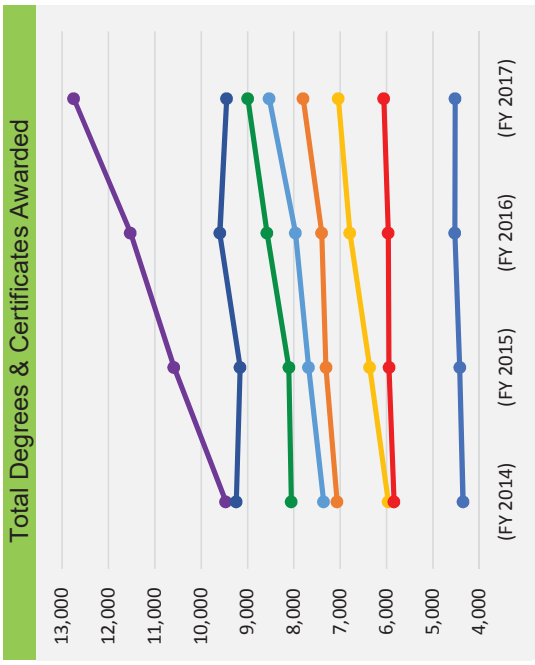
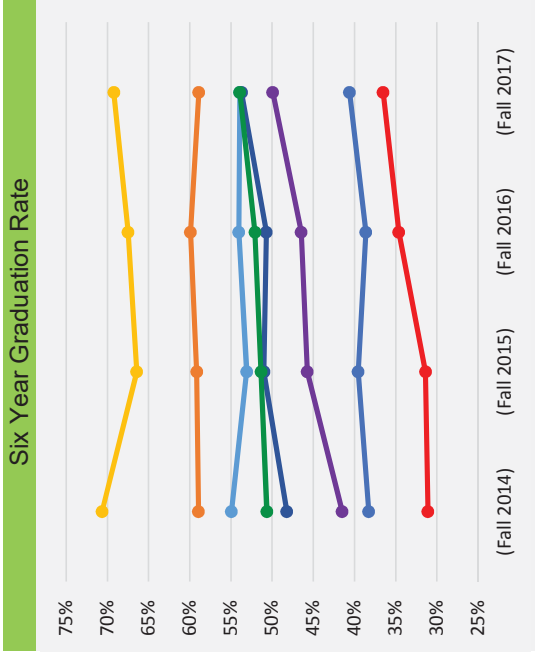
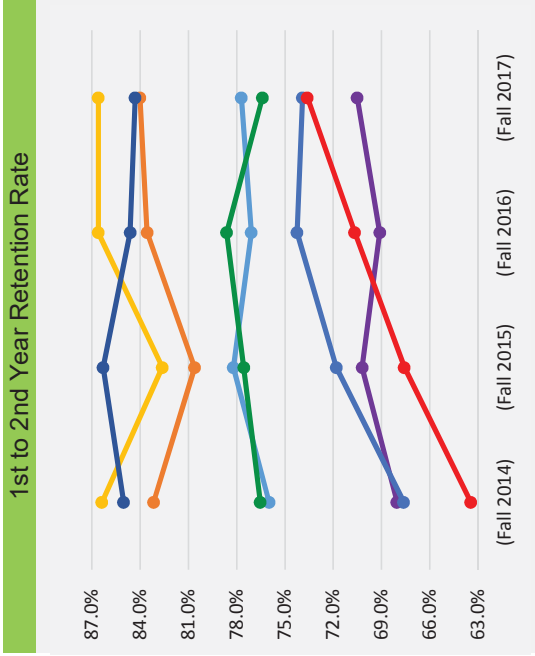
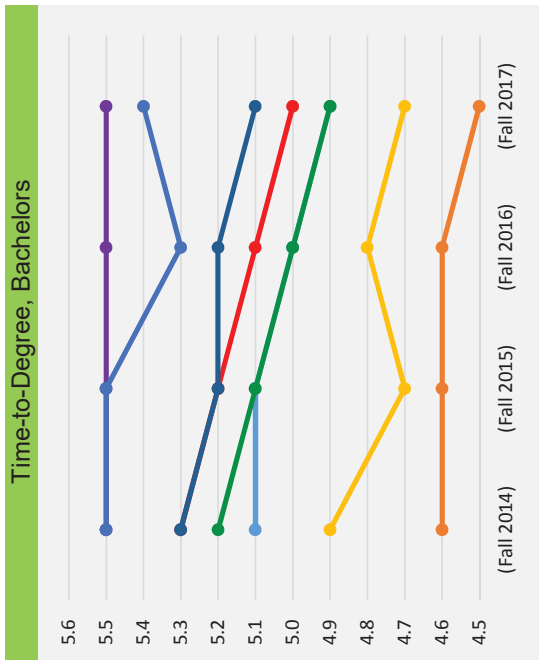
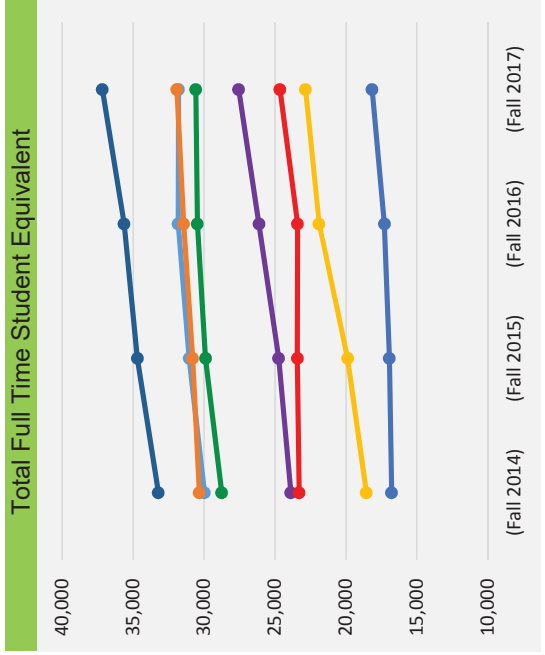
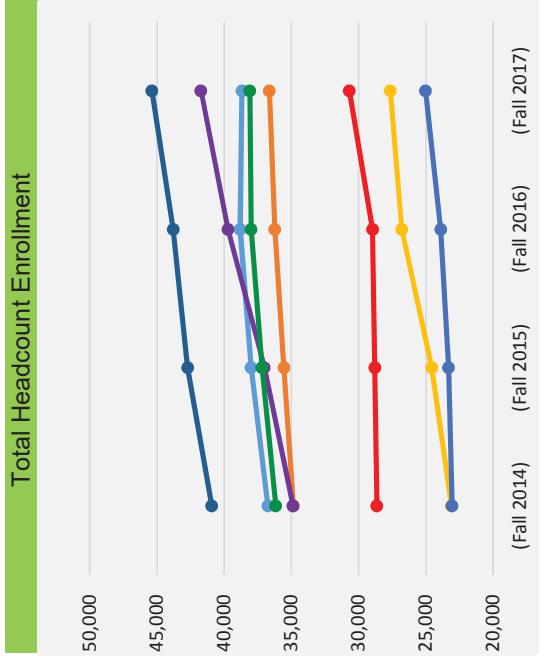


First Time Students in Top 11-25% of High School Class

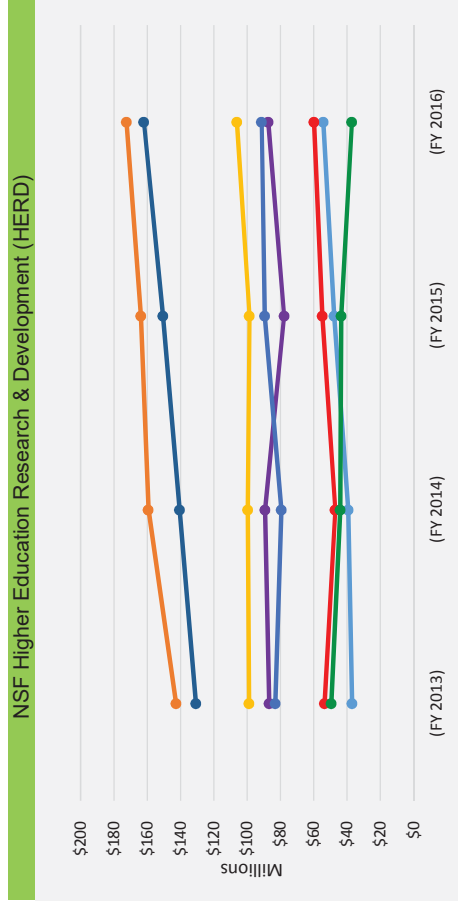
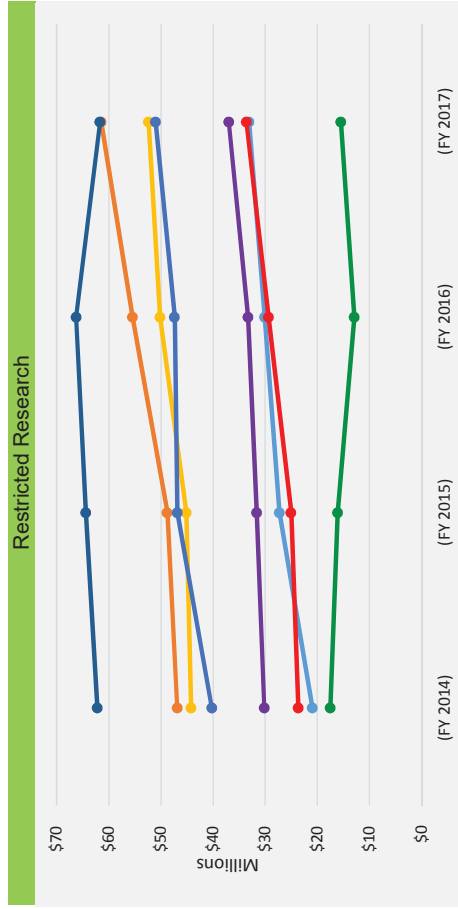
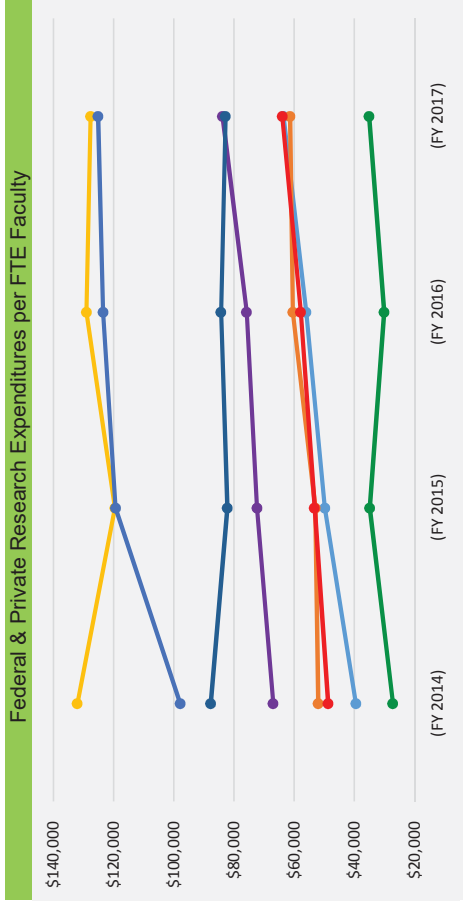
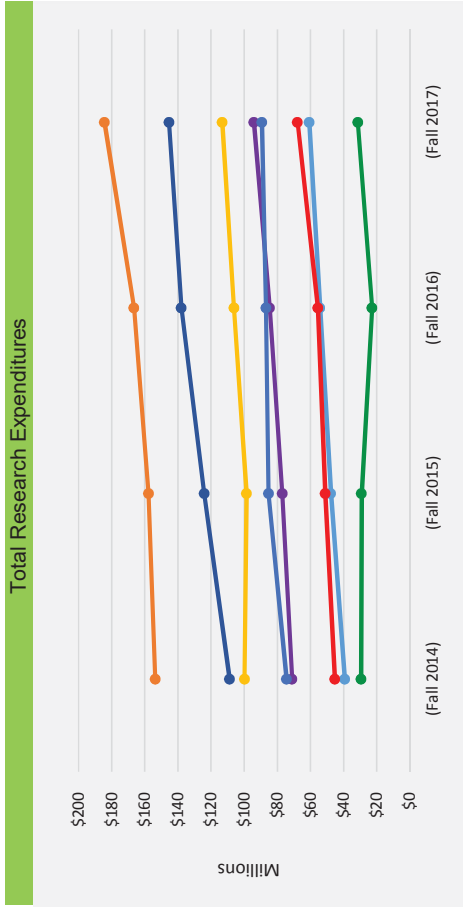


- Texas State University
- Texas Tech University
- The University of Texas at Arlington
- The University of Texas at Dallas
- The University of Texas at El Paso
- The University of Texas at San Antonio
- University of Houston
- University of North Texas

Student Access & Success Metrics

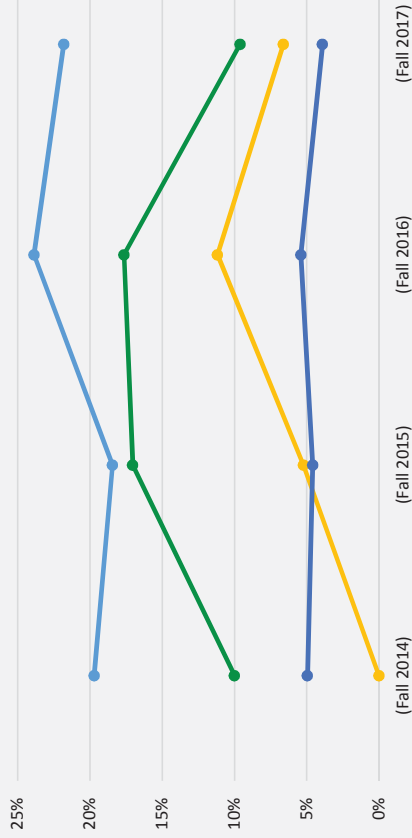


Research Metrics

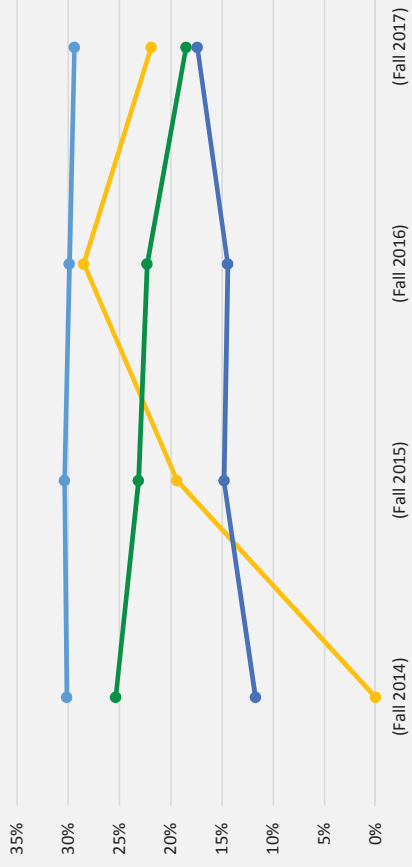


Academic Quality Metrics

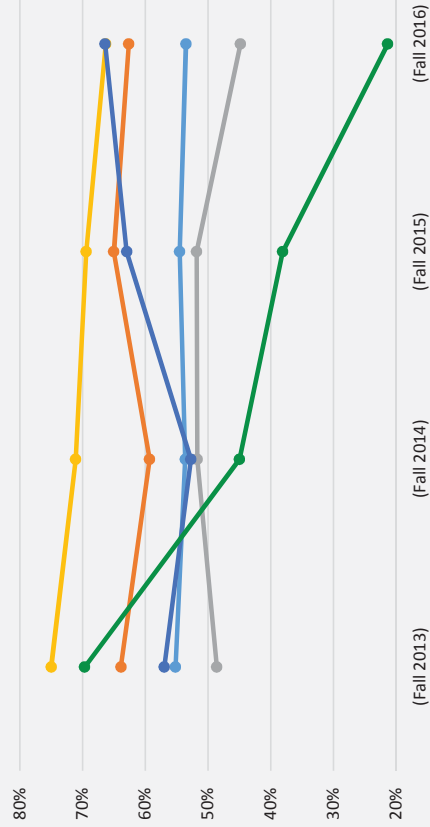
First Time Students in Top 10% of High School Class



First Time Students in Top 11-25% of High School Class

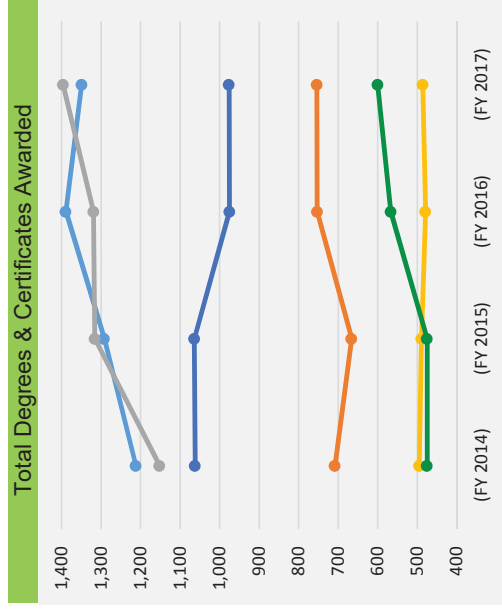
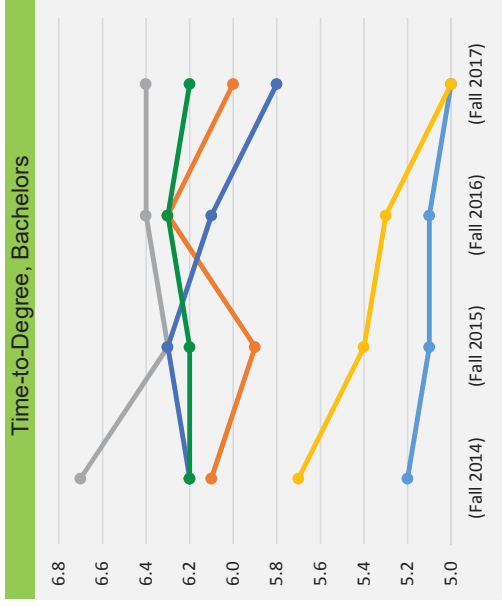
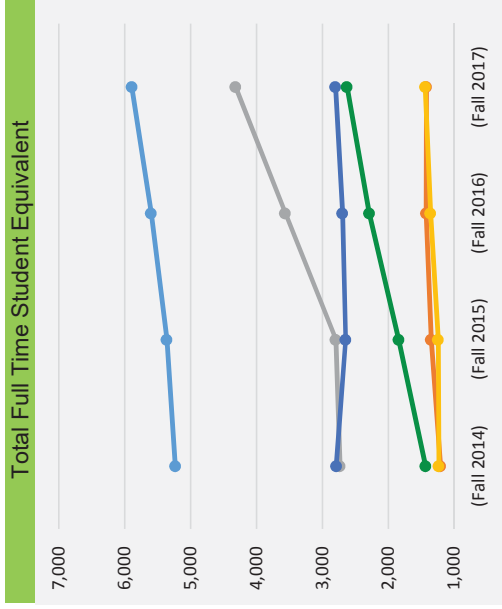
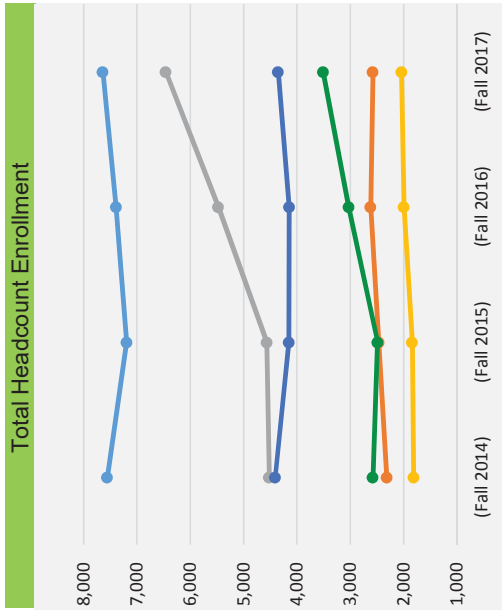


Percentage FTE Teaching Faculty Who Are Tenured/Tenure Track



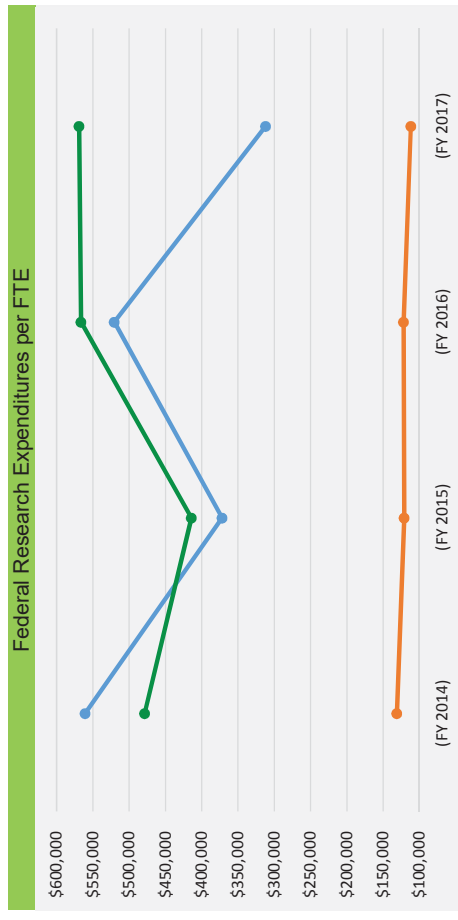
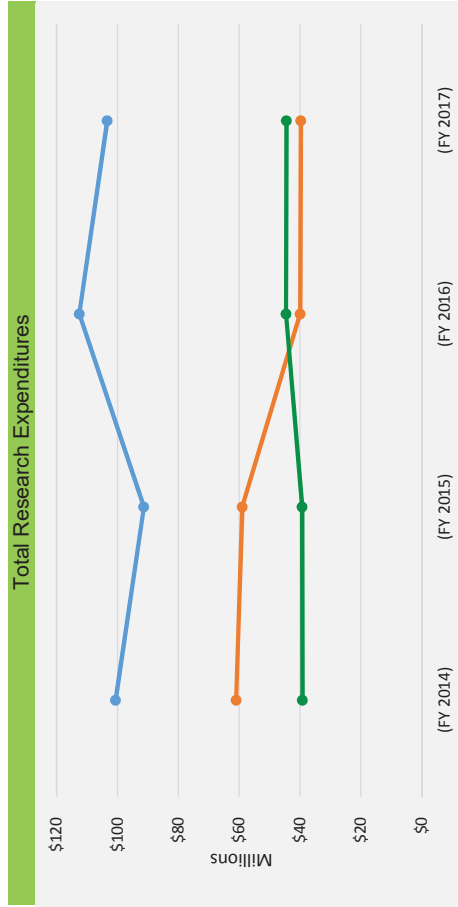
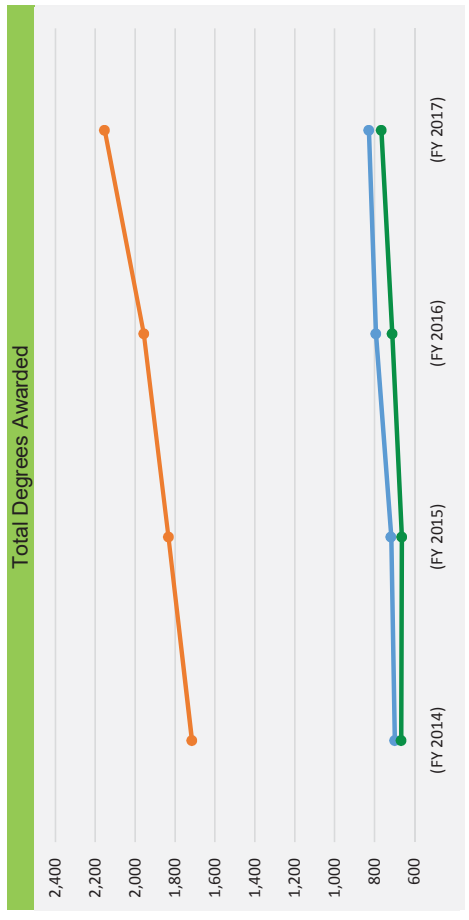
- Texas A&M International University
- Texas A&M University-Central Texas
- Texas A&M University-San Antonio
- Texas A&M University-Texarkana
- University of Houston-Victoria
- University of North Texas at Dallas

Student Access & Success Metrics



- Texas A&M International University
- Texas A&M University-Central Texas
- Texas A&M University-San Antonio
- Texas A&M University-TEXARKANA
- University of Houston-Victoria
- University of North Texas at Dallas

Student Success and Research Metrics



—●— Texas A&M Health Science Center
 —●— Texas Tech University Health Sciences Center
 —●— University of North Texas Health Science Center



**Texas Higher Education Coordinating Board
Texas Public Universities and Health-Related Institutions**

Proposal for a New Doctoral Program

Directions: Texas public universities and health-related institutions complete this form to propose a new doctoral degree program. This form requires signatures of (1) the Chief Executive Officer, certifying adequacy of funding for the new program; (2) the Chief Executive Officer, acknowledging agreement to reimburse expert external reviewers' costs; (3) the Chief Financial Officer, certifying the accuracy of funding estimates for the new program; (4) a member of the Board of Regents (or designee), certifying Board of Regents approval for Coordinating Board consideration; or, if applicable, (5) a member of the Board of Regents (or designee), certifying that criteria have been met for Commissioner consideration. Institution officials should also refer to [Texas Administrative Code \(TAC\), Title 19, Chapter 5, Subchapter C, Section 5.46](#), *Criteria for New Doctoral Programs*.

Note: An institution must submit Planning Notification prior to submitting a proposal for a new doctoral program. An institution is considered by the Board to be planning for a new doctoral program if it takes any action that leads to the preparation of a proposal for a new program. This includes hiring personnel, including consultants and planning deans, leasing and/or purchasing real estate, building facilities, and/or developing curriculum. Planning Notification must be submitted at least one year prior to submission of a proposal to offer the degree, if the proposed program leads to the award of a professional degree, as defined by [Texas Education Code 61.306](#). Institutions submit Planning Notification through the online submission portal, as a letter to the Assistant Commissioner of the Academic Division of Academic Quality and Workforce.

Contact: Division of Academic Quality and Workforce, 512-427-6200.

Administrative Information

1. Institution Name and Coordinating Board Accountability Group:

University of North Texas, Emerging Research Group

2. Proposed Program:

Doctor of Philosophy in Consumer Experience Management

3. Proposed CIP Code:

52.0207 Customer Service Management

4. Location and Delivery of the Proposed Program:

Face-to-face to students on the main campus in Denton.
Distributed learning to students delivered by faculty on main campus in Denton.

5. Administrative Unit:

The Department of Merchandising and Digital Retailing within the College of Merchandising, Hospitality and Tourism

6. Program Description:

The PhD in Consumer Experience Management (CEXM) prepares professionals for university research, teaching, and service and for corporate leadership with the overall objective of understanding how individuals reason and behave in their end-to-end journeys through omni-channel experiences with consumer goods and services.

To meet this objective, all students working toward a PhD in CEXM will pursue excellence in conducting research and disseminating knowledge. The primary focus is on research that (1) advances interdisciplinary knowledge of the consumer experience in retail, hospitality and tourism using (2) competencies in technology, innovation and data analytics that (3) clarify consumer expectations, engagements, and experiences as they are (4) exhibited across all delivery channels, devices, technologies, and virtual and physical spaces.

7. Proposed Implementation Date:

Provide the date that students would enter the proposed program (MM/DD/YYYY).

08/26/2019

8. Institutional and Department Contacts:

Provide contact information for the person(s) responsible for addressing any questions related to the proposal.

1. Name: Terri Day
Title: Vice Provost for Academic Administration
E-mail: Terri.Day@unt.edu
Phone: 940-565-4392
2. Name: Judith Forney
Title: Dean and Professor
E-mail: Judith.Forney@unt.edu
Phone: 940-565-2448

Proposed Doctoral Program
PhD in Consumer Experience Management
(Note: ALL required THECB Tables are labeled as such and are in bold type in Table of Contents.)

Table of Contents

I. Need

A. Job Market Need

- a. CEXM: The Emerging Field of Consumer Experience Management
- b. CEXM: The Consumer – Centric Model
- c. CEXM: The Changing Value Equation
- d. CEXM: The Impact of Technology and the Digital Revolution
- e. CEXM: The Need for Research and Innovation
- f. CEXM: Workforce Objective 1 – PhD Trained Faculty and Researchers
- g. CEXM: Workforce Objective 2 – PhD Trained Professionals
- h. CEXM: The Demand for Professionals – Evidence in Online Searches
 - i. Table 1. Evidence for Consumer Experience Management Professionals
- i. CEXM: The Perspective of Industry Executives
 - i. Table 2. Industry Leaders Serving on the Merchandising and Digital Retailing Board of Governors
 - ii. Table 3. Industry Leaders Serving on the Hospitality and Tourism Board of Governors
- j. CEXM: Industry Letters of Support
 - i. Table 4. Excerpts from Letters of Support from CMHT Merchandising and Digital Retailing Board of Governors
- k. CEXM: The Demand for Professionals with Advanced Degrees
 - i. Table 5. Sample of Positions in Consumer Experience Management that Required or Preferred the PhD Degree
 - ii. Table 6. Sample of Positions in Consumer Experience Management that Required the Master’s Degree

B. Existing Programs

- a. Step 1 – Identified CIP Codes with Consumer or Customer in the Title
 - i. Table 7. CIP Codes with Consumer or Customer in Title
- b. Step 2 – Review of all Texas Public and Independent PhD Universities Offering a PhD Regardless of Field
 - i. Table 8. Texas Public PhD Granting Universities Offering the PhD Regardless of Field
 - ii. Table 9. Texas Independent PhD Granting Universities Offering the PhD Regardless of Field
- c. Step 3 – Review of All Texas Public and Independent PhD Universities Offering a PhD with CIP Codes with Consumer or Customer in Title
 - i. Table 10. Texas Public PhD Granting Universities Offering the PhD with CIP Codes with Consumer or Customer in Title
 - ii. Table 11. Texas Independent PhD Granting Universities Offering the PhD with CIP Codes with Consumer or Customer in Title
- d. Step 4 – Review of All Texas Public and Independent PhD Universities Offering a PhD in Aligned Fields
 - i. Table 12. Texas Public PhD Granting Universities with PhD Programs in Aligned Fields.

- ii. Table 13. Texas Independent PhD Granting Universities with PhD Programs in Aligned Fields.
- iii. Table 14. Summary Data for Three Texas Public Universities Offering a PhD in an Aligned Field by CIP Codes, Degree Name, and Date Degree Launched
- e. Step 5 – Review of National Universities Offering a PhD in Aligned Fields
 - i. Table 15. Summary Data for National Universities Offering a PhD in an Aligned Field
- f. Summary of Existing PhD Programs, Duplication, Capacity, and Meeting Workforce Needs
 - i. Table 16. Summary of Existing PhD Programs, Duplication, Capacity and Meeting Workforce Needs in Consumer Experience Management

C. Student Demand

- a. Historical Evidence of CMHT Students Who Graduated from Doctoral Programs
 - i. Table 17. Known CMHT Graduates with B.S. and M.S. Who Completed a PhD
 - ii. Table 18. CMHT Graduates with M.S. in Merchandising Who Hold Academic Appointments
- b. Current Evidence of Student Interest in the PhD in Consumer Experience Management
 - i. Table 19. CMHT Graduates of B.S. and M.S. Programs Currently Enrolled a PhD Programs Who Expressed Interest in PhD in CEXM if Available
 - ii. Table 20. Students Admitted to or Enrolled at UNT in PhD Programs in the Sciences with Interest in PhD in CEXM
 - iii. Table 21. CMHT Master’s Students Currently Applying to PhD programs with Interest in PhD in CEXM

D. Student Recruitment

- a. Recruitment: CMHT Strategies for Graduate Students
- b. Recruitment: CMHT Students
- c. Recruitment: M.S. in Advanced Data Analytics – UNT New College at Frisco
- d. Recruitment: UNT Social Sciences
- e. Recruitment: UNT Sciences
- f. Recruitment: Universities Offering Only the Master’s Degree
 - i. Table 22. Texas and National Universities Offering Only the Master’s Degree
- g. Recruitment: International
- h. Recruitment: International Three + Two Programs in the Department of Merchandising and Digital Retailing
 - i. Table 23. Chinese Partner Universities and National Rankings
 - ii. Table 24. Graduate Pathway Agreements with International Partner Universities
- i. Recruitment: Underrepresented Groups
 - i. Table 25. Percent of Underrepresented Groups Majoring in CMHT Master’s Programs (Fall Semesters 2005 – 2017)

E. Enrollment Projections

- a. Enrollment Projections: Metric for FT and PT Status
- b. Enrollment Projections: metric for Underrepresented Groups
 - i. Table 26. Ethnicity of CMHT Graduate Students Fall Semesters 2005 – 2017
- c. Enrollment Projections: Metric for Total Headcount

- i. Table 27. Current Known CMHT Student PhD Status: Applied, Admitted, Enrolled
- d. Enrollment Projections: Metrics to Calculate Attrition and Completion
 - i. Table 28. CMHT Master’s Headcounts, Percent Retention, and Degrees Awarded
- e. Enrollment Projections: Estimated Headcount and FTSE for First Five Years
 - i. **THECB Table 29. Five-Year Enrollment Projections for PhD in Consumer Experience Management**
 - ii. **New THECB Enrollment Table 29a**

II. Academics

A. Accreditation

B. Admission Standards

- a. Admission to the Toulouse Graduate School
- b. Admissions Standards for the PhD in Consumer Experience Management
- c. Master’s Degree Requirement
- d. Residency Requirement
- e. Transfer Credit
- f. Full – and Part – Time Students
- g. National Prominence: Evolution of Consumer Experience Management at UNT
 - i. Table 30. Evolution of Consumer Experience Management Concept in CMHT
- h. National Prominence: Evidence of Innovative Programming
 - i. Table 31. Evidence of National Prominence in Innovative Programming in CMHT

C. Program Degree Requirements

- a. Required Number of Hours
 - i. **THECB Table 32. Program Degree Requirements**
 - ii. Required Core (15 to 21 SCH)
 - iii. Prescribed Electives (9 SCH)
 - iv. Elective (3 SCH)
- b. Comparison of Proposed PhD in CEXM with Similar Programs in Texas
 - i. **THECB Table 33. Semester Credit Hour Requirements of Similar Programs in Texas**
 - 1. Texas A & M University
 - 2. Texas Tech University
 - 3. University of Houston
- c. Describe Similarities and Differences Between Proposed Program and Peers in Texas and U.S.

D. Curriculum

- a. Educational Objectives
 - i. **THECB Table 34. Required Core Courses**
 - ii. **THECB Table 35. Prescribed Elective Courses**
 - iii. **THECB Table 36. Elective Courses**
- b. Alternative Learning Strategies – Field Experience, Teaching Practicum, Graduate Student Teaching Excellence Program
 - i. Field Experience

- ii. Teaching Practicum
- iii. Graduate Student Teaching Excellence Program (GSTEP) Certification (No Credit)

E. Candidacy/Dissertation

- a. Admission to Candidacy
- b. Approval of Dissertation Research Proposal
- c. Dissertation
 - i. Option 1
 - ii. Option 2
- d. Requirement for Continuous Enrollment in CMHT 6950 Dissertation
- e. Dissertation Defense
- f. Time Limitation

F. Delivery Modes, Use of Distance Technologies, and Delivery of Instruction

- a. Resident and Distance Technologies Courses
 - i. Table 37. Courses Taught as Resident and Using Distance Technologies
- b. Online Courses Included in Planning Proposal

G. Program Evaluation

- a. Review Cycle
- b. Program Overview
- c. Self-Study
 - i. Table 38. Eighteen Characteristics of Texas Public Doctoral Programs
- d. External Review

H. Strategic Plan and Marketable Skills

- a. Proposed PhD in Consumer Experience Management Alignment with UNT's Two Strategic Plans
- b. Strategic Plan 1: UNT's Strategic Plan as Part of the UNT System Strategic Plan – 2017
 - i. Goal 1: Grow Enrollment and Degrees Awarded Includes Doctoral Enrollments and Graduations
 - ii. Goal 2: Grow Research and Expand Doctoral Funding
 - iii. Goal 3: Grow UNT Foundation Assets
 - iv. Goal 4: Grow Top Rated Programs and Corporate Partnerships
- c. Strategic Plan 2: UNT Strategic Plan for Research: 2017 – 2022
 - i. Part 1: Mission and Vision
 - ii. Part 2: Plan for Research Funding and Productivity
 - iii. Part 3: Plan to Improve Undergraduate Education
 - iv. Part 4: Plan for Doctoral Programs
- d. CMHT Support of UNT's Research Strategic Plan
 - i. CMHT Applied Technology Research Labs
 - 1. Applied Imaging Technology Lab
 - 2. Artificial Intelligence in Retail Lab
 - ii. UNT Global Digital Retailing Research Center
 - 1. Table 39. Global Digital Retailing Research Center Vision, Mission, Purpose

2. Table 40. Global Digital Retailing Research Center Five Strategic Goals
3. Senior Director – Global Digital Retailing Research Center
4. Director of Research – Global Digital Retailing Research Center
 - a. Figure 1: Outreach Model for Academic – Industry Partnerships
5. Research Objectives – Global Digital Retailing Research Center
 - a. Table 41. Global Digital Retailing Research Center – Research Objectives
 - b. Table 42. Global Digital Retailing Research Center Research Initiatives to Enhance National and International Prominence
- e. Marketable Skills Aligned with 60x30TX
 - i. Table 43. Marketable Skills Developed in PhD in Consumer Experience Management
- f. Building on UNT’s Existing Recognized Strengths
- g. Related and Supporting Programs
 - i. Table 44. Related and Supporting Programs
- h. Existing Doctoral Programs
 - i. Table 45. Characteristics of Existing Doctoral Programs at UNT
 - ii. Table 46. Enhancement of PhD in Consumer Experience Management Using Existing PhD UNT Doctoral Courses
- i. Recent CMHT M.S. Graduates Employment
 - i. Table 47. Graduate Employment AY 2016 – 2017 CIP 52.09 – M.S. Hospitality Management and M.S. International Sustainable Tourism
 - ii. Table 48. Graduate Employment AY 2016 – 2017 CIP 52.09 – M.S. Merchandising

III. Faculty

A. Faculty Availability

- a. Current and Open Faculty Lines in CMHT
 - i. Table 49. Core and Support Research Faculty for Fall 2019 Launch of PhD in CEXM
- b. Core Faculty
 - i. **THECB Table 50. Core Faculty**
- c. Support Faculty
 - i. **THECB Table 51. Support Faculty**

B. Teaching Load

- a. Teaching Load of Core Faculty
- b. Impact of PhD Program on Core Faculty Workload for Existing Programs
 - i. Table 52. Core Faculty Teaching Load

C. Core Faculty Productivity

- a. Productivity: Key Research Journals
 - i. Table 53. Key Research Journals in Fields of Tourism, Hospitality Management, Apparel & Textiles Merchandising, Consumers and Retail, Engineering and Applied Technology: Textiles, Human and Consumer Products Indexed in SCI, SSCI, SSCIE, and/or Impact Factor above 1.00
- b. Productivity: Core and Support Faculty

- i. THECB Table 54. Core Faculty Publications, Other Scholarly/Creative Accomplishments for the Past Five Years**
- ii. THECB Table 55. Core Faculty External Grant Awards for the Past Five years**
- iii. Table 56. Support Faculty Publications, Other Scholarly/Creative Accomplishments for the Past Five Years

D. Faculty Professional Development and Curriculum Support

IV. Resources

A. Student Financial Assistance

- a. THECB Table 57. Doctoral Student Financial Assistance**

B. Library Resources

- a. See Appendix E: Librarian's Statement of Adequate Resources
- b. Remote Access to Resources
- c. Document Delivery

C. Facilities and Equipment

- a. Office Space
- b. Research Lab Space – Science Research Building
- c. Global Digital Retailing Research Center Space
- d. Equipment
 - i. See Appendix D:

D. Support Staff

- a. CMHT Office Support Associate
- b. CMHT Senior Administrative Coordinator
- c. Department Administrative Coordinators
- d. Department and CMHT Faculty Graduate Coordinators

E. External Learning

F. List of Potential Expert Reviewers

G. Five – Year Costs and Funding Sources Summary

- a. THECB Table 58. Anticipated Sources of Funding**
- b. THECB Table 59. Costs to University of North Texas for Proposed PhD in Consumer Experience Management**
- c. THECB Table 60. Non-Formula Funding Sources**

H. Signature Page

- a. Board Consideration
- b. Commissioner Consideration

V. Required Appendices

A. Course Description and Prescribed Sequence of Courses

B. Five-Year Faculty Recruitment Plan/Hiring Schedule

- a. Table 61. Five-Year Faculty Recruitment and Hiring Schedule

C. Institutional Policy on Faculty Teaching Load

D. Itemized List of Capital Equipment Purchases During the Past Five Years

- a. Table 62. Capital Equipment Purchases during Past Five Years
- b. Table 63. Capital Equipment Transferred in FY17 from UT – Austin to UNT

E. Librarian’s Statement of Adequate Resources

- a. Mary Ann Venner, Associate Dean for Public Services, University of North Texas Libraries

F. Articulation Agreements with Partner Institutions

G. Curricular Vitae for Core Faculty

H. Curricular Vitae for Support Faculty

I. Industry Letters of Support

- a. Richard Last, Founding Partner, Axcelora
- b. Steve Woodward, President, Crate & Barrel
- c. Ruth Crowley, V.P. Customer Experience Design, Lowe’s
- d. Craig Wax, Executive VP, Magid
- e. Stacey L. Renfro, SVP Ecommerce, Pier 1 Imports

Proposed Doctoral Program Information

I. Need

A. Job Market Need

CEXM: The Emerging Field of Consumer Experience Management

The College of Merchandising, Hospitality and Tourism (CMHT) at the University of North Texas is proposing the Doctor of Philosophy in Consumer Experience Management degree (CEXM). UNT is proactive in addressing the emergence of the consumer experience as the single greatest driver of business success in the 21st century. Already a trailblazer in this emerging field, UNT is setting the standard for CEXM programs and research. The PhD in Consumer Experience Management will be the second degree in CEXM offered at UNT. The first Bachelor of Science in Consumer Experience Management was launched at UNT in spring 2018 and is currently the only degree of its kind in the U.S.

Consumer experience management offers a significantly different perspective from current consumer programs where consumers are viewed as recipients of services and goods that businesses push out. In this context, the consumer engages in decisions and activities based on what is available. Traditional programs with CIP Codes related to consumers focus on: (1) product and service promotion (consumer merchandising/ retailing management); (2) applied micro – and macro – economic theory and forecasting (consumer economics); (3) end-use advice and representational services (consumers and advocacy); and (4) assisting customers with inquiries and problems (customer service support/call center/teleservice operation).

The PhD in Consumer Experience Management is a direct response to the global disruption of the traditional goods and services business model that pushes products and services out to consumers. CEXM focuses on the emerging consumer – centric model. From this perspective, consumers are empowered to create or co-create their own unique service and product experiences.

CEXM: The Consumer – Centric Model

“Centricity” has emerged as an integrated cultural element and driving force in all core areas of business decisions¹. The consumer – centric model recognizes how consumer engagements, expectations, and experiences drive individual choice. This unprecedented market disruption is acutely impacting retail, hospitality and tourism, among the largest consumer services and products employers and industries in the U.S. and globally.

Limitless independent access to information flow and the multitude of purchase and delivery options are redrawing and redefining cross-sector boundaries for consumer services and products companies. Moreover, demarcations of unique retail, hospitality and tourism concepts have blurred as consumers demand aspects of each to complement the total experience that they expect. This opens competitive opportunities to grow across industries. In an analysis across 37 business sectors, Atluri, Dietz & Henke (2017) found one third of the 300 CEOs they interviewed expressed concerns for their companies regarding the cross-sector dynamics gained by their competitors through advanced data analysis. They predicted that within a decade consumer service and products industries will be transformed through the convergence of multi-industry digital ecosystems. They further suggested the fundamental core value propositions to retain a competitive advantage will be humans, organizations, data, and technology.

CEXM: The Changing Value Equation

The PhD in Consumer Experience Management advances insights into 21st century consumers through innovation and applied research. Previous business strategies defined customer product and service expectations using segmentation strategies drawn generally from demographic, psychographic, and sociographic data. While these forms of aggregated data may still inform, new understanding is needed that is of greater relevance to the specific “customer” who increasingly functions independently as a unit of one. Consumer experience management combines the potency of data analytics, applied technology, and consumer analysis to discover and manage consumers’ expectations for optimal experiences. Central to the CEXM competitive strategy is data diversity that can create granular consumer micro-segmentation and greater consumer value ¹.

Traditional value equations that guide business understanding of customer behavior no longer define the emerging singularly “powerful” consumer. Powering the agile, globally connected and emotionally invested consumer is an expectation for personalized experiences with products and services. Leading this paradigm shift is consumer engagement with information through 24/7/365 digital access that is provided by inexpensive, mobile and portable digital technologies. Instantaneous connections across all elements of the value chain using digital technology have made independent consumer – driven digital search a powerful tool. Now, consumers can choose to create their own unique products and services at home, in store, or with mobile applications anytime, anywhere. Customer retention and loyalty will depend on how well a business understands this new value equation that is unique to each consumer. The “bottom line” is that the scope of consumer value expectations has become infinite.

CEXM: The Impact of Technology and the Digital Revolution

Digital and mobile technologies are fueling both the disruption and the evolution of consumer expectations at an unprecedented pace. New technologies have created a plethora of new options for consumers. For example, consumers now use technology to create curated shopping and travel experiences, engage in digital window shopping, try-before-you-buy sites, and augmented reality using no-check out shopping in virtual stores which carry only virtual inventory. Information access is infinite, and much of it is presented through visual pipelines that make information easy to use, expand, and compare. Personalization is powered by robots and voice commerce. Customization is driven by technologies that enable consumers to create products according to their own unique specifications. On the horizon is affordable 3-D printers which will soon allow consumers to be producers as they create their own customized and personalized products within their home at a fraction of historical costs for such products.

Technology has blurred digital and physical environments and put consumers in control of virtually every attribute involved in their decision to inform, compare, create, purchase, allocate, use, and dispose. Atluri et al. (2017) summarized the impact of the digital revolution as reshaping customer expectations by reducing transactional costs, exponentially increasing electronic data, creating universally accessible mobile interfaces, growing the power of artificial intelligence, and collectively driving changes in consumer expectations for optimal experiences in digital and physical environments.

A significant marketplace disruption driving change is the merging and blurring of functional areas in consumer and service industries. Atluri et al. (2017) predict that every industry sector with a distribution element will have its borders redrawn or redefined into one of two major spaces – either retail or institutional ecosystems. The retail ecosystem will include nine sectors: B2C marketplace, travel and hospitality, mobility, education, housing, digital content, health, public services, wealth and protection. The institutional ecosystem will include three sectors: B2B marketplace, B2B services, and global corporate services. Their forecast has deep implications for retail, hospitality and tourism businesses and it is reinforced by the consumer’s expectation to create their own experiences. These experiences will

cross traditional business boundaries and open the possibility for services and products that are not even imagined today.

CEXM: The Need for Research and Innovation

The magnitude and complexity of the consumer – centric phenomena have companies struggling to understand, identify and implement strategies that will positively leverage consumer retention, loyalty, and trust. A robust body of knowledge formed from a consumer-centric framework is required to support a broader understanding of consumers’ changing expectations for value. Advancing CEXM requires a substantial investment in applied interdisciplinary research to understand the extraordinary power of technology and digital environments in driving consumer – centricity. The paradigm shift needed to understand and apply the consumer – centric model will require academic – industry partnerships built on data, ideas and services to produce innovation.

CEXM research agendas will encompass technology applications, integrate structured and unstructured data, use data analytics and optimization, and apply concepts and theory to clarify consumer expectations, engagement and experiences that are exhibited across all delivery channels, devices, technologies and virtual, digital and physical spaces. CEXM research will provide “transformative” insights into the 21st century consumer’s engagement, expectations and experiences in their end-to-end journeys with services and products. Powering this agile, globally connected and emotionally invested consumer is an expectation for customized and personalized experiences driven by emerging technologies and social ecosystems that are supported by digital technology.

References

¹ Goran, V. & Tutek, E. (2017). Drivers of Customer Centricity: Role of environmental-level, organization-level, and department-level variables. *Zagreb International Review of Economics & Business*, 20(2) 1-10. Retrieved at 8/15/17:

<https://www.degruyter.com/downloadpdf/j/zireb.2017.20.issue-2/zireb-2017-0013/zireb-2017-0013.pdf>

² Atluri, V., Dietz, M., & Henke, N. (2017, July). *Competing in a world of sectors without borders*. *McKinsey Quarterly*. Retrieved 8/15/2017: <http://www.mckinsey.com/business-functions/mckinsey-analytics/our-insights/competing-in-a-world-of-sectors-without-borders>

CEXM: Workforce Objective 1 – PhD Trained Faculty and Researchers

The first objective of the PhD in Consumer Experience Management is to prepare PhD qualified faculty who will teach and research in this emerging field. If CEXM is to mature from an emerging to an established field of study and practice then there must be PhD trained faculty and researchers with deep knowledge in the new consumer – centric paradigm. Advanced degrees are fundamental to developing high competency levels in technology applications, data analytics, consumer analysis, and innovative thinking, all of which are required for fluency in the consumer – centric model that defines CEXM.

Advanced degrees – master’s and doctorate – must be taught by PhD qualified faculty. Equally important, PhD faculty are foundational to developing and teaching excellent bachelor programs. PhD qualified faculty fill tenure lines and they make significant contributions to research and scholarship. Currently, academic units seeking to develop programs in consumer experience management must draw from faculty with a PhD in the fields of merchandising, retail, hospitality, tourism, traditional consumer sciences/behavior programs, and aligned fields in business.

CEXM: Workforce Objective 2 – PhD Trained Professionals

The second objective of the PhD in Consumer Experience Management is to prepare industry leaders with advanced degrees. A professional workforce expert in the potency of data analytics, technology applications, and consumer analysis is critical for the innovation needed to transform consumer expectations into value-added experiences.

The demand for consumer experience professionals with advanced degrees exists now. The U.S. Bureau of Labor Statistics 2016 Career Outlook ¹ identified professional and business services with its 1.27 million open positions as the top U.S. industry seeking employees. Many of these positions require advanced degrees. Similarly, evidence for advanced degrees is supported by the Texas Workforce Commission ² which predicts a 26.2 percent increased need in professional and technical services by 2024. These positions would include consumer experience management professionals under classifications such as general and operations managers, expected to grow by 27.3 percent, and management analysts, expected to grow by 31.6 percent. Average salaries range from \$106,122 to \$164,736.

References

¹ *Top industries for job openings, July 2016. (2016, September).* U.S. Bureau of Labor Statistics. Retrieved 9/20/2017: <https://www.bls.gov/careeroutlook/2016/data-on-display/industry-job-openings.htm>

² *Texas Growth Occupations Annual Report 2016,* Texas Workforce Commission. Retrieved: 9/20/2017: www.TEXASWORKFORCE.ORG .

CEXM: The Demand for Professionals – Evidence in Online Searches

A comprehensive search was conducted on six online job websites in June and July of 2017 to determine workforce need for consumer experience professionals using the job titles consumer experience manager and consumer experience analyst. The results indicate a significant need for professionals in this emerging field. While not all of these positions require a doctoral degree at this time, this shows how the field is growing. The need for doctorally trained leaders in this field is inevitable. See Table 1.

Table 1. Evidence for Consumer Experience Management Professionals ¹		
Websites	Job Titles Associated with Consumer Experience	
	Consumer Experience Manager	Consumer Experience Analyst
Indeed.com	22,224	8,754
Higheredjobs.com	42	0
LinkedIn	721	6,293
Jobs.nrf.com	309	56
Hcareers.com	118	6
Monster.com	286	39

¹ Data were extracted on 6/13/17, 6/14/17, 6/19/17, 6/20/17, 6/21/17, 7/19/17, 8/7/2017, 8/8/2017.

Prevalent among the jobs identified in Table 1 was a required bachelor’s degree. Since 2004 the College of Merchandising, Hospitality and Tourism (CMHT) has steadily built its expertise in CEXM. Faculty realized the need for CEXM talent was on the horizon and progressively put supporting courses and programs in place. In fall 2016, CMHT began offering a concentration in “Consumer Behavior and Experience Management” in the Interdisciplinary PhD in Information Sciences. In spring 2018 CMHT launched the first Bachelor of Science in Consumer Experience Management in the United States. Responses from industry and students have indicated high interest in the B.S. program. It quickly gained national attention including recognition by the National Retail Federation, the largest retail association in the world. While a baccalaureate program may be required for many professional positions in industry, it was also important to determine the demand for advanced degrees in the emerging field of CEXM.

CEXM: The Perspective of Industry Executives

An important indicator of changing workforce needs is an expressed industry demand for specific talent and evidence of open positions in specific areas of competency. The College of Merchandising, Hospitality and Tourism has kept abreast of industry trends for talent through two industry boards: (1) Board of Governors in Merchandising and Digital Retailing (MDR), and (2) Board of Governors in Hospitality and Tourism Management (HTM). The two BOGs meet regularly. Board seats are by invitation from the Dean to leaders in senior and executive positions in companies aligned with academic programs within the

college. Of the 32 members on the MDR BOG, 28 members hold senior/executive positions from in a wide array of consumer services and products companies while four members recently retired from VP or higher executive positions. The HTM BOG has 15 members; 13 hold current senior/executive positions in the hospitality industry; two are retired executives. See Tables 2 and 3.

Table 2. Industry Leaders Serving on the Merchandising and Digital Retailing Board of Governors			
No.	Company	Position	Industry
1.	American Achievement	President/CEO	Leading Provider of Products Marking Special Occasions in People's Lives
2.	The Apparel Group	Senior VP of Sales	Apparel Manufacturing
3.	Axelora	Managing Partner	Retail Services
4.	Axelora	Founding Partner	Retail Services
5.	Buxton	Senior VP Client Relations	Customer Analytics Solutions
6.	Crate & Barrel	President	Housewares, Furniture, Home Accessories Retail
7.	Fossil	V P Merchandising	American Watch and Lifestyle Company
8.	GameStop	Senior V.P. Merchandising	Video Games, Consumer Electronics Retailer
9.	Global Views, Inc.	President	Home Décor Wholesale
10.	Grafton-Fraser Apparel	President/CEO	Chain Store Menswear Retailer (Canada)
11.	Groupon	VP Merchandising	Digital Commerce
12.	JC Penney	VP DMM Soft Home	Omnichannel Department Store Retailer
13.	Limited Brands Int'l	Head of Region, La Senza Europe	Specialty Retail
14.	Lowe's Companies, Inc.	VP Customer Experience Design	Home Improvement Retail
15.	Magid	EVP Customer Products/Services	Consumer-Centered Business Strategy and Custom Research
16.	Mattress Firm	Division President	Specialty Retail
17.	Nebraska Furniture Mart	Senior Merchandising Manager	Furniture and Home Retail
18.	Neiman Marcus	VP Customer Insight & Analytics	Luxury Department Store Retail
19.	Nordstrom	VP SW Regional Manager	Luxury Department Store Retail
20.	Open Conjecture	CEO	Digital Commerce
21.	PFSweb	VP & GM of Agency Services	Digital Commerce
22.	Pier 1 Imports	Senior VP E-Commerce	Home Furnishings/Décor Omnichannel Retailer
23.	Ross	Regional VP	"Off-Price" Department Store Retail
24.	Saferock	CEO	Global Analytics and Strategy Firm
25.	Signet (Zale's)	VP of E-Commerce	Retail Chain, precious jewelry
26.	Stage Stores	Senior VP E-Commerce	Department Store Retail
27.	Target	District Team Leader	Retail Chain Home Goods/Apparel + more
28.	Ulta Beauty	Board of Directors	Retail Chain Beauty Products and Salon

Table 3. Industry Leaders Serving on Hospitality and Tourism Management Board of Governors			
No.	Company	Position	Industry
1.	Aimbridge Hospitality	Senior VP Development	Hotel Property Management Company
2.	Ben E. Keith Food	Director of Sales, Development, Training	Premier Distributor of Top-Quality Food
3.	ClubCorp	VP People Strategy	Private Clubs
4.	Hilton Worldwide	Sr. Director Revenue Management, Consolidated Center - Americas	E-Commerce – Global Hospitality Company
5.	Fort Worth Convention & Visitors Bureau	President/CEO	Conventions and Visitors Bureau
6.	Gaylord Texan Resort & Convention Center	VP Human Resources	Resort and Convention Center
7.	Hotel Association of Tarrant County	Executive Director	Industry Association
8.	Remington Hotel Group	Sr. VP Brand Relations & Development	Hotel Services Company
9.	Rudy's Tortillas	VP Sales	Food Production
10.	TriMark Strategic	President/CEO	Restaurant Equipment and Services
11.	Uncle Julio's	Senior Director of Purchasing	Chain Restaurant
12.	UniFocus	COO	Software Solutions Company
13.	Visit San Antonio	VP Community Relations & Development	Convention & Visitor Bureau

CEXM: Industry Letters of Support

An invitation was extended to CMHT Boards of Governors members to submit letters that articulated the need for professionals in consumer experience management. Five members of the Merchandising and Digital Retailing BOG submitted letters and are included in the appendices. Brief quotes extracted from each letter provide industry testimony of the benefits of a PhD in Consumer Experience Management to the retail industry and their own companies. See Table 4.

Table 4. Excerpts from Letters of Support from CMHT Merchandising and Digital Retailing Board of Governors ¹	
Axcelora	<i>Customer Experience management is a necessity if retailers are to survive in a very competitive marketplace and retain and grow their customer base. This means today, retailers either have, or are in the process of building or growing their customer experience teams, and this in turn means more need for graduates coming out of school with an understanding of these disciplines. The time is right, if not overdue, to address this need through your PhD program.</i>
Crate & Barrel	<i>Proposing the PhD in Consumer Experience Management will significantly add to this emerging area of study and research. We have been working . . . to define our customer expectations for spectacular and seamless consumer experiences. . . Maybe Crate and Barrel could be a test brand in your new degree program?</i>
Lowe's	<i>Customer Experience Management is not "just" about creating satisfied customers . . . the process if done right, is much more technical, more agile, more analytical and . . . adds discipline and objectivity to experience optimization . . . companies who formally</i>

Table 4. Excerpts from Letters of Support from CMHT Merchandising and Digital Retailing Board of Governors ¹	
	<i>incorporate . . . customer experience management, have seen double digit sustainable growth in addition to improved or stabilized customer loyalty. . . this is true in banking, tourism, retail, hospitality, travel . . . incorporating CXM can be transformative. . . given the evolution and extreme change in the business environment . . . every company can benefit from . . . customer experience management . . . the value and the return are value added, representing incremental return on investment.</i>
Magid	<i>. . . there is going to be an increasing demand for consumer experience management. Increasingly, employees must have a broader understanding of the consumer experience and be able to apply that understanding across many disciplines. A large component of that understanding requires interacting with consumers and applying a variety of research methodologies, both qualitative and quantitative. Applied research in consumer experience management is greatly needed to offer insights to retail, hospitality, tourism, as well as consumer services and products industries overall. Magid will be hiring people who have deep understanding of consumer experience management in order to meet the needs of its clients.</i>
Pier 1 Imports	<i>The need for research, data, insights and talent in retail around customer experience is at a critical state, and is in very high demand as retail is evolving from a product centric industry to a customer centric industry . . . today customers are driving the decisions around what product a company should sell and how they should go to market . . . product differentiation is becoming more challenging thus putting even more importance in a differentiated customer experience. . . most retailers are trying to figure out the right organizational structures and talent to create a true customer experience organization . . . many very large department stores have already made this move, but are struggling with the lack of expertise and talent currently available in the market. . . I am excited about the possibility of this PhD program both for the benefit of grooming talent in this much needed area as well as to create additional insight and research that can be used with our industry to improve the customer experience; and ultimately drive shareholder value.</i>

¹ See Appendix I for complete Industry Letters of Support.

CEXM: The Demand for Professionals with Advanced Degrees

An online search was conducted to determine the magnitude of need in consumer services and products industries for consumer experience professionals with advanced degrees (PhD and Master’s). Five websites were searched: (1) Indeed.com; (2) LinkedIn; (3) Jobs.nrf.com; (4) Hcareers.com; and (5) Monster.com. The searches were conducted over six days in June/July 2017 using the search terms “Consumer Analyst,” “Data Scientist,” and “Consumer Researcher.” The searches revealed 76 positions in retail, hospitality, tourism and consumer services and products companies seeking applicants with advanced degrees. See Table 5 for a sample of positions that either required or preferred the PhD degree. See Table 6 for a sample of positions that required a master’s degree.

Table 5. Sample of Positions in Consumer Experience Management that Required or Preferred the PhD Degree		
Title	General Job Description	Company
Analyst, Market Insights	Design and implement innovative , unique and robust analyses across internal and external data sources to understand consumer behavior , media consumption and advertising effectiveness. Crystalize complex data into simple concepts.	Google
Customer and Market Research Manager, Uber for Business	Design and conduct customer research , both quantitative and qualitative, that helps us understand the market and our customers' needs . Understanding the customer journey from awareness through purchase and product usage. Design and conduct qualitative studies, including focus groups and interviews	Uber
User Research Associate	Data collection role, conduct user studies , statistical analysis and literature reviews.	Apple
VP, Consumer Insights & Analytics	Use quantitative data to assess and reveal customer profiles , customer segments and customer behaviors to inform business and marketing decision-making and strategy and customer-focused , marketing and leading indicator insights. Identify metrics and KPIs using data analysis and data manipulation.	Total Wine & More
Senior User Experience Researcher	Strategic planning and roadmap for the digital experience ; researching and testing solutions that can significantly improve the customer experience.	Macy's
Sr. UX Researcher	Innovate research methods and lead studies to develop a deeper understanding of our customers and drive customer thinking and business vision; drive design solutions that improve and enhance customer engagement with the client's brands through the websites, stores, apps and tools for their customers and stores.	Bay One Solutions Inc.
User Experience Researcher	Digital customer experience ; develop innovative strategies and qualitative and/or quantitative analyses.	Sysco Labs
SMB Analyst	Use structured data to understand how our customers interact with our product and service offerings, and marketing campaigns.	Facebook

Table 6. Sample of Positions in Consumer Experience Management that Required the Master's Degree		
Title	General Job Description	Company
Head of Global GMS Experience Center	Work cross-functionally with REWs (Google's Real Estate & Workplace Services); Oversee Global GMS Customer Experience Center (CEC) ; Partner with GMS Executive Team, Google Technical Services, Designers and Architects on creating the strategy and vision for the GMS Customer Experience Center.	Google
Manager, Customer Experience Strategy	Leading deep analytics, harnessing insights and strategic development of projects; improve the guest experience.	Hilton

Table 6. Sample of Positions in Consumer Experience Management that Required the Master's Degree		
Title	General Job Description	Company
Customer Experience Product Manager	Development of new HP experiences. Advocate for customer experience , not just technology. Become expert on the environment where the product will be used.	HP
Customer Experience Strategy Manager	Accountable for driving meaningful change to the CarMax experience across channels and throughout the customer lifecycle. Identify opportunities to repair, enhance and innovate experiences central to delivering upon CarMax's brand vision.	CarMax
Regional Customer Experience Manager	Leader of customer experience process ; ways to improve customer experience ; Strategy / Communication / Drive Customer-Centric Culture; customer relations.	Volkswagen Group of America
Sr. Product Experience Manager - Customer Experience	Define the vision and roadmap for Amazon Alexa across global markets. Leader of customer service experience . Identify and measure product and business metrics to better understand customers' ongoing needs , help drive improvements in Alexa's customer experience .	Amazon
Sr. Manager Strategy and Innovation, Food & Personal Services	Defining, prioritizing services based on customer needs , developing and implementing new initiatives by partnering with relevant stakeholders, external partners and cross functional teams, in a 'test and learn' environment.	Walmart
Senior Manager - Consumer Engagement	Create, test, and scale new programs; Understand partners' business and develop supporting program strategies; consumer engagement experience; engagement analytics and consumer insights.	Disney ABC Television Group
Customer Experience Insights Manager	Responsible for unearthing customer experience insights across subscriber journeys to help drive improvements across the business. Measure and quantify the impact of customer satisfaction.	The New York Times
Consumer Insights Analyst	Supports JC Penney's corporate strategy and business development team by performing critical market and consumer research projects . Delivering customer-focused insights and recommendations.	JC Penney
Manager Customer Experience & Hospitality Services	Developing and executing the strategic and tactical plan for providing a consistently exceptional world class customer experience for patients, families, and guests across all touch points.	OhioHealth
Senior Manager, CRM Application	Support the CRM Personalization team in executing the digital personalization roadmap from a technical perspective; application support, IT liaison, as well as event and performance monitoring.	Hilton Corporate
Manager, Customer Experience Strategy	Responsible for leading deep analytics, harnessing insights and strategic development of projects which further The Hilton Way philosophy to develop customer centric operating standards to improve the guest experience .	Hilton Corporate
Senior Manager, Customer Insights and Analytics	Customer experience transformation; Customer experience drivers, analytics , pilot test design.	Comcast

B. Existing Programs

A search of Texas Public and Independent PhD granting universities as well as a national search of PhD programs at public and independent PhD granting universities was conducted. The purpose was to identify similar programs to the proposed PhD in Consumer Experience Management. Two criteria were used to establish evidence: (1) CIP Codes with consumer or customer in the title; and (2) aligned fields of with CIP Codes in Retail Management; Hospitality Administration/Management, General; Hospitality Administration; Tourism and Travel Services Management; and Merchandising and Buying Operations. The analysis was completed in five steps.

Step 1 – Identified CIP Codes with Consumer or Customer in the Title

CIP codes that included “consumer” or “customer” in the CIP title were identified through a search of the National Center for Education Statistics Classification of Instructional Programs. Five CIP Codes with consumer or customer in the title are included in this classification of instructional programs. See Table 7.

CIP Code	Title	Definition
19.0203	Consumer Merchandising /Retailing Management	A program that focuses on product and service promotion from the perspective of individual and family consumers and that prepares individuals to function as consumer management and marketing consultants in for-profit and non-profit enterprises. Includes instruction in applied market research, consumer behavior, product sourcing and distribution, profitability, customer feedback and evaluation methods, promotion and retailing campaign development, and applications to specific domestic and international consumer markets.
19.0402	Consumer Economics	A program that focuses on the application of micro- and macro-economic theory to consumer behavior and individual and family consumption of goods and services. It includes instruction in modeling, economic forecasting, indexing, price theory, and analysis of individual commodities and services and/or groups of related commodities and services.
19.0403	Consumer Services and Advocacy	A program that focuses on providing end-use advice and representational services to individuals and groups within a variety of settings, and the analytical and research techniques needed to protect consumers from unsafe, unreliable, and/or unhealthy products and services. Includes instruction in consumer advocacy, family management systems, ecological impacts of consumption practices, and analyzing and testing product quality and safety.
52.0207	Customer Service Management	A program that prepares individuals to supervise and monitor customer service performance and manage frontline customer support services, call centers/help desks, and customer relations. Includes instruction in customer behavior, specialized information technology and systems management, developing and using customer service databases, user surveys and other feedback mechanisms, strategic and performance planning and analysis, operations management, personnel supervision, and communications and marketing skills.
52.0411	Customer Service Support/Call Center/ Teleservice Operation	A program that prepares individuals to assist customers with inquiries and problems in frontline call centers, help desks, teleservice centers, and online. Includes instruction in user interfaces and user behavior, principles of hardware and software systems operation, customer interaction skills, telephone and e-mailing skills, data entry, and database and Internet searching and retrieval.

¹ Source: <http://www.txhighereddata.org/Interactive/CIP/> ² Extracted: December 6, 2017.

Step 2 – Review of All Texas Public and Independent PhD Universities Offering a PhD Regardless of Field
Texas Public and Independent universities that offer the PhD in any field were searched in the THECB program inventory. Twenty-one public and seven Independent PhD granting universities were identified regardless of field. See Table 8 (Public) and Table 9 (Independent).

Table 8. All Texas Public PhD Granting Universities Offering the PhD Regardless of Field ^{1, 2}	
1.	Lamar University
2.	Prairie View A&M University
3.	Sam Houston State University
4.	Stephen F. Austin State University
5.	Texas A & M University
6.	Texas A & M at Galveston
7.	Texas A & M – Commerce
8.	Texas A & M – Corpus Christi
9.	Texas A & M – Kingsville
10.	Texas Southern University
11.	Texas State University
12.	Texas Tech University
13.	Texas Woman’s University
14.	UT at Arlington
15.	UT at Austin
16.	UT at Dallas
17.	UT at El Paso
18.	UT at San Antonio
19.	University of Houston
20.	University of North Texas
21.	West Texas A & M University

¹ Source: <http://www.thecb.state.tx.us/apps/ProgramInventory/InvSearch.cfm> ² Extracted: December 11, 2017.

Table 9. Texas Independent PhD Granting Universities Offering the PhD Regardless of Field ^{1,2}	
1.	Baylor University
2.	Dallas Baptist University
3.	Rice University
4.	Southern Methodist University
5.	Texas Christian University
6.	University of Dallas
7.	University of the Incarnate Word

¹ Source: <http://www.thecb.state.tx.us/apps/ProgramInventory/InvSearch.cfm> ² Extracted: December 11, 2017.

Step 3 – Review of All Texas Public and Independent PhD Universities Offering a PhD with CIP Codes with Consumer or Customer in Title

A search of the 21 public and seven Independent PhD granting universities in Texas found no PhD programs listed for any of the five CIP codes that included consumer or customer in the title. See Table 10 and Table 11.

Table 10. Texas Public PhD Granting Universities Offering the PhD with CIP Codes with Consumer or Customer in Title ^{1, 2}						
Texas Public PhD Granting Universities		CIP Codes with Consumer/Customer in Title/Definition				
		52.0207³	52.0411⁴	19.0203⁵	19.0402⁶	19.0403⁶
1.	Lamar University	-	-	-	-	-
2.	Prairie View A&M University	-	-	-	-	-
3.	Sam Houston State University	-	-	-	-	-
4.	Stephen F. Austin State University	-	-	-	-	-
5.	Texas A & M University	-	-	-	-	-
6.	Texas A & M at Galveston	-	-	-	-	-
7.	Texas A & M – Commerce	-	-	-	-	-
8.	Texas A & M – Corpus Christi	-	-	-	-	-
9.	Texas A & M – Kingsville	-	-	-	-	-
10.	Texas Southern University	-	-	-	-	-
11.	Texas State University	-	-	-	-	-
12.	Texas Tech University	-	-	-	-	-
13.	Texas Woman’s University	-	-	-	-	-
14.	UT at Arlington	-	-	-	-	-
15.	UT at Austin	-	-	-	-	-
16.	UT at Dallas	-	-	-	-	-
17.	UT at El Paso	-	-	-	-	-
18.	UT at San Antonio	-	-	-	-	-
19.	University of Houston	-	-	-	-	-
20.	University of North Texas	-	-	-	-	-
21.	West Texas A & M University	-	-	-	-	-
Total PhD Degrees		0	0	0	0	0

¹ Source: <http://www.thecb.state.tx.us/apps/ProgramInventory/InvSearch.cfm> ² Extracted: December 11, 2017.

³ CIP Code Customer Service Management. ⁴CIP Code Customer Service Support/Call Center/Teleservice Operation.⁵ CIP Code Consumer Merchandising/Retailing Management. ⁶ CIP Code Consumer Economics. ⁷ CIP Code Consumer Services and Advocacy.

Table 11. Texas Independent PhD Granting Universities Offering the PhD with CIP Codes with Consumer or Customer in Title ^{1,2}						
Texas Independent PhD Granting Universities		CIP Codes with Consumer or Customer in Title				
		52.0207³	52.0411⁴	19.0203⁵	19.0402⁶	19.0403⁷
1.	Baylor University	-	-	-	-	-
2.	Dallas Baptist University	-	-	-	-	-
3.	Rice University	-	-	-	-	-
4.	Southern Methodist University	-	-	-	-	-
5.	Texas Christian University	-	-	-	-	-
6.	University of Dallas	-	-	-	-	-
7.	University of the Incarnate Word	-	-	-	-	-
Total PhD Degrees		0	0	0	0	0

¹ Source: <http://www.theccb.state.tx.us/apps/ProgramInventory/InvSearch.cfm> ² Extracted: December 11, 2017.

³ CIP Code Customer Service Management. ⁴ CIP Code Customer Service Support/Call Center/Teleservice Operation.

⁵ CIP Code Consumer Merchandising/Retailing Management. ⁶ CIP Code Consumer Economics. ⁷ CIP Code Consumer Services and Advocacy.

Step 4 – Review of All Texas Public and Independent PhD Universities Offering a PhD in Aligned Fields

The 21 Texas Public and seven Independent PhD granting universities were searched for PhD programs with CIP Codes in the five fields aligned with the proposed PhD in Consumer Experience Management: (1) Retail Management (52.0212), (2) Hospitality Management/Administration, General (52.0901), (3) Hospitality Administration (52.0904), (4) Tourism and Travel Services Management (52.0903), and (5) Merchandising and Buying Operations (52.1802). Among the 28 Texas universities, two PhD programs were found in hospitality administration and one PhD program in Parks, Recreation and Tourism. No programs were found in retail management or merchandising and buying operations. See Table 12 (Public) and Table 13 (Independent).

Table 12. Texas Public PhD Granting Universities Offering PhD Programs in Aligned Fields ^{1, 2}					
No.	Texas Public PhD Granting Universities	Evidence of CIP Code in Aligned Fields			
		52.0212 ³	52.0901⁴ 52.0904⁵	52.0903 ⁶	52.18.02 ⁷
1.	Lamar University	-	-	-	-
2.	Prairie View A&M University	-	-	-	-
3.	Sam Houston State University	-	-	-	-
4.	Stephen F. Austin State University	-	-	-	-
5.	Texas A&M University	-	-	1	-
6.	Texas A&M at Galveston	-	-	-	-
7.	Texas A&M – Commerce	-	-	-	-
8.	Texas A&M – Corpus Christi	-	-	-	-
9.	Texas A&M – Kingsville	-	-	-	-
10.	Texas Southern University	-	-	-	-
11.	Texas State University	-	-	-	-
12.	Texas Tech University	-	1	-	-
13.	Texas Woman’s University	-	-	-	-
14.	UT at Arlington	-	-	-	-
15.	UT at Austin	-	-	-	-
16.	UT at Dallas	-	-	-	-
17.	UT at El Paso	-	-	-	-

Table 12. Texas Public PhD Granting Universities Offering PhD Programs in Aligned Fields ^{1, 2}					
No.	Texas Public PhD Granting Universities	Evidence of CIP Code in Aligned Fields			
		52.0212 ³	52.0901⁴ 52.0904⁵	52.0903 ⁶	52.18.02 ⁷
18.	UT at San Antonio	-	-	-	-
19.	University of Houston	-	1	-	-
20.	University of North Texas	-	-	-	-
21.	West Texas A&M University	-	-	-	-
Total PhD Degrees		0	2	1	0

¹ Source: <http://www.thecb.state.tx.us/apps/ProgramInventory/InvSearch.cfm>) ² Extracted: December 6, 2017.

³ CIP Code for Retail Management. ⁴ CIP Code for Hospitality Administration/Management, General. ⁵ CIP Code for Hospitality Administration. ⁶ CIP Code for Tourism and Travel Services Management. ⁷ CIP Code for Merchandising and Buying Operations.

Table 13. Texas Independent PhD Granting Universities Offering PhD Programs in Aligned Fields ^{1, 2}					
No.	Texas Independent PhD Granting Universities	Evidence of CIP Codes in Aligned Fields			
		52.0212 ³	52.0901 ⁴ 52.0904 ⁵	52.0903 ⁶	52.18.02 ⁷
1.	Baylor University	-	-	-	-
2.	Dallas Baptist University	-	-	-	-
3.	Rice University	-	-	-	-
4.	Southern Methodist University	-	-	-	-
5.	Texas Christian University	-	-	-	-
6.	University of Dallas	-	-	-	-
7.	University of the Incarnate Word	-	-	-	-
Total PhD Degrees		0	0	0	0

¹ Source: <http://www.thecb.state.tx.us/apps/ProgramInventory/InvSearch.cfm>) ² Extracted: December 6, 2017.

³ CIP Code for Retail Management. ⁴ CIP Code for Hospitality Administration/Management, General. ⁵ CIP Code for Hospitality Administration. ⁶ CIP Code for Tourism and Travel Services Management. ⁷ CIP Code for Merchandising and Buying Operations.

Among the 21 Public and seven Independent PhD granting universities in Texas, three PhD programs were identified that offer a PhD in an aligned field, all in public universities. Two degrees were in hospitality administration and management, one was in recreation, parks and tourism sciences. No degree had a consumer focus. See Table 14.

Table 14. Summary Data for Three Texas Public Universities Offering PhD Programs in an Aligned Field by CIP Codes, Degree Name, and Date Degree Launched ¹			
Texas Public PhD Granting Universities	CIP Code	PhD Title	Date Degree Launched
Texas A&M University	52.0903	Recreation, Park and Tourism Sciences	9/16/1968
Texas Tech University	52.0901	Hospitality Administration	7/18/2002
University of Houston	52.0904	Hospitality Administration	7/24/2014

¹ Retrieved: December 6, 2017: <http://www.thecb.state.tx.us/apps/ProgramInventory/InvSearch.cfm>)

Step 5 – Review of National Universities Offering a PhD in Aligned Fields

Data on PhD granting universities in the U.S. was gathered using information from four websites: (1) university, (2) Council on Hotel, Restaurant and Institutional Education (ICHRIE), (3) International Textile and Apparel Association (ITAA), and (4) FAEIS – USDA Food and Agricultural Information System. Nationally, 25 programs were identified in the aligned fields of hospitality management/administration and apparel/design/merchandising. Six nationally ranked universities offered programs in two aligned fields (merchandising and hospitality management): Auburn, Cornell, Iowa State, Kansas State, Oklahoma State, and Purdue. Ten universities offered hospitality management only. Four universities offered a traditional consumer science focus. Ten universities focused on textiles, apparel, merchandising, and design. One university had a focus on retail and hospitality management. See Table 15.

Table 15. Summary Data for National Universities Offering PhD in an Aligned Field ^{1, 2, 3}			
No.	PhD University	CIP	PhD Programs
1-2.	Auburn University	52.09	Hospitality Administration
		50.04	Consumer & Design Sciences
3-4.	Cornell University	19.09	Apparel Design and Fiber Science
		52.09	Hospitality Management
5-6.	Iowa State University	52.09	Hospitality Management
		19.09	Apparel, Merchandising and Design
7-8.	Kansas State University	19.09	Apparel, Textiles and Interior Design
		52.09	Hospitality Management
9.	Louisiana State University	19.09	Textile Science, Apparel Design, or Merchandising
10.	North Carolina State University	14.28	Textile Technology Management
11.	Ohio State University	52.09	Consumer Sciences
12-13.	Oklahoma State University	19.02	Design, Housing and Merchandising
		52.09	Hospitality Administration
14.	Pennsylvania State University	52.09	Hospitality Management
15-16.	Purdue University	52.09	Hospitality & Tourism Management
		19.02	Consumer Merchandising/Retailing Management
17.	University of Central Florida	52.09	Hospitality Management
18.	University of Georgia	52.19	Textiles, Merchandising & Interiors
19.	University of Minnesota	19.09	Design, Housing and Apparel
20.	University of Missouri	19.09	Textile and Apparel Management
21.	University of Nebraska – Lincoln	19.09	Textiles, Merchandising, and Fashion Design
22.	University of Nevada – Las Vegas	52.09	Hospitality Management
23.	University of North Carolina – Greensboro	19.09	Consumer, Apparel, and Retail Studies
24.	University of South Carolina	52.09	Hospitality Management
25.	University of Tennessee Knoxville	52.09	Retail, Hospitality and Tourism Management

¹ Retrieved 2-9-2018: <http://itaaonline.org/?page=GraduatePrograms>; International Textile and Apparel Association.

² Retrieved 2-9-2018 from: <https://www.chrie.org/i4a/pages/index.cfm?pageid=3268> ³ Retrieved 2-9-2018 from: <https://www.faeis.ahnrit.vt.edu/>

Summary of Existing PhD Programs, Duplication, Capacity, and Meeting Workforce Needs

The comprehensive review of existing programs that was detailed in Tables 7 – 15 provides evidence that a PhD in Consumer Experience is breaking new ground in doctoral education. No programs were found in this emerging field at any public or independent university in Texas or the U.S. Moreover, when five aligned fields (retail management; hospitality administration management, general; hospitality administration; tourism and travel services management; and merchandising and buying operations) were explored for PhD granting universities in Texas, only three programs aligned with consumer services industries were found, all were in Texas public universities, and all were related to hospitality and tourism services. None have a consumer or retail/merchandising focus.

A comprehensive review of existing programs reveals an absence of similar programs to the proposed PhD in Consumer Experience Management. This further supports UNT’s position that the PhD in Consumer Experience Management is a unique cutting-edge program in an emerging field. It also confirms the opportunity to offer this new degree to meet the need for highly educated talent for higher education and industry leaders. Graduates of this program will be well equipped with the research skills and knowledge to understand the impact of consumer-centricity in driving consumer engagement and expectations for optimal experiences. See Table 16.

Table 16. Summary of Existing PhD Programs, Duplication, Capacity and Meeting Workforce Needs in Consumer Experience Management			
PhD in Consumer Experience Management		Evidence	Met Need
1.	Existing PhD programs in CEXM	No program exists in Texas.	No
2.	Enrollments – 5 years	No program exists in Texas.	No
3.	Graduates – last 5 years	No program exists in Texas.	No
4.	Graduates – last 5 years	No program exists in Texas.	No
5.	Program duplication	There is no duplication. No program exists in Texas.	No
6.	Texas programs aligned with consumer/customer focus.	No program exists in Texas with a focus on consumers/customers.	No
7.	Enrollments are at or near capacity.	No program exists in Texas. No program exists nationally.	No
8.	Workforce needs in higher education are being met.	No Texas public or independent university prepares professionals for university research and teaching in the emerging field of consumer experience management.	No
9.	Workforce needs in Texas consumer service and products industries are being met.	No Texas public or independent university prepares professionals with strategic and analytic knowledge and skills needed to meet the consumer-centric marketplace and to create optimal experiences in the end-to-end journey with consumer products and services.	No
10.	Similar programs were found nationally.	No university in the U.S. was identified that offers a PhD program in the emerging of Consumer Experience Management.	No

C. Student Demand

Historical Evidence of CMHT Students Who Graduated from Doctoral Programs

A good indicator of long-term student interest and demand for a PhD program is the extent to which CMHT master's students have continued to the PhD. CMHT has graduates who are currently admitted, enrolled, or have graduated from doctoral programs at UNT or at other universities in Texas, the U.S., and South Korea. In addition, several students who completed a B.S. degree in CMHT continued to complete a PhD.

In the past 12 years, CMHT has 14 known graduates with a B.S. or M.S. degree who continued and completed a PhD. Among those who graduated with doctoral degrees, most hold university appointments. Only three students remained in Texas, and all at UNT. The other 11 completed degrees out-of-state or internationally. See Table 17.

Table 17. Known CMHT Graduates with B.S. and M.S. Who Completed a PhD ¹			
No.	M.S.	Doctoral Institution And Area of Study	University and Academic Appointment
1.	Hospitality	Hong Kong Polytechnic University Hospitality Administration	Hong Kong Polytechnic Instructor
2.	Merchandising	University of North Texas Marketing & Logistics	NEOMA Business School, Paris, France Assistant Professor
3.	Hospitality	Ohio State University Consumer Sciences, Hospitality	Kansas State University Assistant Professor, Hospitality Management
4.	Hospitality	Northwest Nazarene University Educational Leadership	University of North Texas Lecturer, Hospitality and Tourism Management
5.	Merchandising	Oklahoma State University Merchandising and Design	University of Kansas Assessment Specialist
6.	Merchandising	University of North Texas Marketing	Texas Wesleyan University Assistant Professor, Marketing
7.	Merchandising	University of Tennessee, Knoxville Retail Merchandising	University of Minnesota Associate Professor, Retail Merchandising Program Director
8.	Merchandising	University of Tennessee, Knoxville Retail Merchandising	Western Illinois University Assistant Professor, Merchandising
9.	Merchandising	University of Missouri Apparel and Textile Marketing	Hong Kong Polytechnic University Research Assistant
10.	Merchandising	University of Missouri Apparel and Textile Marketing	University of North Texas Associate Professor, Merchandising
11.	Merchandising	Oklahoma State University Merchandising and Apparel Design	Texas Christian University Associate Professor, Merchandising
12.	Merchandising	University of North Texas Marketing & Logistics	Florida Gulf Coast University Assistant Professor, Marketing
13.	Merchandising	Auburn University Higher Education	University of North Texas Adjunct Faculty, Merchandising
CMHT Students Who Completed the B.S. Degree at UNT and Master's and PhD at Another University			
14.	Hospitality	Oklahoma State University Hospitality Administration	James Madison University Assistant Professor, Hospitality Management

¹ Graduates from 2005 – 2014.

Also, in the last 12 years, CMHT had six graduates with the M.S. in Merchandising enter careers in education with five holding academic appointments at universities. This suggests a strong interest among master’s students for careers in higher education. See Table 18.

Table 18. CMHT Graduates with the M.S. in Merchandising Who Hold Academic Appointments		
No.	M.S.	Academic Appointment
1.	Merchandising	Assistant Principal at Newman Smith High School
2.	Merchandising	University of North Texas, Adjunct Faculty, Merchandising
3.	Merchandising	University of North Texas, Lecturer, Digital Retailing Senior Director, Global Digital Retailing Research Center
4.	Merchandising	University of North Texas, Adjunct Faculty, Merchandising
5.	Merchandising	Youngstown State University, Adjunct Professor, Merchandising
6.	Merchandising	Mercyhurst University (PA), Assistant Professor Merchandising, Department Chair

Current Evidence of Student Interest in the PhD in Consumer Experience Management

Interest in doctoral education has steadily grown among students completing one of the Master’s degrees offered in CMHT. Currently, there are 11 CMHT graduates enrolled in doctoral programs; six are at Texas universities; five are enrolled at universities outside of Texas. See Table 19.

Table 19. CMHT Graduates of B.S. and M.S. Programs Currently Enrolled in a PhD Program Who Expressed Interest in PhD in CEXM if Available			
No.	M.S.	Current Doctoral Institution	Area of Study
1.	MS Hospitality MGT/MBA	Texas Tech University	Hospitality Administration
2.	Merchandising	Iowa State University	Apparel, Events and Hospitality Management
3.	Merchandising	Texas Tech University	Marketing
4.	Int'l Sustainable Tourism	Texas Woman’s University	Sociology
5.	Merchandising	University of North Texas	Sociology
6.	Hospitality Management	University of North Texas	Learning Technologies
7.	Merchandising	University of Tennessee, Knoxville	Retail Management
8.	Merchandising	Seoul National University	Fashion Marketing
9.	Hospitality Management	Oral Roberts University	Higher Education
10.	Hospitality Management	Iowa State University	Apparel, Events and Hospitality Management
B.S.		Current Doctoral Institution	Area of Study
11.	Hospitality	University of North Texas	Information Science

UNT has three students admitted to or currently enrolled in the PhD in Information Science and taking the Concentration in Consumer Behavior and Experience Management offered by CMHT. In addition, there are two students admitted to or currently enrolled in the PhD in Computer Science Engineering. These two students are working in one of the two research labs housed in CMHT which are discussed in Section H – Strategic Plan. All five students expressed an interest in the PhD in Consumer Experience Management and each indicated they would have applied to the PhD in CEXM had it been available. See Table 20.

Table 20. Students Admitted to or Enrolled at UNT in PhD Programs in the Sciences with Interest in PhD in CEXM						
Number of Students	Admitted To UNT	Currently Enrolled At UNT	Degree	UNT PhD Programs In the Sciences	Date Started	Would Apply to PhD in CEXM if Available
1. ^{1, 2}		X	PhD	Computer Science & Engineering	Fall 2016	Yes
2. ³		X	PhD	Information Science	Spring 2015	Yes
3. ^{1, 2}		X	PhD	Information Science	Spring 2018	Yes
4. ^{1, 2}	X		PhD	Information Science	Fall 2018	Yes
5. ^{1, 2}	X		PhD	Computer Science & Engineering	Fall 2018	Yes

¹ Holds a master's degree from the sciences. ² Foreign national. ³ Holds M.S. in Hospitality Management from UNT.

Each year, graduates of CMHT's three master's programs apply to and are accepted into doctoral programs. Five CMHT master's students who graduated in AY 2016-17 or are graduating in AY 2017-2018 are currently applying to doctoral programs. Among the five, three applications were submitted to UNT and five applications were submitted to universities outside of Texas. See Table 21.

Table 21. CMHT Master's Students Currently Applying to PhD Programs with Interest in PhD in CEXM					
No.	MS Degree	Year of Graduation	University Applications	Seeking Start Date	Would Apply to PhD in CEXM if Available
1.	Merchandising	2018	University of North Carolina, Greensboro Iowa State University	2018-19	Yes
2.	Hospitality Management	2017	University of North Texas	2018-19	Yes
3.	Merchandising	2017	University of Minnesota	2018-19 2019-20	Yes
4.	Merchandising	2016	Penn State University University of North Texas University of Central Florida	2018-19	Yes
5.	Hospitality Management	2016	University of North Texas	2018-19	Yes

D. Student Recruitment

Recruitment: CMHT Strategies for Graduate Students

CMHT uses several recruitment strategies to encourage students to consider graduate education. One is to reach out to undergraduate majors in underrepresented groups to discuss graduate education and its benefits. This has been a successful strategy for current undergraduate students to move directly into a graduate program. A second strategy is to give presentations about CMHT graduate programs at other universities in Texas which do not offer a master's degree. A third strategy is to pro-actively send information by email to students who have inquired about CMHT graduate programs through the Admissions Office, the Toulouse Graduate School, or through contacting CMHT directly.

Once CMHT knows of a student's interest, there is a follow up email with the prospective student who is invited to call or come to campus for further information. The phone calls and campus visits are coordinated by CMHT's Master's Graduate Coordinators, one in each Department, who work directly with interested students and help them in the application process. The Associate Dean for Academic programs is also available to meet with potential graduate students. Appointments may be made after normal business hours (8:00 – 5:00) to accommodate prospective students who work during the regular business day.

Recruitment: CMHT Students

A primary opportunity to recruit students for the PhD in CEXM is current CMHT students and alumni who expressed interest in graduate education while a student at UNT. The college has an established track record of graduates of its B.S. and M.S. programs continuing to successful admission and completion of doctoral programs at UNT and major universities in the U.S. and abroad. See Tables 19 and 21.

Having a PhD program within the college will make doctoral education highly visible to current students and offer opportunities for faculty to directly mentor undergraduate and master's students to continue into the doctoral program. This pipeline will include graduates of the CMHT's three master's programs: (1) M.S. in Hospitality Management, (2) M.S. in International Sustainable Tourism, and (3) M.S. In Merchandising.

Recruitment: M.S. in Advanced Data Analytics – UNT New College at Frisco

A second opportunity to recruit UNT graduates is from the new M.S. in Advanced Data Analytics housed in the Toulouse Graduate School. It offers an emphasis in hospitality management or merchandising through three courses to be selected from a list of specified courses. Hospitality Management courses include CMHT 5600 Managing Customer Experiences, HMGT 5630 Event Management, HMGT 5520 Global Tourism Systems, HMGT 5585 Smart Destination, and CMHT 5550 Promotional Strategies. Merchandising courses include CMHT 5600 Managing Customer Experiences, CMHT 5440 Consumer Theory, MDSE 5240 Global Retailing, MDSE 5710 Digital Optimization, and MDSE 5750 Digital Retailing.

Recruitment: UNT Social Sciences

The third opportunity is to recruit UNT graduates from the social sciences. CMHT attracts undergraduate students from the social sciences into its master's programs and similarly may be viable for the PhD in CEXM. CMHT's recruitment strategy is to target seven fields which offer a master's program but not the PhD: (1) applied geography, (2) applied economics, (3) applied anthropology, (4) environmental science, (5) interdisciplinary studies, (6) journalism, and (7) kinesiology and sports management. Graduates of these master's programs may find the PhD in CEXM a viable option as their master's fields are aligned with consumer services and products industries.

Recruitment: UNT Sciences

The fourth opportunity is to recruit UNT graduates from the sciences. This effort will target students holding master’s degrees in information sciences, data analytics, and computer science engineering. Technology, data, and information are critical drivers of the consumer experience. While technology applications are used to collect data, a key element in business success is being able to interpret consumer data for successful strategies. Pairing technology with a deep understanding of the consumer – centric model will be a powerful combination of knowledge and skills.

There are significant opportunities in consumer services and products industries for multifaceted talent with strong science competencies and a deep understanding of CEXM. Recruiting students from the sciences can fill a significant workforce void being addressed in the retail industry. For example, in 2016, the National Retail Federation (NRF), the largest industry association of its kind in the world, began offering national programming and events to recruit graduates of science programs – especially information sciences, data analytics and computer science engineering. These recruitment activities funded students to attend national retail conferences focused on technology applications. Career opportunities that integrate technology, data analytics and information with retail processes are growing and a highly trained workforce with this combination of knowledge and skills is critical to the vitality of consumer services and products industries. Similar need is found in the hospitality and travel industry as national and global companies seek new strategies to generate consumer loyalty to their brands.

Recruitment: Universities Offering Only the Master’ Degree

A fifth opportunity is to recruit from universities offering only a master’s degree in merchandising, hospitality, or a closely aligned area. Besides UNT, there are four programs in Texas and a small number nationally. See Table 22.

Table 22. Texas and National Universities Offering Only the Master’s Degree	
Texas Public Universities	
Lamar University	Family and Consumer Sciences
Texas State University	Merchandising & Consumer Studies
University of Houston	Global Retailing
University of Texas – Austin	Texas & Apparel Technology
U.S. Public Universities	
Boston University	Hospitality Management
Cal Poly Pomona University	Hospitality Management
Colorado State University	Design and Merchandising
Florida State University	Apparel & Textiles
Georgia State University	Global Hospitality Management
	Hospitality Administration
Indiana University	Apparel Merchandising
New York University	Hospitality Industries
University of Alabama	Consumer Sciences
University of Arkansas	Apparel Merchandising & Product Development
University of Delaware	Hospitality Management
	Fashion and Apparel Studies
University of New Orleans	Hospitality & Tourism Management
University of South Carolina	Retailing
University of Rhode Island	Textiles, Fashion Merchandising and Design
Washington State University	Apparel, Merchandising, Design, and Textiles

Table 22. Texas and National Universities Offering Only the Master’s Degree	
U.S. Independent Universities	
Drexel University	Food and Hospitality Management Retail and Merchandising
Fairleigh Dickenson University	Hospitality Management

Recruitment: International

The sixth opportunity is to recruit international students. UNT has a robust international student population. Many are graduate students at the master’s and doctoral levels. Within CMHT, our international recruitment efforts bring many students from Asia, especially China, South Korea, and India. In the previous section on “Student Demand” Table 17 identified two international students currently enrolled and two students who are admitted to UNT PhD programs in the sciences who would have considered the PhD in CEXM. All four are from China. Also, in Table 18 in the previous section on student demand there is one CMHT master’s student from China who is seeking a PhD program and one student who returned to South Korea to complete a PhD program. This high interest among international students suggests UNT is well positioned to recruit international students to the PhD in CEXM, especially from China.

Recruitment: International Three + Two Programs in the Department of Merchandising and Digital Retailing

The seventh opportunity to recruit targets international students who are at UNT in a pathway program. Pathway Agreements enable the student to first receive a bachelor’s degree in the aligned field from a university in their home country and then the master’s degree from UNT, provided all degree requirements are met for each respective institution.

The Department of Merchandising and Digital Retailing established a Pathway Agreement (also known as 3+2 programs) with five universities accredited by the Ministry of Education of China. These five universities have renowned academic and research programs in this field, specifically textiles, apparel, trade, and e-commerce. To be admitted, the student must be pursuing a bachelor’s degree in a specified program that is aligned with the M.S. in Merchandising. The student must have been admitted conditionally as a degree-seeking graduate student to UNT’s College of Merchandising, Hospitality and Tourism (CMHT) in the MS in Merchandising. The five China university partnerships with the Department of Merchandising and Digital Retailing and the China textile and apparel program rankings are listed in Table 23.

Table 23. Chinese Partner Universities and National Rankings by Field	
Comprehensive Universities	National Rankings by Field for Universities with Textile and Apparel Programs
Donghua University	1
Zhejiang Science and Technology	4
Jiangnan University	5
Xian Polytechnic University	6
Wuhan Textile University	N/A

A Pathway Agreement was formalized with each of the four universities in China in spring 2017. The first student was admitted in fall 2017 and the second for fall 2018 into the academic pathway to the M.S. in Merchandising Degree. See Table 24.

Table 24. Graduate Pathway Agreements with International Partner Universities	
Year 1 at UNT	
Courses	Graduate SCH
4 Undergraduate courses to complete bachelor's degree at international university	
4 Graduate courses toward M.S. in Merchandising	12
Bachelor's Degree Awarded from International University	
Year 2 at UNT	
Admitted to Toulouse Graduate School and M.S. in Merchandising	
8 Graduate Courses (3 Fall, 3 Spring, 2 Summer)	24
M.S. in Merchandising Awarded	36

The Department of Hospitality and Tourism Management received a 2018 grant from the UNT International China Venture Fund to work with three universities in China which offer the bachelor degree in hospitality and tourism. The grant supports three faculty traveling to China with the goal of establishing graduate pathway programs for the M.S. in Hospitality Management with these Chinese universities.

Recruitment: Underrepresented Groups

While non-resident alien students contribute significantly to the diversity of a student population, they are not members of underrepresented groups in the U.S. To determine the percent of CMHT U.S. students in underrepresented groups, a comparison was made of U.S. students enrolled in fall semesters AY 2005 – 2017. U.S. students who self-identified as white formed one group; students who self-identified as African American, Hispanic, Asian/Pacific Islander, American Indian/Alaskan Native, or Other/Unknown formed a second group of underrepresented students.

The percentage of students in the underrepresented group was calculated for the total enrollment of all U.S. students in CMHT's three master's programs. From 2005 – 2011, the underrepresented group ranged from a low of 40.63 percent to a high of 48.15 percent of the total U.S. students. From 2012 – 2017, underrepresented groups ranged from a low of 55.56 percent to a high of 61.22 percent of the total number of U.S. students. The average percent of underrepresented graduate students during this 13 – year period was 52.76 percent. This offers strong evidence of CMHT's success in recruiting and retaining underrepresented groups. See Table 25.

Table 25. Percent of Underrepresented Groups Majoring in CMHT Master's Programs (Fall Semesters 2005 – 2017)					
Enrollment by U.S. Ethnic Group ¹				Total U.S. Majors	Underrepresented Groups ² as Percent of Total U.S. Majors in CMHT Master's Programs
Fall Year	White	Underrepresented Groups ²			
1.	2017	16	20	36	55.56
2.	2016	18	24	42	57.14
3.	2015	21	27	48	56.25
4.	2014	19	30	49	61.22
5.	2013	25	39	64	60.94
6.	2012	34	44	78	56.41
7.	2011	54	39	93	41.94

Table 25. Percent of Underrepresented Groups Majoring in CMHT Master's Programs (Fall Semesters 2005 – 2017)					
Enrollment by U.S. Ethnic Group ¹			Total U.S. Majors	Underrepresented Groups ² as Percent of Total U.S. Majors in CMHT Master's Programs	
Fall Year	White	Underrepresented Groups ²			
8.	2010	49	36	85	42.35
9.	2009	32	26	58	44.83
10.	2008	28	26	54	48.15
11.	2007	19	13	32	40.63
12.	2006	10	13	23	56.52
13.	2005	9	16	25	64.00
Total		334	336	670	AVG = 52.76 %

¹ Non-resident aliens were omitted in enrollments. ² Represents the sum of all U.S. students who identified as African American, Hispanic, Asian/Pacific Islander, American Indian/Alaskan Native, or Other/Unknown.

Although CMHT has a strong history of recruiting underrepresented students, additional efforts will be made to continue this effort. These efforts include: 1) directly contacting underrepresented graduates of the M.S. in Merchandising or Hospitality Management programs 2) contacting CMHT graduates that completed doctoral degrees for an academic career, 3) building relationships with faculty from 15 HBCU that offer master's degrees in business and/or psychology to recruit their graduates. Through these efforts faculty are confident that the percentage of underrepresented will remain high.

E. Enrollment Projections

Enrollment Projections: Metric for FT and PT Status

The program will admit both full- and part-time students. The number of part-time students shall not comprise more than 25 percent of the total number of new and continuing full-time students combined. A full-time doctoral student will be enrolled in nine SCH during the fall and spring semesters. A part-time doctoral student will be enrolled in six or fewer hours during the fall and spring semester.

Enrollment Projections: Metric for Underrepresented Groups

An analysis of underrepresented groups among CMHT Master's students from 2005 – 2017 was described in Table 25. It created a baseline percentage that could be used to predict enrollments of underrepresented groups for the PhD. A second analysis for this 13-year period determined percentages for each underrepresented groups. A total of 899 students were enrolled in the three CMHT graduate programs during this time frame. Slightly more than one-third (37.16 %) were white and represented the largest percentage for a single group. About one-fourth of the students were non-resident aliens (25.48 %). The remaining 37.36 % represented underrepresented groups. See Table 26.

Table 26. Ethnicity of CMHT Graduate Students Fall Semesters 2005 – 2017								
Fall Year	White	African American	Hispanic	Asian/Pacific Islander	American Indian/Alaskan Native	Other/Unknown	Non-Resident Alien ¹	Total Headcount
2017	16	3	12	5	0	0	12	48
2016	18	7	10	5	1	1	13	55
2015	21	11	9	5	2	0	19	67
2014	19	13	8	4	3	2	25	74
2013	25	18	14	4	2	1	33	87
2012	34	22	16	3	2	1	18	92

Fall Year	White	African American	Hispanic	Asian/ Pacific Islander	American Indian/ Alaskan Native	Other/ Unknown	Non-Resident Alien ¹	Total Headcount
2011	54	22	10	4	2	1	22	115
2010	49	15	12	5	2	2	21	106
2009	32	12	9	5	0	0	17	75
2008	28	6	5	2	0	0	14	55
2007	19	6	3	4	0	0	13	45
2006	10	8	3	4	1	0	10	36
2005	9	4	3	1	1	0	12	30
Total	334	147	114	51	16	8	229	899
Percent	37.16	16.36	12.69	5.68	1.78	.89	25.48	100.00

¹ International Students.

Among underrepresented groups, African Americans (16.36 %) represented the largest single group. Hispanic students had a steady growth trend starting in 2010 and continued through 2017. Hispanic students are now the largest underrepresented group in CMHT. In fact, in 2017 Hispanics represented 25% of the total number of CMHT master's students. From 2009 through 2015, the number of African American students increased, but this group declined significantly in the last two years. This may be due to an improved job market which has impacted graduate student enrollments in at UNT.

Enrollment Projections: Metric for Total Headcount

Enrollment projections for the PhD in CEXM were based on the percentages of known CMHT master's students who are currently applying to or enrolled in a PhD program but would have considered the PhD in Consumer Experience Management had it been available. It also includes students who are admitted to a UNT PhD program who also would have considered the PhD in CEXM had it been available. CMHT expects that it could have enrolled at least 50 percent of the total headcount that was pursuing a PhD and expressed interest in the PhD in CEXM. See Table 27.

Current PhD Status	University Location				Total Headcount ¹	Percent Loss To UNT ²
	UNT	Texas	U.S.	International		
Applied	3	0	5	0	5	75.0 %
Admitted ³	2	0	0	0	2	00.0 %
Enrolled ³	5	3	4	1	13	62.5 %
Totals	10	3	9	1	20	50.0 %

¹Five CMHT Master's students have submitted applications to 8 universities. ²Percent of Current PhD status for students who applied, admitted and enrolled in PhD programs that are not at UNT. ³Currently admitted to or enrolled in a UNT PhD program but would have considered the PhD in CEXM.

Enrollment Projections: Metrics to Calculate Attrition and Completion

Retaining doctoral students in a PhD program is a prime responsibility of the faculty, college and university as significant investments are made in these students. The metric for doctoral student attrition was based on a five-year average retention of students in the CMHT Master’s programs (2012 – 2017). The average retention in CMHT’s Master’s degrees is 73 percent (27.94 % attrition). A slightly higher retention rate of 80 percent (20% attrition) is expected in the doctoral program. This projection is based a more stringent initial assessment of academic readiness and scholarly evidence at the application stage to ensure students have a sufficient academic background to ensure success. An 80 percent retention rate is considered highly acceptable for any program. For students who have deficiencies, a development plan will be created to build the knowledge and skills needed to be successful in the PhD program. See Table 28.

Table 28. CMHT Master’s Headcounts, Percent Retention, and Degrees Awarded							
Fall Semester of Academic Year	M.S. Headcounts			M.S. Graduate Students		M.S. Graduate Students	
	Department		Total	Percent		Total Degrees Awarded	Percent of Total Headcount
	HTM	MDR	CMHT	Retention	Attrition		
2016 – 2017	32	27	59	Not available	Not available	37	63.7 %
2015 – 2016	34	37	71	64.50 ¹	35.50 ¹	28	39.4 %
2014 – 2015	44	30	74	78.56	21.44	37	50.0 %
2013 – 2014	45	43	88	74.35	25.65	37	46.3 %
2012 – 2013	46	41	87	74.83	25.17	39	44.8 %
TOTAL	201	178	379	-		178	-
AVERAGE	40.2	35.6	75.6	73.06	26.94	35.6	48.8 %

¹ Two students dropped out of the M.S. in International Sustainability Tourism at the end of fall semester of their first year which resulted in an uncharacteristic dip in retention.

Retention to graduation is expected to be high in the PhD program. When total degrees awarded were examined for CMHT’s Master’s degrees, about one half or more of the overall headcount graduated each year. The master’s is a two-year program enrolling both full-time and part-time students. The percentage of degrees awarded based on headcount in the master’s programs is a good indicator of the success CMHT has in progressing its students to completion of the MS degree. It is expected a similar situation will be evident in the PhD program with full-time doctoral students graduating on time in three years and part-time students graduating within five years.

Enrollment Projections: Estimated Headcount and FTSE for First Five Years

Four metrics were used to project headcounts and FTSE for first five years.

1. Full – and part-time status estimates are based on 75% FT and 25% PT admitted in each class.
2. Percentages of ethnic groups and international students. See Table 26.
3. Total headcount of students applying, admitted and currently enrolled in PhD programs. See Table 27.
4. Student attrition in master’s programs. See Table 28.

Estimates for a cumulative headcount and full-time student equivalent (FTSE) enrollment for the first five years of the PhD in Consumer Experience Management are found in THECB Table 29.

THECB Table 29. Five-Year Enrollment Projections for PhD in Consumer Experience Management						
Ethnicity	Percent Total Enrollment By FT/PT and Ethnicity	Year 1 2019	Year 2 2020	Year 3 2021	Year 4 2022	Year 5 2023
New Students ¹	FT ²	6	7	7	8	8
	PT ³	2	2	3	2	3
Continuing	FT		5	10	11	12
	PT		2	3	4	3
Headcount Ft + PT Continuing + New	FT	6	12	17	19	20
	PT	2	4	6	6	6
Headcount	Total	8	16	23	25	26
White	37.16	3	6	8	9	10
African-American	16.36	1	3	4	4	4
Hispanic	12.69	1	2	3	3	3
International	25.48	2	4	6	7	7
Other	8.35	1	1	2	2	2
Cumulative Headcount		8	16	23	25	26
Total FT SCH (18 SCH)		108	216	306	342	360
Total PT SCH (SCH)		18	36	54	54	54
Total SCH/ Headcount		126	252	360	396	414
FTSE ⁴		7	14	20	22	23
Attrition ⁵			1	3	4	4
Graduates ⁶			0	0	4	6

¹FT and PT students admitted with aligned M.S. degrees will be admitted directly into the PhD program. ² FT students required to enroll in 9 SCH per long semester (18 SCH per year)-summers optional. ³ PT students required to enroll in 9 SCH across any two or three semesters annually. ⁴ FTSE = total number of SCH divided by 9 (full SCH load for doctoral student). ⁵ Attrition based on prior year's FTSE. ⁶ FT students taking 18 SCH per year can complete the degree in 3 years; PT students taking 9 SCH per year can complete in 5 years.

Table 29a. Enrollment Projections- New THECB Table

	Year 1	Year 2	Year 3	Year 4	Year 5
White	3	6	8	9	10
African American	1	3	4	4	4
Hispanic	1	2	3	3	3
International	2	4	6	6	6
Other	1	1	2	2	2
Total New Students	8	9	10	10	11
Attrition	0	1	3	4	4
Cumulative Headcount	8	16	23	25	26
FTSE	7	14	20	22	23
Graduates	0	0	0	4	6

II. Academics

A. Accreditation

There is no accrediting body for this program.

B. Admissions Standards

Admission to the Toulouse Graduate School

Students seeking admission to the doctoral program must meet all general requirements of the Toulouse Graduate Schools as well as the following additional requirements.

Admissions Standards for the PhD in Consumer Experience Management

1. Hold at least a 3.0 GPA on a completed master's degree.
2. Students will be assessed on their readiness to enroll in the program coursework.
 - a. Competitive score on the Graduate Record Exam (GRE).
 - b. Scores more than five years old at the time of application will not be considered.
3. Applicants whose native language is not English must present a score of at least 550 (paper version), 213 (computer version) or 80 (Internet version) on the Test of English as a Foreign Language or be a graduate of a college or university in the United States.
4. Completed application to doctoral program that includes:
 - a. Statement of purpose, including professional goals, objectives, and research area;
 - b. Current Resume; and,
 - c. Three letters of recommendation.
5. An overall evaluation of credentials is the basis used for admission to the program.
6. International applicants needing confirmation of teaching assistantship eligibility must provide passing scores on either the Test of Spoken English (TSE) administered by the Educational Testing Service (minimum score of 50) or the Internet Based TOEFL (iBT) Speaking Section (minimum score 26).

Master's Degree Requirement

A master's degree is required in retail/merchandising, hospitality, tourism, or a closely aligned field. Master's degrees in other fields will be individually reviewed.

Residency Requirement

Every candidate for the doctoral degree must complete the appropriate residence requirement at UNT as prescribed by the individual departments and colleges. CMHT requires a minimum residence requirement of two (2) consecutive long terms/semesters at UNT of nine (9) hours each (fall and spring); or, six (6) hours for three (3) consecutive terms that consists of any sequential combination of fall, spring, and summer semesters.

Transfer Credit

1. Depending upon the student's previous preparation, transfer of aligned credit for advanced study beyond the master's degree completed in another doctoral program at UNT or at another university may be accepted and credited toward the doctorate provided the candidate's advisory committee recommends acceptance of transfer credit to the graduate school. No more than 15 credit hours of transfer credit will be accepted.

2. To be applied to the UNT doctoral program, courses completed elsewhere must have been taken at an institution that offers the master's or doctoral degree in the area or closely aligned area in which the courses were taken.
3. In accordance with the rules of the Texas Higher Education Coordinating Board, at least one-third of the semester hours required for any graduate degree must be completed in course work in the program at UNT.

Full – Time and Part – Time Students

The program will admit both full-time and part-time students. The number of part-time students will not comprise more than 25 percent of the total number of new and continuing students combined.

National Prominence: Evolution of Consumer Experience Management at UNT

Peer and aspirational institutions with merchandising and/or hospitality management programs have long associated the consumer experience paradigm with the College of Merchandising, Hospitality and Tourism at UNT. The following timeline illustrates the evolution of academic programming and research initiatives within the College of Merchandising, Hospitality and Tourism. See Table 30.

Table 30. Evolution of Consumer Experience Management Concept in CMHT	
Timeline	Consumer Experience Initiative
2004 to present	Launched annual Consumer Experience Symposium. It brings a panel of industry experts to present, discuss, and debate a specific topic related to the consumer experience with students and industry executives. The symposium is intended to communicate objective thoughts and ideas related to the consumer experience. This initiative is now housed in the Global Retailing Research Center in CMHT.
2006 - Present	Required <i>CMHT 3950 Creating Consumer Experiences</i> as part of the College Core for all five undergraduate degrees.
2007	Published first textbook addressing the consumer experience paradigm "Experiential Retailing: Concepts and Strategies that Sell" (Fairchild); co-authored by three CMHT faculty.
2008	International Textile and Apparel Association selected lead conceptual author of "Experiential Retailing: Concepts in Strategies that Sell" as the Distinguished Prentice Hall Lecture Award recipient. Her keynote address at the annual conference was titled, "The Global Consumer Experience Paradigm: A Pedagogical Frontier for Fashion."
2012	Launched UNT Interdisciplinary Research Cluster "Consumer Experiences in Digital Environments" (CEDE). Using a competitive submission process, CEDE was one of three selected in 2012 and was in the last group of UNT Research Clusters. The CEDE Research Cluster was approved for five new tenure lines to support consumer experience research: three lines in CMHT, one in Economics for a behavioral economist, and one line in applied anthropology. In 2016, UNT Research Clusters were disbanded to channel resources into three newly organized UNT Research Institutes. University budget cuts eliminated the two in-progress searches and the remaining three budgeted lines.
2013	Launched the first in the nation UNT Global Digital Retailing Research Center in March with a focus on consumer experiences in digital environments.
2015	Launched Concentration in Consumer Behavior and Experience Management in the Interdisciplinary PhD in Information Science. Four PhD students are enrolled in the concentration.
2016	Launched a Consumer Experience Minor.
2017	Offered Consumer Experience Management focus area and/or Graduate Certificate in M.S. in Advanced Data Analytics at New College Frisco.

Table 30. Evolution of Consumer Experience Management Concept in CMHT	
Timeline	Consumer Experience Initiative
2018	Launched the first in the nation B.S. in Consumer Experience Management at New College Frisco and UNT campus.
2018	Submitting THECB Proposal for PhD in Consumer Experience Management.

The PhD in CEXM will gain national prominence through graduates employed in industry and academia. Graduates will have skillsets in technology and data analytics, but it is the consumer insights to translate data into innovative actionable business strategies that will differentiate this program. Academic programs in retail merchandising, hospitality and tourism must transform traditional curriculum models to equip undergraduate and master's graduates for the new reality. Graduates of the PhD in CEXM will be uniquely qualified with research skills, publications, and insights to teach and research within this new paradigm.

National Prominence: Evidence of Innovative Programming

The College of Merchandising, Hospitality and Tourism has gained national prominence through the successes of its faculty, its graduates of the BS and MS degrees, and its reputation for pioneering innovative academic programs. See Table 31.

Table 31. Evidence of National Prominence in Innovative Programming in CMHT	
1999	First in nation to offer a 100 percent online M.S. in Merchandising.
2000	First in the nation experiential retail laboratory, Campus Catalog (C2), was a collaborative effort with J.C. Penney. Students managed operations including sales, financial responsibility, customer service, order processing, and interfacing with corporate headquarters in Dallas, fulfillment center in Kansas, and accounting office in Utah. The operations were integrated into the merchandising curriculum; students conducted data analysis, created and evaluated effectiveness of promotional strategies. President of J.C. Penney Catalog and UNT President cut the ribbon for the Grand Opening Celebration at UNT.
2000	Recipient of American Textile Manufacturers Institute Award for Excellence citing innovative programs. Award presented at the 2000 Annual Conference of the International Textiles and Apparel Association.
2002	First in nation to offer a B.S. in Digital Retailing.
2010	First in nation to offer the M.S. in International Sustainable Tourism (MIST) that requires an international year abroad. MIST is a partnership with the Tropical Agricultural Research and Higher Education Center (CATIE) in Turrialba, Costa Rica. Students spend Year 1 at UNT and Year 2 at CATIE in Costa Rica.
2013	First in nation to open a center focused on digital retailing and consumer experience. The Global Digital Retailing Research Center will launch Phase Two in Fall 2018 with its roll-out of research initiatives.
2014 2015 2016 2017	Student recipients of National Retail Federation Student Challenge Awards with teams placing 1 st or finalist. This consistent national success brought national attention to UNT and its programs in Digital Retailing and Merchandising.
2015	Top ranked faculty in retail scholarship. Dr. Kiseol Yang, Associate Professor in the Department of Merchandising and Digital Retailing identified as a leading scholar in retailing research. She ranked 10 th of 20 authors by quality and impact rating based on four top retailing journals: <i>Journal of Retailing</i> , <i>Journal of Retailing and Consumer Services</i> , <i>International Journal of Retail & Distribution Management</i> , and <i>International Review of Retail, Distribution and Consumer Research</i> from 2009-2015. ¹
2018	First in nation to offer a B.S. in Consumer Experience Management.

¹Ketron, S., Runyan, R., & Ferris, II, M.T. (2016). Prominent retailing authors and institutions: 2009-2015. *International Journal of Retail & Distribution Management*, 45(2), 177-194.

C. Program Degree Requirements

Required Number of Hours

The doctoral degree requires a minimum of 45 hours with an approved master's degree, including 12 hours of dissertation. No more than 6 hours of special problems (6900) may be counted toward the degree. See THECB Table 32.

THECB Table 32. Program Degree Requirements ¹		
Category	SCH Entering with Bachelor's	SCH Entering with Master's
Required Courses	n/a	21 – 27 ¹
Specialization Courses	n/a	9
Electives	n/a	3
Dissertation	n/a	12
Total¹		45 - 51

¹ Up to 6 additional hours may be required in research design (3 SCH) and/or applied statistics (3 SCH) if this content was not included in the master's degree.

Required Core (15 to 21 SCH) ¹

The required core (15 hours) includes: CMHT 5440 Consumer Theory (3 hours); CMHT 5800 Seminar in Various Areas of Concentration (3 hours) (may be repeated for credit as topics vary); CMHT 6500 Big Data Implementation in Social Network Analysis (3 hours); CMHT 6600 Network Analysis and Visualization (NAV): Big Data Approach to Digital Retailing (3 hours); CMHT 6900 Special Problems in Merchandising/Hospitality (3 hours); and dissertation (12 hours).

Prescribed Elective(s) (9 SCH)

The prescribed electives include two required courses: CMHT 5600 Managing Customer Experiences (3) and CMHT 5700 Service Excellence. Select one course (3 hours) from the following: HMGD 5585 Smart Destinations (3 hours); MDSE 5750 Digital Retailing (3 hours), MDSE 5710 Digital Optimization (3 hours), or MDSE 5770 Digital Channel Strategies (3 hours).

Elective (3 SCH)

Requires approval of advisory committee.

Comparison of Proposed PhD in CEXM with Similar Programs in Texas

Three PhD programs were identified that offer a PhD in an aligned field, all in public universities. Two degrees were in hospitality administration and management, one was in recreation, parks and tourism sciences. None of the degree program focused on consumers or customers and none referenced preparing industry professionals in their mission statements. See Table 33.

¹ Texas Education Code 61.059 (I) limits funding for doctoral students to 99 SCH. Programs may be allowed to require additional SCH, if there is a compelling academic reason.

THECB Table 33. Semester Credit Hour Requirements of Similar Programs in Texas ¹					
Texas Universities with Aligned PhD Programs	CIP Code	PhD Title	Program Focus	Required SCH	
				Without Master's	With Master's
Texas A&M University	52.0903	Recreation, Parks and Tourism Sciences	To prepare experts in professional field knowledge and research.	96	64
Texas Tech University	52.0901	Hospitality Administration	To prepare university faculty who will lead, teach, and conduct research.	72	66
University of Houston	52.0904	Hospitality Administration	To prepare university faculty to teach, research, and for grantsmanship.	n/a	57
Comparison to UNT PhD in Consumer Experience Management					
University of North Texas	52.0207	Consumer Experience Management	To prepare professionals for university research, teaching and service and for corporate leadership.	M.S. Required. ²	45

¹ Retrieved: Dec. 6, 2017: <http://www.thecb.state.tx.us/apps/ProgramInventory/InvSearch.cfm>) ² Merchandising/ Retail, Hospitality or Tourism master's required; other fields will be individually reviewed. May require up to 18 SCH in a required field.

Texas A & M University offers the PhD in Recreation, Park and Tourism Sciences. It is designed to give the candidate a thorough and comprehensive knowledge of his or her professional field and training in research methods. The final basis for granting the degrees is the candidate's grasp of the subject matter of a broad field of study and a demonstrated ability to do independent research. Web Link: <http://catalog.tamu.edu/graduate/colleges-schools-interdisciplinary/agriculture-life-sciences/recreation-park-tourism-sciences/phd/>

Texas Tech University offers the PhD in Hospitality Administration. The degree is designed to produce high-quality university faculty who lead, teach, and conduct research at hospitality administration programs around the world. Web Link: <http://depts.ttu.edu/hs/hrm/doctoral/index.pjp>

University of Houston offers the PhD in Hospitality Management. The degree is designed for students seeking to gain a position as a tenure-track professor at a research-oriented university. Specifically, this degree program provides students with the theoretical foundation, practical knowledge, research development, grantsmanship and critical-thinking skills for careers in academia and hospitality administration. Web Link: www.hrm.uh.edu

Describe Similarities and Differences between Proposed and Peers in Texas and U.S.

A search for PhD programs in Texas and the U.S. for Consumer Experience Management or any CIP that included consumers or customers found no comparable programs.

D. Curriculum

Educational Objectives

The overarching educational objective of the PhD in Consumer Experience Management (CEXM) is to prepare professionals for university research, teaching, service and for corporate leadership. A primary objective is to understand how individuals reason and behave in their end-to-end journeys through digital and omnichannel experiences with consumer services and goods. To meet this objective, all students working toward a PhD in CEXM will pursue excellence in conducting research and disseminating knowledge.

The primary focus of the PhD in CEXM is on research that (1) advances interdisciplinary knowledge of the consumer experience in retail-merchandising, hospitality and tourism using (2) competencies in technology, innovation and data analytics that (3) clarify consumer expectations, engagements, and behaviors that are (4) exhibited across delivery channels, devices, technologies, and virtual and physical spaces. See THECB Tables 34, 35, and 36 for course prefixes and titles for required core, prescribed electives and elective course.

THECB Table 34. Required/Core Courses ¹		
Prefix & Number	Course Title	SCH
CMHT 5440	Consumer Theory	3
CMHT 5800	Seminar in Various Areas of Concentration <u>OR</u> Select a 6000-level seminars in an aligned field. ²	3
CMHT 6500	Big Data Implementation in Social Network Analysis	3
CMHT 6600	Network Analysis & Visualization (NAV): Big Data Approach to Digital Retailing	3
CMHT 6900	Special Problems in Merchandising/Hospitality	3
CMHT 6950	Dissertation	12
Research Design and Statistics		
Select six hours among the following representative 6000-level courses or equivalent courses. Requires advisory committee approval.		6 – 12 ³
MKTG 6080	Qualitative Research Methods	3
BUSI 6240	Applied Multivariate Statistics	3
BUSI 6280	Applications in Causal and Covariance Structure Modeling	3
BUSI 6480	Advanced Issues in Research Design	3
PSYC 6810	Multivariate Procedures in Psychology	3
Total Required Courses		33 – 39²

¹ All the courses listed in the table are in the course inventory at UNT. ² Representative 6000 Seminars: BCIS 6650 – Seminar in General Systems Theory; INFO 6700 – Seminar in Communication and Use of Information; MKTG 6020 – Seminar in Advanced Consumer Behavior; MKTG 6030 – Seminar in Marketing Strategy; MKTG 6600 – Seminar in Marketing Issues; MNGT 6030 – Seminar in Strategic Management; SOCI 6100 – Seminar on Sociological Theory; SOCI 6400 – Seminar on the Metropolitan Community. ³Number of hours will vary based on completion of a research methods (3 SCH) and an applied statistics course (3 SCH) in the master degrees. Students who do not meet these requirements will take CMHT 5300 Research Methods in Merchandising and Hospitality Management and CMHT 5400 Research Applications in Merchandising and Hospitality Management.

THECB Table 35. Specialization Courses		
CMHT 5600	Managing Customer Experiences	3
CMHT 5700	Service Excellence	3
Select one course from the following three courses.		
HMGMT 5585	Smart Destinations	3
MDSE 5710	Digital Optimization	
MDSE 5750	Digital Retailing	
Total Specialization Courses		9

THECB Table 36. Elective Course		
Various	Course requires committee approval.	3
Total Required Hours		45 – 51¹

¹ Number of hours will vary based on completion of a research methods (3 SCH) and an applied statistics course (3 SCH) in the master's degree. Students who do not meet these requirements will take CMHT 5300 Research Methods in Merchandising and Hospitality Management and CMHT 5400 Research Applications in Merchandising and Hospitality Management.

Alternative Learning Strategies – Field Experience, Teaching Practicum, Graduate Student Teaching Excellence Program

Students will select a 3 SCH elective which may be used, with approval of the student's advisory committee, to engage in alternate learning strategies. These alternative courses include a field experience and a teaching practicum.

Field Experience. *CMHT 5790 Field Experience in Various Areas of Concentration* offers an alternative learning strategy for industry experience where doctoral students could apply their research skills and knowledge. The Dallas – Fort Worth metropolitan area is home to a significant number of national and global consumer services and products companies. CMHT has developed excellent relationships with many of these companies and believes it will be possible to find excellent industry field experiences during the summer and long semesters. For example, Usability Sciences is a research company in Richardson, TX that is interested in working with UNT in this capacity. Usability Sciences was a founding member of the Global Digital Retailing Research Center and has a deep interest in continuing its involvement with CMHT students. It is also possible for students to relocate in the summer to complete field experiences with a global company outside of Texas. This might be particularly attractive to students who seek careers in technology and digital services companies such as Walmart.com, Amazon, Google, and Apple. The five industry support letters for the PhD in CEXM previously discussed provide evidence for the need of highly trained CEXM professionals and need for research that brings understanding to the consumer-centric marketplace.

Teaching Practicum. *CMHT 5810 Teaching Practicum in Merchandising and Hospitality Management* offers a second alternative learning strategy for doctoral students who are interested in careers as faculty and would like develop knowledge and skills of how to prepare and facilitation of student learning in the physical and virtual classroom. It also provides students with important insights of likely challenges in teaching. This course offers the student an opportunity to develop content and deliver it to an organized undergraduate class. Faculty who have extensive teaching experience and a background in teaching practices will provide one-on-one instruction and supervision of the student enrolled in this course.

Graduate Student Teaching Excellence Program (GSTEP) Certification (No Credit). Graduate students may enter the GSTEP program at no cost and progress through the levels over two semesters. GSTEP offers opportunities to learn about teaching skills and pedagogy in an environment of peer support. Activities include classroom teaching experiences, online training modules, self-directed training with

faculty, self-assessment and peer mentoring. The goal is for GSTEP participants to become confident in their teaching skills and graduate ready to apply their knowledge in real-world work environments. Students that successfully complete the program receive a certificate.

E. Candidacy/Dissertation

Admission to Candidacy

Admission to candidacy is granted by the dean of the Toulouse Graduate School after satisfactory completion of the written and oral qualifying examinations.

Approval of Dissertation Research Proposal

Upon admission to candidacy and with consent of the student's dissertation advisory committee, the student is required to make a formal presentation of the dissertation proposal at an open forum consisting of the dissertation advisory committee, graduate faculty of the College of Merchandising, Hospitality and Tourism, and CMHT doctoral students. Following approval of the dissertation research proposal the student may begin registering for dissertation hours.

Dissertation

A dissertation is required of all candidates for the doctorate. No more than 9–12 semester hours of dissertation credit are applied to the degree program, even though more dissertation hours may be accumulated. The student is required to enroll for dissertation credit in the major department under the course number 6950 and must maintain continuous enrollment in a minimum of 3 semester hours of 6950 during each fall and spring term/semester until the dissertation has been accepted by the graduate school. Maximum enrollment in 6950 is 9 hours in a fall or spring term/semester. Dissertation registration in at least one summer session/term is required if the student is using university facilities and/or faculty time during that summer session/term or to graduate in August.

Requirement for Continuous Enrollment in CMHT 6950 Dissertation

Doctoral students must maintain continuous enrollment subsequent to passing the qualifying examination for admission to candidacy. Grades of PR will be recorded at the end of each term/semester of enrollment with satisfactory progress until the dissertation is filed with and approved by the Toulouse Graduate School.

Failure to maintain continuous enrollment through the semester in which the defended dissertation is filed with the graduate school will either invalidate any previous dissertation credit or will result in the student's being dismissed from the degree program, unless granted an official leave of absence by the graduate school in advance. Strict adherence to the on-time filing deadlines for graduation is required or additional registration in 6950 may be necessary. Two options are available.

Option 1 – Doctoral Dissertation (Standard)

Option 2 – Series of three or more refereed publications (Requires Major Professor/Dissertation Committee approval).

Dissertation Defense

As a final requirement, each doctoral candidate submits a dissertation that requires original and independent research that is aligned with some aspect of consumer experience management. The dissertation should reflect independent mastery in research techniques and tools, problem identification, and research design that facilitate construction of hypotheses leading to sound conclusions and reasonable implications. The final comprehensive evaluation is completed through an oral defense of the dissertation research which is made to the dissertation advisory committee and is open to graduate faculty and doctoral students in the college. Upon a successful defense, the approved dissertation is submitted to the Toulouse Graduate School.

Time Limitation

All work to be credited toward the doctoral degree beyond the master's degree must be completed within a period of 8 years from the date doctoral credit is first earned. No course credit beyond the master's degree that is more than 10 years old at the time the doctoral program is completed will be counted toward the doctorate. Time limits are strictly enforced. Students exceeding the time limit may be required to repeat the comprehensive exam, replace out-of-date credits with up-to-date work, and/or show other evidence of being up-to-date in their major and minor fields. Students anticipating that they will exceed the time limit should apply for an extension of time before their seventh year of study. Holding a full-time job is not considered in and of itself sufficient grounds to grant a time extension. For information on extensions go to: <http://catalog.unt.edu/content.php?catoid=18&navoid=1893>

F. Delivery Modes, Use of Distance Technologies, and Delivery of Instruction

Resident and Distance Technologies Courses

The proposed PhD in CEXM will be delivered primarily on campus. Students are required to enroll in a minimum of 33 SCH in resident courses and may take up to 12 SCH in courses using distance technologies. This allows students to take both distance and organized courses to gain greater time flexibility. Several of the distance (online) courses are offered in the summer (in addition to long semesters) which may expedite progress through the doctoral program. See Table 37.

Table 37. Courses Taught as Resident and/Or Using Distance Technologies			
Prefix and Number	Required Core Courses	Resident SCH	Distance SCH
CMHT 5440	Consumer Theory		3
CMHT 5800	Seminar in Various Areas of Concentration	3	
CMHT 6500	Big Data Implementation in Social Network Analysis	3	
CMHT 6600	Network Analysis and Visualization (NAV): Big Data Approach to Digital Retailing	3	
CMHT 6900	Special Problems in Merchandising/Hospitality	3	
CMHT 6950	Dissertation	12	
To Select	Research Design and Statistics ¹	6 - 12	
Total SCH		30 – 36	3

Table 37. Courses Taught as Resident and/Or Using Distance Technologies			
Prefix and Number	Required Core Courses	Resident SCH	Distance SCH
Specialization Courses			
CMHT 5600	Managing Customer Experiences		3
CMHT 5700	Service Excellence		3
To Select	Plus one course to be selected from: HMG 5585, MDSE 5750, or MDSE 5710		3
Elective Course			
Varied	Elective course approved by advisory committee	3	
TOTAL SCH		33 – 39	12

¹ Note: Number of hours vary based on courses in research methods (3 SCH) and statistics (3 SCH) in master’s degree. Students who do not meet these requirements will take CMHT 5300 Research Methods and CMHT 5400 Research Applications.

Online Courses Included in Planning Proposal

The PhD in CEXM proposal includes one required, two prescribed, and one course to be selected from three online courses for a total of six possible choices of online courses with a maximum of 12 SCH. For doctoral students, the online course will include instructor-created content, graphics, curated resources including scholarly readings and video clips, and required on-campus seminars. All educational resources that are available to UNT students can be accessed online, with the possible exception of some older video resources. Canvas is UNT’s online-course delivery platform. No special equipment or software will be required in these courses.

In preparation for approval of the PhD, CMHT will submit in September 2018 a request to the UNT Graduate Council for each of the six 5000-level online courses (included in the proposal) to be dual-numbered as a 6000-level with an effective date of fall 2019. Faculty-to-student and student-to-student interactions will be sustained through participatory interactions facilitated by online discussions, peer reviews, faculty feedback on assignments, and required 15 contact hours in face-to-face seminars on the UNT campus. Dates, times, and location of seminars will be included for each course in the registration process. The instructor of record will direct all seminars and assignments appropriate for a 6000 level course. Estimates of student-to-faculty ratio for the 6000-level courses is 6 to 1.

A unique aspect of the PhD in Consumer Experience Management is its underlying context of building fluency in digital, virtual and physical spaces. This uniqueness underlies the relevancy of including selected online courses when the content immerses students in real-world experiences as active participants in the creation, consumption, and evaluation of on-line experiences, tools, products, and information dissemination – all important aspects of understanding the “consumer experience” in goods and services industries.

G. Program Evaluation

Review Cycle

The PhD in Consumer Experience Management program will be evaluated on a 10-year review cycle according to THECB [Board Rule 5.52](#). It will follow the guidelines established by the University of North Texas Office of the Provost. The academic review process includes a program overview, self-study, and external review to measure quality of the faculty, students, library and other educational resources, curriculum, available facilities, and reputation of the program among its peers.

Program Overview

The program review is a comprehensive assessment of the program’s undergraduate and graduate degree offerings according to its stated mission, goals, and objectives to support research and education at UNT and within the discipline relative to peer and aspirational institutions. The program review will provide evidence of need and demand for the degree, opportunities for interdisciplinary activities, and involvement in the Global Digital Retailing Research Center (GDRRC), the Applied Imaging Technology Lab, and the Artificial Intelligence in Retail Lab.

Self-Study

The PhD in Consumer Experience Management program will conduct a Self-Study regarding the 18 Characteristics of Texas Public Doctoral Programs. The self-study will assess the curriculum design and requirements for all degrees and concentrations to ensure correlation with educational goals and objectives and assessment of learning outcomes. The self-study will reassess mission, goals, and objectives and modify if necessary. See Table 38.

Table 38. Eighteen Characteristics of Texas Public Doctoral Programs ¹		
No.	Measure	Operational Definition
1.	Number of Degrees Annually	For each of the three most recent years, average of number of degrees awarded per academic year.
2.	Graduation Rates	For each of the three most recent years, average of the percent of first-year doctoral students ² who graduated within ten years.
3.	Average Time to Degree	For each of the three most recent years, average of the graduates’ time to degree ³ .
4.	Employment Profile (in field within one year of graduation)	For each of the three most recent years, the number and percent of graduates by year employed, those still seeking employment, and unknown.
5.	Admissions Criteria	Description of admission factors.
6.	Percentage of Full-time Students	FTS ⁴ /number of students enrolled (headcount) for the last three fall semesters.
7.	Average Institutional Financial Support Provided	For those receiving financial support, the average monetary institutional support provided per full-time graduate student for the prior year from assistantships, scholarships, stipends, grants, and fellowships (does not include tuition benefits).
8.	Percentage Full-time Students with Institutional Financial Support	In the prior year, the number of FTS with at least \$1,000 of annual support/the number of FTS.
9.	Number of Core Faculty ⁵	Number of core faculty in the prior year.
10.	Student-Core Faculty Ratio	For each of the three most recent years, average of full-time student equivalent (FTSE)/average of full-time faculty equivalent (FTFE) of core faculty.
11.	Core Faculty Publication	For each of the three most recent years, average of the number of discipline-related referred papers/publications, books/book chapters, juried creative/performance accomplishments and notices of discoveries filed/patents issued per core faculty member.
12.	Core Faculty External Grants	For each of the three most recent years, average of the number of core faculty receiving external funds, average external funds per faculty, and total external funds per program per academic year ⁶ six.

Table 38. Eighteen Characteristics of Texas Public Doctoral Programs ¹		
No.	Measure	Operational Definition
13.	Faculty Teaching Load	Total number of semester credit hours in organized teaching courses taught per academic year by core faculty divided by the number of core faculty.
14.	Faculty Diversity	Core faculty by ethnicity (White, Black, Hispanic, (Other) and gender, updated when changed.
15.	Student Diversity	Enrollment headcount by ethnicity (White, Black, Hispanic, Other) and gender in program during the prior year.
16.	Date of Last External Review	Date of last formal external review, updated when changed.
17.	External Program Accreditation	Name of body and date of last program accreditation review, if applicable, updated when changed.
18.	Student Publications/Presentations	For the three most recent years, the number of discipline-related refereed papers/publications, juried creative/performance accomplishments, book chapters, books, and external presentations per year by student FTE.

¹ Programs included only if in existence three or more years. Program is defined at the 8-digit CIP code level.

² First-year doctoral students: Those students who have matriculated as doctoral students with a doctoral degree objective. ³ For each academic year, the time to degree is defined as beginning the year. ⁴ Definition of Full-time Student (FTS) is institutional by program. ⁵ Core Faculty: Full-time tenured and tenure-track faculty who teach 50 percent or more in the doctoral program or other individuals integral to the doctoral program who can direct dissertation research. ⁶ All external funds received by core faculty from any source including research grants, training grants, gifts from foundations, etc. reported as expenditures.

External Review

External reviewers will assess the curriculum relative to the program’s stated mission and needs of the profession and industry; faculty size, quality, and distribution by area expertise in accordance with the program’s mission and research areas, distribution of course load, and student advising, and mentoring; balance between coursework and research involvement; allocation of faculty resources; and inclusion of courses, seminars, and research engagement. Other areas evaluated will be allocation of resources between undergraduate and graduate programs, timeliness of course offerings and student engagement in research engagement, commitment to diverse faculty and student populations, and research strength relative to peer and aspirational institutions.

H. Strategic Plan and Marketable Skills

Proposed PhD in Consumer Experience Management Alignment with Strategic Plans

The University of North Texas currently operates with a strategic plan that advocates for innovative, technology – driven doctoral programs such as the PhD in Consumer Experience Management. In addition to the overall strategic plan, UNT created a strategic plan for research. Both plans support workforce development at a high level of expertise in data analytics, technology applications, and innovation as well as research that advances knowledge and its application. A discussion and links to the two plans and discussions of how the PhD in Consumer Experience Management fits into UNT’s overall strategic plan follow. A discussion of the College of Merchandising, Hospitality and Tourism’s work in establishing two research labs and a university center for collaboration supporting research and workforce initiatives also follows.

UNT's Strategic Plan as Part of the UNT System Strategic Plan – 2017

UNT's Strategic Plan includes six areas designed to: (1) grow enrollment and graduation; (2) grow research; (3) grow foundation assets; (4) grow top rated programs; (5) become a best place to work; and (6) achieve efficient and effective system. While all six goals impact doctoral education, the following discussion addresses goals one, two, three and four are most directly related.

Web link: <https://www.untsystem.edu/about-us/strategic-planning/unt-strategic-plan>

Goal 1: Grow Enrollment and Degrees Awarded Includes Doctoral Enrollments and Graduations.

The PhD in CEXM will add doctoral students who will be able to complete their degree within three years (FT) or five years (PT) thus moving them to graduation on a fast track. The PhD in CEXM is aligned with UNT strategies to expand international recruiting efforts and articulation, mainly in China and India. Retention and graduation under this goal, especially for doctoral students, includes efforts to improve financial aid delivery and to remove graduation barriers.

Goal 2: Grow Research and Expanded Doctoral Funding. Doctoral education is critical to supporting UNT's research initiatives. The PhD in CEXM will focus on applied research which addresses real-world problems of consumers and the consumer and services industries. The link to industry offers promise in securing funded projects under the direction of faculty where doctoral students complete aligned research projects for their dissertation research.

Goal 3: Grow UNT Foundation Assets. UNT Foundation assets include increased numbers of endowed chairs and professorships. Faculty holding an endowed chair or professorship draw talented doctoral students who seek to learn and research with top scholars. Endowed scholarship funds, especially for graduate scholarships are available within CMHT. Scholarships reduce the total cost of education and can make the difference in even pursuing a graduate degree. Also, scholarships may waive out-of-state tuition and they acknowledge the quality of a student who received scholarship support. The strong linkage of this program to industry opens a new door to seek investments in supporting graduate education in CMHT and will be actively pursued to provide student support.

Goal 4: Grow Top Rated Programs and Corporate Partnerships. As an emerging field undergoing rapid and radical change, the PhD in Consumer Experience Management needs access to industry partners for collaboration in cutting-edge research and learning. Another aspect of this goal is to engage in nimble curricula and course development that can keep pace with market changes. This strategy is essential to an emerging field that includes technology applications and big data analytics.

UNT's Strategic Plan for Research: 2017 – 2022

As a major public research university, the state of Texas designated UNT as an Emerging Research University. In 2015 UNT achieved national recognition with its Carnegie Classification "Doctoral Universities: Highest Research Activity" ("Tier One"). UNT's Strategic Plan for Research: 2017 – 2022, details its aspiration to retain "Tier One" status and its strategies to do so. "UNT aspires to significantly enhance its research enterprise. This is important because it contributes to preparation of the future technical workforce of the region and nation, drives economic prosperity and development, and enriches scientific and engineering knowledge, practice, and innovation." The strategic plan has six parts. Web link: <https://research.unt.edu/about-us/unt%E2%80%99s-strategic-plan-research>

Part 1. Mission and Vision

Research Mission. *UNT's research enterprise prepares students to join the next generation of the technical workforce through both education and research experiences, enriches faculty members' contributions through scholarly and innovative expression, and supports sponsoring entities' need for scientific and technological innovation.*

Research Vision. *UNT's research enterprise will be significantly enhanced, and as a result UNT will maintain its status as a Carnegie Institution Tier One Research University and reach state of Texas recognition as a National Research University.*

Part 2: Plan for Research Funding and Productivity. The Research Plan identified three action items to increase: (1) amount of research expenditure per faculty member, (2) number of research-active faculty members, and (3) efficiency of research space utilization, space quality, and total research space available. These actions are to drive four outcomes. Outcome four is specific to doctoral education by increasing the number of science and engineering graduate students and maintaining and growing the number of graduate degrees awarded annually (especially the number of doctoral degrees annually).

Part 3: Plan to Improve Undergraduate Education. Research, scholarly and creative activities by faculty is an opportunity for undergraduate students to gain primary research experiences which enrich their college experience and preparation for careers. The three action items are: (1) tailor recruitment and admissions criteria and processes to meet the rigorous goals of success in degrees broadly, and increasingly in STEM fields; (2) improve student progression rate towards degree and graduate rate; and (3) improve instructional quality and curriculum. The outcomes are to increase enrollment, improve student preparedness for success, improve education and research experience, and greater success of students as graduates, members of the workforce, and citizens.

Part 4. Plan for Doctoral Programs. The strategic plan for research offers a dedicated strategy to strengthen doctoral programs at UNT. It includes three action items: (1) improve recruitment, admissions standards, and processes for graduate programs; (2) expand support for graduate assistantships, and (3) improve graduate rates and the quality of graduate education and research experience. *The outcomes include increased numbers and preparedness of graduate students, more timely graduation, greater success of research experience and contribution to research activities, and greater success entering the technical, academic, industrial, and government laboratory workforce.*

CMHT Support of UNT's Research Strategic Plan

CMHT is contributing to UNT's Research Strategic Plan in two focused areas. First is the addition of two applied technology research labs under the direction of Dr. Bugao Xu. These labs provide research output related to consumer services and products, particularly in raw material – cotton fiber assessments, soft good textile products, apparel sizing, and the application of artificial intelligence to retail. Second is the Global Digital Retailing Research Center which includes a research component focused on consumer engagement in digital environments. Details on each follow.

CMHT Applied Technology Research Labs. Dr. Bugao Xu in the College of Merchandising, Hospitality and Tourism has become an important contributor in applied research at UNT. Dr. Xu joined the UNT faculty on August 1, 2016 as Professor and Chair of the Department of Merchandising and Digital Retailing. His impressive record of extraordinary research productivity in publications, external grant awards (\$5.2 million), and intellectual property claims positioned him as a UNT Impact Hire. His immediate impact was bringing two grants valued at \$505,198 and an established research lab. Dr. Xu has created a research

environment built on highly effective, collaborative, innovative and productive interdisciplinary research teams. He engages students at the bachelor’s, master, doctorate, and post-doctorate levels. Currently Dr. Xu supervises two undergraduate research fellows, two MS students, four PhD students, and four visiting research scholars/post docs in his research labs. The labs are located in UNT’s hub for research activity – the newly renovated Research Science Building. His research projects are assigned to two labs.

Applied Imaging Technology Lab. The Applied Imaging Technology Research Lab focuses fiber property measurements (funded by Cotton Inc.), plastic contamination detection (funded by USDA), and automated fabric defect inspection (funded by Walmart Foundation). His external collaboration occurs in the cotton industry with USDA research labs, Texas Tech University, and Cotton Inc. A fourth imaging project in this lab is body scanning and virtual clothing technology for apparel fit analysis and design of custom products. It is supported by an unrestricted gift from Allcustom. Also, Dr. Xu is working on a collaborative research project with GNS (a U.S. national health and supplements retailer) on body shape and health.

Artificial Intelligence in Retail Lab. The Artificial Intelligence in Retail Lab is an emerging research area engaged in big-data analytics and machine learning for sentiment assessment, predictive modeling, and product – customer association. Dr. Xu currently works with three new PhD students on AI in retail. They are completing courses in computer algorithm courses in deep learning and data-mining to support the investigations in this lab.

In the past 18 months at UNT, Dr. Xu’s research teams have produced: (1) 22 SCI journal papers published, (2) two grants from Cotton Inc., and one from USDA-ARS with combined awards of \$133,241; and one technology disclosure. He continues to co-advise PhD students at the University of Minho, Portugal, with Professor Miguel Carvalho. The successes of Dr. Xu’s collaborative research teams in his two RSB labs will be an important asset in attracting doctoral students to the PhD in Consumer Experience Management. CMHT expects these research labs will be particularly attractive to recruiting students with B.S. and M.S. degrees from the sciences (data analytics, computer science engineering, and information science). Dr. Xu’s research in applied imaging technology and AI in retail can contribute significant understanding to how technology impacts the consumer experience.

UNT Global Digital Retailing Research Center

The Global Digital Retailing Research Center received UNT Planning Authority in 2011, proposal approval in 2012, and it launched in March, 2013. In 2016 the Center had its third-year review at which time it was approved for a five-year renewal through 2021. From 2013 – 2017, the Center focused on building center awareness, industry relations and branded programs for students, the public, and industry professionals. See Tables 39 and 40.

Table 39. Global Digital Retailing Research Center Vision, Mission, Purpose	
Vision	Be the global thought leaders in digital retailing and consumer experience research, innovation and knowledge transfer.
Mission	Advance global digital retailing through academic – industry collaborations in research, innovation, knowledge transfer, talent development, and recognition of excellence.
Purpose	Develop interdisciplinary, inter-institutional and industry collaborations that will bring together the best minds, ideas, and creativity to shape the dialogue for objective inquiry regarding the current and future states of digital retailing and its impact on the consumer experience.

Table 40. Global Digital Retailing Research Center Five Strategic Goals		
Goals		Objectives
1.	Global Discovery	Create global academic – industry collaborations for research, discovery and innovation.
2.	Objective Thought	Generate global and consumer perspectives of the current and future states of digital retailing through knowledge transfer and the dissemination of information.
3.	Talent Development	Develop digital retailing talent (both student and executive) through discovery, innovation and knowledge transfer.
4.	Excellence Awards	Recognize excellence in digital retailing research through competitive named awards of distinction, and acknowledging outstanding contributions to the development and growth of the industry.
5.	Financial Performance Rigor	Generate optimal revenue to enable planned expenditures for research initiatives, talent development, personnel, and operating expenses. The 5 th Goal was added after the 3 rd Year Review.

Senior Director – Global Digital Retailing Research Center

The first GDRRC Senior Director, Mr. Richard Last, was founder of JCPenney.com and a past two-term Chairman of Shop.org. He contributed to the proposal development, launch, and Third Year Review. He was instrumental in bringing in seven founding members including four national retailers: JC Penney, Pier 1 Imports, Sally Beauty, and Zale Corporation, and three innovative service providers: Rocket Red, Usability Sciences Corporation, and LiquidPixels. He retired from UNT in 2016.

In fall 2016 Ms. Linda Mihalick became Senior Director. She brought over 20 years of retail experience including digital retail startups and national and global digital retailing businesses; her most recent position was VP Ecommerce for Army Air Force Exchange – a global retail organization. Ms. Mihalick is a key asset in developing strong industry connections for the Center. The Senior Director has oversight for outreach to industry, advancement of collaborative university – industry partnerships, creation and delivery of student and industry workforce development in digital retailing, and leadership for the Consumer Experience Symposium and the Executive + Scholar Lecture Series. Ms. Mihalick holds a .50 appointment as Senior Director. She is responsible for meeting four goals: Goal 2: Objective Thought, Goal 3: Talent Development, Goal 4: Excellence Awards, and Goal 5: Financial Performance Rigor.

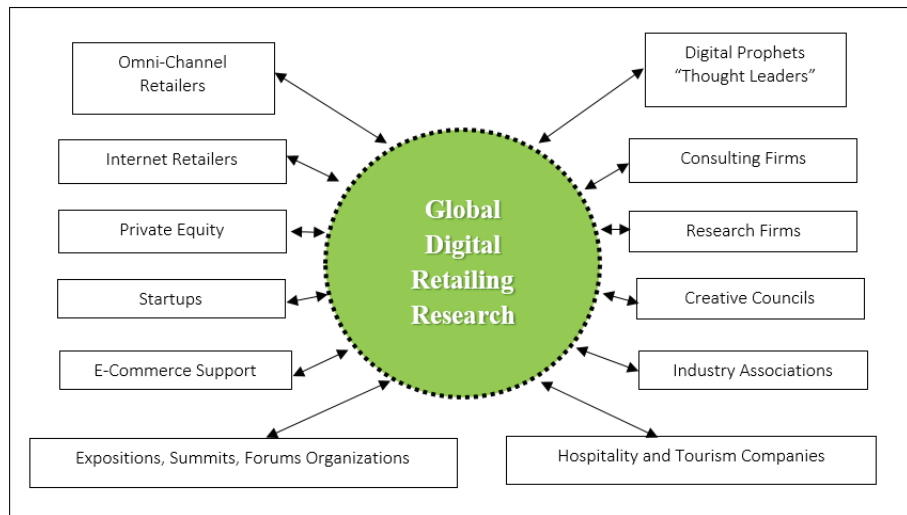
Director of Research – Global Digital Retailing Research Center

In fall 2018, Judith C. Forney, PhD, will assume responsibility as the first Director of Research (DOR) for the Global Digital Retailing Research Center. Dr. Forney is returning to faculty after 20 years as Dean of the College of Merchandising, Hospitality and Tourism. During this time, she has developed a keen understanding of the global disruption that is occurring in consumer services and products industries and driving the consumer-centric model in the marketplace. During her deanship, she wrote the proposals and was instrumental in the launches for the B.S. in Digital Retailing (2002), the Consumer Experience Symposium (2004), the UNT Research Cluster “Consumer Experiences in Digital Environments” (2012), the UNT Global Digital Retailing Research Center (2013), the B.S. in Retailing (2016), the Concentration in Consumer Behavior and Experience Management for the Interdisciplinary PhD in Information Science (2015), the Minor in Consumer Experience Management (2016), the B.S. in Consumer Experience Management (2018), and the proposal for the PhD in Consumer Experience Management. In addition, she co-authored the only university textbook on the consumer experience “*Experiential Retailing: Concepts and Strategies that Sell*” (2007). Dr. Forney brings 20 years of experience working with industry partners on behalf of the college, a strong record of research outcomes, success in grant writing, and a deep understanding of the areas of research needed to understand consumer and industry

perspectives of the current and future states of the consumer experience and the impact of digital technologies on that experience.

The DOR has responsibilities for outreach to consumer services and products industries and advancement of collaborative university – industry partnerships in research. Her primary Center responsibilities will be to support Goal 1: Global Discovery and Goal 2: Objective Thought. The first task for the DOR will be to create a five – year strategic plan targeting companies and pipelines for projects and funding. The plan will build from historical evidence of partnerships with companies on the two CMHT Boards of Governors. BOG members are excellent conduits for making industry introductions. They are excited about the opportunities the PhD in CEXM Presents for research and well as developing an industry talent pool. The DOR will use an outreach model to frame collaborative academic – industry partnerships and engaging multiple perspectives across industries. See Figure 1.

Figure 1. Outreach Model for Academic – Industry Partnerships



Research Objectives – Global Digital Retailing Research Center

The Global Digital Retailing Research Center will begin implementing its research objectives in fall 2018 with the placement of the Center’s first Director of Research. The Center seeks to lead academic – industry research, understanding, learning, and innovation in global digital retailing and its impact on the consumer experience. The Center is unique in the U.S. in its relevance grounded in the disruptive consumer – centric marketplace driven by consumer engagement in digital environments. The Center will serve as an innovation lab for students and their faculty mentors in the PhD in CEXM. The Center’s interdisciplinary focus offers a fertile ground for interdisciplinary research collaboration at UNT and with other U.S. universities and worldwide as well as with global consumer services and products corporations. Seven objectives form the underlying principles for research. See Table 41.

Table 41. Global Digital Retailing Research Center – Research Objectives	
Objective	Description
1.	Create an open – model collaborative inter-institutional and industry research center using objective inquiry about the current and future states of global digital retailing.
2.	Examine digital retailing across integrated digital platforms.
3.	Apply a global perspective to consumer engagement with digital businesses.
4.	Examine public policy and its impact on consumers and digital consumption.
5.	Build the body of knowledge regarding consumer experiences in digital environments.

Table 41. Global Digital Retailing Research Center – Research Objectives	
Objective	Description
6.	Apply interdisciplinary methodologies from the social sciences, arts, and sciences to solve complex problems associated with consumer engagement and experience with digital technology.
7.	Identify new digital retailing business opportunities emerging from consumer expectations that are being reshaped by a large digital ecosystem reforming consumer services and products industries.

The Center offers a research conduit for national and international prominence through eight initiatives. In fall 2018, the Center moved forward on Goal 1: Create global academic – industry collaborations for research, discovery and innovation. This goal will enhance the national and international prominence of UNT and the College of Merchandising, Hospitality and Tourism. See Table 42.

Table 42. Global Digital Retailing Research Center Initiatives to Enhance National and International Prominence		
No.	Initiative	Description
1.	Competitive Research Funded Projects	Interdisciplinary faculty teams at any university in the U.S. (Years 1-3) to expanded to international competition (Year 4). Must include at least one industry partner and at least one student at any level (BS, MS, or PhD).
2.	Competitive Scholars in Residence Program	Post-docs and established scholars in residence at UNT for one or two semesters researching digital and CEXM problems with UNT faculty.
3.	Competitive Graduate Student Research Awards	Open to graduate students enrolled in accredited universities who are completing a thesis or dissertation aligned with digital retailing and impact on CEXM.
3.	Collaborative Industry Workforce Development	Offer customized corporate workshops for talent development in digital retailing and consumer experience management.
5.	Consumer Experience Symposium	Create a joint academia and business event where participants gain knowledge of current and future challenges, best practices and strategies, and insights regarding digital retailing and technologies and the consumer experience from corporate executive leadership. Examples of participants are Neiman Marcus, E Group, Travelocity, PepsiCo, Facebook, and JC Penney.
6.	Executive + Scholar Lecture Series	Annual Event that pairs executives (C-Level/President) from national and international brands with scholars who have aligned research streams. Examples of past participants include Nordstrom; Container Stores; J.C. Penney; TAL Ltd. - Hong Kong and scholars from UNT, University of Santa Clara, and the Sustainable Apparel Coalition.

Marketable Skills Aligned with 60x30TX

Texas is engaged in a global economy dependent upon a skilled, knowledgeable workforce. The 60x30TX Plan is intended to address the current skills and knowledge deficit compared to workforce needs now and into the foreseeable future. The plan measures the percentage of Texans with postsecondary credentials including professional and doctoral degrees, targets residents ages 25-34, a goal of student loan debt not exceeding 60% of first-year wages for students with degrees from Texas institutions. Graduates must have the credentials to meet a workforce demand to remain a strong, competitive, and

prosperous state economy. Marketable skills as defined by the 60x30TX Plan are “those skills valued by employers that can be applied in a variety of work settings, including interpersonal, cognitive, and applied skill areas”. Graduates also must be able to articulate the value of the skills to employers. See Table 43.

Table 43. Marketable Skills Developed in PhD in Consumer Experience Management	
1.	Conduct research to understand how consumers reason and behave in their end-to-end journeys through digital and omni-channel experiences.
2.	Develop competencies in technology, data analytics, and innovation.
3.	Translate technical consumer data into actionable insights.
4.	Plan and execute qualitative and quantitative studies to inform business strategies.
5.	Advance interdisciplinary knowledge of the consumer experience in retail merchandising, hospitality, tourism and aligned fields in consumer services and products.

The overarching educational objective of the PhD in Consumer Experience Management is to prepare professionals for university teaching, research, and service and for corporate leadership. A primary objective is to understand how individuals reason and behave in their end-to-end journeys through digital and omni-channel experiences with consumer services and goods. To meet this objective, all students working toward a PhD in Consumer Experience Management will pursue excellence in conducting research and disseminating knowledge. The primary focus is on research that (1) advances interdisciplinary knowledge of the consumer experience in retail-merchandising, hospitality and tourism using (2) competencies in technology, data analytics and innovation that (3) clarify consumer expectations, engagements, and behaviors as they are (4) exhibited across delivery channels, devices, technologies, and virtual and physical spaces.

Building on UNT’s Existing Recognized Strengths

The PhD in Consumer Experience Management supports key areas of innovation at UNT that are building its strengths in the applications of technology and data analytics in academic programs and research. The CEXM program is recognized as unique and a contributor to the larger innovation taking place on this campus.

Developing and offering doctoral programs is integral to UNT’s strategic research objectives. Continuous examination of market demands and existing programs allows UNT to create programs to address market needs in the region, state and nation. Quickly responding to employment needs and trends allows UNT to access the impact the new PhD in Consumer Experience Management. UNT is one of the largest universities in Texas, a Carnegie Tier One Research University and its location in the Dallas-Fort Worth metropolitan area is home to an abundance of job, a diverse culture are reasons graduate education and research are essential to the future vitality of UNT, the region, and the State of Texas. The PhD in CEXM will be another recognized strength of UNT as it increases its partnerships with corporate America. No Texas universities offers a PhD that has targeted professionals in consumer services and products industries or in consumer experience management.

Related and Supporting Programs

CMHT has five related and supporting programs: B.S. in hospitality management, merchandising, home furnishings merchandising, retailing, digital retailing and consumer experience management and M.S. in hospitality management, international sustainable tourism, and merchandising. See Table 44.

THECB Table 44. Related and Supporting Programs					
	2012	2013	2014	2015	2016
BS in Consumer Experience Management (52.0207) Program Launched Spring 2018					
Applications					
Admissions					
Enrollment					
Graduates					
BS in Digital Retailing (52.0212)					
Applications	No Data	8	12	9	14
Admissions	No Data	8	12	9	14
Enrollment	32	43	67	79	85
Graduates	28	22	31	33	70
BS in Home Furnishings (52.1909)					
Applications	No Data	3	7	8	4
Admissions	No Data	3	7	8	4
Enrollment	54	43	24	32	26
Graduates	12	24	10	8	10
BS in Hospitality Management (52.0901)					
Applications	167	168	149	140	116
Admissions	167	168	149	140	116
Enrollment	748	705	617	578	488
Graduates	197	202	169	161	163
BS in Merchandising (52.1902)					
Applications	No Data	173	149	155	119
Admissions	No Data	173	149	155	119
Enrollment	598	612	585	599	549
Graduates	161	107	137	141	133
BS in Retailing (52.0212) Program Launched in Fall 2016					
Applications					8
Admissions					8
Enrollment					8
Graduates					N/A
MS in Hospitality Management (52.0901)					
Applications					
Admissions					
Enrollment	29	37	38	27	22
Graduates	9	11	13	13	11
MS in International Sustainable Tourism (52.0901)					
Applications					
Admissions					
Enrollment	5	8	6	7	10
Graduates	8	4	7	5	6

THECB Table 44. Related and Supporting Programs					
	2012	2013	2014	2015	2016
MS in Merchandising (52.1802)					
Applications					
Admissions					
Enrollment	58	42	30	33	27
Graduates	15	21	17	9	10

Existing Doctoral Programs

UNT offers doctoral programs in nine colleges that include the Colleges of Business, Education, Engineering, Health and Public Service, Information, Liberal Arts and Social Sciences, Music, Science and Visual Arts and Design. A list of the doctoral programs for each college and the web link for the Characteristics of Doctoral Programs for each of the institution's existing programs is found below. See Table 45.

Table 45. Characteristics of Existing Doctoral Programs at UNT		
College	Program	Web Link
Business	Accounting	https://institutionalresearch.unt.edu/sites/default/files/accounting-2016.pdf
	Business	https://institutionalresearch.unt.edu/sites/default/files/business-2016.pdf
	BCIS	https://institutionalresearch.unt.edu/sites/default/files/bcis-2016.pdf
	Finance	https://institutionalresearch.unt.edu/sites/default/files/finance-2016.pdf
	Management	https://institutionalresearch.unt.edu/sites/default/files/management-2016.pdf
	Marketing	https://institutionalresearch.unt.edu/sites/default/files/marketing-2016.pdf
	Management Science	https://institutionalresearch.unt.edu/sites/default/files/management_science-2016.pdf
Education	Counseling	https://institutionalresearch.unt.edu/sites/default/files/counseling-2016.pdf
	C&I	https://institutionalresearch.unt.edu/sites/default/files/curriculum_instruction_phd-2016.pdf (Curriculum and Instruction)
	ED. Leadership	https://institutionalresearch.unt.edu/sites/default/files/educational_leadership-edd-2016.pdf
	ED. Psych.	https://institutionalresearch.unt.edu/sites/default/files/educational_psychology-2016.pdf
	Higher ED.	https://institutionalresearch.unt.edu/sites/default/files/higher_education_phd-2016.pdf
	Special ED.	https://institutionalresearch.unt.edu/sites/default/files/special_education-2016.pdf
Engineering	Computer Science and Engineering	https://institutionalresearch.unt.edu/sites/default/files/computer_science_engineering-2016.pdf
	Material Science and Engineering	https://institutionalresearch.unt.edu/sites/default/files/material_science_engineering-2016.pdf
Health and Public Service	Audiology	https://institutionalresearch.unt.edu/sites/default/files/audiology-2016.pdf
	Health Services Res.	N/A
	Public Administration and Management	https://institutionalresearch.unt.edu/sites/default/files/public_admin-2016.pdf (Public Administration and Management)

Information	Applied Tech. and Performance Improvement	https://institutionalresearch.unt.edu/sites/default/files/applied_tech_perf_improv_edd-2016.pdf
	Information Science	https://institutionalresearch.unt.edu/sites/default/files/information_science-2016.pdf
	Learning Technologies	https://institutionalresearch.unt.edu/sites/default/files/learning_technologies_-2016.pdf
Liberal Arts and Social Sciences	English	https://institutionalresearch.unt.edu/sites/default/files/english-2016.pdf
	History	https://institutionalresearch.unt.edu/sites/default/files/history-2016.pdf
	Philosophy	https://institutionalresearch.unt.edu/sites/default/files/philosophy-2016.pdf
	Political Science	https://institutionalresearch.unt.edu/sites/default/files/political_science-2016.pdf
	Behavioral Science	https://institutionalresearch.unt.edu/sites/default/files/behavioral_science-2016.pdf
	Clinical Psychology	https://institutionalresearch.unt.edu/sites/default/files/clinical_psychology-2016.pdf
	Counseling Psych.	https://institutionalresearch.unt.edu/sites/default/files/counseling_psychology-2016.pdf
	Sociology	https://institutionalresearch.unt.edu/sites/default/files/sociology-2016.pdf
Music	Music	https://institutionalresearch.unt.edu/sites/default/files/music-2016.pdf
	Music Education	https://institutionalresearch.unt.edu/sites/default/files/music_ed-2016.pdf
	Performance	https://institutionalresearch.unt.edu/sites/default/files/performance-2016.pdf
Science	Biochemistry and Molecular Biology	https://institutionalresearch.unt.edu/sites/default/files/biochemistry_molecular_biol-2016.pdf
	Biology	https://institutionalresearch.unt.edu/sites/default/files/biology-2016.pdf
	Chemistry	https://institutionalresearch.unt.edu/sites/default/files/chemistry-2016.pdf
	Environmental Sc.	https://institutionalresearch.unt.edu/sites/default/files/environmental_science-2016.pdf
	Mathematics	https://institutionalresearch.unt.edu/sites/default/files/math-2016.pdf
	Physics	https://institutionalresearch.unt.edu/sites/default/files/physics-2016.pdf
Visual Arts and Design	Art Education	https://institutionalresearch.unt.edu/sites/default/files/art_education-2016.pdf

The University of North Texas offers numerous graduate courses at the 5000 and 6000 levels which would be attractive to students in the PhD in CEXM. Courses in research and data analytics will be particularly beneficial. Examples of courses are provided below. See Table 46.

Table 46. Enhancement of PhD in Consumer Experience Management Using Existing UNT Doctoral Courses		
PhD in CEXM Requirements	UNT	Sample of Possible Courses
	Doctoral Programs	
	College of Information	INFO 5735 Usability and User Experience Assessment
Research design and/or Statistics – Up to 6 additional SCH.	College of Business	BUSI 6220 Applied Regression Analysis (3 hrs.)
		BUSI 6240 Applied Multivariate Statistics (3 hrs.)
		DSCI 5340 Predictive Analytics & Business Forecasting (3 hrs.)
		MSCI 6720 Experimental Design & Statistical Modeling (3 hrs.)
	PhD in Public Administration	HLSR 6760 Grant Proposal Writing in Community Development (3 hrs.)
Elective course approved by advisory committee (3 SCH)	Toulouse Graduate School Interdisciplinary Studies	INST 5160 Harvesting, Storing and Retrieving Data (3 hrs.)
		INSD 5170 Discovery and Learning with Big Data (3 hrs.)

Recent CMHT M.S. Graduate’s Employment

Employment of CMHT M.S. graduates in AY 2016 -2017 is provided in two tables. For hospitality management, see Table 47. For merchandising, see Table 48.

Table 47. Graduate Employment AY 2016 – 2017 CIP 52.09 – M.S. Hospitality Management and M.S. in International Sustainable Tourism					
No.	M.S. Degree	Year of Graduation	Field of Employment	Location	Employer
1.	Hospitality Management	2017	Revenue Management	Houston, TX	Sheraton
2.	Hospitality Management	2017	Hospitality	Dallas, TX	Hilton Hotels
3.	Int’l Sustainable Tourism	2017	Workforce Services	Little Rock, AR	PCMI Services
4.	Int’l Sustainable Tourism	2017	Sustainability	Columbia, SC	U. of South Carolina

Table 47. Graduate Employment AY 2016 – 2017					
CIP 52.09 – M.S. Hospitality Management and M.S. in International Sustainable Tourism					
No.	M.S. Degree	Year of Graduation	Field of Employment	Location	Employer
5.	Hospitality Management	2017	Hospitality	Dallas, TX	Double Tree
6.	Hospitality Management	2017	Hospitality Accounting	Waco, TX	Baylor University
7.	Int'l Sustainable Tourism	2017	Hospitality	Irving, TX	Marriott
8.	Hospitality Management	2017	Hospitality	Dallas, TX	UNT System
9.	Hospitality Management	2017	Hospitality	Thackerville, OK	WinStar World Casino & Resort
10.	Hospitality Management	2016	Hospitality	Houston, TX	St. Regis Hotels/Resorts
11.	Hospitality Management	2016	Marketing	Denton, TX	UNT
12.	Hospitality Management	2016	Hospitality	Dallas, TX	Brookhaven Country Club
13.	Hospitality Management	2016	Hospitality	Orlando, FL	Walt Disney World Resort
14.	Hospitality Management	2016	Retail	Greensboro, NC	SHOP.COM
15.	Hospitality Management	2016	Hospitality	Orlando, FL	Walt Disney World Resort

Table 48. Employment of CMHT M.S. Graduates AY 2016 – 2017					
CIP 52.18 – M.S. in Merchandising					
No.	M.S. Degree	Year of Graduation	Field of Employment	Location	Employer
1.	Merchandising	2017	Retail	Denton, TX	J.C. Penney
2.	Merchandising	2017	Retail	Dallas, TX	Doskocil Manufacturing
3.	Merchandising	2017	Retail	Dallas, TX	NB Aesthetic
4.	Merchandising	2017	Retail	Arlington, TX	Petmate
5.	Merchandising	2016	Retail	Austin, TX	Rooms-to-Go
6.	Merchandising	2016	Mfg.	Lewisville, TX	Norman International
7.	Merchandising	2016	Retail	Dallas, TX	Pier I

I. Faculty

E. Faculty Availability

Current and Open Faculty Lines in CMHT

At the time of the program's launch in fall 2019, the CEXM core and support Research Faculty will include 20 tenure-line faculty. By rank, this includes Professors (n = 5), Associate Professors (n = 8) and Assistant Professors (n = 7). This includes a CMHT search for three new Assistant Professors hires by fall 2019 on existing lines, two in the Department of Merchandising and Digital Retailing and one in the Department of Hospitality and Tourism. See Table 49.

Department	Current Core and Support Faculty			New Assistant Professors Expected Hires Fall 2019 Using Existing Open Lines
	Professors	Associate Professors	Assistant Professors	
Merchandising & Digital Retailing	4	4	0	2
Hospitality & Tourism Management	1	4	4	1
TOTALS	5	8	4	3

Core Faculty

The core faculty includes five professors, three associate professors, and one assistant professor in current appointments. The nine-faculty core will grow in the future with planned hires on three existing lines. Required courses may be taught each semester or alternate F/S semesters. Elective courses may be on a two-year rotation. See THECB Table 50.

No.	Name and Rank of Core Faculty	Highest Degree and Awarding Institution	Organized Courses Assigned in Program	% Time Assigned
1.	Forney, Judith C. Professor	PhD in Consumer Sciences and Retailing, Purdue University	CMHT 5800 CMHT 5850 ³	10%
2.	Josiam, Bharath Professor	PhD in Business and Marketing Education, University of Minnesota	CMHT 5400 ¹	10%
3.	Kim, Haejung Professor	PhD in Fashion Marketing & Merchandising, Ewha Woman's University	CMHT 5550 ³ , CMHT 5700 CMHT 6500, CMHT 6600	30%
4.	Kim, Jiyoung Associate Professor	PhD in Consumer Sciences The Ohio State University	CMHT 5300 ²	10%
5.	Kim, Young Hoon Associate Professor	PhD in Hospitality Administration Texas Tech University	HMGY 5630 ³	10%
6.	Kinley, Tammy Professor	PhD in Clothing & Textiles Merchandising, Texas Tech University	CMHT 5440 CMHT 5600	20%

THECB Table 50. Core Faculty				
No.	Name and Rank of Core Faculty	Highest Degree and Awarding Institution	Organized Courses Assigned in Program	% Time Assigned
7.	Leung, Xi Y. Assistant Professor	PhD in Hospitality Administration University of Nevada, Las Vegas	HMGT 5580 ³ CMHT 5585	10%
8.	Yang, Kiseol Associate Professor	PhD in Retail and Consumer Sciences University of Tennessee	MDSE 5710 MDSE 5750	20%
9.	Xu, Bugao Professor	PhD in Textile Science University of Maryland at College Park	CMHT 5800	10%
Projected New Core Faculty in Year 2019 is one TT Assistant Professor using an existing line.				

¹Required if no applied statistics in M.S. ²Required if no research methods in M.S. Note: Course descriptions in Appendix A. ³Possible leveling course.

Support Faculty

Support faculty includes five associate professors and three assistant professors and will grow with planned hires. Some faculty course assignments are not determined due to recent and proposed hires. See THECB Table 51.

THECB Table 51. Support Faculty¹				
No.	Name and Rank of Support Faculty	Highest Degree and Awarding Institution	Organized Courses Assigned in Program	% Time Assigned
1.	Connors, Priscilla, Associate Professor	PhD in Nutrition Texas Woman's University	TBD	0 – 10%
2.	KC, Birendra Assistant Professor	PhD in Parks, Recreation & Tourism North Carolina State University	HMGT 5560 ²	0 – 10%
3.	Kennon, Lisa Associate Professor	PhD in Nutrition Texas Woman's University	CMHT 5100 ² CMHT 5350 ²	0 – 10%
4.	Knight, Dee ³ Associate Professor	PhD in Fashion Merchandising Texas Woman's University	MDSE 5240 ² MDSE 5650 ²	0 – 10%
5.	Min, Jihye Assistant Professor	PhD in Hospitality Administration Texas Tech University	TBD	0 – 10%
6.	Pookulangara, Sanjukta, Associate Professor	PhD in Fashion Merchandising University of Missouri	MDSE 5500 ²	0 – 10%
7.	Spears, Daniel Associate Professor	PhD in Hospitality Management Kansas State University	HMGT 5530 ² HMGT 5540 ²	0 – 10%
8.	Wen, Han Assistant Professor	PhD in Hospitality Administration Kansas State University	HMGT 5280 ²	0 – 10%
Projected New Support Faculty in Year 2019 is two TT Assistant Professors using existing lines.				

¹Support faculty may serve on doctoral committees. ²Course may be used as a leveling course. ³Doctoral Coordinator. Note: Descriptions of all courses are included in Appendix A.

F. Teaching Load

Teaching Load of Core Faculty

Eight core faculty will have 2/2 teaching loads for organized courses. One core faculty have a 1/1 organized teaching load that is reduced by course buyout with external research funds. In this case, the faculty member is working with funded doctoral students in the labs. Teaching loads may be reduced in the third year based on the number of doctoral dissertation students each faculty is mentoring. Faculty loads include graduate and undergraduate courses.

Impact of PhD Program on Faculty Workload for Existing Programs

The overall impact of the PhD in CEXM on organized course load is limited as all organized courses included in the PhD program are currently being taught by CMHT faculty. The only exception is CMHT 5800 which is a variable topic seminar course; content is aligned with expertise of faculty assigned to the course. The 6000 level organized courses are part of a concentration in Consumer Behavior and Experience Management Concentration in the Interdisciplinary PhD in Information Sciences. The 5000 level organized courses are taught in the M.S. in Hospitality Management, M.S. in International Sustainable Tourism, and the M.S. in Merchandising.

CMHT content courses (5000-6000) have the capacity to absorb 35% to 50% (+ 8 to 15 students) in enrollment growth which is manageable under current faculty loads. CMHT courses in research tools (Research Methods, Quantitative Statistics) are taught each long semester; Qualitative Analysis will rotate based on demand. These courses can absorb a 25% - 35% growth (+6 to 9 students) per semester.

CMHT graduate faculty workloads include both UG and G courses. The UG courses generally have higher enrollments. Some of this teaching responsibility will be assumed by doctoral students in their second year with Teaching Fellow appointments. The TF will be assigned one UG course per semester. TF appointments will reduce the overall number of UG courses taught by the core faculty, thus reducing the total headcount of students in their teaching load. This UG headcount reduction will offset increased graduate course enrollments and one-on-one instruction for doctoral special problems and dissertation hours. A summary of organized courses taught by core faculty is found in Table 52.

No.	Name and Rank of Core Faculty	Organized Courses Per Academic Year ²			
		Number	Semester Credit Hours	Organized Courses	Teaching Load
1.	Forney, ⁴ Judith Cardona, Professor	1	3	CMHT 5800 ³ CMHT 5850 ³	4.33
2.	Josiam, Bharath, Professor	1 ²	3	CMHT 5400 ²	
3.	Kim, Haejung Maria, Professor	3	9	CMHT 6500 ³ CMHT 6600 ³ CMHT 5700 ³	
4.	Kim, Jiyoung, Associate Professor	1 ²	3	CMHT 5300 ²	
5.	Kim, Young Hoon, Associate Professor	1	3	CMHT 5800 ³	
6.	Kinley, Tammy, Professor	2	6	CMHT 5440 ³ CMHT 5600 ³	
7.	Leung, Xi Y., Assistant Professor	1	3	HMGT 5585 ³	

Table 52. Core Faculty Teaching Load ¹					
No.	Name and Rank of Core Faculty	Organized Courses Per Academic Year ²			
		Number	Semester Credit Hours	Organized Courses	Teaching Load
8.	Yang, Kiseol, Associate Professor	2	6	MDSE 5710 ³ MDSE 5750 ³	
9.	Xu, Bugao, Professor	1	3	CMHT 5800 ³	
Total		13	39		

¹Teaching load is the total number of semester credit hours in organized teaching courses taught per academic year by core faculty, divided by the number of core faculty at the institution the previous year (39/8). ²Course is taught in fall and spring. ³Course taught once a year or every three semesters. ⁴Judith Forney, Professor, returns to faculty fulltime in fall 2018 after a 20-year appointment as Dean of the College of Merchandising, Hospitality and Tourism.

G. Core Faculty Productivity

Productivity: Key Research Journals

The CMHT Research Committee completed an exhaustive identification and analysis of journals in fields within the college in 2015. The objective was to build a recommended externally validated journal list that could be used to benchmark the quality of research within CMHT. A "recommended" list was created to identify highest impact journals. Group 1 journals are indexed in SCI/SSCI/SSCIE and/or had an impact factor above 1.00. Only journals most aligned with the emerging field of consumer experience management are referenced here. See Table 53.

Table 53. Key Research Journals in Fields of Tourism, Hospitality, Consumers, Textile/Apparel Merchandising, Engineering & Applied Technology: Textiles, Humans, and Consumer Products Indexed in SCI ¹ , SSCI ² , SSCIE ³ and/or Impact Factor ⁴ above 1.00		
Group 1 Journals ^{1,2,3} Tourism	Group 1 Recommended Journals ^{1, 2, 3} Tourism	Group 2 Recommended Journals ⁵ Tourism
<ol style="list-style-type: none"> Annals of Tourism Research Current Issues in Tourism International Journal of Tourism Research Journal of Sustainable Tourism Journal of Travel Research Tourism Economics Tourism Geographies Tourism Management 	<ol style="list-style-type: none"> Asia Pacific Journal of Tourism Research Journal of Tourism and Cultural Change 	<ol style="list-style-type: none"> Tourism Studies Journal of Sustainable Tourism Tourism Recreation Research Journal of Vacation Marketing Journal of Hospitality, Leisure, Sport and Tourism Education Tourism Analysis Tourism Geographies Tourism Economics Journal of Hospitality and Tourism Management Journal of Travel and Tourism Marketing
Group 1 Journals ^{1, 2, 3} Hospitality Management	Group 1 Recommended Journals ^{1, 2, 3} Hospitality Management	Group 2 Recommended Journals ⁴ Hospitality Management
<ol style="list-style-type: none"> International Journal of Hospitality Management Journal of Hospitality and Tourism Research 	<ol style="list-style-type: none"> International Review of Sport and Exercise Psychology International Journal of Contemporary Hospitality Management 	<ol style="list-style-type: none"> Leisure Studies Tourism and Hospitality: Planning and Development Journal of Hospitality, Leisure, Sport and Tourism Education

Table 53. Key Research Journals in Fields of Tourism, Hospitality, Consumers, Textile/Apparel Merchandising, Engineering & Applied Technology: Textiles, Humans, and Consumer Products Indexed in SCI ¹, SSCI ², SSCIE³ and/or Impact Factor ⁴ above 1.00		
Group 1 Journals ^{1,2,3} Tourism	Group 1 Recommended Journals ^{1, 2, 3} Tourism	Group 2 Recommended Journals ⁵ Tourism
	3. Cornell Hospitality Quarterly 4. Leisure Science 5. Leisure Studies 6. Journal of Leisure Research 7. Journal of Hospitality Leisure Sport & Tourism Education	4. Journal of Hospitality and Tourism Management 5. International Journal of Contemporary Hospitality Management 6. Cornell Hotel and Restaurant Administration Quarterly
Group 1 Journals ^{1, 2, 3} Apparel & Textiles, and Merchandising	Group 1 Recommended Journals ^{1, 2, 3} Apparel & Textiles, and Merchandising	Group 2 Recommended Journals ⁴ Apparel &Textiles, and Merchandising
1. Clothing and Textile Research Journal	n/a	1. Journal of Fashion Marketing and Management
Group 1 Journals ^{1, 2, 3} Consumer and Retail	Group 1 Recommended Journals ^{1, 2, 3} Consumer and Retail	Group 2 Recommended Journals ⁴ Consumer and Retail
n/a	1. Business and Society 2. Consumption Markets and Culture 3. Electronic Markets 4. International Journal of Electronic Commerce 5. Internet Research 6. Journal of Consumer Behaviour 7. Journal of Consumer Psychology 8. Journal of Consumer Research 9. Journal of Electronic Commerce Research 10. Journal of Interactive Marketing 11. Journal of Product Innovation Management 12. Journal of Service Research 13. Journal of Services Marketing	1. International Journal of Retail and Distribution Management 2. Journal of Consumer Marketing 3. Journal of International Consumer Marketing 4. Journal of Research in Interactive Marketing 5. Journal of Retailing and Consumer Services 6. Marketing Intelligence & Planning 7. International Review of Retail, Distribution and Consumer Research 8. Family and Consumer Sciences Research Journal 9. Journal of Product & Brand Management 10. International Review of Retail, Distribution and Consumer Research
	Group 1 Recommended Journals ^{1, 2, 3} Engineering & Applied Technology: Textiles, Humans, & Consumer Products	
	1. Optical Engineering 2. Textile Research Journal 3. AATCC Review 4. Near-Infrared Spectroscopy 5. Obesity 6. Journal of Clothing and Science and Technology	18. International Journal of Clothing Science and Technology 19. American Journal of the American College of Nutrition 20. Mathematical Problems in Engineering 21. Sonar & Navigation

Table 53. Key Research Journals in Fields of Tourism, Hospitality, Consumers, Textile/Apparel Merchandising, Engineering & Applied Technology: Textiles, Humans, and Consumer Products Indexed in SCI¹, SSCI², SSCIE³ and/or Impact Factor⁴ above 1.00		
Group 1 Journals^{1,2,3} Tourism	Group 1 Recommended Journals^{1, 2, 3} Tourism	Group 2 Recommended Journals⁵ Tourism
	7. Biomass & Bioenergy 8. Journal of Textile Institute 9. Research and Application 10. Journal of Testing and Evaluation 11. American Journal of Human Biology 12. Color Research and Application 13. Journal of Microscopy 14. Journal of Industrial Textiles 15. Industria Textila 16. Asian Journal of Control 17. Fibres and Textiles in Eastern Europe	22. Measurement Science and Technology 23. Journal of Electronic Imaging 24. Journal of Polymers and Environment 25. Journal of Engineered Fibers and Fabrics 26. Multimedia Tools and Applications 27. Journal of Biomedical Materials Research 28. Image and Vision Computing 29. Optical Engineering 30. Machine Vision and Applications 31. Computer-Aided Design 32. Clothing and Textiles Research Journal 33. Journal of Textile Institute 34. Journal of American Association of Textile Chemists and Colorists

¹ SCI: Science Citation Index. ² SSCI: Social Sciences Indexes. ³ SCIE: Social Citation Index Expanded. ⁴ Impact Factor: The annual JCR impact factor is a ratio between citations and recent citable items published. ⁵ SJC indicator measures the scientific influence of the average article in a journal, it expresses how central to the global scientific discussion an average article of the journal is.

Productivity: Core and Support Faculty

CMHT core faculty were productive in publishing 143 refereed papers over the last five years. One patent was processed. See Table 54.

THECB Table 54. Core Faculty Publications, Other Scholarly/Creative Accomplishments for the Past Five Years					
No.	Core Faculty Name	Refereed Papers	Book Chapters	Books	Patents
1.	Forney, Judith Cardona	2	0	0	0
2.	Josiam, Bharath M.	18	0	0	0
3.	Kim, Haejung Maria	14	0	0	0
4.	Kim, JiYoung	9	0	0	0
5.	Kim, Young Hoon	12	1	0	0
6.	Kinley, Tammy R.	8	0	0	0
7.	Leung, Xi Y.	12	1	0	0
8.	Xu, Bugao	65	3	0	1
9.	Yang, Kiseol	14	0	0	0
Total		143	5	0	1

CMHT core faculty achieved \$766, 080 in externally funded grants in the past five years. Most funding was received by Dr. Bugao Xu who is in his second year at UNT. Dr. Xu leads two research labs *Applied Imaging Technology Lab* and the *Artificial Intelligence in Retail Lab* which are housed in UNT’s Research Science Building. See Table 55.

THECB Table 55. Core Faculty External Grant Awards for the Past Five Years						
No.	Core Faculty	Source	Grant Subject	Dates	Total Amount	UNT Amount
1.	Kim, JiYoung & Xu, Bugao	Cotton, Incorporated	Cotton Sustainability: Cotton on the Move	1/1/18 – 12/31/19	\$24,889	-
2.	Xu, Bugao	USDA-ARS	Laser Scattering for Detection of Plastic Contaminants in Seed Cotton	1/1/18 – 12/31/18	\$69,000	-
3.	Xu, Bugao	Cotton Incorporated	Dual-beard Fibrography for Cotton Length Distribution Measurement (Phase 2)	1/1/18 – 12/31/18	\$39,351	-
4.	Xu, Bugao	Cotton Incorporated	Dual-beard Fibrography for Cotton Length Distribution Measurement (Phase 1)	6/1/17 – 12/31/17	\$25,000	-
5.	Xu, Bugao	Walmart U.S. Manufacturing Innovation Fund	On-Loom Fabric Defect Inspection Using Contact Image Sensors	7/1/16 – 5/31/19	\$345,198	-
6.	Xu, Bugao	Allcustom Tech Co.	Body Imaging and Modeling (unrestricted gift)	12/04/14 – Present	\$60,000	-
7.	Xu, Bugao	Cotton Incorporated	Detection of Cotton Contaminants via Millimeter-Wave and Dual Energy X-Ray Imaging	1/1/16 – 12/31/16	\$168,442	-
8.	Xu, Bugao	Texas Tech University	Cotton Cross-section Measurements and Maturity Distributions	9/1/13- 8/31/14	\$15,000	-
9.	Xu, Bugao	U. of Minho, Azurém Portugal	Applications of Kinect-based Body Scanner	2/1/13- 6/30/13	\$5,000	-
10.	Yang, Kiseol	Don Bang Food Master, South Korea	The Effects of Mobile Food Shopping Attributes on Shopping Value, Satisfaction of Purchase and Repeat Purchase Intention	9/1/15 – 10/31/16	\$14,200	-
TOTAL					\$766,080	-

CMHT support faculty were productive in publishing 39 refereed papers. See Table 56.

Table 56. Support Faculty Publications, Other Scholarly/Creative Accomplishments for the Past Five Years					
No.	Support Faculty Name	Refereed Articles	Book Chapters	Books	Patents
1.	Connors, Priscilla L.	4	0	0	0
2.	KC, Birendra	8	0	0	0
3.	Kennon, L. ¹	0	0	0	0
4.	Knight, Dee K. *	4	0	0	0
5.	Min, Jihye	2	0	0	0
6.	Pookulangara, Sanjukta Arun ²	13	0	0	0
7.	Spears, Daniel L.	11	0	0	0
8.	Wen, Han	4	0	0	0
Total		39	0	0	0

*PhD Coordinator. ¹ Graduate Coordinator: M.S. in Hospitality, M.S. in International Sustainable Tourism, Represents CMHT on UNT Graduate Council. ² Graduate Coordinator for M.S. in Merchandising.

H. Faculty Professional Development and Curriculum Support

The Center for Learning Enhancement, Assessment, and Redesign (CLEAR) provides a variety of faculty development options for online instructors. Faculty can access the Teaching Handbook (policies, syllabus template, basic getting-started information), a variety of pedagogy and course design materials in an on-demand format, participate in LMS or other trainings, and/or request specific trainings or appointments with Instructional Design Consultants or Faculty Development professionals to assist with online course design or teaching needs. All resources and services may be accessed through the CLEAR website (clear.unt.edu), the Teaching Commons website (teachingcommons.unt.edu), or by reaching out to CLEAR directly.

IV. Resources

A. Student Financial Assistance

PhD students in a TF/TA position, 50% FTE (20 hours per week) and enrolled in nine SCHs are eligible for the Tuition Benefit Program (TBP), a tuition supplement for six SCHs for eligible students. The TBP reduces tuition to \$1,421.45, a savings \$2,161.20 from resident graduate tuition of \$3,582.65. A doctoral student in a .50 TF/TA position with TBP and a \$1,000 CMHT scholarship will have benefits of \$17,134.24. A \$1,000 competitive scholarship qualifies an out-of-state student for in-state tuition. See THECB Table 57.

THECB Table 57. Student Financial Assistance						
Support	FT & PT Student Amount per Student	Number of Students Each Year and Amount Per Student				
		Year 1	Year 2	Year 3	Year 4	Year 5
Teaching Assistantships	Full-time	8	11	13	14	16
	Amount per student	\$13,973.04	\$13,973.04	\$13,973.04	\$13,973.04	\$13,973.04
	Part-time	2	4	5	5	5
	Amount per student	N/A	N/A	N/A	N/A	N/A
Research Assistantships	Full-time				2	3
	Amount per student				\$13,973.04	\$13,973.04
	Part-time					
	Amount per student					
Scholarships	Full-time	8	11	13	14	16
	Amount per student	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000
	Part-time	2	4	5	5	5
	Amount per student	N/A	N/A	N/A	N/A	N/A

B. Library Resources

See Appendix E for a letter from University Libraries certifying library resources are adequate for the proposed PhD.

University of North Texas Libraries occupies six separate facilities, each with its special functions and clientele. General information about the individual libraries is available on the Web.

UNT Libraries provides computers, printers, and copiers for student use. UNT Libraries provides state-of-the-art group study areas with computers, large monitors, smart boards, and white boards. Power outlets are available throughout the libraries for use with personal laptops. Wireless internet access is also available throughout the libraries.

Remote Access to Resources

Off campus access to subscription-based online resources is available via a proxy server, which provides nearly seamless access. These subscription resources are accessible from both the Libraries' catalog system, as well as through the Libraries' website. Databases offer the opportunity to email, save or print articles, citations and search strategies within search sessions. Many such resources provide the user the ability to be regularly alerted to new articles, books, or information.

UNT Libraries is noted for its growing collection of digital resources that serve not only the UNT community, but the state of Texas and the academic community as a whole. These collections are freely accessible to UNT students through the UNT Digital Collections web site.

Web pages, called LibGuides, are maintained for students and faculty that introduce the process of literature research and direct them to electronic, print, microform, and other resources. Students and faculty are made aware of, and trained on, the use of these available resources through monthly-scheduled workshops, via any of the hundreds of bibliographic instruction sessions offered throughout the year, and through online tutorials. These opportunities are advertised through the faculty directly to classes, or on the library website. Also, library liaisons maintain regular contact with their assigned faculty for improving awareness about when and where instruction is offered, and about new resources. Students and faculty are also encouraged to request one-on-one consultations (virtual or in-person) for assistance.

Document Delivery

As students and library materials are decentralized and the libraries look to make greater efforts to support the research needs of faculty and students, Document Delivery fills the academic needs of library patrons by giving them access to journals and books in the library collection in a timely manner and bridges the gap between online resources and print resources. To accomplish these goals, Document Delivery services are offered to all UNT faculty, students, and staff through ILLiad. This includes students enrolled in online courses. Document Delivery services have been expanded to include online holds in the Libraries' online catalog. In addition to document delivery services for distributed learning students and faculty, the Libraries provides expanded services for all UNT students and staff.

The Distributed Learning Request Service provides access to library-owned material to UNT students taking online courses. For distributed learning students, books are mailed to the patron's home via express mail through the United States Postal Service and a label and packaging are included to mail the books back at the Libraries' expense. Requests for articles or chapters from books are scanned and sent to the patron's ILLiad account where they can login and view the documents.

C. Facilities and Equipment

Office Space

CMHT will gain additional Chilton offices in 2018 as the result of the Department of Sociology relocating to Sage Hall. The new assigned space will allow CMHT to reallocate 5 to 7 offices in the 342 Office Hallway for PhD students. PhD students who are on RA funds will office in research lab space assigned to Dr. Bugao Xu.

Research Lab Space – Science Research Building

The Applied Imaging Technology Lab and the Artificial Intelligence in Retail Lab are housed within a 1,000 sq. ft. in the UNT Research Science Building (SRB) located on the main campus at UNT. This space includes two large offices and the two research labs. The SRB was completely renovated and officially reopened spring 2017. Improvements or renovations are not anticipated for this lab space.

Global Digital Retailing Research Center Space

The Global Digital Retailing Research Center is housed in Chilton Hall Room 353 in a 216 sq. ft. space. The Center has a large wall-mounted white board used by research teams for brainstorming. A desk and computer are available for visiting research scholars. Project work space and meetings by conference calls take place at a large table with six chairs. Three carrels, each with its own computer, are used for student research projects, online surveys, and project development.

Equipment

See Appendix D. The itemized list of capital equipment purchases during the past five years is included in Table 62. A summary of equipment transferred from the University of Texas, Austin to UNT in 2016 is included in Table 63.

D. Support Staff

CMHT has sufficient staff to support the PhD in Consumer Experience Management. Process responsibilities are distributed across a Senior Administrative Coordinator, two Administrative Coordinators, an Office Support Associate, and two faculty Department Graduate Coordinators. A faculty PhD Coordinator will be added upon approval of the PhD program. Descriptions of position responsibilities follow.

CMHT Office Support Associate

CMHT Centralized Graduate Administrative Services was created In AY 2017-2018 CMHT with a reassignment of 50 percent of the Office Support Associate position within the CMHT Dean's Office. These services include being the first administrative contact to any prospective graduate student. This staff member provides information on documents required; responds to questions on how to apply to graduate school; monitors the application process; retains application files; and refers student calls to CMHT's departmental Graduate Coordinators and the Associate Dean for Academic Affairs for immediate action. The Office Support Associate posts all the documents on SharePoint and contact the Department Graduate Coordinators when the files are ready for Graduate Faculty review.

CMHT Senior Administrative Coordinator

The Senior Administrative Coordinator to the CMHT Dean is responsible for initiating and tracking all processes within the college for funded lines for graduate Teaching Assistantships and Teaching Fellowships at the master's level and the three doctoral lines for PhD students in the CMHT Concentration in Consumer Behavior and Digital Experiences in the Interdisciplinary PhD in Information Sciences. These responsibilities will expand to the PhD in Consumer Experience Management when it is approved.

Department Administrative Coordinators

The Department of Hospitality and Tourism Management and the Department of Merchandising and Digital Retailing each have an Administrative Coordinator who supports hiring and payroll of Graduate Hourly Teaching Assistants and RA lines within their respective departments.

Department and CMHT Faculty Graduate Coordinators

The Department of Hospitality and Tourism Management and the Department of Merchandising and Digital Retailing each have a Graduate Coordinator. Their responsibilities are to assist students with graduate program administrative processes within the college and The Toulouse Graduate School. This includes responding to student questions regarding the admission process; faculty review of graduate application materials; ensuring degree plans are completed in the first semester; providing students with information on graduate course sequencing; and informing students in preparation for graduation.

Dr. Lisa Kennon, Associate Professor, has been the Master's Graduate Coordinator in the Department of Hospitality and Tourism Management for over 10 years. She has oversight for graduate students in the M.S. in Hospitality Management and the M.S. in International Sustainable Tourism. Dr. Kennon is also the CMHT Liaison to the Toulouse Graduate School and attends the UNT Graduate Council meetings.

Dr. Sanjukta Pookulangara, Associate Professor, is the Master's Graduate Coordinator in the Department of Merchandising and Digital Retailing. She assumed this responsibility in 2017 and has oversight for graduate students in the M.S. in Merchandising.

Dr. Dee Knight, Associate Professor, will assume the role of CMHT PhD Coordinator upon launch of the PhD in Consumer Experience Management. Her responsibilities will be similar to that of the Master's Graduate Coordinators with additional activities specific to the doctoral program.

E. External Learning

Not Applicable

F. List of Potential Expert External Reviewers

1. Name: Dennis Reynolds, Ph.D. Title and Rank: Dean and Professor Barron Hilton Distinguished Chair
Institution: University of Houston, Conrad N. Hilton College of Hotel and Restaurant Management
Phone #: 713.743.7896 Email: der@uh.edu
Qualifications/Expertise: Holds PhD in Hotel Administration from Cornell University. As dean he launched doctoral program in Hilton College. Held positions of Professor and Ivar Haglund Endowed Chair of Hospitality Management at Washington State University; J. Thomas Clark Professor of Entrepreneurship and Personal Enterprise at Cornell University; 50+ refereed scholarly articles and 6 book chapters.
2. Name: Liping A. Cai, Ph.D. Title and Rank: Professor Associate Dean for Diversity and International Programs
Institution: Purdue University, College of Health and Human Sciences
Phone #: 765.490.1498 Email: liping@purdue.edu
Qualifications/Expertise: Fellow in American Council on Education. Authored/co-authored over 310 peer-reviewed articles with 12 best papers with doctoral students. Leads research teams on branding, rural tourism and China market. Research team includes Fulbright and other international scholars. Director of the Purdue Tourism and Hospitality Research Center. PI for over 40 sponsored projects for \$1.2 million in public/private funding.
3. Name: Lynn L. Huffman, Ph.D. Title and Rank: Professor and Executive Associate Dean, College of Human Sciences
Institution: Texas Tech University, College of Human Sciences
Phone #: 806.834.8455 Email: Lynn.huffman@ttu.edu
Qualifications/Expertise: In addition to current service as Executive Associate Dean, she served as Department Chairperson. Served on 35+ Dissertation committees as Chair or member. Teaches in hotel and restaurant administration doctoral program at TTU. Has 36 peer-reviewed publications. Received 12 funded grants.

4. Name: Nancy Nelson Hodges, Ph.D. Title and Rank: Burlington Industries Excellence Professor and Head Department of Consumer, Apparel and Retail Studies
Institution: The University of North Carolina Greensboro, Byran School of Business and Economics
Phone #: 336.334.5250 Email: Nancy_hodges@uncg.edu
Qualifications/Expertise: Received nearly \$800K in external funding. Published 2 peer-reviewed books and 3 book chapters; 50 articles in refereed journals. Chair/Co-Chair for 21 Ph.D. committees completed and 5 in progress.
5. Name: Ann E. Fairhurst, Ph.D. Title and Rank: Professor and Department Head
Institution: University of Tennessee Knoxville, College of Education, Health & Human Sciences
Phone #: 865.974.6609 Email: fairhurs@utk.edu
Qualifications/Expertise: Extensive peer reviewed articles and presentations. Leader in doctoral production in one the nation's top Ph.D. programs in the area of retail merchandising.
6. Name: Melody L.A. LeHew Title and Rank: Interim Chair and Professor
Institution: Kansas State University, College of Human Ecology
Phone #: 785.532.6993 Email: lehew@k-state.edu
Qualifications/Expertise: Expertise in apparel and textiles retailing, Consumer behavior and strategic marketing including market orientation, relationship marketing, differentiation, shopping center strategies, and tourism and retailing.

G. Five-Year Costs and Funding Sources Summary

THECB Table 58. Anticipated Sources of Funding						
Funding Category	1st Year	2nd Year	3rd Year	4th Year	5th Year	TOTALS
I. Formula Funding¹			\$405,428.58	\$453,126.06	\$476,974.80	\$1,335,529.44
II. Other State Funding²	\$36,000	\$63,000	\$81,000	\$63,000	\$81,000	\$324,000
III. Reallocation of Existing Resources³						
	\$55,896	\$97,818	\$125,766	\$97,818	\$125,766	\$503,064
IV. Federal Funding (In-hand only)						
	N/A	N/A	N/A	N/A	N/A	N/A
V. Tuition and Fees⁴	\$41,604	\$83,208	\$118,869	\$130,756	\$136,699	\$511,137
VI. Other Funding⁵	\$8,000	\$11,000	\$13,000	\$14,000	\$16,000	\$62,000
TOTALS	\$141,500.00	\$255,026.00	\$744,063.58	\$758,700.06	\$836,439.80	\$2,735,729.44

¹Indicate formula funding for students new to the institution because of the program; formula funding should be included only for years three through five of the program and should reflect enrollment projections for years three through five. ²Part-time money will be reallocated to provide .25 TF positions for qualified applicants, limited to one course for Fall/Spring semesters. Students will be paid \$4500 / course for which they are qualified not to exceed two courses annually, \$9,000. ³Students also will be assigned a .25 TA position at \$16.58 per/hour for 10 hour/week for 30/weeks using instructional fees to assist faculty for \$4,974. The combined TF/TA positions will provide \$13,974/year student support. ⁴Calculated based on current tuition and fees and projected SCH. ⁵Distributions from UNT endowed scholarships and donor and/or industry expendable scholarships will be used to award each full-time student a \$1,000 scholarship per year.

THECB Table 59. Costs to University of North Texas for the Proposed PhD in Consumer Experience Management							
Cost Category	Cost Sub-Category	1st Year 2019	2nd Year 2020	3rd Year 2021	4th Year 2022	5th Year 2023	TOTALS
Faculty Salaries	(New)	N/A	N/A	\$120,000	\$120,000	\$135,000	\$375,000
	(Reallocated)¹	\$213,000	N/A	N/A	N/A	N/A	\$213,000
Program ADMN.	(New)	N/A	N/A	N/A	N/A	N/A	N/A
	(Reassignments)²	\$19,902	\$19,902	\$19,902	\$19,902	\$19,902	\$99,511
Graduate Assistants	(New)	N/A	N/A	N/A	N/A	N/A	N/A
	(Reallocated)³	111,784	153,703	181,649	195,622	223,568	866,318
Clerical/ Staff	(New)	N/A	N/A	N/A	N/A	N/A	N/A
	(Reallocated)⁴	\$13,085	\$13,085	\$13,085	\$13,085	\$13,085	\$65,428
Supplies & Materials		N/A	N/A	N/A	N/A	N/A	N/A
Library & Instructional Technology Resources*		See Appendix E: No additional resources needed					
Equipment		N/A	N/A	N/A	N/A	N/A	N/A
Facilities		N/A	N/A	N/A	N/A	N/A	N/A
Other (Identify)		N/A	N/A	N/A	N/A	N/A	N/A
TOTALS		\$357,772	\$186,691	\$334,637	\$348,610	\$391,556	\$1,619,269

¹Faculty Salaries – two Tenure Track Positions in Merchandising & Digital Retailing (2018-2019) and one position in Hospitality Management (2019-2020) will be reallocated to doctoral program. ²Faculty will be reassigned .10 FTE year as PhD Coordinator. ³Graduate Assistants – Four existing master’s TF/TA positions will be reallocated in Year 1 for PhD students. Three current CMHT doctoral fellowships are supporting PhD students in the CMHT concentration in Consumer Behavior and Experience Management in the College of Information Interdisciplinary PhD program in Information Science. One of the three will be reallocated in spring 2020 to support PhD students in CEXM program, and two will be reallocated in fall 2022. ⁴Clerical/Staff – See Section D. Support Staff for the 2017 reallocation of staff to support graduate students.

Non-Formula Sources of Funding

THECB Table 60. Non-Formula Funding Sources	
Funding Category	Funding Source
II. Other State Funding	Part-time budget will be reallocated for TF .25 FTE positions to teach one 3-hour course per semester for qualified PhD students.
III. Reallocation of Existing Resources	Instructional fees will be used for TA .25 FTE positions in conjunction with TF.25 positions. Pay will be \$16.58/hour for 10 hours a week for 30 weeks. TF/TA positions will provide nine-month pay of \$13,397.00 (not eligible for TBP).
IV. Federal Funding	Dr. Bugao Xu’s research has attracted Federal funding from the USDA and NIH, and it is expected to continue to do so.
V. Other Funding¹	1. Distributions from CMHT Scholarship endowments and donor and industry expendable scholarship funds will provide annual scholarships for FT PhD students.
	2. The Global Digital Retailing Research Center under the direction of a Director of Research in Fall 2018 will generate funding for research projects that can provide funding for PhD students research.

¹Tuition and fees based on current rates and estimated SCH.

H. Institutional and Board of Regents Signature Page for Board Consideration

- 1. Adequacy of Funding** – The Chief Executive Officer shall sign the following statement:

I certify that the institution has adequate funds to cover the costs of the new program. Furthermore, the new program will not reduce the effectiveness or quality of existing programs at the institution.

Chief Executive Officer

Date

- 2. Accuracy of Financial Estimates** – The Chief Financial Officer shall sign the following statement:

I certify that the estimated costs and sources of funding presented in the proposal are complete and accurate.

Chief Financial Officer

Date

- 3. Reimbursement of Expert External Reviewer Costs** – The Chief Executive Officer shall sign the following statement:

I understand that the doctoral proposal process includes the use of expert external reviewers. In the event that one or more expert external reviewer are contracted to review a doctoral proposal put forward by my institution, I understand that my institution will be required to reimburse the Texas Higher Education Coordinating Board for costs associated with the use of such expert external reviewers. By signing, I agree on behalf of my institution to provide reimbursement for expert external reviewer costs.

Provost/Chief Executive Officer

Date

- 4. Board of Regents Certification of Criteria for Board Consideration** – The Board of Regents or designee must certify that the new program has been approved by the Board of Regents and meets the criteria under Texas Administrative Code (TAC), Title 19, Chapter 5, Subchapter C, Section 5.46.

On behalf of the Board of Regents, I certify that the new program meets the criteria specified under Texas Administrative Code (TAC), Title 19, Chapter 5, Subchapter C, Section 5.46 and has been approved by the Board of Regents.

Board of Regents (Designee)

Date

H. Board of Regents Signature Page for Commissioner Consideration

- 5. Board of Regents Certification of Criteria for Commissioner or Assistant Commissioner Consideration** – Typically proposals for doctoral programs are approved by the Board, supported with a recommendation for approval by the Commissioner. Under very limited circumstances, a program may be approved by the Commissioner. In this case only, the Board of Regents or designee must certify that the new program meets the criteria under Texas Administrative Code (TAC), Title 19, Chapter 5, Subchapter C, Section 5.50 (b) and (c).

TAC §5.50(b) The program:

- (1) has a curriculum, faculty, resources, support services, and other components of a degree program that are comparable to those of high quality programs in the same or similar disciplines at other institutions;
- (2) has sufficient clinical or in-service sites, if applicable, to support the program;
- (3) is consistent with the standards of the Commission of Colleges of the Southern Association of Colleges and Schools Commission on Colleges and, if applicable, with the standards or discipline-specific accrediting agencies and licensing agencies;
- (4) attracts students on a long-term basis and produce graduates who would have opportunities for employment; or the program is appropriate for the development of a well-rounded array of basic baccalaureate degree programs at the institution;
- (5) does not unnecessarily duplicate existing programs at other institutions;
- (6) does not be dependent on future Special Item funding;
- (7) has new five-year costs that would not exceed \$2 million.

TAC §5.50(c) The program:

- (1-2) is in a closely related discipline to an already existing doctoral program(s) which is productive and of high quality;
- (3) has core faculty that are already active and productive in an existing doctoral program;
- (4) has a strong link with workforce needs or the economic development of the state; and
- (5) the institution has notified Texas public institutions that offer the proposed program or a related program and resolved any objections.

On behalf of the Board of Regents, I certify that the new program meets the criteria specified under Texas Administrative Code (TAC), Title 19, Chapter 5, Subchapter C, Section 5.50 (b) and (c) and has been approved by the Board of Regents.

Board of Regents (Designee)

Date

APPENDIX A

Course Descriptions and Prescribed Sequence of Courses

Required Core (15 to 21 hours) ¹

CMHT 5440 Consumer Theory (3 hours)

Classic and contemporary consumer theories analyzed in situational contexts. Emphasis on formulating integrated consumer behavior models for strategic decision-making in both domestic and international consumer-driven markets in merchandising and hospitality industries.

MDSE 5750 Digital Retailing (3 hours)

Analysis and application of digital information exchange technology related to textile, apparel, home furnishings and other fashion-oriented products. Emphasis on distribution, merchandising, e-commerce and sales.

CMHT 6500 Big Data Implementation in Social Network Analysis (3 hours)

Theoretical and methodological introduction to Link Analysis (also called, Webometrics) from the perspective of Social Network Analysis: collecting, analyzing, visualizing and interpreting a large cloud of favorites, comments, tags, likes, ratings and links that are applicable across various business sectors.

CMHT 6600 Network Analysis and Visualization (NAV): Big Data Approach to Digital Retailing (3 hours)

Based on the Network Analysis and Visualization process model; articulates the analysis, interpretation and visualization of big data collected from online networks in social media. Draws on the foundation of CMHT 6500 to (1) synthesize network analysis and graph theory in the broader fields of digital retailing theories; (2) advance methods for collecting, analyzing, visualizing and interpreting big data; (3) discover network patterns and consumer trends in social media based on the cluster and semantic analysis; and (4) develop social media strategies for digital retailing.

CMHT 5800 Seminar in Various Areas of Concentration (3 hours)

May be repeated for credit as topics vary.

CMHT 6900 Special Problems (3 hours)

Research by doctoral students in fields of special interest. Includes research studies and intensive reading programs, accompanied by conferences with professors in fields involved.

CMHT 6950 Dissertation (12 hours)

To be scheduled only with consent of department. 12 hours credit required. No credit assigned until dissertation has been completed and filed with the graduate school. Doctoral students must maintain continuous enrollment in this course subsequent to passing qualifying examination for admission to candidacy.

¹ Note: Up to 6 additional hours may be required in research design (3 hours), and or statistics courses (3 hours) if content was not included in master's degree.

Prescribed Electives (6 hours) – Required

CMHT 5600 Managing Customer Experiences (3 hours)

Creating and managing customer experiences of tangible and intangible products and services that link merchandising and hospitality segments. Applying merchandising strategies of planning, developing and presenting products to consumers with the experiential components of the hospitality industry to provide a total concept-based experience.

CMHT 5700 Service Excellence (3 hours)

Explores the dynamics of service excellence in the merchandising and hospitality industries. How consumer-driven trends motivate service approaches, management and training procedures, and their impact in the marketplace.

Select One Course from the Following Three Courses (3 hours)

HMG 5585 Smart Destinations (3 hours)

SMART Destination focus on managing destination in the tourism and hospitality industry in a competitive manner through scientific data-driven methods. Emphasis includes big data, demand analytics, experience analytics, geo-analytics, web and social media analytics, benchmarking analysis and impact analysis.

MDSE 5710 Digital Optimization (3 hours)

Study of web site interface design principles, web usability and digital merchandising tools for optimizing digital retailing performance. Analysis and applications of consumer data to design and manage consumer experience in digital platforms.

MDSE 5770 Digital Channel Strategies (3 hours)

Provides a holistic overview of digital retailing strategies through examination of merchandising, marketing and customer experience strategies in digital marketplaces. Focuses on how to help organizations make intelligent decisions while conducting business in the digital age. Emphasis is on the understanding of digital technologies (e.g., Customer Relationship Management, SEO/SEM, digital marketing, social media metrics) and critically evaluating their influence, particularly on digital channel strategies.

Elective (3 hours) (Requires approval of advisory committee)

The CEXM PhD requires a foundation of 18 SCH in one of the CMHT fields aligned with consumer services and products: (1) retail/merchandising, 2) hospitality, or 3) tourism. The foundation may be met in two ways:

1. Master's degree with 18 SCH in one of the three fields; or
2. Minimum of 18 SCH of graduate work completed in one of the three fields prior to full admission into the PhD program. Courses may be selected from the following list of CMHT, HMG or MDSE courses. A student may also choose to select additional courses from the Prescribed Electives "Select One Course from the Following Three Courses (3 hours)" that are not used to satisfy the Prescribed Elective requirement of the degree.

CMHT Courses

CMHT 5100 Introduction to Research

Introduction to experimental, descriptive and survey research. Explore and effectively critique research in the discipline. Also concentrates on developing exemplary writing and critical analysis skills.

CMHT 5300 Research Methods in Merchandising and Hospitality Management

Critical evaluation of research methods in merchandising and hospitality management fields. Develop research framework and formulate research design questions. Enhance research skills through writing a thesis proposal or research proposal.

CMHT 5350 Contemporary Issues and Trends in Merchandising and Hospitality Management

Analysis of current issues, trends and future projections influencing the field of either hotel and restaurant management or fashion merchandising.

CMHT 5400 Research Applications in Merchandising and Hospitality Management

Research projects with implications for marketers in textile, apparel, home furnishings or hospitality industries. Emphasis is on conceptualizing problems, analyzing and interpreting data, and writing for industry and/or scholarly dissemination.

CMHT 5550 Promotional Strategies

Analyze internal, external and situational factors that influence promotion strategies including advertising, public relations, promotions and salesmanship. Formulate and judge promotion strategies that generate added economic value to textile, apparel, home furnishings, or hospitality products or companies.

CMHT 5850 Qualitative Research Methods in Consumer Behavior Studies

Explores the design and use of qualitative research methodologies and how the various qualitative research methods contribute to the insight and depth of our understanding of the consumer. Students identify research topics and prepare a manuscript for publication.

Hospitality Management Courses

HMG 5280 Hotel and Restaurant Operations: Theory and Analysis

Study of hotel and restaurant management operations problems, including the areas of budgeting, human resource scheduling and payroll control, sales forecasting, costing and financial statement analysis. Students are actively involved in writing and discussing cases on current operations issues.

HMG 5530 International Sustainable Tourism

Examines the philosophy, concepts and attitudes prevalent in practices of sustainable tourism in global destinations. Emphasizes the social/cultural, environmental and economic elements of sustainable tourism development. The variety of ways sustainable tourism activities are organized internationally and best practices are explored.

HMG 5540 Tourism Services Management and Marketing

Concepts, tools and strategies necessary to effectively manage and market tourism services at the operational and destination level. The distinct character of tourism services and implications for management and marketing are explored. Topics include foundations of tourism management and marketing, managing tourism relationships, market-oriented management, marketing the operational and destination image (branding), tourism servicescapes, and managing a tourism service culture.

HMG 5560 Planning and Policy in Sustainable Tourism

Examines strategic policy development and implementation as it relates to sustainable tourism development and management. Emphasis is placed on public and private policy, planning strategies and techniques, and strategic management as process in sustainable tourism development. Macro and micro environments as well as the social/cultural, environmental, and economic realities of planning and policy making are explored.

HMG 5580 Hospitality and Tourism Information Technology Strategies

In-depth discussion and analysis of the strategic use of information technologies from the consumer perspective in the hospitality and tourism industries. Topics include theoretical foundations of IT studies, behavioral foundations in travel and tourism, consumer behavior in a digital environment, web site evaluation, social media, search engine marketing, and emergent marketing strategies.

HMG 5585 Smart Destinations

Focuses on managing destination in the tourism and hospitality industry in a competitive manner through scientific data-driven methods. Emphasis includes big data, demand analytics, experience analytics, geanalytics, web and social media analytics, benchmarking analysis and impact analysis.

HMG 5630 Advanced Convention and Event Management

Focus on meeting, exhibition, event, and convention industry. Topics include planning, designing, managing and evaluating small to large events; applying industry professional standards; and the impacts of event management on operations. Addresses the major trends and successful practices in event management.

Merchandising Courses

MDSE 5240 Global Retailing

Strategic perspective of fashion-oriented products in a dynamic marketplace. Included are case analyses of merchandising principles practiced by representative companies. Interpretations of global trends and issues affecting multi-channel distribution.

MDSE 5500 Merchandising Strategies

Merchandising theory, principles and practice applied to the strategic planning, developing and presenting of textile, apparel and home furnishings product lines. How consumer driven markets motivate product sourcing, pricing, assortment, styling and timing in the global distribution pipeline.

MDSE 5620 Socio-Cultural Analysis of Dress

Explores the social, psychological and cultural theories of dress and appearance.

MDSE 5650 International Sourcing

Critical analysis of merchandising principles and practices in a global context with emphasis on economic, political, environmental, cultural and social issues; geographic distribution; trade theory; trade data; and technological developments. Contrast the global dominance of textile, apparel and home furnishings industries on world trade and on consumer-driven markets by country and geo-political regions.

APPENDIX B

Five – Year Faculty Recruitment Plan and Hiring Schedule

Table 61. Five – Year Faculty Recruitment Plan and Hiring Schedule ¹					
Faculty	Year 1 FY20	Year 2 FY21	Year 3 Hire for FY 22	Year 4 Hire for FY23	Year 5 Hire for FY24
Assistant Professor			<u>Recruit AY 2021 - 2022</u> Expertise in technology applications (AI, VR). Salary: \$100 – 120 K	<u>Recruit AY 2022 – 2023</u> Expertise in digital environments Salary: \$100 – 120K	
Associate or Professor					<u>Recruit AY 2023 - 2024</u> Expertise in Data Analytics Salary: \$120 - \$135 K

¹No new faculty hires to support PhD are made in the first two years of launch per THECB.

APPENDIX C

Institution's Policy on Faculty Teaching Load

Faculty members at the **University of North Texas** have a variety of duties and responsibilities associated with the mission of the institution, including the essential functions of teaching, research/scholarship/creative activities, and professional service/leadership. Work in these areas constitutes the faculty member's professional obligation to the University and must reflect a 100% time effort.

See full Policy at:

https://policy.unt.edu/sites/default/files/06.027_AcademicWorkload_2017_1.pdf

APPENDIX D

Itemized List of Capital Equipment Purchases during the Past Five Years ²

Dr. Bugao Xu joined UNT August 1, 2016 after 24 years at University of Texas Austin. In this transition, Dr. Xu moved his research lab from UT to UNT. Table 58 provide information on capital equipment purchased in FY17 and FY18 for two research labs directed by Dr. Bugao Xu. Table 59 provides information on capital equipment that was transferred from UT Austin to UNT. This equipment is housed in the Science Research Building in the space assigned to Dr. Xu for: (1) Applied Imaging Technology Lab, and (2) Artificial Intelligence in Retail Lab.

Table 62. Capital Equipment Purchases during Past Five Years				
No.	Equipment	Model	Company	Price
1.	X-ray imaging system	NXR-20	Pacific X-ray Imaging	30,000
2.	High-power laser	Magnum 4000	Coherent Inc.	10,000
3.	Digital Microscope	VHX-2000	Keyence	20,000
4.	3D printer (wireless)	A-02-73 (Dual-Extruder)	Leapfrog	10,000
5.	360, 3D Photography Machine	3D MFP	Ortery Technologies	28,761
6.	Computers and peripherals			10,000
TOTAL				108,761

No.	Table 63. Capital Equipment Transferred in FY17 from UT – Austin to UNT	Number of Items
1.	SICK IVC 3D scanning system (1k points/line, 0.04mm depth resolution)	2
2.	SICK IVC Ranger E50 3D camera (1536 points/line, 0.5mm depth resolution)	1
3.	SICK LMS-400 Laser Range Sensor (3mm depth resolution)	2
4.	Minolta Vivid 900 3D digitizer (1mm depth resolution)	1
5.	PXI XR80 X-ray Imaging System	1
6.	VIDERE DESIGN DTH-DCSG-STOC Stereo Camera	4
7.	Prosilica GE1050 GigE cameras (high frame rate)	1
8.	Dalsa Spider III GigE and P2-4k camlink line-scan camera	1
9.	StockerYale MagII-4w Laser projector	1
10.	Canon Rebel SLR cameras	5
TOTAL		19

² "Equipment" has the meaning established in the Texas Administrative Code §252.7(3) as items and components whose cost are over \$5,000 and have a useful life of at least one year.

APPENDIX E Librarian's Statement of Adequate Resources



January 29, 2018

Library Resources to Support the Consumer Experience Management PhD Proposed Program

Each department has a library liaison. The library liaison works with the UNT Libraries Collection Development Department to assess library resources necessary for programs. Below is a description of the plans to build the library holdings to support the program.

Assessment of Library Resources Necessary for the Program

The Consumer Experience PhD will build upon existing courses and will cover existing subject areas, albeit in greater depth than at the undergraduate level.

Consumer Experience overlaps heavily with Marketing, a strong area of research for many programs at UNT and already well-supported by the Library. UNT Libraries' holdings compare favorably to rival PhD programs; we have most of the widely-held resources that support this area. The Libraries' collections are particularly strong in applied psychology, sociological theory and methods, marketing, and electronic systems and computer-related business topics.

The Library is currently conducting a refresh and enhancement of all business-related collections, and will be purchasing materials that support the Consumer Experience PhD as well as many other related areas. We will purchase award-winning monographs, highly-ranked journals, and enhance areas of the collection needing more recent and more online resources, particularly advertising. Databases to which we currently do not provide access will be investigated.

Assessment conducted by:
Laurel Sammonds Crawford
Head of Collection Development
UNT Libraries
On January 18, 2018

Sincerely,

A handwritten signature in black ink that reads "Mary Ann Venner". The signature is written in a cursive style.

Mary Ann Venner
Associate Dean for Public Services
University of North Texas Libraries

1155 Union Circle #305190 940.565.2411 www.library.unt.edu
Denton, Texas 76203-5017 940.369.8760 fax

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APPENDIX F

Articulation Agreements with Partner Institutions

The proposed PhD in Consumer Experience Management has no articulation agreements regarding this degree with any other institution.

APPENDIX G

Curricula Vitae for Core Faculty

1. Judith C. Forney, PhD., Professor
2. Bharath Josiam, Ph.D., Professor
3. Haejung Maria Kim, PhD., Professor
4. Jiyoung Kim, PhD., Associate Professor
5. Young Hoon Kim, PhD., Associate Professor
6. Xi Y. Leung, PhD., Assistant Professor
7. Tammy Kinley, PhD., Professor
8. Kiseol Yang, PhD., Associate Professor
9. Bugao Xu, PhD., Professor

APPENDIX H

Curricula Vitae for Support Faculty

1. Priscilla Connors, PhD., Associate Professor
2. Birendra KC, Ph.D., Assistant Professor
3. Lisa Kennon, PhD., Associate Professor
4. Dee Knight, PhD., Associate Professor
5. Jihye Min, PhD., Assistant Professor
6. Sanjukta Pookulangara, PhD., Associate Professor
7. Daniel Spears, PhD., Associate Professor
8. Han Wen, PhD., Assistant Professor

APPENDIX I

Industry Letters of Support

- a. Richard Last, Founding Partner, Axcelora
- b. Steve Woodward, President, Crate & Barrel
- c. Ruth Crowley, V.P. Customer Experience Design, Lowe's
- d. Craig Wax, Executive VP, Magid
- e. Stacey L. Renfro, SVP Ecommerce, Pier 1 Imports



2708 Bowie Drive
Plano, TX 75025
214.244.1595

Feb. 27 2018

To: Judith C. Forney, Ph.D.,
Re: Support of PhD in Consumer Management

My name is Richard E Last, Founding Partner at Axcelora, and past President of JCP eCommerce LP, where I was responsible for the business success of JCPenney.com in its rapid growth years in the mid 2000's.

JCPenney.com achieved a leadership position among all apparel and home furnishings retailers in the late 90's and early 2000's by focusing on a fast, flexible, reliable website, along with a complete and full merchandise assortment, and an efficient distribution system. With the understanding that we had opened a window of opportunity, we embarked on the next phase of accelerating our leadership, which was to create a unique experience that would surprise and delight our customers. Initially we outsourced this major undertaking to third party web design and CX firms while we built an internal team.

To head up our Customer Experience team, we hired a PhD in Human Factors – Industrial Psychology as our manager of customer experience. Over time, she assembled a team of specialists in user centered design, consumer research, user acceptance testing, multivariate testing, and data analysis. The team members had Bachelor's degrees, and in some cases Master's degrees in related fields, as well as industry certifications where needed. This team in turn worked with our merchants, marketers, IT professionals, customer care, and 3rd party designers and developers. The end result was this team playing a major role in JCPenney.com becoming the first apparel and home furnishings website to achieve \$1 Billion in revenue, and then, two years later, \$1.5 Billion.

When we focused on customer experience management, we were an exception to the rule in the retail industry. In today's Omnichannel world of retailing, this is no longer the case. Customer Experience Management is a necessity if retailers are to survive in a very competitive marketplace and retain and grow their customer base. This means today, retailer either have, or are in the process of building or growing their customer experience teams, and this in turns means more need for graduates coming out of school with an understanding of these disciplines. The time is right, if not overdue, to address this need through your PhD program.

Regards,

A handwritten signature in black ink that reads "Richard E. Last".

Richard E. Last
Richard.Last@axcelora.com
www.axcelora.com
Founding Partner, Axcelora
University of North Texas Merchandising Board of Governors
Chairman Emeritus, Shop.org

"Making the cold call obsolete"

Crate and Barrel
1250 Techny Road
Northbrook, IL 60062
Phone 847.272.2888
Fax 847.272.5366

September 13, 2017

Judith Forney, Dean and Professor
College of Merchandising, Hospitality and Tourism
University of North Texas
1155 Union Circle #311100
Denton, TX 76203

Dear Judith,

Congratulations on your new BS in Consumer Experience Management program at UNT. Further expanding your college's academic programs by **proposing the PhD in Consumer Experience Management** will significantly add to this emerging area of study and research.

I just received the article linked below that seems to completely reinforce your idea.
<https://www.prophet.com/thinking/2017/08/why-customer-experience-cant-wait/>

We have been working with the company PROPHET to define our customer and to help Crate and Barrel on our journey to thrive in this new era of customer expectations for spectacular and seamless consumer experiences. I am also working with a European company called INTERBRAND to help us define our future strategy in this critical area.

Anything I can do to help your program would be welcome. Maybe Crate and Barrel could be a test brand in your new degree programs?

Best regards,



Steve Woodward
President

SW/kc

Crate&Barrel



Ruth Crowley
Vice President
Human Centered Design
Lowe's Companies Inc.
1000 Lowe's Blvd.,
 Mooresville, NC 28117

To Whom It May Concern

Thank you for the opportunity to endorse the potential addition of Customer Experience Management to the curriculum at the University of North Texas.

The incorporation of Customer Experience Management in the curriculum again puts the University of North Texas College of Merchandising, Hospitality and Tourism at the forefront, pioneers in anticipating the needs of the industry. It is another quiet first for Merchandising and Dr. Forney.

The descriptions, narrative and related rationale submitted are not only thorough and extremely well crafted, they accurately describe the value of the addition and the potential breadth of its impact for Companies in the U.S. The skills are needed and additive universally, but available talent is lacking opening the door again for UNT to help provide the next generation of Leaders. The insights, analytics and applied research in Customer Experience Management are critical and applicable across all industry segments. Companies are just beginning to understand the value proposition.

Customer Experience Management is not "just" about creating satisfied customers. While it is a desired outcome, the process if done right, is much more technical, more agile, more analytical and centered in design thinking. It also adds discipline and objectivity to Experience optimization. Research and industry reports would confirm that Companies who formally incorporate Experience Design and Customer Experience Management, have seen double digit sustainable growth in addition to improved or stabilized Customer loyalty. This is true in Banking, Tourism, Retail, Hospitality, Travel and other industries. Incorporating CXM can be transformative.

As a Fortune Top 40 Company, Lowe's is fully invested in Customer Experience largely driven by the Customer Experience Design Group. Customer Experience Design is about intentionally shaping the customer's interactions with the Lowe's brand to deliver feelings and memories that increase emotional attachment and deliver value. The methodology is rooted in Human Centered Design principles and philosophies. The skill set within the Group is diverse including Business Design Framework, Physical, Digital, Service and Industrial Design, Narrative Design and Storytelling and Customer Research. Research includes ethnographic, qualitative and quantitative, intercept studies and one-on-one research, customer journey mapping, development of customer personas. Process is balanced with data, insights and analytics. To further the scale of the process, rapid prototyping, test and learn ideation are included to ensure optimal outcome and empathy for the end-user.

Human Centered Design is a creative and disciplined approach to problem solving that starts with people and ends with sometimes unexpected answers and innovative solutions, tailor made to suit the business objectives. Following the process, we creatively Design solutions and solve for optimal Customer Experience. We will test solutions before expanding throughout the Network and iterate as needed based on Customer response. The Customer is at the center of everything we do. Process is inclusive of digital, physical and omni channels as part of one cohesive 360 experience for the Customer. Understanding most shopping journeys begin on line, it is critical the Customer Experience is seamless and frictionless and consistent across channels. We must give the Customer reason to get off the couch and come to our stores. Success of the process is influenced by collaboration across functions and disciplines. Shared understanding, intelligence and ownership always has a positive effect on results. Some of the criteria included in the plan submitted by Dr. Forney will help students develop the technical skills and foundational experience needed to be fully equipped to positively and effectively navigate the Customer Experience Journey.

1000 Lowe's Blvd., Mooresville, NC 28117



Given the evolution and extreme change in the industry and in the business environment, no company can afford to stand still or be satisfied with the status quo. I can unequivocally say, that every company can benefit from Customer Experience Design and Customer Experience Management. It requires patience and discipline and acceptance of the fact we don't know all the answers. Conversely, the value and the return are value-added, representing incremental return on investment. Customer Experience Management is a key differentiator if executed effectively. With over 15 years' association with Dr. Forney and her Team and with UNT CMHT Board of Governors, I am extremely proud of the continued innovation, care for Students and the tenacity and resourcefulness to stay a few steps

ahead of the industry in anticipation of needs. Based on a lengthy experience in the industry I would also fully endorse the new curriculum and again, congratulate the University of North Texas for proceeding and helping transform the business landscape.

Feel free to call if needed,
Sincerely,

Ruth Crowley
Vice President
Customer Experience Design
Lowe's Companies Inc.
407 488 6080

Proud Chair
Board of Governors
College of Merchandising

1000 Lowe's Blvd., Mooresville, NC 28117



WHERE INNOVATIVE RESEARCH
FUELS LEGENDARY BUSINESSES

Magid
6918 Filly Lane
Frisco, TX 75034

September 11, 2017

College of Merchandising, Hospitality and Tourism
University of North Texas
1155 Union Circle #311100
Denton, TX 76203

Dear Judith,

I am writing in support of the proposed PhD in Consumer Experience Management and why it is important for universities to meet this talent need. As EVP of Customer Products and Services at Magid, I can attest to the fact that customer experience management is an area where our company is extensively investing. Magid is focusing on Human Centered Design Thinking. It places the consumer at the center of everything that a business does throughout all stages of the customer journey and requires consumer experience management expertise to execute

As time progresses, there is going to be an increasing demand for consumer experience management. Increasingly, employees must have a broader understanding of the consumer experience and be able to apply that understanding across many disciplines. A large component of that understanding requires interacting with consumers and applying a variety of research methodologies, both qualitative and quantitative. Applied research in consumer experience management is greatly needed to offer insights to retail, hospitality, tourism, as well as consumer services and products industries overall. Magid will be hiring people who have deep understanding of consumer experience management in order to meet the needs of its clients.

Just as the BS in Digital Retailing has become an important, unique area of talent development in your college, I believe the PhD in Consumer Experience Management will be a really nice differentiator for UNT.

Sincerely,

A handwritten signature in cursive script that reads "Craig Wax".

Craig Wax
Executive Vice President
Customer Products & Services
Magid

LET'S TALK >> MAGID.COM

NEW YORK | LOS ANGELES | MINNEAPOLIS | DALLAS | IOWA

**CORPORATE OFFICE | 8500 Normandale Lake Blvd | Suite 630 | Minneapolis, MN 55437
Brent Magid, CEO | bmagid@magid.com | 612.216.0729**



February 28, 2018

I am writing to share my support and excitement for the potential PhD in Consumer Experience Management (CEXM) at UNT. The need for research, data, insights and talent in retail around customer experience is at a critical state, and is in very high demand as retail is evolving from a product centric industry to a customer centric industry.

One factor driving the need for Consumer Experience Leadership is the current disruptive state of retail. The retail sector is being impacted significantly by data centric ecommerce retailers, where technology and data is playing a significant role in creating personalized experiences for customers. Historically, retailers have targeted customers based on segmentation criteria such as demographics or historical buying behavior. Today, customers are expecting the brands they shop to know who they are along every touchpoint, and in turn help them in their purchasing path. A retailer's ability to understand the holistic journey, quickly analyze data, gain insights, and react in both real time and in strategic decisions, is critical in today's market.

Another factor impacting the need for Consumer Experience expertise is the shift from product centric retailing to consumer centric retailing. For ages, retailers have always talked about putting the customer first, but it has been selling the products that the retailer thought they should sell or that they thought the customer wanted. Today, retail is evolving to a place where customers are driving the decisions around what product a company should sell and how they should go to market. As product lead times have shortened and competition has increased, product differentiation is becoming more challenging thus putting even more importance in a differentiated Customer Experience.

Today, most retailers are trying to figure out the right organizational structures and talent to create a true Customer Experience organization. Several retailers are pulling together Marketing, Ecommerce, Stores and Merchandising under a Chief Customer Officer. Many very large department stores have already made this move, but are struggling with the lack of expertise and talent currently available in the market.

I am excited about the possibility of this PhD program both for the benefit of grooming talent in this much needed area as well as to create additional insight and research that can be used with our industry to improve the customer experience; and ultimately drive shareholder value.

Sincerely,

Stacey L. Renfro

SVP Ecommerce Pier 1 Imports

slrenfro@pier1.com

817-252-8472

UNT | SYSTEM™

2019 CONSOLIDATED OPERATING BUDGET



UNT UNIVERSITY OF NORTH TEXAS

UNT HEALTH SCIENCE CENTER

UNT DALLAS

2019 Consolidated Operating Budget

The University of North Texas System includes the University of North Texas in Denton, the University of North Texas Health Science Center in Fort Worth and the University of North Texas at Dallas. The UNT System is the only public university system headquartered in Dallas-Fort Worth – the fourth-largest metropolitan area in the United States. We are dedicated to serving our diverse region through a wide offering of degree plans and research initiatives.



Over the past decade, our combined enrollment has grown by more than 25 % to nearly 44,000 students. Our flagship, UNT in Denton, is the region’s most comprehensive university, educating nearly 40,000 students and offering more than 200 degree programs. The UNT Health Science Center in Fort Worth is a State leader in training primary care doctors, and is currently undertaking an innovative public/private partnership to expand this opportunity. UNT Dallas, our region’s emerging urban university, has grown enrollment 40% in the last two years and is designated a Minority Serving and Hispanic Serving Institution by the U.S. Dept. of Education.



UNT System institutions award more than 9,000 degrees each year – including the largest number of master’s and doctoral degrees in the DFW region. The UNT System has an annual budget of \$1 billion and boosts the Texas economy by \$5.2 billion each year.

The images displayed on this page are renderings of the Tuition Revenue Bond (TRB) projects currently underway in the UNT System. These projects include:

- College of Visual Arts and Design (CVAD) on the University of North Texas campus
- Interdisciplinary Research and Education Building (IREB) on the Health Science Center campus
- Municipal Building Renovation for the UNT Dallas College of Law in downtown Dallas
- Student Learning and Success Center (SLSC) on UNT Dallas campus



This document presents The UNT System’s fiscal 2019 Consolidated Operating Budget including the member institutions and System Administration. Each institution has provided a narrative with highlights and assertions used to derive their budget submissions that support their individual strategic goals and objectives and the overarching vision of the UNT System.

Table of Contents

UNT System Consolidated Budget Overview	4
Executive Summary and Highlights.....	4
Consolidated Budgets by Institution.....	6
Consolidated Revenues and Expenses by Fund Category	7
Budget for Revenues, Expenses & Other Changes in Fund Balance.....	9
Budget Detail by Fund Group - Current Funds	10
Budget Detail by Fund Group – Non-Current Funds.....	11
Budgeted Revenue Breakout by Fund - Current Funds	12
UNT Budget Overview	13
Executive Summary and Highlights.....	13
Budget for Revenues, Expenses & Other Changes in Fund Balances	17
Budget Detail by Fund Group – Current Funds.....	18
Budget Detail by Fund Group - Non-Current Funds	19
Budgeted Revenue Breakout by Fund - Current Funds	20
Budget - Current Funds by Quarter	21
UNT Health Science Center Budget Overview	23
Executive Summary and Highlights.....	23
Budget for Revenues, Expenses & Other Changes in Fund Balances	27
Budget Detail by Fund Group – Current Funds.....	28
Budget Detail by Fund Group – Non-Current Funds.....	29
Budgeted Revenue Breakout by Fund – Current Funds	30
Budget - Current Funds by Quarter	31
UNT Dallas Budget Overview	33
Executive Summary and Highlights.....	33
Budget for Revenues, Expenses & Other Changes in Fund Balances	37
Budget Detail by Fund Group – Current Funds.....	38
Budget Detail by Fund Group – Non-Current Funds.....	39
Budgeted Revenue Breakout by Fund – Current Funds	40
Budget - Current Funds by Quarter	41
UNT System Administration Budget Overview	43
Executive Summary and Highlights.....	43
Budget for Revenues, Expenses & Other Changes in Fund Balances	47
Budget Detail by Fund Group – Current Funds.....	48
Budget Detail by Fund Group – Non-Current Funds.....	49
Budgeted Revenue Breakout by Fund – Current Funds	50
Budget - Current Funds by Quarter	51
Appendix	53
Proposed Board Order	53
Budget Office Contact Information	57
Glossary of Terms	58
Transfer Details.....	64

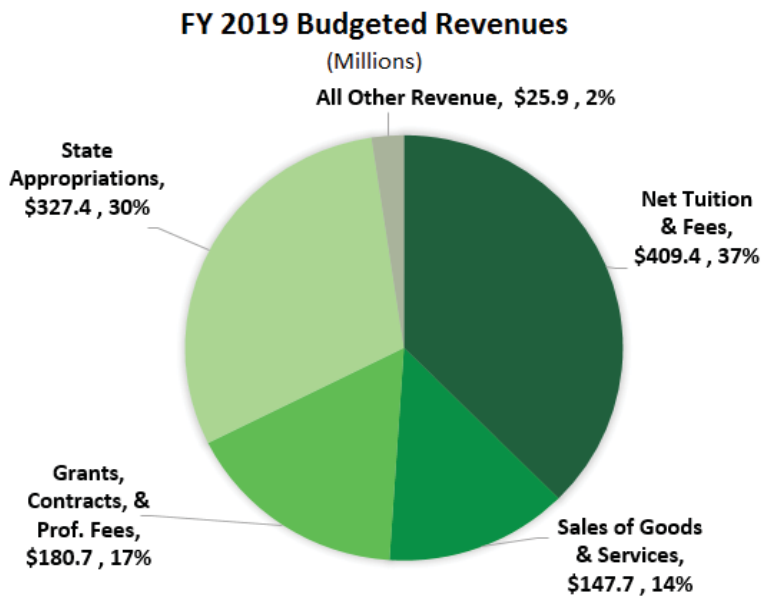
UNT System Consolidated Budget Overview

Executive Summary and Highlights

The University of North Texas System Consolidated Operating Budget Summary Book presents summary information on total sources and uses of the Member Institutions’ and System Administration’s funds by major fund groups for current and non-current funds. Budget planning and development was guided by the campus strategic plans, the policy decisions and planning parameters of the Chancellor and the Board of Regents. Net tuition and fee revenues included in these budgets are based on tuition and required fee rates approved by the Board. The increase in net fee revenues included in the budget is driven by enrollment changes related to student mix, enrollment growth, and financial aid combined with approved rate increases in tuition, and other required fees.

Revenues

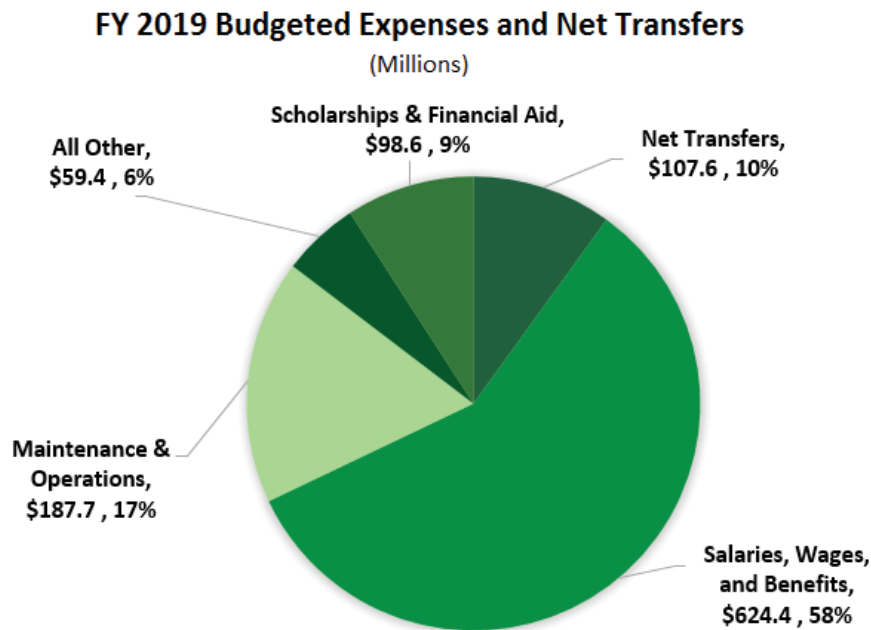
UNT System Consolidated FY 2019 total current funds budgeted revenues are \$1.09 billion. FY 2019 budgeted State Appropriation revenues for UNT System in total are flat compared to FY 2018 budgeted appropriation revenues as this is the second year of the State’s biennium. During the 85th Legislative session (2018-19 Biennium), the State of Texas increased funding for the UNT System in General Revenue funding – which is a net of the increase in funding for Tuition Revenue Bonds (approved in the 84th), and decreases in formula GR, Non-formula Support (formerly Special Items), and research. Net tuition and fees revenues are budgeted at an increase of \$39.5 M (10.7%) for FY 2019 over FY 2018. This increase is attributed to increased enrollment, tuition, fee increases, adjustments between discounts and allowances, and scholarship expenses.



Expenses & Transfers

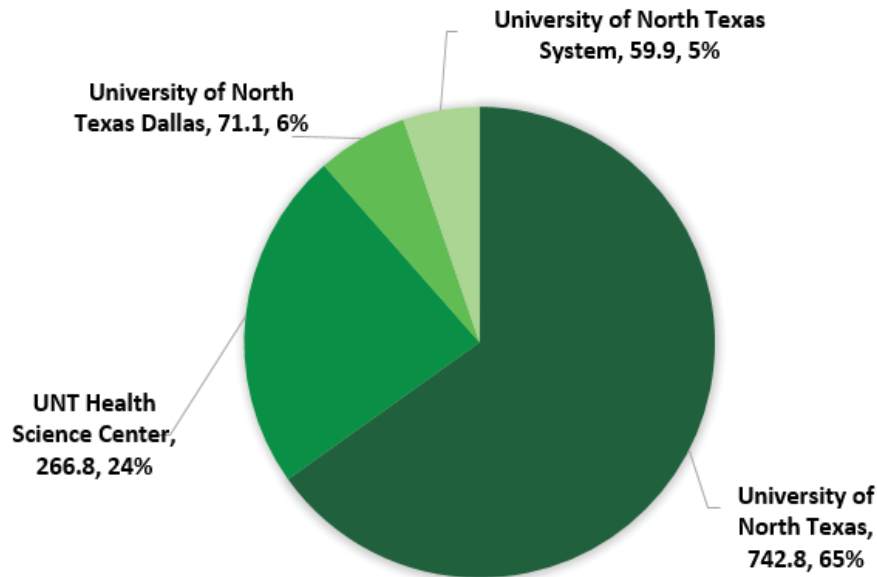
Total current funds budgeted Expenses and transfers for UNT System for FY 2019 are \$1.08 billion. Total Personnel Costs make up the largest portion of expenses at \$624.4 M or 58% of the current funds expense budget. The majority of current fund expenses are from Education and General (E&G) funds (37%) and Designated Operating funds (41%).

The UNT System Consolidated Operating Budget reflects an impact on fund balances in current funds of approximately \$13.1 M. Where applicable, planned usages of fund balance are included on an institution's budget template, and are included on the UNT System Consolidated detail template.



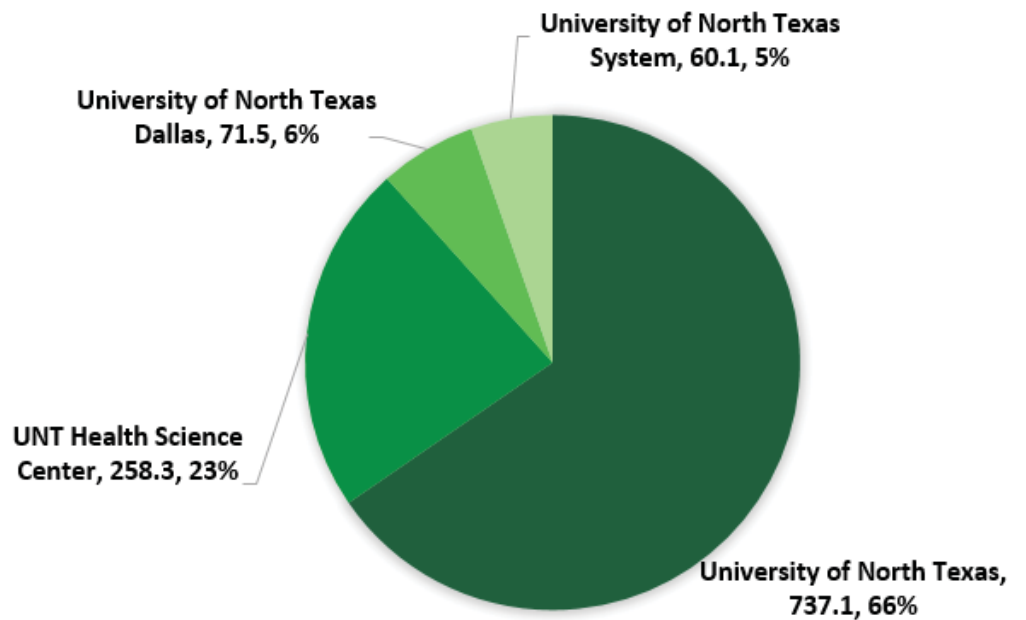
FY 2019 Revenues and Net Transfers by Component

(Millions)



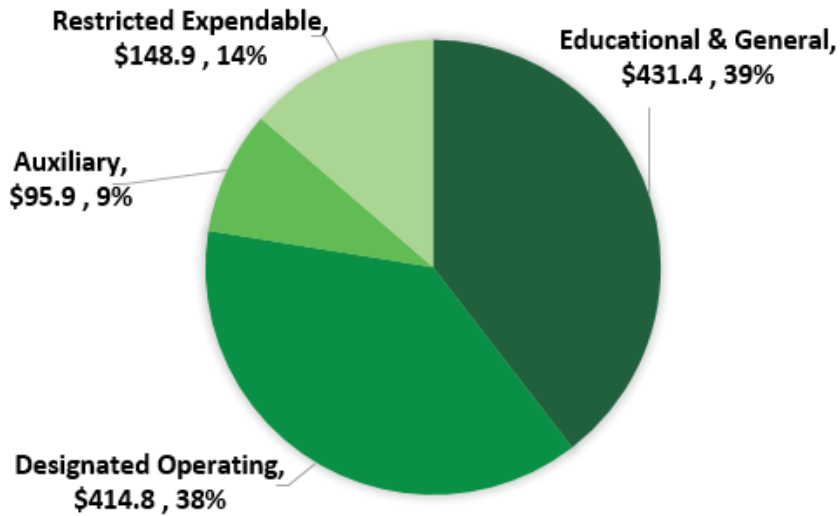
FY 2019 Expenses and Net Transfers by Component

(Millions)



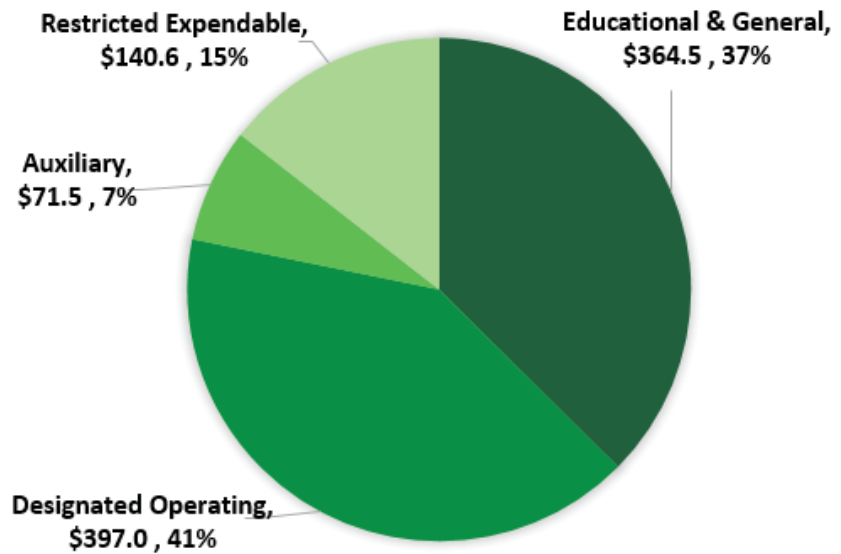
FY 2019 Budgeted Revenues by Fund Category

(Millions)



FY 2019 Budgeted Expenditures by Fund Category

(Millions)



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FY 2019 Summary – Current Funds

Budget for Revenues, Expenses & Other Changes in Fund Balance

	FY 2018 Budget	FY 2018 Forecast (Actuals)	FY 2019 Budget	Increases (Decreases)	
				FY 2019 to FY 2018 Est Amount	Actuals Percent
Revenues					
Net Tuition and Fees	369,943,808	373,700,000	409,436,226	35,736,226	9.6%
Sales of Goods and Services	140,922,481	148,492,127	147,686,680	(805,446)	-0.5%
Grants and Contracts	144,330,498	155,053,870	166,994,045	11,940,176	7.7%
State Appropriations	269,655,483	272,575,727	270,653,774	(1,921,953)	-0.7%
Capital Appropriations	56,766,916	56,766,916	56,766,916	-	0.0%
Net Professional Fees	13,722,182	16,000,000	13,740,100	(2,259,900)	-14.1%
Gift Income	11,780,214	12,625,000	14,936,496	2,311,496	18.3%
Investment Income	6,484,715	9,400,000	9,242,899	(157,101)	-1.7%
Other Revenue	1,272,356	2,037,399	1,706,549	(330,850)	-16.2%
Total Revenues	1,014,878,652	1,046,651,038	1,091,163,686	44,512,648	4.3%
Expenditures					
Salaries - Faculty	196,180,192	189,045,992	209,199,833	20,153,841	10.7%
Salaries - Staff	244,573,024	238,986,290	260,194,287	21,207,996	8.9%
Wages and Other Compensation	36,855,089	29,401,761	31,026,685	1,624,924	5.5%
Benefits and Other Payroll-Related Costs	124,068,130	121,828,151	123,980,114	2,151,962	1.8%
Subtotal - Personnel Costs	601,676,435	579,262,194	624,400,918	45,138,724	7.8%
Cost of Goods Sold	12,320,640	8,682,823	8,206,524	(476,299)	-5.5%
Professional Fees and Services	48,007,899	56,213,985	58,418,738	2,204,753	3.9%
Travel	13,578,634	12,418,316	13,459,623	1,041,307	8.4%
Materials and Supplies	40,219,315	43,964,191	48,007,484	4,043,293	9.2%
Communication and Utilities	14,068,587	16,692,936	18,960,768	2,267,833	13.6%
Repairs and Maintenance	28,209,773	26,470,770	26,447,670	(23,100)	-0.1%
Rentals and Leases	10,587,350	15,464,985	7,956,585	(7,508,400)	-48.6%
Printing and Reproduction	3,251,014	4,569,732	6,235,352	1,665,620	36.4%
Other Expenditures	27,069,346	31,455,077	30,110,446	(1,344,631)	-4.3%
Subtotal - Maintenance & Operation Costs	197,312,558	215,932,816	217,803,190	1,870,374	0.9%
Capital Expenditures	19,923,816	23,682,991	27,657,540	3,974,549	16.8%
Federal and State Pass-Through Expense	852,650	11,652,650	1,589,793	(10,062,857)	-86.4%
Scholarships	83,312,792	84,500,000	98,605,265	14,105,265	16.7%
Total Expenses	902,298,655	915,030,651	970,056,706	55,026,054	6.0%
Transfers					
Intra-campus Transfers Between Funds					
Inter-Fund Transfer In/(Out)	(29,738,556)	(35,704,487)	(32,428,130)	3,276,357	-9.2%
Transfers Between UNTS Components					
System Services Allocations	-	1,117,718	-	(1,117,718)	-100.0%
Debt Service Transfer In (Out)	(76,213,449)	(75,505,452)	(52,157,280)	23,348,172	-30.9%
Other Inter-Unit Transfers In/(Out)	(166,138)	(620)	(24,484,981)	(24,484,361)	3952277.8%
Other Transfers					
Transfer to Other State Agencies In/(Out)	(141,823)	614,257	600,000	(14,257)	-2.3%
Legislative Transfers In/(Out)	4,367,750	8,213,860	883,177	(7,330,683)	-89.2%
Transfer between UNTS Components	(76,379,586)	(7,869,781)	(74,625,415)	(66,755,634)	848.3%
Total Transfers	(101,892,215)	(109,134,505)	(107,587,214)	1,547,291	-1.4%
Estimated Impact on Fund Balance	10,687,782	23,897,455	13,519,766	(10,377,689)	-43.4%
Planned Use of Fund Balance & Debt Proceeds	3,297,512	2,101,723	990,278	(1,111,445)	-52.9%

**FY 2019 – Consolidated UNT System
Budget Detail by Fund Group - Current Funds**



	<i>Current Funds</i>				
	Educational & General	Designated Operating	Auxiliary	Restricted Expendable	Current Funds
REVENUES					
Net Tuition and Fees	78,351,320	313,609,907	17,474,999	-	409,436,226
Sales of Goods and Services	292,502	68,324,861	78,225,568	843,750	147,686,680
Grants and Contracts	25,290,639	5,572,939	-	136,130,467	166,994,045
State Appropriations	270,555,343	-	-	98,431	270,653,774
Capital Appropriations	56,766,916	-	-	-	56,766,916
Net Professional Fees	-	13,740,100	-	-	13,740,100
Gift Income	-	3,153,656	3,590	11,779,250	14,936,496
Investment Income	117,883	8,979,270	138,746	7,000	9,242,899
Other Revenue	58,000	1,429,123	219,426	-	1,706,549
Revenues	431,432,603	414,809,856	96,062,329	148,858,898	1,091,163,686
EXPENDITURES					
Salaries - Faculty	133,547,324	64,733,309	2,259	10,916,942	209,199,833
Salaries - Staff	107,554,348	112,988,502	22,145,894	17,505,544	260,194,287
Wages and Other Compensation	3,613,017	16,156,624	4,854,927	6,402,116	31,026,685
Benefits and Other Payroll-Related Costs	67,588,702	41,572,428	7,132,853	7,686,131	123,980,114
Cost of Goods Sold	-	882,843	7,313,781	9,900	8,206,524
Professional Fees and Services	1,086,032	41,622,957	2,626,859	13,082,891	58,418,738
Travel	28,817	12,238,705	88,544	1,103,557	13,459,623
Materials and Supplies	8,086,371	31,740,933	4,309,523	3,870,656	48,007,484
Communication and Utilities	701,066	13,051,217	5,085,001	123,484	18,960,768
Repairs and Maintenance	5,218,645	11,624,261	8,256,020	1,348,744	26,447,670
Rentals and Leases	321,632	6,470,321	762,614	402,018	7,956,585
Printing and Reproduction	56,197	5,458,562	347,126	373,467	6,235,352
Debt Service - Principal	-	-	-	-	-
Debt Service - Interest	-	-	-	-	-
Capital Expenditures	14,070,320	8,450,951	3,787,848	1,348,421	27,657,540
Federal and State Pass-Through Expense	12,407	-	-	1,577,386	1,589,793
Scholarships	20,011,938	5,561,698	718,811	72,312,817	98,605,265
Other Expenditures	2,614,138	21,041,454	3,874,777	2,580,077	30,110,446
Expenditures	364,510,953	393,594,764	71,306,837	140,644,151	970,056,706
TRANSFERS					
<i>Intra-campus Transfers Between Funds:</i>					
Inter-Fund Transfer In/(Out)	(25,797,105)	2,734,045	(1,543,132)	(7,821,938)	(32,428,130)
<i>Transfers Between UNTS Components:</i>					
System Services Allocations	-	-	-	-	-
Debt Service Transfer In (Out)	(15,892,733)	(16,746,956)	(19,517,592)	-	(52,157,280)
Other Inter-Unit Transfers In/(Out)	(23,405,020)	(490,748)	(589,213)	-	(24,484,981)
<i>Other Transfers:</i>					
Transfer to Other State Agencies In/(Out)	-	600,000	-	-	600,000
Legislative Transfers In/(Out)	883,177	-	-	-	883,177
Transfers	(64,211,681)	(13,903,660)	(21,649,936)	(7,821,938)	(107,587,214)
Estimated Impact on Fund Balance	2,709,969	7,311,432	3,105,556	392,809	13,519,766
Planned Use of Fund Balance & Debt Proceeds					
Student Service Fees Reserves	-	45,000	-	-	45,000
Auxiliary Funded Projects	-	-	-	-	-
Instructional Program Fee Reserves	-	314,055	-	-	314,055
Prior Year Project Funds	-	-	-	-	-
Undergraduate Advising Fee Reserve	-	38,000	-	-	38,000
Operations Support	-	289,986	-	-	289,986
Planned Use of Fund Balance ? Lofts	-	-	303,237	-	303,237
Debt Proceeds	-	-	-	-	-
Planned Use of Fund Balance & Debt Proceeds	-	687,041	303,237	-	990,278

FY 2019 – Consolidated UNT System



Budget Detail by Fund Group – Non-Current Funds

	Non-Current Funds				FY19
	Endowment Funds	Loan Funds	Plant and Debt	Non-Current	Allfunds
REVENUES					
Net Tuition and Fees	-	380,000	-	380,000	409,816,226
Sales of Goods and Services	-	1,000	-	1,000	147,687,680
Grants and Contracts	475,000	-	-	475,000	167,469,045
State Appropriations	-	-	-	-	270,653,774
Capital Appropriations	-	-	-	-	56,766,916
Net Professional Fees	-	-	-	-	13,740,100
Gift Income	2,990,000	-	8,500,000	11,490,000	26,426,496
Investment Income	2,228,062	-	243,704	2,471,766	11,714,665
Other Revenue	150,000	45,000	-	195,000	1,901,549
Revenues	5,843,062	426,000	8,743,704	15,012,766	1,106,176,452
EXPENDITURES					
Salaries - Faculty	-	-	-	-	209,199,833
Salaries - Staff	-	-	-	-	260,194,287
Wages and Other Compensation	-	-	-	-	31,026,685
Benefits and Other Payroll-Related Costs	-	-	-	-	123,980,114
Cost of Goods Sold	-	-	-	-	8,206,524
Professional Fees and Services	486,000	45,000	2,835,000	3,366,000	61,784,738
Travel	-	-	-	-	13,459,623
Materials and Supplies	-	-	-	-	48,007,484
Communication and Utilities	-	-	-	-	18,960,768
Repairs and Maintenance	-	-	-	-	26,447,670
Rentals and Leases	-	-	-	-	7,956,585
Printing and Reproduction	-	-	-	-	6,235,352
Debt Service - Principal	-	-	44,393,272	44,393,272	44,393,272
Debt Service - Interest	-	-	34,599,261	34,599,261	34,599,261
Capital Expenditures	-	-	192,189,793	192,189,793	219,847,333
Federal and State Pass-Through Expense	-	-	-	-	1,589,793
Scholarships	-	950,000	-	950,000	99,555,265
Other Expenditures	-	29,996	-	29,996	30,140,442
Expenditures	486,000	1,024,996	274,017,326	275,528,322	1,245,585,028
TRANSFERS					
<i>Intra-campus Transfers Between Funds:</i>					
Inter-Fund Transfer In/(Out)	(1,903,062)	2,221,399	32,109,793	32,428,130	-
<i>Transfers Between UNTS Components:</i>					
System Services Allocations	-	-	-	-	0
Debt Service Transfer In (Out)	-	-	52,157,280	52,157,280	-
Other Inter-Unit Transfers In/(Out)	-	-	24,484,981	24,484,981	0
<i>Other Transfers:</i>					
Transfer to Other State Agencies In/(Out)	-	-	-	-	600,000
Legislative Transfers In/(Out)	-	-	-	-	883,177
Transfers	(1,903,062)	2,221,399	108,752,054	109,070,391	1,483,177
Estimated Impact on Fund Balance	3,454,000	1,622,403	(156,521,568)	(151,445,165)	(137,925,399)

Planned Use of Fund Balance & Debt Proceeds

Student Service Fees Reserves	-	-	-	-	45,000
Auxiliary Funded Projects	-	-	9,540,000	9,540,000	9,540,000
Instructional Program Fee Reserves	-	-	-	-	314,055
Prior Year Project Funds	-	-	3,385,272	3,385,272	3,385,272
Gift Funds for Capital Expenses	-	-	5,730,000	5,730,000	5,730,000
Undergraduate Advising Fee Reserve	-	-	-	-	38,000
Operations Support	-	-	-	-	289,986
Planned Use of Fund Balance ? Lofts	-	-	-	-	303,237
Debt Proceeds	-	-	140,110,000	140,110,000	140,110,000
Planned Use of Fund Balance & Debt Proceeds	-	-	158,765,272	158,765,272	159,755,551

FY 2019 – Consolidated UNT System
Budgeted Revenue Breakout by Fund - Current Funds



	Current Funds				Current Funds
	Educational & General	Designated Operating	Auxiliary	Restricted Expendable	
Resident Undergrad Tuition	48,089,654	221,302,005	-	-	269,391,660
Non-resident Undergrad Tuition	26,690,322	13,243,585	-	-	39,933,907
Other Undergrad Tuition	6,257,000	155,531	-	-	6,412,531
Waivers Undergrad Tuition	(18,844,155)	(135,760)	-	-	(18,979,915)
Gross Undergraduate Tuition	62,192,821	234,565,361	-	-	296,758,182
Resident Graduate Tuition	22,903,216	33,878,195	-	-	56,781,411
Non-resident Graduate Tuition	20,043,464	7,770,415	-	-	27,813,879
Other Graduate Tuition	111,638	2,608,777	-	-	2,720,415
Waivers Graduate Tuition	(4,005,845)	(28,860)	-	-	(4,034,705)
Gross Graduate Tuition	39,052,473	44,228,527	-	-	83,281,000
Fees - Instructional	351,370	26,815,733	-	-	27,167,103
Fees - Mandatory	-	83,484,288	17,268,799	-	100,753,087
Fees - Incidental	-	12,041,647	217,500	-	12,259,147
Waivers - Fees	(204,005)	(591,925)	(11,300)	-	(807,230)
Gross Fees	147,365	121,749,742	17,474,999	-	139,372,106
Disc & Allow-Tuition and Fee	(23,041,340)	(86,933,723)	-	-	(109,975,063)
Discount and Allowances	(23,041,340)	(86,933,723)	-	-	(109,975,063)
Tuition and Waiver Conversion	-	-	-	-	-
Net Tuition and Fees	78,351,320	313,609,907	17,474,999	-	409,436,226
Athletics	-	7,720,130	-	-	7,720,130
Auxiliary Enterprises	-	356,089	72,612,668	-	72,968,757
Discounts and Allowances - Auxiliaries	-	-	-	-	-
Other Sales of Goods and Services	292,502	60,248,641	5,612,900	843,750	66,997,794
Sales of Goods and Services	292,502	68,324,861	78,225,568	843,750	147,686,680
Federal Programs and Contracts	-	329,011	-	58,942,044	59,271,055
Federal Financial Aid	-	-	-	63,124,834	63,124,834
State Programs and Contracts	7,571	3,467,820	-	5,091,540	8,566,931
State Financial Aid	25,283,068	-	-	140,000	25,423,068
Other Grants and Contracts	-	1,776,108	-	8,832,049	10,608,157
Grants and Contracts	25,290,639	5,572,939	-	136,130,467	166,994,045
State Appropriations - General	223,927,839	-	-	-	223,927,839
State Appropriations - Additional	46,627,504	-	-	98,431	46,725,935
State Appropriations	270,555,343	-	-	98,431	270,653,774
Capital Appropriations - HEF	56,766,916	-	-	-	56,766,916
Capital Appropriations	56,766,916	-	-	-	56,766,916
Gross Professional Fees	-	34,512,751	-	-	34,512,751
Contractual Allowances and Discounts	-	(20,772,651)	-	-	(20,772,651)
Net Professional Fees	-	13,740,100	-	-	13,740,100
Gift Income	-	3,153,656	3,590	11,779,250	14,936,496
Investment Income	117,883	8,979,270	138,746	7,000	9,242,899
Other Revenue	58,000	1,429,123	219,426	-	1,706,549
Revenues	431,432,603	414,809,856	96,062,329	148,858,898	1,091,163,686

Executive Summary and Highlights

Strategic Impact and Major Goals Addressed by FY 2019 Budget

At the University of North Texas, our caring and creative community prepares students for careers in a rapidly changing world. One of the state's largest public universities, UNT awarded 9,159 degrees in the 2016-17 academic year and anticipates surpassing that number in 2017-18. Investments made during FY 2019 and in subsequent years will ensure continued growth as a research institution that is focused on delivering an exceptional educational experience.

This year's University of North Texas budget reflects its commitment to our strategic goals to:

- Grow Enrollment & Graduation
- Grow Research
- Grow Foundation Assets
- Grow Top Rated Programs
- Become a Best Place to Work
- Achieve Efficient and Effective Operations

Investments in this budget that will support the university's strategic plan in the coming year, include:

- Expanding recruiting efforts for new students due to increased graduation rates in 2017-18
- Increasing emphasis on retaining current students by expanding student support services
- Expanding in Frisco
- Implementing a new Distance Education Technology model
- Providing funds for new research equipment
- Hiring new faculty
- Providing resources to facilities for the addition of 285,600 square feet
- Reserving 1.5% merit pool in recognition of outstanding faculty and staff members
- Transfer of several student focused service areas back to campus for more effective operations

Continuing investments in key areas will ensure UNT's ability to remain competitive while achieving strategic goals.

Revenues



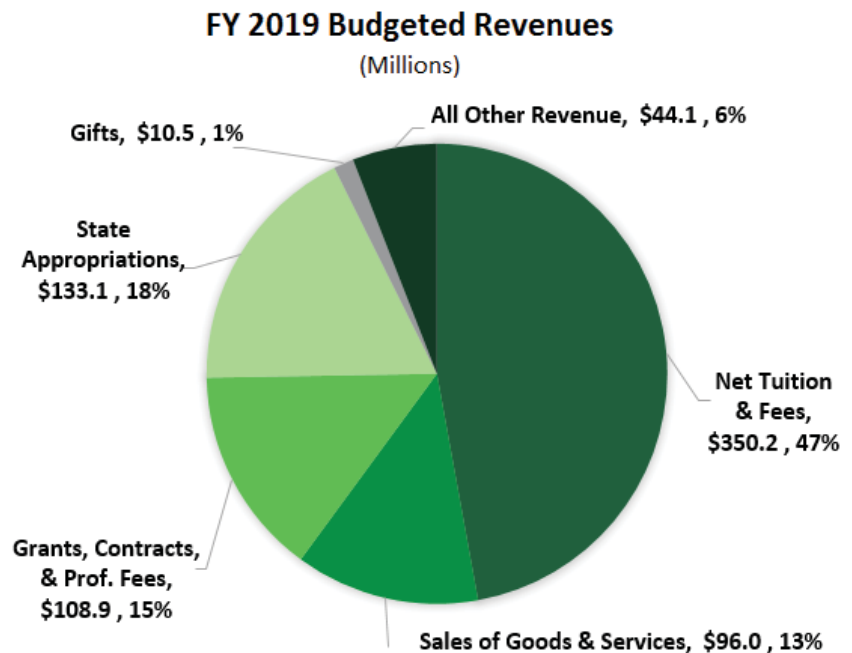
State Appropriations

Support from the 85th Texas Legislative session for the 2018-19 biennium continues to help UNT to transform an increasingly first-generation college student population into the workforce leaders of tomorrow. For FY 2019 UNT will receive:

- \$133 M in general revenue fund and allocations for employee benefits, which includes:
 - \$2.4 M in research funding
 - \$11.5 M in tuition revenue bond retirement
- \$37.56 M in capital appropriation for Higher Education funds (HEF)

Tuition and Fees

UNT anticipates net tuition and fees of \$350.2 M in FY 2019, an increase of \$28.2 M from FY2018 Year-End Forecast (\$31.3M budget to budget increase). The estimated increase contains projected gross tuition of \$326.4 M, gross fee revenue of \$126.8 M, and discount and allowances of \$103 M. The increase of tuition and fees includes a 2.75% growth in semester credit hours and reflects the UNT System Board of Regent's approved differential tuition rates.



Expenses



In FY 2019 the university will focus on core issues with strategic funding including:

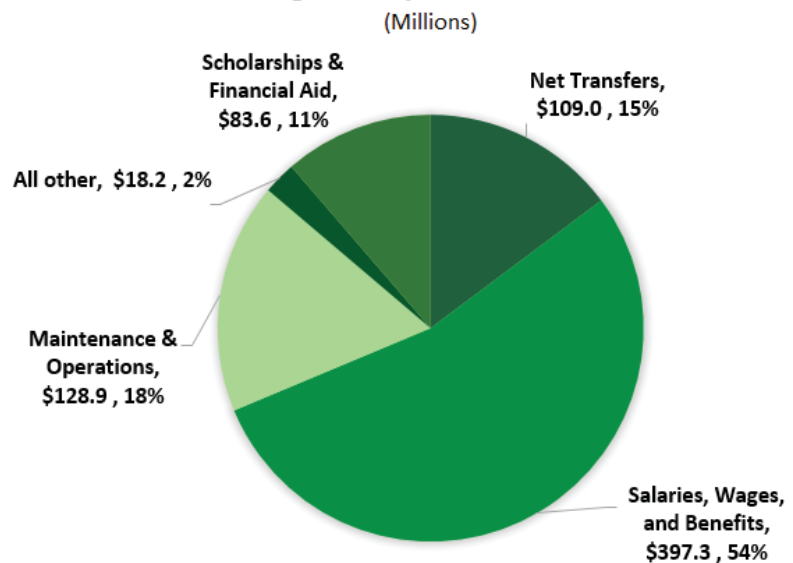
- \$4.2 M in new funding allocated for Academic Affairs
 - \$1.8 M for Frisco operations
 - \$1.2 M for faculty promotion and tenure, equity study, and market adjustments
 - \$1.2 M for other priorities

Other Strategic Funding

Dedicated funding for FY 2019 also includes funding for:

- \$3.46 M to fund research equipment
- Increases in scholarships and financial aid of \$12.2 M
- \$2.85 M to fund faculty lines from differential tuition
- \$3.1 M allocated to distance learning
- Shared and core services costs transfers of \$42.5 M
- \$5.7 M to improve net financial position

FY 2019 Budgeted Expenses and Net Transfers



Reserves and Capital Expenses

FY 2019 plant increases will include new projects for:

- \$5.8 M in auxiliary services that include: renovations in Maple Hall, Kerr Hall, Clark Hall, and new dining food stands
- General academic classrooms, art studio facility, music building recital hall, and class laboratory e-locking funded from HEAF for \$1.4 M
- \$0.7 M of commercial paper for the Apogee stadium turf

Previously approved capital projects include:

- \$72.1 M of revenue financing funds for Frisco campus development and property acquisition, new residence hall, track and field stadium, new dining hall, Fouts Field demolition, parking, and bus transfer station, General Academic Building renovations, and indoor athletic practice facility
- \$19.7 M of HEAF dedicated to master plan land acquisitions, Sage Hall academic success center, Terrill Hall renovations, and Discovery Park upgrades
- \$8.5 M in gift funds to renovate the Music Building courtyard and supplement the indoor athletic practice facility
- \$5.0 M of Tuition Revenue Bond funding to complete the College of Visual Arts and Design building
- \$3.7 M in auxiliary funding to renovate the lobby in Clark Hall

FTEs

FTE Categories	FY 2017		FY 2018		FY 2019
	Budget	Actuals	Budget	Actuals	Budget
Administrators	64.0	68.8	68.0	58.4	68.0
Faculty	1,682.0	1,397.7	1,703.0	1,324.6	1,411.0
Other Staff	3,634.0	4,104.3	3,627.0	4,352.2	4,380.0
Total FTE	5,380.0	5,570.8	5,398.0	5,735.2	5,859.0

FY 2019 Summary – Current Funds



Budget for Revenues, Expenses & Other Changes in Fund Balances

	FY 2018 Budget	FY 2018 Forecast (Actuals)	FY 2019 Budget	Increases (Decreases) FY 2019 to FY 2018 Est Actuals	
				Amount	Percent
Revenues					
Net Tuition and Fees	318,834,500	322,000,000	350,175,215	28,175,215	8.8%
Sales of Goods and Services	98,899,496	98,167,127	96,006,829	(2,160,297)	-2.2%
Grants and Contracts	98,779,283	107,402,655	108,927,428	1,524,773	1.4%
State Appropriations	136,203,844	133,000,000	133,081,270	81,270	0.1%
Capital Appropriations	37,562,056	37,562,056	37,562,056	-	0.0%
Net Professional Fees	-	-	-	-	-
Gift Income	9,780,214	10,000,000	10,509,621	509,621	5.1%
Investment Income	3,827,576	6,000,000	5,401,332	(598,668)	-10.0%
Other Revenue	1,132,356	1,300,000	1,156,549	(143,451)	-11.0%
Total Revenues	705,019,324	715,431,837	742,820,301	27,388,464	3.8%
Expenses					
Salaries - Faculty	138,188,872	132,545,992	148,359,546	15,813,554	11.9%
Salaries - Staff	133,252,006	131,904,027	148,072,937	16,168,909	12.3%
Wages and Other Compensation	27,680,760	23,889,195	23,138,294	(750,901)	-3.1%
Benefits and Other Payroll-Related Costs	77,684,635	75,520,280	77,770,150	2,249,870	3.0%
Subtotal - Personnel Costs	376,806,273	363,859,494	397,340,926	33,481,432	9.2%
Cost of Goods Sold	12,300,640	8,662,823	8,196,524	(466,299)	-5.4%
Professional Fees and Services	12,826,585	14,903,501	16,867,058	1,963,556	13.2%
Travel	10,553,228	9,591,064	9,947,492	356,428	3.7%
Materials and Supplies	27,152,904	27,533,945	33,360,309	5,826,364	21.2%
Communication and Utilities	10,114,835	12,840,604	14,817,333	1,976,729	15.4%
Repairs and Maintenance	19,183,305	18,272,413	15,730,473	(2,541,939)	-13.9%
Rentals and Leases	8,317,171	10,078,732	4,117,441	(5,961,291)	-59.1%
Printing and Reproduction	2,019,274	3,721,775	5,299,142	1,577,367	42.4%
Other Expenditures	18,243,571	17,889,325	20,610,209	2,720,883	15.2%
Subtotal - Maintenance & Operation Costs	120,711,513	123,494,183	128,945,982	5,451,799	4.4%
Capital Expenditures	12,161,799	14,250,000	17,875,791	3,625,791	25.4%
Federal and State Pass-Through Expense	152,650	152,650	339,793	187,143	122.6%
Scholarships	71,361,577	81,500,000	83,558,125	2,058,125	2.5%
Total Expenses	581,193,812	583,256,327	628,060,617	44,804,290	7.7%
Transfers					
Intra-campus Transfers Between Funds					
Inter-Fund Transfer In/(Out)	(27,138,556)	(33,800,000)	(22,750,556)	11,049,444	-32.7%
Transfers Between UNTS Components					
System Services Allocations	(46,165,944)	(44,165,944)	(42,472,275)	1,693,669	-3.8%
Debt Service Transfer In (Out)	(44,353,357)	(44,353,357)	(45,181,222)	(827,865)	1.9%
Other Inter-Unit Transfers In/(Out)	(45,884)	(189,493)	(273,420)	(83,927)	44.3%
Other Transfers					
Transfer to Other State Agencies In/(Out)	-	614,257	600,000	(14,257)	-2.3%
Legislative Transfers In/(Out)	30,357	1,096,059	1,055,357	(40,702)	-3.7%
Total Transfers	(117,673,383)	(120,798,478)	(109,022,116)	11,776,362	-9.7%
Estimated Impact on Fund Balance	6,152,128	11,377,032	5,737,568	(5,639,464)	-49.6%
Planned Use of Fund Balance & Debt Proceeds			314,055		-

FY 2019 – University of North Texas
Budget Detail by Fund Group – Current Funds



	Current Funds				
	Educational & General	Designated Operating	Auxiliary	Restricted Expendable	Current Funds
REVENUES					
Net Tuition and Fees	59,694,879	273,015,337	17,464,999	-	350,175,215
Sales of Goods and Services	292,502	21,042,145	73,922,183	750,000	96,006,829
Grants and Contracts	22,858,103	2,642,820	-	83,426,505	108,927,428
State Appropriations	133,081,270	-	-	-	133,081,270
Capital Appropriations	37,562,056	-	-	-	37,562,056
Net Professional Fees	-	-	-	-	-
Gift Income	-	2,878,031	3,590	7,628,000	10,509,621
Investment Income	117,883	5,137,703	138,746	7,000	5,401,332
Other Revenue	58,000	879,123	219,426	-	1,156,549
Revenues	253,664,693	305,595,159	91,748,944	91,811,505	742,820,301
EXPENDITURES					
Salaries - Faculty	93,029,803	51,422,429	-	3,907,313	148,359,546
Salaries - Staff	52,169,835	67,061,910	21,881,518	6,959,674	148,072,937
Wages and Other Compensation	510,520	13,339,044	4,739,997	4,548,732	23,138,294
Benefits and Other Payroll-Related Costs	43,016,641	25,223,219	7,070,196	2,460,094	77,770,150
Cost of Goods Sold	-	882,743	7,313,781	-	8,196,524
Professional Fees and Services	319,862	11,465,661	2,126,099	2,955,436	16,867,058
Travel	6,817	8,992,915	85,044	862,716	9,947,492
Materials and Supplies	3,050,550	23,869,816	4,167,154	2,272,789	33,360,309
Communication and Utilities	600,390	9,351,453	4,847,506	17,984	14,817,333
Repairs and Maintenance	4,349,771	3,396,524	7,739,001	245,177	15,730,473
Rentals and Leases	74,188	3,210,883	680,352	152,018	4,117,441
Printing and Reproduction	6,197	4,773,302	340,176	179,467	5,299,142
Debt Service - Principal	-	-	-	-	-
Debt Service - Interest	-	-	-	-	-
Capital Expenditures	7,041,154	6,179,202	3,571,848	1,083,587	17,875,791
Federal and State Pass-Through Expense	12,407	-	-	327,386	339,793
Scholarships	15,654,418	2,460,574	718,811	64,724,322	83,558,125
Other Expenditures	226,955	16,121,817	3,146,627	1,114,810	20,610,209
Expenditures	220,069,509	247,751,494	68,428,109	91,811,505	628,060,617
TRANSFERS					
<i>Intra-campus Transfers Between Funds:</i>					
Inter-Fund Transfer In/(Out)	(23,125,556)	1,918,132	(1,543,132)	-	(22,750,556)
<i>Transfers Between UNTS Components:</i>					
System Services Allocations	-	(42,472,275)	-	-	(42,472,275)
Debt Service Transfer In (Out)	(11,524,985)	(15,017,568)	(18,638,668)	-	(45,181,222)
Other Inter-Unit Transfers In/(Out)	-	(273,420)	-	-	(273,420)
<i>Other Transfers:</i>					
Transfer to Other State Agencies In/(Out)	-	600,000	-	-	600,000
Legislative Transfers In/(Out)	1,055,357	-	-	-	1,055,357
Transfers	(33,595,184)	(55,245,132)	(20,181,800)	-	(109,022,116)
Estimated Impact on Fund Balance	-	2,598,534	3,139,034	-	5,737,568
Planned Use of Fund Balance & Debt Proceeds					
Auxiliary Funded Projects	-	-	-	-	-
Instructional Program Fee Reserves	-	314,055	-	-	314,055
Prior Year Project Funds	-	-	-	-	-
Debt Proceeds	-	-	-	-	-
Planned Use of Fund Balance & Debt Proceeds	-	314,055	-	-	314,055

FY 2019 - University of North Texas
Budget Detail by Fund Group - Non-Current Funds



	Non-Current Funds				FY19
	Endowment Funds	Loan Funds	Plant and Debt	Non-Current	Allfunds
REVENUES					
Net Tuition and Fees	-	380,000	-	380,000	350,555,215
Sales of Goods and Services	-	1,000	-	1,000	96,007,829
Grants and Contracts	475,000	-	-	475,000	109,402,428
State Appropriations	-	-	-	-	133,081,270
Capital Appropriations	-	-	-	-	37,562,056
Net Professional Fees	-	-	-	-	-
Gift Income	990,000	-	8,500,000	9,490,000	19,999,621
Investment Income	700,000	-	243,704	943,704	6,345,036
Other Revenue	150,000	45,000	-	195,000	1,351,549
Revenues	2,315,000	426,000	8,743,704	11,484,704	754,305,005
EXPENDITURES					
Salaries - Faculty	-	-	-	-	148,359,546
Salaries - Staff	-	-	-	-	148,072,937
Wages and Other Compensation	-	-	-	-	23,138,294
Benefits and Other Payroll-Related Costs	-	-	-	-	77,770,150
Cost of Goods Sold	-	-	-	-	8,196,524
Professional Fees and Services	486,000	45,000	2,835,000	3,366,000	20,233,058
Travel	-	-	-	-	9,947,492
Materials and Supplies	-	-	-	-	33,360,309
Communication and Utilities	-	-	-	-	14,817,333
Repairs and Maintenance	-	-	-	-	15,730,473
Rentals and Leases	-	-	-	-	4,117,441
Printing and Reproduction	-	-	-	-	5,299,142
Debt Service - Principal	-	-	-	-	-
Debt Service - Interest	-	-	-	-	-
Capital Expenditures	-	-	118,955,556	118,955,556	136,831,347
Federal and State Pass-Through Expense	-	-	-	-	339,793
Scholarships	-	-	-	-	83,558,125
Other Expenditures	-	29,996	-	29,996	20,640,205
Expenditures	486,000	74,996	121,790,556	122,351,552	750,412,169
TRANSFERS					
<i>Intra-campus Transfers Between Funds:</i>					
Inter-Fund Transfer In/(Out)	(375,000)	-	23,125,556	22,750,556	-
<i>Transfers Between UNTS Components:</i>					
System Services Allocations	-	-	-	-	(42,472,275)
Debt Service Transfer In (Out)	-	-	45,181,222	45,181,222	-
Other Inter-Unit Transfers In/(Out)	-	-	(47,531,493)	(47,531,493)	(47,804,913)
<i>Other Transfers:</i>					
Transfer to Other State Agencies In/(Out)	-	-	-	-	600,000
Legislative Transfers In/(Out)	-	-	-	-	1,055,357
Transfers	(375,000)	-	20,775,285	20,400,285	(88,621,831)
Estimated Impact on Fund Balance	1,454,000	351,004	(92,271,568)	(90,466,564)	(84,728,996)
Planned Use of Fund Balance & Debt Proceeds					
Auxiliary Funded Projects	-	-	9,540,000	9,540,000	9,540,000
Instructional Program Fee Reserves	-	-	-	-	314,055
Prior Year Project Funds	-	-	3,385,272	3,385,272	3,385,272
Debt Proceeds	-	-	79,590,000	79,590,000	79,590,000
Planned Use of Fund Balance & Debt Proceeds	-	-	92,515,272	92,515,272	92,829,327

FY 2019 – University of North Texas
Budgeted Revenue Breakout by Fund - Current Funds



	Current Funds				
	Educational & General	Designated Operating	Auxiliary	Restricted Expendable	Current Funds
Resident Undergrad Tuition	44,205,238	205,094,112	-	-	249,299,350
Non-resident Undergrad Tuition	26,518,272	13,165,400	-	-	39,683,672
Other Undergrad Tuition	6,257,000	155,531	-	-	6,412,531
Waivers Undergrad Tuition	(18,844,155)	(135,760)	-	-	(18,979,915)
Gross Undergraduate Tuition	58,136,355	218,279,283	-	-	276,415,638
Resident Graduate Tuition	8,621,182	18,885,484	-	-	27,506,666
Non-resident Graduate Tuition	17,080,179	6,707,016	-	-	23,787,195
Other Graduate Tuition	111,638	2,608,777	-	-	2,720,415
Waivers Graduate Tuition	(4,005,845)	(28,860)	-	-	(4,034,705)
Gross Graduate Tuition	21,807,154	28,172,417	-	-	49,979,571
Fees - Instructional	351,370	22,215,583	-	-	22,566,953
Fees - Mandatory	-	75,979,888	17,268,799	-	93,248,687
Fees - Incidental	-	10,834,936	207,500	-	11,042,436
Waivers - Fees	-	(66,770)	(11,300)	-	(78,070)
Gross Fees	351,370	108,963,637	17,464,999	-	126,780,006
Disc & Allow-Tuition and Fee	(20,600,000)	(82,400,000)	-	-	(103,000,000)
Discount and Allowances	(20,600,000)	(82,400,000)	-	-	(103,000,000)
Tuition and Waiver Conversion	-	-	-	-	-
Net Tuition and Fees	59,694,879	273,015,337	17,464,999	-	350,175,215
Athletics	-	7,720,130	-	-	7,720,130
Auxiliary Enterprises	-	356,089	70,832,783	-	71,188,872
Discounts and Allowances - Auxiliaries	-	-	-	-	-
Other Sales of Goods and Services	292,502	12,965,925	3,089,400	750,000	17,097,828
Sales of Goods and Services	292,502	21,042,145	73,922,183	750,000	96,006,829
Federal Programs and Contracts	-	-	-	21,205,885	21,205,885
Federal Financial Aid	-	-	-	56,624,834	56,624,834
State Programs and Contracts	-	2,642,820	-	1,635,631	4,278,451
State Financial Aid	22,858,103	-	-	-	22,858,103
Other Grants and Contracts	-	-	-	3,960,155	3,960,155
Grants and Contracts	22,858,103	2,642,820	-	83,426,505	108,927,428
State Appropriations - General	105,488,342	-	-	-	105,488,342
State Appropriations - Additional	27,592,928	-	-	-	27,592,928
State Appropriations	133,081,270	-	-	-	133,081,270
Capital Appropriations - HEF	37,562,056	-	-	-	37,562,056
Capital Appropriations	37,562,056	-	-	-	37,562,056
Gross Professional Fees	-	-	-	-	-
Contractual Allowances and Discounts	-	-	-	-	-
Net Professional Fees	-	-	-	-	-
Gift Income	-	2,878,031	3,590	7,628,000	10,509,621
Investment Income	117,883	5,137,703	138,746	7,000	5,401,332
Other Revenue	58,000	879,123	219,426	-	1,156,549
Revenues	253,664,693	305,595,159	91,748,944	91,811,505	742,820,301

**FY 2019 – University of North Texas
Budget - Current Funds by Quarter**



**University of North Texas
FY19 - Quarterly Spread Worksheet**

	Q1 FYTD Estimate	Q2 FYTD Estimate	Q3 FYTD Estimate	Q4 FYTD Budget
Revenues				
Net Tuition and Fees	304,132,948	311,455,704	354,360,135	350,175,215
Sales of Goods and Services	67,519,183	76,186,256	86,939,319	96,006,829
Grants and Contracts	6,767,532	61,064,772	73,657,416	108,927,428
State Appropriations	112,938,433	121,216,311	129,494,189	133,081,270
Capital Appropriations	37,562,056	37,562,056	37,562,056	37,562,056
Net Professional Fees				
Gift Income	2,245,826	4,873,231	7,500,636	10,509,621
Investment Income	558,516	2,440,859	5,123,143	5,401,332
Other Revenue	289,137	578,275	867,412	1,156,549
Total Revenues	532,013,630	615,377,464	695,504,307	742,820,301
Expenditures				
Salaries - Faculty	44,376,914	88,753,827	133,644,965	148,359,546
Salaries - Staff	36,610,985	73,661,824	111,880,483	148,072,937
Wages and Other Compensation	7,485,004	13,920,823	18,341,321	23,138,294
Benefits and Other Payroll-Related Costs	21,407,102	44,246,107	66,937,734	77,770,150
Cost of Goods Sold	2,458,957	4,829,640	6,878,771	8,196,524
Professional Fees and Services	4,773,344	8,383,191	12,412,527	16,867,058
Travel	2,259,490	4,510,817	7,455,772	9,947,492
Materials and Supplies	7,756,214	15,766,242	23,552,522	33,360,309
Communication and Utilities	3,103,298	5,939,775	11,548,755	14,817,333
Repairs and Maintenance	4,319,568	8,239,563	11,772,608	15,730,473
Rentals and Leases	1,785,082	2,349,609	3,292,118	4,117,441
Printing and Reproduction	1,655,327	3,131,967	4,491,708	5,299,142
Debt Service - Principal	0	0	0	0
Debt Service - Interest	0	0	0	0
Capital Expenditures	5,200,199	10,400,398	13,585,533	17,875,791
Federal and State Pass-Through Expense	49,108	135,297	254,845	339,793
Depreciation and Amortization	0	0	0	0
Scholarships	13,410,175	50,350,546	52,239,334	83,558,125
Other Expenditures	5,522,303	10,030,711	15,909,877	20,610,209
Total Expenditures	162,173,072	344,650,338	494,198,873	628,060,617
Transfers				
<i>Intra-campus Transfers Between Funds:</i>				
Inter-Fund Transfer In/(Out)	(22,750,556)	(22,750,556)	(22,750,556)	(22,750,556)
<i>Transfers Between UNTS Components:</i>				
System Services Allocations	(10,618,069)	(21,236,138)	(31,854,206)	(42,472,275)
Debt Service Transfer In (Out)	(11,295,305)	(22,590,611)	(33,885,916)	(45,181,222)
Other Inter-Unit Transfers In/(Out)	(68,355)	(136,710)	(205,065)	(273,420)
<i>Other Transfers:</i>				
Transfer to Other State Agencies In/(Out)	0	0	600,000	600,000
Legislative Transfers In/(Out)	30,357	30,357	1,055,357	1,055,357
Total Transfers	(44,701,928)	(66,683,658)	(87,040,387)	(109,022,116)

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UNT Health Science Center Budget Overview

Executive Summary and Highlights

UNT Health Science Center is committed through Extraordinary Teamwork to its vision of ***One University, built on values, defining and producing the providers of the future***. The budget priorities for the coming FY represent UNTHSC's commitment to the future of health care and science.

Those institutional priorities are:

- Funding key positions, including two department chairs and three faculty members, in the growing UNT System College of Pharmacy. These positions will help meet and maintain accreditation standards for the only pharmacy college in the Dallas-Fort Worth area and help the college expand into clinical trials and pharmacogenomics
- Creating 10 new positions related to operations in the new Interdisciplinary Research and Education Building, which is scheduled to open in October 2018 and will be home to the College of Pharmacy, the North Texas Eye Research Institute, and the TCU and UNTHSC School of Medicine

The institution also is supporting additions and renovations to the BioSkills Laboratory housed within the Center for Anatomical Sciences. These improvements are integral to the medical education of UNTHSC students and the continuing education of health care practitioners across Texas. About 580 UNTHSC students pass through the anatomy lab each year, along with another 180 nurse anesthetist students from TCU and Texas Wesleyan.

The last FY experienced several milestones, including:

- Partnering with HCA Healthcare to develop 500 resident positions in 14 hospitals across the DFW area to help address the State's growing physician shortage
- Starting the largest and most comprehensive study in the U.S. encompassing Mexican-Americans and Alzheimer's disease
- Launching a no-cost vision screening program for Fort Worth preschoolers
- Funding from State and Federal sources for UNTHSC's forensic DNA program, which assists criminal justice agencies with solving crimes, as well as reducing the backlog of sexual assault kits to be analyzed, was renewed
- Collaborating with the UNT College of Music in Denton to offer the world's first music doctoral degree in performing arts health
- Partnering with Lena Pope to open an on-campus Early Learning Center that provides high-quality, affordable child care for UNTHSC students and employees

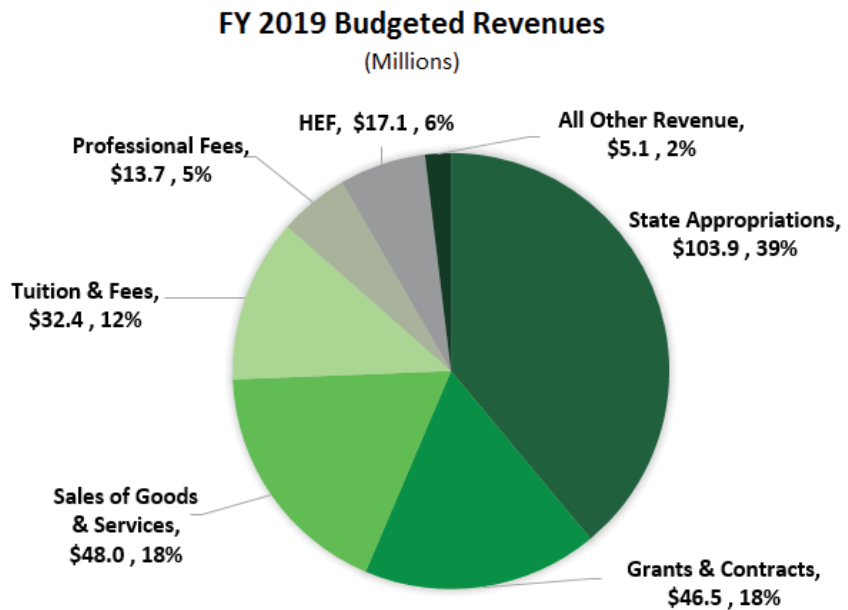
In the coming year, UNTHSC plans to create even more residency positions through partnerships with regional health care systems, prepare for the expected 2019 opening of the new School of Medicine, and launch a groundbreaking research study that could make it possible to diagnose Alzheimer's disease via a simple blood test.

Revenues

Overall, UNTHSC expects to generate \$266.8 M in revenue over the next FY. This represents a net increase of \$21.6 M (9%) from FY 2018. The majority of this increase is attributable to the continued participation with the federal correctional program. Moreover, the budget reflects an increase in grants and contracts related to research programs.

Tuition and Fees, State Appropriations

Net Tuition and Fees, along with State Appropriations, are expected to increase by \$1.0 M (1%) from the FY 2018 budget. This is primarily due to the schools/colleges restructuring the fees charged for various student-related activities and programs, as well as State-paid benefits.



Sales of Goods & Services

Sales of Goods & Services reflect a net increase of \$8.8 M (22%) from the FY 2018 budget, due to the continuation of medical services provided to incarcerated patients, which were expected to cease in FY 2018.

Grants and Contracts

Grants and contracts are expected to increase from the FY 2018 budget by \$10.6 M (30%), as a result of a steady rise in awards, coupled with an increase in the average award amount.

Investment Income

Investment income will likely increase from the FY 2018 budget by \$0.9 M (38%) as a result of diversifying institutional funds into higher-yielding investments.

Expenses

Total Expenses are estimated at \$226.7 M over the next FY. This represents an overall increase of \$16.1 M (8%) from FY 2018. The majority of this increase is attributable to the federal prison program, research activities, and capital projects and equipment.

Personnel Costs

Personnel costs represent 66% of the UNTHSC expenditure budget. Overall, UNTHSC is projecting a net increase of \$1.7 M (1%) from the FY 2018 budget driven by the ongoing recruitment of key academic personnel, including chairs, deans, and other faculty positions, as well as additional staff required for the Interdisciplinary Research & Education Building (IREB).

Professional Fees and Services

Professional fees and services are expected to increase by \$5.5 M (18%) from the FY 2018 budget, as a significant contract to provide medical services to incarcerated patients was unexpectedly continued.

Materials and Supplies

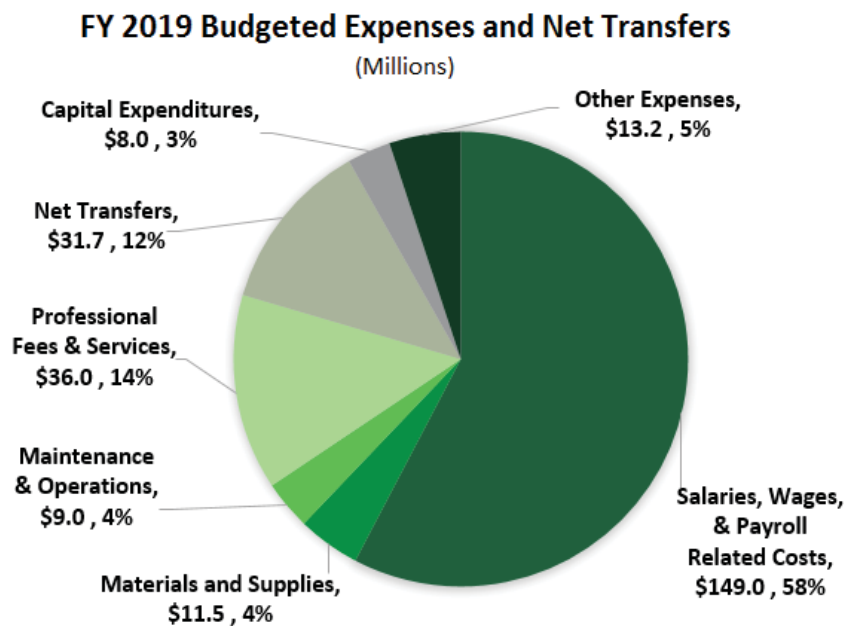
Materials and supplies are expected to increase by \$2.5 M (28%) from the FY 2018 budget, primarily due to increased research activities.

Capital Expenses

Capital Expenses are expected to increase by \$3.6 M (82%) from the FY 2018 budget, due to classroom and lab renovations, lab equipment and other deferred maintenance needs.

Transfers

Net Transfers increased \$3.9 M (14%) from FY 2018, a part of which reflects UNTHSC's portion of the shared UNT System costs, as well as additional funding for major capital projects.



Reserves and Capital Expenses



Capital Expenses

As part of the capital plan, UNTHSC will issue bonds for both new endeavors and previously approved projects.

New project: East Parking Garage Renovation (\$6 M total cost; of which \$2.5 M-RFS)

Previously-approved project: Interdisciplinary Research & Education Building (\$17.7 M-RFS)

FTEs

FTE Categories	FY 2017		FY 2018		FY 2019
	Budget	Actuals	Budget	Actuals	Budget
Administrators	27.7	26.2	26.6	27.3	29.0
Faculty	454.5	311.8	308.0	293.0	329.0
Other Staff	1017.2	1000.8	974.4	965.1	1034.0
Total FTE	1499.4	1338.8	1309.0	1285.4	1392.0

FY 2019 Summary – Current Funds



Budget for Revenues, Expenses & Other Changes in Fund Balances

	FY 2018 Budget	FY 2018 Forecast (Actuals)	FY 2019 Budget	Increases (Decreases)	
				FY 2019 to FY 2018 Est Amount	Actuals Percent
Revenues					
Net Tuition and Fees	31,750,280	31,200,000	32,400,000	1,200,000	3.8%
Sales of Goods and Services	39,225,000	48,225,000	48,000,000	(225,000)	-0.5%
Grants and Contracts	35,900,000	38,000,000	46,500,000	8,500,000	22.4%
State Appropriations	103,643,662	103,000,000	103,943,258	943,258	0.9%
Capital Appropriations	17,091,856	17,091,856	17,091,856	-	0.0%
Net Professional Fees	13,722,182	16,000,000	13,740,100	(2,259,900)	-14.1%
Gift Income	1,500,000	1,800,000	1,500,000	(300,000)	-16.7%
Investment Income	2,240,000	3,000,000	3,100,000	100,000	3.3%
Other Revenue	120,000	500,000	500,000	-	0.0%
Total Revenues	245,192,980	258,816,856	266,775,214	7,958,358	3.1%
Expenditures					
Salaries - Faculty	48,000,000	46,500,000	49,500,000	3,000,000	6.5%
Salaries - Staff	61,300,000	59,000,000	63,000,000	4,000,000	6.8%
Wages and Other Compensation	7,000,000	4,000,000	5,500,000	1,500,000	37.5%
Benefits and Other Payroll-Related Costs	31,000,000	28,000,000	31,000,000	3,000,000	10.7%
Subtotal - Personnel Costs	147,300,000	137,500,000	149,000,000	11,500,000	8.4%
Cost of Goods Sold	20,000	20,000	10,000	(10,000)	-50.0%
Professional Fees and Services	30,500,000	35,500,000	36,000,000	500,000	1.4%
Travel	2,000,000	2,000,000	2,400,000	400,000	20.0%
Materials and Supplies	9,000,000	13,000,000	11,500,000	(1,500,000)	-11.5%
Communication and Utilities	2,400,000	2,200,000	2,750,000	550,000	25.0%
Repairs and Maintenance	3,500,000	3,750,000	3,750,000	-	0.0%
Rentals and Leases	1,500,000	3,000,000	2,000,000	(1,000,000)	-33.3%
Printing and Reproduction	750,000	650,000	500,000	(150,000)	-23.1%
Other Expenditures	5,500,000	11,000,000	6,500,000	(4,500,000)	-40.9%
Subtotal - Maintenance & Operation Costs	55,170,000	71,120,000	65,410,000	(5,710,000)	-8.0%
Capital Expenditures	4,400,000	6,000,000	8,000,000	2,000,000	33.3%
Federal and State Pass-Through Expense	700,000	1,300,000	1,250,000	(50,000)	-3.8%
Scholarships	3,000,000	3,000,000	3,000,000	-	0.0%
Total Expenses	210,570,000	218,920,000	226,660,000	7,740,000	3.5%
Transfers					
Intra-campus Transfers Between Funds					
Inter-Fund Transfer In/(Out)	(2,600,000)	(3,000,000)	(7,677,574)	(4,677,574)	155.9%
Transfers Between UNTS Components					
System Service Allocations	(2,017,718)	(1,500,000)	(3,323,282)	(1,823,282)	121.6%
Debt Service Transfer in/(Out)	(15,891,925)	(15,183,928)	-	15,183,928	-100.0%
Other Inter-Unit Transfers in/(Out)	-	(7,869,781)	(15,476,812)	(7,607,031)	96.7%
Other Transfers					
Transfer to Other State Agencies In/(Out)	-	-	-	-	-
Legislative Transfers In/(Out)	(7,289,981)	-	(5,179,124)	(5,179,124)	100.0%
Total Transfers	(27,799,624)	(27,553,709)	(31,656,792)	(4,103,083)	14.9%
Estimated Impact on Fund Balance	6,823,356	12,343,147	8,458,422	-3,884,725	-31.5%
Planned Use of Fund Balance & Debt	-	-	-	-	-

FY 2019 – UNT Health Science Center
Budget Detail by Fund Group – Current Funds



	Current Funds				
	Educational & General	Designated Operating	Auxiliary	Restricted Expendable	Current Funds
REVENUES					
Net Tuition and Fees	11,896,750	20,503,250	-	-	32,400,000
Sales of Goods and Services	-	47,275,105	631,145	93,750	48,000,000
Grants and Contracts	7,571	2,809,748	-	43,682,681	46,500,000
State Appropriations	103,844,827	-	-	98,431	103,943,258
Capital Appropriations	17,091,856	-	-	-	17,091,856
Net Professional Fees	-	13,740,100	-	-	13,740,100
Gift Income	-	-	-	1,500,000	1,500,000
Investment Income	-	3,100,000	-	-	3,100,000
Other Revenue	-	500,000	-	-	500,000
Revenues	132,841,004	87,928,203	631,145	45,374,862	266,775,214
EXPENDITURES					
Salaries - Faculty	32,299,394	10,531,289	-	6,669,317	49,500,000
Salaries - Staff	37,840,484	15,561,941	55,911	9,541,664	63,000,000
Wages and Other Compensation	2,936,174	733,764	36,930	1,793,132	5,500,000
Benefits and Other Payroll-Related Costs	18,075,201	8,000,620	8,041	4,916,138	31,000,000
Cost of Goods Sold	-	100	-	9,900	10,000
Professional Fees and Services	766,170	25,058,375	48,000	10,127,455	36,000,000
Travel	22,000	2,334,500	3,500	40,000	2,400,000
Materials and Supplies	2,921,289	6,930,844	50,000	1,597,867	11,500,000
Communication and Utilities	100,676	2,533,824	10,000	105,500	2,750,000
Repairs and Maintenance	868,874	1,665,555	112,004	1,103,567	3,750,000
Rentals and Leases	247,444	1,502,556	-	250,000	2,000,000
Printing and Reproduction	50,000	250,000	6,000	194,000	500,000
Debt Service - Principal	-	-	-	-	-
Debt Service - Interest	-	-	-	-	-
Capital Expenditures	7,029,166	690,000	16,000	264,834	8,000,000
Federal and State Pass-Through Expense	-	-	-	1,250,000	1,250,000
Scholarships	1,259,495	1,740,505	-	-	3,000,000
Other Expenditures	2,387,183	2,801,076	15,000	1,296,741	6,500,000
Expenditures	106,803,550	80,334,949	361,386	39,160,115	226,660,000
TRANSFERS					
<i>Intra-campus Transfers Between Funds:</i>					
Inter-Fund Transfer In/(Out)	(2,671,549)	815,913	-	(5,821,938)	(7,677,574)
<i>Transfers Between UNTS Components:</i>					
System Services Allocations	-	(3,323,282)	-	-	(3,323,282)
Debt Service Transfer In (Out)	-	-	-	-	-
Other Inter-Unit Transfers In/(Out)	(15,476,812)	-	-	-	(15,476,812)
<i>Other Transfers:</i>					
Transfer to Other State Agencies In/(Out)	-	-	-	-	-
Legislative Transfers In/(Out)	(5,179,124)	-	-	-	(5,179,124)
Transfers	(23,327,485)	(2,507,369)	-	(5,821,938)	(31,656,792)
Estimated Impact on Fund Balance	2,709,969	5,085,885	269,759	392,809	8,458,422
Planned Use of Fund Balance & Debt Proceeds					
Planned Use of Fund Balance & Debt Proceeds	-	-	-	-	-

FY 2019 – UNT Health Science Center
Budget Detail by Fund Group – Non-Current Funds



	Non-Current Funds				FY19
	Endowment Funds	Loan Funds	Plant and Debt	Non-Current	Allfunds
REVENUES					
Net Tuition and Fees	-	-	-	-	32,400,000
Sales of Goods and Services	-	-	-	-	48,000,000
Grants and Contracts	-	-	-	-	46,500,000
State Appropriations	-	-	-	-	103,943,258
Capital Appropriations	-	-	-	-	17,091,856
Net Professional Fees	-	-	-	-	13,740,100
Gift Income	2,000,000	-	-	2,000,000	3,500,000
Investment Income	1,528,062	-	-	1,528,062	4,628,062
Other Revenue	-	-	-	-	500,000
Revenues	3,528,062	-	-	3,528,062	270,303,276
EXPENDITURES					
Salaries - Faculty	-	-	-	-	49,500,000
Salaries - Staff	-	-	-	-	63,000,000
Wages and Other Compensation	-	-	-	-	5,500,000
Benefits and Other Payroll-Related Costs	-	-	-	-	31,000,000
Cost of Goods Sold	-	-	-	-	10,000
Professional Fees and Services	-	-	-	-	36,000,000
Travel	-	-	-	-	2,400,000
Materials and Supplies	-	-	-	-	11,500,000
Communication and Utilities	-	-	-	-	2,750,000
Repairs and Maintenance	-	-	-	-	3,750,000
Rentals and Leases	-	-	-	-	2,000,000
Printing and Reproduction	-	-	-	-	500,000
Debt Service - Principal	-	-	-	-	-
Debt Service - Interest	-	-	-	-	-
Capital Expenditures	-	-	41,374,237	41,374,237	49,374,237
Federal and State Pass-Through Expense	-	-	-	-	1,250,000
Scholarships	-	950,000	-	950,000	3,950,000
Other Expenditures	-	-	-	-	6,500,000
Expenditures	-	950,000	41,374,237	42,324,237	268,984,237
TRANSFERS					
<i>Intra-campus Transfers Between Funds:</i>					
Inter-Fund Transfer In/(Out)	(1,528,062)	2,221,399	6,984,237	7,677,574	-
<i>Transfers Between UNTS Components:</i>					
System Services Allocations	-	-	-	-	(3,323,282)
Debt Service Transfer In (Out)	-	-	-	-	-
Other Inter-Unit Transfers In/(Out)	-	-	-	-	(15,476,812)
<i>Other Transfers:</i>					
Transfer to Other State Agencies In/(Out)	-	-	-	-	-
Legislative Transfers In/(Out)	-	-	-	-	(5,179,124)
Transfers	(1,528,062)	2,221,399	6,984,237	7,677,574	(23,979,218)
Estimated Impact on Fund Balance	2,000,000	1,271,399	(34,390,000)	(31,118,601)	(22,660,179)
Planned Use of Fund Balance & Debt Proceeds					
Gift Funds for Capital Expenses	-	-	5,730,000	5,730,000	5,730,000
Debt Proceeds	-	-	28,660,000	28,660,000	28,660,000
Planned Use of Fund Balance & Debt Proceeds	-	-	34,390,000	34,390,000	34,390,000

FY 2019 – UNT Health Science Center
Budgeted Revenue Breakout by Fund – Current Funds



	Current Funds				Current Funds
	Educational & General	Designated Operating	Auxiliary	Restricted Expendable	
Resident Undergrad Tuition	-	-	-	-	-
Non-resident Undergrad Tuition	-	-	-	-	-
Other Undergrad Tuition	-	-	-	-	-
Waivers Undergrad Tuition	-	-	-	-	-
Gross Undergraduate Tuition	-	-	-	-	-
Resident Graduate Tuition	10,690,990	11,991,486	-	-	22,682,476
Non-resident Graduate Tuition	2,904,770	1,042,738	-	-	3,947,508
Other Graduate Tuition	-	-	-	-	-
Waivers Graduate Tuition	-	-	-	-	-
Gross Graduate Tuition	13,595,760	13,034,224	-	-	26,629,984
Fees - Instructional	-	4,592,140	-	-	4,592,140
Fees - Mandatory	-	3,778,270	-	-	3,778,270
Fees - Incidental	-	519,728	-	-	519,728
Waivers - Fees	-	(520,419)	-	-	(520,419)
Gross Fees	-	8,369,719	-	-	8,369,719
Disc & Allow-Tuition and Fee	(1,699,010)	(900,693)	-	-	(2,599,703)
Discount and Allowances	(1,699,010)	(900,693)	-	-	(2,599,703)
Tuition and Waiver Conversion	-	-	-	-	-
Net Tuition and Fees	11,896,750	20,503,250	-	-	32,400,000
Athletics	-	-	-	-	-
Auxiliary Enterprises	-	-	507,645	-	507,645
Discounts and Allowances - Auxiliaries	-	-	-	-	-
Other Sales of Goods and Services	-	47,275,105	123,500	93,750	47,492,355
Sales of Goods and Services	-	47,275,105	631,145	93,750	48,000,000
Federal Programs and Contracts	-	208,640	-	36,370,067	36,578,707
Federal Financial Aid	-	-	-	-	-
State Programs and Contracts	7,571	825,000	-	3,002,130	3,834,701
State Financial Aid	-	-	-	-	-
Other Grants and Contracts	-	1,776,108	-	4,310,484	6,086,592
Grants and Contracts	7,571	2,809,748	-	43,682,681	46,500,000
State Appropriations - General	88,302,840	-	-	-	88,302,840
State Appropriations - Additional	15,541,987	-	-	98,431	15,640,418
State Appropriations	103,844,827	-	-	98,431	103,943,258
Capital Appropriations - HEF	17,091,856	-	-	-	17,091,856
Capital Appropriations	17,091,856	-	-	-	17,091,856
Gross Professional Fees	-	34,512,751	-	-	34,512,751
Contractual Allowances and Discounts	-	(20,772,651)	-	-	(20,772,651)
Net Professional Fees	-	13,740,100	-	-	13,740,100
Gift Income	-	-	-	1,500,000	1,500,000
Investment Income	-	3,100,000	-	-	3,100,000
Other Revenue	-	500,000	-	-	500,000
Revenues	132,841,004	87,928,203	631,145	45,374,862	266,775,214

FY 2019 – UNT Health Science Center
Budget - Current Funds by Quarter



University of North Texas Health Science Center
FY19 - Quarterly Spread Worksheet

Revenues	Q1 FYTD Estimate	Q2 FYTD Estimate	Q3 FYTD Estimate	Q4 FYTD Budget
Net Tuition and Fees	11,750,000	24,750,000	28,250,000	32,400,000
Sales of Goods and Services	10,000,000	32,000,000	43,000,000	48,000,000
Grants and Contracts	12,500,000	24,750,000	34,000,000	46,500,000
State Appropriations	91,802,840	95,302,840	98,802,840	103,943,258
Capital Appropriations	17,091,856	17,091,856	17,091,856	17,091,856
Net Professional Fees	4,000,000	9,000,000	12,000,000	13,740,100
Gift Income	500,000	1,000,000	1,250,000	1,500,000
Investment Income	750,000	1,500,000	2,500,000	3,100,000
Other Revenue	100,000	200,000	400,000	500,000
Total Revenues	148,494,696	205,594,696	237,294,696	266,775,214
Expenditures				
Salaries - Faculty	12,000,000	23,500,000	36,000,000	49,500,000
Salaries - Staff	15,250,000	29,750,000	46,000,000	63,000,000
Wages and Other Compensation	1,500,000	2,500,000	3,500,000	5,500,000
Benefits and Other Payroll-Related Costs	6,750,000	14,500,000	22,000,000	31,000,000
Cost of Goods Sold	10,000	10,000	10,000	10,000
Professional Fees and Services	9,000,000	17,250,000	27,000,000	36,000,000
Travel	300,000	700,000	1,500,000	2,400,000
Materials and Supplies	2,250,000	5,000,000	8,500,000	11,500,000
Communication and Utilities	750,000	1,500,000	2,000,000	2,750,000
Repairs and Maintenance	1,000,000	2,000,000	3,000,000	3,750,000
Rentals and Leases	500,000	1,000,000	1,250,000	2,000,000
Printing and Reproduction	200,000	300,000	400,000	500,000
Capital Expenditures	1,000,000	3,000,000	5,000,000	8,000,000
Federal and State Pass-Through Expense	250,000	500,000	1,000,000	1,250,000
Scholarships, Exemptions, and Financial Aid	750,000	2,000,000	2,500,000	3,000,000
Other Expenditures	1,500,000	2,750,000	4,750,000	6,500,000
Total Expenditures	53,010,000	106,260,000	164,410,000	226,660,000
Transfers				
<i>Intra-campus Transfers Between Funds:</i>				
Inter-Fund Transfer In/(Out)	(500,000)	(2,500,000)	(5,200,000)	(7,677,574)
<i>Transfers Between UNTS Components:</i>				
System Services Allocations		(3,323,282)	(3,323,282)	(3,323,282)
Debt Service Transfer In (Out)	(3,869,203)	(7,738,406)	(11,607,609)	(15,476,812)
Other Inter-Unit Transfers In/(Out)				
<i>Other Transfers:</i>				
Transfer to Other State Agencies In/(Out)				-
Other Legislative Transfers In/(Out)	(5,179,124)	(5,179,124)	(5,179,124)	(5,179,124)
Total Transfers	(9,548,327)	(18,740,812)	(25,310,015)	(31,656,792)

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UNT Dallas Budget Overview

Executive Summary and Highlights

Strategic Impact and Major Goals Addressed by FY2019 Budget

The University of North Texas at Dallas continues to grow in enrollment, program offerings, and in the number of facilities on campus. The University has transitioned from a start-up into a growth stage with record enrollment numbers, and its commitment to empower, transform, and strengthen the lives of students. As part of the FY2019 budget process, the University allocated available funds through its University Budget Advisory Committee (UBAC) after a thorough review of existing positions, filled and vacant, to ensure that resources are allocated appropriately.

The University is on track to reach its strategic goal of 5,000 students by Fall 2020. UNT Dallas launched its new “Pathways” marketing campaign, an enrollment growth and branding initiative connected to the University mission statement: Through education and community connectedness. UNT Dallas aspires to be the pathway to social mobility in its primary market.

Construction on the new Student Learning and Success Center (SLSC) is well underway with an expected completion by January 2019. Planned use of this space includes a one-stop-shop for student support services. Students will experience a central location for advising, registration, financial aid, tutoring, and more. Additional space is planned for large events, a modern library, and a student operated radio station.

The University of North Texas at Dallas College of Law shares a strong commitment with UNT Dallas to diversify educational opportunities. The College of Law (COL) earned provisional accreditation from the American Bar Association (ABA) in the summer of 2017, and is scheduled for a site visit this spring in its bid for full accreditation. The mission of the COL is to provide affordable access to legal education with an annual tuition that is significantly lower than all other law schools in Texas. Furthermore, UNT Dallas College of Law is the only law school in Dallas offering night programs. Construction on the historic Municipal Building in downtown Dallas is underway and should be available for the College of Law beginning in January 2019.

Revenues

Total FY2019 revenue for UNT Dallas, budgeted at \$71.1m, which is 12.7% higher than FY2018.

State Appropriations

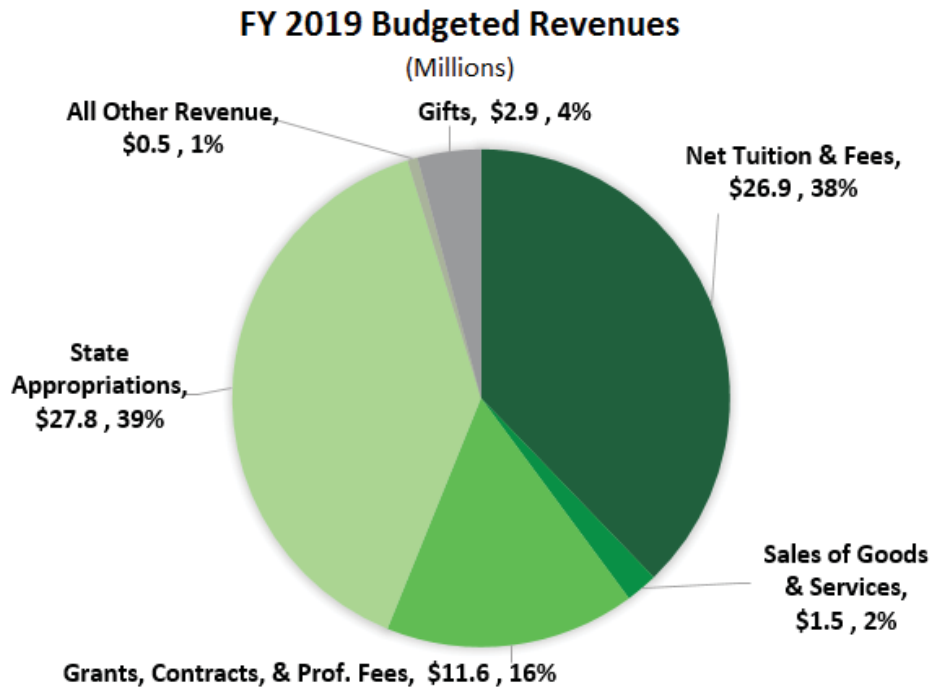
FY2019 marks the second year of the State biennium and the beginning of the FY2020-21 Legislative cycle. State appropriations for FY2019 will be relatively flat to the prior year in all aspects. Funded by the State of Texas, Tuition Revenue Bonds (TRB) support Founder’s Hall, Dallas Building 1, the SLSC, the Municipal Building construction projects, providing almost \$8 M of debt service support annually. In addition, appropriations cover benefits for most employees paid from Educational and General Funds.

Tuition and Fees

UNT Dallas is projecting a growth of 12% in semester credit hour production, increases in tuition, and the implementation of new fees that will help to support the growth of our institution. These additional funds will support new faculty for both growing and/or new programs, and additional student support functions.

The College of Law is projecting a slight decrease in semester credit hour production with a nominal tuition increase. UNT Dallas College of Law received a record number of applications for the upcoming academic year as it continues its mission of providing quality and affordable legal education at the lowest cost in the State.

Net Tuition and Fees for FY2019 are expected to exceed FY2018 by \$7.5m or 38%.



Grants and Contracts

Faculty and Staff have been increasingly active in pursuing grant funding from Federal, State, and Private sources. UNT Dallas received two grants from the U.S. Department of Education in support of TRIO Upward Bound programming, and FY2019 marks the second year of that funding activity.

Financial Aid awards that include PELL Grants and TEXAS Grants will provide a large portion of grant revenue. UNT Dallas has received increased allocation amounts in both PELL Grant and TEXAS Grant financial aid programs due to the rapid growth of the student body.

Overall, FY2019 Grant and Contract income is budgeted to increase almost \$1.9m or 20% over FY2018.

Gift Income

Increased efforts have been placed on philanthropic support to the University and expectations are high for FY2019. The budget for Current Funds is significantly higher than FY2018 and includes an expected \$2m contribution to fund specific capital projects on campus. The remainder of the \$2.9m gift income budget is expected for student aid and operations.

Expenses

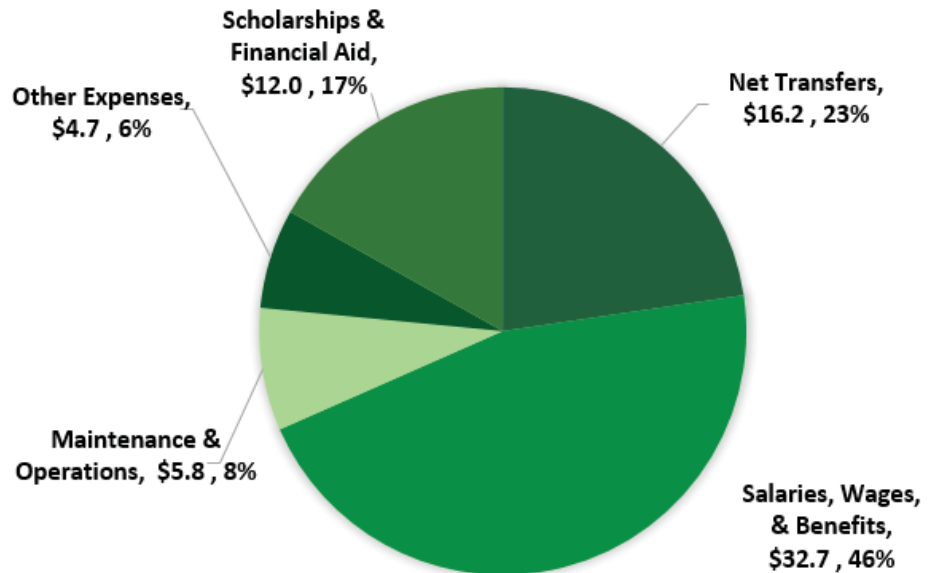
Personnel

In response to enrollment growth, the University added new faculty positions to support new and existing program growth, as well as, new staff lines for student support activities funded mostly from fees initiated recently.

Overall, personnel expenses for FY2019 are expected to increase from \$29.8m to \$32.7m or 10.2%.

FY 2019 Budgeted Expenses and Net Transfers

(Millions)



Scholarships and Financial Aid

UNT Dallas' strategic initiative to remain one of the most affordable universities in North Texas requires a concerted effort around scholarships and financial aid. In support of this mission, the University has budgeted institutionally funded scholarships of \$1.75m in addition to funds for tuition grants. In a unified effort to provide more scholarships to our students, the Office of University Advancement will focus fundraising efforts around spendable scholarships as well as increasing endowment funds. PELL Grants and TEXAS Grants continue to be the largest source of student aid for UNTD students.

For FY2019, UNT Dallas scholarship expense will increase from \$8.9m to \$12m or 34.6%.

Debt Service

Debt service for UNT Dallas is relatively flat to prior year. Debt services the following buildings on UNTD's campus: Founder's Hall, Dallas Building 1, Student Learning and Success Center, Wisdom Hall, and the Municipal Building renovation. Every building except for Wisdom Hall is serviced by Tuition Revenue Bonds, in which the debt payments are reimbursed by the State. Debt service is approximately \$8.9m for FY2019.

Transfers

UNT Dallas recognizes the benefit of cost-cutting efficiencies through shared services. Costs associated with services provided by UNT System Administration and the University of North Texas remain flat to slightly reduced for FY2019.

Impact to Fund Balances

In conclusion, this budget represents an estimated reduction to current funds balances of just over \$373k. The University is committed to the proper utilization of the scarce resources we are entrusted with by ensuring these funds are spent in the most efficient manner. The University will continue to monitor spending throughout the year and will take measures necessary to ensure the fiscal health of the University now and into the future.

FTEs

FTE Categories	FY 2017		FY 2018		FY 2019
	Budget	Actuals	Budget	Actuals	Budget
Administrators	24.0	23.8	25.0	21.9	25.0
Faculty	140.0	142.3	153.0	157.4	160.0
Other Staff	173.0	151.9	212.0	185.8	218.0
Total FTE	337.0	318.0	390.0	365.0	403.0

FY 2019 Summary – Current Funds

Budget for Revenues, Expenses & Other Changes in Fund Balances

	FY 2018 Budget	FY 2018 Forecast (Actuals)	FY 2019 Budget	Increases (Decreases) FY 2019 to FY 2018 Est Actuals	
				Amount	Percent
Revenues					
Net Tuition and Fees	19,359,028	20,500,000	26,861,011	6,361,011	31.0%
Sales of Goods and Services	822,500	1,050,000	1,479,851	429,851	40.9%
Grants and Contracts	9,651,215	9,651,215	11,566,617	1,915,402	19.8%
State Appropriations	25,718,429	25,718,429	25,659,330	(59,099)	-0.2%
Capital Appropriations	2,113,004	2,113,004	2,113,004	-	0.0%
Gift Income	500,000	825,000	2,926,875	2,101,875	254.8%
Investment Income	216,000	400,000	424,749	24,749	6.2%
Other Revenue	20,000	40,000	50,000	10,000	25.0%
Total Revenues	58,400,176	60,297,648	71,081,437	10,783,789	17.9%
Expenditures					
Salaries - Faculty	9,991,320	10,000,000	11,340,288	1,340,288	13.4%
Salaries - Staff	13,188,755	12,650,000	14,126,705	1,476,705	11.7%
Wages and Other Compensation	964,956	1,250,000	1,039,891	(210,109)	-16.8%
Benefits and Other Payroll-Related Costs	5,610,068	5,610,068	6,183,825	573,757	10.2%
Subtotal - Personnel Costs	29,755,099	29,510,068	32,690,709	3,180,641	10.8%
Professional Fees and Services	1,048,755	1,800,000	2,201,281	401,281	22.3%
Travel	532,875	500,000	623,313	123,313	24.7%
Materials and Supplies	3,225,246	2,000,000	2,557,259	557,259	27.9%
Communication and Utilities	747,429	550,000	636,102	86,102	15.7%
Repairs and Maintenance	272,098	1,150,000	1,406,539	256,539	22.3%
Rentals and Leases	234,820	650,000	865,716	215,716	33.2%
Printing and Reproduction	398,082	150,000	350,274	200,274	133.5%
Other Expenditures	1,357,055	1,250,000	1,697,779	447,779	35.8%
Subtotal - Maintenance & Operation Costs	7,816,360	8,050,000	10,338,261	2,288,261	28.4%
Capital Expenditures	779,026	850,000	196,320	(653,680)	-76.9%
Scholarships	8,951,215	10,200,000	12,047,139	1,847,139	18.1%
Total Expenses	47,301,700	48,610,068	55,272,429	6,662,361	13.7%
Transfers					
Intra-campus Transfers Between Funds					
Inter-Fund Transfer In/(Out)	-	1,095,513	(2,000,000)	(3,095,513)	-282.6%
Transfers Between UNTS Components					
System Service Allocations	(3,870,665)	(3,783,165)	(4,213,847)	(430,682)	11.4%
Debt Service Transfer in/(Out)	(8,982,558)	(8,982,558)	-	8,982,558	-100.0%
Other Inter-Unit Transfers In/(Out)	(1,288,721)	(979,594)	(9,968,148)	(8,988,554)	917.6%
Other Transfers					
Total Transfers	(14,141,944)	(12,649,803)	(16,181,995)	(3,532,192)	27.9%
Estimated Impact on Fund Balance	(3,043,468)	(962,223)	-372,986	589,237	-61.2%
Planned Use of Fund Balance & Debt Proceeds	3,155,236	962,223	372,986	(589,237)	-61.2%

FY 2019 – UNT Dallas
Budget Detail by Fund Group – Current Funds



	Current Funds				
	Educational & General	Designated Operating	Auxiliary	Restricted Expendable	Current Funds
REVENUES					
Net Tuition and Fees	6,759,691	20,091,320	10,000	-	26,861,011
Sales of Goods and Services	-	7,611	1,472,240	-	1,479,851
Grants and Contracts	2,424,965	120,371	-	9,021,281	11,566,617
State Appropriations	25,659,330	-	-	-	25,659,330
Capital Appropriations	2,113,004	-	-	-	2,113,004
Net Professional Fees	-	-	-	-	-
Gift Income	-	275,625	-	2,651,250	2,926,875
Investment Income	-	424,749	-	-	424,749
Other Revenue	-	50,000	-	-	50,000
Revenues	36,956,990	20,969,676	1,482,240	11,672,531	71,081,437
EXPENDITURES					
Salaries - Faculty	8,218,126	2,779,591	2,259	340,312	11,340,288
Salaries - Staff	10,886,906	2,027,128	208,465	1,004,206	14,126,705
Wages and Other Compensation	26,000	875,639	78,000	60,252	1,039,891
Benefits and Other Payroll-Related Costs	4,685,193	1,134,117	54,616	309,899	6,183,825
Cost of Goods Sold	-	-	-	-	-
Professional Fees and Services	-	2,201,281	-	-	2,201,281
Travel	-	422,472	-	200,841	623,313
Materials and Supplies	2,114,532	369,139	73,588	-	2,557,259
Communication and Utilities	-	600,002	36,100	-	636,102
Repairs and Maintenance	-	1,386,539	20,000	-	1,406,539
Rentals and Leases	-	865,716	-	-	865,716
Printing and Reproduction	-	350,274	-	-	350,274
Debt Service - Principal	-	-	-	-	-
Debt Service - Interest	-	-	-	-	-
Capital Expenditures	-	196,320	-	-	196,320
Federal and State Pass-Through Expense	-	-	-	-	-
Scholarships	3,098,025	1,360,619	-	7,588,495	12,047,139
Other Expenditures	-	1,109,252	420,000	168,526	1,697,779
Expenditures	29,028,782	15,678,088	893,028	9,672,531	55,272,429
TRANSFERS					
<i>Intra-campus Transfers Between Funds:</i>					
Inter-Fund Transfer In/(Out)	-	-	-	(2,000,000)	(2,000,000)
<i>Transfers Between UNTS Components:</i>					
System Services Allocations	-	(4,213,847)	-	-	(4,213,847)
Debt Service Transfer In (Out)	-	-	-	-	-
Other Inter-Unit Transfers In/(Out)	(7,928,208)	(1,450,727)	(589,213)	-	(9,968,148)
<i>Other Transfers:</i>					
Transfer to Other State Agencies In/(Out)	-	-	-	-	-
Legislative Transfers In/(Out)	-	-	-	-	-
Transfers	(7,928,208)	(5,664,574)	(589,213)	(2,000,000)	(16,181,995)
Estimated Impact on Fund Balance	0	(372,986)	0	0	(372,986)
Planned Use of Fund Balance & Debt Proceeds					
Student Service Fees Reserves	-	45,000	-	-	45,000
Undergraduate Advising Fee Reserve	-	38,000	-	-	38,000
Operations Support	-	289,986	-	-	289,986
Debt Proceeds	-	-	-	-	-
Planned Use of Fund Balance & Debt Proceeds	-	372,986	-	-	372,986

Budget Detail by Fund Group – Non-Current Funds

	Non-Current Funds				FY19
	Endowment Funds	Loan Funds	Plant and Debt	Non-Current	Allfunds
REVENUES					
Net Tuition and Fees	-	-	-	-	26,861,011
Sales of Goods and Services	-	-	-	-	1,479,851
Grants and Contracts	-	-	-	-	11,566,617
State Appropriations	-	-	-	-	25,659,330
Capital Appropriations	-	-	-	-	2,113,004
Net Professional Fees	-	-	-	-	-
Gift Income	-	-	-	-	2,926,875
Investment Income	-	-	-	-	424,749
Other Revenue	-	-	-	-	50,000
Revenues	-	-	-	-	71,081,437
EXPENDITURES					
Salaries - Faculty	-	-	-	-	11,340,288
Salaries - Staff	-	-	-	-	14,126,705
Wages and Other Compensation	-	-	-	-	1,039,891
Benefits and Other Payroll-Related Costs	-	-	-	-	6,183,825
Cost of Goods Sold	-	-	-	-	-
Professional Fees and Services	-	-	-	-	2,201,281
Travel	-	-	-	-	623,313
Materials and Supplies	-	-	-	-	2,557,259
Communication and Utilities	-	-	-	-	636,102
Repairs and Maintenance	-	-	-	-	1,406,539
Rentals and Leases	-	-	-	-	865,716
Printing and Reproduction	-	-	-	-	350,274
Debt Service - Principal	-	-	-	-	-
Debt Service - Interest	-	-	-	-	-
Capital Expenditures	-	-	13,600,000	13,600,000	13,796,320
Federal and State Pass-Through Expense	-	-	-	-	-
Scholarships	-	-	-	-	12,047,139
Other Expenditures	-	-	-	-	1,697,779
Expenditures	-	-	13,600,000	13,600,000	68,872,429
TRANSFERS					
<i>Intra-campus Transfers Between Funds:</i>					
Inter-Fund Transfer In/(Out)	-	-	2,000,000	2,000,000	-
<i>Transfers Between UNTS Components:</i>					
System Services Allocations	-	-	-	-	(4,213,847)
Debt Service Transfer In (Out)	-	-	-	-	-
Other Inter-Unit Transfers In/(Out)	-	-	-	-	(9,968,148)
<i>Other Transfers:</i>					
Transfer to Other State Agencies In/(Out)	-	-	-	-	-
Legislative Transfers In/(Out)	-	-	-	-	-
Transfers	-	-	2,000,000	2,000,000	(14,181,995)
Estimated Impact on Fund Balance	-	-	(11,600,000)	(11,600,000)	(11,972,986)
Planned Use of Fund Balance & Debt Proceeds					
Student Service Fees Reserves	-	-	-	-	45,000
Undergraduate Advising Fee Reserve	-	-	-	-	38,000
Operations Support	-	-	-	-	289,986
Debt Proceeds	-	-	13,600,000	13,600,000	13,600,000
Planned Use of Fund Balance & Debt Proceeds	-	-	13,600,000	13,600,000	13,972,986

Budgeted Revenue Breakout by Fund – Current Funds

	<i>Current Funds</i>				
	Educational & General	Designated Operating	Auxiliary	Restricted Expendable	Current Funds
Resident Undergrad Tuition	3,884,416	16,207,893	-	-	20,092,310
Non-resident Undergrad Tuition	172,050	78,185	-	-	250,235
Other Undergrad Tuition	-	-	-	-	-
Waivers Undergrad Tuition	-	-	-	-	-
Gross Undergraduate Tuition	4,056,466	16,286,078	-	-	20,342,544
Resident Graduate Tuition	3,591,044	3,001,225	-	-	6,592,269
Non-resident Graduate Tuition	58,515	20,661	-	-	79,176
Other Graduate Tuition	-	-	-	-	-
Waivers Graduate Tuition	-	-	-	-	-
Gross Graduate Tuition	3,649,559	3,021,886	-	-	6,671,445
Fees - Instructional	-	8,010	-	-	8,010
Fees - Mandatory	-	3,726,130	-	-	3,726,130
Fees - Incidental	-	686,982	10,000	-	696,982
Waivers - Fees	(204,005)	(4,736)	-	-	(208,741)
Gross Fees	(204,005)	4,416,386	10,000	-	4,222,381
Disc & Allow-Tuition and Fee	(742,330)	(3,633,030)	-	-	(4,375,360)
Discount and Allowances	(742,330)	(3,633,030)	-	-	(4,375,360)
Tuition and Waiver Conversion	-	-	-	-	-
Net Tuition and Fees	6,759,691	20,091,320	10,000	-	26,861,011
Athletics	-	-	-	-	-
Auxiliary Enterprises	-	-	1,272,240	-	1,272,240
Discounts and Allowances - Auxiliaries	-	-	-	-	-
Other Sales of Goods and Services	-	7,611	200,000	-	207,611
Sales of Goods and Services	-	7,611	1,472,240	-	1,479,851
Federal Programs and Contracts	-	120,371	-	1,366,092	1,486,463
Federal Financial Aid	-	-	-	6,500,000	6,500,000
State Programs and Contracts	-	-	-	453,779	453,779
State Financial Aid	2,424,965	-	-	140,000	2,564,965
Other Grants and Contracts	-	-	-	561,410	561,410
Grants and Contracts	2,424,965	120,371	-	9,021,281	11,566,617
State Appropriations - General	22,166,741	-	-	-	22,166,741
State Appropriations - Additional	3,492,589	-	-	-	3,492,589
State Appropriations	25,659,330	-	-	-	25,659,330
Capital Appropriations - HEF	2,113,004	-	-	-	2,113,004
Capital Appropriations	2,113,004	-	-	-	2,113,004
Gross Professional Fees	-	-	-	-	-
Contractual Allowances and Discounts	-	-	-	-	-
Net Professional Fees	-	-	-	-	-
Gift Income	-	275,625	-	2,651,250	2,926,875
Investment Income	-	424,749	-	-	424,749
Other Revenue	-	50,000	-	-	50,000
Revenues	36,956,990	20,969,676	1,482,240	11,672,531	71,081,437

FY 2019 – UNT Dallas
Budget - Current Funds by Quarter



University of North Texas Dallas
FY19 - Quarterly Spread Worksheet

	Q1 FYTD Estimate	Q2 FYTD Estimate	Q3 FYTD Estimate	Q4 FYTD Budget
Revenues				
Net Tuition and Fees	9,215,777	22,603,395	25,289,496	26,861,011
Sales of Goods and Services	665,933	1,183,881	1,331,866	1,479,851
Grants and Contracts	2,891,654	5,783,309	8,674,963	11,566,617
State Appropriations	23,066,742	23,966,742	24,866,742	25,659,330
Capital Appropriations	2,113,004	2,113,004	2,113,004	2,113,004
Gift Income	231,719	463,438	695,156.25	2,926,875
Investment Income	106,187	212,375	318,561.75	424,749
Other Revenue	12,500	25,000	37,500	50,000
Total Revenues	38,303,516	56,351,142	63,327,288	71,081,437
Expenditures				
Salaries - Faculty	3,515,489	7,030,979	10,206,259	11,340,288
Salaries - Staff	3,558,279	7,116,558	10,674,837	14,233,116
Wages and Other Compensation	259,973	519,946	779,918	1,039,891
Benefits and Other Payroll-Related Costs	1,545,956	3,091,913	4,637,869	6,183,825
Professional Fees and Services	-	-	-	2,201,281
Travel	124,663	186,994	373,988	623,313
Materials and Supplies	511,452	767,178	1,534,355	2,557,259
Communication and Utilities	127,220	190,831	381,661	636,102
Repairs and Maintenance	210,981	492,289	843,923	1,406,539
Rentals and Leases	216,429	432,858	649,287	865,716
Printing and Reproduction	52,541	122,596	210,164	350,274
Debt Service - Principal	-	-	-	-
Debt Service - Interest	-	-	-	-
Capital Expenditures	137,424	157,056	176,688	196,320
Federal and State Pass-Through Expense	-	-	-	-
Depreciation and Amortization	-	-	-	-
Scholarships	4,818,856	9,637,711	10,842,425	12,047,139
Other Expenditures	424,445	848,890	1,273,334	1,697,779
Total Expenditures	15,503,707	30,595,796	42,584,710	55,272,429
Transfers				
<i>Intra-campus Transfers Between Funds:</i>				
Debt Service Transfer In (Out)	-	-	-	-
Inter-Fund Transfer In/(Out)	-	-	-	(2,000,000)
<i>Transfers Between UNTS Components:</i>				
System Services Allocations	(1,026,859)	(2,053,718)	(3,080,577)	(4,107,436)
Other Inter-Unit Transfers In/(Out)	(1,969,673)	(2,202,565)	(9,706,845)	(9,939,737)
<i>Other Transfers:</i>				
Transfer to Other State Agencies In/(Out)	-	-	-	-
Legislative Transfers In/(Out)	-	-	-	-
Total Transfers	(2,996,532)	(4,256,283)	(12,787,422)	(16,181,995)

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UNT System Administration Budget Overview

Executive Summary and Highlights

Strategic Impact and Major Goals Addressed by FY 2019 Budget

The FY2019 budget is a measured request, built in conjunction with the on-going System-wide administrative cost reviews, and in collaboration with member institution leadership.

Motion – Item #12

I move approval of item 12, Approval of the FY18 UNT System Consolidated budget, with the commitment that the Board will, in collaboration with the Chancellor, establish an ad hoc work group to review administrative costs throughout the System with the goal of improving services, eliminating duplication, and reducing overhead expenses wherever possible in both campus and System operations. The Chancellor will be expected to report to this Board with preliminary findings not later than the May, 2018 meeting.

It includes Expenses needed to ensure the UNT System Administration can successfully execute its mission and strategic goals, and supports the actions approved by the Board of Regents at the August, 2017 Board of Regents' Meeting.

The continued goal of the administrative cost reviews is to improve services, eliminate duplication, and reduce overhead expenses wherever possible in both campus and System operations. These ongoing reviews are a natural and necessary progression of the original financial transformation which was undertaken to strengthen governance, and provide process efficiency, accountability, data transparency, and savings where applicable.

This budget and the related adjustments to processes, services, and expectations, have put in place a structure for continuous improvement that will bring further opportunities for cost savings, operational efficiencies, innovation, quality evaluation, customer satisfaction, communications, and collaboration.

System Administration's commitment to fiscal responsibility is demonstrated by the actions taken during FY2018 and for FY2019 including, but not limited to:

Finance:

- Organizational restructure
 - Consolidated budget planning/execution, reduced management positions
 - Automated internal call center
 - Resulted in reduced staffing by 17 FTE
- Moved Student Accounting to campuses and consolidated student facing operations
- Conducted a line-by-line review of System Administration Budget – eliminated software/subscription costs, fees, promotional items, sponsorships, professional, and other non-critical costs

- Automating areas of accounts payable
- Streamlining payroll processing and assessing outsourcing
- Implementing Budget Forecasting and Strategic Decision-making Tool-- beyond current spreadsheet approach
- Establish cost efficiency key performance indicators for Systems Administration and University Administration (services) through CFOs Council

ITSS:

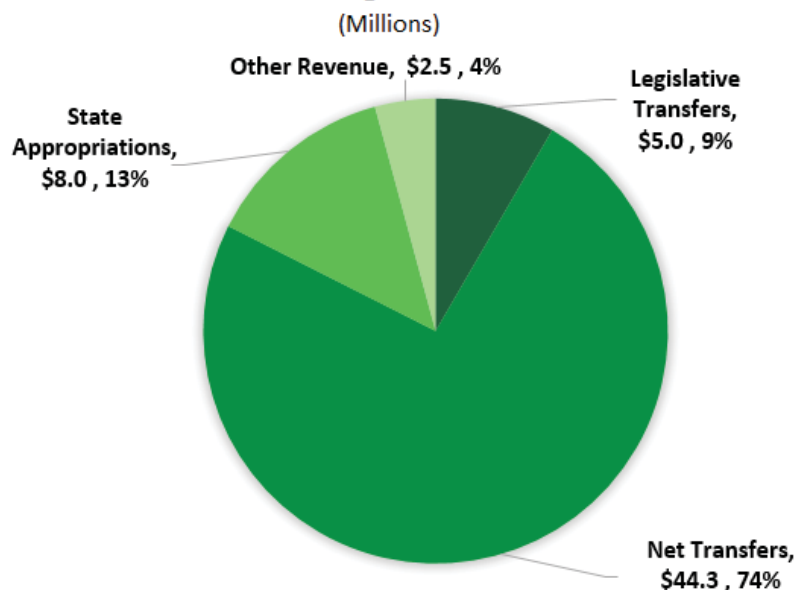
- Organizational delayering underway
- Consolidating external call center and CRM Development and Operations at UNT
- Consolidating HSC IT Security with System IT Security
- Assessing HSC telecom move to Cloud PBX
- Establishing plan to move to next generation technology for ERP

Revenues

State Appropriations

- Supports salaries for the System Administration
- Remainder of the appropriation supports the Universities Center at Dallas and Federation of North Texas Universities, which will be transferred to other state institutions as appropriate

FY 2019 Budgeted Revenues



Sales of Goods and Services – Lofts

- The Lofts maintain average of approximately 96% occupancy
- Due to the healthy downtown market, rents continue to increase for newly signed leases
- FY2019 budget reflects expenses in excess of revenues totaling \$300K
- Continue to seek tenants for other available space

Transfers

Intra-Campus Transfers Between Funds

- Represents transfers from Current Funds to Plant Funds for debt service

Transfers Between UNTS Components

- Transfers to System Administration from member institutions support services provided to the institutions and debt service held by System Administration.
- Project based construction management fees support the operation of the Office of Facilities, Planning and Construction

Other Transfers - Legislative

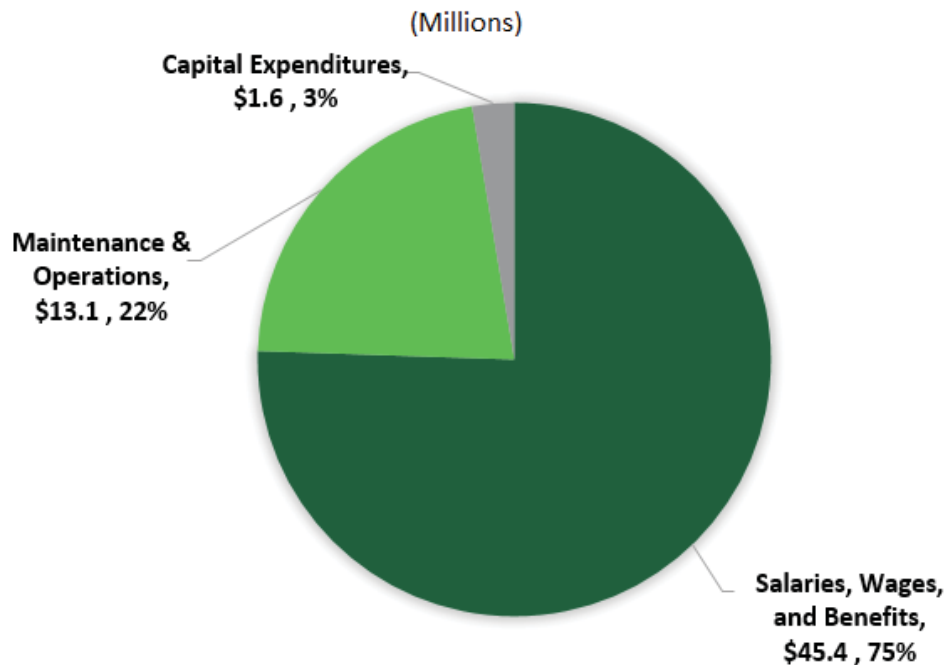
- Transfers to member institutions from System Administration reflect required legislative transfers of appropriations

Expenses

The variance of Expenses between FY2018 and FY2019 is a net of multiple factors:

- System Administration savings and reductions resulting from administrative reviews;
- Transfers of some services formerly provided by System Administration back to member institutions

FY 2019 Budgeted Expenses and Net Transfers



FTE Categories	FY 2017		FY 2018		FY 2019
	Budget	Actuals	Budget	Actuals	Budget
Administrators	17.0	17.7	18.0	17.4	18.0
Faculty	0.0	0.0	0.0	0.0	0.0
Other Staff	542.3	524.8	530.3	493.5	466.0
Total FTE	559.3	542.5	548.3	510.8	484.0

Reserves and Capital Expenses

In FY 2019, there are no new capital projects. However, the renovation of the Municipal Building is on schedule and continues to be within budget.

System Administration’s FY2019 budget reflects a potential use of reserves for the 1900 Elm Street lofts (auxiliary) but administration will closely manage the lofts’ budget during FY2019 in order to avoid a loss.

Summary

UNT System Administration continues to strengthen its commitment to innovation, collaboration, and fiscal responsibility in support of the UNT System member institutions and the communities we serve.

FY 2019 Summary – Current Funds

Budget for Revenues, Expenses & Other Changes in Fund Balances

	FY 2018 Budget	FY 2018 Forecast (Actuals)	FY 2019 Budget	Increases (Decreases)	
				FY 2019 to FY 2018 Est Amount	Actuals Percent
Revenues					
Net Tuition and Fees	-	-	-	-	-
Sales of Goods and Services	1,975,485	1,975,485	2,200,000	224,515	11.4%
Grants and Contracts	-	-	-	-	-
State Appropriations	4,089,548	8,457,298	7,969,916	(487,382)	-5.8%
Investment Income	201,139	486,090	316,818	(169,272)	-34.8%
Other Revenue	-	197,399	-	-	-
Total Revenues	6,266,172	11,116,272	10,486,734	(629,538)	64.2%
Expenditures					
Salaries - Faculty	-	-	-	-	-
Salaries - Staff	36,832,263	35,432,263	34,994,645	(437,618)	-1.2%
Wages and Other Compensation	1,209,373	262,566	1,348,500	1,085,934	413.6%
Benefits and Other Payroll-Related Costs	9,773,428	10,297,803	9,026,138	(1,271,665)	-12.3%
Subtotal - Personnel Costs	47,815,064	45,992,632	45,369,283	(623,349)	-1.4%
Professional Fees and Services	3,632,559	4,010,484	3,350,400	(660,084)	-16.5%
Travel	492,531	327,252	488,818	161,566	49.4%
Materials and Supplies	841,165	1,430,246	589,916	(840,331)	-58.8%
Communication and Utilities	806,322	1,102,332	757,333	(344,999)	-31.3%
Repairs and Maintenance	5,254,369	3,298,357	5,560,658	2,262,301	68.6%
Rentals and Leases	535,358	1,736,253	973,428	(762,825)	-43.9%
Printing and Reproduction	83,658	47,957	85,936	37,979	79.2%
Other Expenditures	1,189,125	1,315,752	1,302,459	(13,293)	-1.0%
Subtotal - Maintenance & Operation Costs	12,835,087	13,268,634	13,108,948	(159,687)	-1.2%
Capital Expenditures	2,582,991	2,582,991	1,585,429	(997,562)	-38.6%
Total Expenditures	63,233,142	61,844,258	60,063,660	(1,780,598)	-2.9%
Transfers					
Intra-campus Transfers Between Funds					
Inter-Fund Transfer In/(Out)	-	-	-	-	-
Transfers Between UNTS Components					
System Service Allocations	52,054,327	50,566,827	50,009,404	(557,423)	-1.1%
Debt Service Transfer In (Out)	(6,985,609)	(6,985,609)	(6,976,059)	9,550	-0.1%
Other Inter-Unit Transfers In/(Out)	1,168,467	1,168,467	1,233,399	64,932	5.6%
Other Transfers					
Transfer to Other State Agencies In/(Out)	(141,823)	-	-	-	0.0%
Legislative Transfers In/(Out)	11,627,374	7,117,801	5,006,944	(2,110,857)	-4.1%
Total Transfers	57,722,736	51,867,486	49,273,688	(2,593,798)	-5.0%
Estimated Impact on Fund Balance	755,766	1,139,500	-303,237	-1,442,737	-126.6%
Planned Use of Fund Balance & Debt Proceeds	142,276	1,139,500	303,237	(836,263)	-73.4%

FY 2019 – UNT System Administration
Budget Detail by Fund Group – Current Funds

	Current Funds				Current Funds
	Educational & General	Designated Operating	Auxiliary	Restricted Expendable	
REVENUES					
Net Tuition and Fees	-	-	-	-	-
Sales of Goods and Services	-	-	2,200,000	-	2,200,000
Grants and Contracts	-	-	-	-	-
State Appropriations	7,969,916	-	-	-	7,969,916
Capital Appropriations	-	-	-	-	-
Net Professional Fees	-	-	-	-	-
Gift Income	-	-	-	-	-
Investment Income	-	316,818	-	-	316,818
Other Revenue	-	-	-	-	-
Revenues	7,969,916	316,818	2,200,000	-	10,486,734
EXPENDITURES					
Salaries - Faculty	-	-	-	-	-
Salaries - Staff	6,657,123	28,337,522	-	-	34,994,645
Wages and Other Compensation	140,323	1,208,177	-	-	1,348,500
Benefits and Other Payroll-Related Costs	1,811,667	7,214,471	-	-	9,026,138
Cost of Goods Sold	-	-	-	-	-
Professional Fees and Services	-	2,897,640	452,760	-	3,350,400
Travel	-	488,818	-	-	488,818
Materials and Supplies	-	571,134	18,782	-	589,916
Communication and Utilities	-	565,938	191,395	-	757,333
Repairs and Maintenance	-	5,175,643	385,015	-	5,560,658
Rentals and Leases	-	891,166	82,262	-	973,428
Printing and Reproduction	-	84,986	950	-	85,936
Debt Service - Principal	-	-	-	-	-
Debt Service - Interest	-	-	-	-	-
Capital Expenditures	-	1,385,429	200,000	-	1,585,429
Federal and State Pass-Through Expense	-	-	-	-	-
Scholarships	-	-	-	-	-
Other Expenditures	-	1,009,309	293,150	-	1,302,459
Expenditures	8,609,112	49,830,233	1,624,314	-	60,063,660
TRANSFERS					
<i>Intra-campus Transfers Between Funds:</i>					
Inter-Fund Transfer In/(Out)	-	-	-	-	-
<i>Transfers Between UNTS Components:</i>					
System Services Allocations	-	50,009,404	-	-	50,009,404
Debt Service Transfer In (Out)	(4,367,747)	(1,729,388)	(878,923)	-	(6,976,059)
Other Inter-Unit Transfers In/(Out)	-	1,233,399	-	-	1,233,399
<i>Other Transfers:</i>					
Transfer to Other State Agencies In/(Out)	-	-	-	-	-
Legislative Transfers In/(Out)	5,006,944	-	-	-	5,006,944
Transfers	639,197	49,513,415	(878,923)	-	49,273,688
Estimated Impact on Fund Balance	0	0	(303,237)	-	(303,237)
Planned Use of Fund Balance & Debt Proceeds					
Planned Use of Fund Balance ? Lofts	-	-	303,237	-	303,237
Debt Proceeds	-	-	-	-	-
Planned Use of Fund Balance & Debt Proceeds	-	-	303,237	-	303,237

FY 2019 - UNT System Administration
Budget Detail by Fund Group – Non-Current Funds



	Non-Current Funds				FY19
	Endowment Funds	Loan Funds	Plant and Debt	Non-Current	Allfunds
REVENUES					
Net Tuition and Fees	-	-	-	-	-
Sales of Goods and Services	-	-	-	-	2,200,000
Grants and Contracts	-	-	-	-	-
State Appropriations	-	-	-	-	7,969,916
Capital Appropriations	-	-	-	-	-
Net Professional Fees	-	-	-	-	-
Gift Income	-	-	-	-	-
Investment Income	-	-	-	-	316,818
Other Revenue	-	-	-	-	-
Revenues	-	-	-	-	10,486,734
EXPENDITURES					
Salaries - Faculty	-	-	-	-	-
Salaries - Staff	-	-	-	-	34,994,645
Wages and Other Compensation	-	-	-	-	1,348,500
Benefits and Other Payroll-Related Costs	-	-	-	-	9,026,138
Cost of Goods Sold	-	-	-	-	-
Professional Fees and Services	-	-	-	-	3,350,400
Travel	-	-	-	-	488,818
Materials and Supplies	-	-	-	-	589,916
Communication and Utilities	-	-	-	-	757,333
Repairs and Maintenance	-	-	-	-	5,560,658
Rentals and Leases	-	-	-	-	973,428
Printing and Reproduction	-	-	-	-	85,936
Debt Service - Principal	-	-	44,393,272	44,393,272	44,393,272
Debt Service - Interest	-	-	34,599,261	34,599,261	34,599,261
Capital Expenditures	-	-	18,260,000	18,260,000	19,845,429
Federal and State Pass-Through Expense	-	-	-	-	-
Scholarships	-	-	-	-	-
Other Expenditures	-	-	-	-	1,302,459
Expenditures	-	-	97,252,533	97,252,533	157,316,193
TRANSFERS					
<i>Intra-campus Transfers Between Funds:</i>					
Inter-Fund Transfer In/(Out)	-	-	-	-	-
<i>Transfers Between UNTS Components:</i>					
System Services Allocations	-	-	-	-	50,009,404
Debt Service Transfer In (Out)	-	-	6,976,059	6,976,059	-
Other Inter-Unit Transfers In/(Out)	-	-	72,016,474	72,016,474	73,249,873
<i>Other Transfers:</i>					
Transfer to Other State Agencies In/(Out)	-	-	-	-	-
Legislative Transfers In/(Out)	-	-	-	-	5,006,944
Transfers	-	-	78,992,533	78,992,533	128,266,221
Estimated Impact on Fund Balance	-	-	(18,260,000)	(18,260,000)	(18,563,238)
Planned Use of Fund Balance & Debt Proceeds					
Planned Use of Fund Balance ? Lofts	-	-	-	-	303,237
Debt Proceeds	-	-	18,260,000	18,260,000	18,260,000
Planned Use of Fund Balance & Debt Proceeds	-	-	18,260,000	18,260,000	18,563,237

FY 2019 – UNT System Administration
Budgeted Revenue Breakout by Fund – Current Funds



	Current Funds				Current Funds
	Educational & General	Designated Operating	Auxiliary	Restricted Expendable	
Resident Undergrad Tuition	-	-	-	-	-
Non-resident Undergrad Tuition	-	-	-	-	-
Other Undergrad Tuition	-	-	-	-	-
Waivers Undergrad Tuition	-	-	-	-	-
Gross Undergraduate Tuition	-	-	-	-	-
Resident Graduate Tuition	-	-	-	-	-
Non-resident Graduate Tuition	-	-	-	-	-
Other Graduate Tuition	-	-	-	-	-
Waivers Graduate Tuition	-	-	-	-	-
Gross Graduate Tuition	-	-	-	-	-
Fees - Instructional	-	-	-	-	-
Fees - Mandatory	-	-	-	-	-
Fees - Incidental	-	-	-	-	-
Waivers - Fees	-	-	-	-	-
Gross Fees	-	-	-	-	-
Disc & Allow-Tuition and Fee	-	-	-	-	-
Discount and Allowances	-	-	-	-	-
Tuition and Waiver Conversion	-	-	-	-	-
Net Tuition and Fees	-	-	-	-	-
Athletics	-	-	-	-	-
Auxiliary Enterprises	-	-	-	-	-
Discounts and Allowances - Auxiliaries	-	-	-	-	-
Other Sales of Goods and Services	-	-	2,200,000	-	2,200,000
Sales of Goods and Services	-	-	2,200,000	-	2,200,000
Federal Programs and Contracts	-	-	-	-	-
Federal Financial Aid	-	-	-	-	-
State Programs and Contracts	-	-	-	-	-
State Financial Aid	-	-	-	-	-
Other Grants and Contracts	-	-	-	-	-
Grants and Contracts	-	-	-	-	-
State Appropriations - General	7,969,916	-	-	-	7,969,916
State Appropriations - Additional	-	-	-	-	-
State Appropriations	7,969,916	-	-	-	7,969,916
Capital Appropriations - HEF	-	-	-	-	-
Capital Appropriations	-	-	-	-	-
Gross Professional Fees	-	-	-	-	-
Contractual Allowances and Discounts	-	-	-	-	-
Net Professional Fees	-	-	-	-	-
Gift Income	-	-	-	-	-
Investment Income	-	316,818	-	-	316,818
Other Revenue	-	-	-	-	-
Revenues	7,969,916	316,818	2,200,000	-	10,486,734

FY 2019 – UNT System Administration
Budget - Current Funds by Quarter



University of North Texas System
FY19 - Quarterly Spread Worksheet

Revenues	Q1 FYTD Estimate	Q2 FYTD Estimate	Q3 FYTD Estimate	Q4 FYTD Budget
Net Tuition and Fees				-
Sales of Goods and Services	550,000	1,100,000	1,650,000	2,200,000
Grants and Contracts				-
State Appropriations	6,611,166	7,064,083	7,517,000	7,969,916
Capital Appropriations				-
Net Professional Fees				-
Gift Income				-
Investment Income	79,205	158,410	237,615	316,818
Other Revenue				-
Total Revenues	7,240,371	8,322,493	9,404,615	10,486,734
Expenditures				
Salaries - Faculty				-
Salaries - Staff	8,748,661	17,497,323	26,245,984	34,994,645
Wages and Other Compensation	337,125	674,250	1,011,375	1,348,500
Benefits and Other Payroll-Related Costs	2,256,535	4,513,069	6,769,604	9,026,138
Cost of Goods Sold	-	-	-	-
Professional Fees and Services	837,600	1,675,200	2,512,800	3,350,400
Travel	122,205	244,409	366,614	488,818
Materials and Supplies	147,479	294,958	442,437	589,916
Communication and Utilities	189,333	378,667	568,000	757,333
Repairs and Maintenance	3,165,103	3,931,640	4,842,092	5,560,658
Rentals and Leases	243,357	486,714	730,071	973,428
Printing and Reproduction	21,484	42,968	64,452	85,936
Debt Service - Principal	-	-	-	-
Debt Service - Interest	-	-	-	-
Capital Expenditures	1,312,804	1,403,679	1,494,554	1,585,429
Federal and State Pass-Through Expense	-	-	-	-
Depreciation and Amortization	-	-	-	-
Scholarships	-	-	-	-
Other Expenditures	325,615	651,230	976,844	1,302,459
Total Expenditures	17,707,300	31,794,106	46,024,826	60,063,660
Transfers				
<i>Intra-campus Transfers Between Funds:</i>				
Inter-Fund Transfer In/(Out)				-
<i>Transfers Between UNTS Components:</i>				
System Services Allocations	12,502,351	25,004,702	37,507,053	50,009,404
Debt Service Transfer In (Out)	(1,901,318)	(1,901,318)	(6,976,058)	(6,976,059)
Other Inter-Unit Transfers In/(Out)	512,948	753,098	993,249	1,233,399
<i>Other Transfers:</i>				
Transfer to Other State Agencies In/(Out)				-
Legislative Transfers In/(Out)	1,122,601	2,417,382	3,712,163	5,006,944
Total Transfers	12,236,582	26,273,864	35,236,407	49,273,688

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Proposed Board Order

Board Briefing



Committee: Finance & Facilities

Date Filed: July 30, 2018

Title: FY2019 UNT System Consolidated Budget

Background:

The Office of the Vice Chancellor for Finance presents to the Board of Regents the FY2019 Consolidated Budget for approval on behalf of the University of North Texas (UNT), UNT Health Science Center (UNTHSC), University of North Texas at Dallas (UNTD), and UNT System Administration (System Administration).

The proposed Budget is a combination of Current Funds for Board approval and estimates of Non-current Funds to provide the expected impact of the budget on the financial health of the institution. This All Funds approach is taken to meet the expectations of the Board of Regents for greater public transparency, accountability, and integrated financial operations at the UNT System.

The proposed Consolidated UNT System Budget is composed of current funds revenue of \$1,091.2M, current funds Expenses of \$970.0M, and total current funds net transfers of (\$107.6M). This budget results in a net impact to current fund balances of \$13.5M.

Financial Analysis/History:

The UNT System Consolidated Budget as presented provides detailed information on the proposed revenue, expense and transfer budgets and their impact on the financial health of the UNT System.

UNT Chief Financial Officer

UNTHSC Chief Financial Officer

UNT Dallas Chief Financial Officer

Vice Chancellor for Finance

Legal Review:

This item has been reviewed by General Counsel.

Vice Chancellor/General Counsel

Schedule:

Once approved, this budget will be implemented for FY 2019 beginning September 1, 2018.

Recommendation:

Approval of the FY2019 Consolidated Current Fund Budget for UNT, UNTHSC, UNTD and System Administration.

Recommended By:

Gary Rahlfs

Vice Chancellor for Finance

Chancellor

Attachments Filed Electronically:

- UNT System FY2019 Consolidated Operating Budget



Board Order

Title: FY2019 UNT System Consolidated Budget

At an official meeting of the Board of Regents of the University of North Texas System properly posted and held on August 9-10th, 2018, pursuant to a motion made by Regent _____ and seconded by Regent _____, the Board approved the motion presented below:

Whereas, each institution of the UNT System has developed a budget for the 2019 FY, and

Whereas, the total Current Funds revenue budget of the UNT System is summarized in the following table, and

Current Funds Revenue by UNTS Component

	Educational & General	Designated Operating	Auxiliary	Restricted Expendable	Total Current Funds
University of North Texas	\$ 253,664,693	\$ 305,595,159	\$ 91,748,944	\$ 91,811,505	\$ 742,820,301
UNT Health Science Center	\$ 132,841,004	\$ 87,928,203	\$ 631,145	\$ 45,374,862	\$ 266,775,214
UNT Dallas	\$ 36,956,990	\$ 20,969,676	\$ 1,482,240	\$ 11,672,531	\$ 71,081,437
UNT System Administration	\$ 7,969,916	\$ 316,818	\$ 2,200,000	\$ -	\$ 10,486,734
					\$ 1,091,163,686

Whereas, the total Current Fund expense budget of the UNT System is summarized in the following table, and

Current Funds Expense by UNTS Component

	Educational & General	Designated Operating	Auxiliary	Restricted Expendable	Total Current Funds
University of North Texas	\$ 220,069,509	\$ 247,751,494	\$ 68,428,109	\$ 91,811,505	\$ 628,060,617
UNT Health Science Center	\$ 106,803,550	\$ 80,334,949	\$ 361,386	\$ 39,160,115	\$ 226,660,000
UNT Dallas	\$ 29,028,782	\$ 15,678,088	\$ 893,028	\$ 9,672,531	\$ 55,272,429
UNT System Administration	\$ 8,609,112	\$ 49,830,233	\$ 1,624,314	\$ -	\$ 60,063,659
					\$ 970,056,705

Whereas, the total Current Fund transfer budget of the UNT System is summarized in the following table

Current Funds Transfers by UNTS Component

	Educational & General	Designated Operating	Auxiliary	Restricted Expendable	Total Current Funds
University of North Texas	\$ (33,595,184)	\$ (55,245,132)	\$ (20,181,800)	\$ -	\$ (109,022,116)
UNT Health Science Center	\$ (23,327,485)	\$ (2,507,369)	\$ -	\$ (5,821,938)	\$ (31,656,792)
UNT Dallas	\$ (7,928,208)	\$ (5,664,574)	\$ (589,213)	\$ (2,000,000)	\$ (16,181,995)
UNT System Administration	\$ 639,197	\$ 49,513,415	\$ (878,923)	\$ -	\$ 49,273,689
					\$ (107,587,214)

Now, Therefore, The Board of Regents authorizes and approves the following:

1. The FY 2019 Current Funds operating budget for UNT System institutions (UNT, UNTHSC, UNTD and UNT System Administration) as presented
-

VOTE: ____ ayes ____ nays ____ abstentions

BOARD ACTION:

Attested By:

Approved By:

Rosemary R. Haggett, Secretary
Board of Regents

Brint Ryan, Chairman
Board of Regents

Budget Office Contact Information

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Glossary of Terms

All Funds – An all-funds perspective is commonly used in colleges, universities, and not-for-profit organizations to account for all resources received and used throughout an institution. Fund accounting classifies resources into funds according to limitations placed on their use by the resource providers. Each fund has its own revenues, Expenses, transfers, assets, liabilities, and fund balances.

Auxiliary Enterprises – Auxiliary Enterprise funds are generated from fees and sales of goods and services. Revenues and Expenses of auxiliaries are recorded in this fund group. Auxiliaries include parking and transportation, student activity centers, housing (residence halls), and dining services. Fees collected to support auxiliaries, such as housing fees and parking fees, are recognized in these funds.

Capital Appropriations-HEF – Higher Education Fund (HEF) revenues are received from the State of Texas General Revenue Fund for construction and other capital purposes. This constitutional appropriation is made for acquiring land with or without permanent improvements, constructing and equipping buildings or other permanent improvements, major repair or rehabilitation of building or other permanent improvements and acquisition of capital equipment, library books, and library materials. Construction, improvements, and capital equipment purchases made from HEF funds can only be used for structures used jointly for educational and general activities and for auxiliary enterprises to the extent of their use for educational and general activities.

Capital Expenses – These Expenses are for acquiring, renovating, or maintaining capitalized fixed assets, such as land, buildings, and equipment. This includes amounts expended for capitalized equipment, vehicles, software, leases, construction projects, and other capitalized Expenses. Any emergency maintenance or repairs that are above the capitalization thresholds should be included in capital Expenses. At the consolidated funds level, this amount will net to exclude amounts recorded as additions to capital (rather than as an expense) consistent with accounting guidelines.

Communication and Utilities – These Expenses are for communication and utilities fees, including amounts for telecommunication and utilities contracts.

Core Services – Includes functions that are universal in nature, many do not vary largely based on the customer, are generally performed on a cross-institutional level, and may be legally mandated to take a certain level of direction from institutions in service delivery. Includes functions such as support for the Board of Regents, the Chancellor's Office, Academic Affairs, Finance, General Counsel, Government Relations, Internal Audit and Facilities Planning and Construction. These services are funded by transfers from the component units and State Appropriations.

Cost of Goods Sold – These Expenses are incurred by UNTS for goods that are sold, which usually generate revenue classified as Sales of Goods and Services.

Current Funds – Category of funds that include those funds that are most closely associated with day-to-day operations of the institution. These funds include Education & General, Designated Operating, Auxiliary Enterprises, and Restricted Expendable Funds and are approved by the governing board as part of the operating budget.

Debt Service - Interest – These Expenses are comprised of interest Expenses incurred on debt, including amounts for interest Expenses, and fiscal charges.

Debt Service - Principal – These Expenses comprise payments of principal due on debt.

Depreciation and Amortization – Depreciation and amortization Expenses are non-cash Expenses related to the amortization of capitalized amounts over time. Depreciation Expenses reduce the book value of capital assets to reflect the result of wear and tear, age, and/or obsolescence. Depreciation and amortization Expenses are generally recorded in Plant & Debt Funds.

Designated Operating – Designated Operating funds are unrestricted funds that have been designated to support the operating activities of the institution. Revenues and Expenses for operating activities of the academic enterprise are recorded in this fund group.

The sources of Designated Operating funds include revenues from professional services (e.g., medical services), grants and contracts (including cost recovery), designated tuition, other student fees, and quasi-endowment funds (e.g., Tobacco Funds).

Student fees collected as Designated Operating funds may be statutorily authorized under specific legislation, or may be allowable as mandatory or incidental fees under 54.504 or 55.16(c) of the Texas Education Code (TEC). Fees in Designated Operating funds include instructional fees, library use fees, publication fees, international education fees, and technology fees.

Most athletics revenues and Expenses are recorded in Designated Operating funds.

Discounts and Allowances – Discounts and allowances are defined as the difference between the stated charge to the student and what is actually paid by the student and/or third parties on behalf of the student. Discounts and allowances are generally given as institutional merit-based and/or need-based scholarships to offset the cost of tuition, fees, and/or housing and dining Expenses.

Educational and General – Educational and General (E&G) funds are used to support the University of North Texas System (UNTS) general educational operations, including faculty salaries, operating Expenses of instructional departments, library operations and acquisitions, general administration, student services, campus security, and operation and maintenance of educational and general buildings and facilities, as well as a limited number of special research units. E&G funds may only be expended for purposes as defined by the respective sources of funds; and the funds cannot be transferred to any other fund group.

E&G funds include all general revenue and general revenue-dedicated state appropriations. Biennially, in the General Appropriations Act (GAA), universities are allocated (appropriated) funds based on legislative decisions and formulas calculated by the Texas Legislative Budget Board. These appropriations include general revenue funds (e.g., appropriations for employee

benefits and Texas Higher Education Fund appropriations for capital investments) and general revenue-dedicated funds (e.g., statutory and Board-authorized tuition and fees).

Appropriations of federal funds and other funds (e.g., Tobacco Funds) are not considered E&G and are recorded separately in designated operating or other funds.

The chart of accounts segregates E&G funds between General Operating Funds (general revenue-dedicated appropriations for statutory and Board-authorized tuition and fees) and State Appropriations (all other appropriations).

Endowment Funds – Endowment Funds include net income (realized and unrealized gains and losses) from the investment of gifts to the university, the uses of which are either restricted by donors or unrestricted. Endowment Funds may also include investment income from funds designated by administrative decision (quasi-endowment).

Defined amounts of income from the Endowment Funds are distributed to Designated Operating funds, Auxiliary Enterprises funds, and Restricted Expendable funds according to the designations of the respective donors. Endowment Funds do not include those of separately-incorporated foundations. Funds not distributed remain in the Endowment Funds to be invested and expended at a later time.

Fees – This consists of revenues generated from fees assessed to students. The fees are categorized as either instructional fees, mandatory fees (e.g., student service fee, intercollegiate athletics fee, library use fee, etc.), or incidental fees (e.g., lab fees, graduation fee, etc.).

Fund Balances – A fund balance is identified as the net difference between a fund's assets and liabilities. A change in fund balance represents the difference between fund additions (revenues and transfers-in) and deductions (Expenses and transfers-out). This differs from (but is inclusive of) institutional operating reserves which are funds within the unencumbered balance for which no use is presently planned and have been set aside for issues such as economic uncertainties, future apportionments, pending salary or price increase appropriations, etc. These reserves can include unrestricted-undesignated fund balances, and can also include unrestricted-designated fund balances, but should not include funds set aside for future capital replacement needs, future debt service needs, etc.

Gift Income – This includes amounts for operating and non-operating purposes. Gift income may occur in any fund group except E&G funds for which the donor may or may not set restrictions on use of the funds.

Grants and Contracts – These revenues result from grants, contracts, and cooperative agreements with governmental agencies, local, and private organizations for current operations, research or other specified purposes. This includes revenues from federal programs and contracts, federal financial aid, federal pass-through revenue, state programs and contracts, state financial aid, state pass-through revenue, and other grants and contracts.

Higher Education Fund (HEF) – See Capital Appropriations-HEF, above.

Inter-Fund Transfers In/(Out) – This includes all transfers between fund groups within a

component unit (i.e., within a campus).

Internal Charges – This line item consists of expenses charged for services performed by one department for another within a single UNTS component (e.g., printing or advertising services performed by one department as a service for another department). These expenses will net to zero at the component level.

Internal Income – This line item consists of internal income earned by one department for services rendered to another department within a single UNTS component (e.g., printing or advertising services performed by one department as a service for another department). These revenues will net to zero at the component level.

Intra-Campus Transfers Between Funds – See Inter-Fund Transfers In/(Out) above.

Investment Income – This includes revenues received from interest and dividends, realized and unrealized gains and losses on investments, and realized gains or losses on the sale of capital assets.

Loan Funds – Loan Funds consist of amounts that are held for making loans to students. These funds are derived from a number of sources, including private and governmental gifts and grants, federal borrowing, and unrestricted allocations. Interest income, in most instances, is returned to this fund as an increase to the available fund balance.

Materials and Supplies – These Expenses relate to general supplies and non-capitalized equipment costs.

Net Professional Fees – Net Professional Fees consist of Gross Professional Fees net of Contractual Allowances and Discounts. Professional fees are generated by physician services, counseling services, business consulting services, architectural services, and endowment services provided by UNTS.

Net Tuition and Fees – Student tuition and fee revenues, net of waivers, discounts, and allowances, are included in Net Tuition and Fees. Statutory tuition is authorized under TEC 54.501 and flows to E&G funds. Board-authorized tuition is authorized under TEC 54.008 for graduate programs and also flows to E&G funds. Per TEC 54.0513, Board-designated tuition amounts are approved by the governing board of UNTS and are recorded in Designated Operating funds.

Non-Current Funds – Category of funds that include those funds that are unpredictable in nature and not as closely associated with day-to-day operations of the institution as those in Current Funds. These funds are provided in the budget as estimates, so as to show the entire anticipated financial impact of the budget on the institution. These funds include Endowment, Loan, and Plant and Debt Funds and are not approved by the governing board as part of the operating budget.

Non-resident Graduate Tuition – This consists of revenue recognized for gross tuition charges to graduate or professional students for instructional services who are **not** Texas residents.

Non-resident Undergraduate Tuition – This consists of revenue recognized for gross tuition charges to undergraduate students for instructional services who are **not** Texas residents.

Other Expenses – Other Expenses include tax Expenses; insurance Expenses; postage and shipping Expenses; dues, memberships and licenses; patent and royalty Expenses; speaking events; employee training Expenses; non-travel reimbursable Expenses; and other operating Expenses.

Other Inter-Unit Transfers In/(Out) – All other transfers of funds between UNTS component units are recorded here. This includes amounts transferred for reimbursement of special project work, various services rendered by one component to another (e.g., library services), or to pay bond payments for debt securities held by UNT System Administration for the benefit of the component units.

Other Legislative Transfers-In/(Out) – Transfers of legislative appropriations from one UNTS component to another.

Other Revenues – This includes revenues received from other activities not included above.

Other Transfers – Transfers to Other State Agencies and Other Legislative Transfers.

Other Undergraduate Tuition - This includes guaranteed tuition, tuition for repeat courses, and tuition for excess hours, and other amounts not included above.

Personnel Costs (Salaries, Wages and Other Compensation, Benefits and Other Payroll-related Costs) – These Expenses include compensation and benefits provided to faculty (including lecturers and teaching graduate students), staff (including administrators, professionals, support staff, and non-teaching graduate students), and hourly or other temporary employees (including student workers). This includes regular or periodic payments for non-regular work or services (e.g., overtime, supplemental compensation, summer compensation, and bonuses).

Planned Use of Fund Balances – Fund balances (positive or negative) that, with approval, are carried forward from the previous year's budget into the current year's budget to be used or made up throughout the FY.

Plant & Debt Funds – Plant and Debt Funds include unexpended plant funds, renewal and replacement funds, retirement of indebtedness funds, and investments in plant assets. These funds are used for the construction, renovation, and the acquisition of capital assets.

Printing and Reproduction – These Expenses relate to printing and copying Expenses paid to external vendors for printing Expenses, publications, and copying services.

Professional Fees and Services – These Expenses relate to unique services that are typically performed by professionals whose occupation is the rendering of such services exclusive of any employment by UNTS. These Expenses occur through accounts payable (i.e., rather than through payroll). Examples include consultant services; medical and veterinary; advertising fees; audit, financial and business services; legal expert services; collection agency services; architectural and engineering services; and other purchased services.

Rentals and Leases – These Expenses relate to non-capitalized lease and rental fees.

Repairs and Maintenance – These Expenses relate to non-capitalized projects, scheduled maintenance, emergency maintenance and repairs, and other non-capitalized amounts.

Resident Graduate Tuition – This consists of revenue recognized for gross tuition charges to graduate or professional students for instructional services who are Texas residents.

Resident Undergraduate Tuition – This consists of revenue recognized for gross tuition charges to undergraduate students for instructional services who are Texas residents.

Restricted Expendable – Restricted Expendable funds are generated from external sources that restrict the use of the funds. Sources of Restricted Expendable funds include restricted federal grants and contracts, restricted state grants and contracts, gifts and grants from private sources, and restricted distributions from endowments.

Restricted grant and contract funds are not earned until the terms of the agreement under which they were given have been met. FY budgets include estimates based on historical activity, but actual amounts may vary notably from year-to-year based on the timing and amounts of awards.

Gifts and grants in Restricted Expendable funds include revenues from bequests and pledges for operating purposes. These also include unrestricted gifts from private sources.

Sales of Goods and Services – This consists of revenues generated from the sales of goods and services. These revenues include those generated from athletics sales, auxiliary enterprises sales and services (net of discounts and allowances), library services, property rental revenues, clinical operations, and other sales of goods and services.

Scholarships, Exemptions, and Financial Aid – Scholarships, exemptions, and financial aid Expenses are for grants-in-aid or other financial aid payments, as well as tuition exemptions, awarded to students. This includes amounts received in revenues (e.g., federal financial aid) which are then recorded as an expenditure (as scholarships, exemptions, and financial aid) to fund tuition and fee payments.

Shared Services – Includes activities that may have been performed at the institutional or departmental level. Service delivery may be shaped by institutional factors and include transactions that are formed to support operations. Includes the following functions: Information Technology, Business Support Services and Human Resources. These services are funded by transfers from the component units.

State Appropriations – State Appropriations are revenues received from the State of Texas General Revenue Fund that supplement institutional revenue in order to meet operating Expenses such as faculty salaries, employee benefits, utilities, and institutional support. State Appropriations are split between State Appropriations-General and State Appropriations-Additional. State Appropriations may only be used for defined purposes and must be recorded in E&G funds as described above.

Transfers Between UNTS Components – Transfers between components of the UNTS that are used to fund core System Administration operations, shared services or other activities one component performs for another.

Transfers to Other State Agencies In/(Out) – This consists of transfers to other Texas state agencies.

Travel – Travel Expenses include direct Expenses for domestic and international travel and entertainment costs, as well as amounts reimbursed to employees for such incurred costs.

Waivers – Waivers are recorded as reductions to the gross tuition and fee amounts noted above.

Transfer Details

	University of North Texas	UNT Health Science Center	University of North Texas Dallas	University of North Texas System
Revenues	742,820,301	266,775,214	71,081,437	10,486,734
Expenses	628,060,617	226,660,000	55,272,429	60,063,660
Transfer In	123,091,120	5,850,488	11,508,233	49,359,979
Transfer Out	232,113,236	37,507,280	27,690,228	86,291
Revenues	742,820,301	266,775,214	71,081,437	59,760,422 *
Expenses and Net Transfers	737,082,733	258,316,792	71,454,424	60,063,660 ~

*Revenue + Transfer In - Transfer Out

~Expenses

FY2019 Capital Improvement Plan

UNIVERSITY *of* NORTH TEXAS SYSTEM

FY2019 SUMMARY

UNIVERSITY OF NORTH TEXAS

UNIVERSITY OF NORTH TEXAS DALLAS

UNIVERSITY OF NORTH TEXAS HEALTH SCIENCE CENTER

UNIVERSITY OF NORTH TEXAS SYSTEM

FY2019 SUMMARY (in \$Million)

NEW PROJECTS FOR FY2019

Proj. No.	Project	Funding Source	Prior Yrs Budget	2019	2020	2021	2022	2023+	Total Project
University of North Texas									
19-01-1901	Maple Hall Dining and Residence Hall Interior Renovation	AUX		0.60	8.95				9.55
19-01-1902	Dining Food Stands	AUX		2.30					2.30
19-01-1903	General Academic Classroom & Class Laboratory E-Locking	HEAF		0.40	2.00	2.00			4.40
19-01-1904	Kerr Hall A Tower Common Areas Renovation	AUX		2.50					2.50
19-01-1905	Art Studio Facility	HEAF		0.60	6.40				7.00
19-01-1906	Apogee Stadium Turf	RFS		0.73					0.73
19-01-1907	Music Building Recital Hall and MEIT Renovation	HEAF		0.36	3.30				3.66
19-01-1908	Clark Hall MEP Renovation	AUX		0.35	6.56				6.91
University of North Texas Total			-	7.84	27.21	2.00	-	-	37.05
University of North Texas Dallas									
University of North Texas Dallas Total			-	-	-	-	-	-	-
University of North Texas Health Science Center									
University of North Texas Health Science Center Total			-	-	-	-	-	-	-
University of North Texas System									
University of North Texas System Total			-	-	-	-	-	-	-
Capital Improvement Plan Total			-	7.84	27.21	2.00	-	-	37.05

Summary by Funding Source

	Funding Source	Prior Yrs Budget	2019	2020	2021	2022	2023+	Total
	HEAF	-	1.36	11.70	2.00	-	-	15.06
	Tuition Revenue Bonds	-	-	-	-	-	-	-
	Commercial Paper	-	-	-	-	-	-	-
	Revenue Financing System Bonds	-	0.73	-	-	-	-	0.73
	Auxiliary Reserves	-	5.75	15.51	-	-	-	21.26
	Grants	-	-	-	-	-	-	-
	Student Fees	-	-	-	-	-	-	-
	Housing Revenue	-	-	-	-	-	-	-
	Gift/Donations	-	-	-	-	-	-	-
	Annual Budget, Operating and Capital	-	-	-	-	-	-	-
Total		-	7.84	27.21	2.00	-	-	37.05

FY2019 Capital Improvement Plan

UNIVERSITY *of* NORTH TEXAS SYSTEM

UNIVERSITY OF NORTH TEXAS

FY19 (in \$Million)

University of North Texas

Proj. No.	Project	Funding Source	Prior Yrs Budget	2019	2020	2021	2022	2023+	Total Project
Previously Approved Projects:									
System OFPC Managed Projects									
16-1.20	College of Visual Arts and Design	TRB	65.00	5.00					70.00
16-1.84a	New Residence Hall - Phase 1 (Amend. 8/17)	RFS	45.72	13.18					58.90
16-2.66	Coliseum Concourse Renovation	RFS	8.00	-					8.00
16-2.67	1500 I-35 Building (Amend. 8/16)	RFS	12.50	-					12.50
16-2.82	Track and Field Stadium (Amend. 2/17, 8/18)	RFS	9.90	2.10					13.69
		AUX		1.69					
17-01-0005	Discovery Park Bio-Medical Engineering Addition	RFS	17.40	-					17.40
17-01-0010	New Classroom Building	RFS			25.10				25.10
18-01-0004	Art Building Roof Replacement	CP	1.35						1.35
18-01-0007	New Dining Hall	RFS	3.70	15.28	6.49				25.47
18-01-0008	Fouts Field Demolition, Parking, and Bus Transfer Station	RFS	2.00	12.00					14.00
18-01-0009	Athletic Indoor Practice Facility	RFS	1.50	9.90					18.90
		GIFT		7.50					
UNT Facilities Managed Projects									
2.20	Matthews Hall MEP (Amend. 8/17)	HEAF	1.20						1.20
2.21	Wooten Hall MEP (Amend. 8/16, 8/17)	HEAF	3.45						3.45
2.33	Willis Library MEP (Amend. 8/15, 8/17)	HEAF	9.85						9.85
16-2.25	General Academic Building MEP & Interior Renovation (Amend. 8/17)	HEAF	0.75	-					10.35
		RFS		9.60					
16-2.50	Life Science Lab Exhaust Upgrade (Amend. 8/17)	HEAF	5.95	-					5.95
16-2.55	Discovery Park MEP Upgrade (Amend. 8/17)	HEAF	1.00	9.00	10.00	0.60			20.60
16-2.77	Wooten Hall Code Upgrade (Amend. 8/17)	HEAF	4.76	-					4.76
17-01-0001	Terrill Hall MEP & Interior Renovation (Amend. 8/17)	HEAF	0.80	6.50					7.30
17-01-0002	Coliseum MEP Renovation (Amend. 8/17)	RFS				0.90	9.50		10.40
17-01-0003	Kerr Hall MEP & Interior Renovation (Amend. 8/17)								
		AUX	5.79	-					5.79
17-01-0004	USB MEP Renovation (Amend. 8/17, 8/18)	HEAF	3.60	-	2.00				5.60
17-01-0008	Coliseum Roof Replacement (Amend. 8/17)	Local/Cash	2.43	-					2.43
17-01-0009	Off-Site Campus #2	Local/Cash		-	1.50				1.50
17-01-0012	Eagle Point Parking Lot #84	CP	2.20	-					2.20
18-01-0001	Maple Hall MEP & Renovation	AUX	4.38						4.38
18-01-0002	Clark Hall Lobby Renovation	AUX	0.17	2.10					2.27
18-01-0003	Sage Hall Academic Success Center Phase III	HEAF	0.26	2.75					3.01
18-01-0005	Discovery Park Utility Capacity Upgrade	HEAF	2.00						2.00
18-01-0006	Music Building Courtyard Renovation	HEAF	1.59						2.59
		GIFT		1.00					
Previously Approved Projects Total			217.25	97.60	45.09	1.50	9.50	-	370.94
New Projects for Approval:									
19-01-1901	Maple Hall Dining and Residence Hall Interior Renovation	AUX		0.60	8.95				9.55
19-01-1902	Dining Food Stands	AUX		2.30					2.30
19-01-1903	General Academic Classroom & Class Laboratory E-Locking	HEAF		0.40	2.00	2.00			4.40
19-01-1904	Kerr Hall A Tower Common Areas Renovation	AUX		2.50					2.50
19-01-1905	Art Studio Facility	HEAF		0.60	6.40				7.00
19-01-1906	Apogee Stadium Turf	RFS		0.73					0.73
19-01-1907	Music Building Recital Hall and MEIT Renovation	HEAF		0.36	3.30				3.66
19-01-1908	Clark Hall MEP Renovation	AUX		0.35	6.56				6.91
New Projects for Approval Total			-	7.84	27.21	2.00	-	-	37.05
Planned Projects with Identified Funding Sources:									
01-1610	Administration Building Renovation	HEAF				1.10	9.90		11.00
01-1611	Curry Hall MEP	HEAF					0.54	5.46	6.00
01-1613	PAC Foundation Repairs	HEAF						2.15	2.15
01-1614	Physical Education Building (PEB) MEP	HEAF				0.80	8.20		9.00
01-1615	Language Building MEP	HEAF					0.45	6.05	6.50
01-1618	RTFP MEP Renovation	HEAF					0.75	7.00	7.75
01-1721	Chilton Restrooms and Envelope Repairs	HEAF			0.50	5.60			6.10
01-1725	Union Circle Drive Re-surface	AUX			2.00				2.00
01-1909	Campus Lighting Upgrades	HEAF				0.20	1.50	1.50	3.20
01-1910	Crumley Hall Lobby Renovation	AUX			0.25	1.25	1.25		2.75
01-1911	McConnell Hall Interior Renovation	AUX			0.40	2.00	2.00		4.40
01-1912	College Inn MEP and Renovation	AUX					0.60	6.00	6.60



FY19 (in \$Million)

University of North Texas

Proj. No.	Project	Funding Source	Prior Yrs Budget	FY19					Total Project	
				2019	2020	2021	2022	2023+		
01-1913	Wooten Hall Electrical Upgrades	HEAF				0.20	2.00		2.20	
01-1914	Frisco Branch Campus Development	RFS		1.00	3.00	22.00	55.00	10.00	91.00	
Planned Projects with Identified Funding Sources Total				-	1.00	6.15	33.15	82.19	38.16	160.65
Planned Land Acquisitions										
3.01	Land Acquisitions per Master Plan	HEAF		1.50	1.50	1.50	1.50	1.50	7.50	
3.02	Property Acquisition - Frisco	RFS		9.00					9.00	
Planned Land Acquisition Total				-	10.50	1.50	1.50	1.50	1.50	16.50
Capital Improvement Plan Total				217.25	116.94	79.95	38.15	93.19	39.66	585.14

Planned Project without Identified Funding Sources

New Construction:

- New Sports Arena
- Education & Outreach Center
- Science & Tech Research Building

Renovation:

- Athletic Center Renovation and Expansion
- Hickory Hall Renovation
- Underground Utility Repairs
- SRB 2nd Floor Renovation

Summary by Funding Source

Funding Source	Funding Source	Prior Yrs Budget	FY19					Total
			2019	2020	2021	2022	2023+	
HEAF	HEAF	35.21	21.11	25.70	12.00	24.84	23.66	142.52
Tuition Revenue Bonds	TRB	65.00	5.00	-	-	-	-	70.00
Commercial Paper	CP	3.55	-	-	-	-	-	3.55
Revenue Financing System Bonds	RFS	100.72	72.79	34.59	22.90	64.50	10.00	305.50
Auxiliary Reserves	AUX	10.34	9.54	18.16	3.25	3.85	6.00	51.14
Grants	GRNT	-	-	-	-	-	-	-
Student Fees	SF	-	-	-	-	-	-	-
Housing Revenue	HR	-	-	-	-	-	-	-
Gift/Donations	GIFT	-	8.50	-	-	-	-	8.50
Annual Budget, Operating and Capital	Local/Cash	2.43	-	1.50	-	-	-	3.93
Total		217.25	116.94	79.95	38.15	93.19	39.66	585.14

Approved

Neal Smatresk

Digitally signed by Neal Smatresk
 DN: cn=Neal Smatresk, o=University of North Texas, ou=President, email=neal.smatresk@unt.edu, c=US
 Date: 2018.07.18 15:00:14 -05'00'

President

UNIVERSITY of NORTH TEXAS SYSTEM

UNIVERSITY OF NORTH TEXAS
 Maple Hall Dining and Residence Hall Interior Renovation
 Capital Improvement Project No. 19-01-1901



PROJECT DESCRIPTION

This project will provide for renovation to both the dining hall and the residence areas of Maple Hall. The renovations to the dining hall will address both life safety concerns as well as provide for functional and aesthetic improvements. Mechanical systems serving the kitchen and dining spaces will be upgraded with new equipment. Selective kitchen equipment will be upgraded and installed and equipment layout will be modified to provide for a more efficient and safer work environment. Floor finishes in the dining area will also be upgraded. In the residence hall, interior finishes and furnishings will be improved in the residence rooms, bathrooms, common areas, and offices. An extended project schedule has been outlined to minimize disruption to student life.

PROJECT INFORMATION

JUSTIFICATION: The recently completed Housing Master Plan called for a need to make targeted physical changes to the existing residence halls to correct life safety, deferred maintenance and capital renewal issues, and modernization of facilities to support the needs of the student population to help the University maintain a competitive position in housing and residential life. Maple Hall is one of the oldest residence hall on campus and primarily houses incoming freshman. Currently the lobby and entry to the residence hall is being renovated to improve the aesthetics. However, the remainder of the areas also require modernization to improve the student living experience. Renovations are also necessary in the dining hall to provide a compliant environment for kitchen staff and the optimize production.

LOCATION ON CAMPUS: Main Campus
SIZE (ASF/GSF): GSF: 136,190 ASF: 91,568
CIP PROJECT TYPE (NEW CONST. OR RENO.): Renovation
HISTORICALLY SIGNIFICANT? (Y or N): N
CONSISTENT WITH MASTER PLAN (Y or N): Y

PROJECT BUDGET

Design Fees	\$ 955,000
Construction Costs	\$ 7,120,000
Other Costs (Commissioning, Inspection, etc.)	\$ 75,000
Furniture, Fixtures, and Equipment	\$ 1,200,000
Contingency and Fees	\$ 200,000
Total Projects	\$ 9,550,000

PROJECT FUNDING (in \$ Millions)

Funding Source Abbrv.	Funding Source	Prior Yrs Costs	FY 2019	FY 2020	FY 2021	FY 2022	FY 2023+	Source Total
AUX	Auxiliary Reserves	\$ -	\$ 0.60	\$ 8.95	\$ -	\$ -	\$ -	\$ 9.55
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ 0.60	\$ 8.95	\$ -	\$ -	\$ -	\$ 9.55

UNIVERSITY of NORTH TEXAS SYSTEM

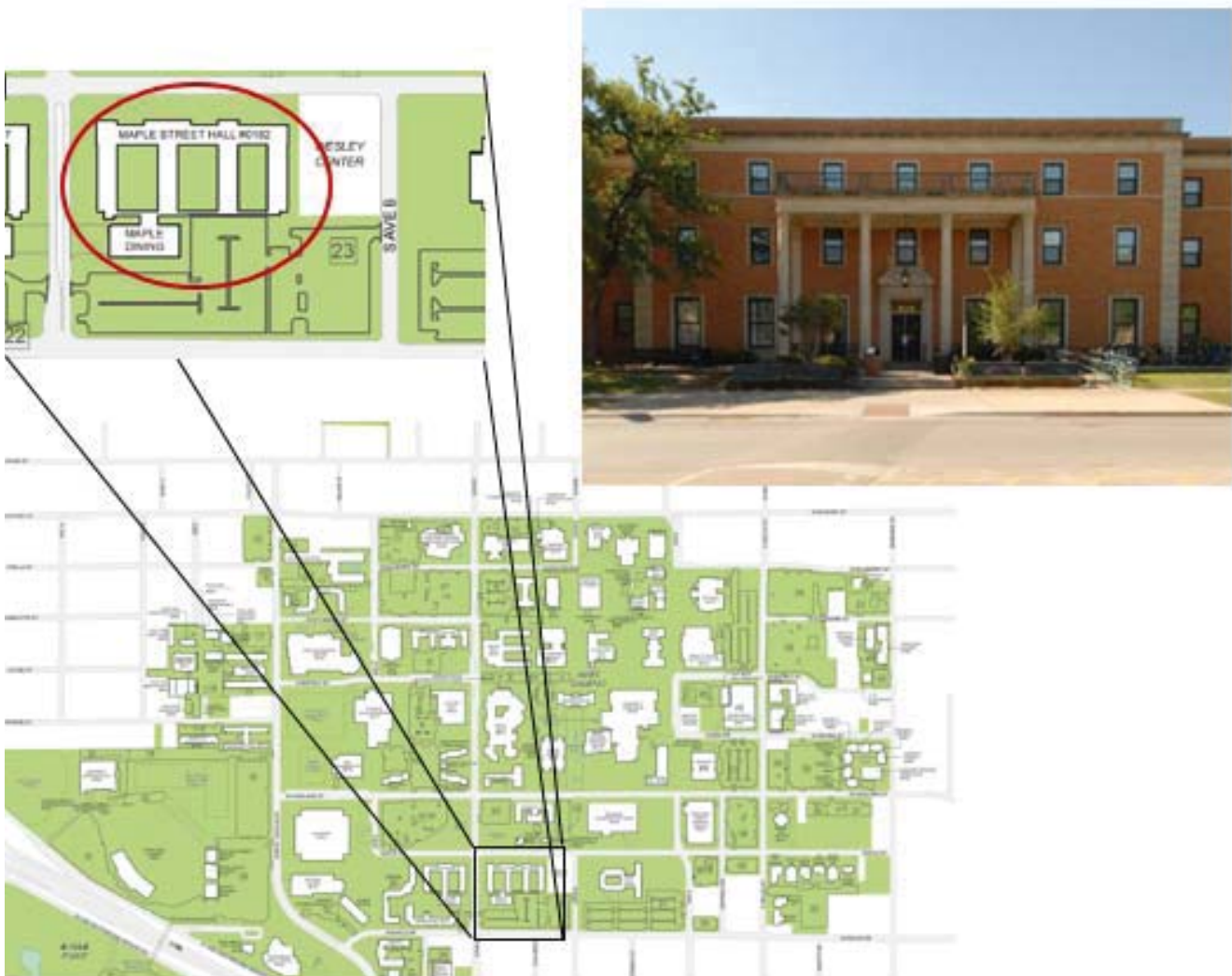
UNIVERSITY OF NORTH TEXAS
Maple Hall Dining and Residence Hall Interior Renovation
Capital Improvement Project No. 19-01-1901



PROJECT SCHEDULE

PREVIOUS APPROVALS FROM BOARD OF REGENTS:	N/A
PROGRAMMING/PLANNING:	N/A
DESIGN:	December 2018 – May 2019
CONSTRUCTION:	May 2019 – January 2021
SUBSTANTIAL COMPLETION:	September 2020

LOCATION MAP



UNIVERSITY of NORTH TEXAS SYSTEM

UNIVERSITY OF NORTH TEXAS

Dining Food Stands

Capital Improvement Project No. 19-01-1902



PROJECT DESCRIPTION

This project will construct three new food stands in the interior of campus. Two food stands will be located on the east side of Sycamore Hall and one food stand on the East side of the Music Building. The project will include the necessary utility connections to support the operation of the structures and the development of the surrounding areas creating an appealing, inviting, outdoor environment. In the location to the east of Sycamore hall, it is anticipated that one of the food stands will be a second UNT Campus Chick-Fil-A and will be a permanent structure constructed on site. The Second food stand in this location will be a modular structure that is fabricated off-site and placed on campus. In the area to the east of the Music Building will be a second UNT Campus Starbucks that will be a modular structure which is fabricated off-site and placed on campus.

PROJECT INFORMATION

JUSTIFICATION: The new dining food stands will provide addition food service capacity to meet the growing needs of the UNT community. The Union was designed to manage approximately \$500,000 per month in retail sales. However, since opening in 2015 the Union has averaged \$1.1 million per month in retail sales. The Chick-Fil-A, Whichwich, Starbucks, and Fuzzy’s located within the Union are operating at or beyond capacity. The two new food stands will alleviate some of the capacity issues on the food service venues within the Union to provide additional options and improved access.

LOCATION ON CAMPUS: Main Campus
SIZE (ASF/GSF): GSF: 1,525 ASF: 1,498
CIP PROJECT TYPE (NEW CONST. OR RENO.): New Construction
HISTORICALLY SIGNIFICANT? (Y or N): N
CONSISTENT WITH MASTER PLAN (Y or N): Y

PROJECT BUDGET

Design Fees	\$ 115,000
Construction Costs	\$ 1,850,000
Other Costs (Commissioning, Inspection, etc.)	\$ -
Furniture, Fixtures, and Equipment	\$ 240,000
Contingency and Fees	\$ 95,000
Total Projects	\$ 2,300,000

PROJECT FUNDING (in \$ Millions)

Funding Source Abrv.	Funding Source	Prior Yrs Costs	FY 2019	FY 2020	FY 2021	FY 2022	FY 2023+	Source Total
AUX	Auxiliary Reserves	\$ -	\$ 2.30	\$ -	\$ -	\$ -	\$ -	\$ 2.30
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ 2.30	\$ -	\$ -	\$ -	\$ -	\$ 2.30

UNIVERSITY of NORTH TEXAS SYSTEM

UNIVERSITY OF NORTH TEXAS

Dining Food Stands

Capital Improvement Project No. 19-01-1902



PROJECT SCHEDULE

PREVIOUS APPROVALS FROM BOARD OF REGENTS:

N/A

PROGRAMMING/PLANNING:

N/A

DESIGN:

October 2018 – March 2019

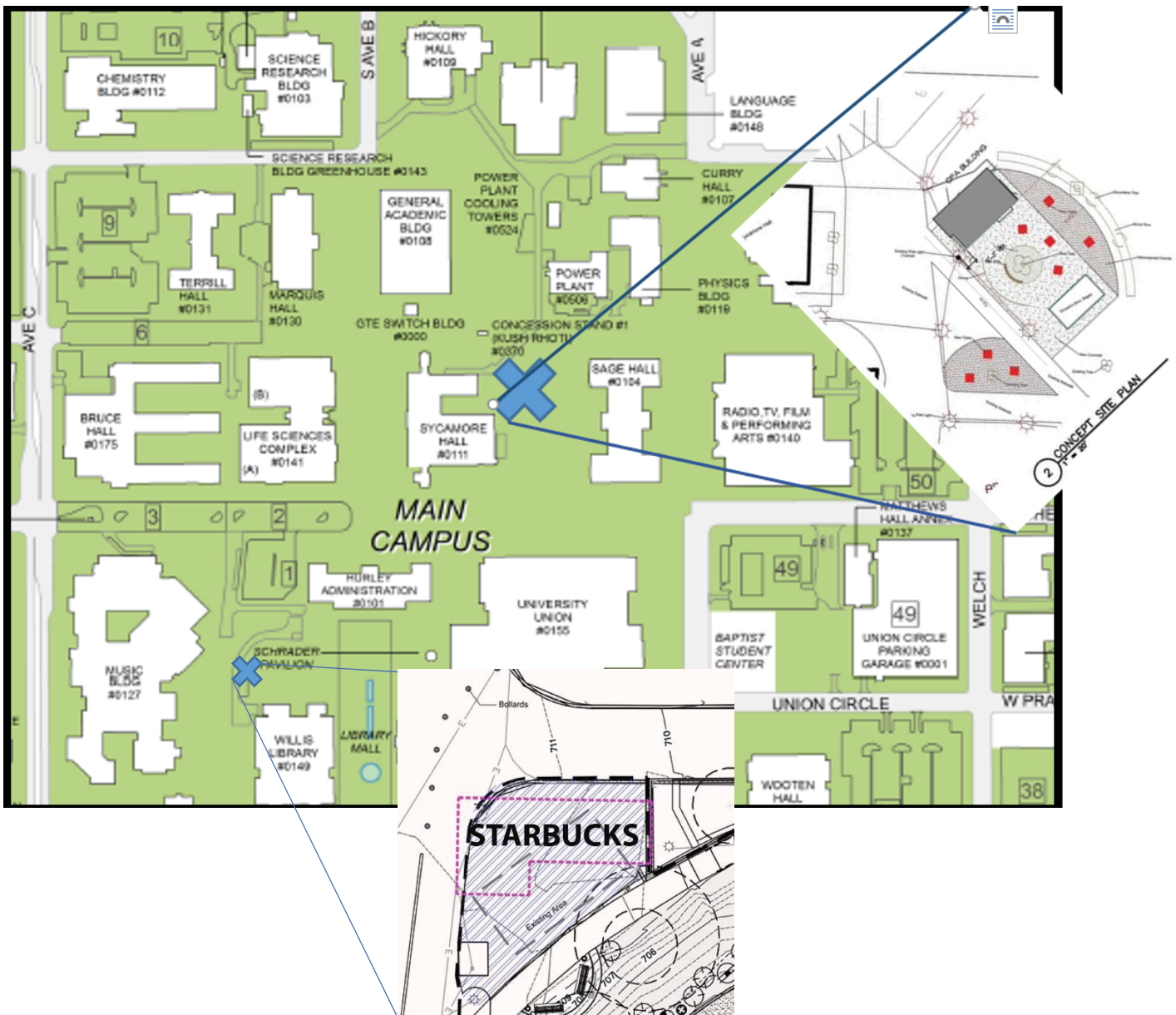
CONSTRUCTION:

July 2019 – September 2020

SUBSTANTIAL COMPLETION:

August 2020

LOCATION MAP



UNIVERSITY of NORTH TEXAS SYSTEM

UNIVERSITY OF NORTH TEXAS
 General Academic Classroom & Class Laboratory E-Locking
 Capital Improvement Project No. 19-01-1903



PROJECT DESCRIPTION

This project will provide new electronic locking capabilities for all of the general academic classrooms and class laboratories on the UNT Campus, including Discovery Park. The project scope does not include auxiliary, such as the Union, Gateway and housing, or athletics related facilities. The new electronic locking system will expand the existing campus system from the building level to individual rooms within the buildings to provide the ability to automate and control the access remotely.

PROJECT INFORMATION

JUSTIFICATION: This project will bring the general classrooms and class laboratories up to UNT Access Control standards. In addition, the ability to automate access to both the building and the rooms within the facilities improves campus safety and takes a proactive approach to scenarios that threaten the campus population.

LOCATION ON CAMPUS: Main Campus and Discovery Park
 SIZE (ASF/GSF): GSF: N/A ASF: N/A
 CIP PROJECT TYPE (NEW CONST. OR RENO.): Renovation
 HISTORICALLY SIGNIFICANT? (Y or N): N
 CONSISTENT WITH MASTER PLAN (Y or N): Y

PROJECT BUDGET

Design Fees	\$ 440,000
Construction Costs	\$ 2,220,000
Other Costs (Commissioning, Inspection, etc.)	\$ 100,000
Furniture, Fixtures, and Equipment	\$ 1,200,000
Contingency and Fees	\$ 440,000
Total Projects	\$ 4,400,000

PROJECT FUNDING (in \$ Millions)

Funding Source Abbr.	Funding Source	Prior Yrs Costs	FY 2019	FY 2020	FY 2021	FY 2022	FY 2023+	Source Total
HEAF	HEAF	\$ -	\$ 0.40	\$ 2.00	\$ 2.00	\$ -	\$ -	\$ 4.40
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ 0.40	\$ 2.00	\$ 2.00	\$ -	\$ -	\$ 4.40

UNIVERSITY of NORTH TEXAS SYSTEM

UNIVERSITY OF NORTH TEXAS

General Academic Classroom & Class Laboratory E-Locking

Capital Improvement Project No. 19-01-1903



PROJECT SCHEDULE

PREVIOUS APPROVALS FROM BOARD OF REGENTS:

PROGRAMMING/PLANNING:

DESIGN:

CONSTRUCTION:

SUBSTANTIAL COMPLETION:

N/A

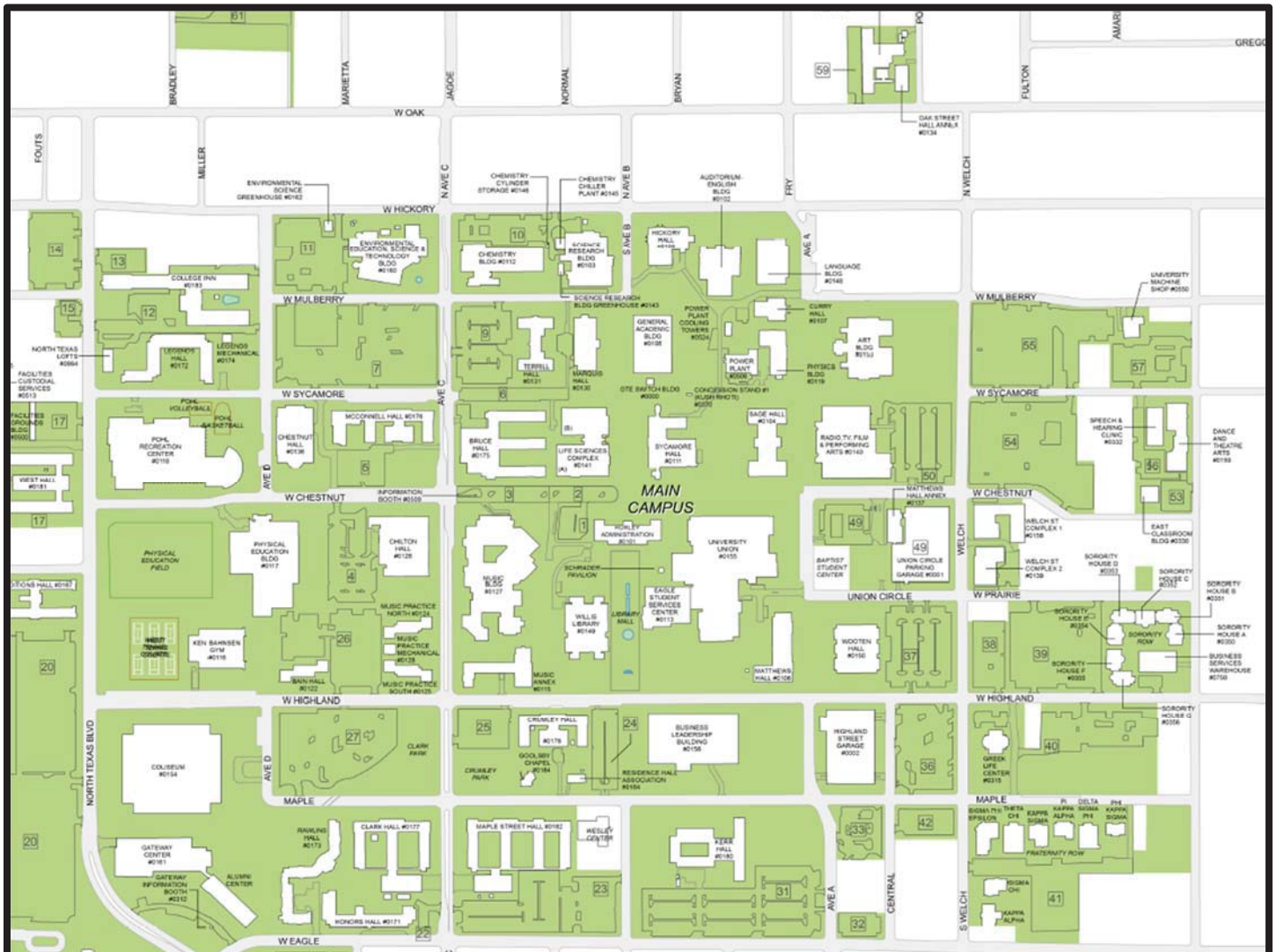
September 2018 – January 2019

March 2019 – August 2019

October 2019 – November 2021

October 2021

LOCATION MAP



UNIVERSITY of NORTH TEXAS SYSTEM

UNIVERSITY OF NORTH TEXAS
 Kerr Hall A-Tower Common Areas Renovation
 Capital Improvement Project No. 19-01-1904



PROJECT DESCRIPTION

This project will provide for aesthetic improvements to the corridors, bathrooms, lobbies, and common areas in the A-Tower. These areas will have new environmentally responsible products and fixtures. The resident rooms will also receive minor upgrades to finishes and furnishings that include new paint, flooring repairs, a built-in wardrobe repairs. An extended project schedule has been outlined to minimize disruption to student life.

PROJECT INFORMATION

JUSTIFICATION: The recently completed Housing Master Plan called for a need to make targeted physical changes to the existing residence halls to correct life safety, deferred maintenance and capital renewal issues, and modernization of facilities to support the needs of the student population to help the University maintain a competitive position in housing and residential life. Kerr Hall is the highest capacity residence hall and houses primarily freshman. These improvements will provide a welcoming and comfortable environment and enhance the living experience of a large majority of campus residence.

LOCATION ON CAMPUS: Main Campus
SIZE (ASF/GSF): GSF: 121,118 ASF: 86,025
CIP PROJECT TYPE (NEW CONST. OR RENO.): Renovation
HISTORICALLY SIGNIFICANT? (Y or N): N
CONSISTENT WITH MASTER PLAN (Y or N): Y

PROJECT BUDGET

Design Fees	\$ -
Construction Costs	\$ 2,248,000
Other Costs (Commissioning, Inspection, etc.)	\$ 2,000
Furniture, Fixtures, and Equipment	\$ -
Contingency and Fees	\$ 250,000
Total Projects	\$ 2,500,000

PROJECT FUNDING (in \$ Millions)

Funding Source		Prior Yrs						
Abbrv.	Funding Source	Costs	FY 2019	FY 2020	FY 2021	FY 2022	FY 2023+	Source Total
AUX	Auxiliary Reserves	\$ -	\$ 2.50	\$ -	\$ -	\$ -	\$ -	\$ 2.50
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ 2.50	\$ -	\$ -	\$ -	\$ -	\$ 2.50

UNIVERSITY of NORTH TEXAS SYSTEM

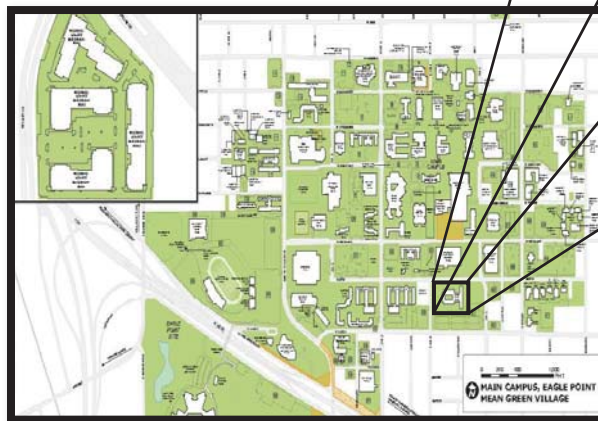
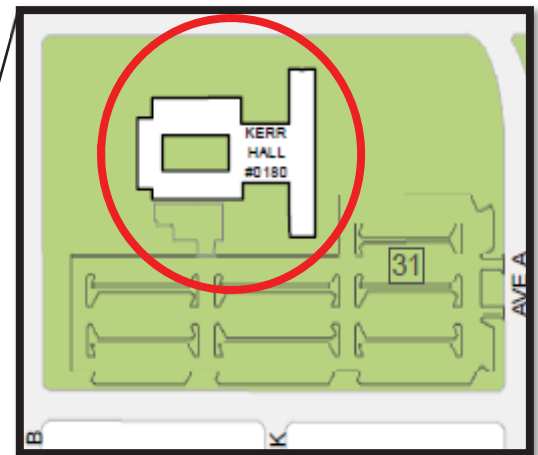
UNIVERSITY OF NORTH TEXAS
Kerr Hall A-Tower Common Areas Renovation
Capital Improvement Project No. 19-01-1904



PROJECT SCHEDULE

PREVIOUS APPROVALS FROM BOARD OF REGENTS:	N/A
PROGRAMMING/PLANNING:	N/A
DESIGN:	September 2018 – December 2018
CONSTRUCTION:	April 2019 – January 2020
SUBSTANTIAL COMPLETION:	August 2019

LOCATION MAP



UNIVERSITY of NORTH TEXAS SYSTEM

UNIVERSITY OF NORTH TEXAS

Art Studio Facility

Capital Improvement Project No. 19-01-1905



PROJECT DESCRIPTION

An in-house feasibility study will assess the building conditions of Oak Street Hall and provide for accommodations for the few remaining College of Visual Arts and Design (CVAD) academic functions remaining in the facility. The ultimate goal is to minimize the usage of Oak Street Hall to allow for the complete or partial demolition of the existing building. Depending on the result of the feasibility study, the project may provide for the renovation of limited areas of the existing building or provide new construction to accommodate the academic needs of CVAD.

PROJECT INFORMATION

JUSTIFICATION: Oak Street Hall was originally constructed in 1947 as a residence hall. However, it is now currently utilized for accommodating several College of Visual Arts academic programs such as ceramics, photography, and graduate studios. A portion of these functions will be relocated once the new CVAD facility is completed; however, some will still remain. The structural and utility system at Oak Street Hall are failing and no longer meet code or functional standards. Significant upgrades would be required to comply with life safety and building codes which are expected to exceed the building value.

LOCATION ON CAMPUS: 1120 W. Oak Street
SIZE (ASF/GSF): GSF: TBD ASF: TBD
CIP PROJECT TYPE (NEW CONST. OR RENO.): New Construction
HISTORICALLY SIGNIFICANT? (Y or N): N
CONSISTENT WITH MASTER PLAN (Y or N): Y

PROJECT BUDGET

Design Fees	\$ 525,000
Construction Costs	\$ 5,325,000
Other Costs (Commissioning, Inspection, etc.)	\$ 150,000
Furniture, Fixtures, and Equipment	\$ 200,000
Contingency and Fees	\$ 800,000
Total Projects	\$ 7,000,000

PROJECT FUNDING (in \$ Millions)

Funding Source Abrv.	Funding Source	Prior Yrs Costs	FY 2019	FY 2020	FY 2021	FY 2022	FY 2023+	Source Total
HEAF	HEAF	\$ -	\$ 0.60	\$ 6.40	\$ -	\$ -	\$ -	\$ 7.00
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ 0.60	\$ 6.40	\$ -	\$ -	\$ -	\$ 7.00

UNIVERSITY of NORTH TEXAS SYSTEM

UNIVERSITY OF NORTH TEXAS

Art Studio Facility

Capital Improvement Project No. 19-01-1905



PROJECT SCHEDULE

PREVIOUS APPROVALS FROM BOARD OF REGENTS:

PROGRAMMING/PLANNING:

DESIGN:

CONSTRUCTION:

SUBSTANTIAL COMPLETION:

N/A

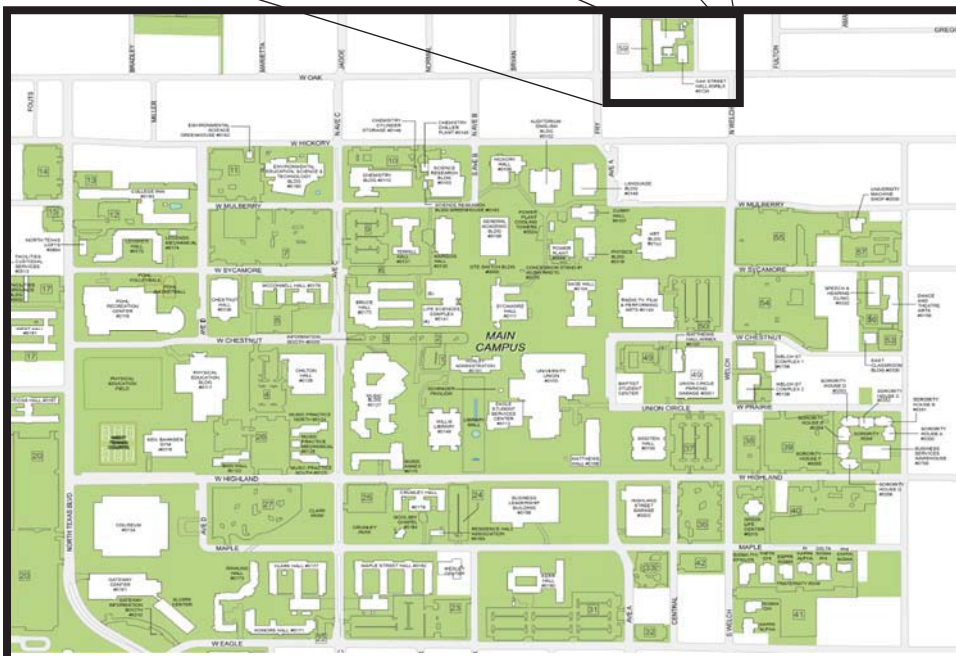
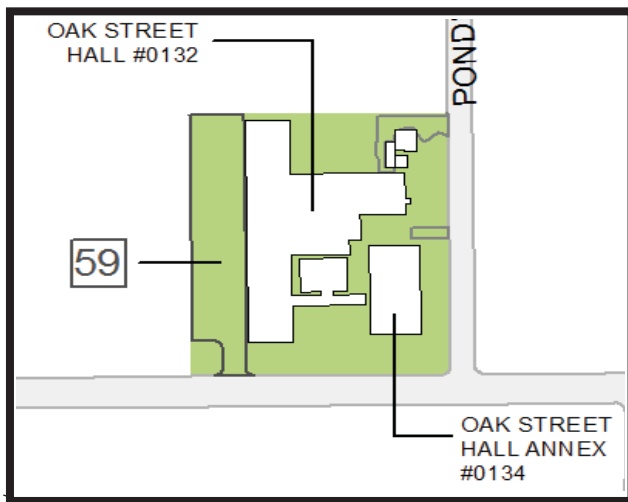
September 2018 – March 2019

April 2019 – April 2020

May 2020 – September 2021

August 2021

LOCATION MAP



UNIVERSITY of NORTH TEXAS SYSTEM

UNIVERSITY OF NORTH TEXAS
 Apogee Stadium Turf
 Capital Improvement Project No. 19-01-1906



PROJECT DESCRIPTION

This project will provide for the installation of new artificial turf with a multi-layer cooling technology system, repair goal posts and the purchase of specialize equipment to maintain the playing surface.

PROJECT INFORMATION

JUSTIFICATION: Apogee Stadium was constructed to be a premier athletic venue. Installation of the new artificial turf with cooling technology maintains a cooler temperature on the playing surface which improves participant safety and will also enhance the stadium’s aesthetics. The construction of this project has already commenced through the use of local funds to meet the schedule requirements. However, long-term bonds will be issued to allow for Athletics reimburse the university and pay the debt over time. Project approval is required for the issuance of this long-term debt.

LOCATION ON CAMPUS:	Eagle Point	
SIZE (ASF/GSF):	GSF: N/A	ASF: N/A
CIP PROJECT TYPE (NEW CONST. OR RENO.):	Renovation	
HISTORICALLY SIGNIFICANT? (Y or N):	N	
CONSISTENT WITH MASTER PLAN (Y or N):	Y	

PROJECT BUDGET

Design Fees	\$ 73,000
Construction Costs	\$ 520,000
Other Costs (Commissioning, Inspection, etc.)	\$ 6,000
Furniture, Fixtures, and Equipment	\$ 27,000
Contingency and Fees	\$ 104,000
Total Projects	\$ 730,000

PROJECT FUNDING (in \$ Millions)

Funding Source Abbr.	Funding Source	Prior Yrs Costs	FY 2019	FY 2020	FY 2021	FY 2022	FY 2023+	Source Total
RFS	Revenue Financing System Bonds	\$ -	\$ 0.73	\$ -	\$ -	\$ -	\$ -	\$ 0.73
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ 0.73	\$ -	\$ -	\$ -	\$ -	\$ 0.73

UNIVERSITY of NORTH TEXAS SYSTEM

UNIVERSITY OF NORTH TEXAS

Apogee Stadium Turf

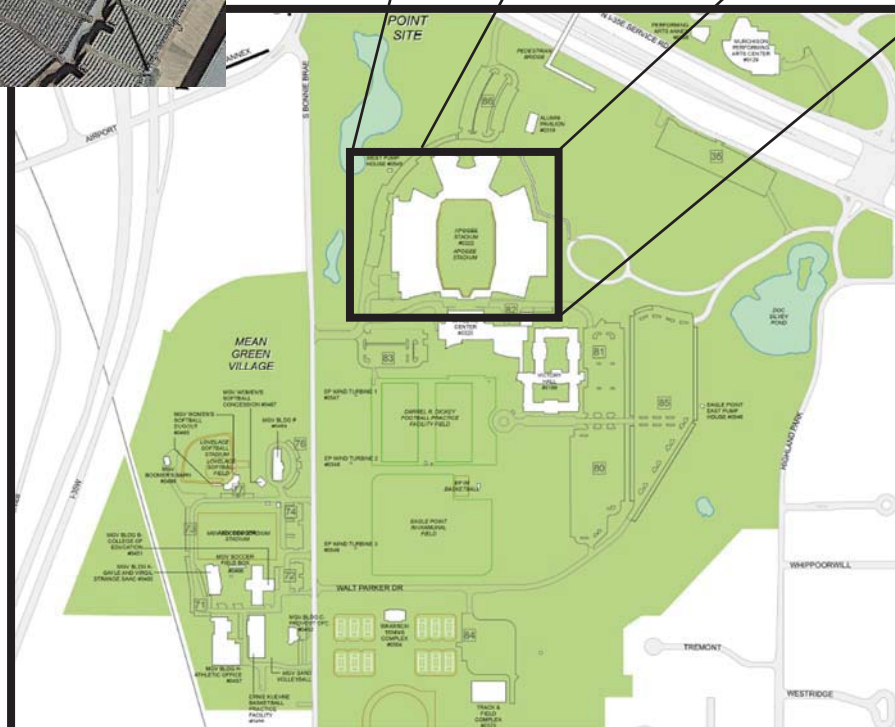
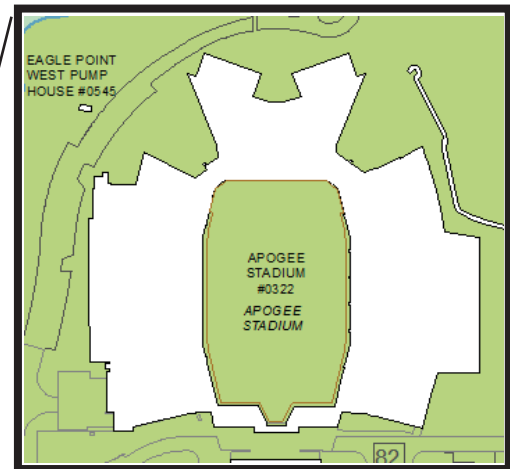
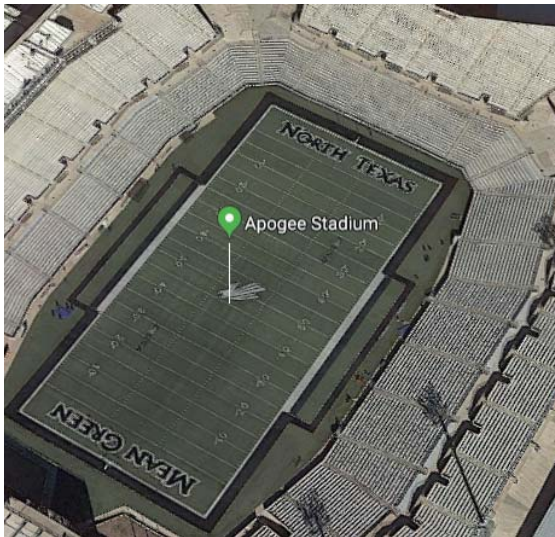
Capital Improvement Project No. 19-01-1906



PROJECT SCHEDULE

PREVIOUS APPROVALS FROM BOARD OF REGENTS:	N/A
PROGRAMMING/PLANNING:	N/A
DESIGN:	N/A
CONSTRUCTION:	May 2018 – August 2018
SUBSTANTIAL COMPLETION:	July 2018

LOCATION MAP



UNIVERSITY of NORTH TEXAS SYSTEM

UNIVERSITY OF NORTH TEXAS
 Music Building Recital Hall and MEIT Renovation
 Capital Improvement Project No. 19-01-1907



PROJECT DESCRIPTION

This project will provide for the renovation of the Recital Hall and the Merrill Ellis Intermedia Theater (MEIT) located in the Music Building for the College of Music. The interior renovations will include improved audio/visual equipment, furnishings, acoustics, lighting, and finishes. Upgrades to the electrical infrastructure will also be necessary to accommodate the new audio/visual equipment.

PROJECT INFORMATION

JUSTIFICATION: The UNT College of Music has a world-renowned academic reputation. However, the facilities that accommodate the College of Music do not reflect this reputation. In 2017, an assessment of the College of Music facilities was completed and found the existing facilities to be inadequate and substandard and identified recommended improvements in the College of Music Building. While not solving all of the College’s space needs, the recommended improvements would provide an immediate, substantial positive impact on the student learning and faculty use of the existing building. Two of the recommended projects were renovations of the Recital Hall and MEIT. The Recital Hall is utilized both for class lectures and recitals. However, the space is not well designed or equipped for either. Audio/visual equipment is outdated and does not adequately serve its intended purpose for lectures and acoustics must be improved for recital use. The MEIT provides a technology rich environment for the intersection of music, audio and visual technology. Upgrades to the current audio/visual systems, acoustics lighting, and interior finishes are required to allow this venue to continue to the trend-setting work done by the Center for Experimental Music and Intermedia.

LOCATION ON CAMPUS:	Main Campus	
SIZE (ASF/GSF):	GSF: 4,365	ASF: 4,365
CIP PROJECT TYPE (NEW CONST. OR RENO.):	Renovation	
HISTORICALLY SIGNIFICANT? (Y or N):	N	
CONSISTENT WITH MASTER PLAN (Y or N):	Y	

PROJECT BUDGET

Design Fees	\$ 300,000
Construction Costs	\$ 1,500,000
Other Costs (Commissioning, Inspection, etc.)	\$ 60,000
Furniture, Fixtures, and Equipment	\$ 1,500,000
Contingency and Fees	\$ 300,000
Total Projects	\$ 3,660,000

PROJECT FUNDING (in \$ Millions)

Funding Source Abrv.	Funding Source	Prior Yrs Costs	FY 2019	FY 2020	FY 2021	FY 2022	FY 2023+
HEAF	HEAF	\$ -	\$ 0.36	\$ 3.30	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

UNIVERSITY of NORTH TEXAS SYSTEM

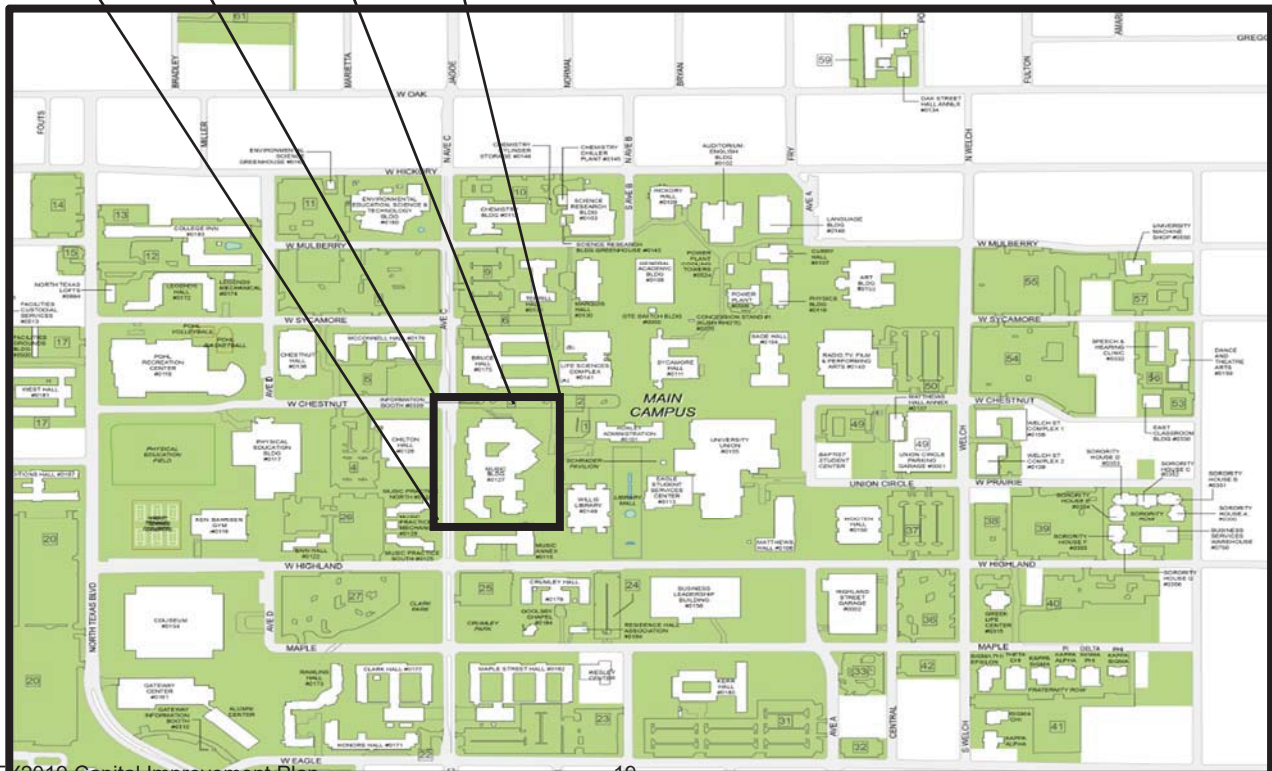
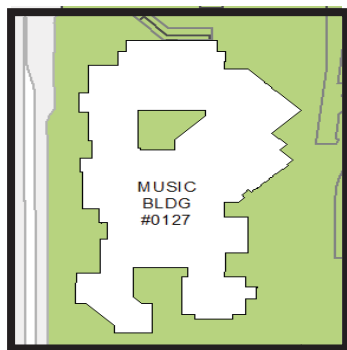
UNIVERSITY OF NORTH TEXAS
Music Building Recital Hall and MEIT Renovation
Capital Improvement Project No. 19-01-1907



PROJECT SCHEDULE

PREVIOUS APPROVALS FROM BOARD OF REGENTS:	N/A
PROGRAMMING/PLANNING:	N/A
DESIGN:	October 2018 – January 2020
CONSTRUCTION:	May 2020 – September 2021
SUBSTANTIAL COMPLETION:	August 2021

LOCATION MAP



UNIVERSITY of NORTH TEXAS SYSTEM

UNIVERSITY OF NORTH TEXAS
 Clark Hall MEP Renovation
 Capital Improvement Project No. 19-01-1908



PROJECT DESCRIPTION

This project will renovate the building mechanical systems located in the basement and mechanical rooms. Renovations will include an HVAC system renewal, replacement of the boilers, and replacement of the electrical components including switchgear, panels, and rewiring. An extended project schedule has been outlined to minimize disruption to student life.

PROJECT INFORMATION

JUSTIFICATION: Clark Hall was constructed in 1966 and is one of the oldest residence halls on campus. The MEP systems have surpassed their life expectancy and a potential failure of these systems would adversely affect the safety and the academic experience of the students that are housed within the facility. This renovation will install new, energy-efficient equipment thereby reducing operational cost and improve occupant comfort.

LOCATION ON CAMPUS:	Main Campus	
SIZE (ASF/GSF):	GSF: 18,105	ASF: N/A
CIP PROJECT TYPE (NEW CONST. OR RENO.):	Renovation	
HISTORICALLY SIGNIFICANT? (Y or N):	N	
CONSISTENT WITH MASTER PLAN (Y or N):	Y	

PROJECT BUDGET

Design Fees	\$ 350,000
Construction Costs	\$ 3,620,000
Other Costs (Commissioning, Inspection, etc.)	\$ 250,000
Furniture, Fixtures, and Equipment	\$ 2,000,000
Contingency and Fees	\$ 690,000
Total Projects	\$ 6,910,000

PROJECT FUNDING (in \$ Millions)

Funding Source Abrv.	Funding Source	Prior Yrs Costs	FY 2019	FY 2020	FY 2021	FY 2022	FY 2023+	Source Total
AUX	Auxiliary Reserves	\$ -	\$ 0.35	\$ 6.56	\$ -	\$ -	\$ -	\$ 6.91
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ 0.35	\$ 6.56	\$ -	\$ -	\$ -	\$ 6.91

UNIVERSITY of NORTH TEXAS SYSTEM

UNIVERSITY OF NORTH TEXAS
Clark Hall MEP Renovation
Capital Improvement Project No. 19-01-1908



PROJECT SCHEDULE

PREVIOUS APPROVALS FROM BOARD OF REGENTS:	N/A
PROGRAMMING/PLANNING:	N/A
DESIGN:	December 2018 – September 2019
CONSTRUCTION:	May 2020 – January 2021
SUBSTANTIAL COMPLETION:	August 2020

LOCATION MAP



FY2019 Capital Improvement Plan

UNIVERSITY *of* NORTH TEXAS SYSTEM

UNIVERSITY OF NORTH TEXAS DALLAS

FY2019 (in \$Million)

University of North Texas Dallas

Proj. No.	Project	Funding Source	Prior Yrs Budget	2019	2020	2021	2022	2023+	Total Project
Previously Approved Projects:									
System OFPC Managed Projects									
16-1.01	Student Learning & Success Center	TRB	49.40	13.60					63.00
Previously Approved Projects Total			49.40	13.60	-	-	-	-	63.00
New Projects for Approval:									
New Project for Approval Total									
			-	-	-	-	-	-	-
Planned Projects with Identified Funding Sources:									
02-1901	Landmark Tower	GIFT			4.50				4.50
02-1902	Second Residence Hall	RFS			3.00	20.00	7.00		30.00
02-1903	Event Center	RFS				2.00	8.00		15.00
		GIFT					3.00	2.00	25.00
02-1904	Parking Garage	RFS						25.00	25.00
Planned Projects with Identified Funding Sources Total			-	-	7.50	22.00	18.00	27.00	74.50
Planned Land Acquisitions									
			-	-	-	-	-	-	-
Planned Land Acquisition Total			-	-	-	-	-	-	-
Capital Improvement Plan Total			49.40	13.60	7.50	22.00	18.00	27.00	137.50

Planned Project without Identified Funding Sources

New Construction:

- STEM Building
- Business and Information Technology Building

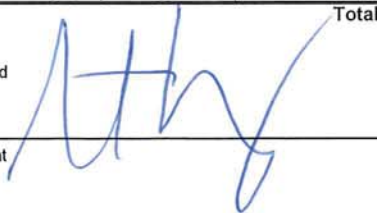
Renovation:

Summary by Funding Source

Funding Source	Prior Yrs Budget	2019	2020	2021	2022	2023+	Total
HEAF	-	-	-	-	-	-	-
Tuition Revenue Bonds	49.40	13.60	-	-	-	-	63.00
Commercial Paper	-	-	-	-	-	-	-
Revenue Financing System Bonds	-	-	3.00	22.00	15.00	25.00	65.00
Auxiliary Reserves	-	-	-	-	-	-	-
Grants	-	-	-	-	-	-	-
Student Fees	-	-	-	-	-	-	-
Housing Revenue	-	-	-	-	-	-	-
Gift/Donations	-	-	4.50	-	3.00	2.00	9.50
Annual Budget, Operating and Capital	-	-	-	-	-	-	-
Total	49.40	13.60	7.50	22.00	18.00	27.00	137.50

Approved

President



FY2019 Capital Improvement Plan

UNIVERSITY *of* NORTH TEXAS SYSTEM

UNIVERSITY OF NORTH TEXAS HEALTH SCIENCE CENTER

FY2019 (in \$Million)

University of North Texas Health Science Center

Proj. No.	Project	Funding Source	Prior Yrs Budget	2019	2020	2021	2022	2023+	Total Project
Previously Approved Projects:									
System OFPC Managed Projects									
16-1.40	Interdisciplinary Research Building	TRB	80.00						118.50
		RFS	20.80	16.47					
		GIFT		1.23					
16-2.96	Research and Education (RES) Level 4	RFS	0.01	2.99	1.50				4.50
UNT HSC Facilities Managed Projects									
17-03-0001	East Parking Garage Renovation	RFS		2.50					6.00
		Local/Cash		3.50					
18-03-0001	Gross Anatomy Laboratory Renovation	RFS	2.47						2.47
Previously Approved Projects Total			103.28	26.69	1.50	-	-	-	131.47
New Projects for Approval:									
New Project for Approval Total									
				-	-	-	-	-	-
Planned Projects with Identified Funding Sources:									
03-1901	Campus Energy Infrastructure Improvements	RFS		4.00	4.00				8.00
03-1902	Facilities Management and General Services Buildings Renovation	RFS		2.70					2.70
Planned Projects with Identified Funding Sources Total			-	6.70	4.00	-	-	-	10.70
Planned Land Acquisitions									
3.01	Property Acquisition	HEAF		1.00					1.00
Planned Land Acquisition Total			-	1.00	-	-	-	-	1.00
Capital Improvement Plan Total			103.28	34.39	5.50	-	-	-	143.17

Planned Project without Identified Funding Sources

New Construction:
 Academic Building

Renovation:

Summary by Funding Source

Funding Source	Prior Yrs Budget	2019	2020	2021	2022	2023+	Total
HEAF	-	1.00	-	-	-	-	1.00
Tuition Revenue Bonds	80.00	-	-	-	-	-	80.00
Private Placement	-	-	-	-	-	-	-
Revenue Financing System Bonds	23.28	28.66	5.50	-	-	-	57.44
Auxiliary Reserves	-	-	-	-	-	-	-
Grants	-	-	-	-	-	-	-
Student Fees	-	-	-	-	-	-	-
Housing Revenue	-	-	-	-	-	-	-
Gift/Donations	-	1.23	-	-	-	-	1.23
Annual Budget, Operating and Capital	-	3.50	-	-	-	-	3.50
Total	103.28	34.39	5.50	0.00	0.00	0.00	143.17

Approved

Michael R. Williams

Digitally signed by Michael R. Williams
 DN: cn=Michael R. Williams, o=UNT HSC, ou=President, email=michael.williams@unthsc.edu, c=US
 Date: 2018.03.18 13:13:01 -0500

President

FY2019 Capital Improvement Plan

UNIVERSITY *of* NORTH TEXAS SYSTEM

UNIVERSITY OF NORTH TEXAS SYSTEM

FY2019 (in \$Million)

University of North Texas System

Proj. No.	Project	Funding Source	Prior Yrs Budget	2019	2020	2021	2022	2023+	Total Project
Previously Approved Projects:									
System OFPC Managed Projects									
16-2.01	Renovate Dallas Municipal Bldg and Assoc Law Bldgs	TRB	37.74	18.26					56.00
Previously Approved Projects Total			37.74	18.26	-	-	-	-	56.00
New Projects for Approval:									
New Project for Approval Total			-	-	-	-	-	-	-
Planned Projects with Identified Funding Sources:									
04-1801	Renovation of the Municipal Building for Historical Exhibit	GIFT			3.50				3.50
Planned Projects with Identified Funding Sources Total			-	-	3.50	-	-	-	3.50
Planned Land Acquisitions									
Planned Land Acquisition Total			-	-	-	-	-	-	-
Capital Improvement Plan Total			37.74	18.26	3.50	-	-	-	59.50

Planned Project without Identified Funding Sources

New Construction:

Renovation:

System Building 8th Floor
 System Building Floors 2-4
 1900 Elm Street Lobby

Summary by Funding Source

	Funding Source	Prior Yrs Budget	2019	2020	2021	2022	2023+	Total
HEAF	HEAF	-	-	-	-	-	-	-
Tuition Revenue Bonds	TRB	37.74	18.26	-	-	-	-	56.00
Commercial Paper	CP	-	-	-	-	-	-	-
Revenue Financing System Bonds	RFS	-	-	-	-	-	-	-
Auxiliary Reserves	AUX	-	-	-	-	-	-	-
Grants	GRNT	-	-	-	-	-	-	-
Student Fees	SF	-	-	-	-	-	-	-
Housing Revenue	HR	-	-	-	-	-	-	-
Gift/Donations	GIFT	-	-	3.50	-	-	-	3.50
Annual Budget, Operating and Capital	Local/Cash	-	-	-	-	-	-	-
Total		37.74	18.26	3.50	-	-	-	59.50

Approved

 Chancellor



UNT

HEALTHTM
SCIENCE CENTER

2018 CAMPUS MASTER PLAN



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TABLE OF CONTENTS



	MESSAGE FROM THE PRESIDENT	
	ACKNOWLEDGMENTS	
1	INTRODUCTION	
	Overview	10
	Planning Process	12
	Engagement	14
	Strategic Alignment	16
	Principles & Priorities	18
2	OBSERVATIONS	
	Regional Context	22
	Campus History	26
	Campus Today	28
	Campus Systems	37
3	FRAMEWORK	
	Connectivity Network	64
	Opens Space Network	66
	Hub Network	68
	Composite Framework	70
4	CAMPUS MASTER PLAN	
	Campus Master Plan	74
	Overview and Outcomes	78
	Development Features	82
	System Integration	98
5	IMPLEMENTATION	
	Overview	118
	Near-Term Initiatives	122
	Mid-Term Initiatives	123
	Long-Term Initiatives	124
	Future Opportunities	125
6	GUIDELINES	
	Campus Development Guidelines	128
	Planning Design Guidelines	129
	Architectural Design Guidelines	142
	Landscape Design Guidelines	150
	Planning & Design Review Process	177
7	APPENDIX	
	References and Resources	182
	Supplemental Information	184



FROM THE CHANCELLOR

The University of North Texas System is the only university system based in the robust Dallas-Fort Worth region and includes the University of North Texas Health Science Center in Fort Worth. UNT Health Science Center is one of the nation's premier graduate academic medical centers, specializing in patient-centered education, research and health care. Through extraordinary teamwork and visionary leadership, UNTHSC is defining what health care providers will look like in the future.

Situated in the nation's top job market and immersed in the ever-evolving health care industry, UNTHSC is committed to purposeful growth and development as we serve our booming region and state. To support its mission, vision, values and planned strategic growth, this 2018 Campus Master Plan aligns the aspirations of UNTHSC to its physical campus. Identifying near-term transformations, along with long-term capacities, the master plan carefully and strategically lays out the future development of the Health Science Center.

With this 2018 Campus Master Plan, the UNT Health Science Center has a clear and strategic road map to help ensure that future physical growth supports the vision of university leadership, as well as the needs of DFW and Texas.

I look forward to working together as we continue to build an extraordinary campus reflective and supportive of the visionary future of UNTHSC.



Lesa Roe
University of North Texas System,
Chancellor

FROM THE PRESIDENT



In the decades since my days as a student, I have watched this institution evolve into a growing and vibrant health science center. Today, our community has grown to over 4,000 individuals who each share our core values, a commitment to the growth and excellence of this institution, and a desire to improve the world.

Decisions made today about buildings and sites will impact us for decades to come. These decisions will have significant physical, financial, and program implications. Since 2007, when our last master plan was completed, we have established the School of Health Professions, the UNT System College of Pharmacy, constructed multiple new buildings, partnered with TCU to launch the new MD school this Fall, and ushered in a new strategic plan. With all of this growth and change, it is critical that we take a moment to evaluate not only where we are, but where we want to go and what we need to get there.

Integrated as a foundation for the master plan, UNTHSC's See 2020 strategic roadmap identifies goals that include focused growth for research and academic programs along with clinical partnerships in the coming years to expand our regional and national reputation and influence. The 2018 Campus Master Plan aligns this strategic direction with our core purpose, vision, mission, and values into a plan for the physical development of campus that will enable us to achieve the strategic roadmap goals.

The master plan process spanned nine months, capturing an incredible amount of input and feedback from a diverse representation of stakeholders. I'm impressed by the amount of participation and involvement which guided the creation of this plan every step along the way. The end result is a living document that defines a versatile framework to guide our decision making for the next decade plus. As you review this document, be mindful of our strategic goals and core values that inform its content. I am excited to share with you this commitment to our future.



Dr. Michael R. Williams
University of North Texas Health Science Center,
President



ACKNOWLEDGMENTS

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INTRODUCTION

2018 CAMPUS MASTER PLAN

1

INTRODUCTION



OVERVIEW

The 2018 Campus Master Plan for the University of North Texas Health Science Center (UNTHSC) crafts a detailed plan that is informed by and aligned with the purpose, vision, mission, and values of the institution. The plan addresses the near-term needs of the institution and accommodates the long-term evolution of the campus. Throughout the planning process, extensive engagement with campus stakeholders and leadership informed the evaluation of multiple scenarios to arrive at the optimal outcomes that will guide and support the transformation of the campus over the next decade and beyond.

UNTHSC is one of the nation's premier graduate academic medical centers, with five schools that specialize in patient-centered education, research, and health care.

Purpose: Transform lives in order to improve the lives of others.

Vision: One university, built on values, defining and producing the providers of the future.

Mission: Create solutions for a healthier community.

Values: Serve Others First. Integrity. Respect. Collaboration. Be Visionary.

A comprehensive initiative, the 2018 Campus Master Plan undertook an in-depth consideration of elements, both historical and forecasted, to craft a solution guiding the future development of the campus. A summary of key elements and areas of focus for the planning effort include:

- Establish guiding principles informed by goals and objectives identified by stakeholders and leadership, and in alignment with the UNTHSC strategic plan to direct the planning effort.
- Review and analyze existing campus conditions, relevant context, and physical systems to document potential constraints and opportunities to be addressed.
- Gather data related to space distribution and campus population to understand historical trends and forecast potential future projections.
- Craft a campus master plan inclusive of existing and future open space, built structures, and supporting physical systems, guided by a durable framework.
- Integrate campus physical systems, such as infrastructure and mobility, into the plan, indicating necessary upgrades or expansion of system capacities.
- Review and revise wayfinding and signage to support campus identity and branding.
- Review and revise architectural and landscape guidelines to support a cohesive character and quality in the campus built environment.
- Develop recommendations for near-, mid-, and long-term implementation of the plan along with identifying potential land acquisitions that may support the campus.

The resulting campus master plan is a holistic guide for future growth that enhances the experience of the students, staff, faculty and community engaged in learning, discovery and care.

The following is a brief synopsis of the content included in each chapter of the report.

Introduction: An overview of the planning process and engagement efforts are outlined, including the method for aligning UNTHSC strategic planning efforts with the master plan and development of a set of Planning Principles and Priorities.

Observations: A range of studies were undertaken at the outset of the planning effort to understand the existing context of the campus. These observations established a series of baselines and benchmarks from which further analysis was completed to be able to understand potential future trends and forecast future needs.

Framework: The campus framework is the conceptual plan that reflects the existing organization of the campus, revealing patterns that shape its current experience and inform its future growth. This framework is characterized by three integrated networks consisting of Open Space, Connectivity, and Hubs.

Campus Master Plan: The final plan is a synthesis of concepts that were thoroughly discussed, refined, and balanced to meet both the near- and long- term objectives of UNTHSC.

Implementation: Illustrated at full build-out, the final plan allows for adaptable implementation. This adaptability allows the institutions to respond to changing needs or new opportunities that may arise over the duration of the plan. Implementation is organized in near-, mid-, and long-term phases.

Campus Development Guidelines:

The guidelines, through a series of planning, architectural, and landscape strategies, direct campus development to ensure a high-quality physical environment is achieved across the campus.

Appendix: Additional information and further details are included in the appendix along with a list of supplementary resources.

PLANNING PROCESS

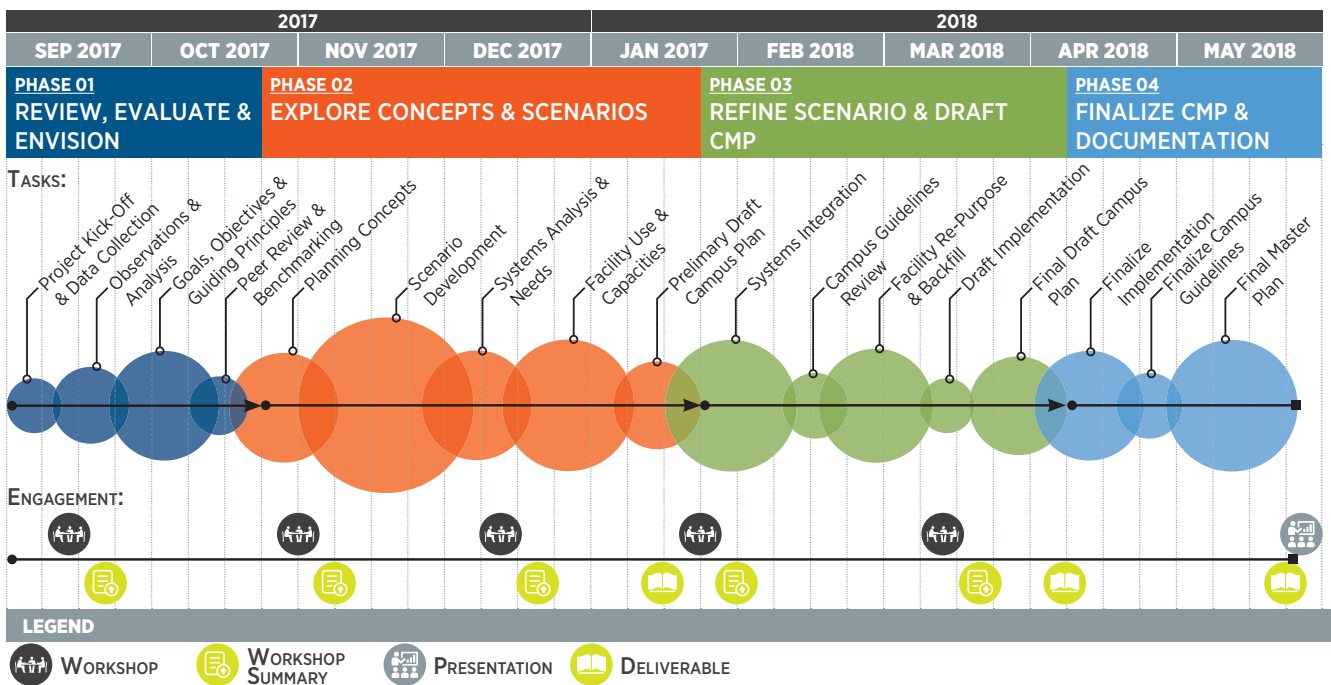
PROCESS OVERVIEW

Commonly, the process of undertaking master planning efforts at institutions will occur in a 5- to 15-year cycle with either updates to existing plans or development of new plans. These updates or new planning efforts are often prompted by significant changes occurring on campus since completion of the prior planning effort. Such changes can include, but are not limited to, implementation of substantial portions of the prior plan, program and population growth, adjustments to strategic objectives, or new market opportunities.

UNTHSC last completed a campus master plan in 2007, falling within the time frame referenced above. A number of substantial developments identified in the 2007 plan are completed or are nearing completion. A selection of these are discussed in further detail in the Observation Chapter. Additionally, UNTHSC has seen significant enrollment growth, expansion of programs, and refocused research efforts. Given the duration and changes since the last master plan, it was an optimal time for UNTHSC to undertake a new campus master plan to evaluate current and future opportunities.

To coordinate this evaluation, the 2018 Campus Master Plan was organized into four-phases across an approximate nine-month duration, running from September 2017 to May 2018. While there is a natural forward progression, the process is iterative and not strictly linear, with each phase building on the work of the previous phase. The overall process is illustrated in the graphical timeline below and describe in more detail on the following page.

CAMPUS MASTER PLAN TIMELINE



PHASE 01: REVIEW, EVALUATE AND ENVISION

During this first phase, the planning team worked with the UNTHSC stakeholders to determine planning principals and goals for the master plan. Through extensive and interactive collaborative exercises, a diverse range of input was obtained representing the perspectives of campus constituents. The planning team engaged multiple user and facilities stakeholder groups throughout this phase; utilizing a combination of workshops, formal group meetings, small group meetings, individual interviews, site tours, and surveys.

Also critical was the review and evaluation of existing conditions across multiple campus systems such as stormwater drainage, supply of hot water for heating and capacity of cold water for cooling.

PHASE 02: EXPLORE CONCEPTS AND SCENARIOS

The planning team began this phase with examining challenges within the various systems of the campus. Multiple concepts and scenarios were developed that sought to accommodate student, research, and program growth in addition to the various needs of academic units. Areas addressed included:

- Can the campus support the expected growth?
- What adjustments need to occur to support this growth?
- Do current space utilizations and efficiencies align with expected needs?
- How do we allow for new buildings while preserving the best parts of the existing campus to accommodate future research needs?

Balancing these diverse topics by developing more detailed scenarios with technical and engineering based solutions began to identify a path forward.

PHASE 03: REFINE SCENARIO AND DRAFT CAMPUS MASTER PLAN

Concepts proposed and debated during the earlier stages of the process were reconciled and synthesized into a selected scenario for further refinement. This preliminary plan showed existing and proposed buildings, parking, roads, open spaces, and pedestrian routes along with numerous other features. It served as a tool for workshops and conversations with campus constituents, and was shared on a campus website for review and comment. By combining ideas generated during the process to date, the preliminary plan helped to crystallize a vision of the campus for the future. This phase also began to study the potential implementation options for the plan along with developing various campus guidelines to direct future development.

PHASE 04: FINAL CAMPUS MASTER PLAN AND DOCUMENTATION

Information and comments from the previous phases were combined into a set of detailed recommendations for the campus that make up this final plan report. The new buildings, proposed additions, and improvements to circulation and landscape illustrated in this report represent the future of the campus as it changes over the following decades. An implementation plan shows how the final recommendations can be realized in steps over time. Design guidelines for buildings and grounds are included to support a codified system for unifying all the architectural and landscape elements of the campus.

The final report documents the master plan's story for the campus and supporters by articulating the plan's goals and illustrating a long-term vision supported by phasing and implementation scenarios as a reference for those that will guide the realization of the plan.

ENGAGEMENT

STAKEHOLDER ENGAGEMENT

Planning is both a process and a product. For the duration of the 2018 Campus Master Plan, the planning team worked collaboratively with a diverse group of stakeholders from the institution to establish priorities, scenarios, and solutions to support the current and future needs of UNTHSC.

Planning workshops held on campus were the primary vehicle for engagement. In total, the planning team held 32 workshop sessions on campus that brought together students, staff, faculty, and leadership to provide feedback, expertise, experience, and insight. Additionally, community stakeholders were invited for a session to review the progress of the planning effort and to provide their input and thoughts for consideration.

Each workshop was organized to review the work and progress of topics related to the particular phase of the planning process, allowing stakeholders to make informed decisions about the planning direction, and build understanding and consensus around the decisions being made. At the earliest stages, these groups helped to provide information and data that would become the foundation of the plan. At later stages, the outcomes of these workshops led to the final scenarios and solutions that were incorporated into the 2018 Campus Master Plan.

This experience of collective analysis and decision-making will help to facilitate the implementation of this shared vision across campus for years to come.

Overview of Workshop Sessions:

Workshop 01 (Sept. 15th-16th, 2017)

- Joint Steering & Resource Committee 1
- Resource Committee Breakout Session
- Steering Committee Breakout Session
- Joint Steering & Resource Committee 2

Workshop 02 (Nov. 1st-2nd, 2017)

- Steering Committee
- Technical Group: Landscape
- Technical Group: Wayfinding & Signage
- Technical Group: Parking & Transportation
- Resource Committee
- Technical Group: Civil & MEP

Student Leadership Forum (Nov. 7th, 2017)

- Student Leadership Organizations

Workshop 03 (Dec. 12th-14th, 2017)

- Joint Steering & Resource Committee 1
- Joint Technical Group
- Parking Task Force
- Community Session
- Faculty Session
- Joint Steering & Resource Committee 2
- Steering Committee

Workshop 04 (Jan. 23rd-24th, 2018)

- Resource Committee
- Joint Technical Group
- Parking Task Force
- Steering Committee
- Student Open House
- Faculty Open House

Workshop 05 (Mar. 14th-15th, 2018)

- Resource Committee
- Joint Technical Group
- Parking Task Force
- Steering Committee



Engagement Exercise: SWOT (Strength, Weakness, Opportunity, Threat) Analysis



Engagement Exercise: Master Plan Priorities



Engagement Exercise: Campus Open House Topic Stations



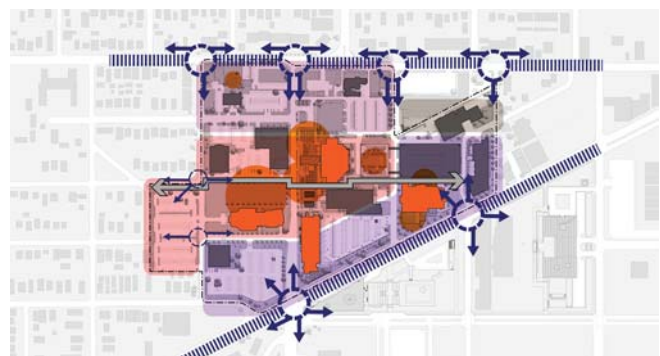
STRATEGIC ALIGNMENT

OVERVIEW & ROADMAP

The UNTHSC_SEE 2020: THE ROADMAP 2018 (illustrated on the following page and referenced as SEE 2020 for brevity) served as a starting point for instilling the institutional enterprise into the physical environment as illustrated in the 2018 Campus Master Plan. SEE 2020 expresses UNTHSC’s purpose, vision, mission, and values in more quantifiable terms with specific results, measures, and targets.

Further analysis and discussion of SEE 2020 assisted in translating these quantifiable terms into Planning Principles and Priorities, discussed in the following section, to guide the efforts of the planning team. This translation of SEE 2020 into the master plan was a collaborative effort undertaken throughout the master planning process in a series of exercises with senior leadership and campus stakeholders. The alignment between the SEE 2020 and the master plan was informed in particular by selective portions of SEE 2020:

- Analysis of the four Focus elements defined areas of inquiry that the campus master plan had an opportunity to support. The SEE 2020 Focus elements are:
 - People & Values
 - Learning & Discovery
 - Quality Experience for Lifetime Success
 - Sustainable Growth, Finance & Resources
- The Key Objectives and Initiatives further informed and refined the translation of the Focus elements and how they might be instilled in the campus master plan.
- The Desired Results illustrated components of the campus master plan that could directly or indirectly support SEE 2020.



Examples: Strategic Alignment Analysis Diagrams

UNTHSC SEE_2020: THE ROADMAP 2018

HSC DIFFERENCE	PURPOSE Transform lives in order to improve the lives of others	VALUES Serve Others First Integrity Respect Collaboration Be Visionary	VISION One university, built on values, defining the providers of the future	MISSION Create solutions for a healthier community	ONE PLAN Sustainable people culture Define and produce the providers of the future Financial strength Extraordinary teamwork
	EXTRAORDINARY TEAMWORK				
FOCUS	People & Values	Learning & Discovery	Quality Experiences for Lifetime Success	Sustainable Growth, Finance & Resources	
KEY OBJECTIVES	Create sustainable people culture	Define and produce the providers of the future		Build financial strength	
INITIATIVES (OWNERS)	1.1 Create a nationally recognized, customer-focused best place to work environment (Hicks)	2.1 Strengthen schools & institutes to high-performing (Peel / Ghorpade / Hicks)	3.1 Improve quality of teaching and education (Peel)	4.1 Increase efficiencies (Anderson / White)	
2018 DESIRED RESULTS	1.1.1 Improve team member engagement 1.1.2 Increase integration of Our Values 1.1.3 Develop academic leadership program 1.1.4 Improve patient experience	2.1.1 Increase school and institutes meeting high performance criteria 2.1.2 Increase research expenditures by 5% 2.1.3 Increase UNTHSC affiliated health system partners 2.1.4 Create affiliated GME sufficient to accommodate all HSC graduates	3.1.1 Increase student success 3.1.2 Enhance educational programs to prepare graduates to meet expectations of employers and national leaders 3.1.3 Prepare graduates for leadership in practice and community 3.1.4 Enhance clinical education and internship opportunities	4.1.1 Improve net financial position 4.1.2 Increase philanthropy 4.1.3 Develop meaningful management information to improve decision-making	
MEASURES / TARGETS	M: Survey results - improvement in team member engagement T: 65% M: # of departments involved in values initiatives T: 81 M: # of faculty completing program T: 45 M: Patient Promoter Score T: 30% increase of Q1 baseline	M: Number of schools and institutes meeting criteria T: 5 M: Total expenditures T: \$46,800,000 M: # of hospital partners T: 6 M: # of PGY1 GME slots T: 168	M: % of graduates who seek and obtain employment in their field of study or a related field within one year of graduation T: 95% M: % of degree granting programs planning curricular content revisions based on data from employer expectations T: 100% M: % of programs with competencies in leadership, communication and teamwork integrated into curricula and assessed prior to graduation T: 40% M: % of programs demonstrating excess capacity in number of sites T: 100%	M: Primary Reserve T: 40% M: Total support given/pledged T: \$18.5M M: Areas and metrics identified for executive management dashboard T: 100%	
SEE_2020 DESIRED RESULTS	Nationally recognized as a Best Place for All Living by Our Values Have thriving Leadership Institute Known for our extraordinary service experience	Have 6 high performing schools and institutes Total research increased to \$55,000,000 The education & research partner for health systems of Tarrant County Nationally recognized Patient Safety Institute Sponsor of >300 PGY1 GME slots	National leader in Interprofessional Education / Interprofessional Practice	New donor gifts of over \$100,000,000 given / pledged	

PRINCIPLES & PRIORITIES

PLANNING PRINCIPLES

Active planning must be guided by a consistent set of values and principles against which all concepts and proposed solutions are measured. Planning Principles guide the development of the campus plan and serve to evaluate outcomes.

These Planning Principles serve as a bridge between the strategic vision of UNTHSC and the physical planning of the campus environment. They directed the efforts of the planning team, and even more importantly, will guide implementation of the plan to ensure its continued alignment with the mission and vision of the institution. Emerging through the engagement process with campus stakeholders, these principles grew out of a shared understanding of the characteristics that make the campus and the community unique. As the process progressed, these principles were further clarified and filtered, evolving through multiple iterations into their final form. All future development should reinforce and align to these principles.

PLANNING PRINCIPLE #1:

Craft a Campus Framework that reinforces and expands existing connectivity, programmatic and organizational patterns to guide long-term capacity.

PLANNING PRINCIPLE #2:

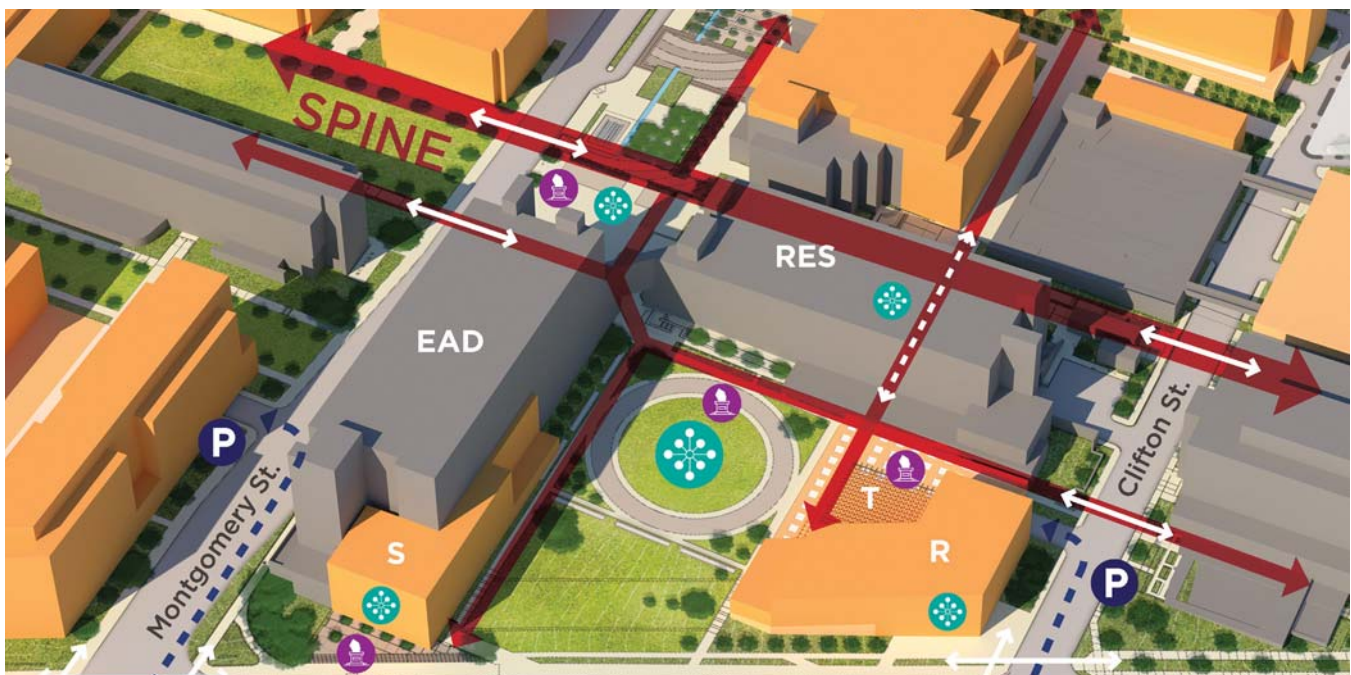
Align existing and future facilities for academic, research, and clinical programs that support collaborative learning and discovery with high utilization of campus assets.

PLANNING PRINCIPLE #3:

Reinforce and expand the network of Campus Hubs to support a quality campus experience for students, staff, faculty, and community.

PLANNING PRINCIPLE #4:

Embrace the One University vision to guide the development of the physical campus environment.



Mid-Process Example Scenario Diagram: Testing Planning Principle Integration

PLANNING PRIORITIES

Building upon the translation of SEE 2020 and the creation of the Planning Principles, the planning team led stakeholders through a series of exercises that identified and ranked a selected list of potential priorities. This intermediate exercise clarified the mapping of planning efforts to the Desired Results of the SEE 2020 plan. While all priorities were included in the campus master plan outcomes, the ranking exercise indicated areas necessitating close attention.

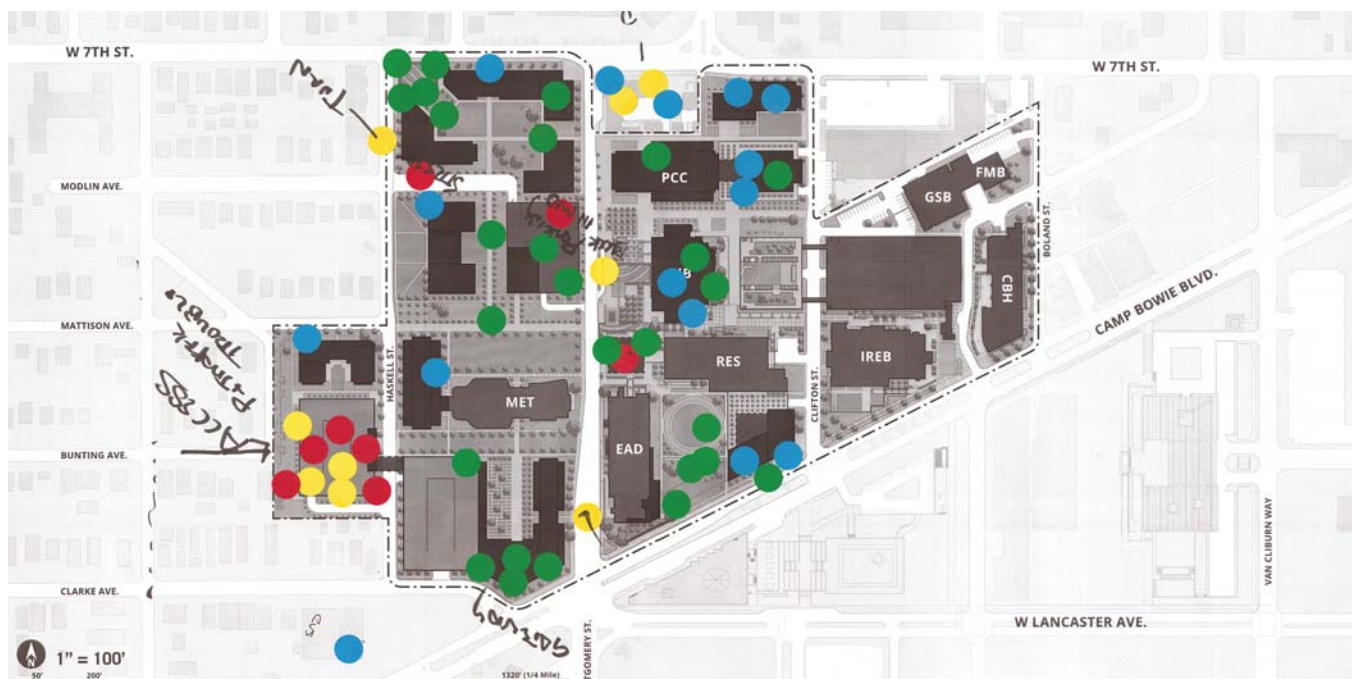
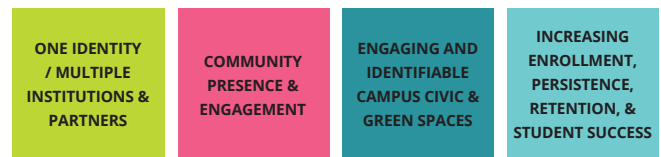
While not an exhaustive list of goals and objectives, the exercise informed the planning team of both near- and long-term priorities for inclusion in the master plan. Similar to utilizing SEE 2020 and Planning Principles as evaluators of proposed options, the Planning Priorities served as another gauge to determine whether proposed solutions were achieving the desired outcomes.

PRIORITY EXERCISE RESULTS

TOP PRIORITIES



ANCILLARY PRIORITIES



Mid-Process SWOT Exercise: Evaluating Scenario Alignment with Consideration of Planning Priorities

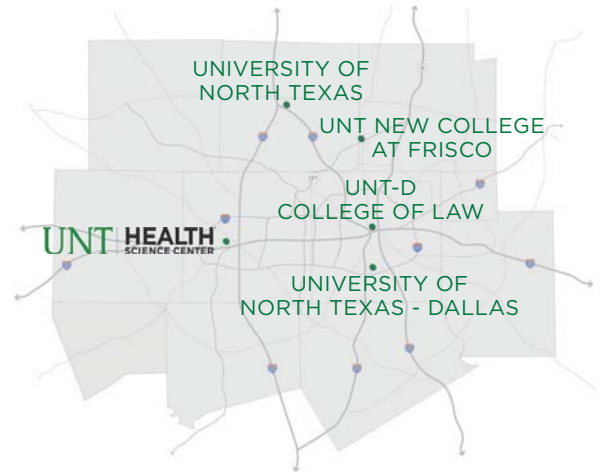
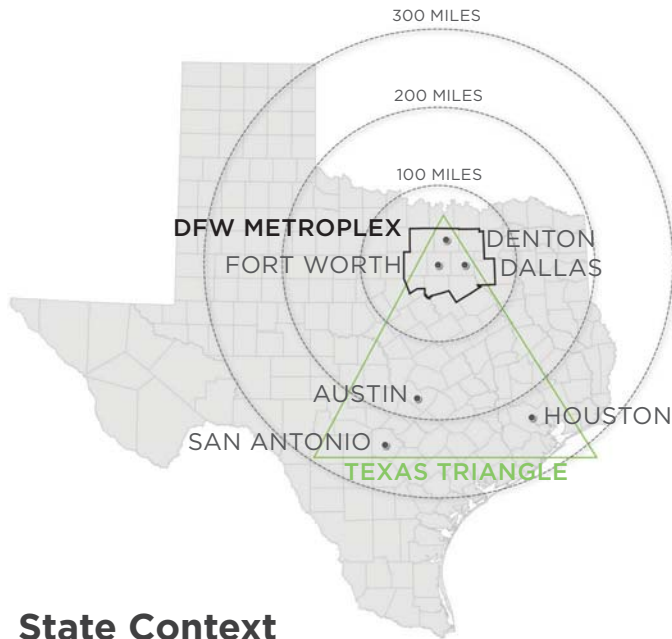


OBSERVATIONS

EXISTING CONDITIONS & ANALYSIS

2

REGIONAL CONTEXT



State Context

The University of North Texas Health Science Center is located in North Texas in the heart of the Dallas-Fort Worth Metroplex (DFW). This region is the northern part of what is colloquially known as the Texas Triangle (the mega-region formed between the San Antonio-Austin, Dallas-Fort Worth, and Houston metropolitan areas). Today, the Texas Triangle is experiencing dramatic population and industry growth. Especially relevant to UNTHSC, two key components of this regional demographic change are an increase in net births and significant growth in the over 65 population. To serve the unique health care needs of these two populations, Texas will increasingly require additional health care infrastructure and trained providers.

As of the 2017 5-year American Community Survey (ACS) data published by the United States Census Bureau, the State of Texas is home to 28,304,596 residents. The Dallas-Fort Worth Metroplex is the nations fourth largest metropolitan area, containing over a quarter of the states total population.

University of North Texas System

The University of North Texas System (UNTS) is the only public university system based in North Texas. It includes three independent universities spread between five major teaching locations across Tarrant, Denton, and Dallas counties. The system's independent components include the University of North Texas main campus in Denton, the University of North Texas at Dallas, and the University of North Texas Health Science Center. Combined Fall 2017 enrollment was just under 44,000 students. Responding to state and regional demand, the three primary components are each among Texas' fastest growing institutions of higher education.

Metroplex Health care Education

The Dallas-Fort Worth region offers a variety of public and private schools with programming in health care related fields. UNTHSC is locally set apart from other institutions as the only graduate focused medical center in Tarrant County, and one of only four schools in the Dallas-Fort Worth Metroplex with nationally recognized programs for innovation and academic excellence.

DFW Health care Industry

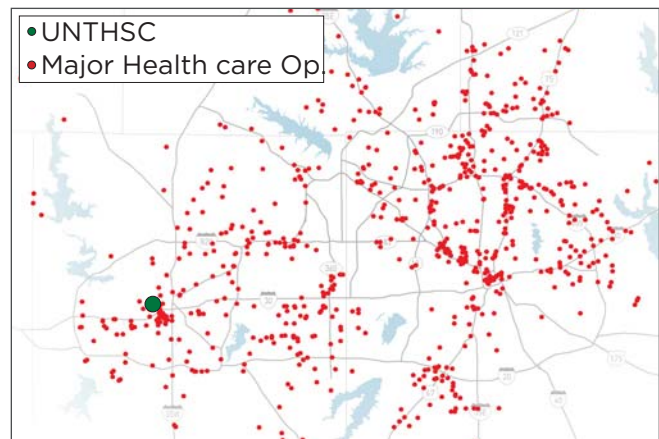
As one of the largest economic sectors in the region, the health care industry plays an essential role in the DFW economy. The scope of the health care industry in DFW is one of the largest and most diverse in the nation ranging from large hospitals, physicians and care providers, specialty care, advanced medical research, medical manufacturing, and medical administration.

A 2013-2014 Dallas Regional Chamber Health care Impact study identifies \$52 billion dollars in value contributed to the local economy, headlined by over 100 major health care related headquarters. This same report identifies over 331,000 total health care related jobs existed in the Dallas-Fort Worth Metroplex including six companies who rank in the top 25 of all employers in DFW.

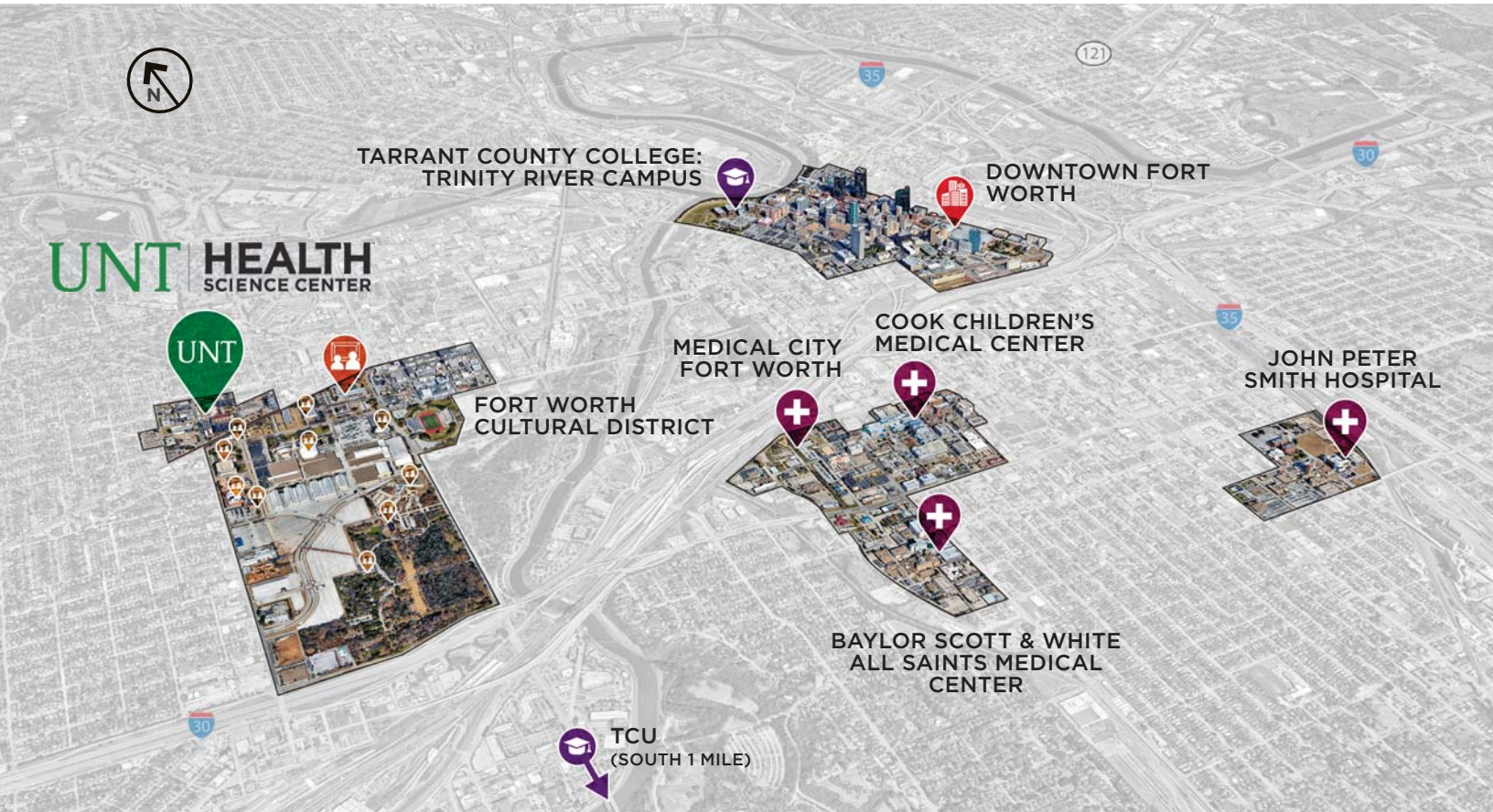
Due to local population growth, the local demographic profile, the increasing role of technology in service provision and manufacturing, and new research opportunities, the DFW health care industry has been identified as fast growing. This industry context provides a positive outlook for UNTHSC graduates in the foreseeable future and potentially presents opportunities for carefully considered institutional program growth.

TOP 25 REGIONAL EMPLOYERS:

- #3.  **Texas Health Resources**
- #5.  **Baylor Scott & White HEALTH**
- #9.  **UT SOUTHWESTERN MEDICAL CENTER**
- #11. **HCA North Texas**
- #20.  **Parkland**
- #25.  **JPS HEALTH NETWORK**



Major Health care Operations in DFW
(Graphic created by Dallas Regional Chamber)



Urban Context

The UNTHSC campus is situated two miles west of downtown Fort Worth along West 7th Street. This proximity provides opportunity for strong industry, educational, and health care partnerships.

Within a three mile radius of campus, there are four major hospitals concentrated into what is known as the Fort Worth Medical Center south of Interstate 30. Historically, there have been strong ties between UNTHSC and these hospitals for clinical and graduate placement. During the master plan process however, leadership identified creating even stronger relationships with these institutions as a priority for the campus moving forward.

Immediately south of the Health Science Center is the renowned Fort Worth Cultural

District, which includes multiple world class art museums, the Will Rogers Memorial Center, the Fort Worth Botanical Gardens, acclaimed theaters and community arts centers, and many local shops and restaurants. Perhaps most important is the Camp Bowie Boulevard edge the campus shares with the Amon Carter Museum and the Kimball Art Museum. Combined, these two museums bring over 500,000 visitors to the neighborhood every year, offering an opportunity for UNTHSC brand exposure. Students, staff, and faculty frequently visit both museums for dining.

Currently under construction half a mile south of campus on Montgomery Street, the new 14,000 seat Dickies Arena is expected to open in 2019. The arena will provide a new large scale venue for concerts, conventions, exhibitions, sporting events, and the Fort Worth Stock Show and Rodeo.



Nighborhood Context & Adjacent Uses

In addition to the Fort Worth Cultural District, the UNTHSC is also bounded by three distinct neighborhoods.

The North Hi Mount Neighborhood is a two-square-mile neighborhood that sits directly west of campus and is considered low density, primarily consisting of one- and two-story single-family homes. The neighborhood includes limited amounts of multifamily uses, as well as restaurants, small office spaces, and retail. These commercial uses are concentrated along the Camp Bowie corridor and on Mattison Avenue next to the campus.

The Monticello Neighborhood is the three-square-mile area north of West 7th Street. The center of the neighborhood is Monticello Drive,

whose intersection with West 7th Street forms a northern campus gateway. Similar to North Hi Mount, the neighborhood is primarily low-density, single-family residential with some limited multifamily. Its uniqueness lies in the commercial corridor along West 7th Street. This corridor creates a strong use buffer and transition between the campus and the neighborhood.

East of campus, the West 7th Neighborhood contains the West 7th District redevelopment that has taken place over the last decade. This area is considered to be a part of the Fort Worth Cultural District. Today, West 7th is primarily a high-density five- to seven-story urban mixed-use neighborhood with condos, apartments, restaurants, and retail. This high-density growth is expected to continue east of campus in the coming years.

CAMPUS HISTORY

Beginnings

Responding to the lack of a state osteopathic medical school, in 1961, the Texas Osteopathic Medical Association (TOMA) formed a committee to pursue the founding of a Texas college. This committee signified the seed that would grow into the UNTHSC.

Despite general support for the formation of a college, the committee was unable to make progress due to TOMA inaction. Recognizing the need and opportunity, three osteopathic physicians would break off and self-fund the endeavor. In 1966, George Luibel, D.D. Beyer, and Carl Everett procured a charter from the state of Texas to found the Texas College of Osteopathic Medicine (TCOM).

The Early Years

In 1970, four years after the initial charter, TCOM received provisional accreditation and opened with a class of 20 students on the fifth floor of the Texas Osteopathic Medical Center of Fort Worth (OMCT). Restricted by space, the following year TCOM purchased a nearby bowling alley and renovated it to include classrooms, labs, and office space. Supported by state funds and private donations, in 1972, the college purchased land east of the OCMT along Camp Bowie Boulevard (today the sites of EAD, RES, and a portion of IREB) to form a permanent campus. Thinking about long-term needs, the first master plan was crafted in 1972, creating a vision for these sites which included an academic building immediately east of OCMT (would become EAD) that was connected to a library, student union, and student housing.

North Texas State University

Seeking a university partner, in 1972, TCOM reached an agreement with North Texas State University to enable students to take basic science courses in Denton. This relationship continued to develop; In 1975, TCOM fully came under the umbrella of North Texas State

University (which later evolved into the UNT System). No longer was TCOM a small private college. Instead, it was a publicly supported institution with a broader mandate. Part of this broader mandate was a strong community health presence. Previously, all clinical training had taken place in the OCMT. In 1976, TCOM opened its first community clinic in Justin, TX.

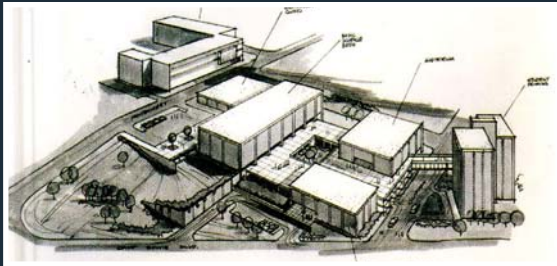
A Period of Growth

The first permanent building, MEB-1, which is now known under the acronym EAD, opened its doors in 1978. The next two buildings, MEB-2 (RES) and MEB-3 (LIB), followed soon after in 1982 and 1986 respectively. Since then, campus academic, research, and clinical components have continued to grow. In 1992, the North Texas Eye Research Institute (NTERI) became the first research institute located on campus. The Health Pavilion (HP) opened in 1997, significantly increasing the number of clinical patient visits on campus.

Perhaps the most notable campus growth occurred in 2004, when OMCT closed. A year later, UNTHSC was able to acquire the property, effectively doubling the size of the campus from approximately 16 acres to 33. The hospital was quickly demolished to make room for construction of the MET, which opened in 2009.

Graduate Health Care Institution

With the establishment of the Graduate School of Biomedical Sciences in 1993, TCOM expanded into a graduate university with multiple colleges. The same year, the school changed its name to the University of North Texas Health Science Center. Since then, the school has continued to grow, adding three more schools and multiple degree offerings transforming the institution into a nationally recognized Graduate Medical Campus.



▲ 1972 CAMPUS MASTER PLAN

1972: AGREEMENT WITH NORTH TEXAS STATE (UNT) TO PROVIDE INSTRUCTION

1976: FIRST CLINIC (JUSTIN, TX)

▼ 1978: EVERETT ADMINISTRATION BUILDING (EAD) CONSTRUCTED



1993: GRADUATE SCHOOL OF BIOMEDICAL SCIENCE ESTABLISHED

1993: OFFICIALLY RE-DESIGNATED "UNIVERSITY OF NORTH TEXAS HEALTH SCIENCE CENTER"

1999: SCHOOL OF PUBLIC HEALTH ESTABLISHED



◀ 2004: CENTER FOR BIOHEALTH (CBH) CONSTRUCTED

2010: MEDICAL EDUCATION AND TRAINING BUILDING (MET) CONSTRUCTED ▶

2010: UNT BOARD OF REGENTS APPROVE DEVELOPMENT OF NEW MD PROGRAM

2011: UNT SYSTEM COLLEGE OF PHARMACY ESTABLISHED

2018 CAMPUS MASTER PLAN

2018: INTERDISCIPLINARY RESEARCH AND EDUCATION BUILDING (IREB) CONSTRUCTED

1961: COMMITTEE MEETS TO INVESTIGATE FEASIBILITY OF OSTEOPATHIC MEDICAL SCHOOL IN TEXAS

1966: CHARTER GRANTED FOR TEXAS COLLEGE OF OSTEOPATHIC MEDICINE

1970: TCOM OPENS ON THE 5TH FLOOR OF THE TEXAS OSTEOPATHIC MEDICAL CENTER OF FORT WORTH (OMCT)



1982: RESEARCH & EDUCATION BUILDING (RES) CONSTRUCTED

1986: GIBSON D. LEWIS LIBRARY (LIB) CONSTRUCTED

1992: NTERI BECOMES FIRST RESEARCH INSTITUTE

1997: HEALTH PAVILION (HP) CONSTRUCTED ▶



2004: OMCT CLOSES

2005: UNTHSC REACHES AGREEMENT TO BUY OMCT LAND DOUBLING CAMPUS

2007: SCHOOL OF HEALTH PROFESSIONS ESTABLISHED

2007 CAMPUS MASTER PLAN



1960s

1970s

1980s

1990s

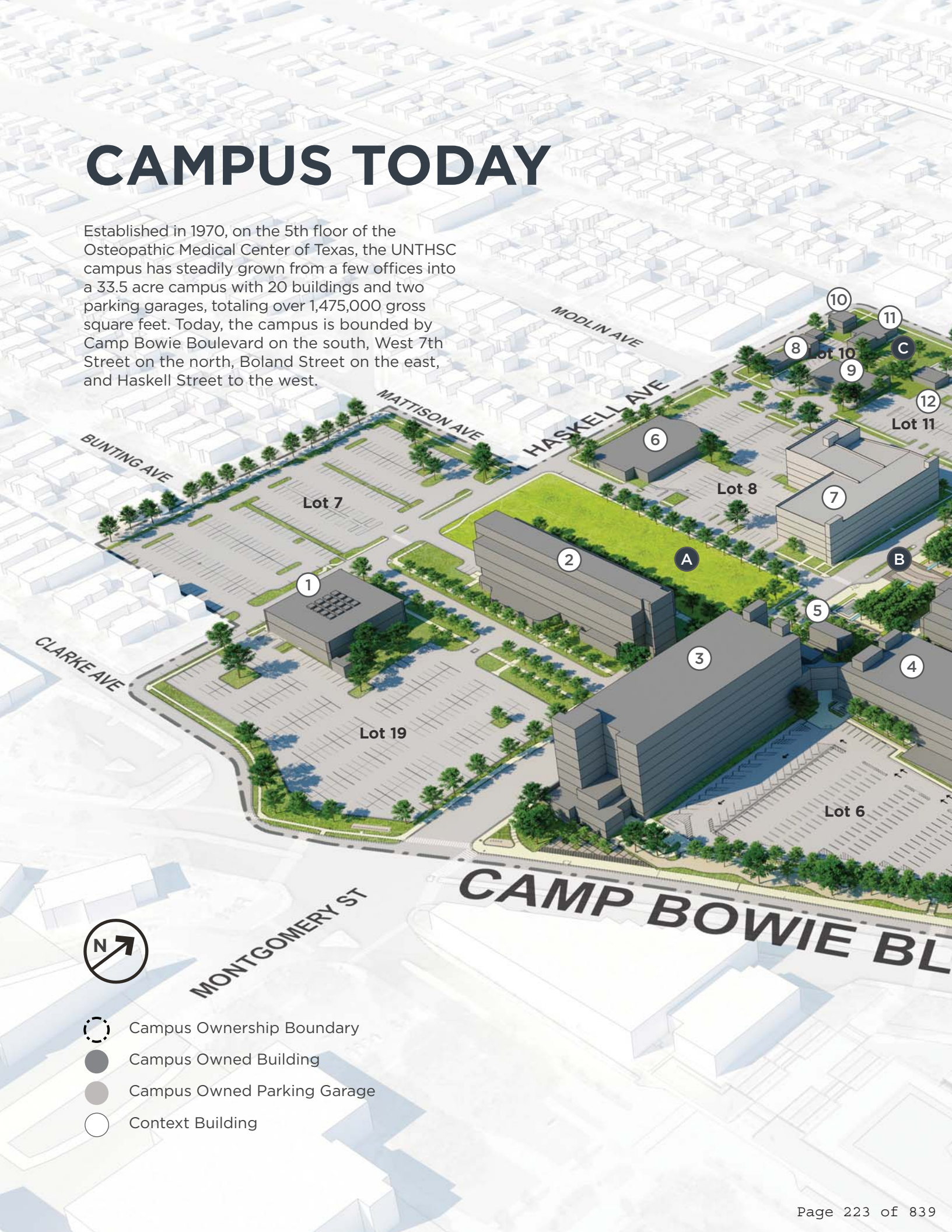
2000s



2010s

CAMPUS DEVELOPMENT TIMELINE

CAMPUS TODAY

Established in 1970, on the 5th floor of the Osteopathic Medical Center of Texas, the UNTHSC campus has steadily grown from a few offices into a 33.5 acre campus with 20 buildings and two parking garages, totaling over 1,475,000 gross square feet. Today, the campus is bounded by Camp Bowie Boulevard on the south, West 7th Street on the north, Boland Street on the east, and Haskell Street to the west.



-  Campus Ownership Boundary
-  Campus Owned Building
-  Campus Owned Parking Garage
-  Context Building

Key Campus Green Spaces

- A. MET Lawn
- B. Library Courtyard
- C. Community Garden
- D. Campus Spine
- E. Alumni Plaza
- F. IREB Rooftop Plaza

Campus Buildings

- 1. Student Service Center (SSC)
- 2. Medical Education & Training (MET)
- 3. Everett Education & Administration (EAD)
- 4. Research & Education (RES)
- 5. Cooling Towers
- 6. Surgery Center (SC)
- 7. Modlin Parking Garage (Lot 9)
- 8. Center for Sleep Medicine
- 9. Child Development Center (CDC)
- 10. Healthy Start
- 11. Facilities Support Annex
- 12. 3617 W. 7th Street (Leased)
- 13. Professional Offices
- 14. Gibson D. Lewis Library (LIB)
- 15. Health Pavilion (HP)
- 16. Founders Activity Center (FAC)
- 17. Geriatrics Annex
- 18. Interdisciplinary Research & Education Building (IREB)
- 19. Clifton Parking Garage (Lot 5)
- 20. General Services Building (GSB)
- 21. Facilities Management Building (FMB)
- 22. Center for BioHealth (CBH)

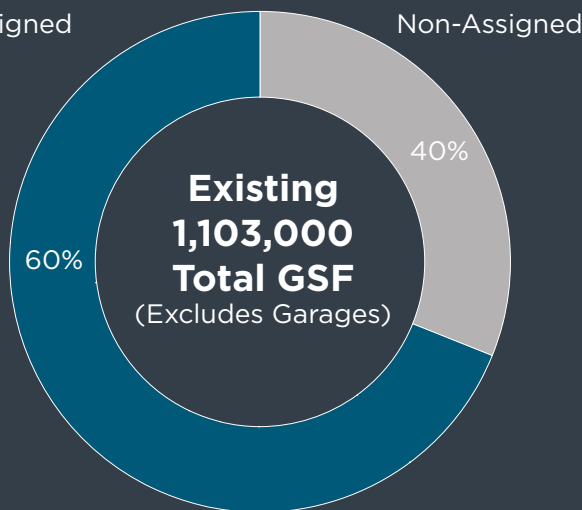


Campus Building Inventory

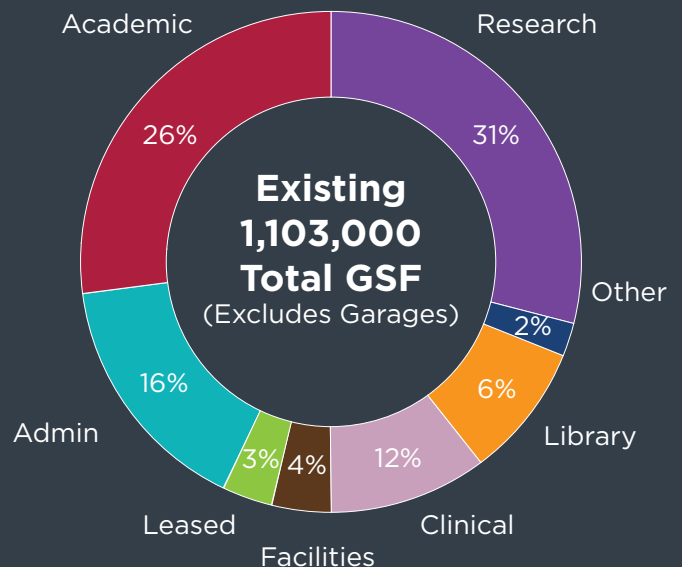
#	Building Name	Acronym	Year Built	Gross Square Feet (GSF)*
1.	Student Service Center	SSC	1981	24,292
2.	Medical Education & Training	MET	2010	115,934
3.	Everett Education & Administration	EAD	1978	194,099
4.	Research & Education Building	RES	1982	138,701
5.	Surgery Center	SC	2003	13,203
6.	Modlin Parking Garage	-	1984	138,466
7.	Center for Sleep Medicine	-	1955	3,624
8.	Cooling Towers	-	1982	N/A
9.	Child Development Center	CDC	1995	5,677
10.	Healthy Start Building	-	1955	1,577
11.	Facilities Support Annex	-	1965	3,618
12.	3617 W. 7th Street (Leased)	-	1985	1,653
13.	Professional Offices	-	1970	7,665
14.	Gibson D. Lewis Library	LIB	1986	114,064
15.	Health Pavilion	HP	1997	110,121
16.	Founders Activity Center	FAC	1955	11,617
17.	Geriatrics Annex	-	1980	1,482
18.	Interdisciplinary Research & Education Building	IREB	2018	172,922
19.	Clifton Parking Garage	-	2001	245,346
20.	General Services Building	GSB	1991	15,506
21.	Facilities Management Building	FMB	2000	7,409
22.	Center for BioHealth	CBH	2004	160,320

Source: UNTHSC, ArchiBus Facilities Inventory, dataset; UNTHSC, Property Schedule, dataset
 * GSF is total of all space (assignable, circulation, mechanical, etc.) in each building registered in Archibus

Existing Total



Space Type Distribution



Existing Campus Profiles

Before the master planning team could begin analysis of campus systems, it was necessary to confirm the existing inventory of assets. This included confirmation of the existing campus boundary and land holdings, existing building inventory and associated quantitative data, campus population data, academic program profiles and locations, research profiles and locations, and clinical profiles and locations.

Land Area

The existing campus land ownership is 33.5 contiguous acres. Today, the campus is bounded by Camp Bowie Boulevard on the south, West 7th Street on the north, Boland Street on the east and Haskell Street to the west (with the exception of Parking Lot 7, which crosses Haskell).

As a part of the campus' growth over time, the City of Fort Worth ceded control of some interior roadways to the campus. Road ownership provides greater opportunity to close or reroute segments of a road, but changes must still be approved by the City. The master plan examines opportunities to selectively close segments of road to improve the on-campus experience and increase safety for pedestrians. UNTHSC road ownership includes:

1. Haskell Street between Clarke and Mattison Avenues
2. Bunting Avenue between Haskell and Montgomery Streets
3. Mattison Avenue between Haskell and Montgomery Streets
4. Modlin Avenue between Haskell and Montgomery Streets
5. Clifton Street between Camp Bowie Boulevard and the service drive north of the Facilities Management Building
6. Darcy Street between Camp Bowie Boulevard and Boland Street

Buildings

Today, the UNTHSC campus includes 20 buildings, totaling approximately 1,103,000 gross square feet (GSF), and two parking garages, totaling approximately 372,000 GSF.

The buildings range in age, height, and condition. Many of the structures on the north end of campus, along West 7th Street, were former single-family residences that have been converted to campus uses. The subsequent section of this chapter has analysis related building use and age.

Currently, research and academic are the largest space types on campus. The master plan examines opportunities to increase efficiencies and better utilize existing space.

Space Type	Apx. Gross Square Feet (GSF)
Academic	290,000 GSF
Research	345,000 GSF
Clinical	130,000 GSF
Admin / Support	178,000 GSF
Library	64,000 GSF
Other	17,000 GSF
Facilities	45,000 GSF
Leased	34,000 GSF
TOTAL	1,103,000 GSF

UNTHSC GSF Breakdown by Space Type

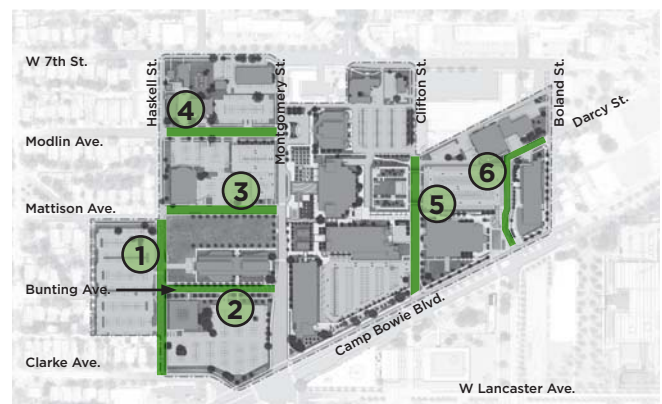


Diagram of UNTHSC Road Ownership

Population

Students (Spring 2017)



Faculty (Spring 2017)



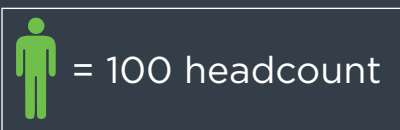
Staff (Spring 2017)



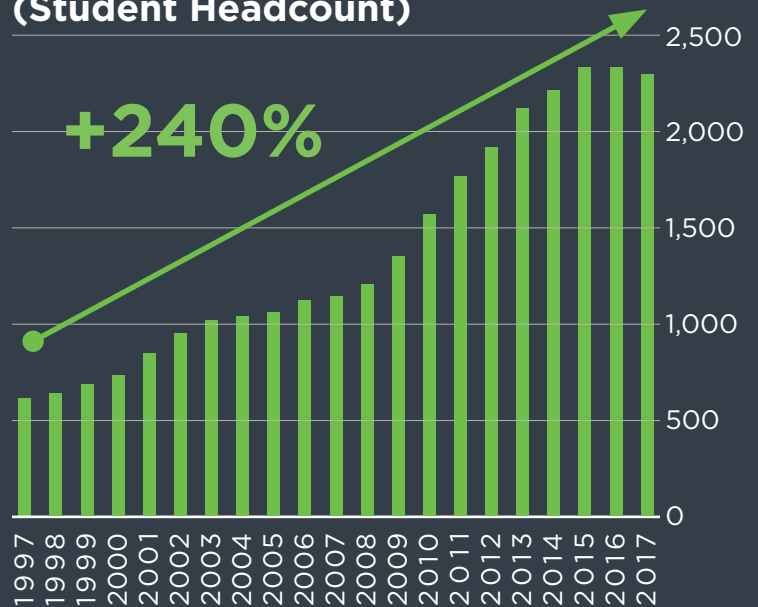
Existing Population

Students	2,288
Faculty	356
Staff	948

TOTAL EXISTING 3,592



Historic Enrollment (Student Headcount)



Academic Programs (Student Headcount)

Texas College of Osteopathic Medicine	914
Doctor of Osteopathic Medicine	
School of Health Professions	360
Master of Physician Assistant Studies	
Doctor of Physical Therapy	
College of Pharmacy	391
Doctor of Pharmacy	
Graduate School of Biomedical Sciences	387
Master of Science	
Doctoral Program	
School of Public Health	172
Master of Health Administration	
Master of Public Health	
Master of Science	
Doctor of Public Health	
Doctor of Philosophy	
Certificate Program	
School of Medicine (MOU with TCU)	Emerging

Sources: UNTHSC, Enrollment by Program and Class, dataset; UNTHSC, Employee Service Data, dataset

Population

Although relatively young as an institution, UNT Health Science Center has rapidly grown into one of the premier graduate medical campuses in the Central United States. Over the past two decades, enrollment has grown 240% from 672 headcount in 1997 to 2,288 headcount in 2017 (see “Historic Enrollment” table on page left). Between 2009 and 2015, this growth rate accelerated. Since 2015, the rate has plateaued. However, the total enrollment is expected to grow with a new school targeted to open in 2019. In addition to this new school, leadership is examining other opportunities for future enrollment growth. To support its current students, UNTHSC employs 356 full-time faculty members and 948 staff. In total, the on campus population is about 3,600.

Academic Programs

Since first adding the Graduate School of Biomedical Sciences to TCOM in 1993, UNTHSC has grown to five schools and colleges, offering a dozen primary programs and numerous sub-specialties. Many of these programs and specializations are nationally recognized as some of the best in the country. Soon, a sixth will be added with the emerging School of Medicine in partnership with Texas Christian University.

Due to the unique nature of health care education and accreditation, expansion of current programs and addition of new programs need to be carefully considered. Certain programs, such as TCOM, have state and federally legislated limits on maximum enrollment. Others are simply constrained by space, staff, and funding needs. Through the master plan process, opportunities to grow existing programs and study emerging program opportunities were identified.

Research Profile

A key part of the campus’ strategic plan is a commitment to research growth and recruitment/retainment of top faculty. Since 2000, UNTHSC has experienced unprecedented research growth, seeing research expenditures rise 432%, growing

from \$10,130,000 in 2000 to \$44,578,000 in 2016. Seeking to continue this trend, a goal has been identified to continue research expenditure growth by 5% annually in the coming years.

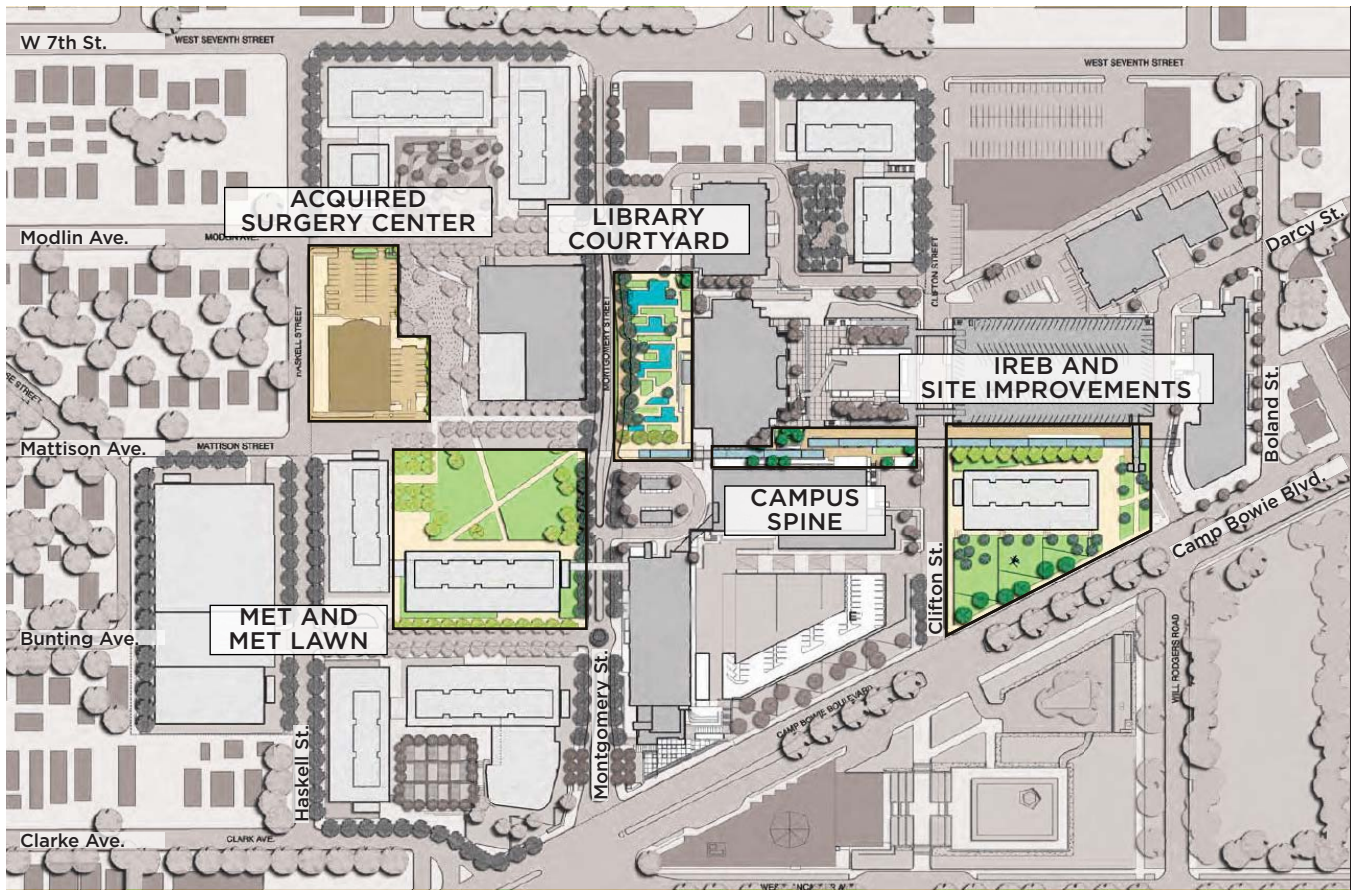
UNTHSC has long had a commitment to provide quality research space. Historically, these spaces have existed primarily in the EAD, RES, and CBH buildings, each of which were designed to primarily house labs. Today, current capacities are generally located in RES and CBH with pockets of research scattered in EAD and soon-to-be IREB. In total, there is approximately 345,000 GSF of research on campus.

Building off of this commitment, the UNTHSC has undergone a series of renovations to improve both the collaborative nature of the laboratory spaces, as well as transitioning to flexible casework systems to allow for a variety of layouts and setups specific to researchers needs. This revitalization began in 2012 with the renovation and redesign of the College of Pharmacy skills laboratory on the first floor of RES. In 2013, a portion of the third floor of RES was renovated into an open and flexible research laboratory. Then in 2014, the UNT System Board of Regents authorized the programming and design of the new Interdisciplinary Research and Education Building (IREB), which was designed to house flexible open-concept laboratories on multiple floors.

Clinical Profile

Core to the UNTHSC’s purpose, vision, mission, and values is creating solutions for a healthier community. Dating back to the campus’ early relationship with the Osteopathic Hospital, clinical provision has been a key part of curriculum and campus operation.

While UNTHSC does not have a dedicated inpatient teaching hospital on campus, outpatient facilities in the Health Pavilion and smaller clinical buildings along West 7th Street have enabled the campus to see over 500,000 patients in the past two years. Today, the campus is exploring opportunities to distribute more clinical care to various off-campus locations around Fort Worth.



2007 Master Plan - Highlight of Implemented Projects

Recent Development

Another key topic was understanding how the campus has developed since the last master plan, and how the framework laid out by the previous plan informed campus growth. Since 2007, the campus has acquired one specialized structure and enhanced landscape features, replaced multiple aging structures, built a new academic building and research building, launched two new academic programs (the School of Health Professions and the UNT System College of Pharmacy), and are in the process of launching a new medical school.

Acquisitions

UNTHSC acquired the Ambulatory Surgical Center in 2015. Long-term, the site may be a candidate for redevelopment. However, the campus has recently reached a new lease agreement that will keep the Surgical Center occupied for the near-term.

Site and Landscape Improvements

Two major landscape projects implemented from the 2007 Master Plan have transformed the campus environment.

The first was the creation of the two-acre Library Courtyard along Montgomery Street in 2013, requiring the demolition of two single-story structures that previously occupied the site. The courtyard, programmed with a variety of outdoor space types and seating options, creates a strong north-south axis link between the Everett Administration Building (EAD), Research and Education Building (RES), Gibson D. Lewis Library (LIB), and the Health Pavilion (HP).

Second is the Campus Spine, which has been developed in multiple phases. Phase 1 was

completed between Haskell and Montgomery Streets in 2010, concurrent with the construction of the Medical Education Training (MET) building. Phase 2 was created as a part of the Library Courtyard. Phase 1 and 2 do not perfectly align, nor is there a pedestrian connection between the two elements across Montgomery Street. Phase 3 of the Campus Spine, stretching from the Library Courtyard to Darcy St., is currently under construction and is expected to fully be completed in fall of 2018. This master plan examines ways to better connect these three phases as well as complete the spine across Darcy Street into the Center for BioHealth (CBH).



Library Courtyard Offers a Variety of Space Types

Medical Education & Training Building

One of the most immediate and visible outcomes of the 2007 Master Plan was the demolition of the osteopathic hospital and subsequent replacement with a new Medical Education & Training Building (MET). Today, the MET has quickly become the academic center of campus.

Interdisciplinary Research & Education Building (Expected Completion 2018)

Currently under construction, the new Interdisciplinary Research and Education Building (IREB) is expected to be completed fall 2018. The building fronts Camp Bowie Boulevard directly north of the Amon Carter Museum and will house research laboratories, classrooms, teaching labs, collaboration spaces, public space with dining, and faculty offices. The building site was identified in the 2007 master plan.



Medical Education Training (MET) Building

Medical School Establishment

In July of 2015, the University of North Texas Health Science Center and Texas Christian University (TCU) entered into a memorandum of understanding to create a new joint medical school (MD program). The school is scheduled to open in 2019 with 60 students and will grow over time to an enrollment of 240. Initially, the program will be housed both on the third and fourth floors of IREB as well as within TCU facilities. Long-term, as the program grows, they may need new dedicated facilities.



Rendering of IREB and Phase 3 Campus Spine

GIBSON D. LEWIS
HEALTH SCIENCE LIBRARY



CAMPUS SYSTEMS

INTRODUCTION

A fundamental part of the 2018 Campus Master Plan process was the in-depth analysis of existing campus systems and features to provide a comprehensive picture of where the campus is today and how various systems function. The planning team worked closely with various members of UNTHSC and UNTS to obtain quantitative and qualitative information to develop a baseline understanding of the constraints and opportunities unique to UNTHSC.

This section of the master plan report shares some of the key observations which influenced and helped inform master plan concepts. While these systems were extracted for the report, it is also worth emphasizing that the study of existing campus systems was not limited to what is shared in this report. All analysis treats IREB as existing.

Data sources for system analysis include:

- Prior planning studies conducted by the university including the 2007 Master Plan, the Strategic Plan, Transportation Surveys, Pedestrian Safety Report, and others
- Existing spatial files from UNTHSC included AutoCAD plans, Sketchup models, and PDF documents
- Quantitative data sets with analytics on topics including demographics, enrollment, parking, research expenditures, and room inventories
- Local and national survey documents
- Interviews with campus stakeholders
- Qualitative surveys using mapping applications and first hand investigation

See the Appendix for a detailed list of data sources and reference documents.

Planning Boundary

When analyzing the campus, it is requisite to look at multiple scales. Earlier in this report, a synoptic look at regional and neighborhood context was taken. The campus systems section takes a more integrated look at the relationship between campus systems and the context. It is critical to study how campus systems interact with the adjacent neighborhoods because, invariably, many of the systems are linked to operations and elements outside of the campus border. For example, stormwater flows with topography and runs onto the campus from the adjacent neighborhoods in some locations, and from the campus into neighborhoods and other locations

To capture a full understanding of how the campus operates today, the master planning team defined a study area two blocks in all directions of the existing campus boundary. This extension beyond the campus boundary is what is called the planning boundary. The analysis in this section will use the planning boundary as a basis.

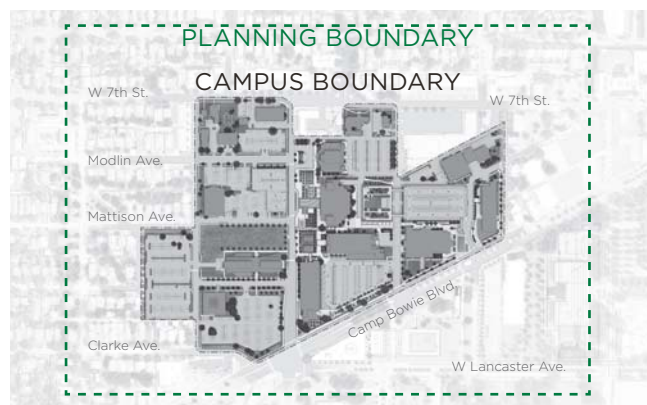
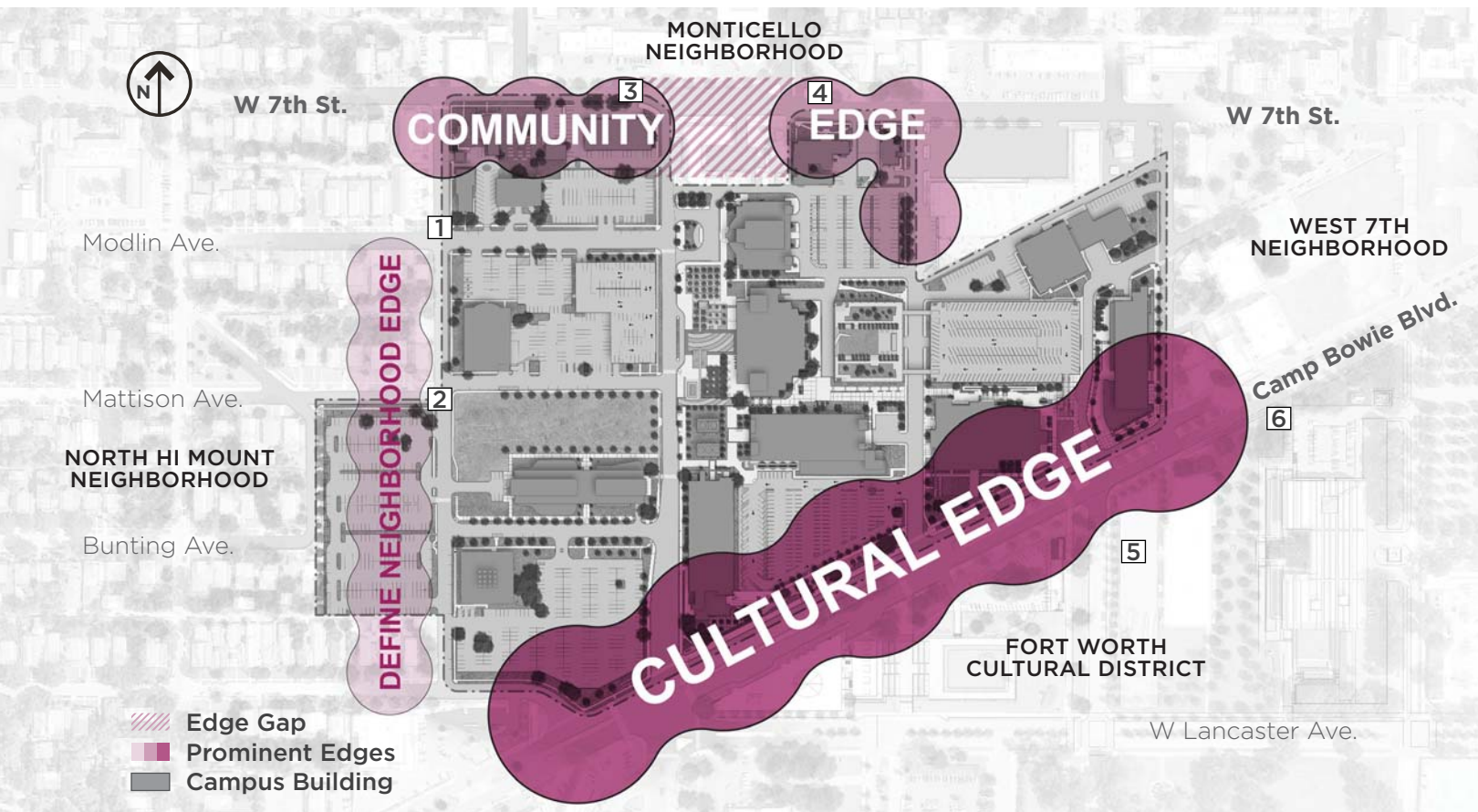


Diagram of Planning Boundary

Analysis Outcome

Revealed through this analysis, a collective understanding of the existing campus and how it functions is essential to create a plan that will allow the campus to grow successfully over time.



Edges

Campus edges are the threshold that blend campus into neighborhood. Traditionally, campuses have treated edges as barriers or buffers to clearly separate themselves from the surrounding communities. Institutions built physical and perceptual walls (such as large expanses of parking that do not welcome neighbors or uninviting facilities and service functions). Historically, UNTHSC has been characterized by these same poor edge conditions. At the time of the 2007 Campus Master Plan, surface parking or low density buildings housing support functions lined the campus edge on all sides. Recently, the campus has begun to improve these conditions. Today, campus edges are instead viewed as an opportunity to engage with neighbors and promote a positive institutional identity. Examples of this paradigm shift can be seen in the designs of CBH and IREB which created an edge condition that better engages the museums and promotes the institutional brand along a portion of Camp

Bowie Boulevard. The UNTHSC campus has three distinct edge conditions based on each of the relating neighborhood edges.

Neighborhood Edge: Edge shared with the North Hi Mount neighborhood containing mostly single family residential uses. This edge is currently undefined along the entire stretch.

Community Edge: Edge along West 7th Street. The campus side of this edge edge is poorly defined by older one- and two-story buildings that are set far back from the road. This edge has poor institutional identity and does not feel like a part of campus.

Cultural Edge: The most visible campus edge along Camp Bowie Boulevard where UNTHSC interfaces directly with the Cultural District. This edge provides the first impression of the institution to visitors. Although improved in areas, surface Lots 6 and 19 still create non-optimal edge conditions.



1. Neighborhood Edge North End of Haskell Street



2. Neighborhood Edge Haskell at Mattison Avenue



3. Community Edge Along West 7th Street



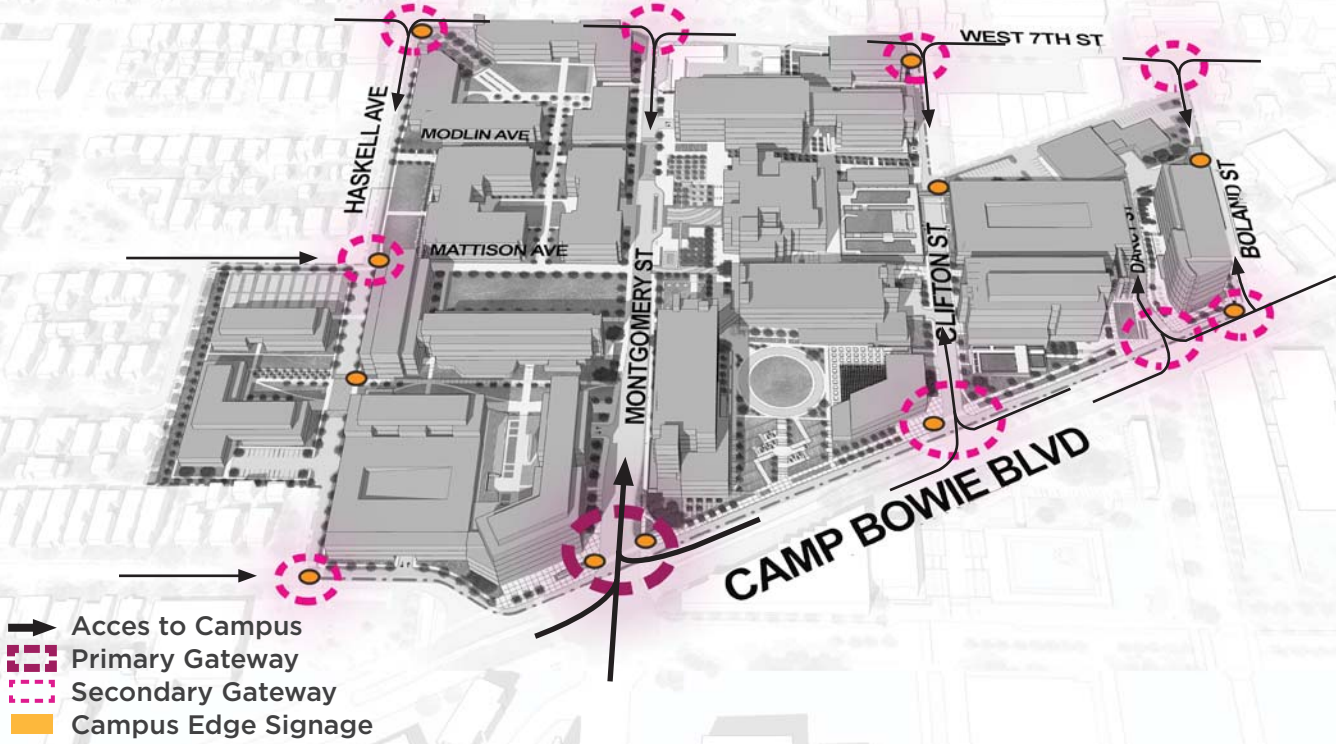
4. Community Edge Along West 7th Street



5. Cultural Edge - Kimball Art Lawn



6. Cultural Edge Along Camp Bowie Boulevard



Gateways

Gateways are the physical thresholds to campus that create a sense of entry. Stakeholders identified the intersection of Camp Bowie Boulevard and Montgomery Street as the entry point that is the primary gateway to campus. However, while this intersection is perceived as the front door, most familiar daily users (students, staff, and faculty) access campus at different points to reach their preferred parking locations. These access points are the secondary gateways. Due to a variety of factors, some of these gateways are more successful than others in terms of clarity and function.

Gateways can be clearly demarcated in multiple ways. Buildings and the built environment can serve to physically frame gateways. Campus signage can also help reinforce these gateways, identify campus property, and promote the UNTHSC brand image. The campus has done a good job locating signage at gateways.



The Intersection of Camp Bowie Boulevard and Montgomery Street Serves as the Campus's "Front Door" and Primary Gateway



Open Space Network

Open Space is defined as the sections of campus without buildings or parking lots that provide space for plazas, grass, trees, or other vegetation set aside for recreational or aesthetic purposes. More broadly speaking, it includes plant and landscape features, lighting, pathways, and outdoor furniture. A high-quality open space network should be composed of a variety of space scales, uses, and physical elements to meet the diverse needs of campus users and align to a diverse set of landscape typologies. As an institution in Texas, it is also critical that the landscape on campus provide a substantial amount of shade.

Initial analysis during the 2007 Master Plan identified the campus as being deficient in green space elements and distribution. The 2007 plan identified just one major existing green space on campus (Alumni Plaza). Since the 2007 Master

Plan, the campus has placed an emphasis on creating a variety of green space and increasing the volume of landscape elements. As a result, campus character and quality has improved significantly. Today, there are six major open space elements on campus and multiple other small elements.

A unique open space feature is the the Memorial Tree program which allows donors to dedicate and plant a tree on campus in honor or memory of an event or person. This program helps to make the UNTHSC campus special and unique.

While much progress has been made since the previous plan, analysis reveals that there are still gaps in the open space network and need for a greater mixture of space types, as well as opportunities to expand the network to support a broader section of the campus.

Open Space Typologies

Open space planning focuses on the design and program of campus that includes a variety of space types. While each space is unique in design and function, the planning team has identified three general space typologies existing on campus today. These spaces will serve as typologies for expansion of the open space network in the 2018 Campus Master Plan.

Grand Spaces

Grand spaces are designed for active recreation, events, and large groups of people. Grand spaces typically have clear edges defined by building masses or alignment with roadways. They also typically share a strong indoor-outdoor connection with adjacent buildings through alignment of entrances, interior active uses, and a large number of windows overlooking the space. Grand spaces are generally intended to be very public and open to members of the campus and community.

Existing examples include the MET Lawn, which frequently hosts recreational activities such as flag football and events such as crawfish boils, and the Alumni Plaza which provides space for cookouts. The campus has a good distribution to support existing uses, but should make sure future development is supported by new grand spaces.

Intimate Spaces

Intimate spaces are smaller spaces intended to serve as places for groups or individuals to engage in passive activities. Because of their size and flexibility, these spaces can be created in many places on campus. Intimate spaces can be located at the edges of grand spaces, in building niches or courtyards, or along pedestrian routes. These spaces are typically fitted with benches and other site furnishings for relaxing, studying, or dining outdoors. Depending upon their locations, they can serve faculty, staff, students, and the adjacent community.

On-campus examples include benches placed near building entrances and the picnic tables at the edges of the Library Courtyard. There is an opportunity for UNTHSC to diversify these spaces in the future by considering new programs including (but not limited to) outdoor classrooms, patient waiting gardens, hammocking racks, outdoor dining areas, and dedicated food truck sites.

Linear Open Spaces

Linear open spaces serve as pedestrian linkages between buildings and other open outdoor spaces. These can take the form of sidewalks adjacent to the public street network or pedestrian walks and promenades within the campus interior.

To enhance campus experience, it is critical to create pedestrian-friendly spaces along roadways. Linear open spaces along roadways should include wider walk space, street trees, benches and furnishings, lighting, and specialty paving to make for a safe and enjoyable passage for pedestrians. Crosswalks, speed tables, and planted “bulb-outs” should also serve to slow traffic and make drivers more aware of the pedestrian surroundings. One strong linear open space on campus is the pedestrian paths that parallel the edge of the MET block. These pathways are served by lighting, seating, and shade trees spaced at consistent intervals. However, many of the other linear open spaces across campus could do a better job of including additional lighting, seating, and shade to ensure pedestrian-friendly open spaces adjacent to roadways.

Likewise, campus interior walks should provide shade, plantings, intermittent points of interest or resting areas. A great example of linear open space design is the Campus Spine. An illustrative plan of the design of the section north of RES and IREB is located on the adjacent page. As the primary east-west connector on campus, consideration for a variety of landscape features and seating options was integral to its design.



Small Seating Area in Alumni Plaza (Intimate Space)



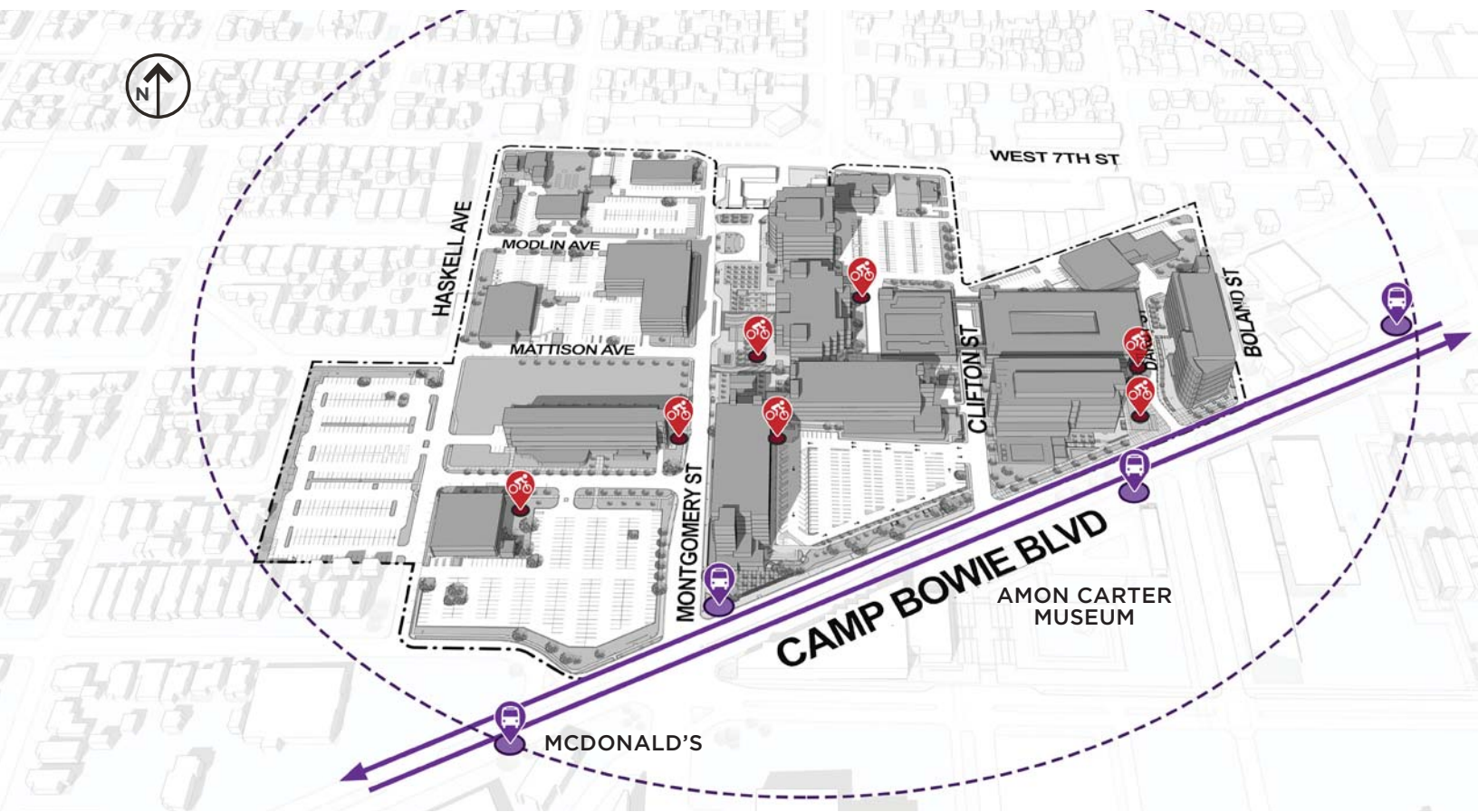
MET Lawn Hosting an Event (Grand Space)



MET Lawn Supports a Variety of Activities



Illustrative Plan of Campus Spine Phase 3 Design - Under Construction 2018 (Linear Open Space)



Transit & Bicycle Infrastructure

The UNTHSC campus sits adjacent to the Fort Worth Transit Authority (FWTA) Route 2 - Camp Bowie Boulevard bus line. Route 2 connects the Ridgmar Mall Transit Center to the downtown Fort Worth Transit Center, including the Trinity Railway Express with connections that include DFW airport, the Dallas Medical Center, and Downtown Dallas. Buses run every 30 minutes.

Within a quarter-mile (1/4 mile) of campus, there are two westbound and two east bound bus stops for Route 2. The westbound stops are located at the Camp Bowie Boulevard intersections of Van Cliburn Way and Montgomery Street. The eastbound stops are located adjacent to McDonald's along Camp Bowie Boulevard and the northeast corner of the Amon Carter Museum of American Art property.

- FWTA Bus Route
- FWTA Bus Stop
- 1/4 Mile (5-minute walk) Radius from Library
- UNTHSC Bicycle Rack
- Campus Building
- Context Building

Today, there are no formal bike routes on or adjacent to campus. City of Fort Worth has plans to create bike lanes along Montgomery Street, West Lancaster Avenue, and West 7th Street in the future. See the Master Plan Systems Integration section for more details.

UNTHSC has located bicycle parking at seven locations across campus to support students, faculty, and staff who do elect to bike to campus. Stakeholders identified no pressing demand for additional bicycle facilities.



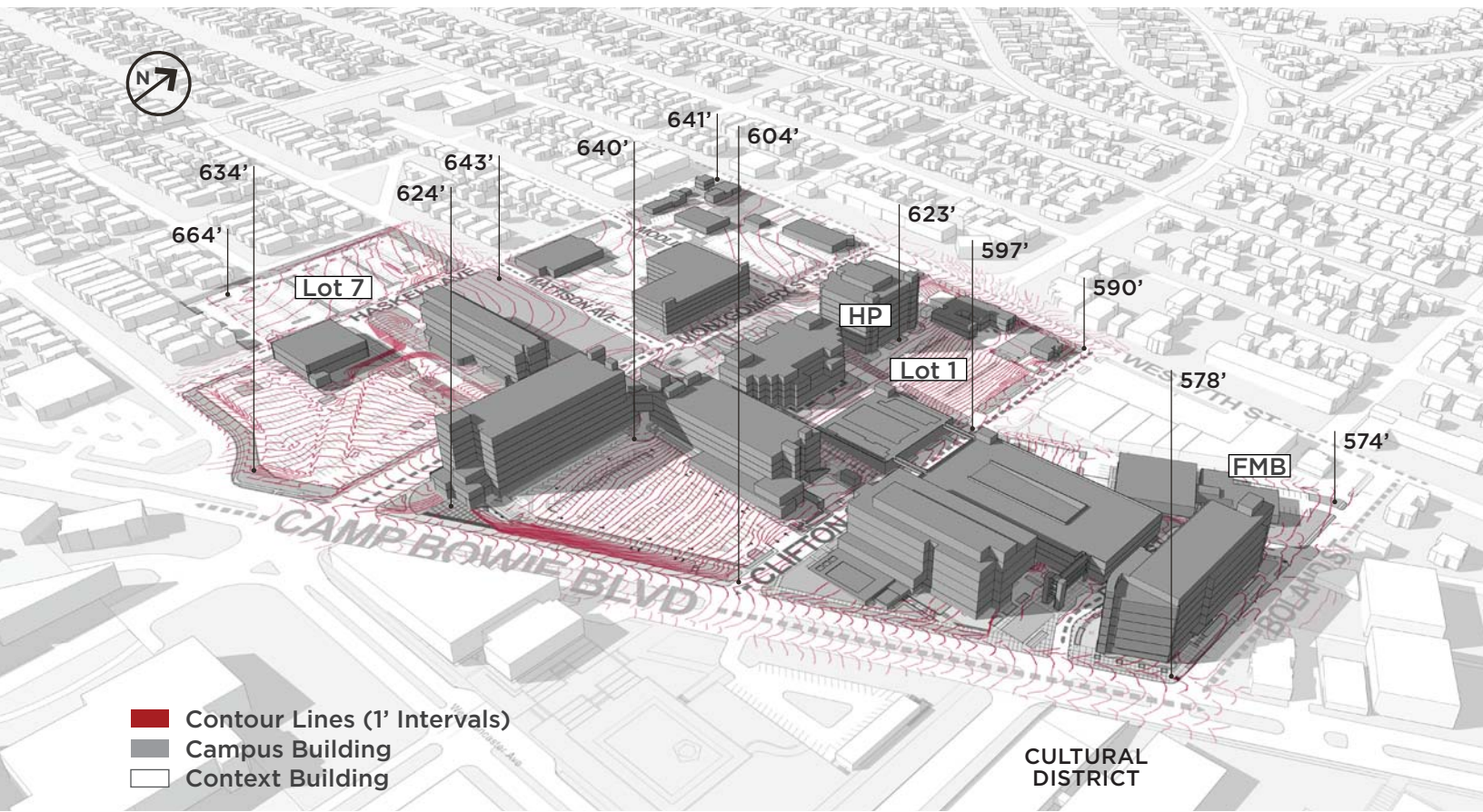
Pedestrian Circulation

Pedestrian circulation routes on campus are primarily defined by the routes students, staff, faculty, and visitors take to get from parking to their initial destination. The above diagram highlights the most heavily trafficked routes today.

Historically, pedestrian circulation on campus has been fragmented, poorly aligned as a system, and confusing for users. Much of this was dictated by legacy building locations (some of which no longer exist). Since the 2007 Master Plan, the campus has made substantial improvements to pedestrian circulation. Touched on in the recent development section, creation of the campus spine has been an emphasis for the campus. Once the final section north of IREB is completed (Fall of 2018), the campus spine will run the entire length of campus connecting the campus core with a majority of the highly utilized buildings on campus and parking zones.

While this progress has been instrumental in improving the on campus experience, there are still sections of campus where pathways and crosswalks are poorly aligned. This is most visible in the area surrounding the Chilling Towers, which is one of the most heavily trafficked areas on campus. The three primary east-west pathways (Campus Spine west of Montgomery, Campus Spine east of Montgomery, and pathway north of MET) do not align. To make matters worse, the pedestrian crosswalk over Montgomery does not align with any of these, but instead, is located further south on axis with the MET building itself.

This analysis reveals a need for improvements that target creation of new north-south connections, align legacy crosswalk and pathway locations, and enhance the overall connectivity and safety of campus for pedestrians.



Topography

The topography of UNTHSC presents both challenges and opportunities. Due to the extreme elevation changes, it can be difficult to navigate campus. The highest point on campus is on the western edge of Lot 7, sitting at 664 feet above sea level. The low point is on the northwest lawn of FMB, sitting 574 feet above sea level. This total elevation change of approximately 90 feet significantly limits overall accessibility across campus.

Many of the buildings on campus were designed with special considerations to provide entrances at multiple levels to accommodate the exterior slope. Steep slopes also present landscape and stormwater drainage challenges. For example, the Parking Lot 1, where clinical guests park to visit the Health Pavilion, is notorious for the speed of water rushing down its slope during storm events. As a positive, the campus sits higher than Downtown and the Cultural District, providing unique views.



Topography Presents Accessibility Challenges Walking Across Campus, Impacts the Placement of Building Entrances, and Creates Steep Slopes that Water Rushes Down During Storm Events



Topography is a Barrier to Some Clinical Patients and Creates Stormwater Challenges



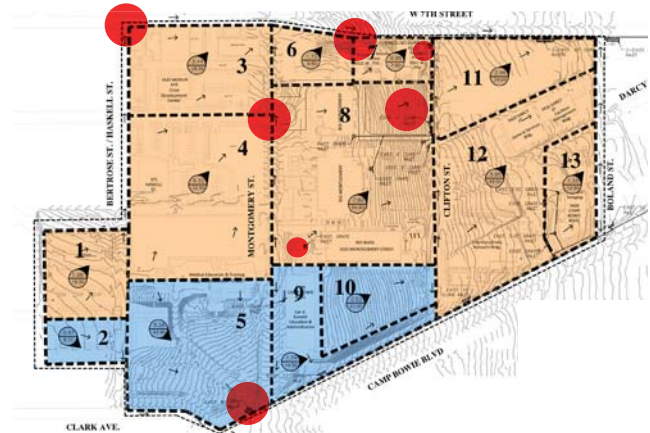
Retaining Walls Exist at Multiple Places on Campus to Hold Back Earth Elements



Additional Pervious Space is Desired

STORMWATER DRAINAGE

Existing Stormwater Drainage Zones



- Flows North to West 7th Street
- Flows South to Camp Bowie Boulevard
- Area Identified Having Extreme Runoff Issues

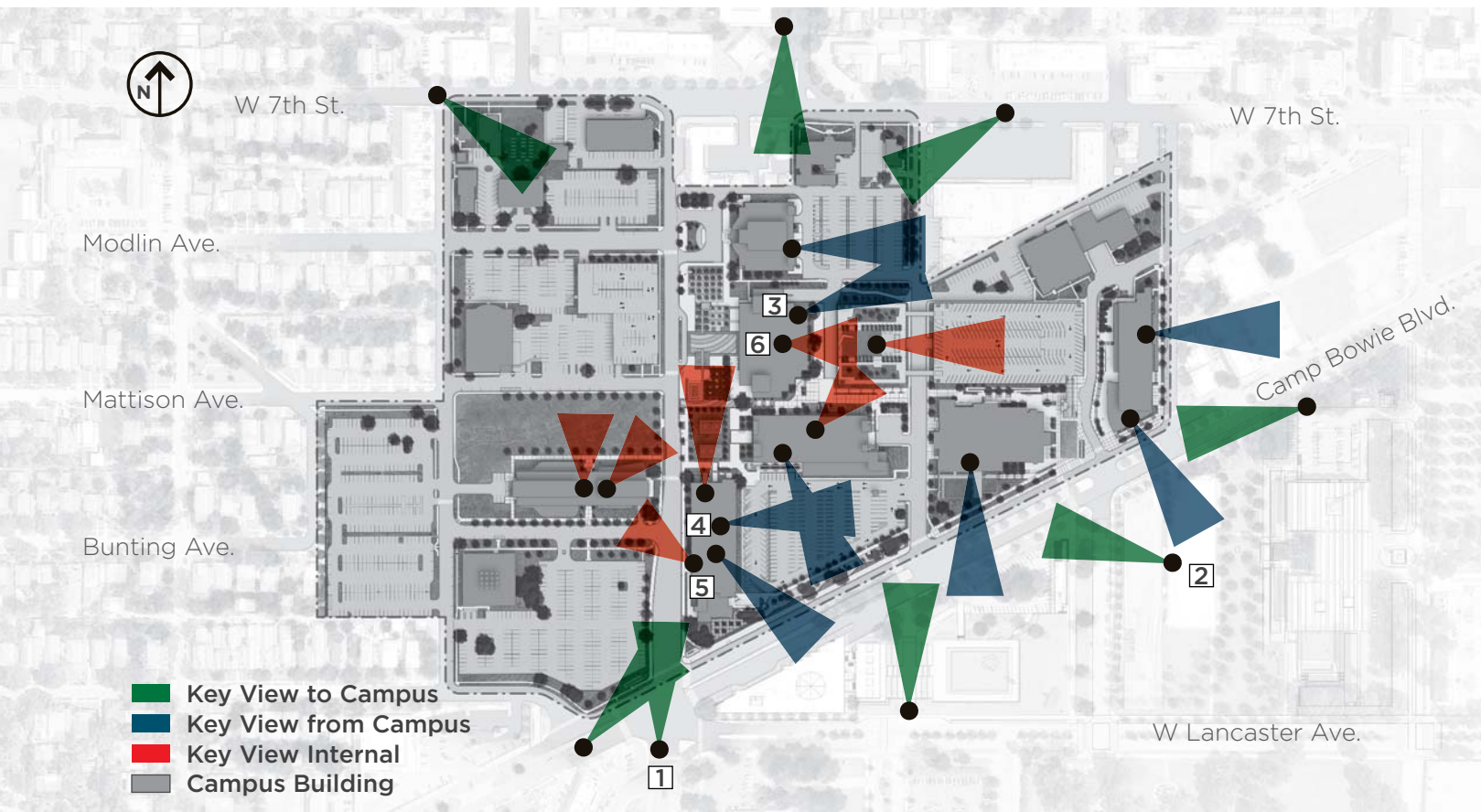
Drainage Patterns

Due to the lack storm infrastructure on campus, all water on campus flows off of buildings and land and into internal streets where it is routed to either West 7th Street or Camp Bowie Boulevard. Generally following the topography, water flows west to east before routing north or south to the two arterials listed above and into the existing public storm network of pipes, catch basins, and curb inlets. On the diagram above, orange areas flow to West 7th Street and blue areas flow to Camp Bowie Boulevard.

Based on initial analysis, the system as a whole (on and off campus) is undersized and unable to handle the current runoff. As a result, various areas throughout the campus experience flooding, ponding, and erosion during storm events. The worst are identified in red on the diagram above.

Pervious vs. Impervious Surfaces

The campus is currently 80% impervious, with paved areas (surface parking, roadways, and sidewalks) accounting for 60% of this area while building roofs account for the other 20%. Pervious surfaces, such as grass lawns and landscape beds, allow water to drain into the ground instead of pooling up and flowing on the surface.



Vistas & View Corridors

Because the campus sits atop a local peak, UNTHSC is uniquely situated to have incredible vistas and view corridors. This includes views onto campus, off of campus, and internal to campus. Each view type is marked on the diagram above. Shorter lengths correspond to closer views while the longer lengths represent more distant views.

Key Views to Campus

Visitors approaching campus begin to view the campus profile long before reaching campus. MET and EAD can be seen from Interstate 30 (over a mile away) and get increasingly more prominent as visitors travel north on Montgomery Street. The campus can also be seen well in advance traveling both directions along Camp Bowie Boulevard and West 7th Street, and it sits prominently in the background of visitors to the Amon Carter and Kimbell Museums.

Key Views from Campus

Magnificent views of the downtown skyline can be seen from various floors in EAD, LIB, CBH, and HP. Equally incredible, portions of EAD, RES, IREB, and CBH have views that overlook the nearby museum grounds. Future development should not block or impede these views.

Key Views Internal to Campus

Historically, the campus has not had many internal vistas due to a lack in both architectural and landscape focal points. Since 2000, creation of the Alumni Plaza, Library Courtyard, MET Lawn, and MET building have created new engaging views and focal points internal to the campus. While internal views have been created for buildings in the core, buildings elsewhere on campus are lacking visually appealing internal views.



1. View to Campus from Montgomery Street



2. View to Campus from Kimbell Pavilion Roof



3. Views Off Campus from North Side of the Library



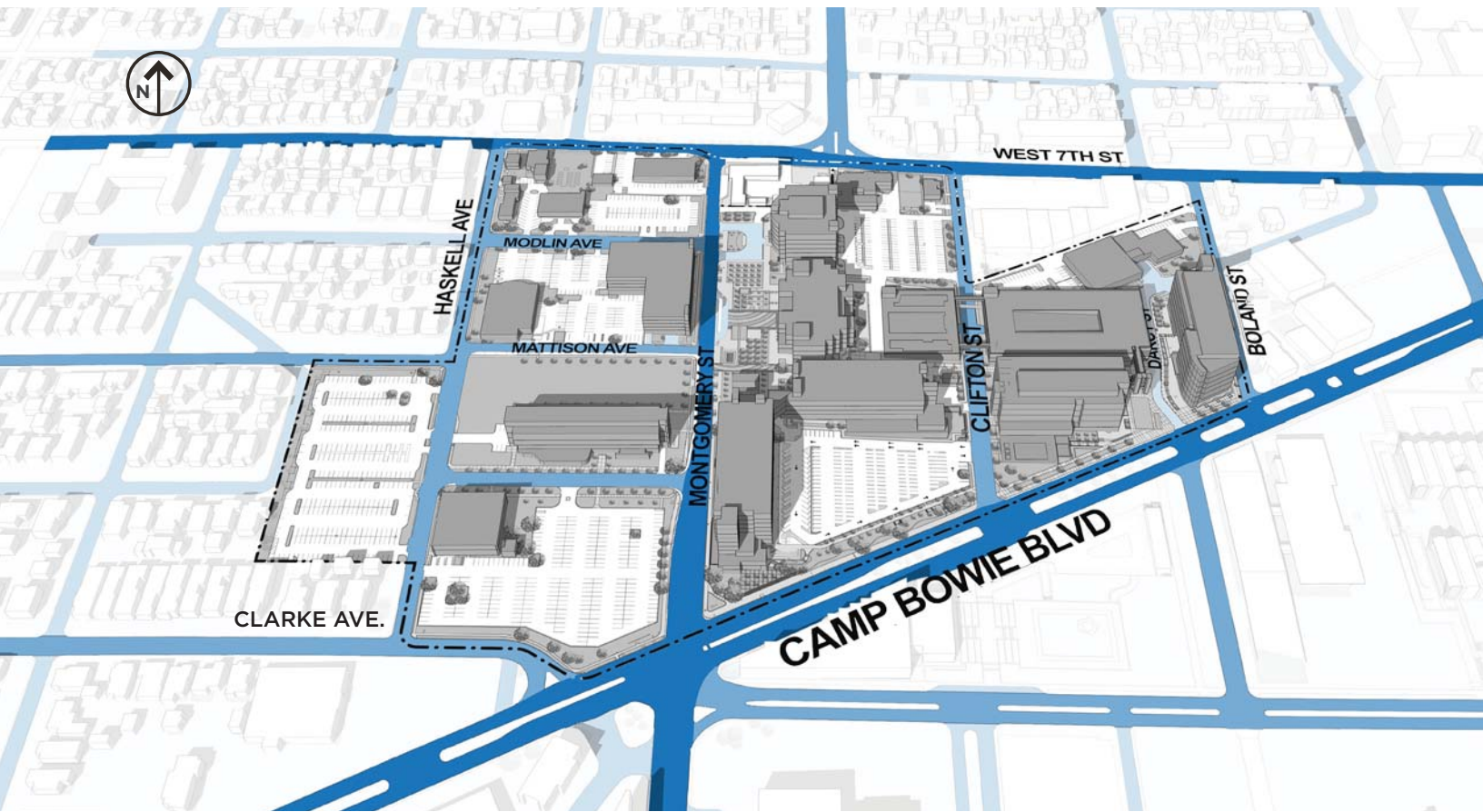
4. Views of Downtown and the Cultural District from EAD



5. Views of MET from EAD



6. Internal View of CBH and IREB from Alumni Plaza



Streets & Vehicular Circulation

Understanding street hierarchy and usage is critical to campus planning. A clear and functional hierarchy helps to establish a clear campus boundary, efficiently move vehicles through campus with minimal pedestrian conflicts, and connect the campus to the students, staff, faculty, and visitors who access campus by personal vehicle. Vehicular circulation analysis typically represents the street hierarchy in three levels: Arterial roads (primary hierarchy), collector roads (secondary hierarchy), and local roads (tertiary hierarchy). Each tier is generally defined by the width of the road and the volume of traffic a road handles on a daily basis. This nomenclature is shared with the City of Fort Worth.

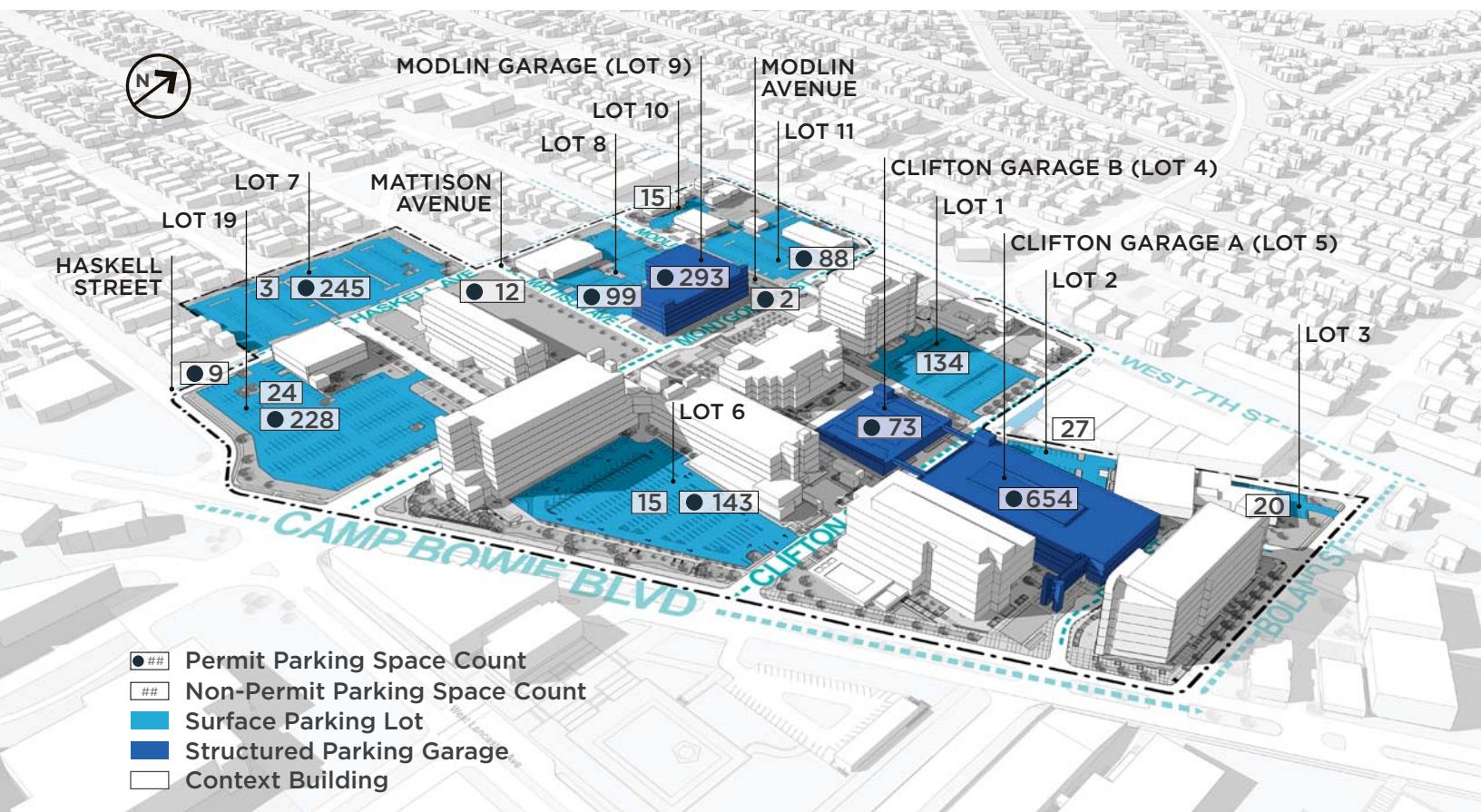
Arterial Roads: Arterials are high traffic and capacity roads that move traffic across cities and regions. UNTHSC is bounded by two major arterial roads that connected the campus to Downtown

- Arterial Road (Primary)
- Collector Road (Secondary)
- Local Road (Tertiary)
- Campus Building
- Context Building

Fort Worth. Camp Bowie Boulevard forms the southern edge of campus while West 7th Street is the northern edge. Additionally, Montgomery Street is a third arterial which connects campus to Interstate 30, but effectively bifurcates campus in half causing pedestrian conflicts.

Collector Roads: These roads distribute visitors from arterials. Based on layout and function, most roads on campus fall into this classification.

Local Roads: Local roads typically do not have much traffic and are only used to get to specific destinations or provide service access.



Parking

Today, UNTHSC has a mixture of parking types on campus, including surface parking lots, street parking, below building parking (at the Health Pavilion), and structured parking garages.

There are currently 1,846 permit spaces on campus. These spaces are managed by the university to serve its students, staff, and faculty. UNTHSC currently employs multiple management structures which includes some reserved spaces and some dedicated faculty lots. However a majority of the parking is open. The first table on the right breaks this space count down into surface lot, parking garage, and on street counts. This 1,846 permit count will be used as the baseline for tracking existing parking in the master plan.

The campus also has 260 non-permit spaces. This number captures visitor parking, dedicated

clinical/business parking, facilities service parking, and ADA spaces. These spaces are not open for students, staff, and faculty to park in on a daily basis and do not generate revenue. In total there are 2,106 parking spaces on campus.

UNTHSC Permit Spaces	Count
Permit - Surface Lots	803 spaces
Permit - Garages	1,020 spaces
Permit - On Street	23 spaces
TOTAL	1,846 spaces

Total Parking Spaces	Parking Spaces
All Permit Spaces	1,846 spaces
Dedicated Use Lots	204 spaces
Visitor Parking	56 spaces
TOTAL	2,106 spaces



Primary Building Use

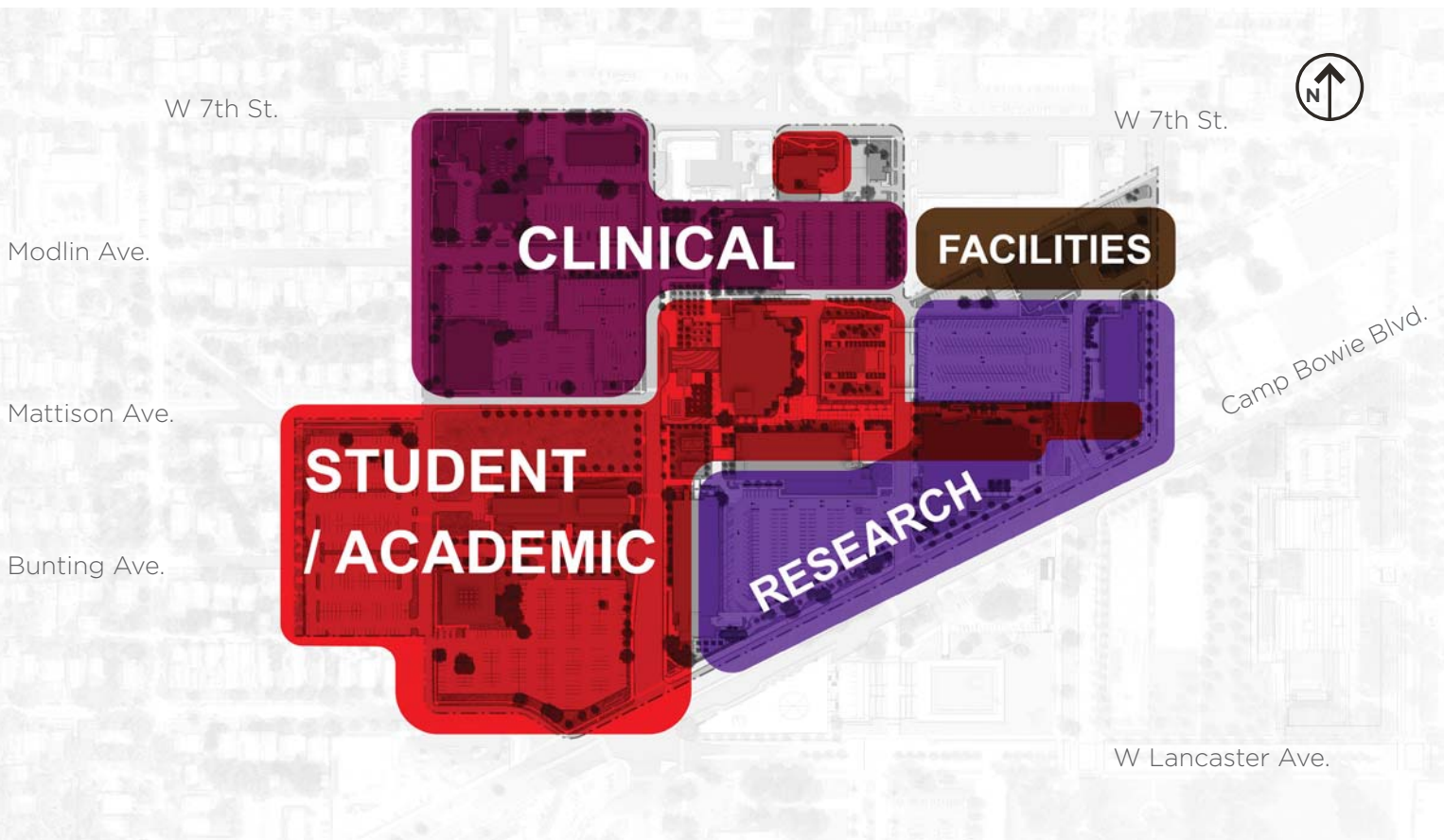
Typically, master plans analyze the campus at the building level, where each building has one primary use. Due to the unique nature of the UNTHSC campus, which has multiple large mixed-use buildings, our analysis focuses on the primary use of each floor.

The UNTHSC campus is made up of eight primary uses: academic, research, clinical, library, administration and student support, other (such as the fitness center), facilities, and leased space totaling 1,103,000 GSF (excludes parking). The diagram above shows their distribution and overlap across campus.

Current leased space includes the St. Emillion Restaurant, cafe and coffee spaces across campus, multiple small suites within CBH, and the Surgical Center.

Space Type	Approx. Gross (GSF)
Academic	290,000 GSF
Research	345,000 GSF
Clinical	130,000 GSF
Admin / Support	178,000 GSF
Library	64,000 GSF
Other	17,000 GSF
Facilities	45,000 GSF
Leased	34,000 GSF
TOTAL	1,103,000 GSF

Identified by stakeholders during early workshops, multiple opportunities exist to realign programs campus-wide to create better adjacencies and efficiencies. These opportunities are detailed in later chapters of this report.



Use Districts

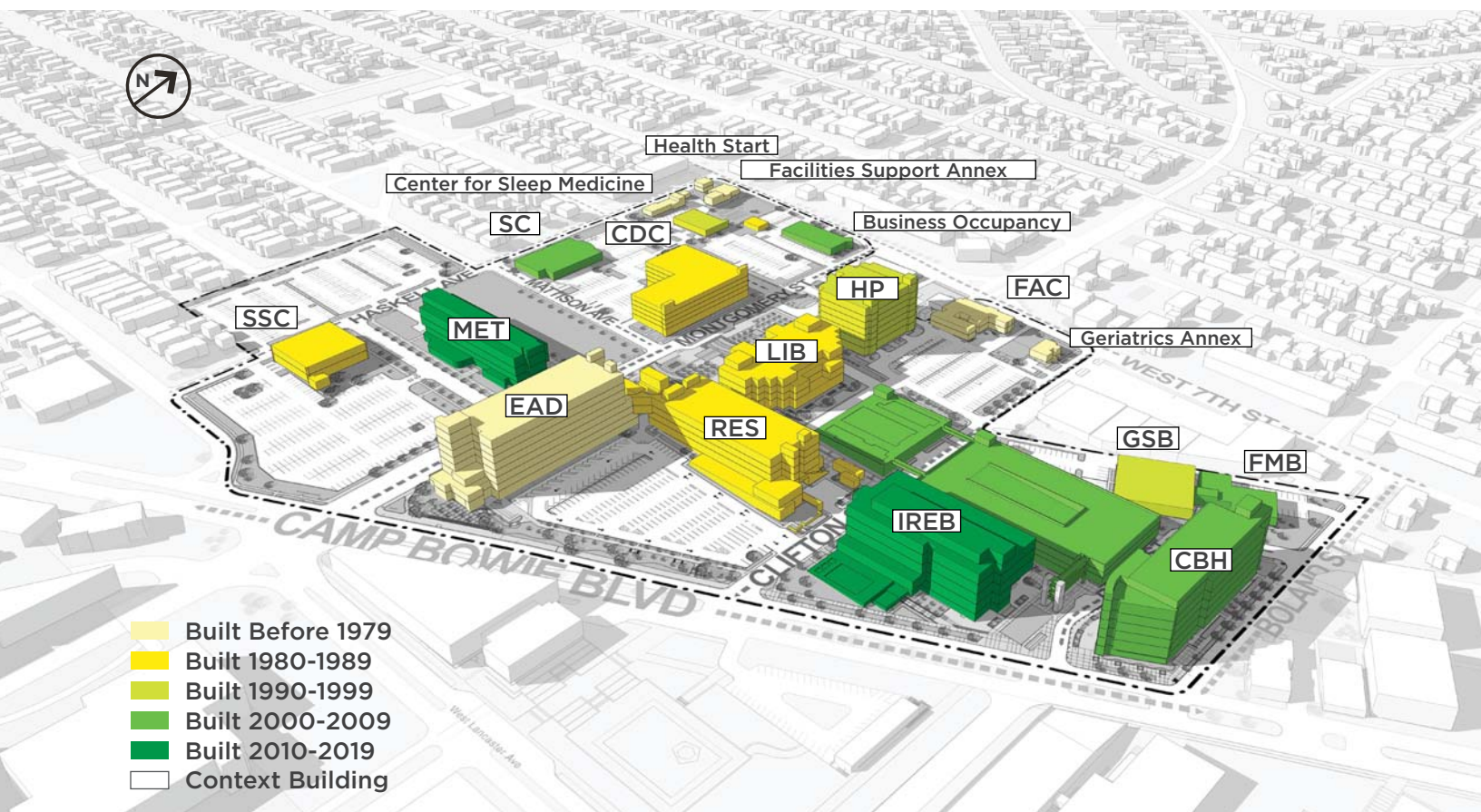
Perhaps more important than looking at individual building uses is understanding use districts. Each district expresses relationships of individual uses at a campus level. On many other campuses, these graphics reveal very disaggregated patterns with scattered pockets of individual uses. UNTHSC has a fairly strong pattern overall. As depicted on the diagram atop this page, each of the major functions is relatively clustered on campus.

Academic uses are primarily clustered in the campus core, with most day-to-day functions being located in MET, EAD, or LIB. Stakeholders consistently identified the library as the heart of campus and a hub of student activity. In addition to the strong core, the district stretches south and west to capture student services and parking in Lots 7 and 19 which primarily support academic functions, as well as stretching east to capture smaller academic spaces in RES, IREB, and

CBH. Today, academic and student centric spaces outside of the core are mostly removed from the ground and feel disconnected and isolated. The campus master plan advocates concentrating these uses on the first and second floor, orienting them to the campus spine, and providing high levels of visibility to strengthen the relation across campus.

Research functions are aligned to Camp Bowie. While research adjacency is good, stakeholders shared that individual departments feel very siloed. The campus master plan advocates for the creation new collaboration spaces for researchers to engage with each other and increase visibility.

Clinical functions are currently concentrated on the north side of campus in the Health Pavilion and in smaller structures spread out along West 7th Street. Though in relative proximity, these uses feel physically disconnected from each other.



Building Age & Facility Conditions

Management of campus assets requires regular evaluation of existing facilities and building systems to identify the need for upgrading or replacement.

Today, the campus building inventory contains a range of building ages and conditions. While EAD, the first structure built by the university on campus, was constructed in 1978, the campus has acquired multiple pre-existing facilities that were built as early as 1955. Many of these buildings were constructed for other uses and have since been re-purposed for campus programs. While re-purposing an existing building is often a sustainable and cost effective option, it is not always feasible to adapt older buildings for new uses due to their age or format. This is especially true at UNTHSC with their many special uses and requirements. It is also important to consider potential best use of

sites across campus. Older, low-density buildings may need to be removed to accommodate new, larger facilities in critical locations.

Another key topic expressed by stakeholders is the varying interior quality of existing buildings. The campus has assets that have been built since 2000, and others such as the SSC and Library which have recently been renovated. These are all in good condition. However, many of the older structures across campus feel dated and have maintenance issues common in older buildings.

No formal campus-wide Facility Condition Index (FCI) survey exists for the campus. UNTHSC has performed studies on individual buildings as needs arise. The planning team recommends that the campus produce a study in the near term to better understand its assets.



MET, Constructed in 2010
Differing Exterior Character and Quality



Facilities Support Annex, Constructed in 1965
Differing Exterior Character and Quality



Student Lounge in EAD
Differing Interior Character and Quality



Multi-use Hallway in RES
Differing Interior Character and Quality

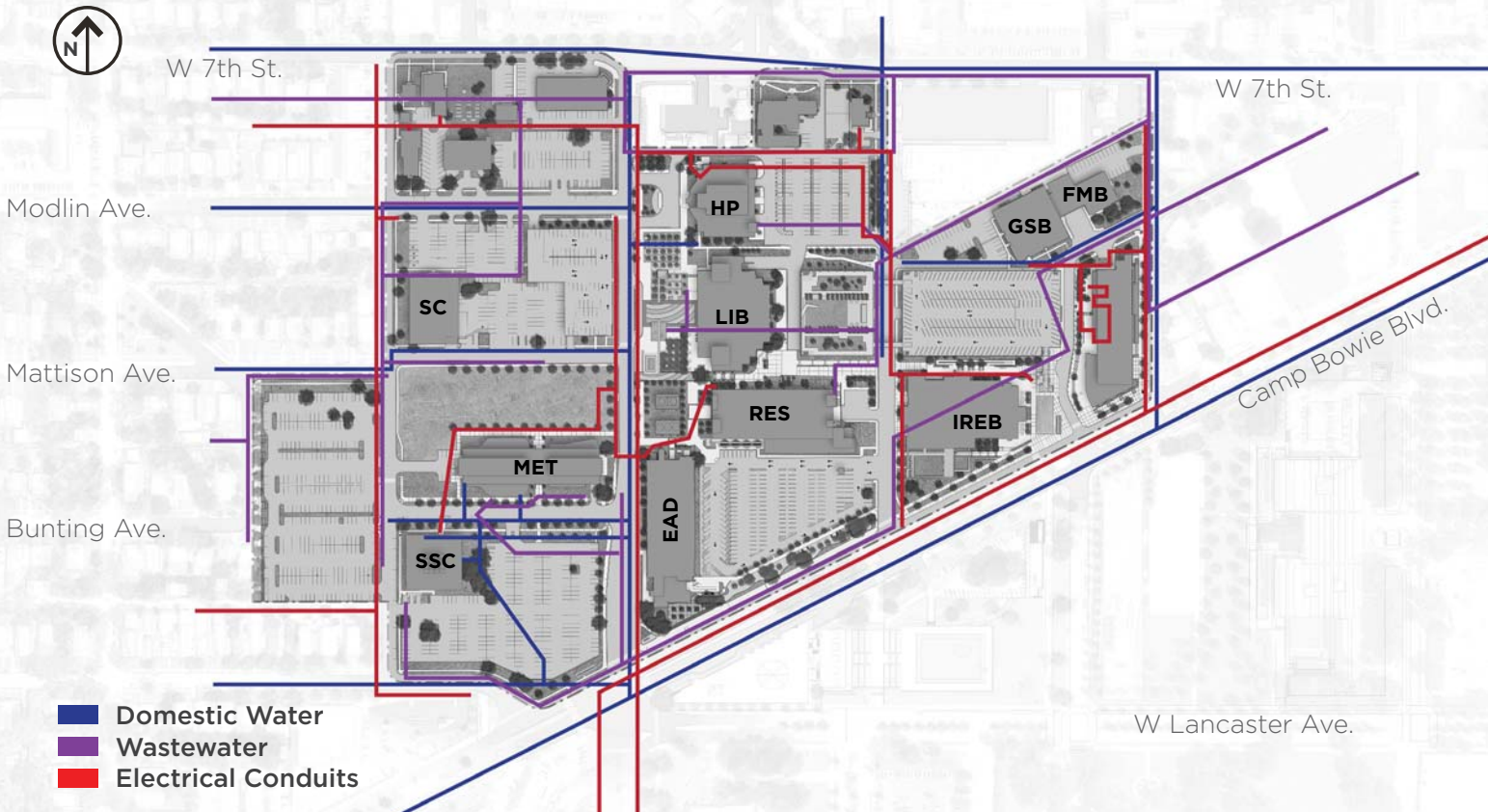


Recently Renovated Interior of SSC
Differing Interior Character and Quality



MET Common Space, Constructed in 2010
Differing Interior Character and Quality

Existing Conditions



Utilities

Domestic Water

The water system on campus is currently owned and operated by the City of Fort Worth. While the building-specific supply lines are newer and in acceptable condition, many of the larger pipes beneath roadways on and around campus are over 50 years old and prone to breakages. The City of Fort Worth is responsible for the eventual replacement of these pipes. Utilizing a max daily flow model, analysis of existing campus water infrastructure determined that it is adequate to serve the campus demand today. Future development will require case-by-case analysis.

For additional details, please refer to the Water Study referenced in the Appendix.

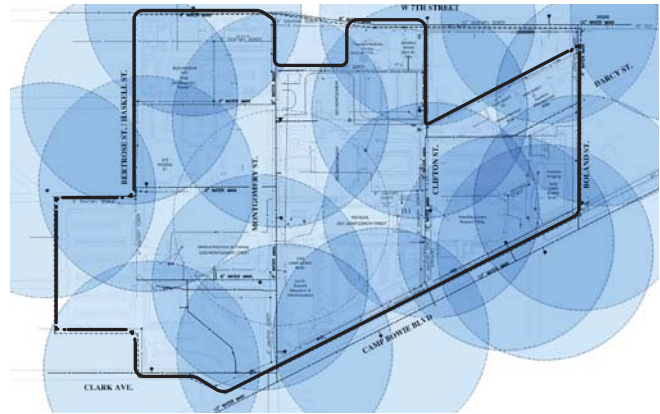
Wastewater

Utilizing a peak factor demand model using City of Fort Worth standard criteria and assumptions, it was determined that the existing wastewater infrastructure is adequate for all of campus and substantial excess capacity exists for future development. The one exception is the shared main from the Library and RES, which will exceed capacity with any additional development in the future and will require upgrade.

For additional details, please refer to the Wastewater Study referenced in the Appendix.

Fire Coverage

Following the recent hydrant installation to support the construction of IREB, the campus now has full and adequate fire coverage across the entire campus boundary. Required fire coverage mandates that all buildings are entirely covered by a 400 linear foot radius from one or more fire hydrants (this corresponds to the length of a standard fire hose). All new development will need to verify that their massing do not impact this coverage.



Fire Hydrant Locations and Coverage

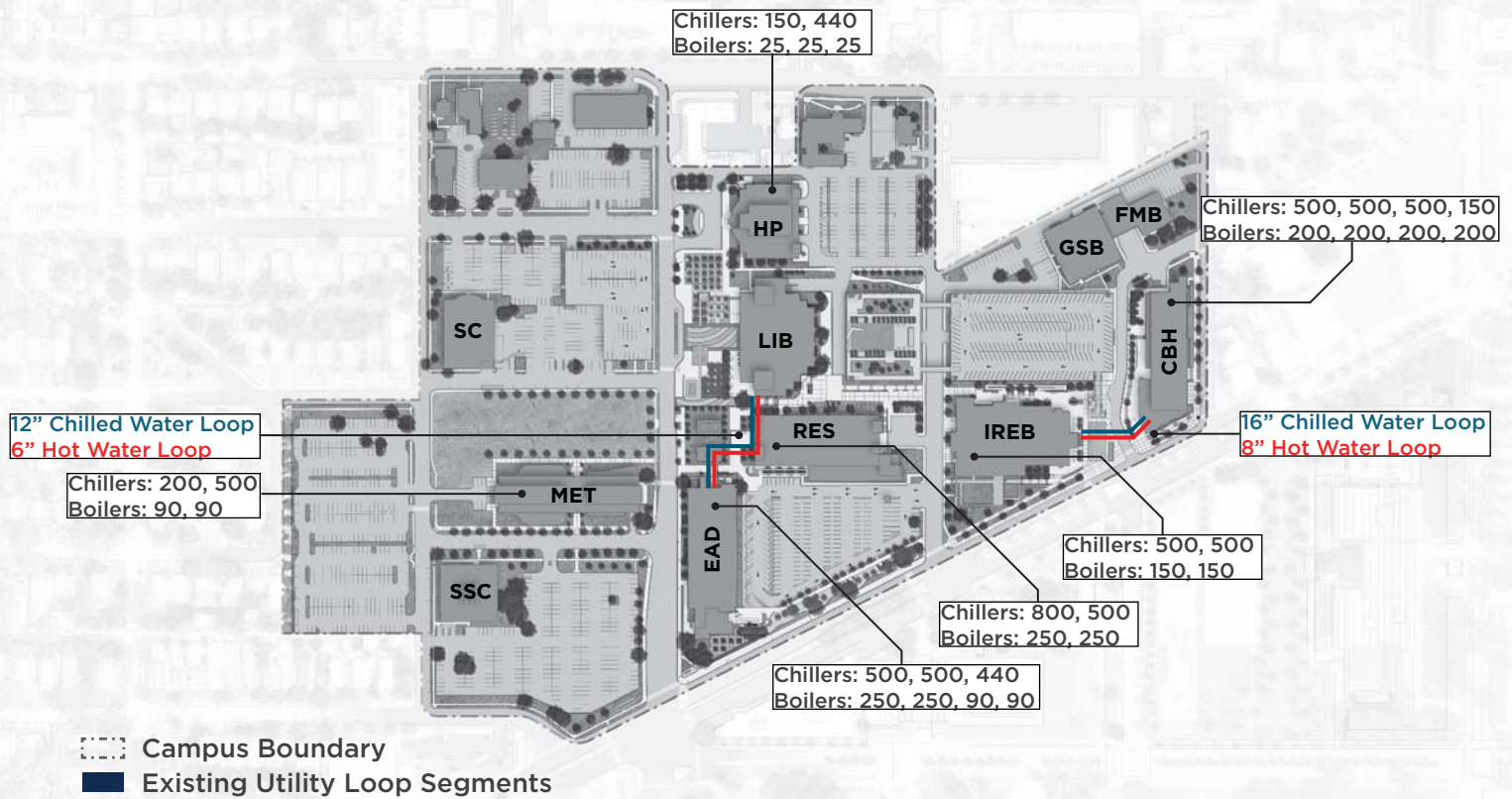
Electrical Systems

The electrical distribution system at UNTHSC are owned and operated by TXU Energy. Most of the campus is served by underground medium voltage lines, however overhead power lines still serve the smaller, low-density buildings located along Haskell Street and West 7th Street. Transformers and switchgear are located across campus on exterior pads or in below-grade utility vaults. These transformers and switchgear step down the voltage before routing it to the point of service (buildings).

Overall, the electrical utility network is in good shape. Adequate capacity exists to support the campus today, and the primary system infrastructure is appropriately sized to support future development. New development will only be required to build the necessary infrastructure to tie into the existing system. To preserve this viability, the campus should continue to keep up with recommended maintenance and required upgrades planning for future growth.



Selection of existing MEP Infrastructure



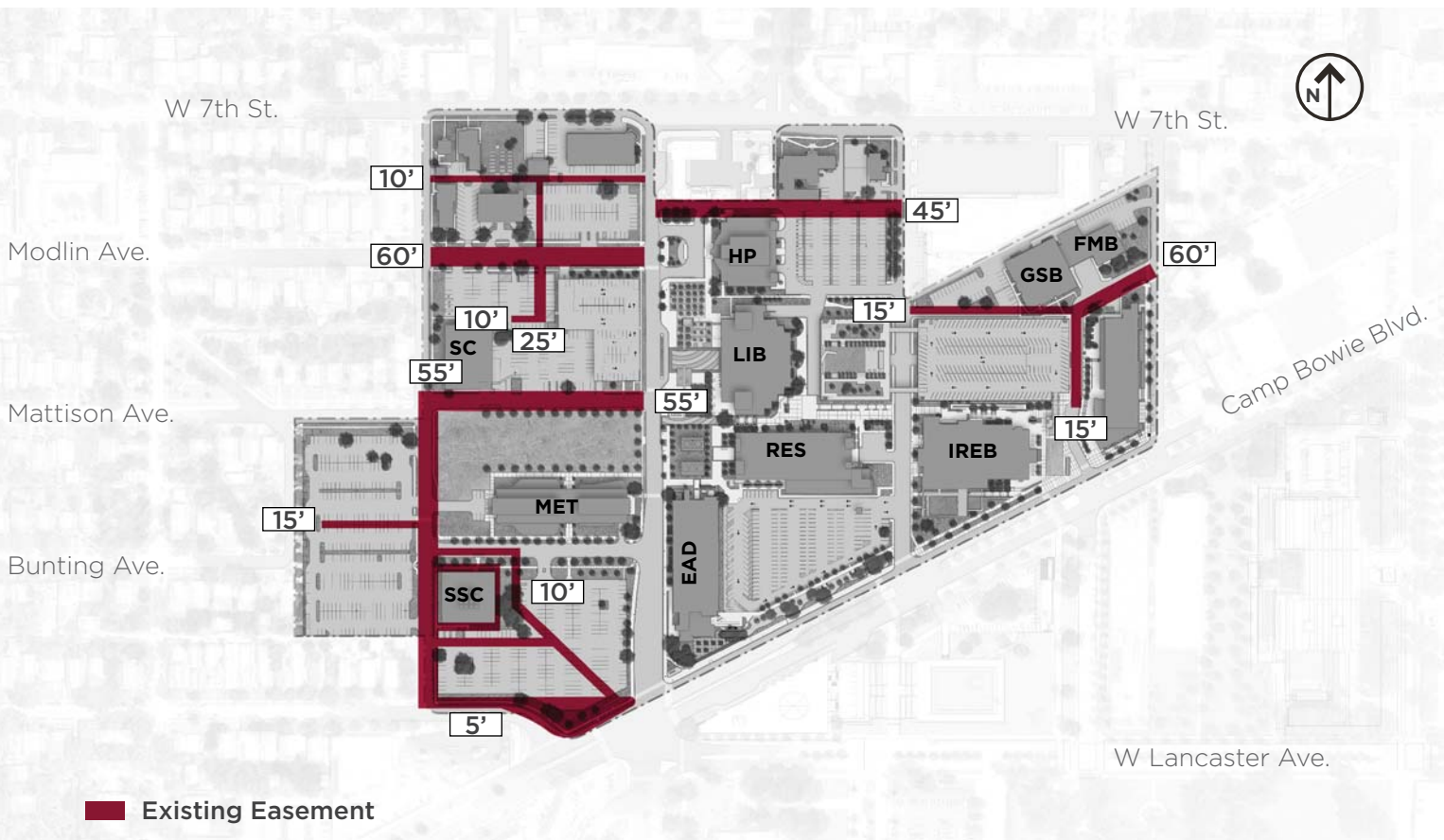
Mechanical Systems

Campus buildings are primarily served by independent hot water heating / chilled water cooling HVAC systems located independently within each building. While the campus has incrementally been working to install new chillers and boilers, many of the original systems installed during building construction still remain. Because of this, the campus has a significant number of mechanical systems that have exceeded their life expectancy and need to be replaced. Others will be reaching this point in the near future. Refer to the Appendix for more information on current system capacity and conditions.

A pair of central cooling towers located on the lawn south of the Library Courtyard serve all the Chillers in EAD and RES. Although the shared and consolidated cooling tower model is very functional, these two towers are aging and are not the highest and best use of land they sit

atop located in the core of campus. Due to the age of the cooling towers and the chillers they support, opportunities exist to consider options for relocating them.

Recently, the campus has set a goal to form an East Campus utility loop that will tie MEP capacities together between multiple buildings. Utility loops create redundant capacity that can support future buildings (if connected) and provide backup capacity when isolated elements fail. Progress has been made towards starting this East Campus loop in recent years. Today, CBH and IREB share one connection, while IREB, RES, and LIB share a separate connection. In the coming years, the campus plans to link these two segments together and expand the connection to additional buildings. Because of the shared excess capacity, there is potential to downsize or even not replace aging boilers and chillers as they reach the end of the lifespans.



Easements

Easements are the legally defined territories or zones reserved for public or private entities to enter, use, and even alter private property. They are created at the time of original plat and stay with a parcel through covenant until a set time duration expires, an agreement is reached with the easement holder to alter the easement, or an agreement is reached to abandon the easement. Easements can range in size and impact. Typically, you are not allowed to build on top of easements. Common easements include the land area above or below public utilities (such as water pipes, storm sewer pipes, sanitary sewer pipes, etc.), the area above or below private utilities (such as telecom lines, power lines, gas lines, etc.), or areas reserved by cities for future roadway expansion.

The last formal easement survey was completed in 2007 in conjunction with the planned demolition of the osteopathic hospital and construction of the MET. The diagram above reflects the assumed

easements that still remain from the 2007 survey, however, a new survey would be required to confirm the shown information. The easements that currently exist on the UNTHSC campus are mostly concentrated west of Montgomery and correspond to below ground utility infrastructure. Across campus, easements range in size from 10' to 60'. While the location of some of these easements do potentially restrict where future development is currently allowed to be built, none of the easements relate to critical infrastructure. Working with the City of Fort Worth to alter infrastructure location and access lanes, it is very possible that a majority of these easements can either be moved or abandoned. This process was undertaken in 2017, when the city agreed to abandon an easement that existed on the site now occupied by IREB.

The planning team recommends that the campus conduct a formal easement survey in the near term to better understand its assets.

Existing Conditions



Wayfinding & Signage

In conjunction with campus edge systems and initial vistas looking to campus, the campus wayfinding and signage system provides the first impression to visitors. These systems are the institution's initial opportunity to provide a positive overall visitor experience. If guests cannot find where to park or how to reach their destination on campus, they may have a negative experience. This is especially true of clinical patients visiting campus, and equally true of every-day users familiar with the campus. Best practice wayfinding principles recommends having a clear hierarchy of sign types that engage campus users at all points ranging from their approach to campus all the way to their specific room destination on campus.

Since the 2007 Master Plan, the campus has done a wholesale update of signage on campus. Overall, the signage installed is well organized, in good condition, and functional.

While a good foundation, stakeholder feedback suggested that more signs at all scales would be beneficial in promoting campus identity and helping guests reach their desired destinations. Stakeholders shared that clinical visitors especially struggle with finding parking and how to get to their ultimate destination from parking. It was also shared that users find some of the building identification signage to be confusing. Some of these signs are located too far from their associated buildings or have an orientation on the site that can confuse visitors. Lastly, another common frustration is the convention used to identify buildings. The campus facilities team has explored options using building name, building acronym, and building addresses. Today, the system uses a combination of these which adds to confusion.

Sign Hierarchy (In order of engagement)

1. Signature Identification Signage:

Large signs attached on or near a buildings parapet. Visible from a long distance guiding visitors to campus.

2. Campus Gateway Identification:

Signs located on the campus edge at major entry points marking threshold into campus. Varying sizes can be used to denote different gateway hierarchies.

3. Vehicular Directional Signage:

Signage visible from a long distance away that directs vehicular traffic to campus as well as within. Sign size and font must be large enough to be quickly read while driving.

4. Garage / Parking Identification:

Signage identifying the number of each parking lot or parking garage. Can be free standing or attached to the side of a garage. Some garages also include digital signs showing a count of available spaces.

5. Pedestrian Directional Signage:

Signage located throughout campus intended to orient and direct individuals. Contains the identifying name or address of one or more buildings, as well as a directional arrow to guide visitors to that location.

6. Pedestrian Map Kiosk Signage:

Kiosk containing maps of campus and basic directional information. Can be freestanding or attached to a wall or building side.

7. Building Identification:

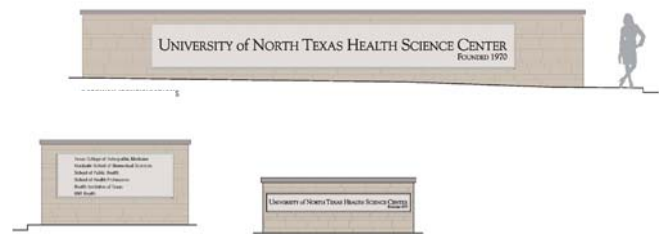
Demarcates an individual building entry and may include information related to accessibility. Can be freestanding or attached to a building.

8. Regulation & Educational Signage:

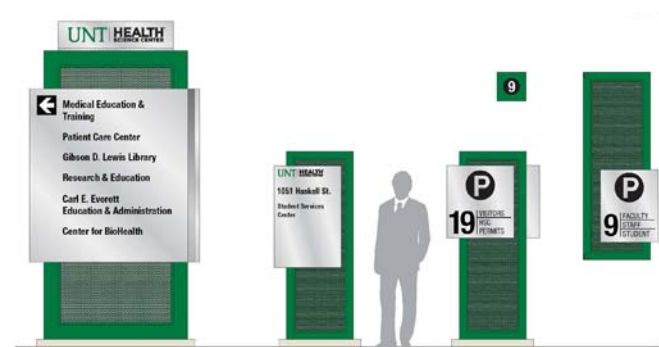
Smaller signs and plaques used to communicate campus rules, state law, or communicate educational information about unique campus features (such as the legacy tree program).

9. Building Interior / Room Signage:

Smaller signage located inside of the buildings. Includes interior maps, floor identification labels, and individual room signage.



Existing Campus Gateway Sign Formats



Existing Campus Vehicular Directional, Building, and Parking Identification Sign Formats

Signage Materials

The existing signage system uses three different material pallets relative to the hierarchy.

Signature Identification Signage located on CBH, EAD, and HP are large aluminum panels (of varying sizes) containing a vinyl campus logo.

Campus Gateway Identification signs use regional stones providing for an “institutional” character. The use of stone for gateway signs is a traditional route used by many universities across the country. These stones evoke a clear sense of place to those passing by.

All additional exterior signs are aluminum with vinyl graphics to allow for cost effective updates and ease of maintenance. The incorporation of a logo header, along with the green, silver, and black colors are unique within the setting and assist in solidifying the UNT brand. Today, interior signs vary in material and design.



FRAMEWORK

ANALYSIS OF FRAMEWORK ELEMENTS

3

CONNECTIVITY NETWORK

INTRODUCTION

The campus-wide framework is a conceptual plan that reflects the existing hierarchical organization of campus buildings and exterior spaces, revealing patterns that help shape future growth.

The framework illustrates how campus functions integrate together, defining how the campus is used and experienced. This framework promotes connectivity, ease of access, and a long-term sense of organization that can adapt to the evolving needs of an institution.

CONNECTIVITY NETWORK

Pathways and means of circulation across campus comprise a network of connectivity and can support a positive campus experience. Often, these pathways are the primary linkages between significant buildings or open spaces on campus.

The existing connectivity across campus is based on a strong east-west pathway, commonly referred to as the 'spine' that is anchored on the western end by the MET Lawn and on the eastern end by the entry plaza to the Center for BioHealth.

The proposed Connectivity Network greatly expands and identifies the key linkages to support strong connections across the entirety of the campus. A new primary north-south 'spine' between Montgomery and Haskell Streets links the Medical Education Building to West 7th Street. A number of parallel north-south and east-west pathways are included that supplement the connectivity of the two primary spines.



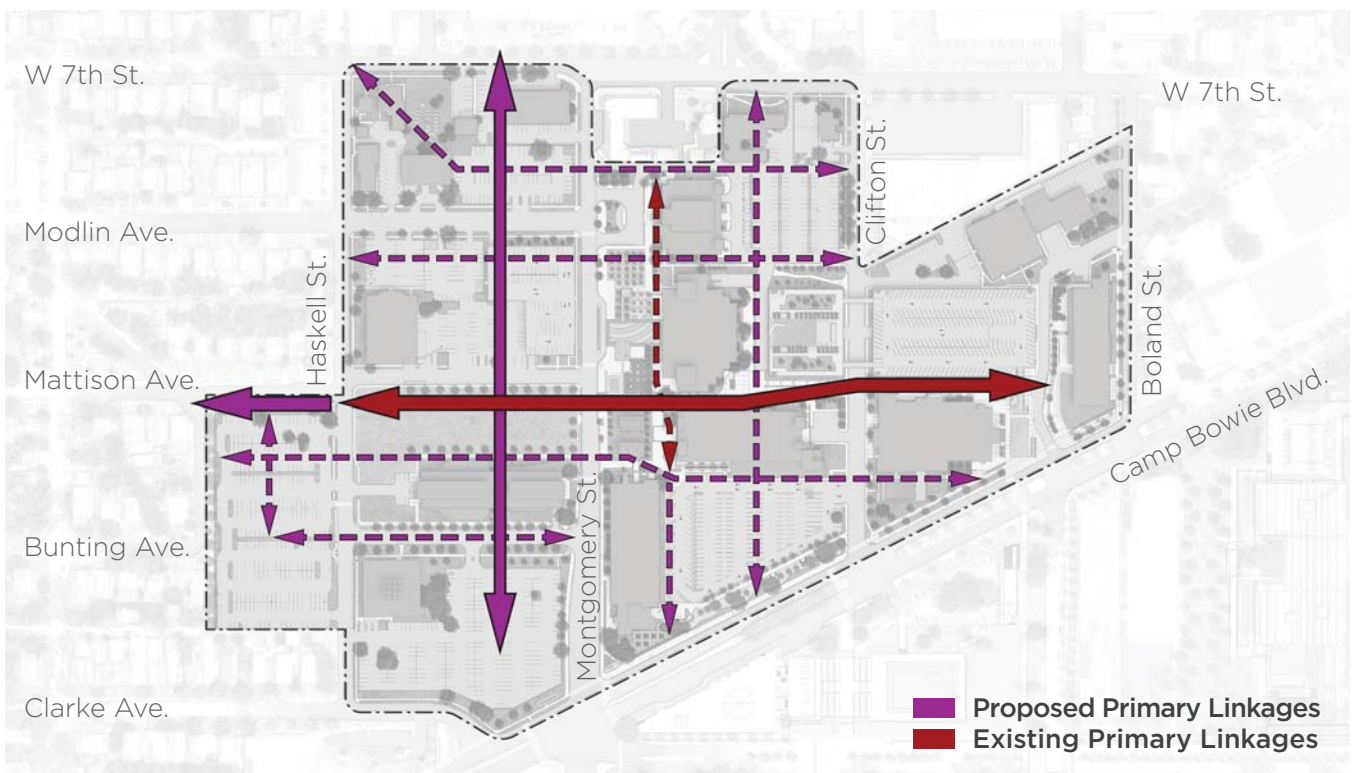
Existing Connectivity Network Example



Proposed Connectivity Network Example



Existing Connectivity Network



Proposed Connectivity Network Expansion

OPEN SPACE NETWORK

The balance between built and non-built areas of campus defines the Open Space Network, resulting in the identity and character of campus that is experienced by students, staff, faculty, and community. As a reflection of the institution, the Open Space Network often sets the tone for an individual's first impression of the campus.

The existing open space network is comprised of spaces that are primarily located along or connected to the spine. The primary open spaces on campus include the MET Lawn, Library Courtyard, and Alumni Plaza.

The proposed Open Space Network is comprised of a variety of scales, uses, and physical elements that define a diverse set of landscape typologies. These spaces can be used in a variety of ways by the students, staff, faculty, and community.



Existing Open Space Network Example



Proposed Open Space Network Examples



Existing Open Space Network



Proposed Open Space Network Expansion

HUB NETWORK

The Hubs describe gathering places where ideas and views can be exchanged and collaborative efforts undertaken. Depending on their specific settings, Hubs can be formal or informal. The Hubs act as nodes supporting learning, discovery, and care while also supporting the social interaction of campus users. Hubs can include both interior and exterior spaces.

The existing Hub Network is primarily centered around the interior space of the Gibson D. Lewis Library and Medical Education Building and the exterior space of the Library Courtyard and MET Lawn.

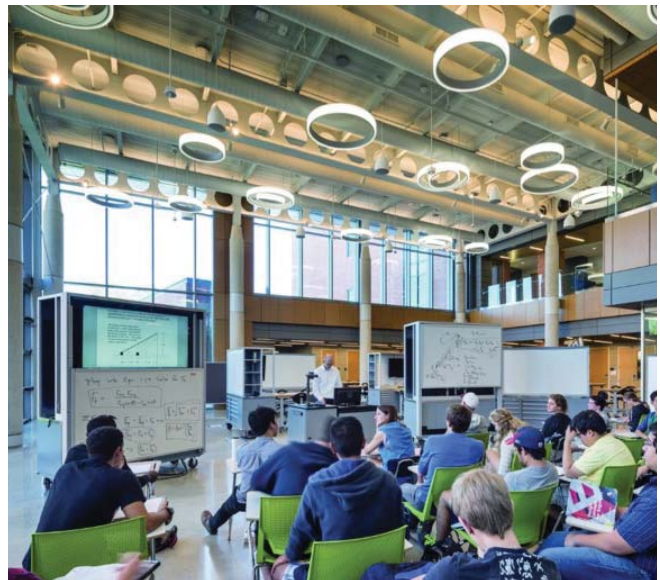
The proposed Hub Network greatly expands their distribution and frequency across campus to enhance the overall campus experience. This expanded network is intended to house a variety of spaces for formal collaboration such meeting rooms, conference space, group study rooms, and visible research, while at the same time, supporting informal social gathering with spaces for food service, wellness, and lounge areas.



Existing Hub Network Example



Proposed Hub Network Examples





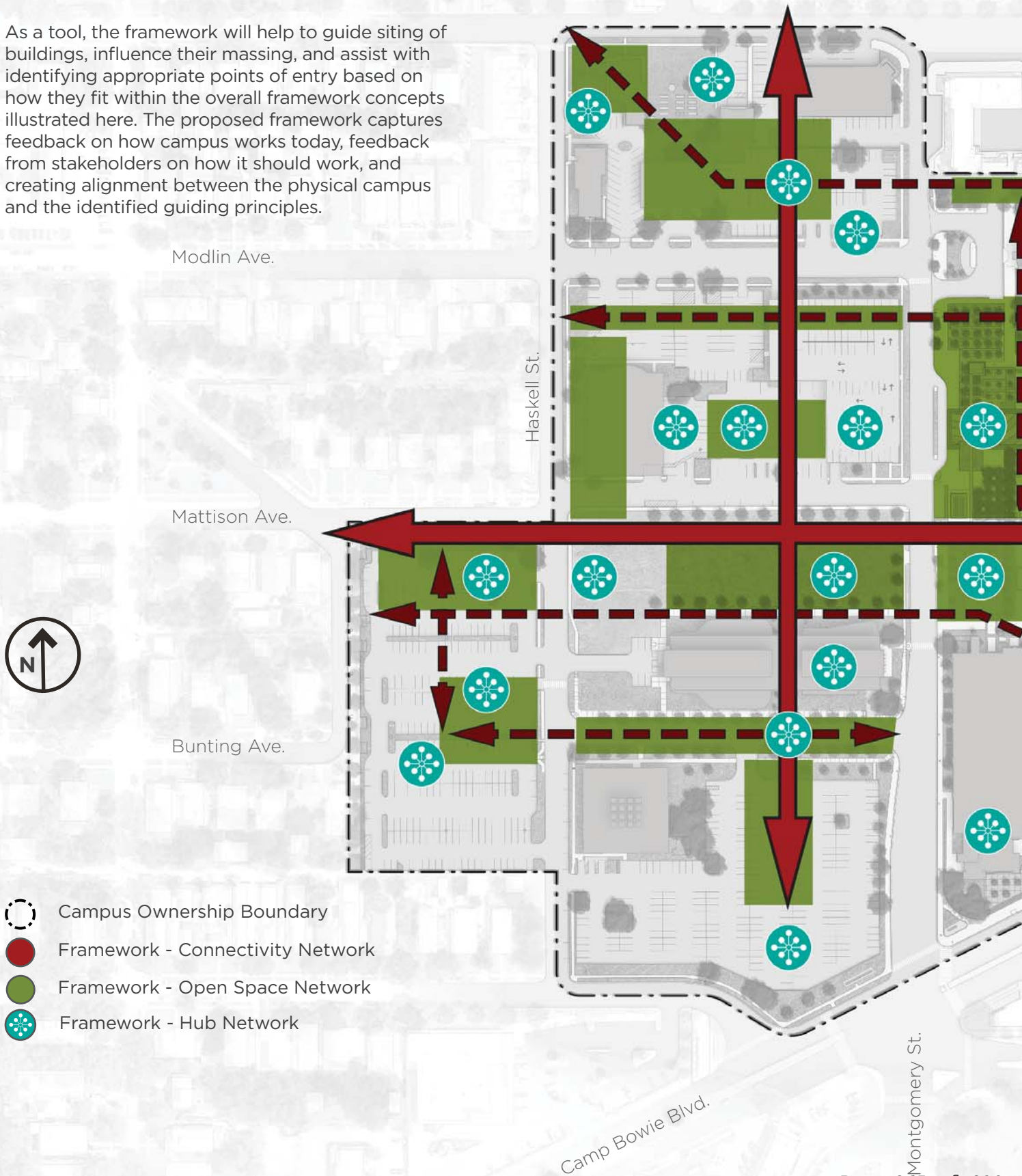
Existing Hub Network



Proposed Hub Network Expansion

FRAMEWORK

As a tool, the framework will help to guide siting of buildings, influence their massing, and assist with identifying appropriate points of entry based on how they fit within the overall framework concepts illustrated here. The proposed framework captures feedback on how campus works today, feedback from stakeholders on how it should work, and creating alignment between the physical campus and the identified guiding principles.



Modlin Ave.

Haskell St.





Mattison Ave.

Bunting Ave.

Camp Bowie Blvd.

Montgomery St.



-  Campus Ownership Boundary
-  Framework - Connectivity Network
-  Framework - Open Space Network
-  Framework - Hub Network

Monticello Dr.

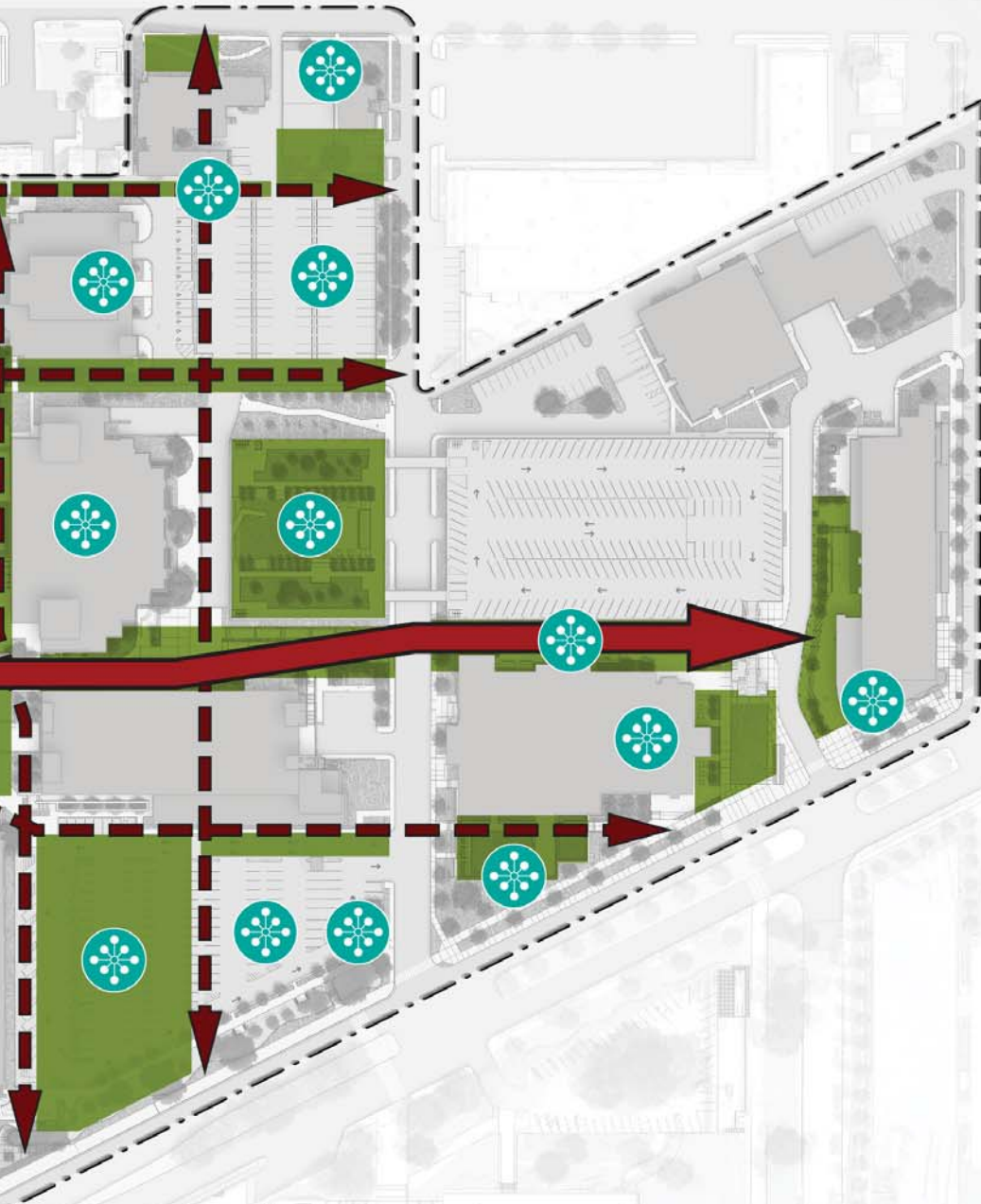
W 7th St.

Darcy St.

Boland St.

Camp Bowie Blvd.

W Lancaster Ave.





CAMPUS MASTER PLAN







OVERVIEW OF DEVELOPMENT PLAN

4

CAMPUS MASTER PLAN

The 2018 Campus Master Plan outlines a development plan for the campus that will reinforce and enhance the Framework while also supporting future user group and program needs. Suggested changes include alterations to the existing street network, expansion of green space, improved pedestrian connectivity, and the opportunity to add over 1,400,000 GSF within the existing campus boundary.



-  Campus Ownership Boundary
-  Proposed Campus Building
-  Proposed Campus Parking Garage
-  Existing Campus Building
-  Existing Campus Parking Garage
-  Context Building





OVERVIEW AND OUTCOMES



Future Montgomery Gateway

Overview

The final 2018 Campus Master Plan is a synthesis of concepts and scenarios that, by means of thorough discussion and revision, balance both the near- and long-term objectives of the University of North Texas Health Science Center. Through continual evaluation of scenarios using SEE 2020, Planning Principles, and Planning Priorities, the resultant campus master plan aligns the needs of the people, place, and purpose of the institution. While representing a snapshot in time, the campus master plan is an adaptable guide able to evolve with the changing needs of UNTHSC.

The campus is a complex entity that results from a unique combination of history, mission, climate, and culture. The master plan reflects an interrelationship between programmatic and physical planning considerations. To envision the future, the master plan considers buildings, infrastructure, open spaces, mobility, and elements distinct to the campus. Crafting the various elements into a holistic outcome establishes a path forward for UNTHSC for the coming decade and beyond. The resulting 2018 Campus Master Plan creates beautiful, functional spaces and experiences for students, staff, faculty, and the greater community.

Path to the Plan

The following section briefly recaps the efforts of the initial planning phase leading up to and informing the 2018 Campus Master Plan and outlines the contents of the plan.

The early focus of the planning team dealt with interpreting the aspirations of UNTHSC. Through extensive engagement with campus constituents via open discussion and group exercise, preliminary considerations began to emerge driven primarily by the strategic visioning document SEE 2020. These efforts led to collectively developing a set of Planning Principles that served to guide development of the master plan and Planning Priorities that served to gauge the success of potential outcomes. Each of these are summarized to the right for reference and further information. An expanded overview for each topic can be found in the Introduction Chapter.

Parallel to these visioning efforts, the planning team undertook a series of observations of the existing campus context and systems. Analysis of these observations provide the necessary technical understanding of the campus’s current conditions and capacities. For further details, refer to the Observation Chapter.

This chapter consists of several narrative and illustrative elements, each intending to aid in gaining a full understanding of the recommendations presented. The five fundamental themes summarize the alignment of the master plan to SEE 2020, the Planning Principles and the Planning Priorities. The final plan graphics show existing buildings, potential future buildings, and enhancements to open space. Area enlargements highlight key components and features for select locations across campus. System integration diagrams and data explain and reinforce major elements in the plan. Finally, renderings provide an interpretative look at the future campus.

SEE 2020: FOCUS AREAS

People & Values	Learning & Discovery
Quality Experiences for Lifetime Success	Sustainable Growth, Finance & Resources

PLANNING PRINCIPLES

PRINCIPLE #1: Craft a Campus Framework that reinforces and expands existing connectivity, programmatic and organizational patterns to guide long-term capacity.

PRINCIPLE #2: Align existing and future facilities for academic, research, and clinical programs that support collaborative learning and discovery with high utilization of campus assets.

PRINCIPLE #3: Reinforce and expand the network of Campus Hubs to support a quality campus experience for students, staff, faculty, and community.

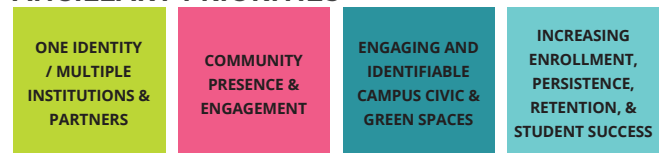
PRINCIPLE #4: Embrace the One University vision to guide the development of the physical campus environment.

PLANNING PRIORITIES

TOP PRIORITIES



ANCILLARY PRIORITIES



Campus Master Plan Outcomes

In aligning the campus master plan with the purpose, vision, mission, and values of the institution, five themes emerge that embody and support UNTHSC's aspirations.

Demonstrate Capacity

The master plan demonstrates the physical capacities of the campus at varying levels of detail and across multiple attributes. The plan shows the potential, at full build-out, for over 2.3 million GSF of space. This is an increase of 1.2 million GSF from the existing 1,103,000 GSF. Supporting this space capacity is the infrastructure and systems necessary for efficient and resilient operations of the campus.

The plan illustrates capacity that UNTHSC can better utilize through realignment of uses, expand selectively for near-term growth, and accommodate long-term needs with the existing campus boundaries.

Elevate Experience

The master plan significantly elevates the experience for those interacting with the campus's physical environment, whether first time visitors or daily users. Distinct points of arrival articulate the initial point of interaction with the campus with clear, delineating wayfinding guiding users into and around campus. Expansion of the Open Space Network provides the backdrop for the activities of a dynamic and energetic campus.

Through enhancing the quality, variety, and functionality of the physical environment, the campus is a supportive and attractive place for pursuing the purpose and embodying the values of UNTHSC.

Broaden Connections

The master plan broadens the connections across campus through a network of overlapping physical linkages and collaborative places. Extension of the existing east-west Campus Spine and development of a new north-south West Campus Spine represent two primary elements of the Connectivity Network that links the physical places of the campus across its entire extents.

Broadening the physical and program connections across campus brings together the people integral to practicing an inter-professional model of learning, discovery, and care.

Stimulate Collaboration

The master plan stimulates collaboration through the distribution of places across campus, accommodating a range of activities and users. The Hub Network, encompassing both interior and exterior spaces, establishes locations for collaborative teamwork. These hubs bring together students, staff, faculty, industry, and the greater community in informal and formal settings to break down traditional siloes.

Stimulating collaboration through distinct places, allowing the open exchange of ideas and views, reinforces the vision and mission UNTHSC.

Convey Identity

The master plan conveys a robust identity to a wide audience, through thoughtful crafting of a holistic plan that expresses the character, quality, and uniqueness of the institution. Clear articulation of the permeable campus edges, appropriate to the adjacent setting, establishes the campus as a distinct and integral component of its context that is inviting and welcoming to the greater community.

Conveying the identity through its physical environment embodies and expresses the purpose, vision, mission, and values of UNTHSC to internal and external audiences.

Mapping Outcome Alignment

The above outcomes illustrate broad alignment of the 2018 Campus Master Plan to the driving influences of the SEE 2020, Planning Principles, and Planning Priorities. Further details and examples will be found by fully exploring the master plan in the following section. The chart on the adjacent page summarizes the overlapping and supporting nature of the outcomes in relation to the high-level driving influences.

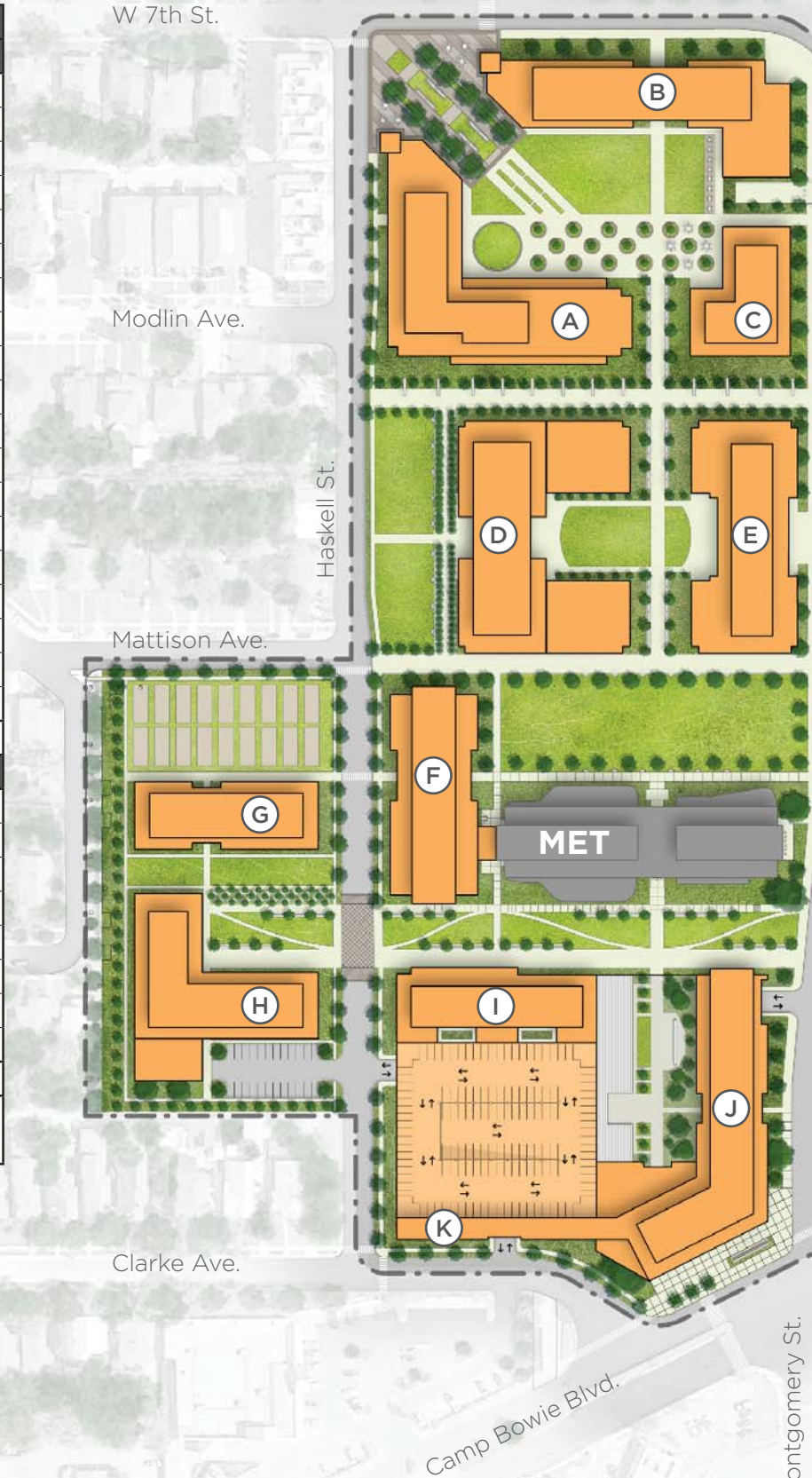
Mapping the 2018 Campus Master Plan Outcomes

	DEMONSTRATE CAPACITY	ELEVATE EXPERIENCE	BROADEN CONNECTIONS	STIMULATE COLLABORATION	CONVEY IDENTITY
SEE 2020					
People & Values		●	●	●	●
Learning & Discovery	●	●	●	●	
Quality Experiences for Lifetime Success		●	●	●	●
Sustainable Growth, Finance & Resources	●				●
PLANNING PRINCIPLES					
Principle #1: Craft a Campus Framework that reinforces and expands existing connectivity, programmatic, and organizational patterns to guide long-term capacity.	●	●	●	●	●
Principle #2: Align existing and future facilities for academic, research, and clinical programs that support collaborative learning and discovery with high utilization of campus assets.	●		●	●	
Principle #3: Reinforce and expand the network of Campus Hubs to support a quality campus experience for students, staff, faculty, and community.		●	●	●	
Principle #4: Embrace the One University vision to guide the development of the physical campus environment.			●	●	●
PLANNING PRIORITIES					
Optimize Alignment of Existing Programs & Facilities	●		●	●	
Facilities Supporting Dynamic Instruction & Active Learning	●	●	●	●	
Attracting & Retaining Top Quality Students, Faculty & Staff		●	●	●	●
Student Support Resources & Spaces	●	●	●	●	
Long-Term Capacity of Academic, Research & Clinical	●				
One Identity / Multiple Institutions & Partners		●	●	●	●
Community Presence & Engagement		●	●	●	●
Engaging & Identifiable Campus Civic & Green Spaces		●	●		●
Increasing Enrollment, Persistence, Retention & Student Success	●	●		●	●

DEVELOPMENT FEATURES

Buildings		
Proposed Buildings	Floors	Apx. GSF
A	3	74,250
B	4	90,000
C	2	25,000
D	4	138,000
E	4	96,000
F	5	95,000
G	3	40,500
H	3	68,250
I	5	72,000
J	7	180,000
K	3	18,500
L	5	66,250
M	6	191,000
N	6	72,500
O	2	7,600
P	5	64,500
Q	4	23,850
R	4	24,800
S	3	45,000
TOTAL PROPOSED		1,400,000
Existing Buildings	Floors	GSF
MET	5	115,934
EAD	8	194,099
RES	5	138,701
LIB	4	114,064
IREB	6	172,922
CBH	6	160,320
GSB	1	15,506
FMB	1	7,409
TOTAL EXISTING *		918,955
COMBINED TOTAL (approximate GSF)		2,320,000

*Total existing excludes structures replaced as a part of the full plan build out





Monticello Dr.









W 7th St.

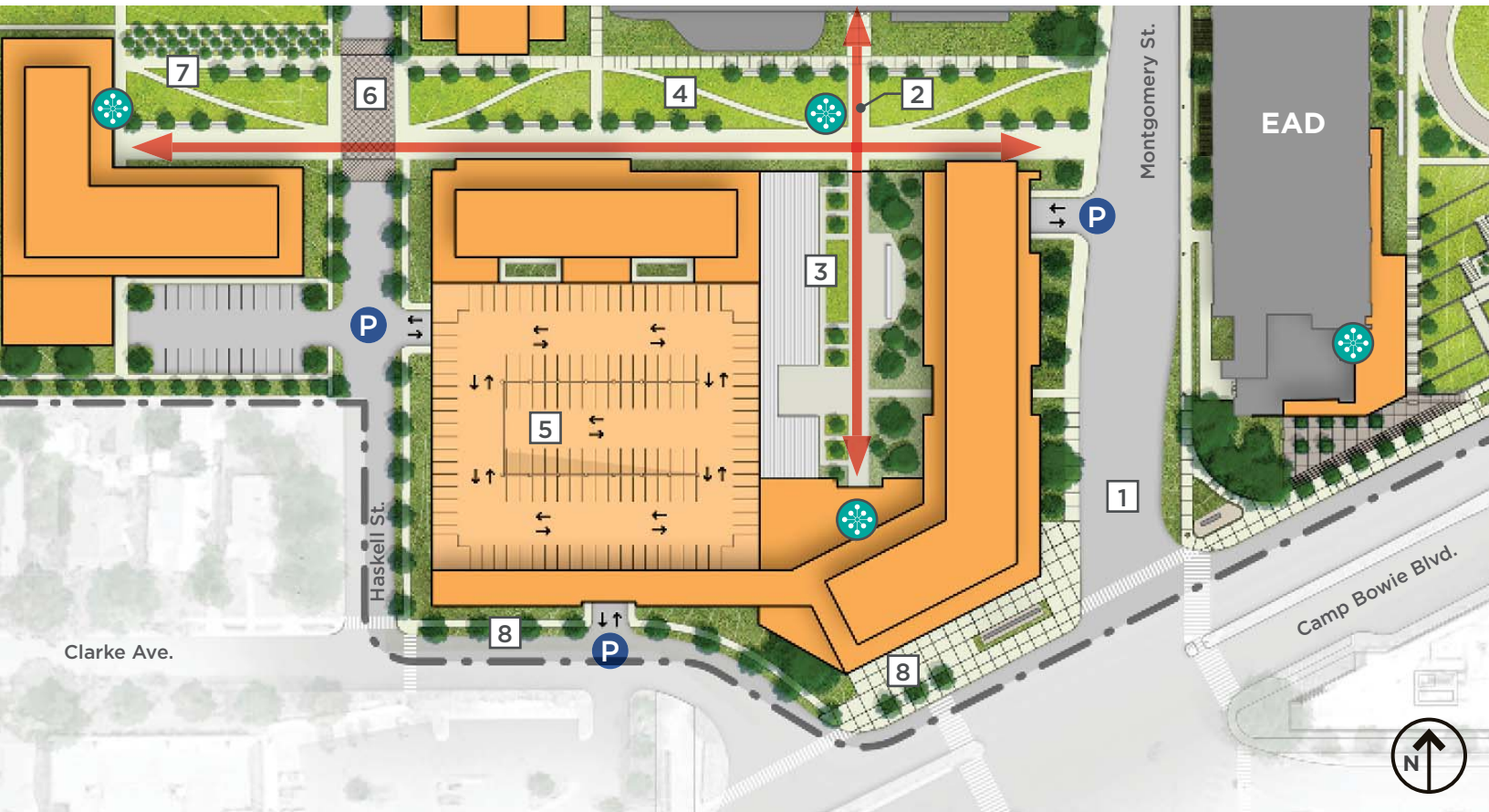
Darcy St.

Boland St.

Camp Bowie Blvd.

W Lancaster Ave.

-  Campus Ownership Boundary
-  Proposed Campus Building
-  Proposed Campus Parking Garage
-  Existing Campus Building
-  Existing Campus Parking Garage
-  Context Building



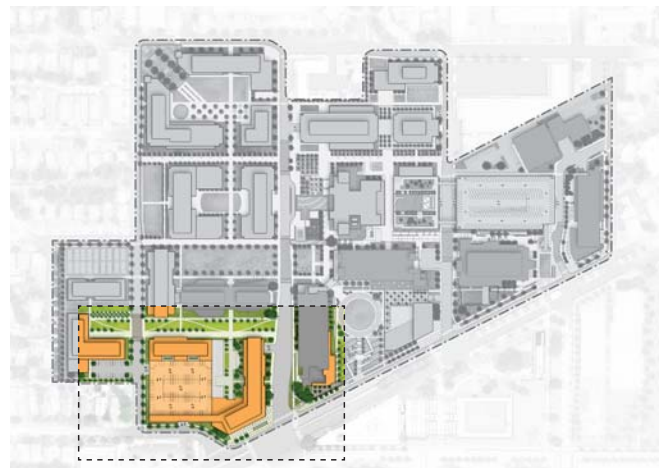
Montgomery Gateway

The Montgomery Gateway, on the north side of Montgomery Street at Camp Bowie Boulevard, defines the formal gateway into campus. Serving as the front door to campus, it asserts a strong urban presence by aligning to Camp Bowie Boulevard and Clarke Avenue. In addition to the existing Carl E. Everett Education & Administration (EAD) building, the new Montgomery Gateway Building will help to frame this campus entry and complete the western portion of the urban edge condition along the campus's Camp Bowie Boulevard boundary, reinforcing UNTHSC presence and identity.

The West Campus Mall, the new primary north-south campus linkage, has its southern terminus at the Montgomery Gateway in the Innovation Plaza. The plaza is a landscaped urban space, capping the parking garage like the existing Alumni Plaza, and serving as an exterior hub of gathering and activity.

Legend & Key Map

- Proposed Building
- Existing Building
- Proposed Parking Garage
- Parking Entry
- Hub Location
- Connectivity Link



Key Components & Features

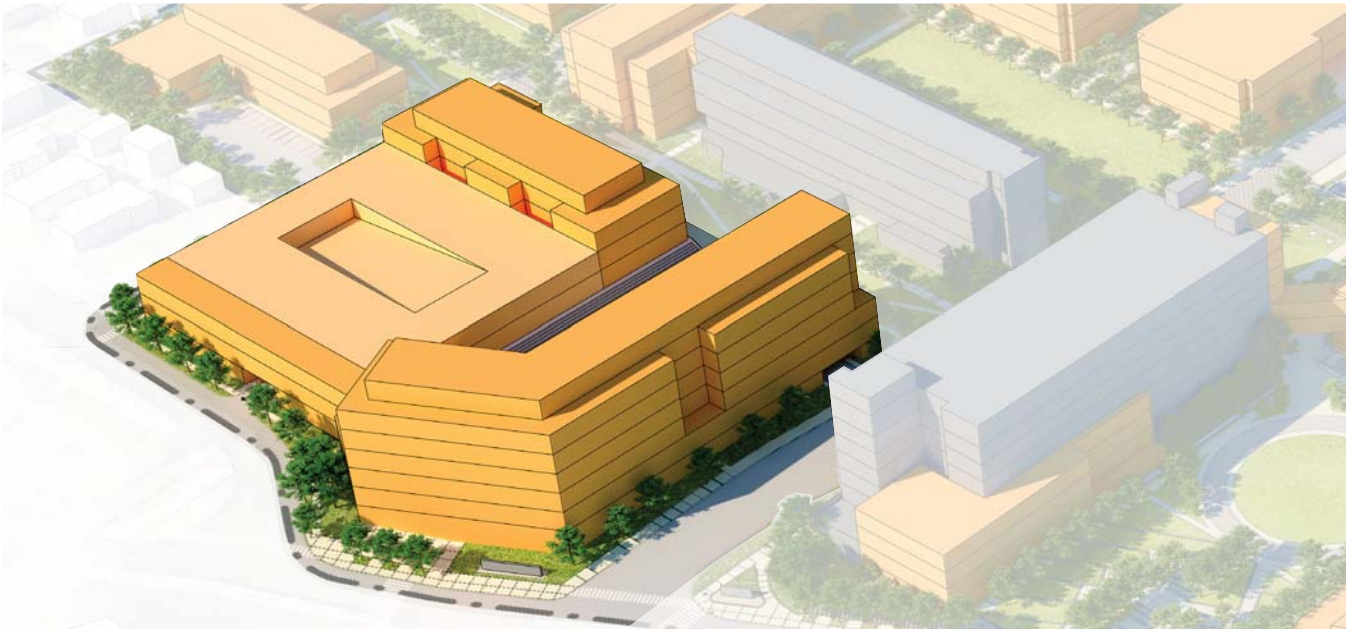
- 1 Frame Montgomery Gateway with new building west of Montgomery Avenue and existing EAD and to establish formal arrival, institutional identity, and urban edge.
- 2 West Campus Mall
- 3 Innovation Plaza will serve as a multi-functional exterior space and as a landscaped cap to the parking garage.
- 4 Academic Mall
- 5 New, multi-level parking garage with multiple entries replaces existing surface lot. Approximately 1,080 parking spaces.
- 6 Improve crossing at street and pedestrian pathway for safety.
- 7 Hi Mount Quad
- 8 Buildings align to Camp Bowie Boulevard and Clarke Avenue, creating urban edge condition.



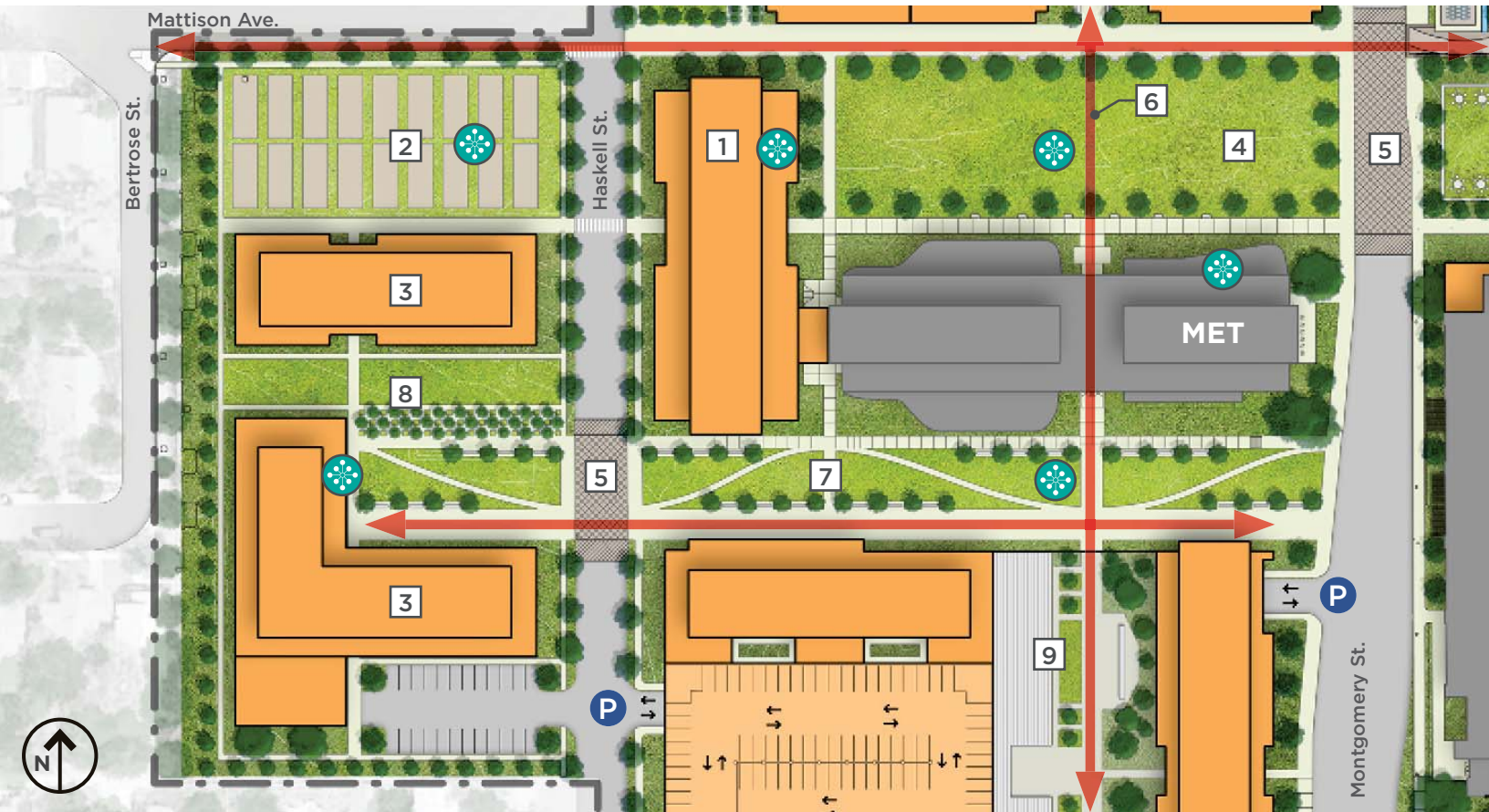
Component Precedent - Rooftop Plaza (#3 - Innovation Plaza)



Component Precedent - Rooftop Plaza (#3 - Innovation Plaza)



Feature Highlight - Aerial View of Montgomery Gateway



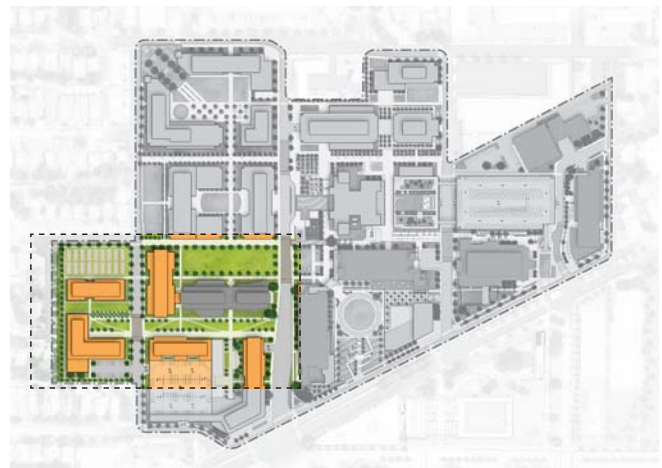
Haskell Corridor

Along Haskell Street, new facilities will line both the eastern and western sides of the street. On the eastern side, the new building will frame the MET Lawn and provide views back towards the campus. The western buildings will be of lower scale - height and size - due to their proximity to the adjacent residential neighborhoods.

Linking these western buildings to the rest of campus will be the Academic Mall, a pedestrian mall will replace Bunting Avenue and connect Innovation Plaza to Hi Mount Quad. Where the mall intersects Haskell Street, enhancements to the crossing will provide for greater pedestrian safety. At the southeast corner of Bertrose Street and Mattison Avenue, the relocated Community Garden will provide a strong link and buffer to both the neighborhoods and the campus, creating a zone for joint interaction.

Legend & Key Map

- Proposed Building
- Existing Building
- Proposed Parking Garage
- P Parking Entry
- ❄️ Hub Location
- Connectivity Link



Key Components & Features

- 1 New building will frame the MET Lawn by demarcating its western edge.
- 2 Community Garden will provide a meeting point and buffer for the community and campus.
- 3 Lower-scale (size and height) facilities in proximity to adjacent neighborhoods.
- 4 Existing MET Lawn to remain as key exterior space for campus, continuing support for a multitude of functions and programs.
- 5 Improve crossing at street and pedestrian pathway for safety.
- 6 West Campus Mall
- 7 Academic Mall
- 8 Hi-Mount Quad
- 9 Innovation Plaza



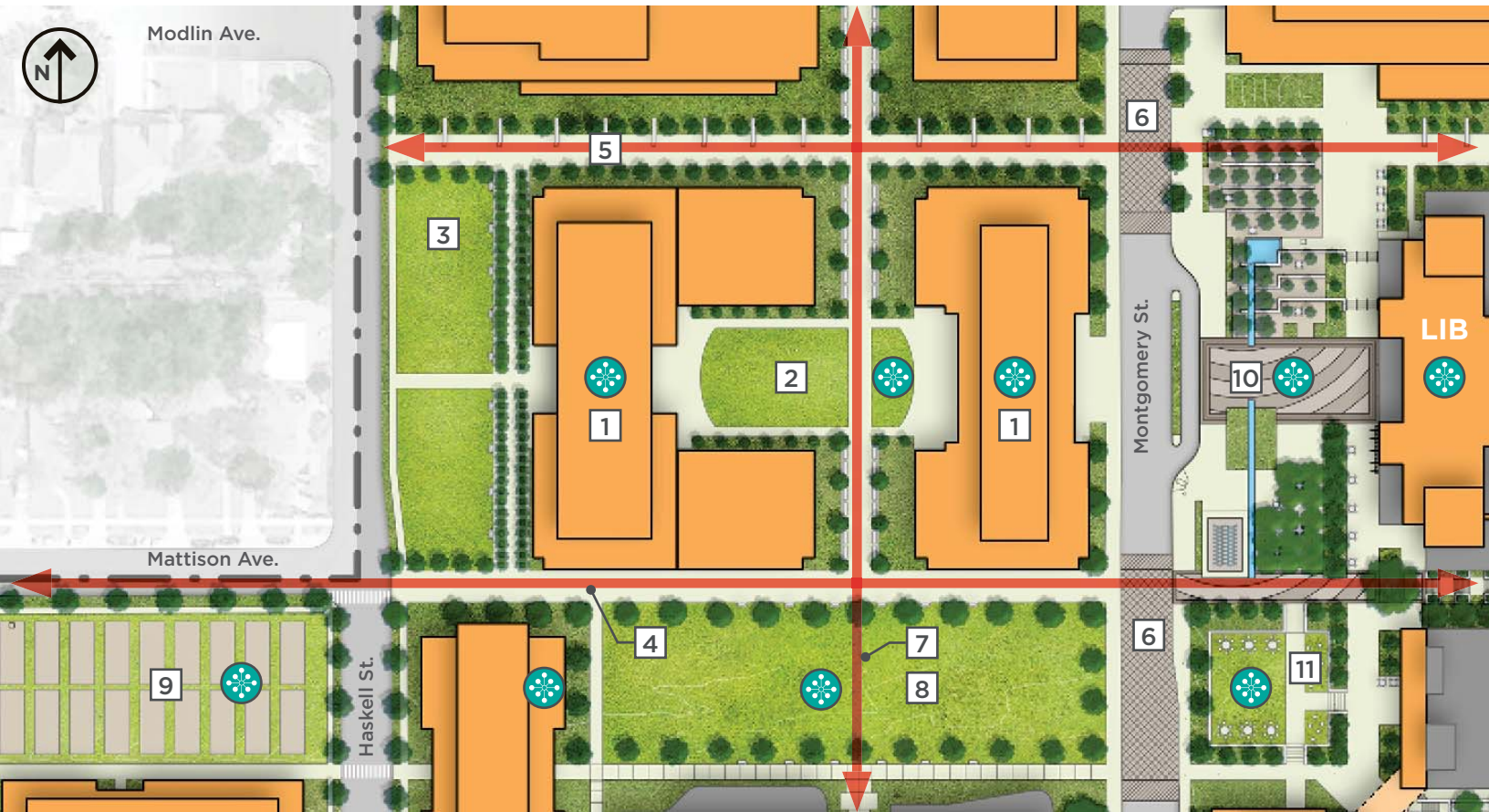
Component Precedent - Gardens (#2 - Community Garden)



Component Precedent - Pedestrian Mall (#7 - Academic Mall)



Feature Highlight - Aerial View of Haskell Corridor



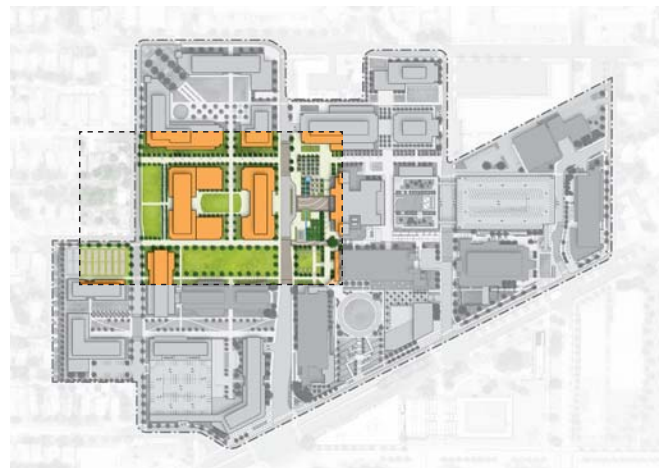
Modlin Courtyard

Aligning on axis with the Gibson D. Lewis Library, new facilities west of Montgomery Street will extend the ‘heart of campus’ that the library area represents. These facilities, along with the new Modlin Courtyard, will replace the existing parking structure. Along Haskell Street, the Community Lawn will create a green space buffer between the campus and the adjacent neighborhood.

Conversion of Mattison Avenue to a pedestrian pathway will extend the Campus Spine the entire east-west length of the campus. Similarly, converting Modlin Avenue to pedestrian use, the North Campus Mall, will increase connections across campus in the east-west direction. The West Campus Spine, running north-south, intersects each of the above pathways along with the MET Lawn and Modlin Courtyard.

Legend & Key Map

- Proposed Building
- Existing Building
- Proposed Parking Garage
- P Parking Entry
- Hub Location
- Connectivity Link



Key Components & Features

- 1 New buildings to align on axis with the Gibson D. Lewis Library extending the 'heart of campus.'
- 2 The Modlin Courtyard will provide a smaller-scale open space between MET Lawn and North Campus Green along the West Campus Spine.
- 3 Community Lawn along Haskell Street provides green space buffer between campus and adjacent neighborhood.
- 4 Campus Spine extends and replaces Mattison Avenue.
- 5 North Campus Mall will replace Modlin Avenue
- 6 Improve crossing at street and pedestrian pathway for safety.
- 7 West Campus Spine
- 8 MET Lawn
- 9 Community Garden
- 10 Library Courtyard
- 11 Reflection Courtyard



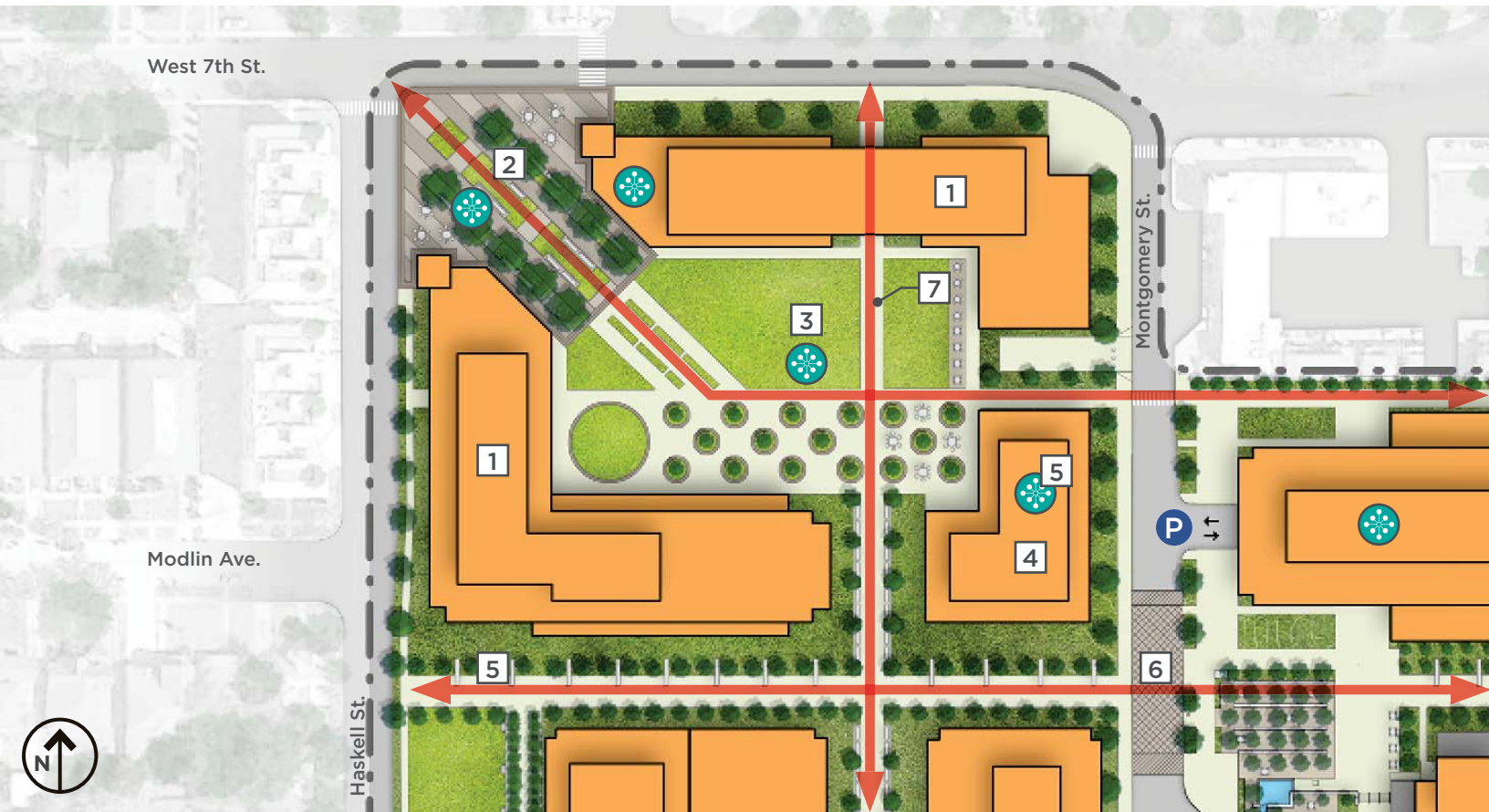
Component Precedent - Axis Alignment (#1 - 'Heart of Campus' Extension)



Component Precedent - Green Edge Buffer (#7 - Community Lawn)



Feature Highlight - Aerial View of Modlin Courtyard



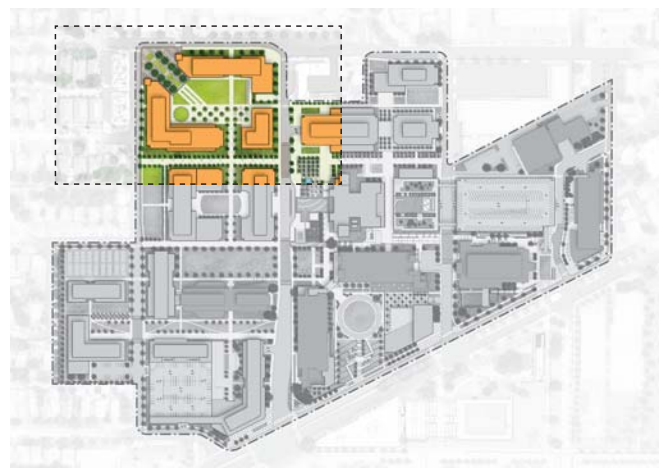
Northwest Gateway

The Northwest Gateway area represents a significant portion of the overall future campus built space capacity. Buildings will align to Haskell Street and West 7th Street to define the campus edge condition and reinforce UNTHSC presence and identity. At the intersection of Haskell and West 7th Streets, the corner will open to provide access and views into the campus extending to Gibson D. Lewis Library. This corner, the Northwest Gateway Plaza, will create a transition zone between the neighborhood and campus.

The plaza will continue into campus to meet a generous open space of similar size to MET Lawn. This space, the North Campus Green, will serve as a location for hosting large-scale community and campus events while also containing small-scale areas for daily use.

Legend & Key Map

- Proposed Building
- Parking Entry
- P
 Existing Building
- P
 Proposed Parking Garage
- P
 Hub Location
- Connectivity Link



Key Components & Features

- 1 New buildings align to West 7th Street and Haskell Street to define campus edge condition.
- 2 Northwest Gateway Plaza will establish a formal transition zone between the campus and neighborhood while welcoming the community into campus.
- 3 North Campus Green will host large-scale community events and contains small-scale spaces for daily use.
- 4 Lower-height building maintains view corridors from perimeter into core of campus.
- 5 North Campus Mall will replace Modlin Avenue
- 6 Improve crossing at street and pedestrian pathway for safety.
- 7 West Campus Mall



Component Precedent - Transition Zone (#2 - Northwest Gateway Plaza)



Component Precedent - Exterior Event Space (#3 - North Campus Green)



Feature Highlight - Aerial View of Northwest Gateway



West 7th Corridor

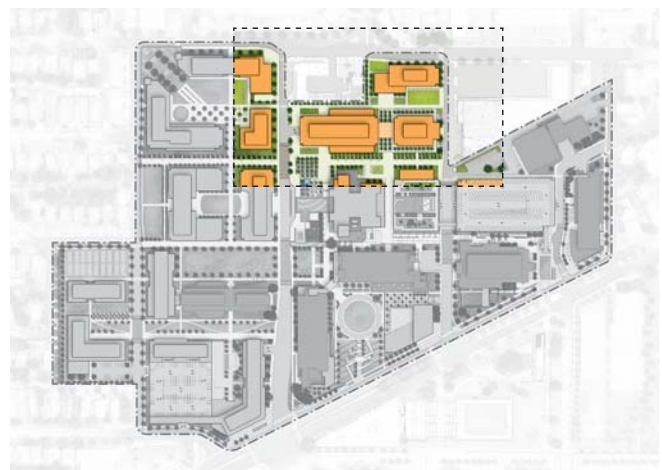
The Health Pavilion offers alternatives for either renovation and expansion or replacement. The existing facility (shown with dashed outline in plan above) can be renovated with an addition to the western side. Alternately, the entire facility may undergo replacement dependent on UNTHSC’s needs over the long-term.

Linking via a bridge connection, a new facility to the east of the Health Pavilion will sit atop a parking garage taking advantage of the site’s topography to improve access for pedestrians and vehicles with entries at multiple levels.

Along West 7th Street, building will align with the street to define the campus edge condition and reinforce UNTHSC presence and identity with further strengthening from the Monticello Lawn that terminates the Monticello Drive view corridor.

Legend & Key Map

- Proposed Building
- Existing Building
- Proposed Parking Garage
- P Parking Entry
- Hub Location
- ↔ Connectivity Link



Key Components & Features

- 1 Renovation and expansion or replacement of existing Health Pavilion.
- 2 Existing Health Pavilion outline shown dashed.
- 3 Parking garage, with building above, will reduce the topography impact allowing pedestrian and vehicular access at multiple levels. Approximately 864 parking spaces.
- 4 Breezeway accommodates pedestrian connectivity along Library Mall.
- 5 New building aligns to West 7th Street to define campus edge condition.
- 6 Improve crossing at street and pedestrian pathway for safety.
- 7 North Campus Mall
- 8 Library Mall
- 9 Monticello Lawn
- 10 Legacy Green



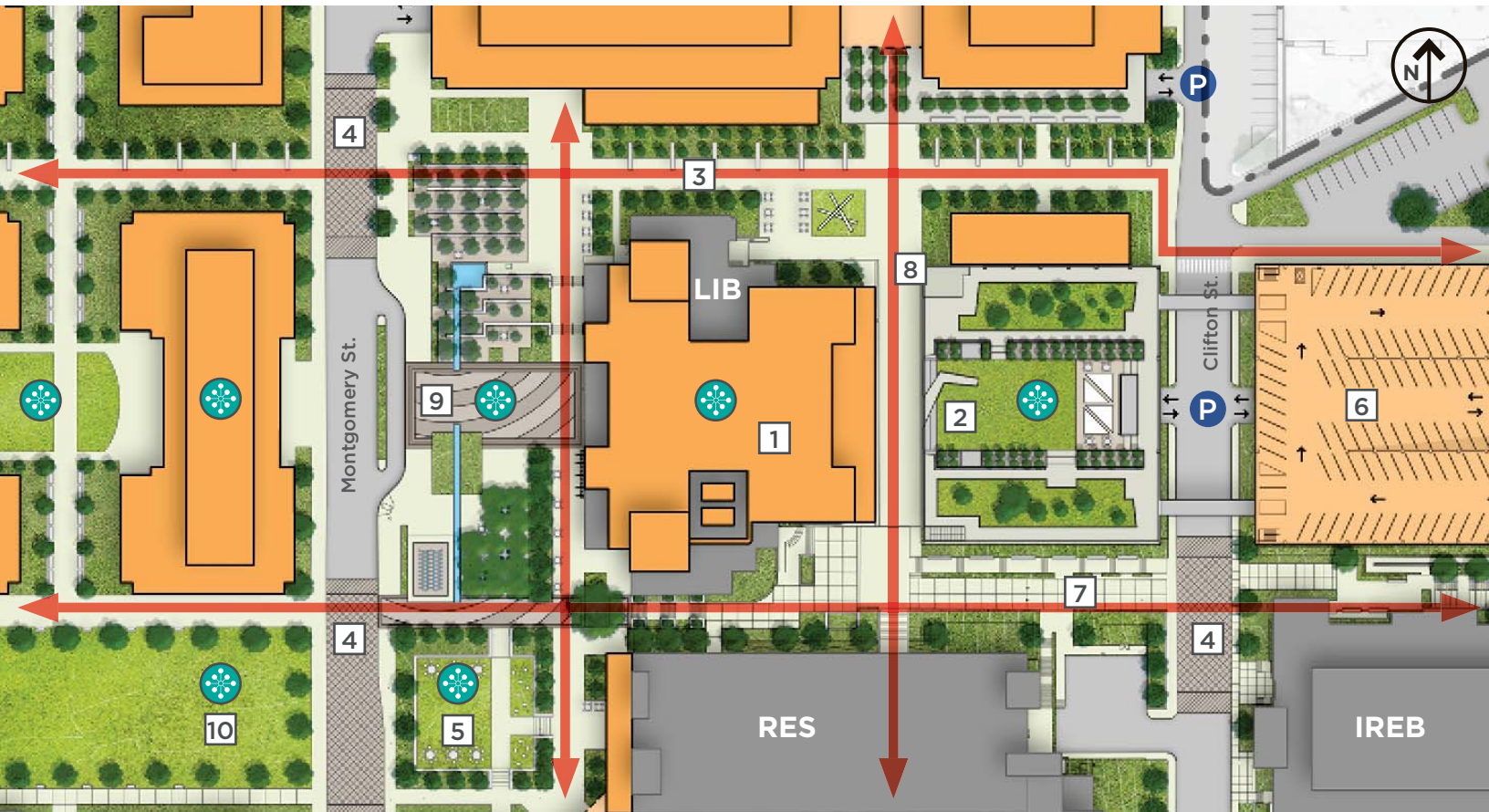
Component Precedent - Connectivity (#4 - Breezeway)



Component Precedent - Pedestrian Mall (#7 - North Campus Mall)



Feature Highlight - Aerial View of West 7th Corridor



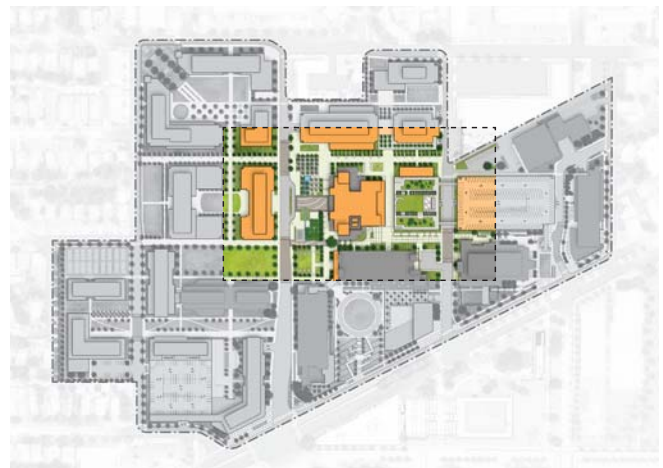
Heart of Campus

The Gibson D. Lewis Library is both the physical center and expressive heart of the campus. Expanding the library upward with an additional level, which the original building design is supports, will expand available space and provides magnificent views of campus and the Fort Worth area. Further expansion on the eastern side of the building, towards Alumni Plaza, will provide for physical and visual connectivity of the library to the campus. This connectivity will increase and enhance the use of both the library and plaza.

The library expansion will accommodate new chilling towers, allowing for the removal of the existing towers west of the Research and Education (RES) building which sit imposingly in the Alumni Plaza. Replacing these towers will be the Reflection Courtyard that serves to extend and link the MET Lawn and Library Courtyard.

Legend & Key Map

- Proposed Building
- Existing Building
- Proposed Parking Garage
- P Parking Entry
- Hub Location
- Connectivity Link



Key Components & Features

- 1 Expansion of the Gibson D. Lewis Library, including location for new chilling towers.
- 2 Activate and enhance Alumni Plaza with direct access to library eastern expansion.
- 3 North Campus Mall improves campus connectivity and provides locations for campus artwork and Legacy Tree Program expansion.
- 4 Improve crossing at street and pedestrian pathway for safety.
- 5 Reflection Courtyard connects and links MET Lawn and Library Courtyard.
- 6 Increase parking capacity adding one level to Clifton Garage. Approximately 240 additional parking spaces.
- 7 Campus Spine
- 8 Library Mall
- 9 Library Courtyard
- 10 MET Lawn



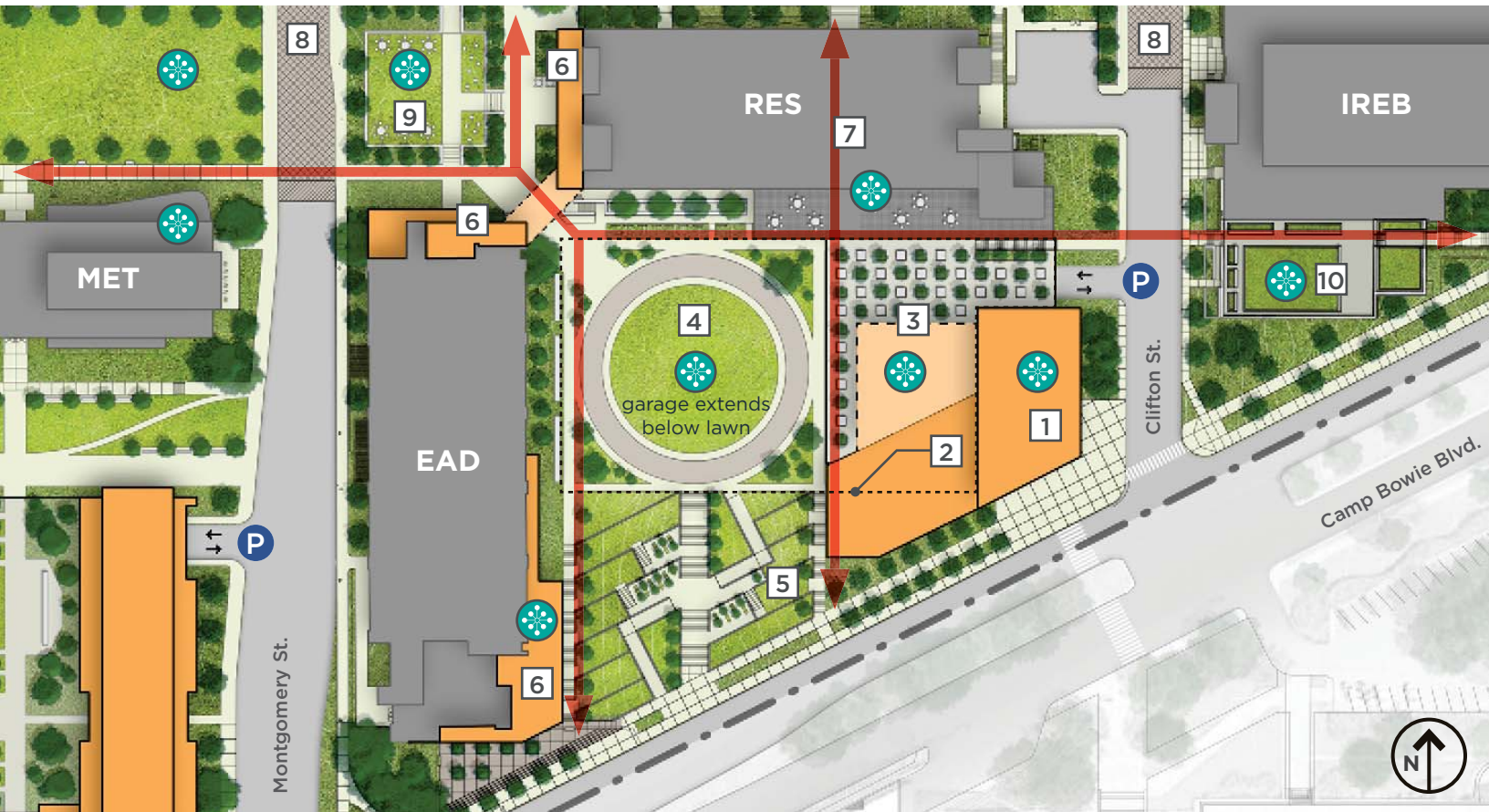
Component Precedent - Expansion (#1 - Gibson D. Lewis Library)



Component Precedent - Exterior Space (#7 - Reflection Courtyard)



Feature Highlight - Aerial View of Heart of Campus







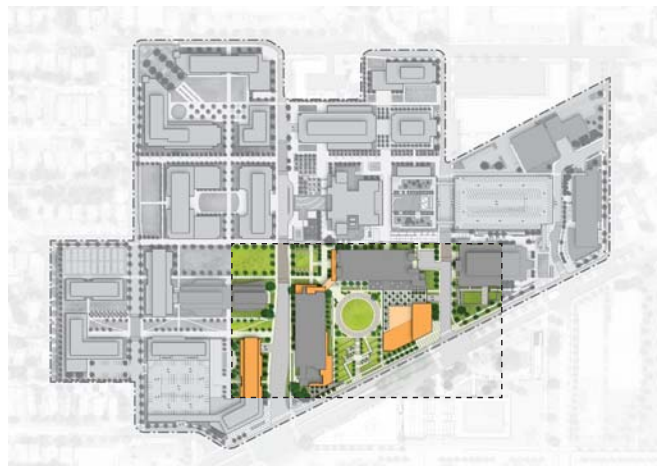
Campus Gateway Center

At the center of campus along Camp Bowie Boulevard, the Campus Gateway Center will be the outward facing representation of UNTHSC to the world and the welcoming point for those engaging with campus. The Collaboration Center will support first-time campus visitors, hold exhibitions of UNTHSC’s work, and host events that bring students, staff, and faculty together with those outside of UNTHSC.

Partially sitting on top of a parking garage, the Front Lawn is the campus’s grand formal exterior space. Tiering down to Camp Bowie Boulevard, it provides physical and visual access to and from the campus while reinforcing UNTHSC presence and identity. The shaded, outdoor Event Plaza will link the Front Lawn with the Collaboration Center. A parking garage will sit underneath the Front Lawn and Event Plaza as shown later in this chapter in the parking strategy section.

Legend & Key Map

-  Proposed Building
-  Parking Entry
-  Existing Building
-  Hub Location
-  Proposed Parking Garage
-  Connectivity Link



Key Components & Features

- 1 The Campus Gateway Center will provide a welcoming point for engagement with UNTHSC.
- 2 New Garage access on Clifton Street adds approximately +200 spaces. Garage roof is partially exposed (Event Plaza) and partially buried (Front Lawn)
- 3 Front Lawn
- 4 Event Plaza sits atop the parking garage.
- 5 Campus Portal tiers to Camp Bowie Boulevard and provides physical and visual connectivity.
- 6 Additions to EAD and RES provide visible collaboration space and indoor-outdoor linkages to new exterior spaces.
- 7 Library Mall extends through RES, linking the Front Lawn and Campus Spine.
- 8 Improve crossing at street and pedestrian pathway for safety.
- 9 Reflection Courtyard
- 10 IREB Rooftop Garden



Component Precedent - Formal Exterior Space (#2 - Front Lawn)

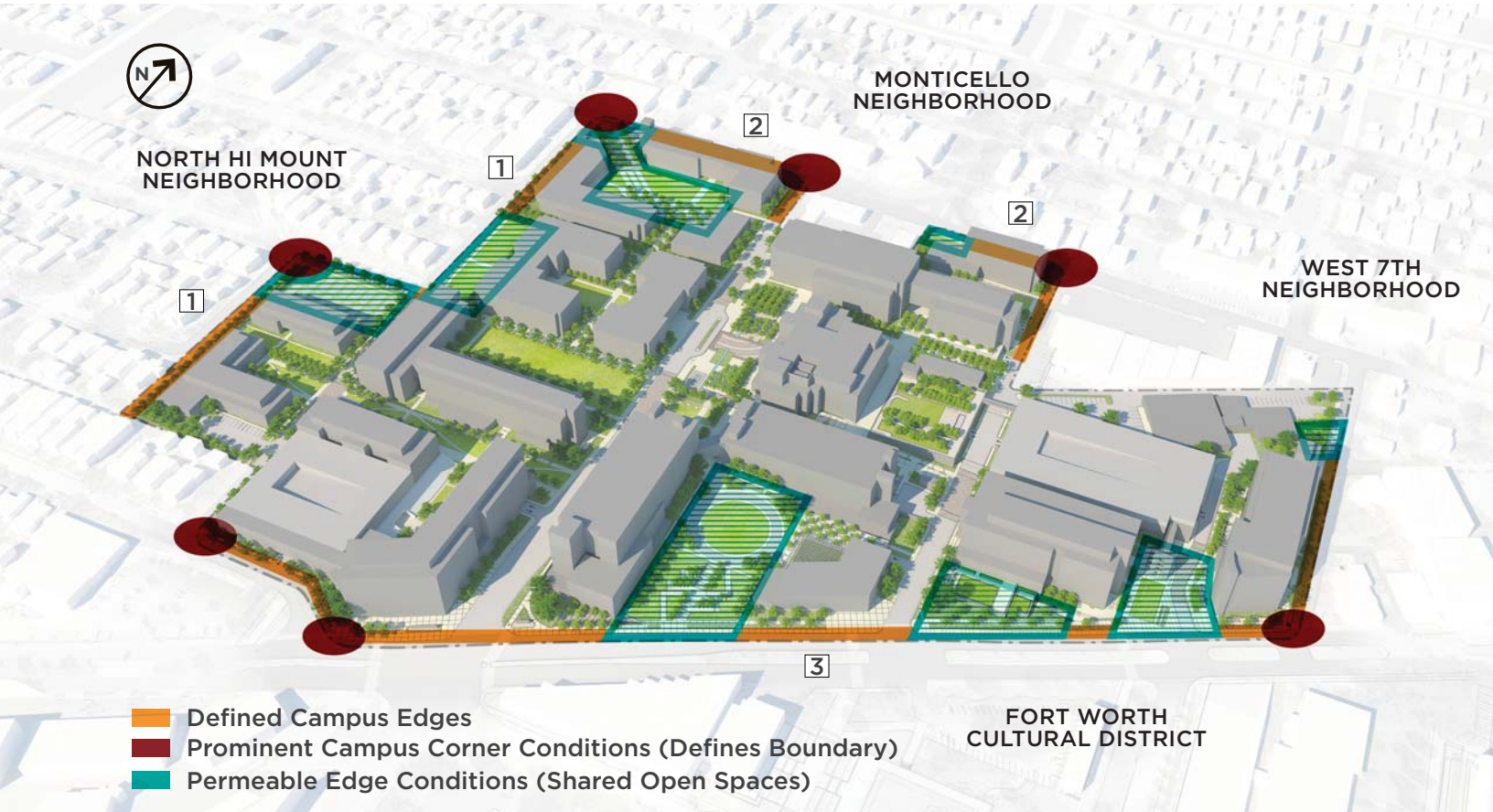


Component Precedent - Shaded Exterior Space (#7 - Event Plaza)



Feature Highlight - Aerial View of Campus Gateway Center

SYSTEM INTEGRATION



Campus Edges

Emphasized as a priority early on, the master plan carefully addresses its boundaries specific to their immediate context in order to create a welcoming edge condition around the entire campus. This carefully considered approach aims to better nurture the intersections between the campus and its neighbors. In addition to strengthening the physical interface with the surrounding community, defining the edge conditions also enhances the institutional identity, increasing visibility and recognition of UNTHSC as an integral part of the surrounding neighborhoods and districts.

After analysis, campus edges were categorized into three character groups: The Neighborhood Edge, the Community Edge, and the Cultural Edge. Analysis of existing conditions revealed that the edges are currently disengaged in many places. One of the positively identified features of the campus' existing edge conditions was the rhythm of green spaces located along the edge which are shared with the community (such as the community garden and MET lawn). Stakeholders expressed a desire for the master plan to create more of these permeable edge conditions spread across all three character groups.

The build out of the master plan arranges building forms and open space features in locations that will maximize integration with the surrounding communities while also maintaining appropriate characteristics unique to the context in each location. This will ensure a consistent and engaging presence and identity along the entire campus boundary. Below are additional details about some of the strategies employed by the master plan.

1 - Neighborhood Edge

Today, there is no clear edge definition along Haskell Street. The parking lot west of Haskell Street is effectively a program dead zone separating the campus and neighborhood. The east side of Haskell is characterized by on-street parking, buildings that house facilities and service functions, service driveways for the MET and facilities annex, and minimal landscaping. The one positive element is the MET lawn which community members frequently access.

Stakeholders identified this as an edge where UNTHSC should strive to respectfully blend in with the neighborhood. Preferred strategies include lower density, quiet uses, lower building heights, larger setbacks, screening of mechanical elements, and creation of public green spaces that can be shared between campus and community. Building off of this guidance, the master plan steps building heights down towards the one- and two-story houses located in the North Hi Mount neighborhood. While the master plan does propose development on the MET lawn where it fronts the campus edge, this space is replaced with a larger relocated community garden and a new community lawn. These two spaces enhance the pattern of shared green spaces that punctuate the edges around campus with programs intended to bring the campus and community together.

2 - Community Edge

Today, the campus side of the Community Edge is defined by older one- and two-story structures set far back from the street edge that do not contribute to the campus' character or identity. Exacerbating this lack of identity, UNTHSC does not have a continuous land ownership along West 7th Street, prohibiting the campus from creating a singular edge identity.

Unable to create this contiguous edge, it will be critical for future UNTHSC development along West 7th to have strong architectural elements on the corner to differentiate the campus properties and presence from those not owned by the campus. It is also critical for the building masses to be built to the sidewalk edge and planted with street trees to compliment the urban character that is being developed elsewhere along West 7th Street. The West 7th Street corridor is very busy, containing many commercial businesses in the vicinity of campus. Responding to this character, campus development along West 7th should include active programs on the ground floor. The campus may even consider creating retail space that can be leased to generate revenue.

3 - Cultural Edge

The most prominent and visible campus edge is along Camp Bowie Boulevard where UNTHSC interfaces directly with the Cultural District. This Cultural Edge provides the first impression of the institution to visitors. Maximizing campus visibility, branding, and accessibility along this edge is critical to creating a positive first impression.

Historically, the edge was defined by parking lots along its entire length. Today, this edge has been partially transformed as a result of the site design associated with IREB and CBH, which engage the museums south of Camp Bowie Boulevard. The master plan prioritizes completion of this transformation in the near-term. Building footprints for the Montgomery Gateway Building and Campus Gateway Center replace the existing surface lots in each location with building forms that engage the street edge. The new Front Lawn, centered on Camp Bowie Boulevard between Montgomery and Clifton Streets, provides a large and prominent campus edge green space. This lawn is similar in size to the Amon Carter Lawn across the street, creating a complimentary site feature that strengthens the bond between the campus and the Cultural District. In conjunction with these new building and open space features, the master plan also proposes new street trees and grass beds along the length of the Cultural Edge to create a consistent identity to match the segments by CBH and IREB.



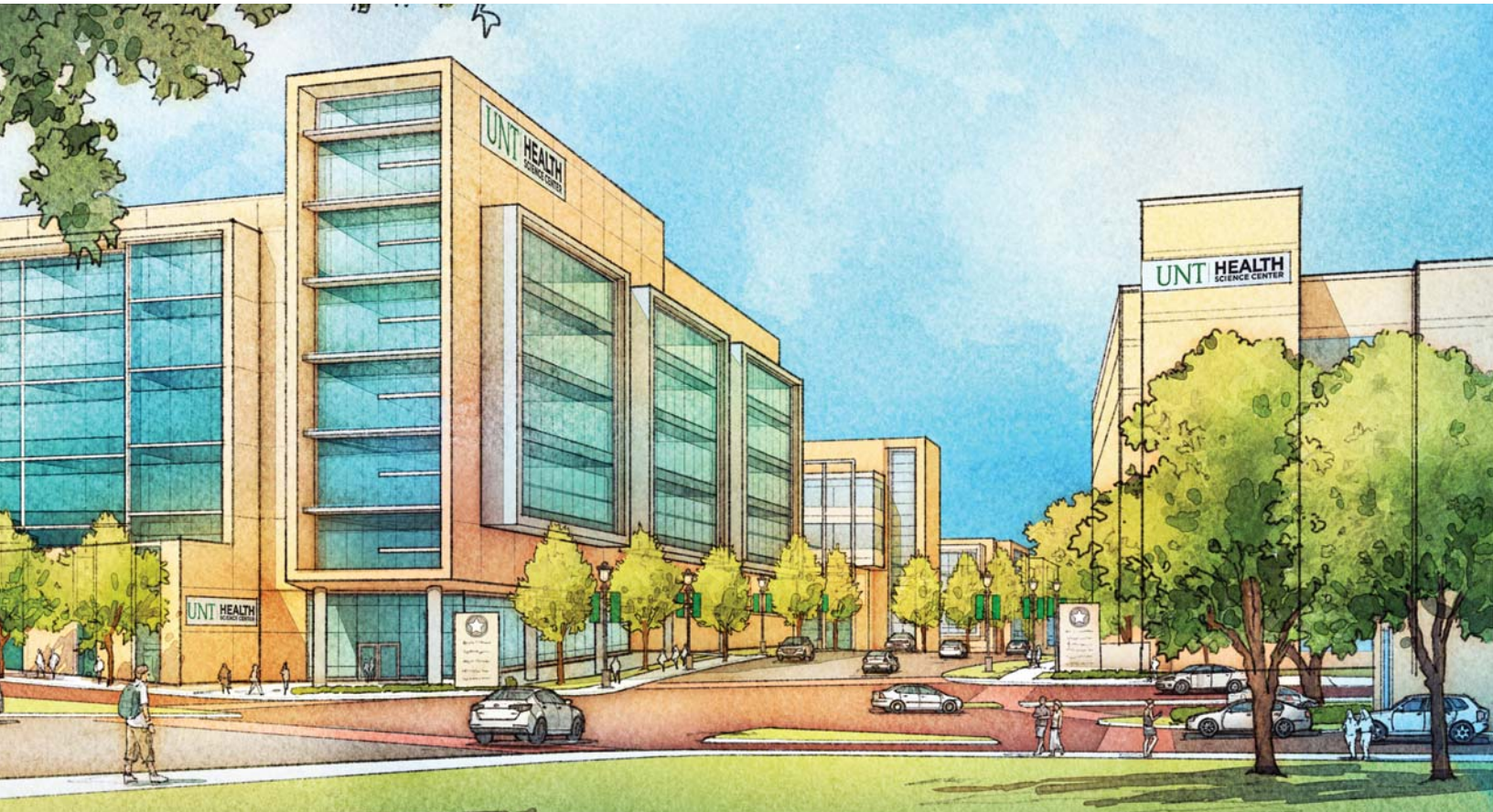
Gateways

A key master plan goal was the enhancement of existing gateways while also establishing new, clearly-defined ones. Design of strong gateways includes creation of balanced building forms scaled appropriately to match (or contrast) with surrounding context, clear signage marking the start of campus, and landscape elements and other visual cues that pull users in to campus. These three elements should each be scaled to provide hierarchy to the importance of each gateway.

Proposed UNTHSC developments at the intersections of Camp Bowie Boulevard with Clifton and Montgomery Streets will greatly enhance the campus' presence and visibility from the Cultural District. These two developments will also serve as clear beacons on where to enter campus. At Haskell and West 7th Street, Northwest Gateway Plaza will create an open and inviting pedestrian gateway with views all the way to the library. During the

- - - Pedestrian Access point to Campus
- Vehicular Access point to Campus
- ⋯ Proposed Gateway
- ▤ Existing Primary Gateway
- ▥ Existing Secondary Gateway
- Campus Edge Signage

planning process, stakeholders identified the design of this corner as a priority. The proposed building at Clifton and West 7th Street was laid out to create a campus presence that does not exist on the site today. The current low-density structures on the site do not suggest that this area is a part of campus. By increasing building height and extending the building mass to the sidewalk, a clear gateway is created, visible up to half a mile away along West 7th Street marking the start of campus. Collectively, these gateways will help support all four planning principles and provide clear access points for guests visiting campus by foot or car.



1. Enhanced Montgomery Gateway

A new character building opposite of EAD and landscape improvements will drastically improve the campus' presence along Camp Bowie Boulevard and create a more clear front door.



2. Academic Mall
Linear Open Space - Mall



3. Northwest Gateway Plaza
New Pedestrian Gateway



4. New Building - West 7th
Establishes Campus Presence

Vistas

An important design consideration during formation of the master plan was to avoid obstructing existing vistas while also creating opportunities for new vistas. This was achieved through careful layout of building forms and heights to reinforce the outcomes of the Observations phase. Vistas are intricately tied to campus wayfinding systems. Views of campus buildings from a distance help to guide people into campus, while clear views to multiple buildings and green spaces can help guide visitors once on campus. Invariably, vistas are also related to campus brand and identity. Seeing the campus and its physical features promotes awareness of the institution's mission and values.

Below are examples of this intricate approach for the three types of vistas discussed in the Observations Chapter.

Vistas to campus: Situated just a few miles from downtown Fort Worth and adjacent to some of the most heavily trafficked museum districts in the United States, the campus is blessed with high visibility. Capitalizing on this, the master plan strategically lays out building masses in response to sight lines from the Cultural District, downtown, and the regional arterial roadways. These forms provide an opportunity to create a clear campus identity and share the UNTHSC brand with guests to the region. Vistas to campus are also a critical wayfinding device that visually guide visitors to campus.

The most prominent example of an enhanced vista to campus is the proposed Montgomery Gateway Building. Due to a variety of factors including its height, the existing setback of EAD from Camp Bowie Boulevard, and its alignment to the street, The Montgomery Gateway building will be visible over a mile away along Interstate 30, traveling north on Montgomery, traveling east and west along Camp Bowie Boulevard, and from the lawns of the Amon Carter and Kimbell Art Museums.

Vistas from Campus: One of the campus' greatest assets is the views of downtown Fort Worth and the Cultural District from EAD, RES, LIB, CBH, and HP. The master plan

carefully arranges proposed building masses to not obstruct these existing views while also capturing these same views for new buildings.

Design of the Campus Gateway Center embodies this approach. The building site at the corner of Camp Bowie Boulevard and Clifton Street will have unobstructed views of the Amon Carter and Kimbell Art Museum, as well as views of downtown. Located 35-feet down grade from EAD, the proposed three-story building mass will not obstruct any of EAD's or RES's existing views from campus.

Internal Vistas: Internal vistas are created when an interior space has windows that overlook a campus green space or frame a character building on campus. Inversely, internal vistas can also be created in exterior spaces when landscape elements frame the reciprocal view and back visually interesting building facades. Through expansion of the campus open space network, the master plan creates significantly more opportunity than exists today for existing and future buildings to have stimulating internal views.

An excellent example is the set of internal vistas created by the new Front Lawn. If you were on the fourth floor of EAD or RES today and looked down, you would see a parking lot. After completion of the Front Lawn project, both of these buildings will have considerably improved views. In addition to creating new internal vistas for existing buildings, the Front Lawn will also form a strong visual connection with the Campus Gateway Center, which will have interior and exterior spaces that will overlook the lawn.

Another example is the West Campus Mall, the long, linear open space running north-south from the Montgomery Gateway Building, through the MET lobby, to West 7th Street. Standing in the MET lobby and looking down the mall south, you will see the Montgomery Gateway Building enveloping Innovation Plaza. Standing in the MET lobby and looking north up the mall, you will be able to see all the way to West 7th Street framed by a breezeway in the northern most building on the mall axis.



Open Space Network

Building off the proposed campus Framework Open Space Network, the master plan greatly expands the open space network to include a better variety of open space types and distribution across campus. While programs for each space are not specifically identified, the intent is for each space to offer a unique and varied set of features.

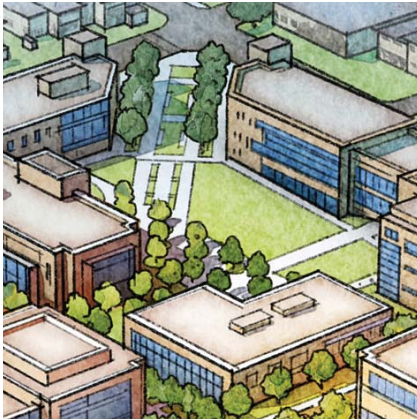
Key identifying feature of the existing open space network are moments around the edge of campus where open space is used as a tool to connect the campus to the community (Community Garden, MET Lawn, IREB Courtyard). Stakeholders prioritized the extension of this around the entire campus boundary as a key design feature for the master plan. This is achieved through the new Front Lawn, relocated Community Garden, Community Lawn, Northwest Plaza, and Monticello Courtyard.

Mix of Open Space Typologies

Today, the campus does not offer a good mixture of open space typologies. Most of the campus outdoor spaces are large format (such as the Library Courtyard, Alumni Plaza, and the MET lawn), designed to support single uses, and located in or immediately adjacent to the center of campus. Guided by the Framework Open Space Network, the master plan creates and assortment of new open spaces spread to all sectors of campus. These spaces will also offer a mixture of furniture to accommodate individuals and groups of varying size, and support a broader range of outdoor programs and activities. Combined, the mixture of open space typologies will provide the UNTHSC community with a better on-campus experience and create new opportunities to study and relax outdoors.

Additional details on open space design, distribution, site features, and furniture can be found in the Design Guidelines Chapter.

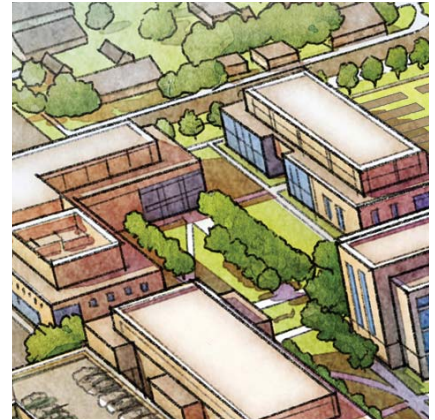
Sample of Key Open Spaces



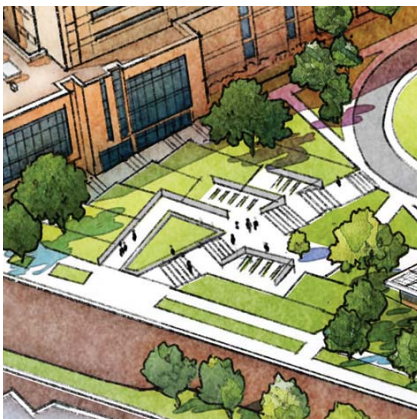
North Campus Green
Grand Space - Quad



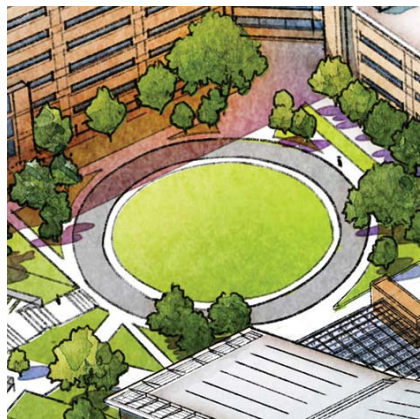
MET Lawn (enhanced)
Grand Space - Lawn



Hi Mount Quad
Grand Space - Quad



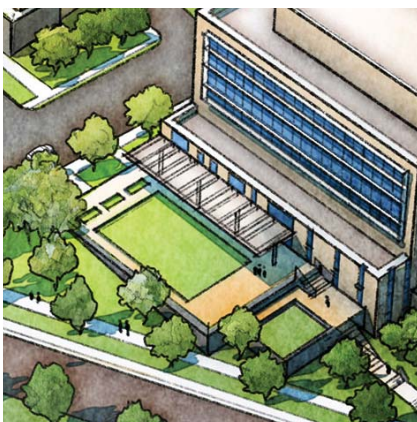
Campus Portal
Grand Space - Special



Front Lawn
Grand Space - Lawn



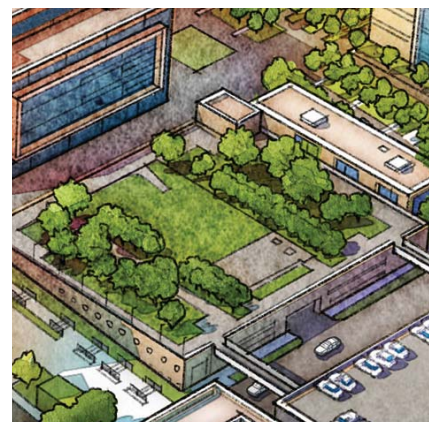
Library Courtyard
Intimate Space - Courtyard



IREB Roof Garden
Intimate Space - Courtyard



East Campus Green
Intimate Space - Courtyard



Alumni Plaza
Intimate Space - Plaza



Community Plaza
Intimate Space - Plaza



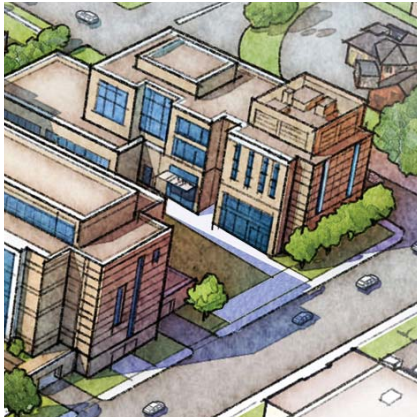
Modlin Courtyard
Intimate Space - Courtyard



Reflection Courtyard
Intimate Space - Pocket Park



Community Garden (relocated)
Intimate Space - Pocket Park



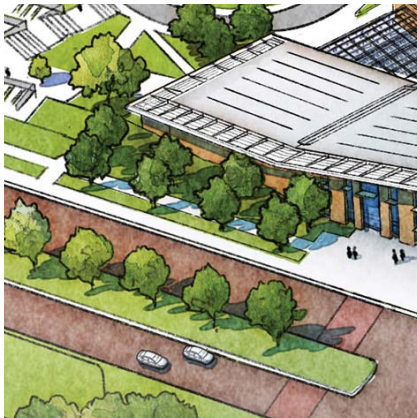
Legacy Green
Intimate Space - Pocket Park



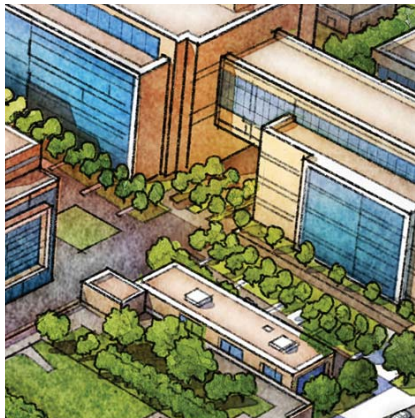
Campus Spine
Linear Open Space - Mall



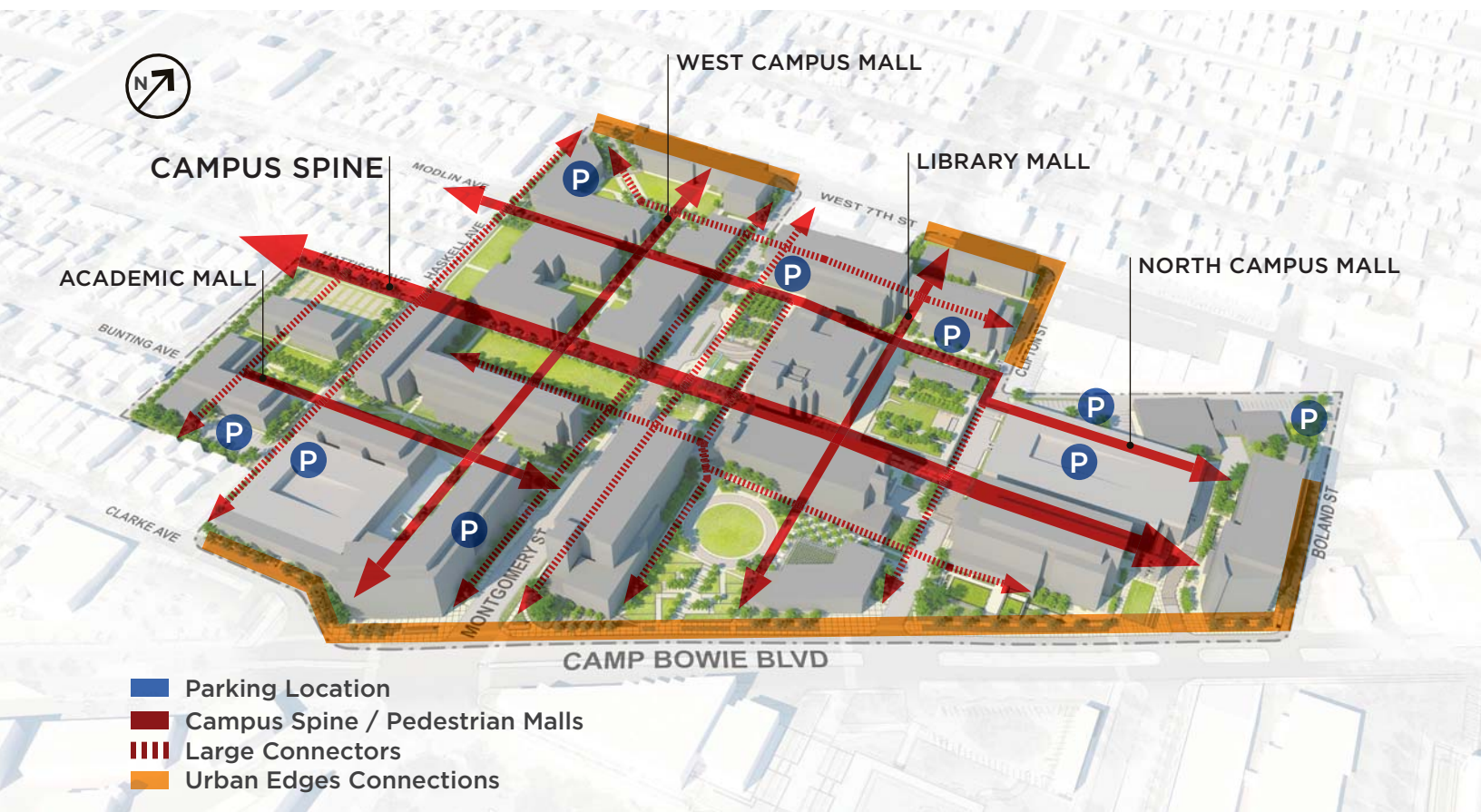
Academic Mall
Linear Open Space - Mall



Camp Bowie Boulevard Frontage
Linear Open Space - Urban Edge



North Campus Mall
Linear Open Space - Mall



Pedestrian Circulation

Using the Framework Connectivity Network as a guide, the master plan significantly increases pedestrian connectivity throughout campus and along its edges. This is primarily achieved through converting existing interior roadways and surface parking lots into elements that are more pedestrian-friendly (pathways, green spaces, or buildings). To organize the pedestrian network and provide clear guidance for its growth, the master plan defines a pedestrian walkway hierarchy containing four types: Spine, mall, connector (large and small), and urban edges.

Spine: The term refers exclusively to the existing Campus Spine which is a special and character-defining element for the UNTHSC campus. The spine is the most heavily trafficked pedestrian path on campus and acts as a unifying feature that aligns the entrances and exits of surrounding buildings. Preserved as the central element of the

Framework, the Campus Spine remains the prime organizing feature for all pedestrian circulation.

The master plan strengthens the spine through two alterations. First, the existing section west of Montgomery Street (where it currently jigs to align with Mattison Avenue adjacent to the MET lawn) is shifted south to align the section on the opposite side of Montgomery Street. Second, road tables are proposed where the spine intersects Montgomery, Clifton, and Darcy Streets to calm traffic and provide a safer, elevated crosswalk. In effect, these improvements to the Campus Spine will provide a straight and uninterrupted path for pedestrians from one side of campus to the other.

Pedestrian Malls: Building off of the organizational strength of the Campus Spine, four new campus malls are proposed on campus (two running north-south and two running east-

west). Malls act similarly to the spine in that they are designed to handle a significant amount of pedestrian traffic, connect major green spaces together, and orient building entrances.

The West Campus Mall extends north and south off of the axis created by the MET lobby. To the south, it will connect to the new buildings and parking structured identified to replace Lot 19; to the north it will extend across the MET lawn all the way to West 7th Street, passing through multiple courtyards and breezeways.

The second mall is the formalization the north-south axis that exists between the library and alumni plaza, extending it north to West 7th Street and south to Camp Bowie Boulevard (through a new interior corridor created in RES).

A third mall replaces a closed down Bunting Avenue and a portion of Parking Lot 7. The Academic Mall runs east-west from Montgomery Street, over Haskell (on a road table), and into the development area atop Lot 7. Anchored by the MET, the master plan envisions a concentration of new academic uses and student support uses aligning to this mall.

Finally, the North Campus Mall is the fourth proposed new pedestrian mall. Running east-west, similar to the Campus Spine, it is envisioned to be the primary channel for pedestrians on the north side of campus. The North Campus Mall will connect all the way from Haskell Street to CBH.

Connectors (Large and Small): Large connectors are the third largest walkway in the hierarchy. Though not as big as malls, they are still intended to move a significant number of people. Large connectors link the Campus Spine and malls to secondary buildings and parking lots, and are fairly evenly distributed across campus.

Small connectors are the smallest paths on campus located in less heavily trafficked areas. They are what might be described as “a typical sidewalk.”

Urban Edges: Urban edges are the larger sidewalk areas located adjacent to arterial roads. These areas should be uniformly planted with street trees to create a cohesive campus edge condition.



Campus Spine segment North of RES



Mall at the University of North Texas (Denton)



Large Connector West of the library

Additional information on the design of malls, connectors, and urban edges can be found in the Design Guidelines Chapter.

Bicycle Circulation

The Master Plan supports the creation of a dedicate bicycle lane along Montgomery Street identified by the 2009 City of Fort Worth Bicycle Comprehensive Plan. While campus stakeholders did not identify an immediate need for increased bicycle infrastructure today, a desire was expressed for future integration into city bicycle infrastructure to create opportunities for future students, staff, and faculty to bike to campus.

As the campus grows, bicycle racks should be included with new construction projects.

Transit Connectivity

Transit connectivity is vital element for an increasing number of the campus population. Today, the campus is only serviced by one bus route. The City of Fort Worth is exploring the possibility of adding both a Bus Rapid Transit (BRT) line down Camp Bowie Boulevard, as well as a new dedicated shuttle that circulates between the Fort Worth Medical District, Downtown Fort Worth, and the Fort Worth Cultural District. Connection to both of these lines would greatly benefit UNTHSC students, staff, and faculty. The campus should appoint a dedicated representative responsible for staying in contact with the Fort Worth Transit Authority and attending any community meetings related to these lines to ensure that the campus has one or more stops on its boundary.

It is also encouraged that the campus continue and expand its Travel Demand Management (TDM) programs to both support students, staff, and faculty of a variety of means and encourage alternative modes of reaching campus. Current programs include subsidies for transit passes, carpooling, and electric vehicle charging.



Example Pedestrian Road Table

Pedestrian Road Tables

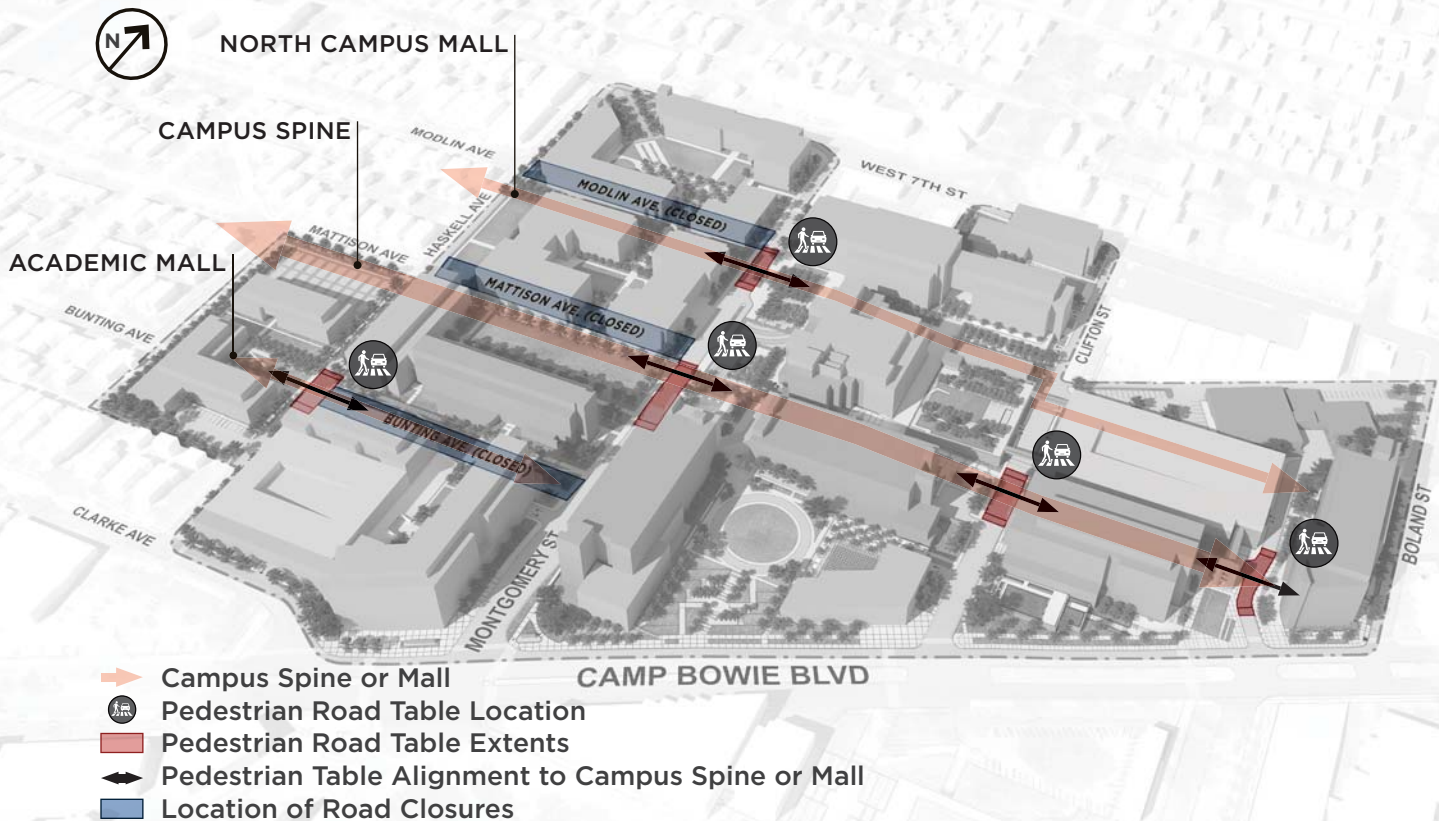


Pedestrian road table locations are highlighted on the diagram at the top of the adjacent page

Road tables are a visual and physical mechanism that slows traffic and creates a larger and more safe crosswalks for pedestrians. Long-term, the master plan identifies five total locations along Haskell, Montgomery, Clifton, and Darcy Streets (where east-to-west pedestrian traffic is the heaviest) to create elevated road tables. Three are located along the Campus Spine (enabling it to provide an uninterrupted ground plane from one end of campus to the other) while the other two align with new campus malls.

Road tables can vary in length, however the master plan recommends they be a minimum of 30' long to ensure they are a meaningful traffic-calming element. Heights should be designed to sit flush with the adjacent sidewalks. It is important that road tables be constructed of a material that is different from both the road and the sidewalk. This visual contrast is a psychological mechanism that increases safety by ensuring that drivers and pedestrians are conscious that they are entering a shared zone.

For tables not located on owned right-of-ways (Montgomery Street), the campus will have to coordinate with the City of Fort Worth for approval.



Road Closures

As a part of the full master plan build out, the segments of Bunting Avenue, Modlin Avenue, and Mattison Avenues will be closed between Haskell Street and Montgomery Street to expand the pedestrian environment on campus and increase safety. Each of these segments is owned by the campus and has relatively low traffic volumes. A majority of the existing traffic is UNTHSC students, faculty, and staff using them to reach existing surface parking lots. Over time, these surface lots will redevelop into building sites, leading to a decrease in utilization of these roads and minimal traffic disruption from closure.

The roads will be closed in phases as development occurs, giving the campus time to further assess the impacts after each stage. Only the Bunting Avenue segment is identified for closure in the near-term implementation plan.

Vehicular Circulation

Aside from the three road closures described to the left (which were identified as having minimal impact on traffic flows), vehicular circulation to and through campus will largely remain the same. UNTHSC is currently working with the City of Fort Worth on a design to eliminate one north bound lane on Montgomery Street between Camp Bowie Boulevard, and Bunting Avenue. The master plan reflects the latest designs for this project.

Over time, ingress and egress patterns will adjust as the campus shifts from a hybrid parking model (surface lots and garages) to a primarily garage based model (more information on this shift is located on the next two pages). Based on the positioning of garage entrances and exists, most vehicular traffic is still expected to enter campus on Montgomery or Clifton Streets. No other roadway alterations or capacity changes were identified as necessary for the long-term plan.

Parking Capacity

Right-sizing the campus’s parking in the near- and long-term was a key topic for the master plan. Concurrent with the master plan efforts to forecast future parking need, the UNTHSC Parking Task Force was working to identify the campus’s immediate parking needs for the next five years. These two groups also met to discuss strategies related to parking management, revenue, operations, and funding of parking assets.

Industry recommend parking ratios based on building use types, shown in table below, provide a starting benchmark for gauging UNTHSC’s parking needs. However, these ratios do not take into account the unique nature of UNTHSC’s population or use patterns. These recommendations are based on individual building use types which, if applied simplistically, would result in an oversupply of parking. For example, a single faculty member may have a dedicated office space, dedicated research space, and teach in one or more academic spaces. The industry recommendations would treat the parking need for each of these separately, however, this example faculty member does not have multiple cars to park at each building. Similarly, a single student will not concurrently occupy space in the library and a classroom simultaneously. Therefore, the industry recommendations provide limited guidance for forecasting parking needs, and a more nuanced approach is necessary.

Parking Generation Ratios Industry Recommendations (per 1,000 GSF)		
Use Type	Low	High
Academic	2.0	3.0
Research	1.5	2.0
Clinical	4.0	5.0
Admin	2.5	3.0
Average	2.5	3.25

To refine the understanding of current parking usage and potential needs, a limited number of occupancy studies were undertaken in the Spring of 2018. The existing parking supply based on overall campus building square footage was also determined.

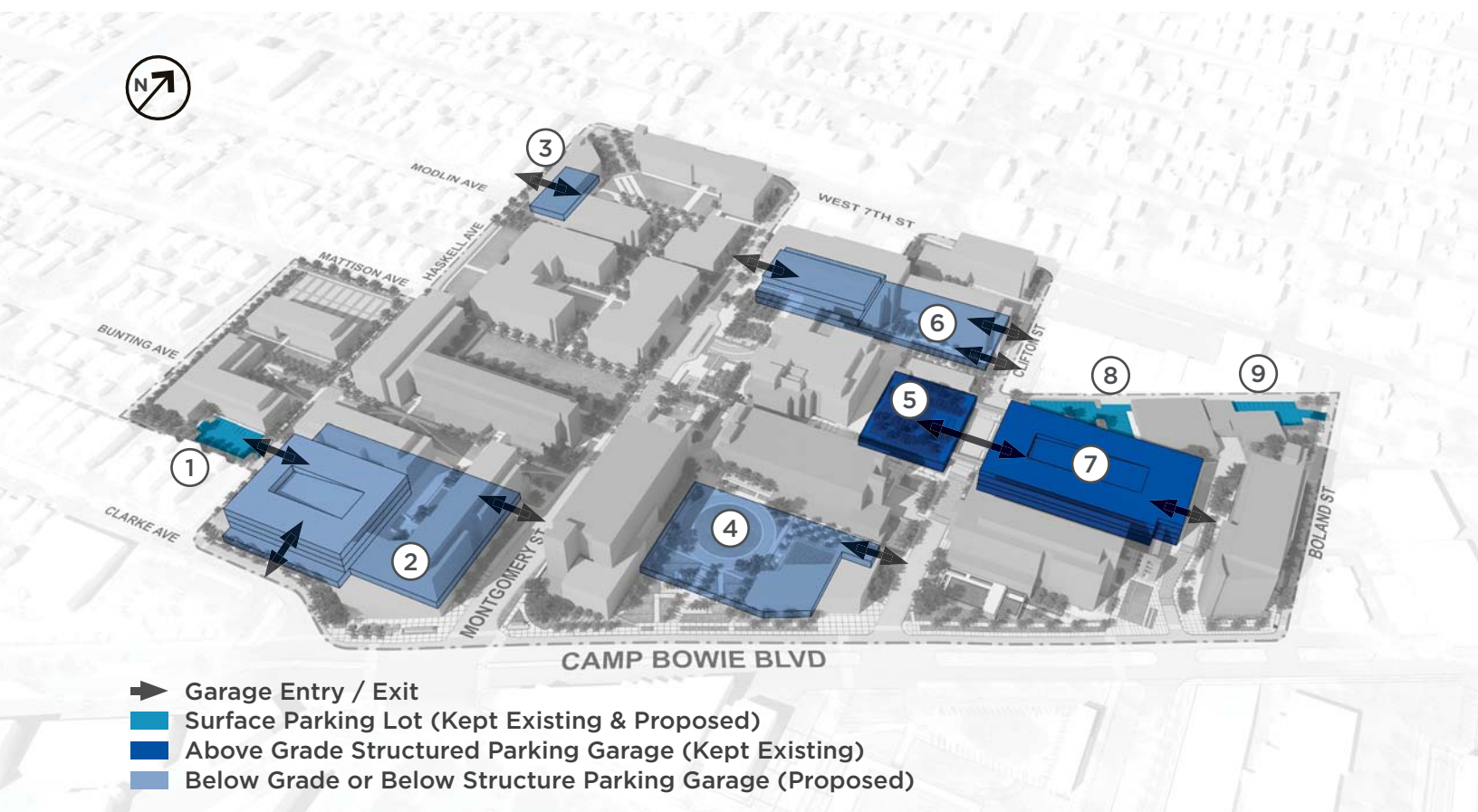
The occupancy studies measured how many spaces were being used in each lot at different

points throughout the day. Typical of most campuses, midday between 10am and 2pm was the busiest time on campus. Due to the nature of program schedules, course timings, and user types, the occupancy studies illustrated a range of low- and high-utilization that would be expected on campus like UNTHSC. During hours with fewer course offerings, demand was lower, whereas demand peaked during exam times. Today, the existing ratio of parking spaces per 1,000 GSF is 1.67. The findings of the occupancy studies suggest that, generally speaking, the existing 1.67 ratio is right-sized for current peak demand, though improvements to management and operations could mitigate constraints at peak times.

In the near-term however, given growth projections for the MD school, management policies aimed to reduce off-campus parking in the surrounding neighborhoods, and no extra capacity to support any future development, the shared conclusion with the Parking Task Force is to recommend the campus add additional parking to the Clifton Garage (pending structural analysis confirmation) to support these changes.

The table below highlights the existing ratio and provides a general recommended range for the campus to follow near-term and long-term to support its forecasted parking needs. The near-term and long-term projections are based on the use and occupancy today, combined with considerations for the impacts of changes on campus (ex: potential reduction in clinical programs) and changes in modalities (i.e. ride share, autonomous vehicles, increased public transportation, etc.). While the master plan provides these ratios as a planning tool, it will be important for the campus to periodically obtain parking occupancy data to validate that these findings remain accurate and remain current on modality trends to keep the campus right-sized and avoid under- or over-building parking.

Campus Parking Ratios: Existing & Targets (per 1,000 GSF)		
Existing	Near-Term	Long-Term
1.67	1.5 - 2.4	1.4 - 1.6



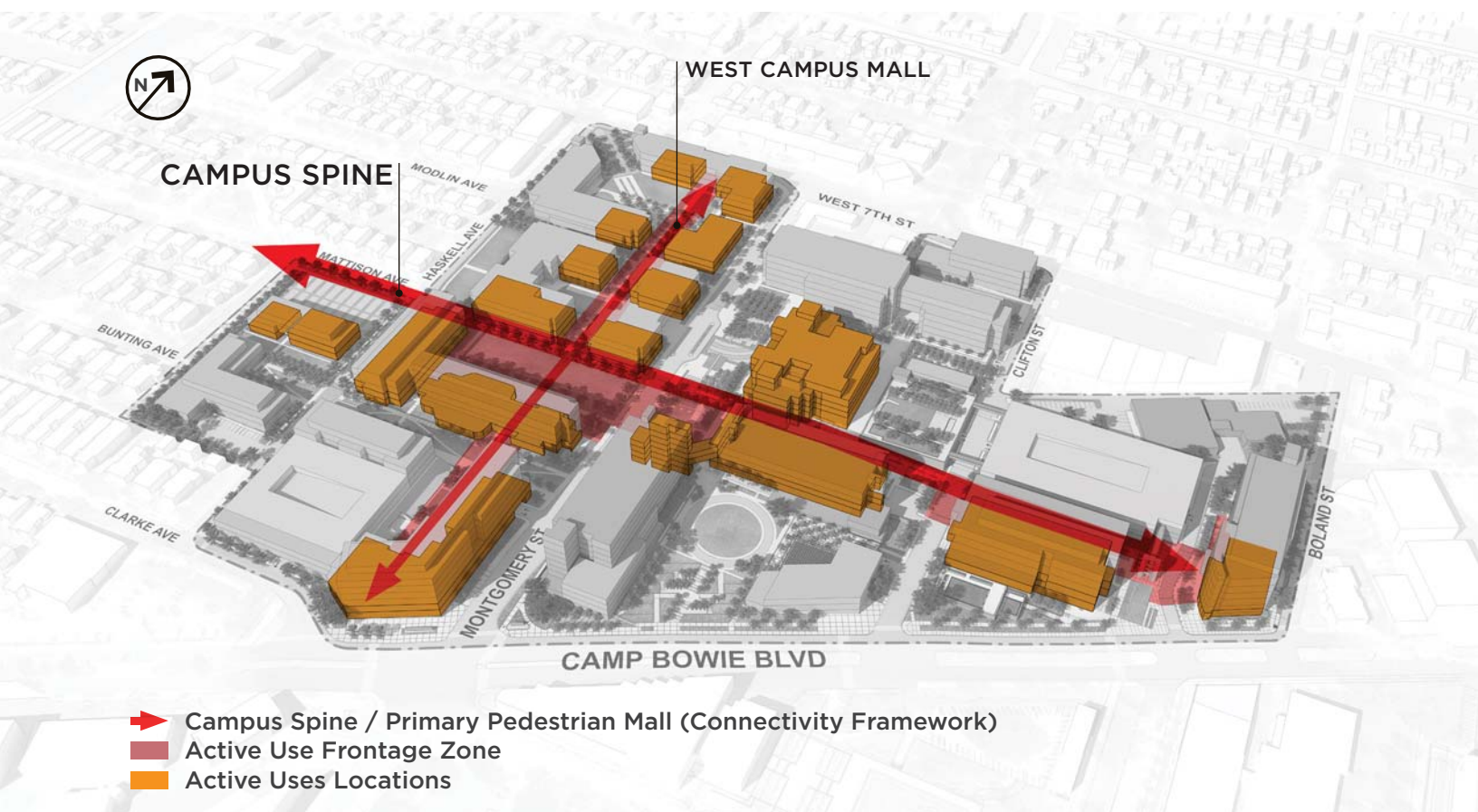
Parking Strategy

Over time, the master plan proposes that the campus gradually infill existing surface lots with new buildings, pedestrian malls, and green spaces. To remove surface lots without decreasing the overall parking count, the master plans proposes three new parking garage locations built into or under buildings. In addition, the plan also supports the Parking Task Force’s recommendation to add an additional floor to the Clifton Garage. Moving the parking model to be predominantly garage-based will help ensure that the campus is compact and connected, allowing more users to parking in close to the core while also increasing the overall campus experience through an increase in green space. This full transition will be gradual, spaced over multiple decades.

The planning of garage locations ensured that large parking structures are oriented towards the edge of campus, load and unload onto

local streets (not on to the major Camp Bowie Boulevard and West 7th Street thoroughfares), have multiple entry and exit points, and are accompanied by thoughtful pedestrian environment layouts to minimize safety conflicts.

Master Plan Parking	Count
Location 1 (New)	24 spaces
Location 2 (New)	1,080 spaces
Location 3 (New)	42 spaces
Location 4 (New)	213 spaces
Location 5 (Existing)	73 spaces
Location 6 (New)	864 spaces
Location 7 (Existing & New)	894 spaces
Location 8 (Existing)	27 spaces
Location 9 (Existing)	20 spaces
Misc. On Street (Existing)	9 spaces
TOTAL	3,246 spaces

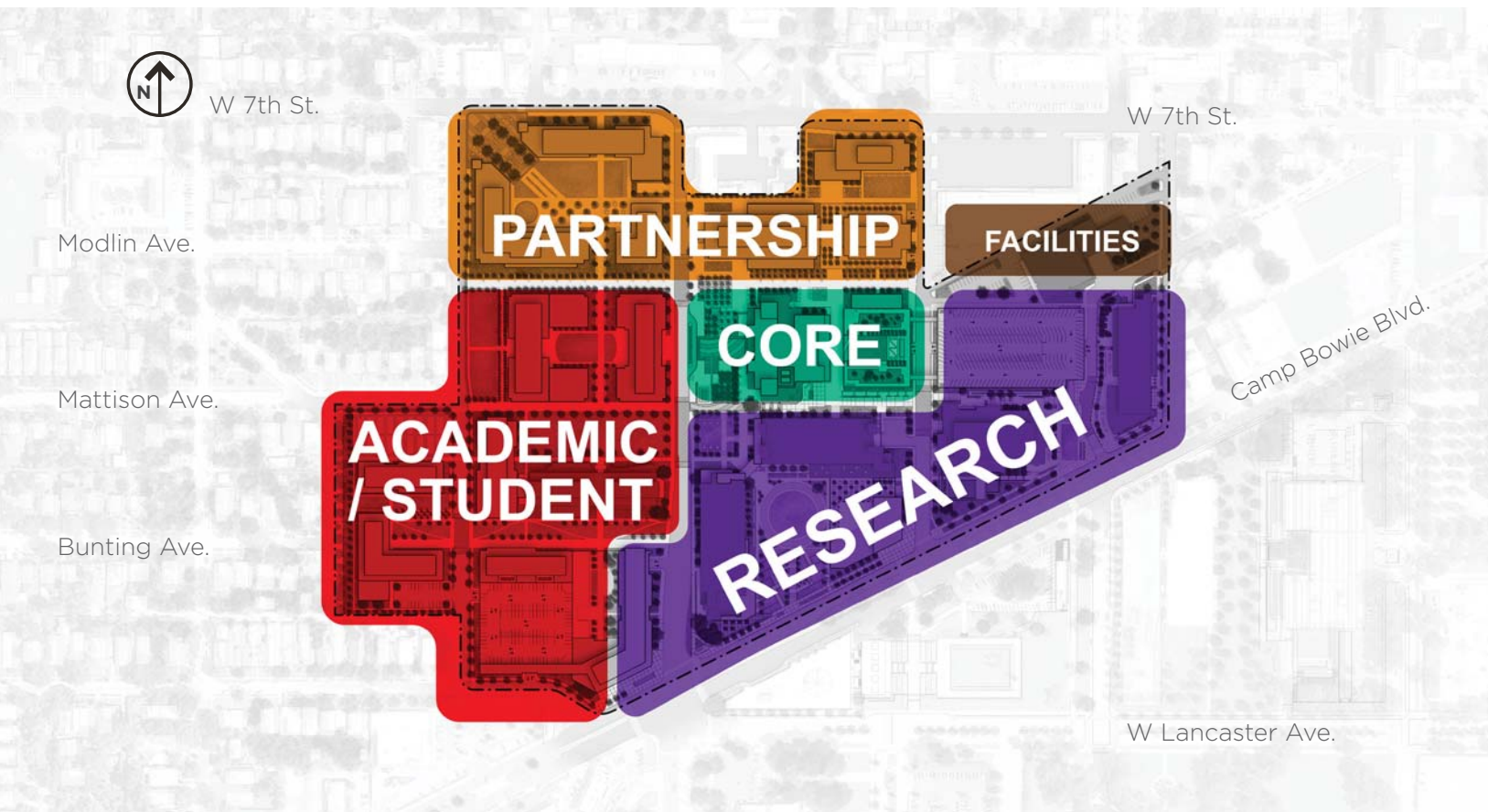


Active Ground Floors

To help strengthen program relationships across campus, a key master plan concept is aligning active programs to the first and second floor of each building located along the Campus Spine and the north-south West Campus Mall. The term “active program” describes any program or function that is used frequently throughout the day and is public, or semi-public, in nature. These spaces should be designed with curtain walls or large window bays, have entries and exits that egress into the circulation corridors, and have visible indoor-outdoor program relationships where possible. Passive uses (such as offices or secured research) should not be located in these areas.

Common examples of appropriate active uses:

- Classrooms / Lecture Halls
- Collaboration Space
- Research Display / Gallery Space
- Event Space
- Cafe / Coffee Shops / Dining
- Retail
- Recreation / Fitness Center



Use Districts

To provide greater flexibility and adaptability to the campus moving forward, the master plan generally does not identify uses for specific buildings. Instead, it identifies five primary use districts (Core, Academic / Student, Research, Partnership, and Facilities). These districts express programmatic relationships at the campus scale and should serve as a general guide when locating new program elements. The master plan advises that new programs be located within the appropriate zone to prevent components becoming isolated or silos (as is the case with the minimal academic space in CBH today). By grouping similar uses and programs together, operational efficiencies such as shared resources, collaboration and knowledge sharing, and increased presence and identity can be realized. Individual uses can be located outside their identified district when adequately supported by logical program adjacencies.

Core: The Gibson D. Lewis Library is the physical and social heart of campus. Programming in this area should include public and shared uses.

Academic / Student: Uses that support student learning, including (but not limited to) classrooms, faculty offices, study spaces, and student lounges.

Research: Uses that support the varied campus research initiatives and programs. Examples include laboratories, display space, and material storage.

Partnership: Spaces that support and facilitate partnerships with the community and industry, including event space, incubator space, etc.

Facilities: Campus management and operational support functions, including office space, warehousing, central receiving, and utility space.

Utilities & Civil Infrastructure

Stormwater Drainage Impacts

Invariably, the significant development proposed by the master plan will greatly effect how stormwater moves across and affects the campus. As identified in the analysis section of this report, the campus has notable stormwater issues today, including significant flooding, ponding, and erosion of landscape and built elements. The master plan addresses stormwater issues in a number of ways, including the reduction of surface parking lots and introduction of different natural stormwater systems. Expanding these controls will create more consistency across the campus and create shared efficiencies to reduce existing and future stormwater burdens. The ratio of pervious to impervious surfaces will fluctuate as existing surface lots are transformed into new buildings and green spaces. At full master plan build-out (1.4 million additional square feet), there will be a 23% decrease in impervious paved surfaces and a net increase of 10% in pervious surfaces. These two changes will have a substantial positive impact on how stormwater interacts with the site by allowing more water to infiltrate into the ground.

These impacts can be even further amplified through use of additional stormwater management techniques, detailed in the Design Guidelines Chapter. The master plan recommends that each new project utilize one or more of these techniques. Each new project should also assess its storm water impact to ensure it does not negatively affect drainage for the surrounding areas.

Water

Maximum daily water demand for the full campus master plan build-out (1.4 million additional square feet) was calculated to be 3,150 gallons per minute. This corresponds to a 192% increase over the existing demand. Each future building will have to create individual connections to the existing water infrastructure, and in some cases, the campus will have to work with the City of Fort Worth to increase the public infrastructure capacity to handle the greater loads.

For additional details, please refer to the Water Study referenced in the Appendix.

Waste Water

At full build out (1.4 million additional square feet), the campus master plan is expected to increase wastewater system demand by 191%. New development will have to provide individual connections to existing infrastructure. However, system analysis suggests that the existing infrastructure is capable of supporting the increased wastewater demand everywhere except for the shared infrastructure supporting the LIB, RES, and proposed buildings S and V. Simultaneous with the development of proposed buildings S or V, the campus will need to work with the City of Fort Worth to assess and upgrade the wastewater infrastructure beneath Clifton Street.

For additional details, please refer to the Wastewater Study referenced in the Appendix.

Fire Coverage & Fire Lanes

Per City of Fort Worth regulation, all new development must be completely covered by a 400 linear foot radius from a hydrants. The existing network of fire hydrants provides full coverage of campus today and is not expected to be altered or affected by implementation of the campus master plan. For each new project undertaken, additional analysis should be conducted to ensure that the proposed building form does not impede this.

One major impact of the campus master plan is the closure of Bunting, Modlin, and Mattison Avenues. These private right-of-ways currently serve as designated fire lanes. As these roads are closed and transformation into walkways to better support the on-campus pedestrian experience and make space for new development, it will be important that the new walkways also function as fire lanes. Current City of Fort Worth standards require fire lanes to be 20' minimum. For additional information on the development of these walkways, refer to the campus mall section of the Design Guidelines Chapter.

MEP Infrastructure

To increase operation efficiency, the master plan recommends the continued creation of one or more campus loops. There is a clear direction in place for continued development of east campus systems. However, the master plan presents three options for west campus system development to provide flexibility as the campus grows.

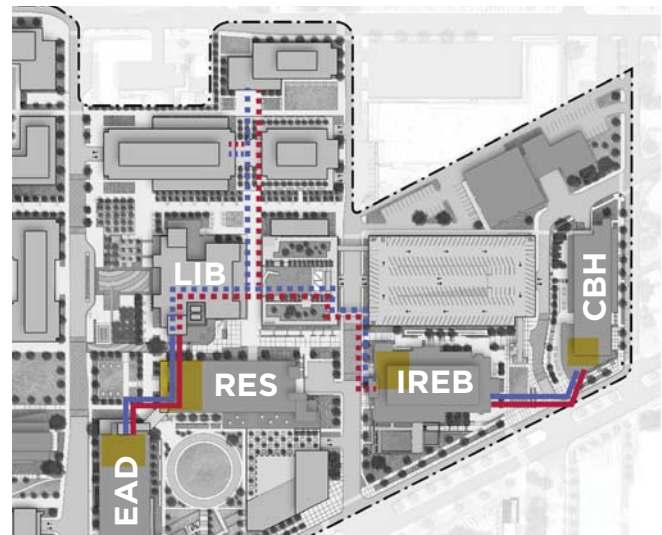
Chilling Tower Relocation

The two chilling towers located north of EAD are nearing the end of their life-cycle. The towers currently occupy prime real estate in the core of campus and are not visually appealing features. Because these two towers serve the chillers in EAD and RES, they must remain in close proximity, yet neither roof has the ability to hold these towers.

It was determined that the best option for replacing these chilling towers is to locate them on the south end of the library roof (built in conjunction with vertical expansion of the library). In addition to their relocation, it was also determined that their supported capacity can drop from 2,800 tons to 1,740 tons if two of the existing 500-ton chillers in EAD at the end of the life are removed and replaced with available space in IREB. Through the east campus loop, this capacity would still be shared with EAD. The final recommendation to replace the towers on the Library roof includes four 500-ton chillers covering an approximate footprint of 40' by 24'.

East Campus Development

Already started, the master plan proposes the completion of an east campus loop to connect all MEP infrastructure east of Montgomery Street. This investment will help reduce maintenance costs, eliminate the need to replace some aging infrastructure, and support some new development. Along with the underground loop and connections into currently non-connected buildings, there will also be some changes needed to pump capacities and controls to ensure that all buildings are supplying the shared loop at the same pressure. The campus should be proactive in building the missing connections in advance of future development.



Proposed east campus loop

- Existing / Proposed Chilled Water Lines
- Existing / Proposed Hot Water Lines
- Distributed Infrastructure Locations

Electrical and plumbing infrastructure appear to be adequate for expansion. The campus should keep up with any required general maintenance.

West Campus Development

Today, the MEP systems on the west campus are handled at the building level. As this side of campus develops, new infrastructure will be necessary. Three options were explored for expanding and linking MEP infrastructure on the west campus:

1. Creation of a central utility plant in the basement of Building I
2. Ground-level central utility plant located on Parking Lot 7 (standalone or in building K or L)
3. No West Campus Plant initially, connect under Montgomery Street to East Campus capacity (capacity for 2-3 new buildings)

Each option is a viable solution. However, the final recommendation is a combination of Option 1 or 2 paired with Option 3. Additional details and analysis can be found in the Appendix.



IMPLEMENTATION

PROJECT ROAD MAP

5

SUMMARY



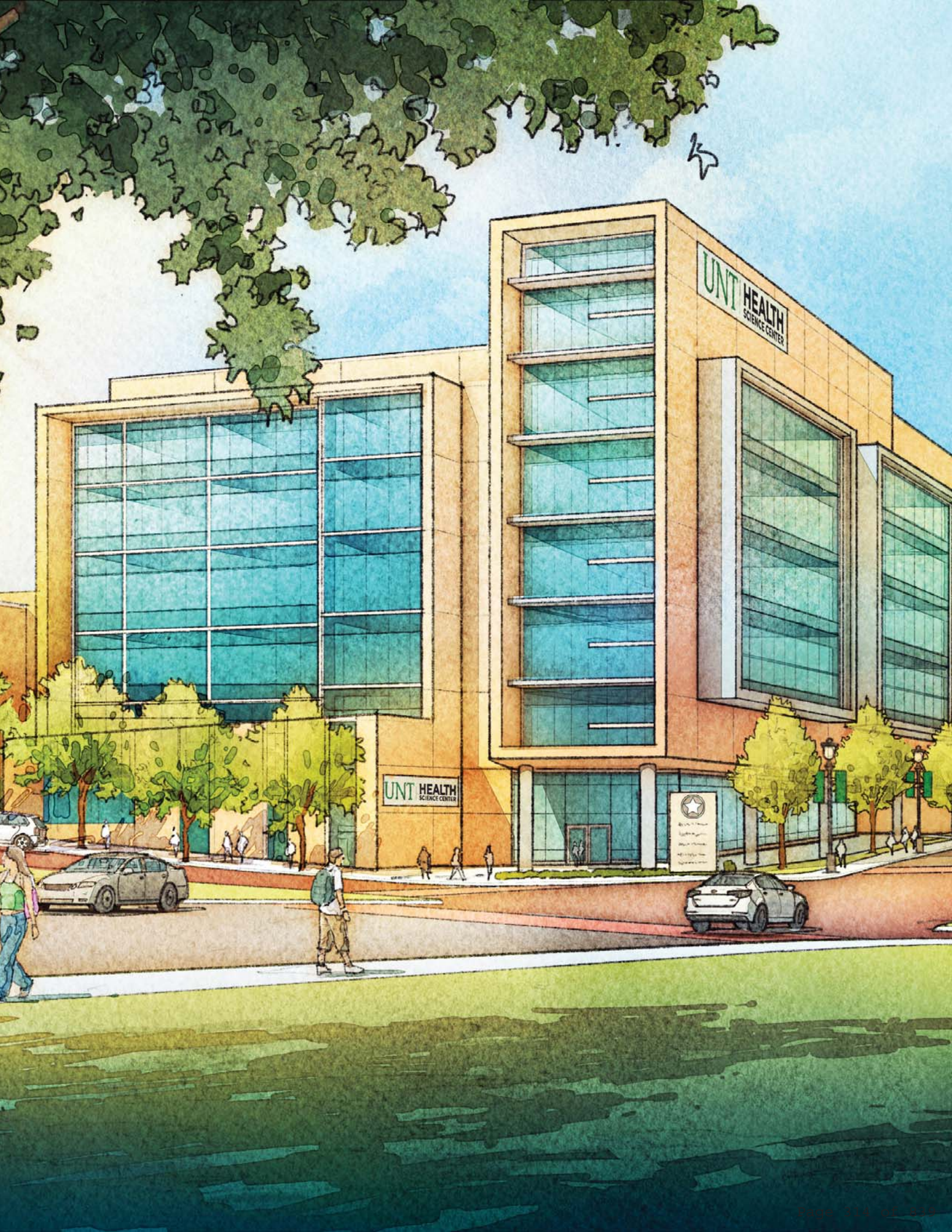
Overview

While illustrated at full build-out, the 2018 Campus Master Plan supports adaptable implementation. This adaptability allows the institutions to respond to changing needs or new opportunities that may arise over the duration of the plan. Implementation is organized in near-, mid-, and long-term phases.

Shown in the greatest detail, the near-term implementation seeks to support the immediate needs and expected growth of the campus over the coming decade. This includes re-alignment of existing space to higher utilization, expanded capacity for academic and research space, increased collaboration space, and enhancements to the overall campus environment.

The mid-term implementation phase identifies a natural progression for campus growth based on the framework, while not specifying specific uses to allow UNTHSC to evaluate needs based on market demands at that time.

The long-term implementation phase illustrates the full campus build-out and proposed capacity within the existing 33-acres of the campus. While not necessary to support the campus needs, potential acquisitions adjacent to the campus were studied to provide fully informed options and understand their impact if an acquisition opportunity presents itself in the future.



UNT HEALTH
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Space Needs Projections

The following space needs projections align with the 10-year time frame of the near-term implementation. The forecasted needs are influenced by multiple factors, such as policy directions, the distributed clinical model mentioned below, targeted program growth, development of new programs, emphasis on research, evolving pedagogy, inclusion of adaptable format, and numerous additional factors. These forecasts ultimately support the strategic direction of UNTHSC and allow for informed capital planning.

Methodology

Given the unique characteristic of health science centers a hybrid model of forecasting was utilized to identify the recommended space needs for UNTHSC. A select list of methods utilized include:

- Historical Trends
- Enrollment (Academic Model)
- Research Expenditure / Funding
- Population Growth
- Clinical Counts
- Planned Growth

By considering the analysis and results of the various methods, the planning team was able to identify recommendations that aligned with discussions held with key campus leadership aspirations.

Academic

UNTHSC has seen significant student enrollment growth since its inception and expects to accommodate continued growth through new programs and expansion of existing programs. This growth necessitates corresponding growth in academic space. Of the various methodologies used to analyze growth, the average of the most relevant methods indicates a recommended 5.0% annual academic space growth equated to 145,000 GSF over the 10-year time frame.

Research

With research expenditure growth, targeted at greater than 5% annually, being a central focus for UNTHSC, the need for research space is correspondingly the greatest. The recommended 5.8% annual research space growth equates to 200,000 GSF over the 10-year time frame with some of this amount potentially accommodate by utilizing re-aligned space.

Clinical

UNTHSC is currently shifting to a distributed clinical delivery model where care provision takes place off campus (accommodated by partnerships with industry). Due to this evolution in clinical practice, no additional clinical space is forecasted. In fact, this model may result in a decrease of clinical space on campus. Some clinical space will need to be maintained to support patient care, academic, and research needs.

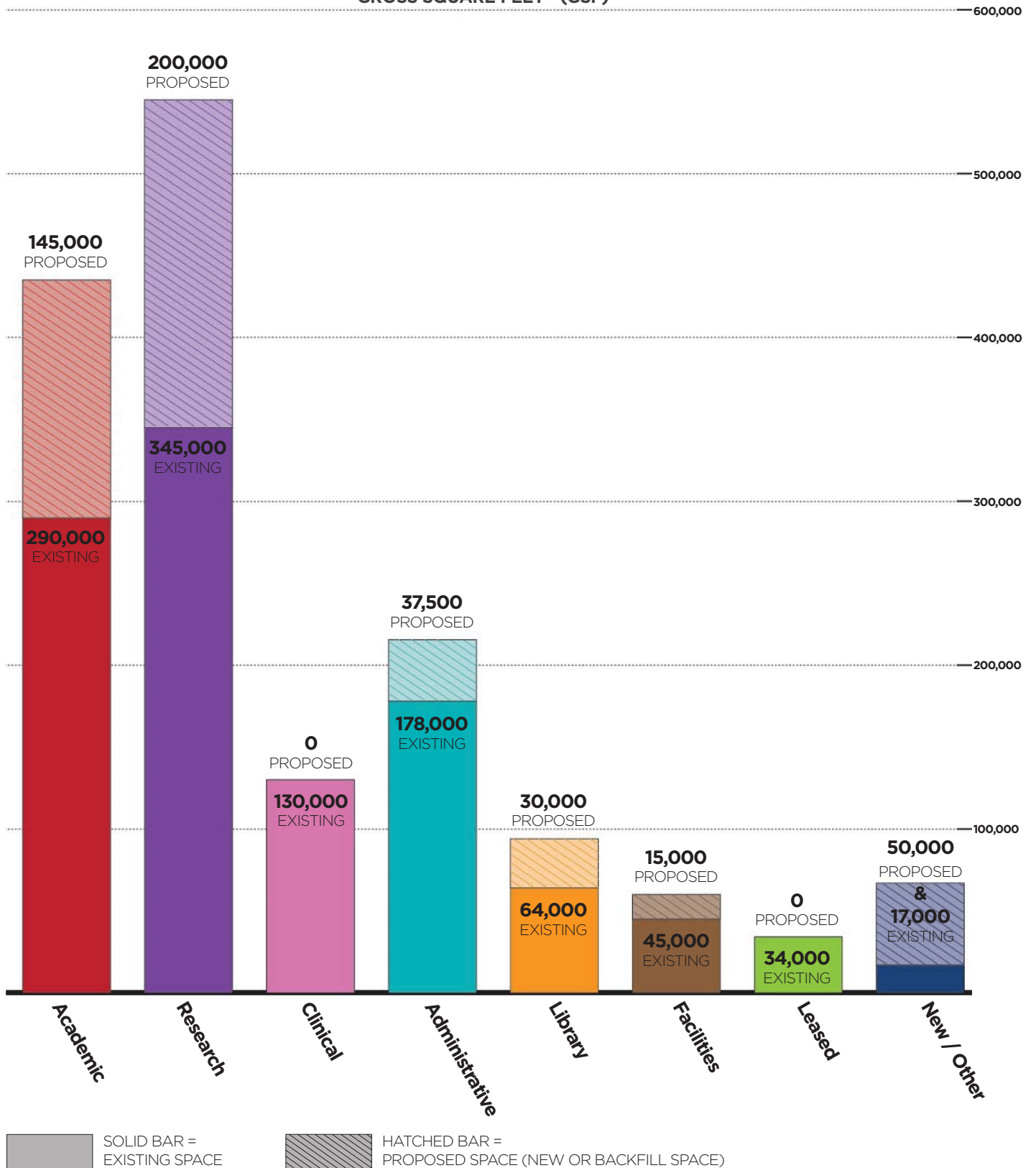
Other Space Types & Further Analysis

Minimal growth in space is expected in other space type categories and such growth primarily occurs to support academic and research needs, along with supporting an enhanced campus experience. The total recommended space needs for all space types is 477,500 GSF.

Refer to the Appendix for further analysis of space projections and an overview of data sources.

Space Type	Proposed Additional GSF in Near Term (10 years)
Academic	145,000
Research	200,000
Clinical	0
Administration	37,500
Library	30,000
Facilities	15,000
Leased	0
New / Other	50,000
TOTAL	477,500

Space Needs Projections GROSS SQUARE FEET - (GSF)



NEAR TERM INITIATIVES



Near-Term Vision

Near-term growth focuses on continuing the recent momentum created by the construction of CBH and IREB to enhance the campus' presence along Camp Bowie Boulevard through the replacement of Lots 6 and 19 with new character buildings. The Near-term vision also provides significant opportunity to better align existing programs (Planning Principle #2) as well as create new indoor and outdoor hubs (Principle #3).

Parking counts increase significantly during this phase due to the creation of two new parking structures and expansion of the existing Clifton Parking Garage. This growth is required as a prerequisite to mid-term development which will see a net decrease in parking count.

Buildings	GSF
Existing	1,103,000
Near-term Vision (net)	437,000
TOTAL	1,540,000

Parking	Spaces
Existing	1,846
Near-term Vision (net)	1,121
TOTAL	3,338

MID TERM INITIATIVES



Mid-Term Vision

The mid-term vision for the UNTHSC campus focuses on continued build out of the central campus through redevelopment of the Modlin Garage block (academic or partnership uses), new EAD and RES entrances to the Library Courtyard (expanding out to create collaboration space) and replaced bridge, expansion of EAD’s south entry, and development on Lot 7 (campus support).

Parking counts decline as surface Lots 7 and 8 are developed upon. This development was predicated by prerequisite expansion in the near-term, which enables and supports mid-term campus development. The overall parking does not drop below the recommended ratio.

Buildings	GSF
Existing	1,103,000
Near-term Vision (net)	437,000
Mid-term Vision (net)	380,000
TOTAL	1,920,000

Parking	Spaces
Existing	1,846
Near-term Vision (net)	1,121
Mid-term Vision (net)	-625
TOTAL	2,824

LONG TERM INITIATIVES



Long-Term Vision

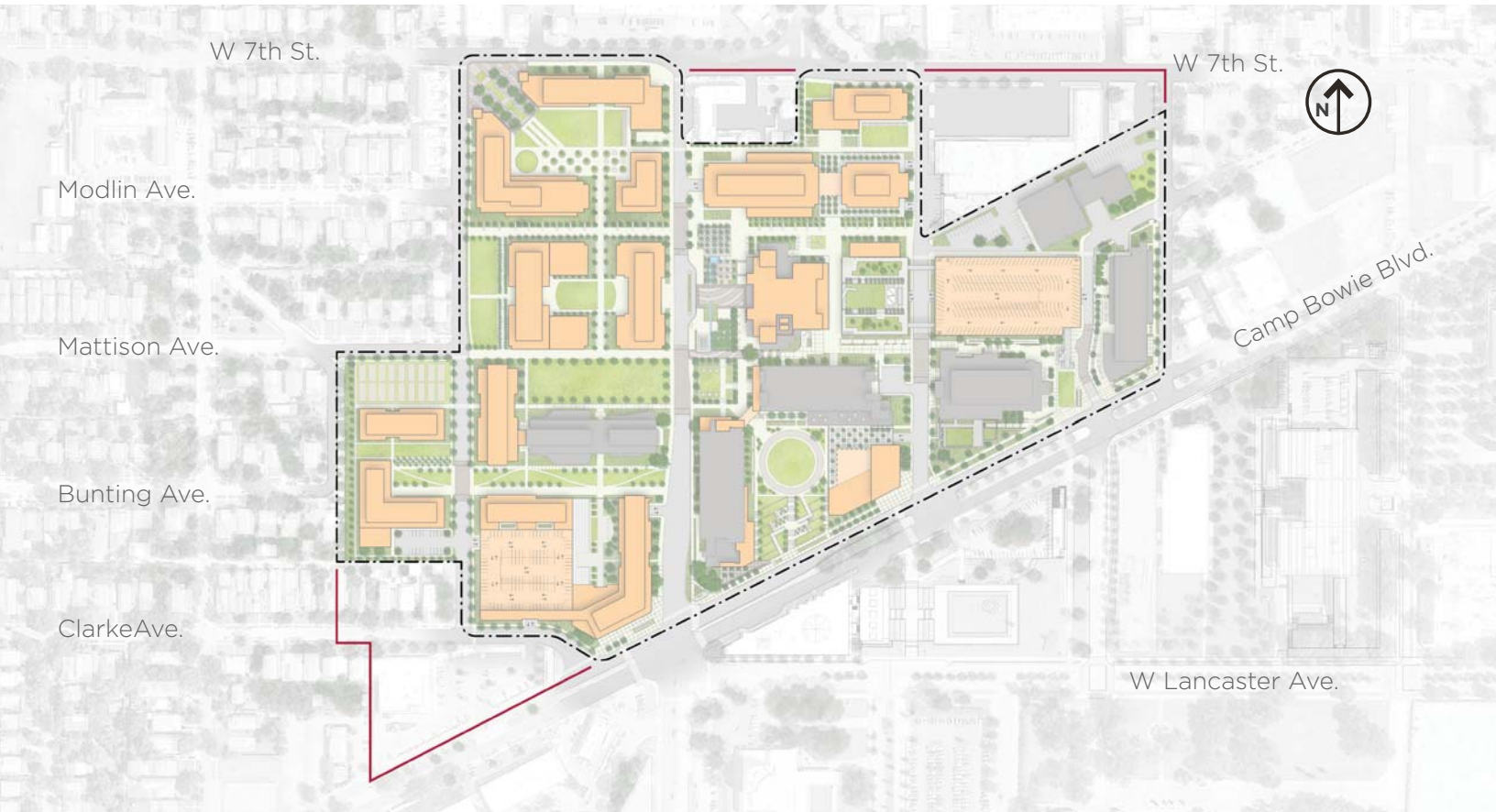
Long-term development focuses on the West 7th Street corridor, replacing existing low density and aging structures, and extension of the campus character north. Uses in this corridor have been preliminary identified as ideal for industry and community partnership uses and may be ideal for some ground-floor commercial integration.

Despite removing multiple surface lots, parking increases in line with the recommended ratio through the development of a new garage beneath the Health Pavilion site. Garage entry is at grade along Montgomery Street before descending down multiple levels with the grade change to also have entry at grade along Clifton.

Buildings	GSF
Existing	1,103,000
Near-term Vision (net)	437,000
Mid-term Vision (net)	380,000
Long-term Vision (net)	400,000
TOTAL	2,320,000

Parking	Spaces
Existing	1,846
Near-term Vision (net)	1,121
Mid-term Vision (net)	-625
Long-term Vision (net)	863
TOTAL	3,246

FUTURE OPPORTUNITIES




Acquisition Boundary

The 2018 Campus Master Plan illustrates capacity within the existing campus boundary to meet the Health Science Center’s needs for decades to come.

The acquisition boundary is an effective long-range planning tool for the university and community’s decision-making if or when particular parcels become available. Due to the fact that these parcels are not necessary for campus growth within the planning horizon detailed by this master plan, this document does not recommend acquisition of these parcels. Instead, as market opportunities arise to acquire parcels within this boundary, the campus should make individual determinations of the merit of acquisition at that point in time.

While these parcels are not required to meet campus growth needs for the foreseeable future, each area included does offer some advantage to the campus. Chief opportunities include further improvement to the campus environment and pedestrian safety, increased efficiency of future building footprints where the campus boundary currently creates difficult sites, and increasing campus presence and identity along Camp Bowie Boulevard and West 7th Street.

-  Campus Boundary
-  Acquisition Boundary

UNIVERSITY OF NORTH TEXAS
HEALTH
SCIENCE CENTER

CARL E. EVERETT
EDUCATION & ADMINISTRATION

CAMPUS DEVELOPMENT GUIDELINES

DESIGN ELEMENTS & LANDSCAPE MATERIALS

6

CARL E. BERRYETT
Government & Administration

CAMPUS DEVELOPMENT GUIDELINES

Overview

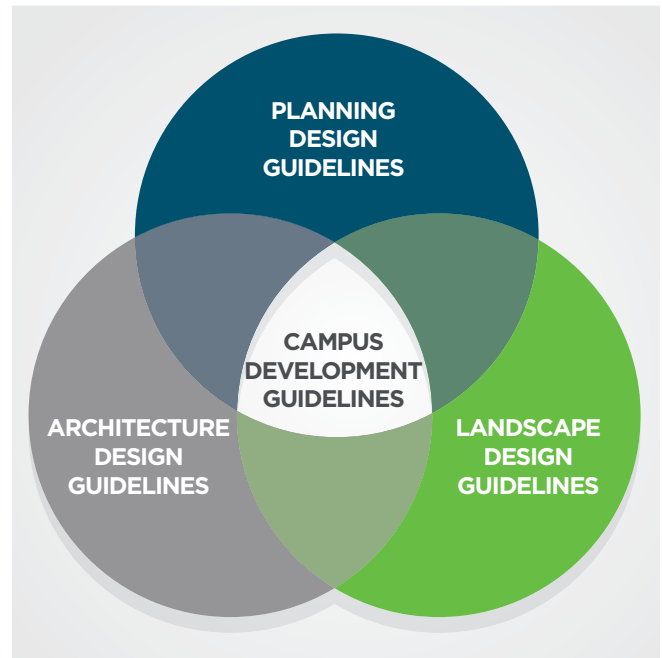
The Campus Development Guidelines provide the essential high-level guidance needed to realize the vision set forth in the 2018 Campus Master Plan. These guidelines promote achieving a campus setting that is functional, maintainable, memorable, and distinct. A campus where all elements relate to establish a cohesive whole. Encouraging visual unity and functional consistency in the overall physical environment, this set of guidelines reinforces the unique character that is part of the UNTHSC identity.

Organization of the Guidelines

The Campus Development Guidelines contains three distinct sets of guidelines related to different campus systems and scales:

- 1. Planning Design Guidelines:** defines campus-wide elements necessary to implement a consistent and cohesive physical environment.
- 2. Architecture Design Guidelines:** provides the design vocabulary for the construction of new buildings and renovation of existing buildings.
- 3. Landscape Design Guidelines:** directs the application of landscaping elements and site materials to ensure a consistent open space character exists across campus.

The diagram at the top of the next column conceptually illustrates the interdependence of these three guideline sets. Applying the guidelines as a unified whole to each project will yield inclusive and comprehensive results.



Project Compliance

The master plan and guidelines provide a foundation for the internal review of individual projects to ensure that each project advances the institution's commitment to the continued improvement of the campus' physical environment. Further details on the review and approval process for projects under the scope of the 2018 Campus Master Plan can found in this chapter starting in the Planning & Design Review Process section.

PLANNING DESIGN GUIDELINES

Overview

The Planning Design Guidelines define campus-wide elements necessary to implement a consistent and cohesive physical environment. These considerations span both exterior and interior environments to achieve unity across the campus setting. These guidelines align future buildings with the Framework Open Space and Connectivity Networks. They also extend to the campus' edge, shaping the relationship that exists between the institution's boundary and adjacent neighborhood.

The Planning Design Guidelines provide further definition of future building sites, detailing potential capacities that indicate approximate footprints and a recommended number of floors. These capacity profiles balance optimizing land use and program spaces with the Framework Networks while also responding to the unique conditions presented by the variety of edge conditions.

The Planning Design Guidelines identify key Character Components that, due to their prominence, serve an essential role in expressing the campus character and identity. Their exterior configuration, programming that includes active elements and articulation of architectural attributes, all play a crucial role in distinguishing these prominent locations from the remaining campus context.

Exterior Planning Elements

The Exterior Planning Elements direct the configuration of future projects at a scale that considers the entire campus and its immediate context. The orthogonal arrangement of buildings is the predominant organizational element

evident in the layout of the existing campus. The 2018 Campus Master Plan maintains this orthogonal alignment.

There are five categories of elements within the Exterior Planning Elements:

- Building Orientation and Capacity Profiles
- Edge Transitions
- Framework Alignment and Setbacks
- Site Entrances
- Building Typology

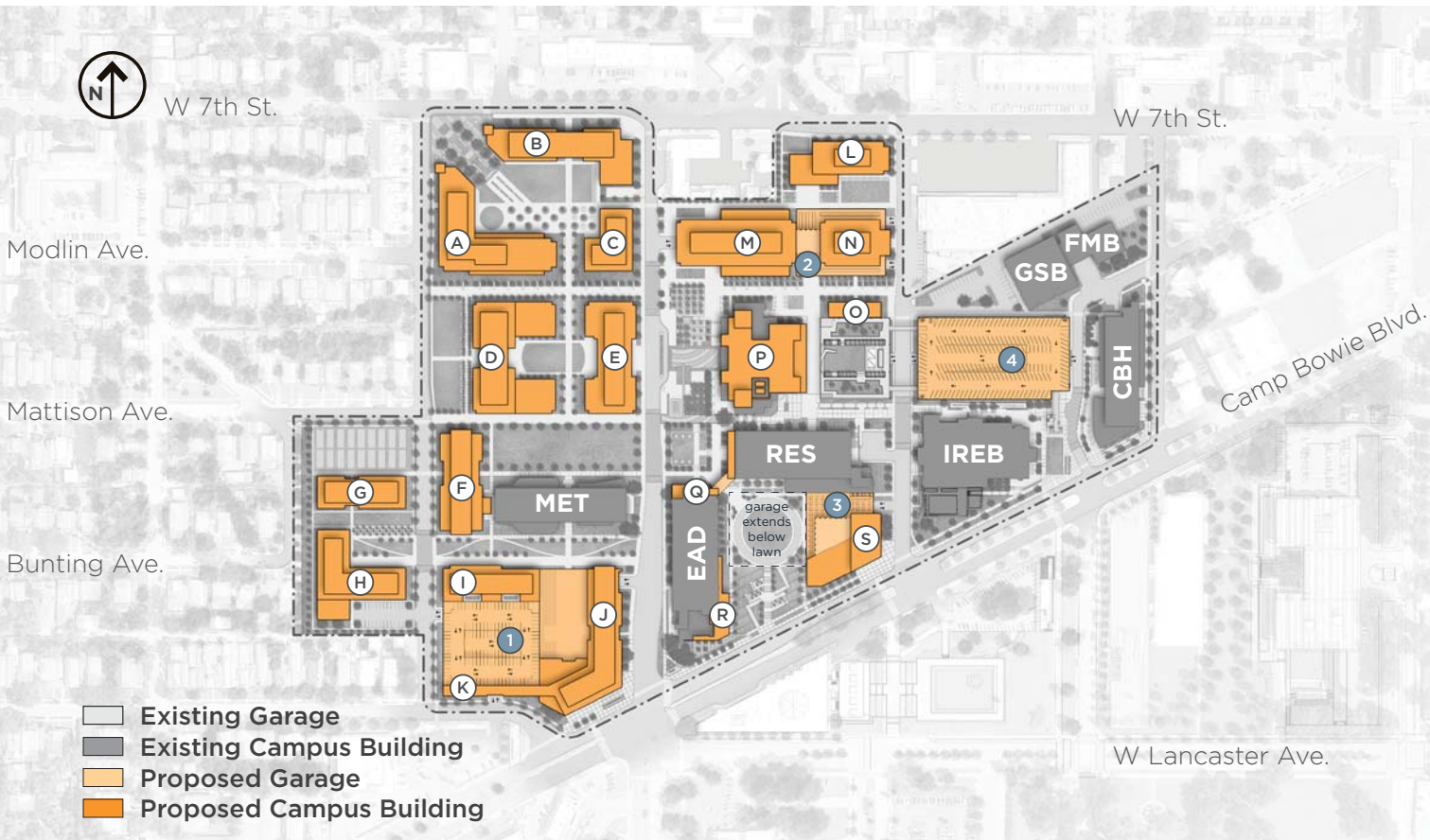
Interior Planning Elements

Informing the selection, inclusion, and location of specific program components on campus, where applicable, Interior Planning Elements can positively impact the success of individual building projects while simultaneously improving the overall campus experience. This is clearly evident in the successful relationship between the MET Lawn and ground-level interior spaces of the MET Building.

There are six categories of elements within the Interior Planning Elements:

- Exhibit Active Spaces
- Distribute Collaborative Spaces
- Connect Interiors Visually
- Create Permeable Ground Levels
- Display Learning and Discovery
- Share Knowledge

The Exterior and Interior Planning closely interrelate and influence one another. Application of the Planning Design Guidelines expresses the Framework networks and spans the varying physical outdoor and indoor environments found across campus.



Building Position and Projected Capacities

The master plan defines a conceptual layout and orientation for future capital projects that result in approximate metrics that will help inform more detailed planning as the need for these future projects arise.

Building Orientation

The orientation of existing buildings on campus predominately mimics the orthogonal arrangement of the city street grid. There are few exceptions to this. Along Camp Bowie Boulevard, CBH responds to the non-orthogonal angle the street and sets a precedent for aligning the building edge to Camp Bowie Boulevard. Likewise, GSB and FMB are driven by boundary constraints. Whenever possible, new buildings should orient to the existing

orthogonal grid. However, it is acceptable to break orthogonal orientation along Camp Bowie Boulevard or when dealing with unique site constraints presented by campus boundaries.

Capacity Profiles

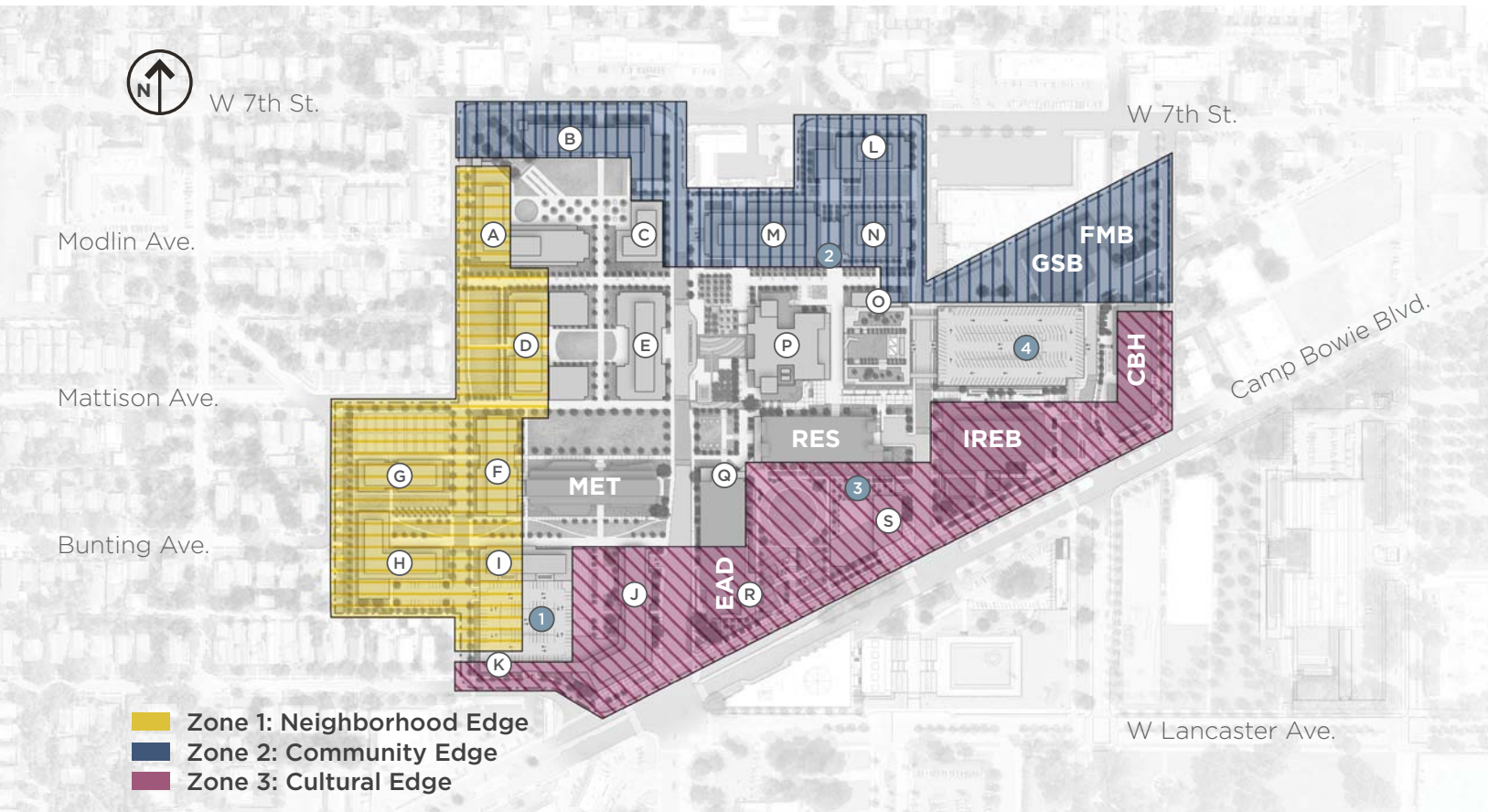
The table on the adjacent page illustrates recommended building capacity profiles for:

- Approximate Area (GSF)
- Approximate Footprint (Feet)
- Total Floors
- Assumed Levels of Parking

These capacities serve to inform ongoing capital planning and should act as the starting point for detail planning of future projects.

General Recommendations				
Proposed Building	Approximate Area (GSF)	Approximate Footprint (Feet)	Total Floors*	Assumed Levels of Parking
A	74,250 GSF	230' x 75' + 180' x 75'	3	1 (at grade)
B	90,000 GSF	335' x 75' + 50' x 75'	4	0
C	25,000 GSF	135' x 100'	2	0
D	138,000 GSF	180' x 75' + 180' x 75'	4	0
E	96,000 GSF	245' x 90'	4	0
F	95,000 GSF	225' x 90'	5	0
G	40,500 GSF	195' x 75'	3	0
H	68,250 GSF	200' x 75' + 120' x 75'	3	0
I	72,000 GSF	220' x 75'	5	1 (below grade)
J	180,000 GSF	320' x 75'	7	1 (at grade)
K	18,500 GSF	225' x 25'	3	1 (below grade)
L	66,250 GSF	220' x 75'	5	0
M	191,000 GSF	265' x 100'	6	1 (at grade) 3 (below grade)
N	72,500 GSF	150' x 100'	6	1 (at grade) 1 (below grade)
O	7,600 GSF	120' x 35'	2	0
P	64,500 GSF	160' x 155'	5	0
Q	23,850 GSF	105' x 20' + 105' x 20'	4	0
R	24,800 GSF	200' x 50'	4	0
S	45,000 GSF	175' x 65' + 45' x 65'	3	1 (partial at grade)
Garage 1	260,000 GSF	225' x 180' + 280' x 380'	-	1 (at grade) 4 (below grade)
Garage 2	175,000 GSF	460' x 180'	-	4 total (site grade varies)
Garage 3	60,000 GSF	320' x 180'	-	1 total (site grade varies)
Garage 4	60,000 GSF	335' x 180'	-	1 additional (added to existing)

* Note: Total floors excludes basements and penthouses. Inclusion of these features, in addition to the notated total floors, is permissible pending UNT System and UNTHSC approval.



Edge Transition Zones

Campus Transition Zone 1: Neighborhood Edge

Buildings in the Neighborhood Edge transition zone must be designed to create a respectful transition from the campus to the North Hi Mount Neighborhood. To accomplish this, buildings have been planned between two stories and four stories depending on proximity to single family houses. Top floors should step back to further reduce the perceptual height of each building.

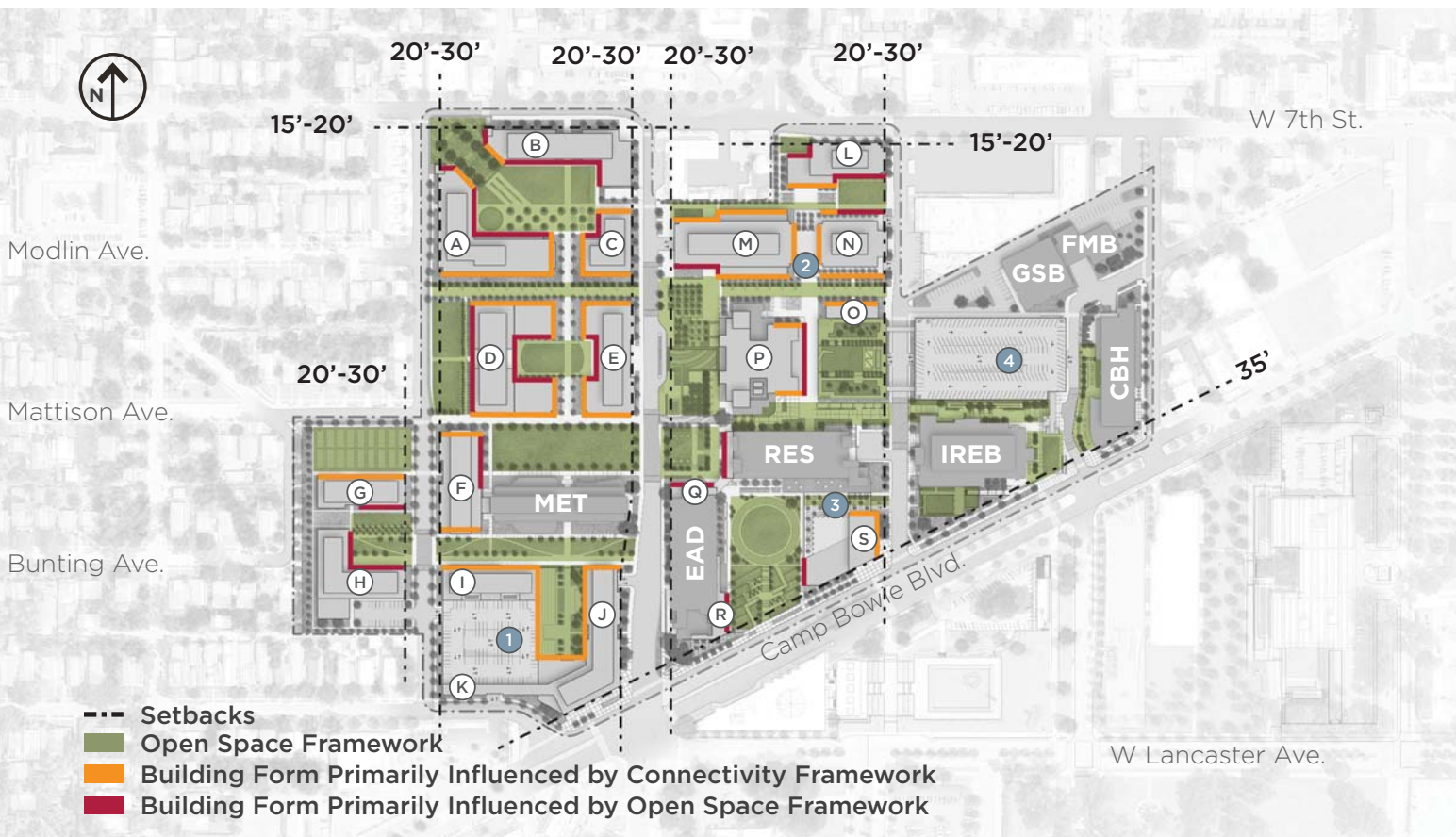
Campus Transition Zone 2: Community Edge

Future development within the Community Edge transition zone should be designed as a response to the conditions and architectural character that already exist along West 7th Street. Buildings

should be mid-density (3-5 stories), mixed-use, and have ground levels with active uses that directly front the sidewalk along West 7th Street.

Campus Transition Zone 3: Cultural Edge

The Cultural Edge transition zone contains the most visible and prominent sites on campus. New buildings and landscape elements within the zone should be designed explicitly to enhance the institution’s presence along Camp Bowie Boulevard. Key characteristics should include open spaces oriented to the adjacent civic uses, high-density buildings (4-6+ stories), exceptional architectural character and design, and clear branding. Additionally, all new buildings along Camp Bowie Boulevard should meet the Character Component designation.



Framework Alignment & Setbacks

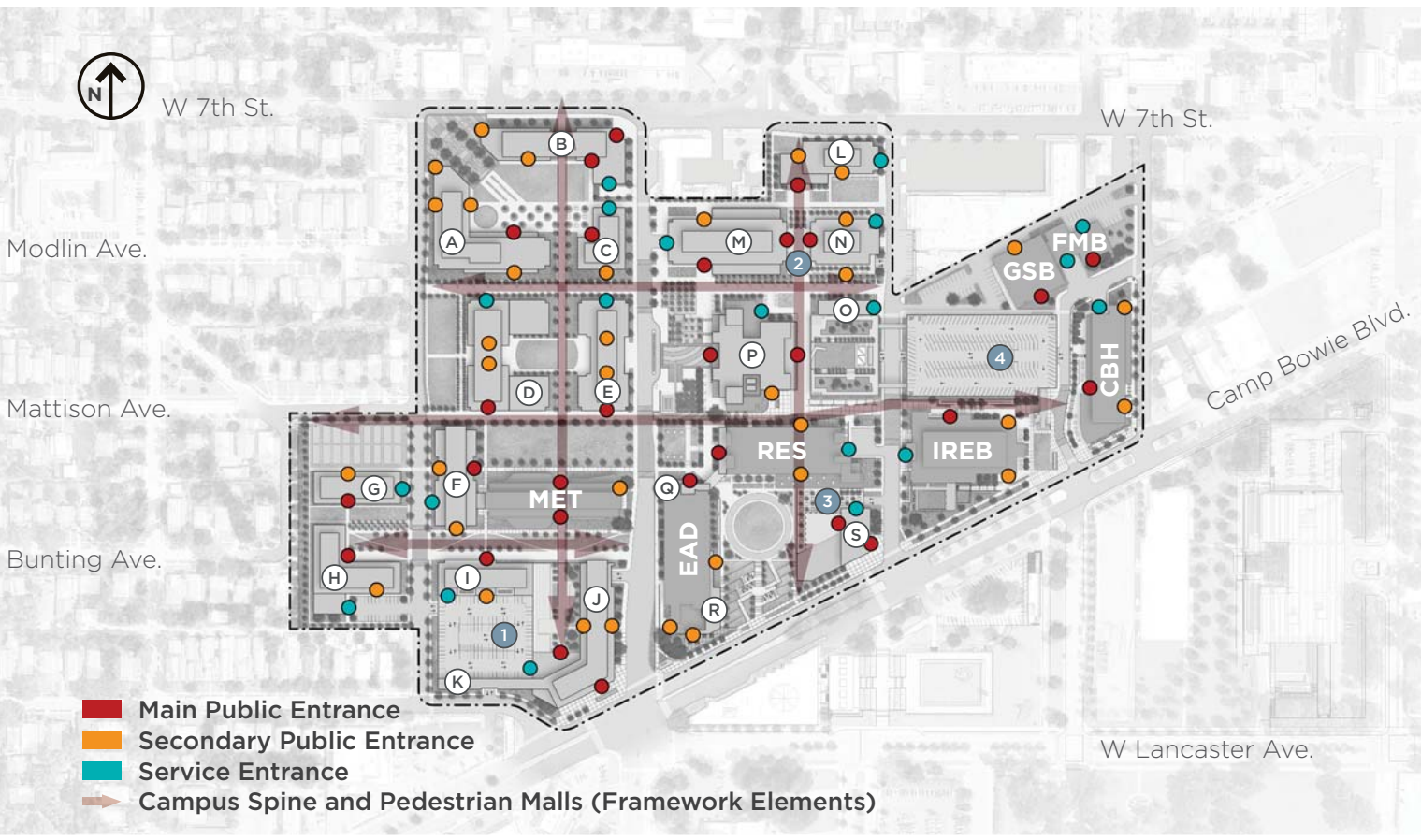
Framework & Building Form Alignment

Detailed in the Framework Chapter, the Open Space and Connectivity Frameworks create an organizational pattern for future growth that promotes connectivity, creates ease of access, defines and activates exterior space, and creates a positive campus experience. The diagram above identifies building faces where forms should respond to the Framework to ensure a cohesive on-campus experience. Faces primarily influenced by the Open Space Framework should use building form to define key open space elements, contain main building entrances, have a greater amount of glazing, and create strong connections to the outdoors. Faces influenced by the Connectivity Framework should use building form to reinforce exterior pedestrian movement.

Setbacks

To ensure a consistent physical identity along campus edges and interior public roadways, future development should align to the designated setbacks. The following setbacks have been determined appropriate based on City of Fort Worth requirements or alignment to existing context (both on and off campus):

- Camp Bowie Boulevard: 35' setback along the entire length (aligns with CBH).
- West 7th Street: variable 15-20' setback filled with sidewalk and plantings to create a strong urban edge.
- All other roadways: 20-30' variable setback. When present, align setback to adjacent building edges.



Site Entrances

The diagram above identifies a hierarchy of entrance types for each building and places them in the location that maximizes alignment with the Framework.

Main Public Entrances

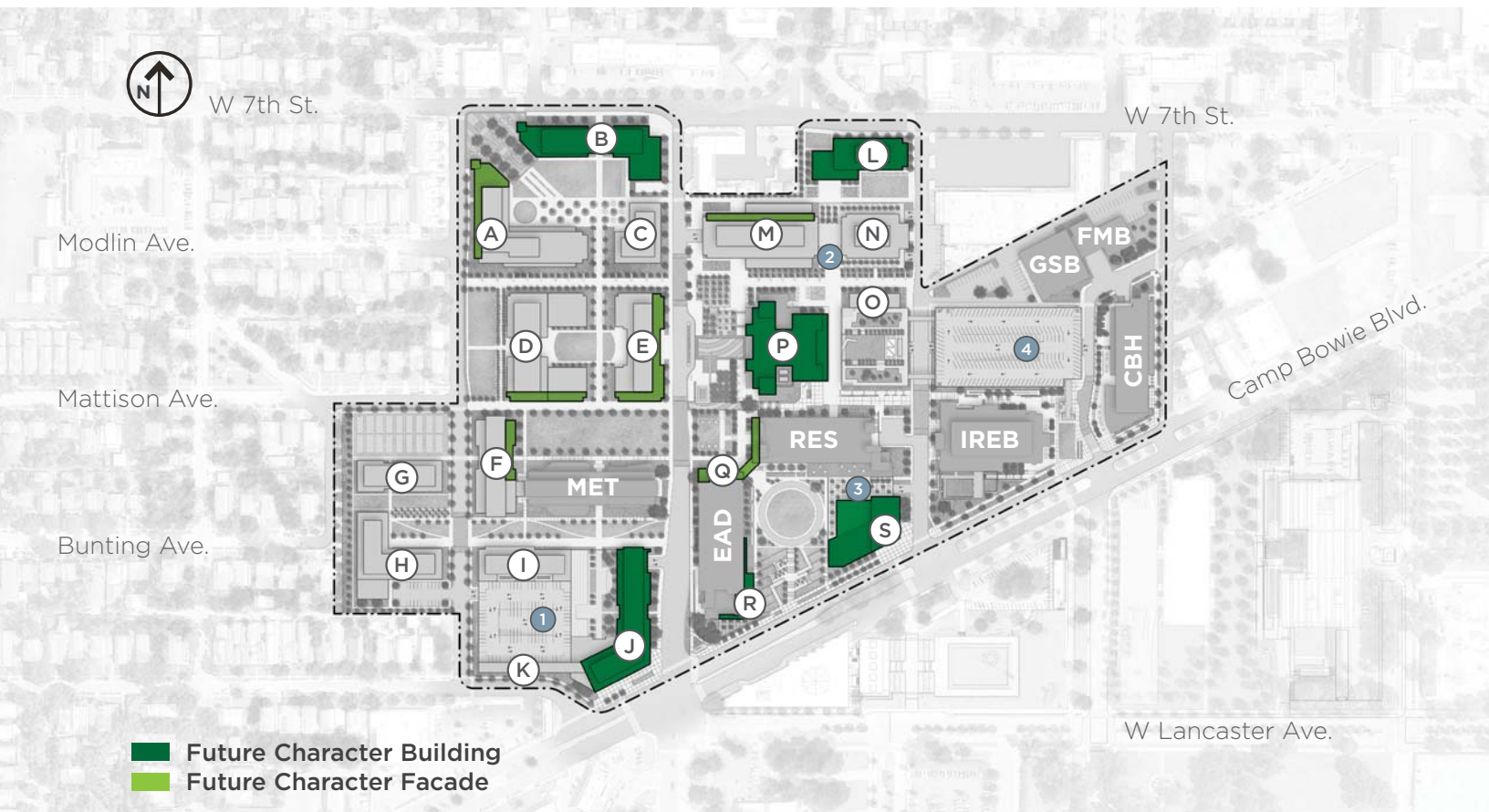
Main public entrances are the intended primary entry point into every building and should align to the Campus Spine, pedestrian malls, major green spaces, or gateways. On the exterior, special elements should be added to the building face to help campus users identify the entry from a distance. Additionally, pavement material may change near the door to guide people the entrance. Main public entrances interiors should correspond to the primary building lobby, circulation core, interior wayfinding, and any active uses (dining options, collaboration spaces, display spaces, etc.).

Secondary Public Entrances

Secondary public entrances provide alternate entrances to buildings. Though typically containing less dedicated public space than the main entrances, secondary entrances should at minimum contain a small foyer that includes building-specific information and wayfinding.

Service Entrances

Service access and entries are located in positions that will minimize impact on the campus experience. Service entrances should be coordinated, aligned, or even shared with adjacent buildings when possible to minimize the disruption caused across campus. Where possible, screening elements (such as walls, screens, and landscape) should be integrated into the building design to mask service entries and elements.



Character Components

The diagram above identifies focal buildings and facades on campus that require thoughtful attention from architects, facilities planning and construction staff, and operations staff to ensure that each site maximizes its potential contribution to the overall on-campus experience and institutional identity.

Character Buildings

Character Buildings occupy highly visible locations along the edges of campus, or in the heart of campus in the case of the library, that serve to establish and portray the identity of UNTHSC. These buildings define campus gateways, key open spaces and the overall quality and experience of campus. Character Buildings require careful consideration of program and context throughout the design and review process.

Character Facades

Character Facades are sections of building facades on Context Buildings that, due to their location and visibility, serve an important role in defining and supporting the institutional identity and overall campus experience. These Character Facades typically face prominent open spaces or are outward facing towards the community along the campus edges.

Context Buildings

Context Buildings make up the remainder of proposed buildings. While not located on prominent sites, Context Buildings still play a major role in shaping the on-campus experience and campus identity. As such, Context Buildings should meet all guidelines.

Interior Planning Elements

As an urban campus, UNTHSC buildings endeavor to support a dynamic pedestrian ground plane that links the interior and exterior activities that occur across the campus. The Interior Planning Elements outlined on the following pages express the importance of the UNTHSC enterprise by showcasing these important activities. Where appropriate, future building projects should actively work to include these elements to ensure a high-quality and vibrant campus environment that supports the desired on-campus experience for all users.

Exhibit Active Spaces:

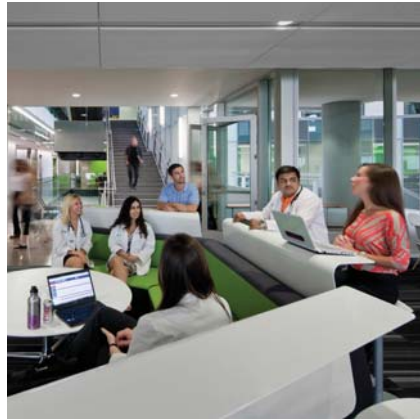
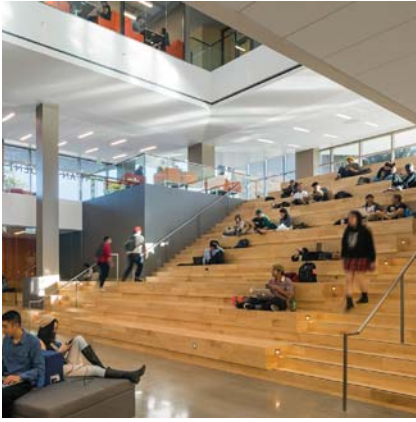
Locate highly utilized, shared public spaces within building ground floors and adjacent to primary Framework Connectivity and Opens Space Network elements. Examples of active spaces may include lobbies and lounges, dining spaces, bookstore or campus-related retail spaces, recreation spaces, exhibit and gallery spaces, group studies spaces, and gathering areas.

Distribute Collaborative Spaces:

Collaboration is core to the UNTHSC value set. Collaborative spaces should be intermingled with or near active spaces, and distributed into buildings across campus to strengthen the Framework Hub Network. A variety of collaborative space types should be provided, including formal and informal, large and small, and hi-tech and low-tech, to meet the diverse needs and engagement styles of the campus community.

Connect Interiors Visually:

Buildings should be designed to create strong indoor-outdoor connections by showcasing the active public and collaborative spaces contained within. These uses should be apparent and visible to campus users outside of the building through architectural features, finishes, and elements that accentuate interior activities. It is also critical to consider the reverse view, looking towards the exterior from inside each building, to create strong visual connections.



Create Permeable Ground Level:

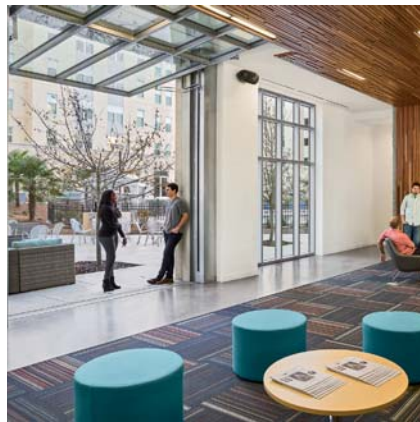
To support visible interiors and visual connection to activities, ground levels should be visibility and physically permeable. Provide transparency through ample glazing and avoid large expanses of solid. Reinforce legibility of building entry points and connections through buildings along primary spine and mall pathways.

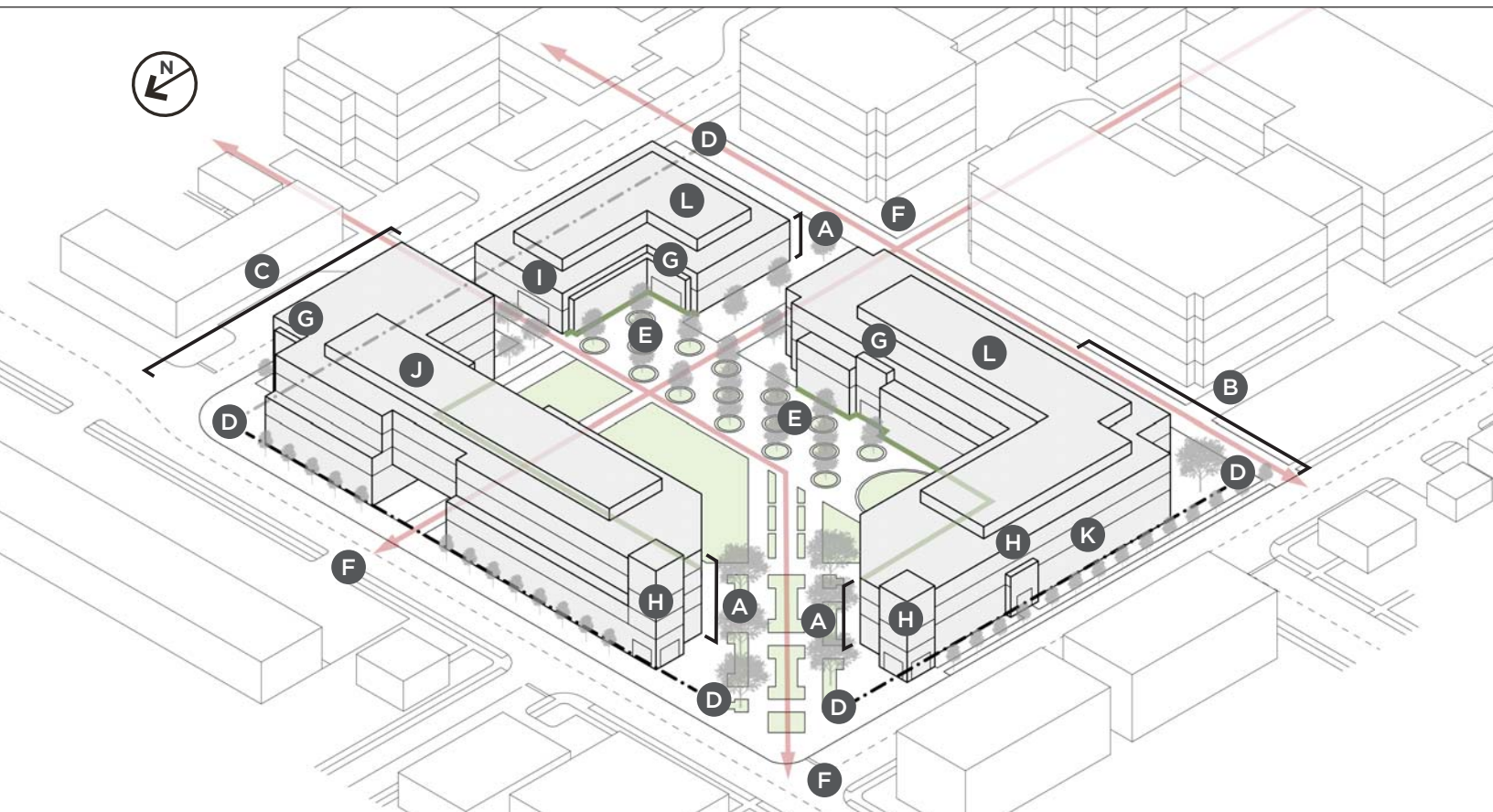
Display Learning & Discovery:

Discovery is fundamental to what UNTHSC does, and is a process and activity that is mutually shared and undertaken by the entire campus community. Within buildings, visibility from public space into areas of learning, research, care, and discovery directly connects people, purpose, and place together. Wherever possible, new buildings should be designed to exhibit the institution's core functions. This connection is one way that UNTHSC's enterprise can be physically expressed.

Share Knowledge:

Reinforce the visibility of UNTHSC academic, research, and clinical efforts through the incorporation of static and interactive displays within interior public spaces. These spaces should be distributed across campus and closely associated with collaborative spaces. Sharing the knowledge of UNTHSC illustrates its great value to the students, staff, faculty, and the broader community.

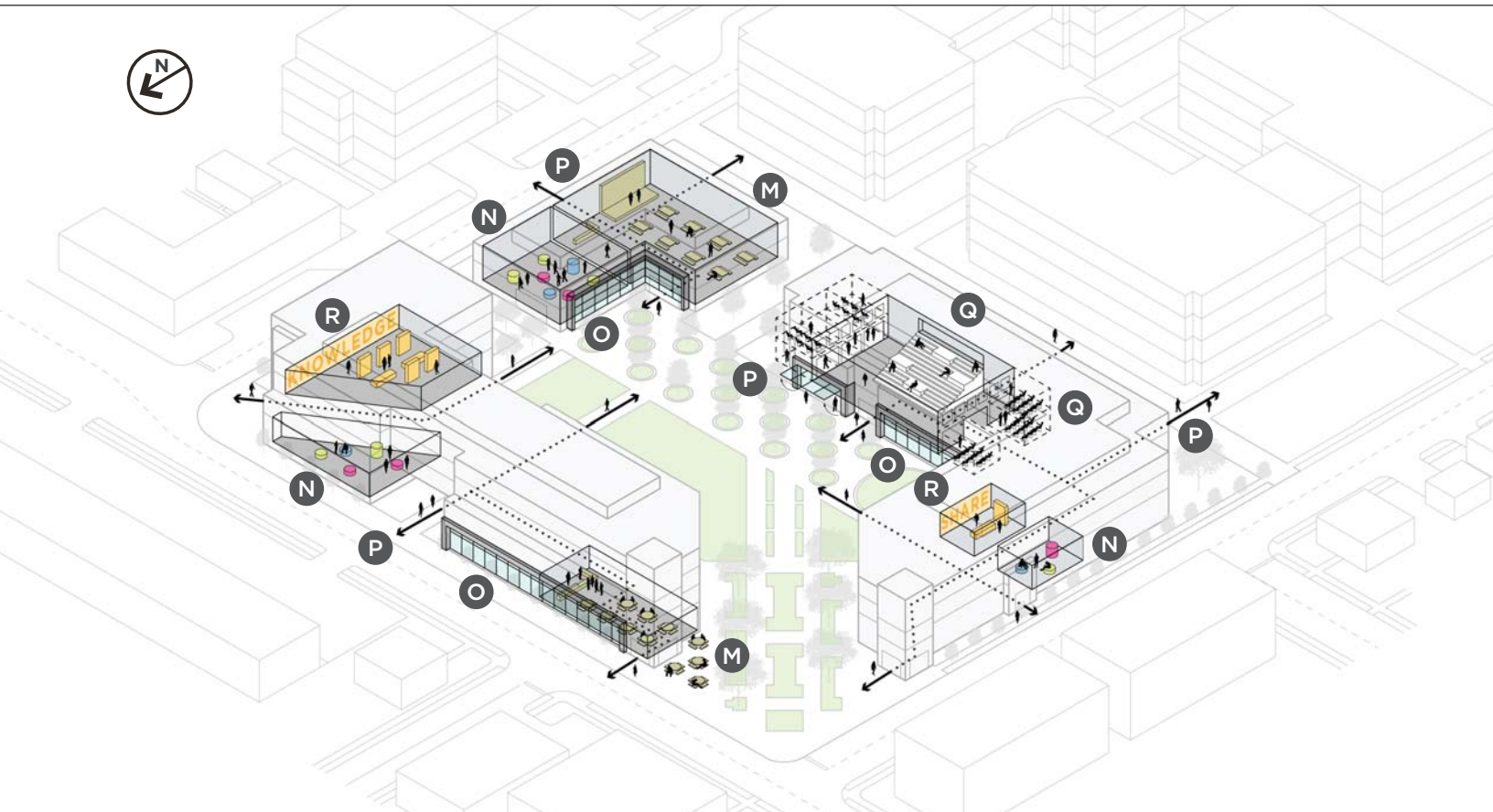




Summary of Planning Design Guidelines

Exterior Planning Elements

- | | |
|---|--|
| A Building Height | G Primary Entrance Location |
| B Transition Zone 1 Character | H Secondary Entrance Location |
| C Transition Zone 2 Character | I Servicing Location & Coordination |
| D Align to Setbacks | J Character Building |
| E Coordinate to Open Space Framework | K Character Facade |
| F Coordinate to Connectivity Framework | L Context Building |



Interior Planning Elements

- | | |
|---|--|
| <p>M Exhibit Active Spaces</p> | <p>P Create Permeable Ground Level</p> |
| <p>N Distribute Collaborative Spaces</p> | <p>Q Display Learning and Discovery</p> |
| <p>O Connect to Interiors Visually</p> | <p>R Share Knowledge</p> |

ARCHITECTURE DESIGN GUIDELINES

Overview

The Architecture Design Guidelines provide a design vocabulary for the construction of new buildings and renovation of existing buildings across the campus. This design vocabulary encompasses architectural attributes that are specific to individual building projects, but directly interrelate and complement the Planning Design Guidelines and Landscape Design Guidelines.

These guidelines pursue shaping an enduring character that will steward the future of the physical environment without prescribing rigid solutions. Thoughtful application of these guidelines will appropriate the best elements of existing campus building character in future projects, while also allowing creative solutions as the campus continually evolves.

The designation of Character Buildings and Character Facades, referenced in this chapter, necessitates that these guidelines accommodate a more diverse design vocabulary than the previous master plan to support a strong institutional identity. The resulting architectural attributes in the guidelines create a structure to unify the campus environment while also acknowledging the diversification of building uses and typologies over time.

Architectural Attributes

Existing Architectural Attributes

The existing campus architectural character exhibits a number of defining attributes that contribute to its sense of consistency. Existing buildings exhibit:

- Strong volumetric forms establishing the basic massing
- Repetition of facade elements creating architectural rhythm

- Linear arrangement of windows and other elements in the building elevations
- Balance of solid and transparent materials
- Expression of vertical stair towers

Future buildings on campus will incorporate similar attributes in their design vocabulary to maintain and extend the character of the campus.

Building Massing

Simple volumetric forms with orientation reflecting the orthogonal precedent of the existing campus organization define the massing of existing buildings. Further expression of the massing, in conjunction with Building Articulation, will define the vertical hierarchy of base, body, and top.

Building Articulation

The major architectural elements of the building, along with refinement of the Building Massing, articulates the details and character of buildings. In particular, the expression of fenestration (arrangement of openings and elements on the building elevation), define the overall Building Articulation.

Building Material and Color

Simple palettes of material and color will correspond and complement the existing context of the campus. The materials and colors palettes consist of Primary, Secondary, and Tertiary components relating to and expressing the Building Massing and Articulation.

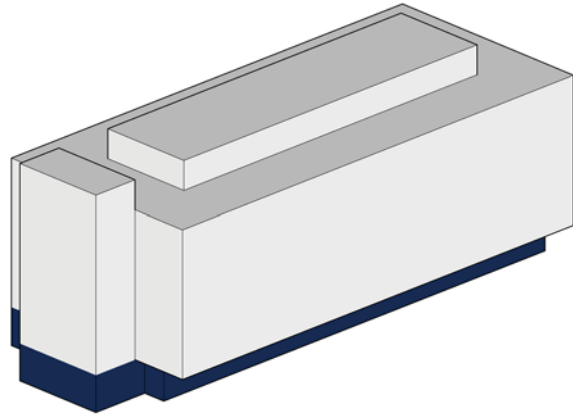
Each of the above architectural attributes - Building Massing, Articulated and Material and Color - depend upon and inform one another. Application of the Architectural Design Guidelines is an iterative balance, with each influencing the other, to arrive at an optimal outcome that reinforces the campus character.

Building Massing

Building masses should be simple volumetric forms orientated to the established orthogonal organization of campus. Further expression of the massing, in conjunction with Building Articulation, will define the vertical hierarchy of base, body and top.

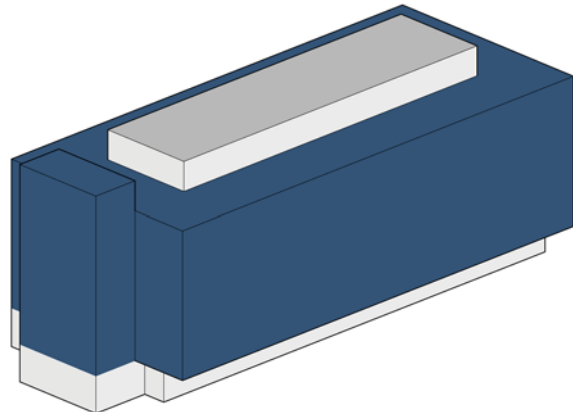
Base:

The base conditions directly relates the building mass to the dominate framework elements. By coordinating the base with the Connectivity and Open Space Networks, the building form can help reinforce and enhance the pedestrian experience. The base serves as the visual and physical link between the exterior campus and building interiors, creating opportunities for visibility and permeability.



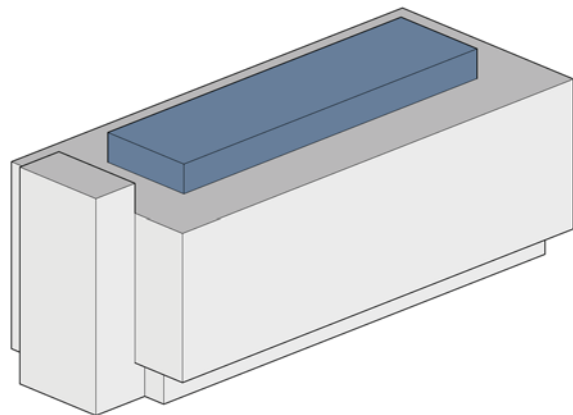
Body:

The body encompasses the most substantial portion of the building mass and is the section most expressive of the Building Articulation attributes due to the volume of fenestration. Character Buildings and Facades require further expression to the body in order to support and enhance the campus character.



Top:

The top defines the intersection of the building with the sky through simple masses and lines. Building tops may be comprised of the top most floor, mechanical penthouses, or a combination of both. In most cases, the top should be set back from the perimeter of the body. However, in certain cases, material and fenestration changes may be enough to distinguish the top. Mechanical penthouses must be explicitly set back from the perimeter of the body to diminish their presence from the ground.

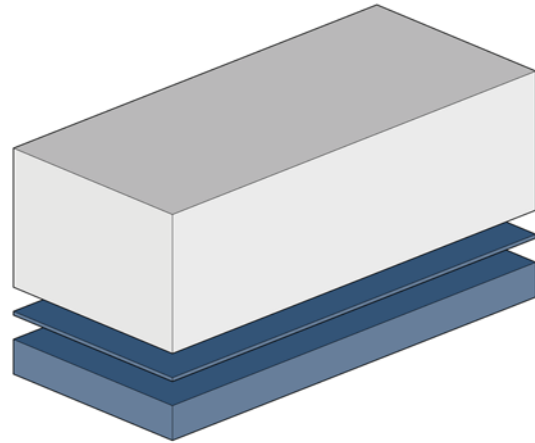


Building Articulation

Building Articulation details the character of each building through the major architectural attributes of the building through refinement of the Building Massing. In particular, the expression of fenestration (arrangement of openings and elements on the building elevation) defines the overall Building Articulation.

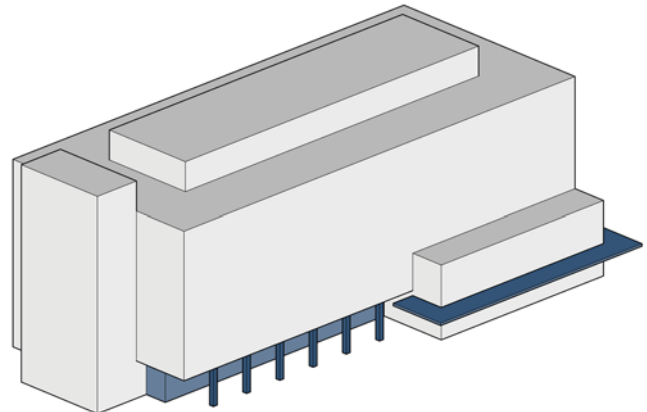
Base Zone:

The base zones serves as the primary experience for pedestrians and articulation of this area reinforces visual and physical connections; both between buildings and exterior / interior spaces. Active uses populate this zone to stimulate collaboration. Commonly defining a higher first floor will support interior needs. Additionally, the base zone clearly demarcates points of entry.



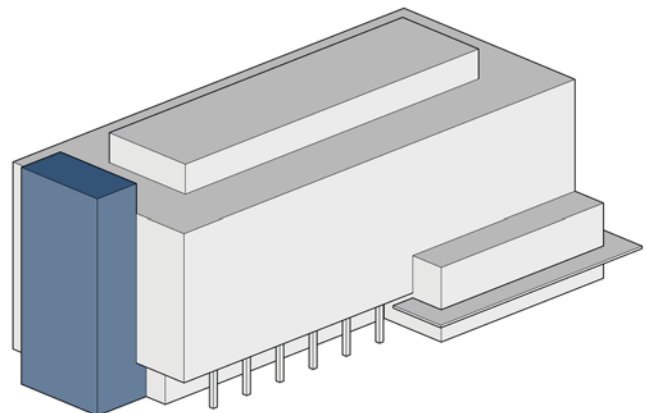
Covered Areas:

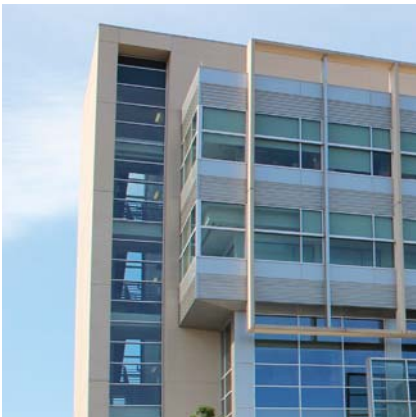
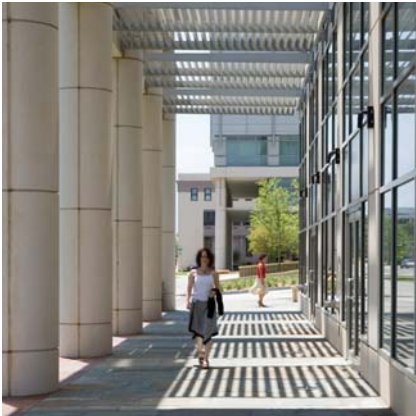
Building overhangs, loggia, canopies, and similar devices serve to provide areas of shade along key circulation routes. Covered areas can also act as transition zones between exterior and interior spaces. These areas often correspond or indicate points of entry.



Stair Towers:

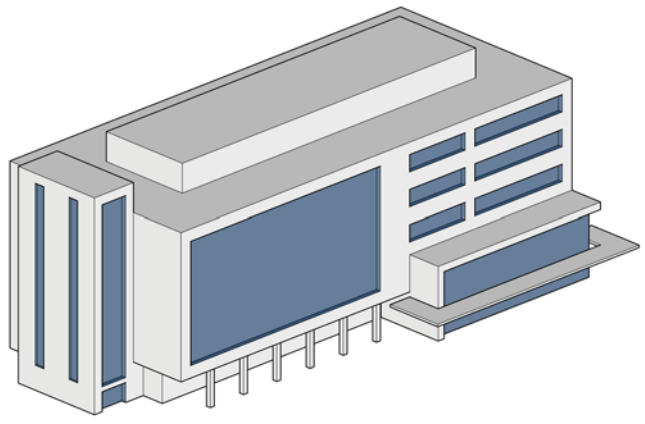
Refinement of the Building Mass occurs through articulation, detachment, and further expression of stair towers as independent building elements.





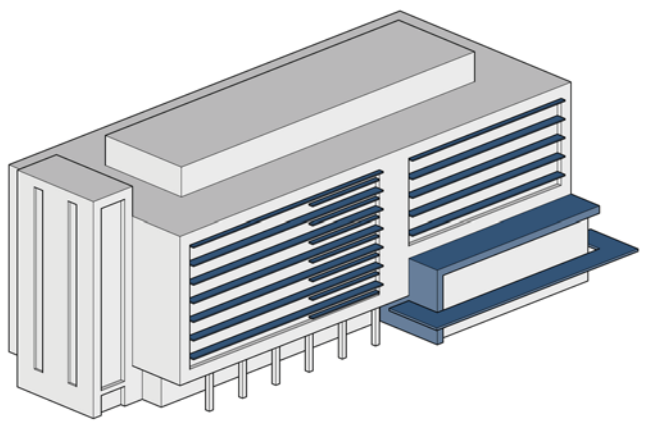
Fenestration:

Frame large expanses of windows to articulate the Building Mass while maintaining a horizontal orientation of the window pattern. Further openings in primary areas of Building Mass should maintain this horizontal orientation. The base zone allows for significant quantities of openings. Select areas may utilize vertical expression of openings and materials as architectural highlights.



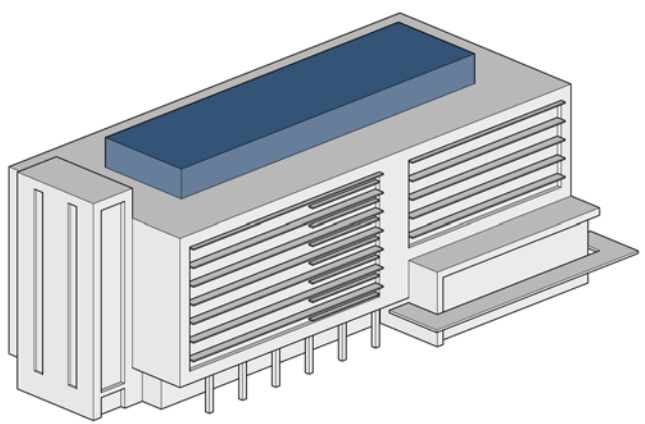
Screens and Louvers:

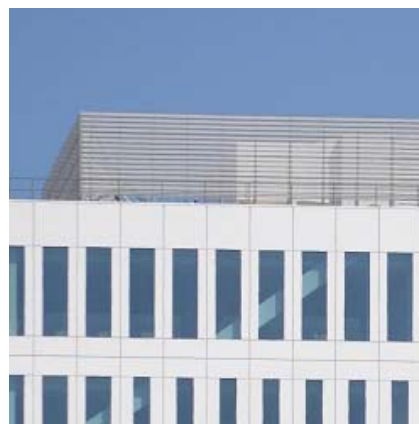
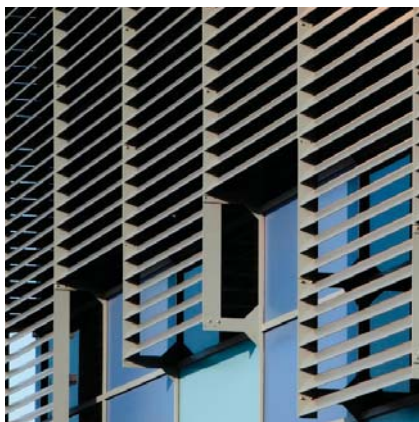
Incorporate screens and louvers integrally on large multi-story window and curtain wall sections that receive significant solar exposure. This is especially critical on glazed areas facing south.



Equipment Screening:

Setback and screen all rooftop equipment through enclosure in a penthouse or with panels to minimize visibility from the ground or adjacent building. Similarly, equipment and service entries at ground level should be screened.



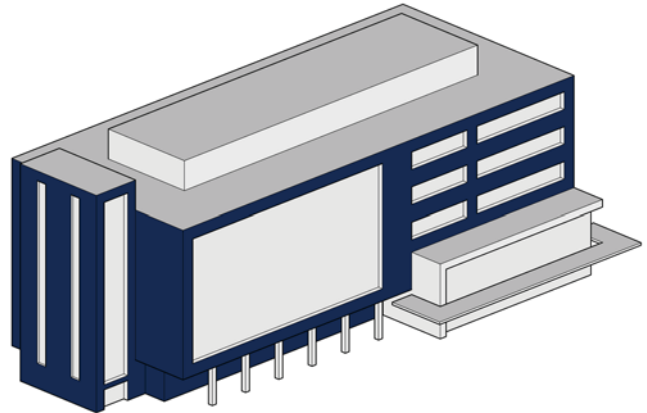


Building Material and Color

Simple palettes of material and color will correspond and complement the existing context of the campus. The materials and colors palettes consist of Primary, Secondary and Tertiary components relating to and expressing the Building Massing and Articulation.

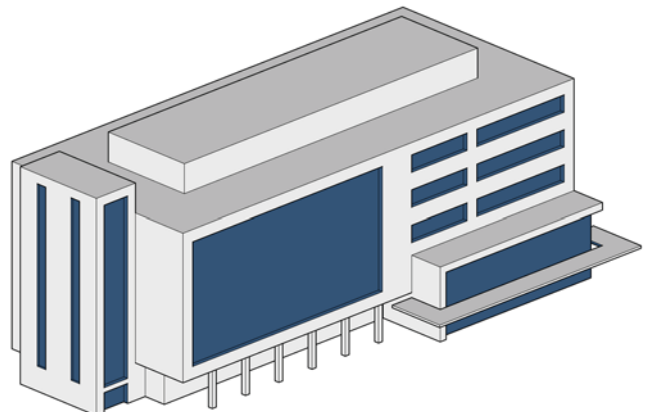
Primary Palette:

Primary materials and colors define the main building volume and should be derived from the existing campus materials and context. These materials consist mainly of limestone, cast stone, or precast concrete.



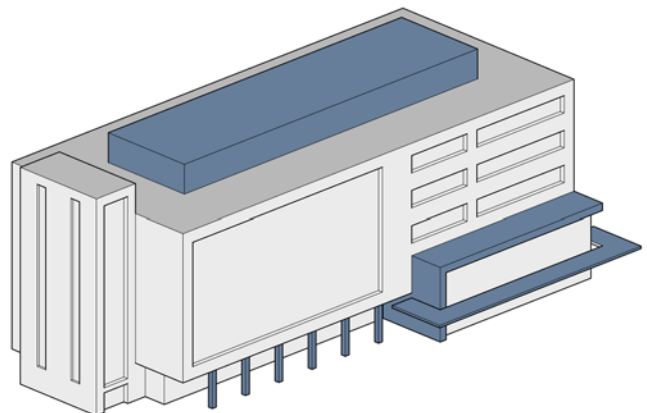
Secondary Palette:

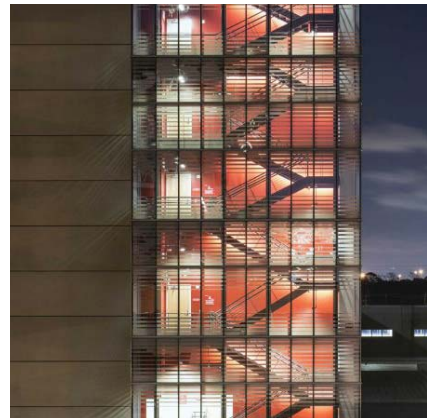
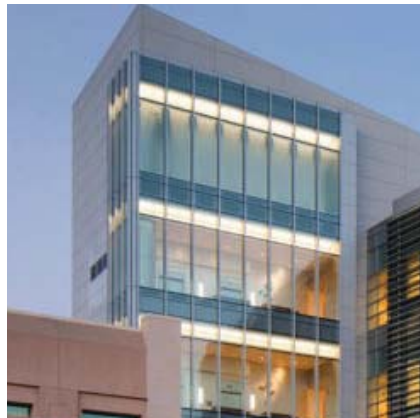
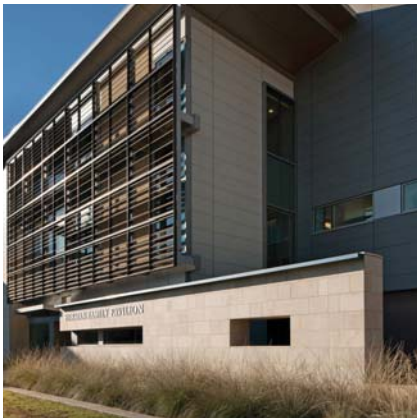
Secondary materials and colors define those components associated with refinements of the massing and expression of the fenestration. These materials consist mainly of glass, metal panel, metal screen, and special textured precast.



Tertiary Palette:

Tertiary materials and colors define special conditions that require distinct expression, such as pedestrian base zones, points of entry, loggia, and facade screening. Materials and colors should compliment primary and secondary palettes. Limit use of tertiary palettes.





LANDSCAPE DESIGN GUIDELINES

Overview

Strong, user-friendly campus environments are made up of an array of landscape and site elements. These spaces can differ substantially in type, programming, character, size, plantings, and use, but should all be planned around a consistent set of guidelines to create one cohesive campus identity. The 2018 Campus Master Plan Landscape Design Guidelines seek to build upon existing on-campus landscape elements and amenities by enhancing them with complimentary and quality paving materials, site furnishings, lighting, and plant materials. These guidelines are intended to create clear application to ensure a consistent material and space character exists across campus, aided by the below goals:

- Define a variety of open space types for a multitude of users and uses
- Provide safe and comfortable pedestrian movement across campus
- Create a strong and cohesive campus identity using consistent materials
- Plan for ease of maintenance and sustainable practice where possible through plant selection, location, and hardscape finishes

This section will outline general guidelines and recommended materials for open space design, planting strategies and plant selection, stormwater management, paving design and materials, site furniture placement and products, lighting placement and products, and public art.

Open Space Design

Open space design is comprised of creating definition and program for a variety of spaces, including grand open spaces programmed for active recreation and events for large groups of people, intimate spaces programmed for passive activities for smaller groups of people, and linear pedestrian networks which link buildings and outdoor open spaces.

Grand Spaces: Lawns

Lawns are large, flexible gathering areas designed to support daily campus activities, recreation, and social interactions, while also providing large open space (the actual lawn) that can be used for outdoor events. To achieve this required flexibility, each lawn should contain at minimum one-half acres of open space (enough to support a casual sports match, set up multiple tents/booths, or host reception for 150-200 people). A variety of furniture should be located around the edges of the lawn to stimulate activity and interaction without preventing use of the central open space.



MET Lawn
University of North Texas Health Science Center

Grand Spaces: Quads

Campus quadrangles (quads) are created when multiple buildings come together, resulting in a space that's enclosed on three to four sides. While typically large spaces, quads are predominantly used by smaller groups of people or individuals relaxing, socializing, or studying. These areas are prime locations for multiple types of seating (movable and fixed), colorful plants, shade trees, and public art. Often, quads are designed having multiple sub-zones defined by changes in hardscape, landscape, and furniture. Quads will vary in size based on the surrounding buildings, but it is recommended that quads be at least one-half acres to provide space for multiple user groups.

Intimate Spaces: Courtyards

Courtyards are similar to quadrangles but are smaller in scale, typically enclosed on all four sides by a single building. Filling a similar function to quads, these spaces are designed to accommodate less people. The programming and design of courtyards should align with the program of the adjacent building.

Intimate Spaces: Plazas

Plazas are transitional spaces that serve to link multiple open spaces and connectors together. Programming for plazas should support small events, food trucks, group gathering, and studying, as well as provide clear connections to any attached building entrances. Plazas should be primarily hardscape with accents of plantings to provide shade and character.

Intimate Spaces: Pocket Parks

Pocket parks are small in scale and passive in nature. Typified by seating and shade, they are great areas for studying, conversing, and reading. These areas can be found within or adjacent to quads and courtyards, but more typically will be in the interstitial spaces on campus (such as in the nooks created by buildings). Size and furniture type will vary by location. The campus should foster a unique each pocket park to create a diverse character.



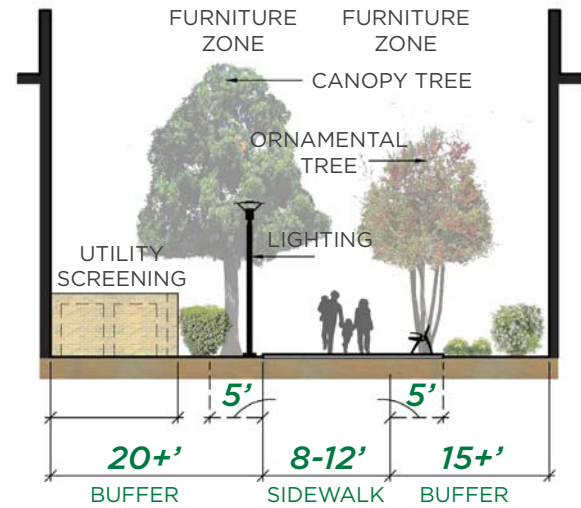
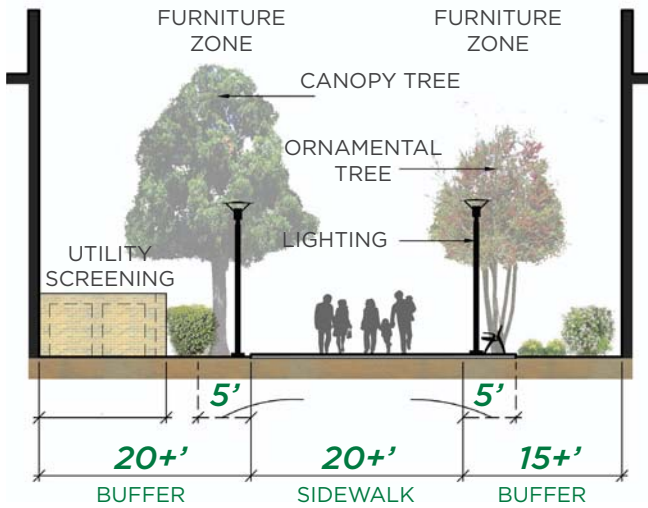
Quad
Coppin State University



Courtyard
Salem State University



Pocket Park
Arizona State University



Linear Open Space: Pedestrian Malls

Pedestrian malls are prominent public walks or promenades through campus. Shade trees, lighting, and furnishings should be placed on both sides of the mall in regular increments to provide a sense of formality. Malls serve as primary circulator through campus and should align to the connectivity axis identified in the Framework Chapter. Materials may include a combination of primary hierarchy paving materials (see paving section for options).

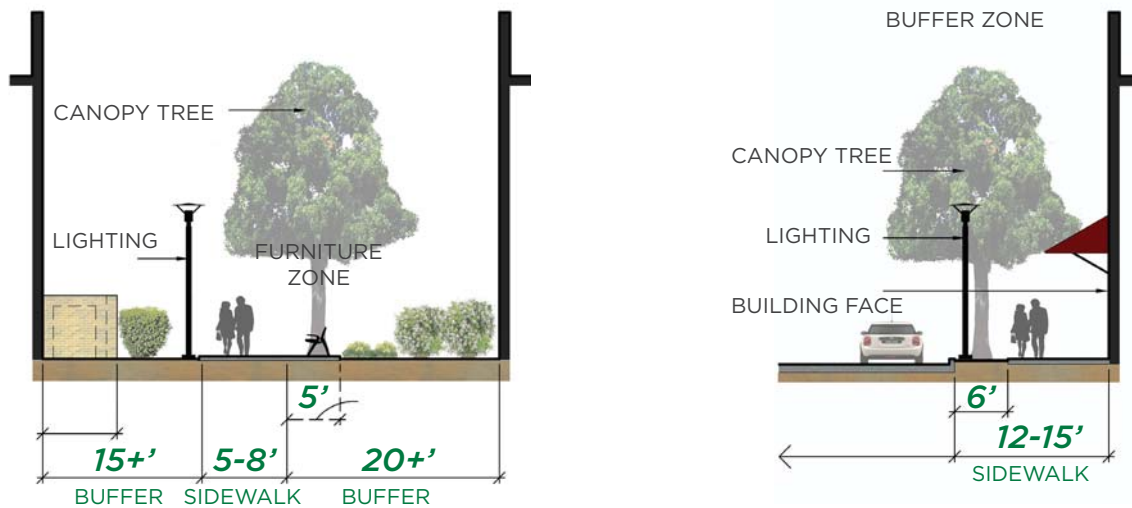
Pedestrian malls must be designed to a minimum width of 20' to meet local requirements for emergency vehicle access and provide easy access for service vehicles. Species dependent, canopy trees should be at minimum 20' removed from buildings and ornamental trees removed at least 15' to allow for canopy growth. Lighting should be placed regularly in the form of light poles spaced 50' apart.

The 2018 Campus Master Plan proposes the closure of Bunting, Modlin, and Mattison Avenues between Haskell and Montgomery Streets, as well as the closure of the emergency drive associated with Parking Lot 1 and the Health Pavilion. Each of these closures needs to be replaced with a Pedestrian Mall to ensure continued compliance with local emergency regulations. New campus policies will be required to regulate when service vehicles can drive onto Pedestrian Malls. Many campuses restrict access during peak class hours.

Linear Open Space: Large Connector

Connectors are the interstitial linkages between buildings, quads, courtyards, malls, and along interior roadways. These walkways are meant to be multi-functional, sized to allow for large groups of pedestrians, bicyclists, and smaller emergency vehicles (namely ambulances).

Large connectors should be between 8' and 12' and be primarily made of scored concrete. At special locations (intersections, building entrances, etc...), pavement in the primary hierarchy category may replace the standard scored concrete (see paving section for options). Large connectors can have trees and 5' furniture pads on both sides of the pathway, dependent on site conditions. Species dependent, canopy trees should be at minimum 20' removed from buildings and ornamental trees removed at least 15' to allow for canopy growth. Lighting should be placed regularly in the form of light poles spaced 50' apart.



Linear Open Space: Small Connector

Small connectors are basic concrete sidewalks sized between 5' and 8'. Due to their nature, they are less suitable for seating and do not require the formality of trees placed at even intervals. Seating and trees can be spaced at greater distances and do not required specific spacing. Lighting should be placed regularly in the form of light poles, bollard, or exterior lighting elements attached to buildings. Spacing will vary based on light type.

Linear Open Space: Urban Edges

Special Consideration should be given to the urban edges along West 7th Street and Camp Bowie Boulevard. The West 7th Street edge has a unique active character created by the volume of commercial and higher density residential uses along the corridor while the Camp Bowie Boulevard edge serves as a direct interface with the Fort Worth Cultural District. The sidewalks and plantings on these urban edges take on a unique character.

Community Edge (West 7th Street): Should be designed with a 6' buffer zone between the street and sidewalk reserved for street trees, bike racks, benches, and lighting. Sidewalks will be 12' to 15' wide and run to the face of the buildings. Streetscapes are subject to City of Fort Worth development requirements.

Cultural Edge (Camp Bowie Boulevard): Due to existing building locations, the angle of the boulevard, and City of Fort Worth established setbacks, the Camp Bowie Boulevard edge is a wider and variable buffer. Today, each block has a different edge character, as the sections between Clarke Avenue and Clifton Street redevelop, these edges should be improved to compliment the block between Clifton Street and Boland Street. This section is characterized by setbacks of 35' or more, larger paved areas at street intersections, sidewalks along the street edge, a 6' grass buffer, and a second sidewalk set further in. Street trees should be staggered and may be a double alley where wide enough.

Planting Strategy & Design

Campus plantings serve to improve the aesthetic and environmental quality of campus while also providing comfort and interest for users of outdoor spaces. Selection and strategic placement of plant materials appropriate for the region and campus micro-climates will enhance the campuses character and create visual continuity for users while helping to improve the strength and longevity of the overall campus landscape.

Street Trees

Street trees are a vital part of a rich and inviting streetscape. The term street trees describes trees that line vehicular roadways which support the adjacent pedestrian areas with shade. In addition to providing shade and enhancing the pedestrian experience, street trees also help to soften the visual impact of large expanses of paving and can be a significant stormwater management tool.

General street tree guidelines:

- Trees should have 4" minimum caliper, a straight trunk, and provide 7' of clearance to lowest branch at time of planting
- Trees spaced at least 30' apart to provide space for mature canopies
- Select species tolerant of the heat island effect created by surrounding hardscape
- Select species that will tolerate pruning throughout their lifespan to ensure clearance for pedestrians and vehicles
- Diversify street tree species across campus to create an interesting character and reduce the impact of diseases and insects
- Provide soil volumes (or CU Structural Soil / equivalent) adequate to support desired canopy and accommodate mature root systems

Reference the canopy tree and ornamental tree plant lists for potential street tree species. Not all ornamental trees meet the guidelines above.

Site Trees

Site trees describe all of the trees internal to campus that are removed street edges. These include trees that line walkways, trees located on lawns, and trees placed in planter beds. Depending on location, site trees are intended to provide shade, visual aesthetic, or both. These trees provide a softening effect to the campus, reduce heat island effect, improve air quality, and can be used as a design element to create memorable spaces.

General site tree guidelines:

- Ensure biodiversity by creating a variety of species type to reduce the impacts of disease and insects
- Provide soil volume adequate to support desired canopy and accommodate mature root systems
- Consider the location of underground utilities and above ground structures when placing trees
- Flowering trees should be located away from areas where frequent outdoor dining activity is anticipated to minimize impact of bees, insects, and falling debris
- Trees removed from circulation areas that require canopy height can have as small as 2" caliper to limit shock at being transplanted and enabling quicker growth

Reference the canopy tree and ornamental tree plant lists for potential street tree species.

Understory and Accent Plantings

Understory and accent plantings describes everything beneath the tree canopy (grasses, flowers, vines, and shrubs). These plantings serve to soften hardscapes, screen undesirable views, create durable lawns, and add aesthetic interest to the campus' outdoor spaces. While often an after thought, design of these features should be carefully considered to create both large public spaces and linear connections that provide a strong sense of place and campus identity.

General understory and accent planting guidelines:

- Layer plantings with a variety of color, form, texture, and seasonal flowering times to provide for year round character.
- Group plants based on their water needs to minimize over- and under-watering
- Species selection should support accessible and usable spaces for users of all age and abilities

Reference the herbaceous grasses, herbaceous perennials, ground cover and vines, and shrubs plant lists for recommended understory and accent plantings.

Legacy Tree Program

A unique and defining characteristic of the UNTHSC campus is the legacy tree program which allows donors to plant a tree on campus in honor of a special person or occasion. Each tree is marked with an engraved granite plaque. To date, donors have been able select the location of their trees. The 2018 Campus Master Plan suggests that the campus consider an organizing structure, such as a major pathway or green space, to locate future Legacy Trees to increase awareness of the program and enhance their influence on the overall campus character. Additionally, this will minimize conflicts with future building sites.

Maintenance and Sustainability

While having a beautiful and well landscaped campus is desirable, it also requires substantial upkeep, care, and investment. These guidelines emphasis the use of native and introduced drought-tolerant plant species which are adapted to the local soil conditions. This will help create a more sustainable and lower-maintenance campus landscape that requires less manpower, reduced water use, lower maintenance requirements, and reduced plant mortality and replacement, reducing operational and capital expenses.

It is also recommended that the campus increase organic fertilizer and pest control practices to reinforce UNTHSC's mission and promote health and well-being.

Plant List

The following pages contain a series of plant lists inclusive of trees (canopy/ornamental), shrubs, perennials, vines, ground-covers, and grasses that are recommended as suitable for the UNT Health Science Center campus.

While these lists are intended guide visual continuity, character, and landscape health, it is not all-inclusive. Designers wishing to incorporate vegetative material not on this list must consult with the University of North Texas System Office of Facilities Planning & Construction or UNTHSC Facilities (as appropriate) before including it in their design.

Canopy Trees



Bald Cypress
Taxodium distichum



Cedar Elm
Ulmus crassifolia



Chinese Pistache (male)
Pistacia chinensis



Drake Elm
Ulmus parvifolia



Pecan
Carya Illinoensis



Shantung Maple
Acer truncatum



Shumard Red Oak
Quercus shumardii



Texas Red Oak
Quercus buckleyi



Trident Maple
Acer buergerianum

Canopy Trees (continued)



Heritage River Birch
Betula nigra



Live Oak
Quercus virginiana



Mondell Pine
Pinus eldarica



Slippery Elm
Ulmus rubra



Bur Oak
Quercus macrocarpa



Chinkapin Oak
Quercus muhlenbergii



Montezuma Cypress
Taxodium mucronatum



Pond Cypress
Taxodium ascendens

Ornamental Trees



Coral Bark Japanese Maple
Acer palmatum



Crapemyrtle
Lagerstroemia indica



Desert Willow
Chilopsis linearis



Eve's Necklace
Styphnolobium affine



Japanese Maple
Acer palmatum



Oklahoma Redbud
Cercis reniformis oklahoma



Possumhaw
Ilex decidua



Texas Mountain Laurel
Sophora secundiflora



Vitex
Vitex agnus-castus

Ornamental Trees (continued)



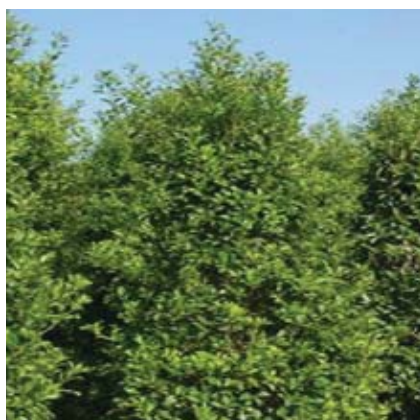
Foster's Holly
Ilex x attenuate



Little Gem Magnolia
Magnolia grandiflora



Nellie R Stevens Holly
Ilex x Nellie R. Stevens



Savannah Holly
Ilex attenuata



Yaupon Holly - Male
Ilex vomitoria



Yaupon Holly - Female
Ilex vomitoria



Texas Redbud
Cercis canadensis var. texensis

Shrubs



American Beauty Berry
Callicarpa americana



Anthony Waterer Spirea
Spirea spp.



Forsythia
Forsythia spp.



Oakleaf Hydrangea
Hydrangea quercifolia



Rock Cotoneaster
Cotoneaster horizontalis



Dwarf Burford Holly
Ilex cornuta



Dwarf Indian Hawthorn
Raphiolepis umbellata 'minor'



Dwarf Texas Sage
Leucophyllum frutescens



Pittosporum
Pittosporum spp.

Shrubs (continued)



Dwarf Yaupon Holly
Ilex vomitoria



Edward Goucher Abelia
Abelia grandiflora



Firepower Dwarf Nandina
Nandina domestica



Glossy Abelia
Abelia grandiflora



Gulfstream Dwarf Nandina
Nandina domestica



Indian Hawthorn
Raphiolepis indica



Ligustrum
Ligustrum vulgare



Purple Pixie Loropetalum
Loropetalum chinense



Heavenly Bamboo
Nandina domestica

Shrubs (continued)



Winter Honeysuckle
Lonicera fragrantissima



Red Yucca
Hesperaloe parviflora



Rosemary
Rosmarinus officinalis



Dwarf Palmetto
Sabal minor



Spineless Prickly Pear
Opuntia ellisiana



Pale Leaf Yucca
Yucca pallida

Ground Cover and Vines



Asian Jasmine
Trachelospermum asiaticum



Bar Harbor Juniper
Juniperus horizontalis



Giant Liriope
Liriope muscari 'super blue'



Variegated Liriope
Liriope spicata 'silver dragon'



Mondo Grass
Ophiopogon japonicus



Honeysuckle
Lonicera spp.



Crossvine
Bignonia capreolata

Herbaceous Perennials



Daffodil
Narcissus spp.



Blue Wonder Salvia
Salvia farinacea



Coral Bells
Huchera spp.



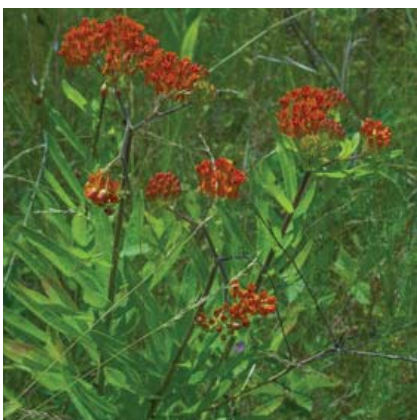
Autumn Sage
Ulmus parvifolia



Sedum
Sedum spp.



Purple Coneflower
Echinacea purpurea



Butterfly Weed
Asclepias tuberosa



Turk's Cap
Malvaviscus drummondii



Zexmenia
Wedelia acapulcensis var. hispida

Herbaceous Perennials (continued)



Shasta Daisy
Leucanthemum superbum



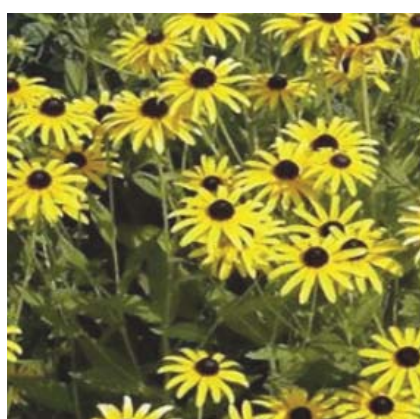
Moonbeam Coreopsis
Coreopsis verticillata 'moonbeam'



Clasping Coneflower
Dracopis amplexicaulis



Plains Coreopsis
Coreopsis lanceolate



Blackeyed Susan
Rudbeckia hirta



Scarlet Sage
Salvia coccinea



Daylily
Hemerocallis spp.



Winecup
Callirhoe involucrata



Pink Skullcap
Scutellaria suffrutescens

Herbaceous Grasses



Bermudagrass
Cynodon dactylon



St. Augustine Grass
Stenotaphrum secundatum



Tifway 419 Bermudagrass
Cynodon dactylon 'tifway 419'



Mexican Feather Grass
Nasella tenuissima



Maiden Grass
Miscanthus sinensis



Gulf Muhly
Muhlenbergia capillaris



Lindheimer Muhly
Muhlenbergia lindheimeri



Blue Grama
Bouteloua gracilis



El Toro Muhly
Muhlenbergia emersleyi 'El toro'

Stormwater Management

Effective stormwater management layers systems and approaches at different scales. For each new project that is undertaken by UNTHSC, the effects on stormwater should be analyzed for both the immediate impact to the site and campus, as well as for future impacts. The systems below can combine in a multitude of combinations to create a comprehensive approach to managing stormwater on-site to help mitigate or solve existing issues on campus.

The master plan recommends that all new building and landscape projects include one or more of the following elements:

Engineered Bioswales and Rain Gardens

Engineered bioswales tend to direct and channel stormwater preventing it from flowing into areas that might disrupt the use of campus (such as onto walkways or roads). Bioswales should be strategically located adjacent to major pedestrian pathways or lining street edges and can be designed to be as shallow as 6" deep. Rain gardens are highly permeable areas of depressed earth that collect water and allow it to infiltrate into the ground in place.

Both of these landscape elements are also designed to filter silt (preventing erosion) and pollution, and are generally designed to handle the first 1.5" of rainfall in any given storm event. Typically, both of these features include native, deep-rooted vegetation and flowers to add aesthetic value and contribute to the overall landscape vision for campus.

Permeable and Pervious Pavement

While traditional hardscape materials do not allow water to infiltrate the soil, permeable and pervious paving allows stormwater to percolate and infiltrate the ground surface. The goal of permeable and pervious paving is to control and mitigate stormwater at the source, reducing runoff and improving water quality in substrata layers. The voids between the aggregates then allow water storage for a small storm event, or to handle the flush of a larger storm event reducing the burden on other systems across campus. Permeable paving requires regular maintenance which needs to be detailed in the project specifications as suggested by the system manufacturer.

Tree Wells or Trenches

Already used in multiple locations on campus, these two techniques use trees planted in amended soils and rocks to capture runoff from surrounding hard surfaces and hold in place to filter into the ground. These features can be single (tree wells) or interconnected (tree trenches). Their presence also helps to break up large areas of pavement and provide shade to pedestrians. Although appropriate anywhere on campus, the master plan recommends integration of tree wells and tree trenches into sidewalks that line Camp Bowie Boulevard, Montgomery Street, and West 7th Street.

Rainwater Harvesting

Rainwater harvesting is the collection and redistribution of rainwater for reuse on-site through the use of cisterns connected to a variety of catchment systems. Rainwater harvesting systems can range in size and complexity, but all systems include a catchment surface, a conveyance system, a storage container, treatment, and a distribution system for its secondary use. Cisterns can be installed above or below grade, though installation above grade makes maintenance substantially less expensive and easier. Perhaps their greatest benefit is that the captured water is appropriate for reuse in irrigation and/or toilet flushing, reducing the demand for potable water which decreases operating expenses.

Green Roofs

Green roofs manage the urban heat island effect, retain stormwater, provide habitat for butterflies and birds, add aesthetic value, lengthen the life of the roofing, and add insulation to decrease heating and cooling costs. These systems can be extensive or intensive depending on the amount of growing medium required to support plant life year round. Extensive systems are typically 4 inches (10 cm) in depth or less, can be built-in-place or pre-planted in trays, and support the growth of small plant species with limited impact on a building's structural system. Intensive systems are typically 8 inches (20 cm) or more in depth and can support a greater variety of plant species. These areas can be marketed as amenity spaces for buildings and can showcase sustainable design while being popular small gathering spaces.

Xeriscaping

Xeriscaping is the creation of small, water-absorbing landscape areas or planters filled with small pebbles, crushed rock, finely ground aggregate, natural mulch, or a system that layers more than one of these together. An on campus example of Xeriscaping is the northern section of the Library Courtyard surrounding the water feature. Their design creates areas on campus that are quickly able to absorb large quantities of water into the ground before it flows elsewhere. In addition to their stormwater management qualities, xeriscaped areas are also typically planted with drought-resistant plants which require less watering and care and reduce operational costs. Xeriscaping is particularly suitable along the edges of buildings.

Reduction in Surface Parking & Increased Green Space

The single largest impervious feature on campus today is the extent of surface parking. By consolidating surface parking into parking structures, the impervious footprint they create is reduced making way for new buildings that can utilize the range of techniques detailed in this section or new pervious green spaces. By reducing the amount of impervious surface, more stormwater will be handled, leading to less runoff, flooding, and erosion.

Stormwater Management Techniques



Engineered Bioswale



Rain Garden



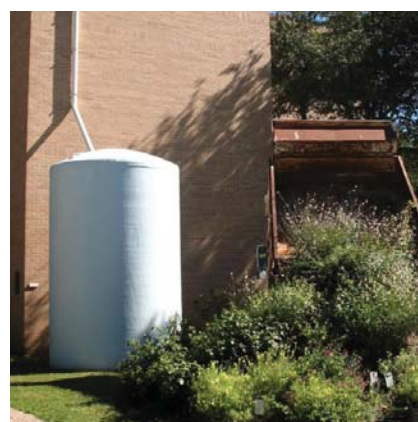
Permeable Pavement



Tree Well



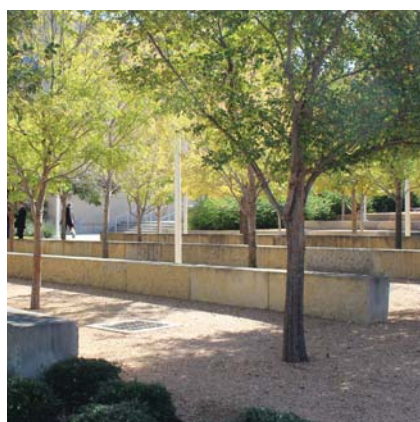
Tree Trench



Rainwater Harvesting



Green Roof



Xeriscaping



Increased Green Space

Paving

Having a good mixture of paving materials and patterns will add aesthetic appeal and call attention to specific places of interest on campus. A hierarchy of specialty paving materials, ranging from tile and pavers in a blend of natural colors to integral color concrete with specialty finishes, can reinforce the campus experience by serving as a subliminal way-finding mechanism and adding a layer of quality to outdoor spaces.

Paving Materials - Primary Hierarchy

Paving materials at primary places of interest (main building entrances, plazas, courtyards, roof gardens, and seating areas):

- Precast Concrete Pavers
- Integral Color Concrete - scored pattern, salt rock, or sand blast finishes

For each, manufacturer, color blend, and patterns should match the existing campus. Refer to Facilities Management for more details.

Paving Materials - Secondary Hierarchy

Paving materials at secondary places of interest (intersections of sidewalks, accent bands in pedestrian malls, and secondary building entrances):

- Integral Color Concrete - scored pattern, salt rock, or sand blast finishes
- Standard Gray Concrete - scored pattern, salt rock, or sand blast finishes

For each, manufacturer, color blend, and patterns should match the existing campus. Refer to Facilities Management for more details.

Paving Materials - Tertiary Hierarchy

Standard gray concrete will be used as a standard material in all other locations.



Primary Hierarchy Paving Materials
Library Courtyard at the Library entrance



Secondary Hierarchy Paving Materials
RES west entrance



Tertiary Hierarchy Paving Materials
Sidewalk wrapping Lot 6

Paving Material Palette (Select Sample)



Interlocking Precast Pavers
Single Color



Interlocking Precast Pavers
Single Color



Interlocking Precast Pavers
Color Blend



Integral Concrete
Tan - Heavy Sandblast



Integral Concrete
Light Tan - Sandblast



Integral Concrete
Dark Gray - Scored



Integral Concrete
Medium Gray - Heavy Sandblast



Integral Concrete
Standard Gray



Standard Concrete
Gray - Salt Rock

Site Furniture

Site furnishings in open spaces enhance the user experience by providing the ability for rest and relaxation and creating a unified and orderly appearance. All site furnishings, to stay in keeping with current furnishings, should be silver in color and contemporary in style. In addition to creating a unified campus aesthetic, a limited, selected furniture palette will allow campus maintenance personnel to keep readily available attic-stock for repairs and replacements. The listed furnishings below were chosen in collaboration with campus facilities staff for their appearance and durability.

Site Furniture Palette

Benches (Backed and backless):

- “Rest” Backed Bench (with extruded aluminum seat and back slats) by Landscape Forms.
- “Rest” Backless Bench (with extruded aluminum seat slats) by Landscape Forms.
- “Plexus” Bench (with end arm rests) by Landscape Forms.
- Chopped Limestone block (chipped/hammered sides, sawn and sanded top).
- Architecturally-finished cast-in-place seat/retaining walls.

Tables and Chairs (Movable):

- Parc Centre 28” Square Table with Parc Centre Chairs by Landscape Forms.
- Bar-Height by Landscape Forms

Tables and Chairs (Fixed):

- Carousel 42” Diameter Round Table with Dining (Backed) Seating by Landscape Forms

Umbrellas and Accessories:

- “Solstice Cygnus” Umbrella by Landscape Forms
- Umbrella-mount solar charging station (Aluminum, various manufacturers, must be approved by UNTHSC facilities)
- Intermediate seat dividers where benches are prone to damage by skateboards.

Litter and Recycling Receptacles:

- Scarborough Litter Receptacle (side-open) by Landscape Forms.
- Scarborough Plastic/Glass Recycling Receptacle (side-open with round opening and recycling plaque) by Landscape Forms
- Scarborough Paper Recycling Receptacle (side open with rectangular opening and recycling plaque) by Landscape Forms

Bike Parking and Racks:

- “Ring” Bike Rack (Stainless Steel) by Landscape Forms
- “Flo” Bike Rack (Stainless Steel) by Landscape Forms

Stair Railings:

- Custom Stainless Steel Railing with Integral LED down lighting (point- and wall-mount) by SC Railing Company

Site Furniture (Representative Sample)



Benches (backed and backless)
Existing on campus



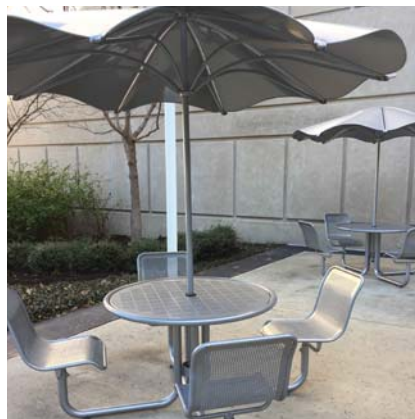
Benches (backed and backless)
Existing on campus



Benches (backed and backless)
Existing on campus



Tables and Chairs
Existing on campus



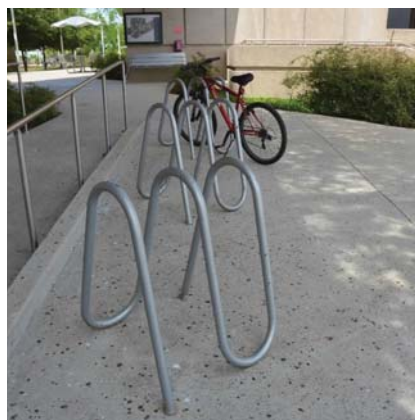
Tables and Chairs / Umbrellas
Existing on campus



Litter and Recycling
Existing on campus



Bike Parking and Racks
Existing on campus



Bike Parking and Racks
Existing on campus



Stair Railings
Existing on campus

Lighting

Campus lighting is a significant and critical landscape element due to their ubiquity and role increasing campus safety. To provide nighttime safety for all campus users, the campus lighting system should be laid out to seamlessly connect all public parts of campus (walkways, parking areas, building entries, open spaces, roadway intersections, and important directional signage). To best achieve this, lights should be placed at a consistent interval to provide uniform illumination.

General lighting guidelines:

- Lighting shall be emphasized in the public realm and streetscapes to create a safe, visible, and inviting campus at all hours of the day
- Bollards should be placed 10' to 25' apart depending on adjacent uses
- Light poles should be placed at minimum 24' apart. Refer to technical specs to recommended spacing
- Lighting should highlight building entrances, prominent corners and facades, character buildings, terminated vistas, special interior spaces, or active parking structure elevations
- Banners with campus branding may be attached to light poles where appropriate
- All light poles and fixture housings should be metal containing LED lamps for increased energy efficiency and product lifetimes
- Light fixtures should be Dark Sky complaint and aim to limit light pollution, skyglow, light clutter, and light trespass
- Projects are encouraged to consult the Illuminating Engineering Society (IES) Lighting Handbook recommendations to establish target light levels and uniformities

Light Fixture Palette

All new light fixtures should meet the criteria laid out in the general light guidelines sections and match either an item on the list below, or a fixture that already exists elsewhere on campus.

Bollards:

- BEGA 7589 LED 74W 277V Exterior Bollard, White Finish

Light Poles:

- BEGA 7210LED 40W 277V, 12' Pole, White Finish



BEGA Bollard
Existing on campus



BEGA Pedestrian Lights
Existing on campus

Public Art

Public art is a term used to describe both two- and three-dimensional works of art created in traditional media (stone, bronze, etc.), environmental media (earthworks and landscape art), as well as new media (digital, video, etc.) that is installed in a public space. Functional objects (such as benches, light fixtures, etc.) which are created as unique works of art as well as the creation of an appropriate environment or site to place the art are also included in this definition. Public art serves to enrich the cultural and intellectual life of campus, as well as serve as an embodiment of the institution’s mission and values.

During the 2018 Campus Master Plan process, stakeholders identified that the campus generally lacks public art, and that future inclusion of public art on campus will enhance the on-campus experience and create stronger ties to the adjacent cultural district.

Many higher education institutions require that a small percent (often 0.5% or 1.0%) of major capital project budgets be set aside to fund the creation of public art located in, or adjacent to, each project. Typically, these institutions also have a public art committee comprised of faculty and staff tasked with reviewing and selecting works appropriate for the campus. This master plan recommends UNTHSC consider a similar requirement for capital projects, and form a committee to help guide the future inclusion of public art on campus. Opportunities may exist to explore partnerships with nearby cultural institutions to bring art onto campus.

General public art guidelines:

- All permanent art should be identified with either a plaque or other appropriate signage
- Public art should be located in highly visible high-traffic areas
- If functional or interactive, land art should make ensure it is accessible for all users
- If intended to be a permanent installation, land art should be designed for easy maintenance

Public Art Examples



The Sustaining Arch - Traditional Media
University of North Texas



Checkedered Mounds - Environmental Media
Texas A&M University



Looking to the Stars - Functional Objects
Texas Tech University



PLANNING & DESIGN REVIEW PROCESS

Overview

The Campus Master Plan, which includes the Campus Development Guidelines and Design Standards, is the fundamental tool to guide the physical development of the campus in a manner which is consistent with the direction, goals, and aspirations of the University and the System. Accordingly, the integrity of the architecture and landscape character is protected through the application of understandable and enforceable standards.

The master plan is intended to govern the location of new facilities, and the guidelines and standards govern the details of placement and design of new buildings and site improvements consistent with the campus master plan. Further, they are intended to assist in outlining the key design elements of future buildings that will create a hierarchy of campus open spaces and unify the architectural expression of the campus; and with the orderly development of the campus open space and landscape-hardscaped places.

The process of reviewing and approving proposed campus improvements and new buildings and landscapes, to assure compliance with the intent of the master plan, development guidelines and the design standards, should be in accordance to System and University policies. While each new building must function for the intended uses and program, all buildings ultimately owned by the System and University must be considered as part of the campus as a whole. The System and University policies provide the framework to ensure civic, campus and urban design mission of a project, not its functional or individual mission.

Issues to be considered in the review process are the quality of public open space and landscape; a building's relationship and connection to the entrance and primary interior lobby and circulation space; exterior appearance and architectural form; and contributions to the larger campus context and the space in which it is sited. Each project should be reviewed according to primary goals as follows:

- To interpret the Campus Master Plan and determine compliance with the policies, principles, guidelines and design standards
- To recommend modifications to proposed projects as appropriate to ensure compliance
- To evaluate projects to ensure that they meet UNTHSC qualitative standards, including the University's goals and policies for sustainability

The review process is not intended to provide for the design the building or site, but to provide clear direction to the project team (architects, landscape architects, and other project representatives) through comments and suggestions.

Criteria for Project Design Review

A review is prompted by any new building project as described in the System and University policies. In general, any project changing building appearance through replacement, repair or restoration; and any improvement or construction project affecting any campus exterior public space. All major buildings and landscape improvements should be reviewed.

Smaller projects should also be considered for review, although an abbreviated administration process may be utilized at the direction of the Vice Chancellor for Facilities Planning and Construction. In some cases, smaller projects may be an opportunity to initiate a planned transformation of an existing space.

In general, review is triggered by projects that impact the quality and appearance of the campus, exterior public space, and building.

Exceptions or Modifications

Certain sites at the perimeter of the campus or at major gateways may require modifications of the guidelines in order to establish an appropriate public face for the campus or establish an individual identity for a specific gateway project while still integrating and advancing the overall campus character and composition.

The goal is to establish the appropriate flexibility in the application of the guidelines for these special projects through an exemption process at a level appropriate for the project and the degree of deviation from normal guidelines. The process may involve the Vice Chancellor for Facilities Planning and Construction, President, Chancellor, and in some cases the Board of Regents.

During the review process, exceptions to the master plan policies, principles, or guidelines after serious deliberation. But granting exceptions or modifications is the sole responsibility of the Vice Chancellor for Facilities Planning and Construction, who is responsible for the campus master plan and establishing and approving design guidelines based on the campus master plan goals, principles, and guiding values. Exceptions or modifications may require review and approval of the System Chancellor and Board of Regents.

Administrative Integration of the Design Review Process

The success of design review process is predicated on the integration into the existing University administration and policies, especially as they relate to campus development and project initiation.

The development process involves many different individuals and departments whose contributions will be more effective with clear delineation of appropriate roles, responsibilities, and interrelationships. It is expected that the office of the Vice Chancellor of Facilities Planning and Construction will define the specific roles and relationships of the following parties in the administration of the design review process:

- Design Review Committee
- Office of Facilities
- User Committees
- Architect Selection Committee
- Project Architect and Consultants

Selection of architects and other design professionals may be the most important factor in the successful implementation of the Campus Master Plan. The intentions of the master plan should be referenced in all solicitations for design professionals. Selection criteria should include an understanding and demonstrated familiarity with the campus master plan, development guidelines, and design standards.

While design professionals are selected based on qualifications and experience with the specific building and program type, they should have demonstrable understanding of the intent of the university as manifested in the Campus Master Plan. The architects should confirm their willingness to work within the UNTHSC design language and vocabulary.

Design Review Procedures

Design Review meetings should be scheduled as required by project volume and schedule. Projects will be presented as outline in the System and University policies by the participating user committee and the project design team, which might include architects, landscape architects, engineers and professional consultants. After every project review, written comments should be provided to the project design team with copies sent to the Office of the Chancellor and the President.

The sequence of actions/reviews will include, but not be limited to the following:

- Providing a complete copy of the master plan with the development guidelines and design standards to the project design team
- Require an initial meeting with the architect or designer to clarify the intent of the proposed project

- Require that the architect or professional obtain site development approval as part of the initial approval process for a new project. The proposed site plan will be compared to the master plan to demonstrate conformity with setbacks, alignments, axial view lines, service access, and other obvious context items at both immediate and larger campus scales
- Establish a schedule of reviews during the concept, schematic design and design development phases; if there are significant changes or unresolved issues, additional reviews of construction documents may be necessary
- Conduct post-construction assessment of the project.

A determination may be made at the outset of the review process that fewer steps may be undertaken if the scale or the impact of the project on the campus is deemed to be insignificant.



Valubility Honor Wall



APPENDIX

SUPPLEMENTAL MATERIAL

7

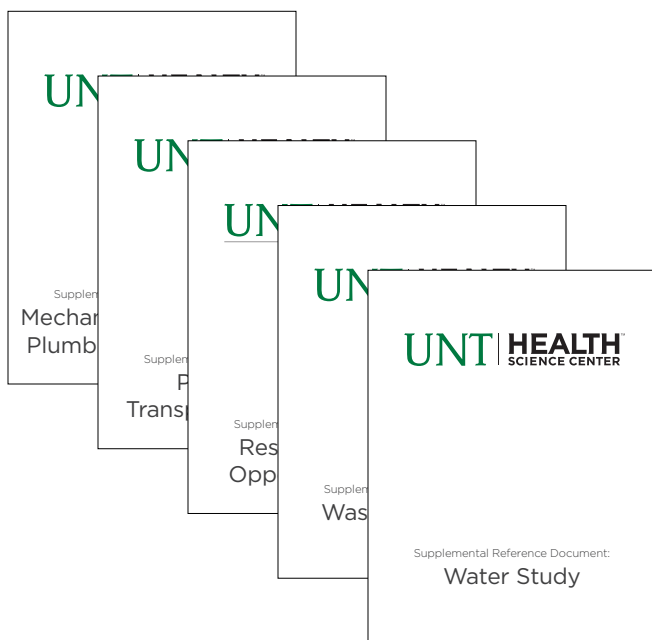
REFERENCES & RESOURCES

Supplemental Reference Documents (Stand Alone)

The below studies were produced in conjunction with the 2018 Campus Master Plan to provide additional details on specific master plan topics:

- Mechanical, Electrical, & Plumbing Study
- Parking and Transportation Study
- Research Facility Opportunity Study
- Wastewater Study
- Water Study

Requests for these documents should be directed to the UNT System Planning & Development Team.



Individual Chapter References & Resources

Primary references and resources used to guide the 2018 Campus Master Plan are organized by chapter below. Some documents and data sources were used to inform multiple sections and are listed beneath each.

Chapter 1: Introduction

UNTHSC, 2018-2019 Catalog - About the UNT Health Science Center, 2018.

UNTHSC, See 2020 Strategic Plan, 2018.

Chapter 2: Observations

2018 Campus Master Plan, Wastewater Study, 2018.

2018 Campus Master Plan, Water Study, 2018.

City of Fort Worth, Bike Fort Worth Comprehensive Plan, 2009.

City of Fort Worth, Montgomery Street and Eastern Arlington Heights Improvement Projects, 2017.

Dallas Regional Chamber, The Health Care Impact Study, 2013.

Texas Higher Education Coordinating Board, Health Care Outpatient Historical Visits Data Table, 2016.

UNTHSC, Campus Master Plan, 2007.

UNTHSC, Coded Floor Plans - ArchiBUS, 2018.

UNTHSC, Employee Service Data Table, 2017.

UNTHSC, Enrollment by Program and Class Data Table, 2017.

UNTHSC, Facilities Inventory of Rooms, 2017.

UNTHSC, Historic Grant Research Expenditure Data Table, 2017.

UNTHSC, Historic Headcount Fall Terms, 2017.

UNTHSC, History and Traditions of the UNT Health Science Center at Fort Worth, 2010.

UNTHSC, Pedestrian Safety Report, 2014.

UNTHSC, Property Schedule, 2016.

UNTHSC, Sustainability Data Table, 2017.

UNTHSC, Transportation Survey, 2013.

UNTHSC, University Parking Study, 2017.

UNTHSC, University Parking Fee Study, 2016.

Chapter 4: Campus Master Plan

2018 Campus Master Plan, Mechanical, Electrical, & Plumbing Study, 2018.

2018 Campus Master Plan, Parking and Transportation, 2018.

2018 Campus Master Plan, Research Facility Opportunity Study, 2018.

2018 Campus Master Plan, Wastewater Study, 2018.

2018 Campus Master Plan, Water Study, 2018.

Chapter 5: Implementation

2018 Campus Master Plan, Mechanical, Electrical, & Plumbing Study, 2018.

2018 Campus Master Plan, Research Facility Opportunity Study, 2018.

Chapter 6: Campus Development Guidelines

UNT, Campus Master Plan Update, 2013.

UNTHSC, Campus Master Plan, 2007.

UNTHSC, Plant List, 2007.

SUPPLEMENTAL INFORMATION

Realignment of Existing Facilities

At the start of the planning process, stakeholders jointly established principles and priorities to guide the eventual master plan. A key prerogative was the optimization and alignment of new and existing facilities to maximize the overall efficiency of the institution’s space. As the campus has evolved and grown over time, spaces and assets were arranged to meet immediate needs. This has led to certain program placements that do not align to their locations highest and best use. For example, EAD, RES, CBH, and IREB were all designed as research buildings, but all house substantial academic or administrative components which are not the optimal use of each facility.

The campus master plan seeks to re-align uses so that they are located in the appropriate facilities that best support their needs while supporting the maximum facility efficiency campus wide.

The table at the bottom of this page identifies areas and functions campus stakeholders identified as potentially being misaligned or poorly located. In total, these spaces add up to over 285,000 GSF (the equivalent of two large buildings). Keep in mind that not all of these spaces could be easily be relocated today. All existing facilities to potentially move them to are occupied, and no new facilities are currently planned. However, the master plan emphasis continued evaluation of these assets as campus development occurs and recommends placing them in new structures that are properly located as the campus grows. This will free up the space they currently occupy to backfill with more optimal uses and assist with achieving near-term space needs.

Refer to the 2018 Campus Master Plan: Research Facility Opportunity Study supplemental document for additional analysis of these opportunities as they relate specifically to research backfill.

Realignment Opportunities - Summary Table

Location	Potential Action	Apx. GSF
EAD 2nd - 7th Floors	Relocate academic functions	43,500
EAD 2nd & 8th Floors	Relocate administrative functions	20,000
RES 1st & 2nd Floors	Relocate academic functions	11,250
MET 1st Floor	Reformat large lecture halls	18,000
CBH 2nd Floor	Relocate academic functions	5,500
CBH 1st Floor	Relocate / remove clinical	4,250
IREB 3rd & 4th Floors	Relocate academic functions (MD)	53,000
FAC1st & 2nd Floors	Relocate fitness center	10,000
LIB 1st Floor	Relocate administrative functions	20,000
HP 1st - 6th Floors	Relocate / remove clinical	110,121
Total		286,621

Space Need Projection Analysis Data

A high-level overview of the projected near-term (10 year) space need was provided in the Implementation Chapter. The subsequent pages provide a greater level of detail on the data, methods, and analysis used to provide space need recommendations. These forecasts are intended to support the strategic direction of UNTHSC and allow for informed capital planning over the next decade. However, it is also important to recognize that these forecasts are created based on anticipated needs projected by current data. Variable factors over the next decade may influence the actual space need to be lesser or greater.

Due to the unique characteristics of health science centers, a single projection that lumps all space types together (as is often done with large, four-year institutions) would not accurately reflect the campuses specialized space needs. Instead, the 2018 Campus Master Plan examines each primary campus space type individually and uses a variety of methods to provide a hybrid model for each space type.

The data utilized to make these projections was provided by UNTHSC or the UNT System at the start of the master plan process. The provided data varies in timeframe. Some historical data was supplied all the way back to campus formation (such as historic enrollment counts) while other data went back 20 years or less (such as research expenditures and clinical patient counts). UNTHSC also provided five-year forecasts for certain datasets (enrollment and research expenditure). These were extrapolated out to the 10-year, near-term timeframe.

For the most significant space types on campus (academic, research, and clinical), summary tables were produced comparing the growth rates for multiple methodologies. Each table provides three lens that could be used to interpret the data and guide space growth. Progressively, the space need projections refine in scope from Lens 1 to Lens 3. Within each lens, an average and a range are supplied that incorporate the respective data each represents.

Lens 1 includes all projection methods employed for the space type. While this captures a broad look at multiple projection methods, some of the methods may be less relevant to current trends due to their time frame or extreme and outlier conditions that inform them.

Lens 2 includes recommended methods for each space type based on the relevancy of the specific data sets to current or future trends. Relevancy was determined based time factors (five to ten year trends are more applicable to campus growth than 20-40 year trends), UNTHSC policy direction, targeted or identified growth, evolving pedagogy, and evolving care models. Lens 2 is intended to create a refined look at space needs and provide a likely range that the 10-year demand will fall within.

Lens 3 is the planning team's hybrid recommendation derived from consideration of multitude of variables. These figures are the targets used to create a 10-year vision for campus space needs, however it is critical to understand actual needs may be higher or lower based on the ever changing needs of the institution.

For the other space types, minimal growth is expected in these areas. The growth that does occur will be to either support academic and research needs or enhance the overall campus experience.

Combined Space Need Total

Combined, the total projected space need is 477,500 GSF of new space over the next 10 years.

Space Type	Projected Need
Academic	145,000 GSF
Research	200,000 GSF
Clinical	0 GSF
Administration	37,500 GSF
Library	30,000 GSF
Facilities	15,000 GSF
Leased	0 GSF
New / Other	50,000 GSF
TOTAL	477,500 GSF

Academic Space Growth Projections - Summary Table

Academic Space Projection Methods	Annual Growth Rate (Simple)	Method 2028 Space Need (GSF)	Lens 2 Suggested
10-year Historical Enrollment Growth	9.8%	252,300 GSF	Yes
20-year Historical Enrollment Growth	13.2%	348,000 GSF	
30-year Historical Enrollment Growth	16.5%	466,900 GSF	
40-year Historical Enrollment Growth	18.4%	481,400 GSF	
UNTHSC 5-year Enrollment Projection	2.7%	78,300 GSF	Yes
MP Process Identified Growth (over 10-years)	5.2%	150,800 GSF	Yes
MP Process Identified Growth (over 20-years)	2.6%	75,400 GSF	
10-year Academic Space Growth	5.7%	165,300 GSF	Yes
40-year Academic Space Growth	15.6%	452,400 GSF	
Lens 1: Average of All Methods	10.0%	289,033 GSF	
Lens 1: Range of All Methods	2.5% - 18.4%	72,500 - 533,600 GSF	
Lens 2: Average of Suggested Methods	5.9%	169,650 GSF	
Lens 2: Range of Suggested Methods	2.7% - 9.8%	78,300 - 284,200 GSF	
Lens 3: Hybrid Recommendation	5.0%	145,000 GSF	Recommended

Sources: varied, listed below

Academic Space Growth Projections - Simplified Datasets

Historic Enrollment Growth (latest data 2017)									
Year	1977	1982	1987	1992	1997	2002	2007	2012	2017
Fall Headcount	273	363	385	416	628	969	1,153	1,949	2,285

Source: UNTHSC, Historic Headcount Fall Terms, 2017, dataset

UNTHSC 5-year Enrollment Projection (initial data 2017)						
Year	2017	2018	2019	2020	2021	2022
Fall Headcount	2,285	2,384	2,427	2,496	2,565	2,633

Source: UNTHSC, 5-year Institution Enrollment Projection, 2017, dataset

Master Plan Process Identified Enrollment Growth Opportunities			
Year	2017	2027 (10-year horizon)	2037 (20-year horizon)
Fall Headcount	2,285	3,385	3,385

Source: Ayers Saint Gross, 2018 Campus Master Plan Workshop 05 Presentation, 2018, summary table

UNTHSC Historical Academic Space Growth (GSF)			
Year	1978	2008	2018
Academic GSF	estimated 40,000 (EAD)	185,000	290,000

Source: UNTHSC, Coded Floor Plans - ArchiBus, 2018, dataset

Academic

The hybrid space needs recommendation for academic programs weighs multiple factors. Special consideration was given to legislated limits on maximum enrollments, emerging program opportunities, targeted growth areas, current space needs and constraints, fulfillment of the master plan guiding principles and priorities, and the launch of the MD Program.

Historical enrollment (Fall headcount) growth was analyzed in 10-year, 20-year, 30-year, and 40-year increments. This analysis revealed that the campus has been experiencing significant and sustained growth. These growth rates range from 18.4% (40-year) down to 9.8% (10-year). It is recommended that the 10-year growth rate be utilized as it most accurately aligns with current institutional trends.

A second method was extrapolation of a UNTHSC provided a five-year enrollment forecast, which expects the campus to add 252 students by 2022 (2.7% growth per year). This conservative number only captures initial growth of the MD program to four classes and limited additional students in programs that have taken classes smaller than permitted by the state in recent years. While this conservative figure does capture known growth, it precludes aspirational growth on the radar of university leadership. This rate was recommended as a suggested method and factored into the hybrid recommendation because it is the assumed growth floor if no additional new programs or expansions are pursued.

A third academic space methodology was the space growth that would be needed to support the combined enrollment opportunities identified by leadership during the planning process. Though aspirational, this growth is rooted in discussions taking place on campus and academic strategic planning. This targeted growth includes expansion to existing academic programs that have to meet certain legislated limits before expanding (such as GME targets or caps), need additional space or specialized facilities to grow, or new programs that are opportunity areas for the institution. In total, the opportunities identified totaled to 1,161 potential additional headcount

(for a total campus of headcount of 3,385). This total headcount was then projected over a 10-year and 20-year time frame to get the growth rates that would be required to achieve that mark for each duration. Both the 10-year and 20-year growth rates were recommended as a suggested methods and factored into the hybrid recommendation because leadership identified each of these as opportunities if the facilities existed to support them.

Lastly, historic academic space growth was examined at a 10-year rate and a 40-year rate based on the data supplied by UNTHSC. Using the existing space data from Archibus, it was determined that the current academic GSF is 290,000 GSF. Subtracting out the academic space in the two buildings built over the last decade (65,000 GSF from the MET and 40,000 from IREB), 185,000 GSF was used as the academic space total on campus 10 years ago. Academic space has grown 57% over the last decade (5.7% per year). Over the past 40-years (dating back to 1978 when EAD was built) all existing academic space on campus has been built, averaging out to 2.5% of the total built each year. The 10-year academic space growth rate is a suggested method that influenced the hybrid recommendation due to its relevancy to recent program trends.

Recommendation: The hybrid recommendation strongly considered the four suggested projection methods (which averaged out to a suggested 5.9%), but ultimately elected for a slightly more conservative 5.0%. This reduction is due to the timing required for specialized academic planning and legislative approval that must preempt program expansion, and by default, the space growth that will support it. Because of this, the hybrid recommendation weights expects that the UNTHSC five-year enrollment projection (that only captures MD school growth) will likely be accurate, but clear academic strategic planning, coupled with facilities growth, can enable the more significant aspirational program growth identified by leadership in the second half of the 10-year window. This equates to one or two new academic buildings over the next decade.

Research Space Growth Projections - Summary Table

Research Space Projection Methods	Annual Growth Rate (Simple)	Method 2028 Space Need (GSF)	Lens 2 Suggested
5-year Grant Expenditure Historic Growth	1.2%	41,400 GSF	
10-year Grant Expenditure Historic Growth	7.1%	244,950 GSF	Yes
15-year Grant Expenditure Historic Growth	17.3%	597,540 GSF	
UNTHSC Supplied 5-year Grant Projection	3.0%	103,500 GSF	Yes
UNTHSC Strategic Plan Grant Goal	5.0% (or greater)	172,500 GSF	Yes
10-year Space Growth (IREB as built)	1.8%	61,755 GSF	
10-year Space Growth (IREB original program)	3.5%	120,405 GSF	
20-year Space Growth	4.6%	159,735 GSF	
Lens 1: Average of All Methods	5.4%	187,723 GSF	
Lens 1: Range of All Methods	1.2 - 17.3%	41,400 - 597,540 GSF	
Lens 2: Average of Suggested Methods	5.0%	173,650 GSF	
Lens 2: Range of Suggested Methods	3.0% - 7.1%	103,500 - 246,330 GSF	
Lens 3: Hybrid Recommendation	5.8%	200,000 GSF	Recommended

Sources: varied, listed below

Research Space Growth Projections - Simplified Datasets

Historic Research Expenditure Growth (latest data 2017)				
Year	2002	2007	2012	2017
Research Expenditure	\$12,347,141	\$25,914,940	\$41,954,584	\$44,420,752

Source: UNTHSC, Historic Grant Research Expenditures, 2017, dataset

UNTHSC Supplied 5-year Research Expenditure Projection - 3% Goal (initial data 2017)						
Year	2017	2018	2019	2020	2021	2022
Research Expenditure	\$44,420,752	\$45,753,375	\$47,125,976	\$48,458,598	\$49,791,221	\$51,123,843

Source: UNTHSC, 5-year Institution Grant Research Expenditure Projection, 2017, dataset

UNTHSC See 2020 Strategic Plan Research Grant Expenditure Growth - 5% Goal				
Year	2017	2018	2019	2020
Research Expenditure	\$44,420,752	\$46,641,790	\$48,041,043	\$49,482,275

Source: UNTHSC, December 2017 Strategic Plan Presentation to UNT Board of Regents, text

UNTHSC Historical Research Space Growth (GSF)			
Year	1998	2008	2018
Research GSF	180,000	292,000	345,000

Source: UNTHSC, Coded Floor Plans - ArchiBus, 2018, dataset

Research

The hybrid space needs recommendation for research programs weighs multiple factors. Due to the inherent relationship between the amount of research being done on campus (research expenditures) and the space that is required to support it, correlation between any projected growth in research expenditures and space is critical. Because of this, historic trends and institutional goals pertaining to expenditure growth were the key factors in recommending how much new research space will be needed over the coming decade.

Research expenditures have grown substantially since the turn of the century. In 2000, the campus executed just over \$10,300,000 in research. By 2017, expenditures had grown to over \$44,400,000. Incrementally, this growth corresponds to 1.2% per year over the last 5 years, 7.1% per year over the last 10 years, and 17.3% per year over the last 15 years. While expenditure growth has plateaued over the last five years (loosely corresponding to leadership transitions at multiple levels), there is a concerted effort by current campus leadership to refocus and reemphasize growth in research expenditures.

This refocusing is captured through the strategic direction campus leadership provided for research growth in the coming years. Two visions were provided to the planning team. The first was a conservative five year outlook, which projected 3.0% growth per year through 2022. This modest goal represented a baseline for the coming years. The second is the extrapolation of the 5.0% (or greater) goal established in the See 2020 Strategic Plan. Dr. Williams has emphasized this 5.0% goal to the campus community, DFW industry, and UNT System Board of Regents. Ultimately, this 5.0% goal represents the institutional priority, and ensuring that facilities exist to support it is the most critical component of the hybrid space needs projection.

Historic space growth was also examined at 10-year and 20-year intervals based on existing space data provided from Archibus. Current research space on campus is 345,000 GSF. Opening later this year, IREB is the only building containing

research space that has been built since 2008 (10-year window). As built, IREB contains about 53,000 GSF of research space, which subtracted from today's total suggests 292,000 GSF of research space existed on campus in 2008. This 10-year growth amounts to 1.8% per year.

IREB is unique in that it was designed to be primarily a research building to meet increasing demand for additional research space, but late in the design process, the program was modified to include space for the emerging MD program (academic space). If IREB had been built as originally intended, the 2018 research space total would be 395,000 GSF equating to a 3.5% per year growth rate over the last decade. While this growth rate was not included as a suggested method because of its tenuous basis as a data point, it is still an important consideration because presumably the demand for research space that predicated the buildings construction still exists.

The 20-year space growth outlook removes both IREB (53,000 research GSF) and CBH (113,500 research GSF) to suggest a total of 180,000 GSF of research space existed on campus in 1998. Over the last two decades, research space has grown at a rate of 7.1% per year.

Stakeholders shared that to-date, research space has been opportunistically assigned (researchers are placed where there is space available, not in optimal facilities or locations). While the master plan emphasis on realigning existing spaces could lead to increased space efficiencies, it was also identified that there are research support space types that do not exist today that are needed to improve collaboration, knowledge sharing, and research environment quality for students, faculty, and staff.

Recommendation: Near-term research space growth of 200,000 GSF. This captures the Strategic Plans 5.0% goal per year and adds an additional .8% to accommodate the need for new support and collaboration spaces in existing and future facilities. This adds significant realignment and backfill of existing facilities or a new research building over the next decade.

Clinical Space Growth Projections - Summary Table

Research Space Projection Methods	Annual Growth Rate (Simple)	Method 2028 Space Need (GSF)	Lens 2 Suggested
5-year Patient Visit Growth	0%	0 GSF	Yes
10-year Patient Visit Growth	27.8%	959,445 GSF	
15-year Patient Visit Growth	11.5%	397,440 GSF	
Steering Committee Defined Vision	0%	0 GSF	Yes
Lens 1: Average of All Methods	9.8%	339,221 GSF	
Lens 1: Range of All Methods	0% - 27.8%	0 - 959,445 GSF	
Lens 2: Average of Suggested Methods	0%	0 GSF	
Lens 2: Range of Suggested Methods	0% - 0%	0 - 0 GSF	
Lens 3: Hybrid Recommendation	0%	0 GSF	Recommended

Source: Texas Higher Education Coordinating Board (THECB), UNTHSC Outpatient Visits, dataset

Clinical Space Growth Projections - Simplified Datasets

Historic Patient Visits (latest data 2015)				
Year	2000	2005	2010	2015
Fall Headcount	192,839	139,164	527,017	526,150

Source: Texas Higher Education Coordinating Board (THECB), UNTHSC Outpatient Visits, dataset

Clinical

The hybrid space needs projection for clinical programs is informed by strategic direction from leadership that clinical functions will be moving off campus. In addition to the clear strategic direction provided by campus leadership, there was a 0% increase in on campus patient visits from 2010 to 2015 (the most recent data the planning team was able to access).

Many medical schools are built around large legacy teaching hospitals that anchor their clinical practice models. Today however, the modes of teaching clinical skills and academic medical care provision are evolving. According to a recent UNTHSC study, in industry, 90% of medicine is practiced in ambulatory settings. Not burdened by the commitment to an on-campus hospital, UNTHSC is uniquely positioned to adapt to these changes by forging partnerships with local and regional health care providers to shift its clinical practice and education into the community. Leadership identified this shift as the strategic direction that will be taken in the coming years.

Over the past few years, multiple new industry partnerships have been announced (in addition to multiple existing partnerships). These partnerships provide residency opportunities for students that directly align to the settings that they are most likely to practice. In February of 2018, UNTHSC announced it will be partnering with Medical City Health care to create 500 new residency positions through the next seven years. Most recently (March of 2018), UNTHSC announced a partnership with Catalyst Health Network to provide ambulatory care opportunities in its 140 office locations.

Recommendation: Zero new clinical space added to the campus in the near-term as the campus continues to forge new partnerships that will allow students residency opportunities to serve and learn off campus. As this shift continues, overall clinical space on campus may reduce.

Administration / Support

The hybrid space needs recommendation for administration / support programs is derived from opportunities to increase the efficiency of existing uses through realignment and creating new spaces to support academic and research growth (at a less aggressive rate).

Administration / Support programs refer to institution-wide management functions (such as the Office of the President, other senior leadership, the IT Department, etc.). Many existing functions are poorly located today (such as the variety of administrative functions taking up prime real estate on the ground floor of the library) and are located in spaces that were not designed to be offices. These spaces also follow the legacy model where each individual gets their own enclosed room. Current higher education trends are shifting towards more open and collaborative office environments, which, in addition to the many other benefits, are typically more space efficient than the traditional office suite models. Opportunity to realign and relocate some of these functions into more efficient locations and formats the near-term will reduce the net space need.

Projection of new Administration / Support space using traditional methods can be complicated for an established campus due to the nature of how these functions grow. Many core administrative functions (such as the Office of the President) will not grow at a rate equal to other programs because they do not get duplicated as the campus expands (you would not hire a second President). However, it is critical to build in some space growth to support the additional personnel that will be required in existing departments.

Recommendation: Forecasted near-term administration / support space need is 37,500 GSF (equal to 1.75% growth per year), capturing space to support academic and research growth, as well as increased efficiencies.

Library

The hybrid space needs recommendation for library programs is informed by three components that each suggest the need for additional space.

Historically, libraries have been about books and quiet study. Today, they are gradually evolving into learning commons where students (and faculty) can meet to work or team in a collaborative environment. Gibson D. Lewis Library began this transformation in 2014 by reducing stacks and opening up the 2nd and 3rd floors with flexible furniture arrangements that promote collaboration. Library staff shared that the transformation has been a great success, having led to increased traffic and transformed the library into the central hub on campus. Building off the success of this new model, stakeholders shared that there is existing demand for additional collaborative and team space.

A second factor for library space needs is projected increases in academic and research programs. Growth in these areas will lead to a large population on campus. It is recommended that growth to the library roughly matches growth in the overall campus population (aspirational enrollment growth by master plan stakeholders was 52% over 10 years), although a slight reduction can be realized as certain core library functions (such as the checkout desk) will not have to be duplicated with growth. Today, core functions comprise about 5% of the libraries GSF. A 47% net increase to the existing library would be 30,000 GSF.

In addition to the library's evolving role as a collaboration hub on campus, it is also seeing an expansion of its role as a knowledge repository and community center. In 2016, the National Library of Medicine designated the Gibson D. Lewis Library as one of eight regional medical libraries. This designation makes the UNTHSC library the primary partner for National Institutes of Health (NIH) community engagement and education programs in the South Central Region. Building off of this relationship, in May of 2018, the library received two grants totaling a combined \$7.9 million from the NIH to expand

community engagement around health education and access to health related information.

Recommendation: Combining increased support and demand for collaborative and teaming environments, projected academic and research growth, and the libraries role as a Regional Medical Library, the master plan recommends adding the 30,000 GSF to the library (equal to 4.7% growth per year)

New / Other

The hybrid space needs recommendation for other programs is driven by the new functions identified by stakeholders during the planning process that the campus currently lacks. These functions were identified as being critical to support and enhance the on-campus experience for students, staff, and faculty and desired for inclusion in the near-term.

Due to the campus currently having minimal space classified within the New / Other category, traditional space projection methods provided insufficient data points to make 10-year space need projections with statistical confidence. Instead, the approach is more simple than other space categories. Approximate GSF's (based on typical sizes on similar campuses) for the identified new programs was combined. The provided sizes should be used as a preliminary guideline, but the campus should undertake additional programming studies before construction to produce final numbers. Identified functions and programs include:

- Event Center / Multi-functional Community & Industry Space (~25,000 GSF New)
- Welcome Center (~10,000 GSF New)
- Exhibition Space (~15,000 GSF New distributed across campus)

Recently, there has also been significant dialog surrounding the creation of a modern recreation center to replace the functions currently in the Founders Activity Center. Preliminary analysis suggests that the current facility is right-sized for the campus population. However, it is poorly

located, in an aging structure, has an inefficient layout, and lacks some desired amenities. The near-term master plan implementation strategy would allow for the relocation of this program into the campus core, but would recommend a 1:1 replacement resulting in no additional GSF need.

Recommendation: The combined total of recommended new programs identified by stakeholders as critical in the near-term is 50,000 GSF (equal to 29.5% growth per year).

Facilities

The hybrid space needs projection for facilities programs is dictated by what is required to support the new facilities that will enable growth in the other space categories.

Historically, facility space has been added in non-standardized intervals on an as-needed basis. As the campus grows, new facilities space will be required to support new development. Rather than continue the historical trend of adding new facilities space as the need happens (and often to just support individual buildings), new facilities space should be constructed to support the creation of campus utility loops and provide capacity (or the ability to add capacity) to enable future development.

Any growth west of Montgomery Street will require new utility capacity and infrastructure. The 2018 Campus Master Plan recommends creation of a new West Campus central utility plant in the near-term to meet this need (options for which are outlined in greater detail later in this Appendix).

Recommendation: Based on the full build-out of the master plan, this new utility plant will eventually need to be 15,000 GSF (equal to 3.3% growth per year) to support all future West Campus development. It is recommended that this entire space be created near-term to provide room for expansion enabling mid- and long-term development.

Leased

The hybrid space needs projection for leased programs is informed by strategic direction from leadership to not increase space near-term.

Leased space is unique in that it is not critical to campus operation, but instead, is based on legacy uses or facilities, filling unoccupied spaces, or conscious real estate investments to generate revenue. Because of this, leased spaces are highly variable and fluctuate over time.

The master plan sets a goal to minimize or eliminate the need for leased space in the near-term through more efficient use of existing facilities and redevelopment of legacy facilities that are currently leased (such as the Surgical Center 3617 West 7th Street).

Long-term, the master plan provides a framework to bring industry partners onto campus that may lease space or even partner on the construction of entire buildings. The master plan also provides opportunity to create revenue-generating commercial spaces along the ground floor of future buildings that front West 7th. As these decisions arise in the future, leadership should carefully consider where leased space is being placed and how it integrated with the campus (both physically and programmatically).

Recommendation: Near-term space projections include zero new lease space, and potentially includes a reduction in leased space as the campus prepares for future development to replace structures currently holding leased space.

Demonstrative Implementation Strategy

Highlighted in the overview of the Implementation Chapter, at the start of the planning process UNTHSC stakeholders shared a desire to create a flexible and adaptable master plan capable of responding to ever-changing campus program and facility needs. Because of this, the master plan is defined by the Framework (which gives organizational form to campus patterns that will support the desired physical environment) rather than specific regulated building uses. To achieve this desire for a flexible campus plan capable of evolving to meet future needs, the program of no future building is dictated as a part of the overall master plan. Instead, the master plan defines general use districts to ensure complimentary adjacencies are maintained as the campus develops. These use districts reinforce Planning Principle #2, which characterizes the desire to align existing and future functions with the correct locations on campus and in the correct facilities.

While this flexibility is important, the planning team also wanted to demonstrate one possible scenario that could meet the forecasted space needs outlined previously in this chapter. The subsequent four pages demonstrate this potential strategy based on assessment of current and projected needs. As demand creates need for expansion, further analysis should be taken at the onset of each project to ensure that the correct programs are being located within each building.

Although the shown approach is currently recommended, this is just one possible scenario. As the campuses needs change and evolve, numerous alternative implementation approaches may be preferable to best meet the campus's needs.

How to interpret these pages:

A. Graphic illustration of step: Illustration shows existing buildings and campus grayed out. At each step, colored elements are added to the diagram showing new buildings, associated site and landscape projects, and backfill renovations to existing buildings. Colors match the primary space types presented in the Observations Chapter (and also detailed in element C).

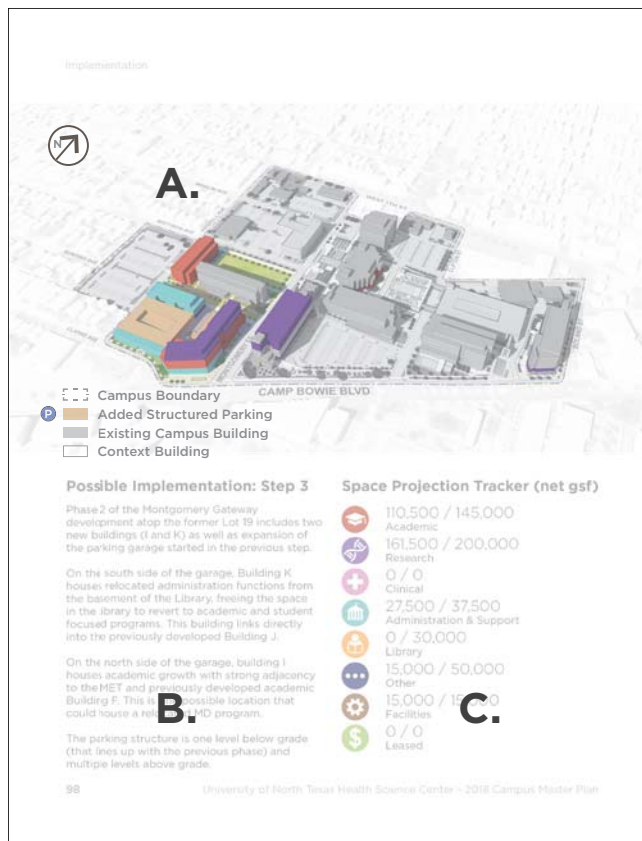
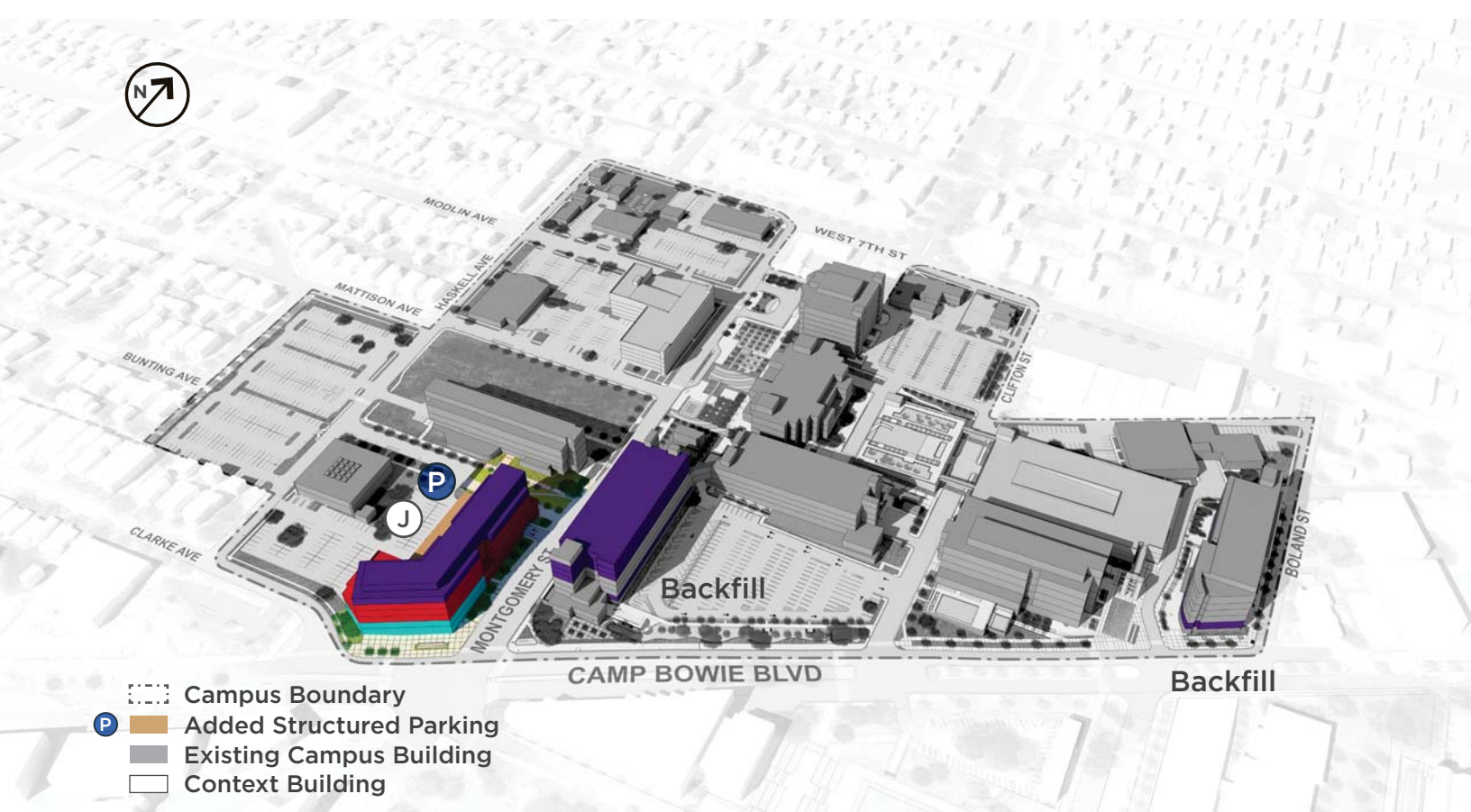


Diagram detailing how to interpret subsequent implementation pages

B. Step Overview: Summary explanation of what is accomplished during each step.

C. Space Projection Tracker: Shows the net GSF increase for all changes shown for a given step. The eight primary space types are shown with their color corresponding to the graphic illustration above on the page. Each space category has two numbers. The first is the net increase in square footage for each space type over existing space. This number does not reflect when existing uses are relocated into new buildings (because that is not new space). Instead, the space type that backfills the vacated increases as it is increasing in total space. The second number is the total space need recommended for each space type based on the hybrid of methodologies outlined previously.

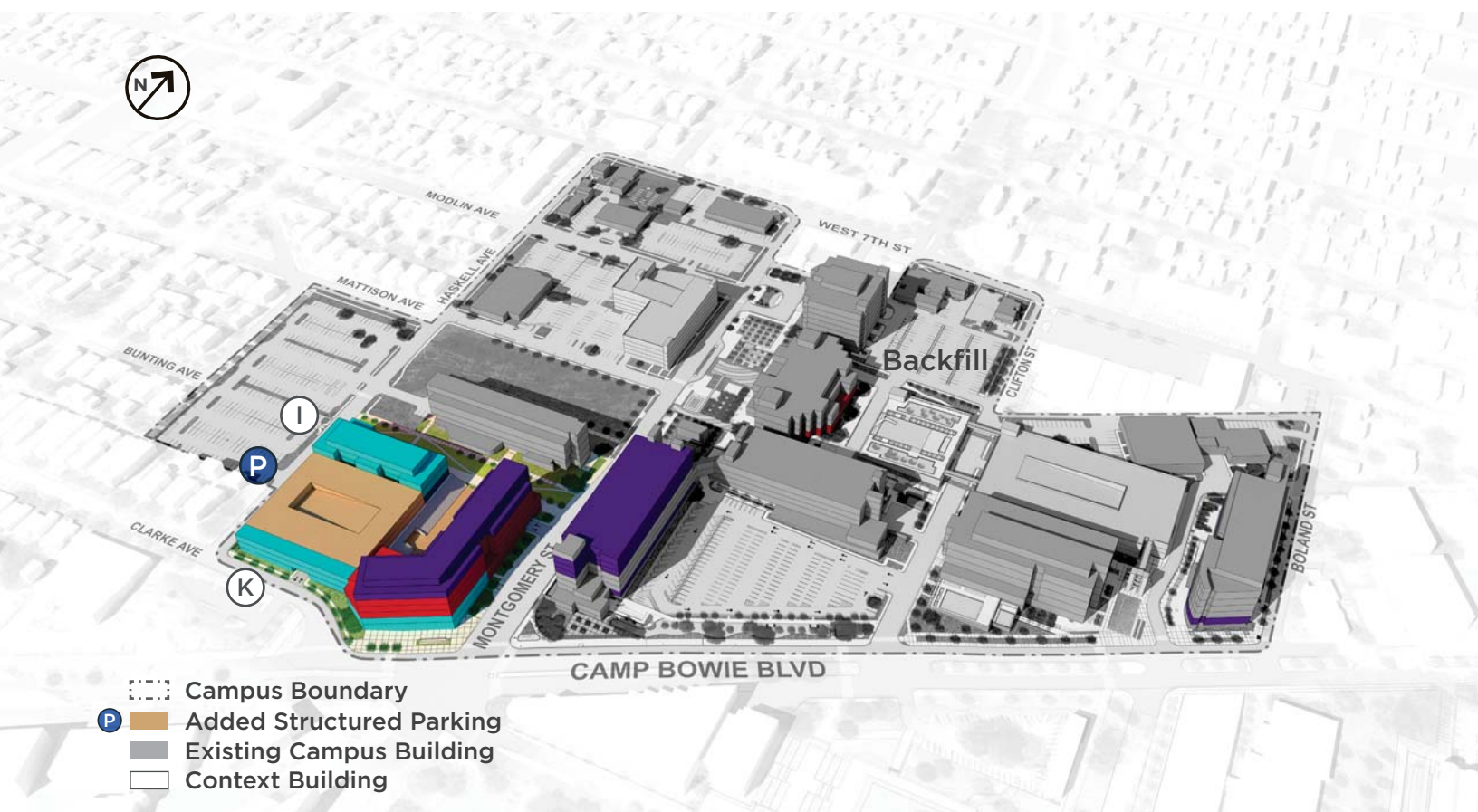


Possible Implementation: Step 1

Restricted by a lack of existing swing space on campus which could be used to decant existing misaligned programs into, the planning team identified the proposed Montgomery Gateway Building (Building J) as a possible first move that could provide maximum benefit. Building J would enable UNTHSC to relocate existing academic spaces in EAD and CBH, as well as existing administrative functions in EAD and SSC, into the new building. This would free up the vacated spaces in existing buildings to backfill more appropriate research functions, creating better programmatic adjacencies, alignment, and efficiencies across campus. Totalling 180,000 GSF, the recommended program is mixed-use comprised of containing academic and student-focused administration functions on floors one to five, new research functions on the top two floors, and a one story at-grade garage that will be expanded into a larger garage in step 2. The MD school could potentially be relocated to Building J.

Space Projection Tracker (net gsf)

	41,000 / 145,000 Academic
	126,000 / 200,000 Research
	0 / 0 Clinical
	20,000 / 37,500 Administration & Support
	0 / 30,000 Library
	2,500 / 50,000 Other
	0 / 15,000 Facilities
	0 / 0 Leased



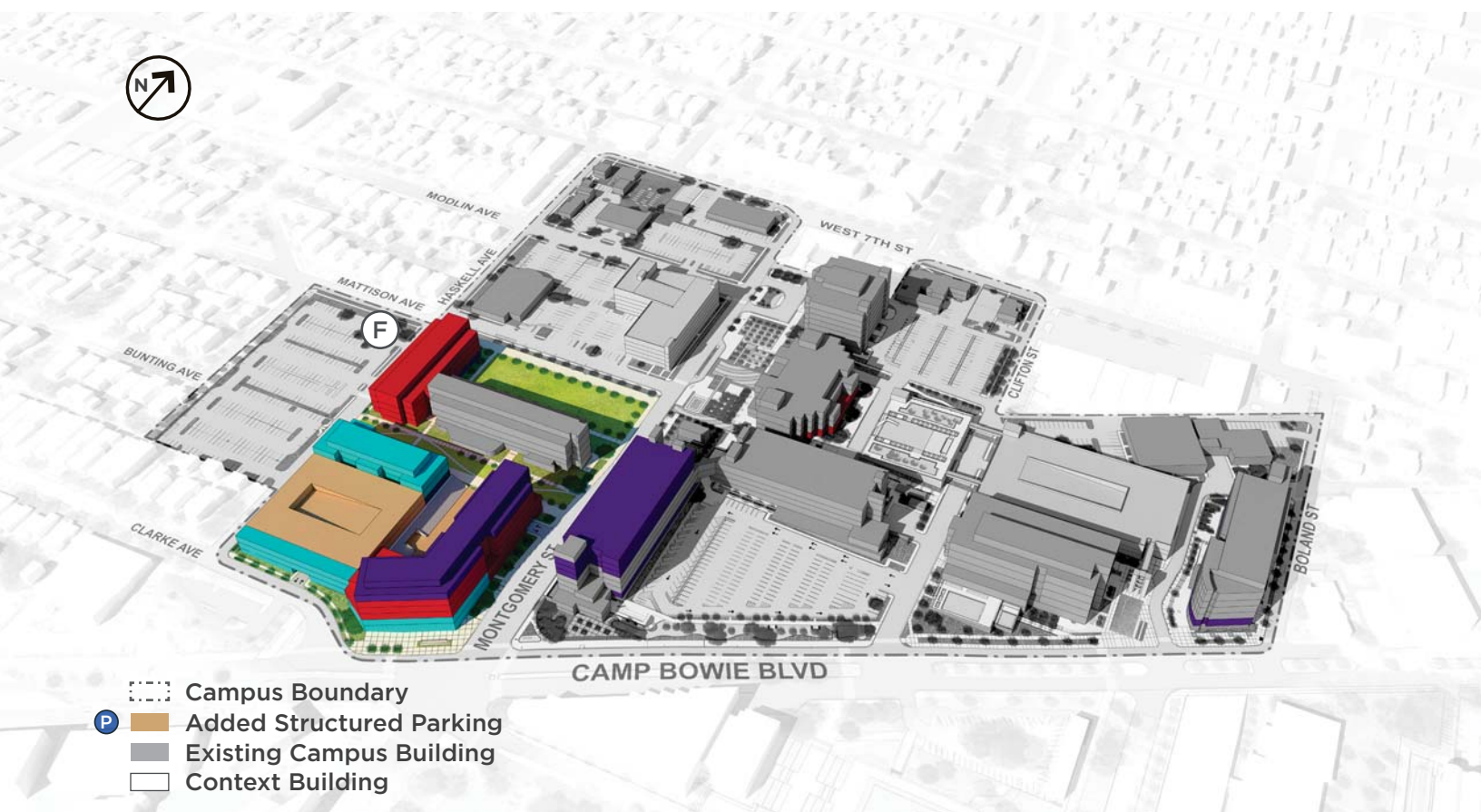
Possible Implementation: Step 2

Phase 2 of the Montgomery Gateway development atop the former Lot 19 includes two new buildings I and K as well as expansion of the parking garage started in the previous step. To meet long term parking needs, it is recommended that the parking structure be one level below grade (due to the site topography, this would line up with the at-grade garage constructed in the previous phase) and multiple levels above grade. Lining the south side of the garage, Building K houses relocated administration functions from the basement of the Library, freeing the space in the library to revert to academic and student-focused programs. This building links directly into the previously developed Building J.

On the north side of the garage, Building I could house new functions such as a fitness center or larger public functions that support collaboration, space for administrative growth, and a new West Campus utility plant.

Space Projection Tracker (net gsf)

	61,000 / 145,000 Academic
	126,000 / 200,000 Research
	0 / 0 Clinical
	28,500 / 37,500 Administration & Support
	0 / 30,000 Library
	15,000 / 50,000 Other
	15,000 / 15,000 Facilities
	0 / 0 Leased











Possible Implementation: Step 3

Towards the end of the near-term period, an additional academic building is anticipated to meet space needs. Proposed Building F, located on the western side of the MET, totals 95,000 GSF. It is recommended that this building be primarily academic, with other student-centered support spaces (such as collaboration and teamwork spaces) located on the ground floor overlooking the MET Lawn. To prevent walling campus off from the North Hi Mount neighborhood and Parking Lot 7, the ground level of building F should be highly permeable and have visible interiors. Entrances should be located on all four sides creating connections to the Campus Spine, Academic Mall, MET Lawn, and Haskell Street.

Building F is another possible location to relocate the MD program into.

Space Projection Tracker (net gsf)

	145,00 / 145,000 Academic
	126,000 / 200,000 Research
	0 / 0 Clinical
	28,500 / 37,500 Administration & Support
	0 / 30,000 Library
	20,000 / 50,000 Other
	15,000 / 15,000 Facilities
	0 / 0 Leased



Possible Implementation: Independent Projects

The below independent projects help complete the projected space needs, meet campus needs, and can proceed at any point.

Library Addition: Expansion vertically and horizontally to create new academic and library space. New entrance onto Alumni Plaza.

Campus Gateway Center: New character building housing a welcome center, flexible event and conference space, industry space, a parking structure, and senior administration office suites.

Clifton Garage Expansion: Additional floor to meet near-term parking needs.

MD Program Relocation: As the program grows it is anticipated it will need additional space. Relocation allows IREB to increase research space.

Space Projection Tracker (net gsf)

	150,000 / 145,000 Academic
	200,000 / 200,000 Research
	0 / 0 Clinical
	37,500 / 37,500 Administration & Support
	30,000 / 30,000 Library
	50,000 / 50,000 Other
	15,000 / 15,000 Facilities
	0 / 0 Leased

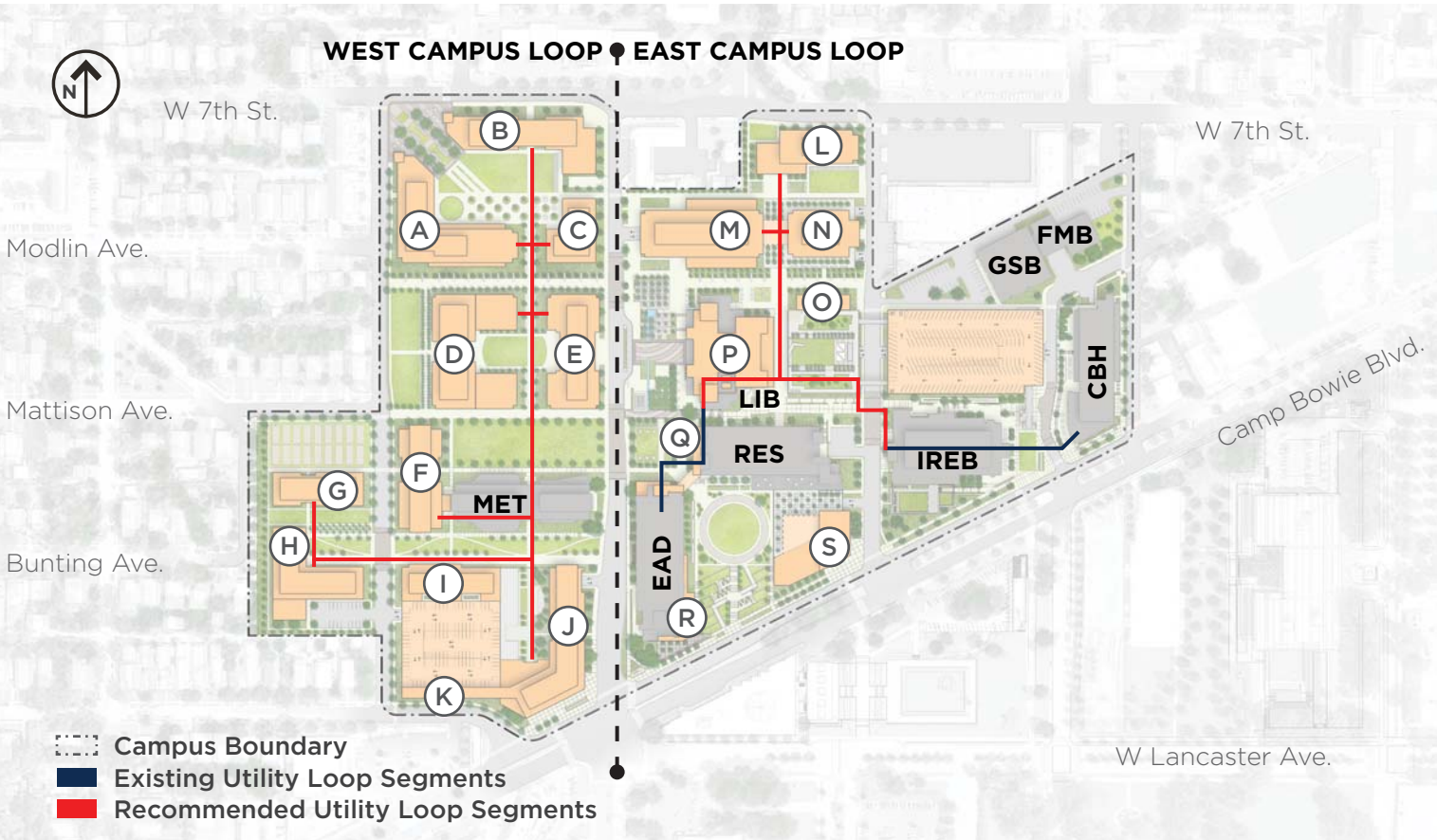
Existing Mechanical System Inventory & Conditions

Building	Equipment	Date Purchased	Life Expectancy	End of Life	Condition	Capacity
EAD	Chiller 1	1998	20	2018	Fair	500 Tons
EAD	Chiller 2	1978	20	1998	Poor	500 Tons
EAD	Chiller 3	2011	20	2031	Excellent	440 Tons
EAD	Boiler 1	1993	30	2023	Poor	250 HP
EAD	Boiler 2	1996	30	2026	Poor	250 HP
EAD	Boiler 3	2011	30	2041	Excellent	90 HP
EAD	Boiler 3a	2011	30	2041	Excellent	90 HP
RES	Chiller 4	2000	20	2020	Good	800 Ton
RES	Chiller 5	2000	20	2020	Good	500 Tons
RES	Steam Boiler 1	1981	30	2011	Good	250 HP
RES	Steam Boiler 2	2001	30	2031	Good	250 HP
HP	Chiller 1	1997	20	2017	Fair	150 Tons
HP	Chiller 4	2011	20	2031	Excellent	440 Tons
HP	Hot Water Boiler 1	1997	30	2027	Fair	25 HP
HP	Hot Water Boiler 2	2005	30	2035	Good	25 HP
HP	Hot Water Boiler 3	2005	30	2035	Good	25 HP
CBH	Chiller 1	2004	20	2024	Good	500 Tons
CBH	Chiller 2	2004	20	2024	Good	500 Tons
CBH	Chiller 3	2004	20	2024	Good	500 Tons
CBH	Chiller 4	2010	20	2030	Excellent	150 Tons
CBH	Boiler 1	2004	30	2034	Good	200 HP
CBH	Boiler 2	2004	30	2034	Good	200 HP
CBH	Boiler 3	2004	30	2034	Good	200 HP
CBH	Boiler 4	2004	30	2034	Good	200 HP
MET	Chiller 1	2004	20	2034	Good	200 Tons
MET	Chiller 2	2009	20	2039	Excellent	500 Tons
MET	Boiler 1	2009	30	2039	Good	90 HP
MET	Boiler 2	2009	30	2039	Good	90 HP
IREB	Chiller 1	2018	20	2038	Excellent	500 Tons
IREB	Chiller 2	2018	20	2038	Excellent	500 Tons
IREB	Boiler 1	2018	30	2048	Excellent	50 HP
IREB	Boiler 2	2018	30	2048	Excellent	50 HP

Total Existing Chiller Capacity	6,680 Tons
Total Existing Boiler Capacity	2,335 HP

- Systems past their life expectancy or in poor condition
- Systems nearing the end of their life expectancy or in sub-par condition

Master Plan Utility Capacity Demand & Loop Concepts



WEST CAMPUS: CHILLER DEMAND			
Building Name	GSF	SF/TON	TONS
Proposed A	90,000	275	327
Proposed B	74,250	275	270
Proposed C	25,000	275	91
Proposed D	138,000	275	502
Proposed E	96,000	275	349
Proposed F	95,000	275	345
Proposed G	40,500	275	147
Proposed H	68,250	275	248
Proposed I	72,000	275	261
Proposed J	180,000	275	655
Proposed K	18,500	275	67
MET	115,934	250	483
TOTALS	1,013,500		3,745

EAST CAMPUS: CHILLER DEMAND			
Building Name	GSF	SF/TON	TONS
Proposed L	66,250	275	241
Proposed M	191,000	275	694
Proposed N	72,500	275	264
Proposed O	7,600	325	23
Proposed P	64,500	325	198
Proposed Q	23,850	275	86
Proposed R	24,800	275	90
Proposed S	45,000	275	163
EAD	194,099	250	925
RES	138,701	250	583
LIB	114,064	300	454
IREB	172,922	300	576
CBH	160,320	175	927
GSB	15,506	0	0
FMB	7,409	0	0
TOTALS	1,300,000		5,224

West Campus Central Utility Plant (CUP) Study



- CUP Plant Option
- Existing Segments
- Recommended Segments

Option 1:

Creation of a central utility plant in the basement of one of the first new West Campus buildings

Near-term Rough Order of Magnitude Cost Estimate:

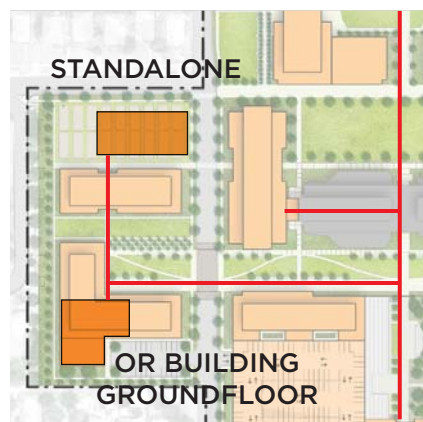
\$35,000,000 - 55,000,000+ *

Key Pros:

- Combines with cost of larger building project (easier to build)
- Location / timing in first proposed building

Key Cons:

- Requires additional acoustic insulation
- Most difficult to access



- CUP Plant Option
- Existing Segments
- Recommended Segments

Option 2:

Stand-alone, ground level central utility plant on existing Lot 7

Near-term Rough Order of Magnitude Cost Estimate:

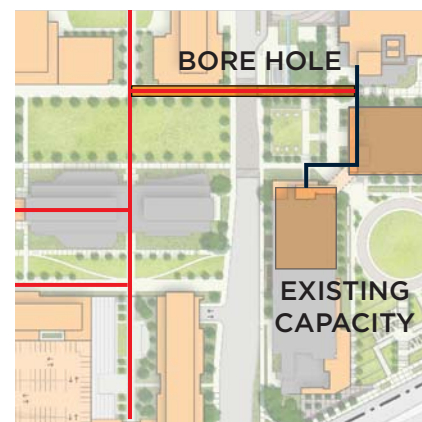
\$25,000,000 - 45,000,000+ *

Key Pros:

- Easiest to service
- Cheaper to build than basement option

Key Cons:

- Architectural / neighborhood adjacency issues
- Harder to fund stand alone plant building



- CUP Plant Option
- Existing Segments
- Recommended Segments

Option 3:

No initial West Campus plant, connect to existing east campus capacity under Montgomery

Near-term Rough Order of Magnitude Cost Estimate:

\$4,000,000 - 6,000,000+ *

Key Pros:

- Lowest up front cost
- Can serve first two to three buildings and pushes decision “down the road”

Key Cons:

- Most complicated
- Highest long-term cost (will still require a plant)

* Note: Provided costs are rough order of magnitude estimates based on high-level conceptual analysis of the three options. Additional feasibility and cost studies are required before proceeding.

Option 1:**Creation of a central utility plant in the basement of one of the first new West Campus buildings**

Considering that any buildings added to West Campus will be required to add MEP capacity to support itself, it is logical and efficient to consider building additional MEP space in one of the first new buildings to create a West Campus central utility plant. This plant will initiate a West Campus loop to serve all future development west of Montgomery Street. Building I is recommended for near-term implementation plan, and is identified to possibility to be one of the first buildings added to West Campus. The basement of Buildings I is large enough to accomplish this and house up to 5,000 tons in the future, which exceeds the total future need for West Campus. Building I is also well located for servicing ease and will not be visible or disruptive to key campus spaces or operations.

At minimum, a West Campus central utility plant located in a basement will need to be 40' wide by 150' long with a 12' ceiling height. The footprint of Building I is approximately twice this size, which would allow for the campus to either not develop a basement under the entire building, or allow for the creation of space for other facility functions (such as material storage). Shafts through the building would be required to connect the basement to necessary infrastructure on the roof, slightly reducing the available square footage on every floor. If Building I is not the first building built, any preceding new West Campus buildings should create space for MEP infrastructure to be self-supporting until the basement plant is constructed. These stand-alone systems must be capable of linking into the eventual loop long-term.

If built in the near-term, a basement central utility plant may only require a fraction of the total expected tonnage demand initially. The master plan recommends modules for the West Campus plant be no less than 500 tons (preferably, 1000 tons) for efficiency and redundancy, shell space should be left to add modules over time.

Pros:

- Allows project cost to combine into the project costs of an academic building
- Building I is centrally located to support future West Campus development
- Proximity to MET makes it easy to create the first West Campus loop segment
- Avoids having a stand alone central utility plant building that takes up valuable space and is unsightly
- Allows operations to remain out of sight from students, staff, and faculty

Cons:

- Would require large shafts running from the basement to the roof that would reduce the assignable square footage on floors above
- Potential noise issues that will need to be accounted for with additional sound insulation during design
- Hardest for facilities staff to access and will require special design consideration to ensure the ability to add / remove / service equipment in the future
- Building in a basement will be the highest rough order of magnitude cost

Option 2:**Stand-alone, ground level central utility plant on existing Lot 7 (alternatively could be located on the ground floor of building G or H with dedicated outdoor yard space)**

The second option is creating an efficient stand-alone central plant building located somewhere on the existing Parking Lot 7. This plant could also be located on the ground floor of one of the proposed buildings west of Haskell Street if accompanied by dedicated outdoor space. One of the challenges for this option is that architecture of plant buildings is typically utilitarian and unappealing. Due to the sites proximity to the adjacent neighborhood, special care should be given select facades and additional landscape screening elements included to reduce the visual harshness of the program. This facility will also increase maintenance traffic close to the neighborhood, which may be undesired. Another challenge (as opposed to option 1) will be justifying the cost of a stand alone building and oversized chiller in conjunction with the first new building on West Campus.

Sizing for a standalone structure would ideally be 100' by 50' with 24' ceilings to make room for larger 1000-ton chillers, which are more efficient to operate. This layout would allow for a mezzanine to enable easy access to and servicing of equipment. The 24' ceilings would also leave room for pumps, piping, and electrical gear above the chillers. Cooling towers would be located on the roof and require screening to mask them from all angles. A plant this size could house up to five 1000-ton chillers. At maximum build-out, West Campus is projected to need 3,745 tons. This excess would allow for system redundancy as chillers age or taken off line. Depending on when the plant is built, only one or two chillers may be required initially. Removed from the largest buildings identified for West Campus, this option will require more underground piping (under Haskell Street) be created initially to connect the plants capacity to the core of West Campus.

Pros:

- Easiest for facilities staff to service and operate due to extra ceiling height and not having to lower equipment below ground
- Least complicated design (soft costs)
- Construction cost per square foot cheaper than a basement option
- Could easily be designed large to include other facilities programs
- Easy to expand or modify in the future

Cons

- Architectural / neighborhood adjacency issues, may require design considerations that increase cost
- Depending on location, may reduce or eliminate the community garden location identified in the master plan
- Potentially increases traffic near the neighborhood, including occasional large service vehicles and equipment deliveries
- Harder to fund stand-alone plant building with excess capacity in conjunction with the first academic building (when the capacity would be needed)
- Requires development of more underground loop infrastructure on the front end (long-term, the same amount of infrastructure will be needed for all three options)

Option 3:**No initial West Campus plant, connect to existing east campus capacity under Montgomery**

Another option is a scenario where no West Campus central utility plant is created in the near-term. Instead, the campus could create a bore hole under Montgomery Street to connect into existing East Campus capacity. Currently, there is enough surplus capacity to support the first two to three new buildings on West Campus. Long-term, Option 3 would still require a dedicated West Campus plant be created in the mid-term (Option 1 or 2).

Preliminary analysis suggests that directional boring equipment could be set up in the space north of the existing chilling towers. These machines could bore west under Montgomery Street and come up in the eastern portion of the MET Lawn. A 10" bore hole is the recommended size to support the first few West Campus buildings. Although the process of creating a bore hole avoids having to close down Montgomery Street for an extended period of time to dig up and install utilities, this option does still present some challenges. Option 3 would require coordination and approval from the City of Fort Worth, create noise pollution for nearby buildings during construction, involve up-sizing of existing underground piping on the east side of campus, and would likely require tearing up portions of the Campus Spine and MET lawn.

Eventually, this scenario would still require the creation of a central utility plant on West Campus to support all future development west of Montgomery Street. The value of this option is that it has a lower near-term cost than creating an entire central utility plant and enables the decision about the location and size of a new West Campus plant to be pushed into the future. Long-term, this 10" bore hole could serve as an emergency backup for the separately operated (but joined) east and west campus utility loops.

Pros:

- Existing East Campus capacity is enough to support the next two to three West Campus buildings if connected via a loop under Montgomery, enabling the campus to wait years before adding new chillers
- Delays decision about plant location and size, giving the campus the maximum amount of flexibility; but will have to combine with Options 1 or 2 to meet demand at full build-out; This gives the campus the greatest flexibility in selecting a solution
- Lowest upfront rough order of magnitude cost
- Long-term, the bore hole can serve as an emergency backup connecting both campus loops

Cons:

- Requires complicated engineering to bore under Montgomery Street and will require coordination and approval from the City of Fort Worth
- Cannot serve all West Campus development long-term without the creation of a central utility plant (Options 1 or 2) in the mid- or long-term
- Highest expected long-term cost as a Option 1 or 2 will still be required



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UNTS Enterprise Audit Report Inventory

The repository represents the detailed audit activity supporting the “UNTS Enterprise Audit Report Inventory” presentation listed on the Schedule of Events for the Board of Regents August 9-10, 2018.

The repository includes audit activity from UNT System Internal Audit, Texas State Auditor’s Office and other external agencies from Fiscal Year 2013 through the current timeframe.

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2009	09-011 ISC	Finance	Advancement Office Follow-Up Review	UNT System	The written agreement between the Center and the Foundation has not been revised or reaffirmed since September 1994.	Low	Review and update the agreement between the Center and the Foundation including a "right to audit clause." Refer to legal counsel and the ASB-COD model agreement for guidance. Administ.rnbs.	Management agrees. In process. The Vice President for Development will raise this topic at the April 2009 Foundation Board meeting and distributed upon approval of appropriate center and foundation Administrators.	Doug White, VP of Institutional Advancement	Original Date 11/20/2012 Revised Date 12/31/16	Closed
Internal	UNT System Internal Audit	Fiscal Year 2009	09-011 ISC	Finance	Advancement Office Follow-Up Review	UNT System	The written agreement between the Center and the Foundation has not been revised or reaffirmed since September 1994.	Low	Distribute or make available the reaffirmed agreement to stakeholders including center administrators, Advancement Office employees, and the foundation board of Directors.	Management agrees. In process. The Vice President for Development will raise this topic at the April 2009 Foundation Board meeting and distributed upon approval of appropriate center and foundation Administrators.	Doug White, VP of Institutional Advancement	Original Date 11/20/2012 Revised Date 12/31/16	Closed
External	EXPERIS	Fiscal Year 2013	N/A	Information Technology	UNT Health Science Center (UNT HSC) HSC Change Management Assessment	UNTHSC	1. Current Change Management Practices - Based on the documentation provided (e.g., documents listed in Appendix A, email, etc.), it was determined that for the ten applications/services that meet the criteria of being both high risk and institutional in scope (impact), a population of changes could not be evidenced and that Change Management practices were found to be minimal, general in nature and less than expected. Standards and procedures to handle requests (including maintenance and patches) for changes to applications, procedures, processes, system and service parameters, and the underlying platforms (hardware, software, and network) are not documented or implemented overall (infrastructure) and its functionality for each request for change. Process to ensure changes are categorized, prioritized, assigned, and authorized (pre-implementation and post-implementation testing process/requirements. Process for defining, testing, documenting, assessing and authorizing emergency changes (outside of the "normal" change process) and reporting systems to document and communicate requested changes, completion of approved and in-process changes, and completion of approved changes (e.g., a spreadsheet). Procedures to update associated system and user documentation (configuration documentation).	High	1. Recommendations/Activities to Consider for Observations 1.1. The following are considered suggests and not mandates for the application/services that meet the criteria of being both high risk and institutional in scope (impact): Establish a tracking and reporting system (e.g., spreadsheet) to document approved/rejected changes, communicate the status of requests (e.g., in-process, in testing, approved, completed), planned (or document explanations where changes deviate from original plan). Process to ensure changes are categorized, prioritized, assigned, and authorized (pre-implementation and post-implementation testing process/requirements. Process for defining, testing, documenting, assessing and authorizing emergency changes (outside of the "normal" change process) and reporting systems to document and communicate requested changes, completion of approved and in-process changes, and completion of approved changes (e.g., a spreadsheet). Procedures to update associated system and user documentation (configuration documentation).	ITS management agrees with these best practice recommendations and will complete the steps listed below to ensure that all changes to applications identified as high risk/high impact. Estimated completion date for pilot is within the next 6 months. Applications identified as high risk/high impact. Estimated completion date for pilot is within the next 6 months. Change management procedures will be formalized at the completion of the pilot, and with adoption of SCSM or similar tool. Procedures will include approval processes, pre and post testing, and emergency change protocols, and will be reviewed annually by ITS management. ITS is currently in the process of updating our institutional and internal policies, including Systems Change Control.	ITS management team - Lynley Dugan, Executive Director of Information Technology Services, Anthony Tisser, Director of Infrastructure and Security, Woody Hagar, Director of Information Services, and Renee Drabler, Vice Provost for Academic Affairs and Development/CIO.	8/31/2014	N/A
External	EXPERIS	Fiscal Year 2013	N/A	Information Technology	UNT Health Science Center (UNT HSC) HSC Change Management Assessment	UNTHSC	1. Current Change Management Practices - Based on the documentation provided (e.g., documents listed in Appendix A, email, etc.), it was determined that for the ten applications/services that meet the criteria of being both high risk and institutional in scope (impact), a population of changes could not be evidenced and that Change Management practices were found to be minimal, general in nature and less than expected. Standards and procedures to handle requests (including maintenance and patches) for changes to applications, procedures, processes, system and service parameters, and the underlying platforms (hardware, software, and network) are not documented or implemented overall (infrastructure) and its functionality for each request for change. Process to ensure changes are categorized, prioritized, assigned, and authorized (pre-implementation and post-implementation testing process/requirements. Process for defining, testing, documenting, assessing and authorizing emergency changes (outside of the "normal" change process) and reporting systems to document and communicate requested changes, completion of approved and in-process changes, and completion of approved changes (e.g., a spreadsheet). Procedures to update associated system and user documentation (configuration documentation).	High	1. Recommendations/Activities to Consider for Observations 1.1. The following are considered suggests and not mandates for the application/services that meet the criteria of being both high risk and institutional in scope (impact): Establish formal, standardized, Change Management procedures to administer all change requests for those applications/services that are both high risk and institutional in scope/impact (e.g., maintenance and patches, changes to system and service parameters, and the underlying platforms). Tracking and reporting systems to document and communicate requested changes, completion of approved and in-process changes, and completion of approved changes (e.g., a spreadsheet). Procedures to update associated system and user documentation (configuration documentation).	ITS management agrees with these best practice recommendations and will complete the steps listed below to ensure that all changes to IT systems at UNTHSC are assessed, categorized, comply with TAC guidelines, and as appropriate, follow a formal change process. Formal change processes will be applied to systems or applications that have been classified as high risk (contains or processes private and/or regulated data), and high impact (institutional wide use). Classification and evaluation of high risk/high impact systems and applications will be conducted and reviewed by ITS management, CIO, and stakeholders annually. ITS has begun a pilot of Microsoft System Center Service Manager (SCSM), a tool for IT service and change management that will hold system and application information, and allow for the tracking and reporting of changes made to those systems and applications identified as high risk/high impact. Estimated completion date for pilot is within the next 6 months. Change management procedures will be formalized at the completion of the pilot, and with adoption of SCSM or similar tool. Procedures will include approval processes, pre and post testing, and emergency change protocols, and will be reviewed annually by ITS management. ITS is currently in the process of updating our institutional and internal policies, including Systems Change Control.	ITS management team - Lynley Dugan, Executive Director of Information Technology Services, Anthony Tisser, Director of Infrastructure and Security, Woody Hagar, Director of Information Services, and Renee Drabler, Vice Provost for Academic Affairs and Development/CIO.	8/31/2014	N/A

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UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	EFWRS	Fiscal Year 2013	NA	Information Technology	UNT Health Science Center (UNT HSC) HSC Change Management Assessment	UNT HSC	<p>1. Current Change Management Practices - Based on the documentation provided (e.g., documents listed in Appendix A, email, etc.), it was determined that for the ten applications/services that meet the criteria of being both high risk and institutional in scope, the Change Management practices were found to be minimal, general in nature and less than expected.</p> <p>Standardized procedures to handle requests (including maintenance requests) were not documented for the underlying platforms, system and service parameters, and the underlying platforms.</p> <p>Structured way to determine the impact on the operational system and overall infrastructure) and its functionality for each request for change.</p> <p>Change management processes are categorized, prioritized, assigned, and authorized.</p> <p>Process for pre-implementation and post-implementation testing protocols/requirements.</p> <p>Approved defining, testing, documenting, assigning and authorizing emergency changes (outside of the 'normal' change process).</p> <p>Tracking and reporting systems to document and communicate rejected changes, communicate the status of approved and in-process changes, and update associated system and user documentation and procedures whenever changes are implemented (e.g., configuration documentation).</p>	High	<p>Recommendations/Activities to Consider for Observations 1 through 4: The following are considered suggests and not mandates for the applicability/services that meet the criteria of being both high risk and institutional in scope (Impact):</p> <ul style="list-style-type: none"> Ensure the user community agrees with the Risk and Scope assigned to each application/service. 	<p>ITS management agrees with these best practice recommendations and will complete the steps listed below to ensure that all changes to IT systems at UNT HSC are assessed, categorized, comply with TAC guidelines, and as appropriate, follow a formal change process. Formal change processes will be applied to systems or applications that have been classified as high risk (contains or processes private and/or classified data), and high impact (institutional wide use).</p> <ul style="list-style-type: none"> Classification and evaluation of high risk/high impact systems and applications will be conducted and reviewed by ITS management. ITS has begun a pilot of Microsoft System Center Service Manager (SCSM), a tool for IT service and change management that will hold system and application information, and allow for the tracking and reporting of changes made to those systems and applications. The pilot will be completed by the end of the fiscal year for pilot is within the next 6 months. Change management procedures will be formalized at the completion of the pilot, and with adoption of SCSM or similar tool. Procedures will be reviewed annually by ITS management. ITS is currently in the process of updating our institutional and internal policies, including Systems Change Control. 	ITS management team - Lylyly Dugan, Executive Director of Information Technology Services, Anthony Tiszen, Director of Information Security, Woody Hagar, Director of Information Services, and Renee Drabler, Vice Provost for Academic Affairs and Development/CIO.	8/31/2014	N/A
External	EFWRS	Fiscal Year 2013	NA	Information Technology	UNT Health Science Center (UNT HSC) HSC Change Management Assessment	UNT HSC	<p>1. Current Change Management Practices - Based on the documentation provided (e.g., documents listed in Appendix A, email, etc.), it was determined that for the ten applications/services that meet the criteria of being both high risk and institutional in scope (Impact), a population of changes could not be evidenced and that Change Management practices were found to be minimal. Change Management practices do not include the following: Standardized procedures to handle requests (including maintenance requests) were not documented for the underlying platforms system and service parameters, and the underlying platforms (system and overall infrastructure) and its functionality for each request for change.</p> <p>Change management processes are categorized, prioritized, assigned, and authorized.</p> <p>Process to ensure changes are categorized, prioritized, assigned, and authorized.</p> <p>Process for pre-implementation and post-implementation testing protocols/requirements.</p> <p>Approved defining, testing, documenting, assigning and authorizing emergency changes (outside of the 'normal' change process).</p> <p>Tracking and reporting systems to document and communicate rejected changes, communicate the status of approved and in-process changes, and update associated system and user documentation and procedures whenever changes are implemented (e.g., configuration documentation).</p>	High	<p>Recommendations/Activities to Consider for Observations 1 through 4: The following are considered suggests and not mandates for the applicability/services that meet the criteria of being both high risk and institutional in scope (Impact):</p> <ul style="list-style-type: none"> Ensure all requests for those applications/services that are both high risk and institutional in scope/impact, in a structured way are categorized, prioritized and authorized and supporting evidentiary documentation is archived. 	<p>ITS management agrees with these best practice recommendations and will complete the steps listed below to ensure that all changes to IT systems at UNT HSC are assessed, categorized, comply with TAC guidelines, and as appropriate, follow a formal change process. Formal change processes will be applied to systems or applications that have been classified as high risk (contains or processes private and/or classified data), and high impact (institutional wide use).</p> <ul style="list-style-type: none"> Classification and evaluation of high risk/high impact systems and applications will be conducted and reviewed by ITS management, stakeholders annually. ITS has begun a pilot of Microsoft System Center Service Manager (SCSM), a tool for IT service and change management that will hold system and application information, and allow for the tracking and reporting of changes made to those systems and applications identified as high risk/high impact. Estimated completion date for pilot is within the next 6 months. Change management procedures will be formalized at the completion of the pilot, and with adoption of SCSM or similar tool. Procedures will include approval processes, pre and post testing, and emergency change protocols, and will be reviewed annually by ITS management. ITS is currently in the process of updating our institutional and internal policies, including Systems Change Control. 	ITS management team - Lylyly Dugan, Executive Director of Information Technology Services, Anthony Tiszen, Director of Infrastructure and Security, Woody Hagar, Director of Information Services, and Renee Drabler, Vice Provost for Academic Affairs and Development/CIO.	8/31/2014	N/A

UNTS Enterprise Audit Report Inventory

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External	EXPENS	Fiscal Year 2013	NA	Information Technology	UNT Health Sciences Center (UNT HSC) Change Management Assessment	UNTHSC	<p>1. Current Change Management Practices: Based on the document provided (e.g., documents listed in Appendix A, email, etc.), it was determined that for the ten applications/services that meet the criteria of being both high risk and institutional in scope (impact), a population of changes could not be reviewed and approved in a timely manner. It was found to be minimal, general in nature and less than expected.</p> <p>Change Management procedures do not include the following:</p> <ul style="list-style-type: none"> -Standardized procedures to handle requests (including maintenance requests, system and service outages, and underlying platform system and overall infrastructure) and its functionality for each request for change -Ensure changes are categorized, prioritized, assigned, and authorized -Process for pre-implementation and post-implementation testing protocols/requirements -Process for defining, raising, testing, documenting, assessing and implementing emergency changes (outside of the "normal" change process) -Tracking and reporting systems to document and communicate requested changes, communicate the status of approved and in-process changes, and communicate the status of changes that are rejected -Procedures to update associated system and user documentation and procedures whenever changes are implemented (e.g., configuration documentation) 	High	<p>Recommendations/Activities to Consider for Observations 1 through 4: The following are considered suggests and not mandates for the applicability/services that meet the criteria of being both high risk and institutional in scope (impact):</p> <ul style="list-style-type: none"> -Define and document approval procedures, as well as those individuals that are authorized to act as approvers for each system. -ITS has begun a pilot of Microsoft System Center Service Manager (SCSM), a tool for IT service and change management that will hold system and application information, and allow for the tracking and reporting of changes made to those systems and applications. Estimated completion date for pilot is within the next 6 months. -Change management procedures will be formalized at the completion of the pilot, and with adoption of SCSM or similar tool. Procedures will include approval processes pre and post testing, an emergency response plan, and a process for testing and deployment. -ITS is currently in the process of updating our institutional and internal policies, including Systems Change Control. 	ITS management agrees with these best practice recommendations and will complete the steps listed below to ensure that all changes to IT systems at UNTHSC are assessed, categorized, comply with TAC guidelines, and as appropriate, follow a formal change process. Formal change processes will be applied to systems or applications that have a high risk rating. The change process will include the following: <ul style="list-style-type: none"> -Classification and evaluation of high risk/high impact systems and applications will be conducted and reviewed by ITS management. -ITS has begun a pilot of Microsoft System Center Service Manager (SCSM), a tool for IT service and change management that will hold system and application information, and allow for the tracking and reporting of changes made to those systems and applications. Estimated completion date for pilot is within the next 6 months. -Change management procedures will be formalized at the completion of the pilot, and with adoption of SCSM or similar tool. Procedures will include approval processes pre and post testing, an emergency response plan, and a process for testing and deployment. -ITS is currently in the process of updating our institutional and internal policies, including Systems Change Control. 	Dugan, Executive Director of Information Technology Services, Anthony Tisler, Director of Infrastructure and Information Services, and Renee Drake, Vice Provost for Academic Affairs and Development/COO.	8/31/2014	N/A
External	State Auditor's Office	Fiscal Year 2013	13-019	Finance	State of Texas Compliance with Requirements for the Student Financial Assistance Cluster of Federal Programs for the Fiscal Year Ended August 31, 2012	UNT	<p>During the Fall 2011 term, the University of North Texas (University) used full-time budgets to determine COA for all students receiving financial assistance who applied for the IV assistance prior to the Fall 2011 census date, regardless of each student's actual or anticipated enrollment. In addition, for 1.2 percent of 60 students tested, the University incorrectly over awarded the student \$8,776 in Direct Loans associated with award #2488122293 as part of the student's Spring 2011 assistance.</p>	NA	The University should: <ul style="list-style-type: none"> -Develop a process to determine each student's COA and financial need based on the student's expected or actual enrollment. 	Zelma Deaton and Lacey Thompson	1/7/2012	Closed	
External	State Auditor's Office	Fiscal Year 2013	13-019	Finance	State of Texas Compliance with Federal Requirements for the Student Financial Assistance Cluster of Federal Programs for the Fiscal Year Ended August 31, 2012	UNT	<p>During the Fall 2011 term, the University of North Texas (University) used full-time budgets to determine COA for all students receiving financial assistance who applied for the IV assistance prior to the Fall 2011 census date, regardless of each student's actual or anticipated enrollment. In addition, for 1.2 percent of 60 students tested, the University incorrectly over awarded the student \$8,776 in Direct Loans associated with award #2488122293 as part of the student's Spring 2012 assistance.</p>	NA	The University should: <ul style="list-style-type: none"> -Make adjustments to the award when students attend only one semester to help ensure that it does not award assistance to students who are not eligible to receive that assistance. 	Zelma Deaton and Lacey Thompson	12/7/2012	Closed	
External	State Auditor's Office	Fiscal Year 2013	13-020	Finance	State of Texas Compliance with Federal Requirements for the Research and Development Cluster of Federal Programs for the Fiscal Year Ended August 31, 2012	UNT	<p>One (1) percent of 70 direct cost transactions tested at the University of North Texas (University) did not ensure that the amount of direct cost transactions tested, the University incorrectly calculated the amount of the federal expenditure.</p>	NA	The University should establish and implement procedures to ensure that direct cost transactions are not charge unallowable or indirect costs to federal awards.	Susan Sims and Connie Ross	2/7/2013	Closed	
External	State Auditor's Office	Fiscal Year 2013	13-020	Finance	State of Texas Compliance with Federal Requirements for the Research and Development Cluster of Federal Programs for the Fiscal Year Ended August 31, 2012	UNT	<p>The University of North Texas (University) did not ensure that the amount of direct cost transactions tested, the University incorrectly calculated the amount of the federal expenditure.</p>	NA	The University should document its vendor suspension and debarment procedures for all procurements of at least \$25,000.	Caroly Cross	2/7/2013	Closed	

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2013	11-008 UNT	Finance	Salary Adjustments Review	UNT	Position Review - The Annual Position Classification Review Recommendation report did not consistently and clearly document the analysis related to how all of the position grades were determined.	Moderate	Maintain documentation that demonstrates the process was followed and validates how the determination was made for the compensation decision/salary adjustment.	Human Resources has discussed with Internal Audit the expectations of what they consider appropriate documentation and is asked for suggestions or a complete model and is awaiting that feedback. During the next reclassification review process, Human Resources will utilize an independent Construction Auditing firm to review the needs addressed after the formal "call" for requests, has a completed position information questionnaire. The 28 data entry errors have been corrected in ES.	Mark Eddy, Human Resources Director, Denton Campus	3/15/2013	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	12-001 SYS	Finance	UNT Stadium Construction Review	UNT System	No Detail Review Of Invoice Support Documentation - UNT System Facilities performs only a high-level review of the monthly invoice progress billing including supporting documentation received from the primary contractor.	Moderate	Conduct periodic, sample based reviews of invoice support documentation to ensure the accuracy of the detail information and calculations pertaining to the category totals, including labor charges.	UNT System Facilities will review and implement payment application review procedures for large projects. UNT System Facilities may utilize an independent Construction Auditing firm to review the multiple payment applications. For smaller projects, Departmental resources may be utilized. A project size threshold to determine large and small projects will be established in the procedures.	Don Lynch, Director of System Facilities Administration	12/21/2012	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	12-001 SYS	Finance	UNT Stadium Construction Review	UNT System	No Detail Review of Invoice Support Documentation - UNT System Facilities performs only a high-level review of the monthly invoice progress billing including supporting documentation received from the primary contractor.	Moderate	Focus primary contract review efforts on labor expense support documentation for future construction projects.	UNT System Facilities will review and implement payment application review procedures for large projects. UNT System Facilities may utilize an independent Construction Auditing firm to review the multiple payment applications. For smaller projects, Departmental resources may be utilized. A project size threshold to determine large and small projects will be established in the procedures.	Don Lynch, Director of System Facilities Administration	12/21/2012	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	12-001 SYS	Finance	UNT Stadium Construction Review	UNT System	No Detail Review Of Invoice Support Documentation - UNT System Facilities performs only a high-level review of the monthly invoice progress billing including supporting documentation received from the primary contractor.	Moderate	Consider utilizing the services of a third party company that specializes in reviewing contractor construction documentation.	UNT System Facilities will review and implement payment application review procedures for large projects. UNT System Facilities may utilize an independent Construction Auditing firm to review the multiple payment applications. For smaller projects, Departmental resources may be utilized. A project size threshold to determine large and small projects will be established in the procedures.	Don Lynch, Director of System Facilities Administration	12/21/2012	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	12-001 SYS	Finance	UNT Stadium Construction Review	UNT System	Invoice Reimbursing Amount - The primary contractor did not apply the percentage to contractor files as required by the contract terms.	Moderate	Review Applications and Certificates for Payment forms and supporting documentation to verify that dollar amounts, including exchange, are accurate and in compliance with contract terms.	UNT System Facilities will review and implement payment application review procedures for large projects. UNT System Facilities may utilize an independent Construction Auditing firm to review the multiple payment applications. For smaller projects, Departmental resources may be utilized. A project size threshold to determine large and small projects will be established in the procedures.	Don Lynch, Director of System Facilities Administration	12/21/2012	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	12-002 SYS	Finance	Annual Investments/Commitment Paper	UNT System	Non-Compliance with Yield Percentages of Investment Policy	Moderate	Reviewing the investment yields and re-balancing the investments to comply with UNT System Investment Policy 10.007, Objective 6, and	Investment yields have been and continue to be at historically low levels. We do not anticipate that conditions will exist in the long term that would require us to rebalance investments. UNT System adopted in August 2012, superseded 10.007 for UNTD, 4.1.00 for UNT System and successfully resolves the finding noted above. As such, at this point, we feel that no further management action is required.	Allen Clemens, Vice Chancellor for Administration and Chief of Staff	8/7/2012	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	12-002 SYS	Finance	Annual Investments/Commitment Paper	UNT System	Non-Compliance with Yield Percentages of Investment Policy	Moderate	Reviewing the investment yields and re-balancing the investments to comply with UNT Dallas Investment Policy 10.007, Objective 6.	Investment yields have been and continue to be at historically low levels. We do not anticipate that conditions will exist in the long term. However, please note that UNT System policy 8.20, which was adopted in August 2012, superseded UNT Dallas Investment Policy 10.007. As such, at this point, we feel that no further management action is required.	Carlos Hernandez, Vice President for Finance and Administration/CFO - UNT Dallas	8/7/2012	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	12-007 BSC	Academic and Students	Graduate School of Biomedical Sciences Review	UNT BSC	Of the 17 candidates reviewed, 15 (88%) were not in full compliance with purchasing card policies.	High	Require all personnel in the GSBS be trained on purchasing card policies and procedures.	Management agrees. The Dean's office will ensure that all purchasing card holders in GSBS complete a refresher training course of the Purchasing Card requirements.	Alexa Wheeler, Senior Executive Assistant	11/20/2012	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	12-007 BSC	Academic and Students	Graduate School of Biomedical Sciences Review	UNT BSC	Of the 17 candidates reviewed, 15 (88%) were not in full compliance with purchasing card policies.	High	Follow procurement card program policies and procedures.	GSBS Dean's office does not authorize P-Cards and authorization and training for P-Cards is required and provided by the BSC. It should be noted that beginning in 2009, refresher training was required every other year. However, with the creation of the BSC and subsequent move that has not been tracked. The BSC goal is to have every participant take refresher training annually.	Alexa Wheeler, Senior Executive Assistant	11/20/2012	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	12-007 BSC	Academic and Students	Graduate School of Biomedical Sciences Review	UNT BSC	Prohibit charges for equipment usage by the Department of Molecular Biology & Immunology had inconsistent rates, duplicate charges and lacked documentation.	Moderate	Work with the Office of Grant and Contract Management, and Office of Financial Planning and Budget to establish a service center.	Management agrees. The Acting Chair will work with the Lab Director and Office of Grant and Contract Management, and Office of Financial Planning and Budget to establish a service center.	Johnny He, Acting Chair	12/21/2012	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	12-007 BSC	Academic and Students	Graduate School of Biomedical Sciences Review	UNT BSC	Of the 102 travel vouchers reviewed, 53 were not in full compliance with travel policy.	Moderate	Request reimbursement of overpayments from traveler unless you determine it is not cost effective to do so.	Management agrees. Management requested reimbursement of overpayments from traveler on October 5, 2012.	Thomas Vono, Provost and Executive Vice President for Academic Affairs	12/21/2012	Closed

UNTS Enterprise Audit Report Inventory

Reporting Agency	Fiscal Year Reviewed	Audit Number	Audit Category	Report Name	Component Institution	Key Observation	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal/ External	Fiscal Year 2013	12-007 HSC	Academic and Students	Graduate School of Sciences Review	UNTHSC	Of the 102 travel vouchers reviewed, 53 were not in full compliance with travel policy.	Moderate	Establish a travel reimbursement process to ensure that travel reimbursement requests are submitted with supporting documentation.	Management agrees. All administrative staff that prepare travel vouchers should be trained on the new policy within the next 6 months. Additionally, each department chair should discuss travel policies and procedures with their faculty.	Krupa Choudhary, Chair, Steve Maffin, Chair, Art Eisenberg, Chair, Mehroon Singh, Chair, Johnny He, Chair, and Jambor Vishwanath, Dean.	12/31/2012	Closed
Internal	Fiscal Year 2013	12-007 HSC	Academic and Students	Graduate School of Biomedical Sciences Review	UNTHSC	Of the 102 travel vouchers reviewed, 53 were not in full compliance with travel policy.	Moderate	Provide training to faculty and staff on travel policies.	Management agrees. All administrative staff that prepare travel documents should complete a refresher course from the BSC within the next 6 months. Additionally, each department chair should discuss travel policies and procedures with their faculty.	Anuja Choudhary, Chair, Steve Maffin, Chair, Art Eisenberg, Chair, Mehroon Singh, Chair, Johnny He, Chair, and Jambor Vishwanath, Dean.	12/31/2012	Closed
Internal	Fiscal Year 2013	12-007 HSC	Academic and Students	Graduate School of Biomedical Sciences Review	UNTHSC	Personal reimbursements to deptID holders did not have supervisor approval.	Low	Establish a process to ensure that personal reimbursements to the deptID/projID holders are properly approved.	Management agrees. Each Chair and Dean's Office will work with their administrative staff to ensure that steps by step procedures are followed.	Maffin, Chair, Art Eisenberg, Chair, Mehroon Singh, Chair, Johnny He, Chair, and Jambor Vishwanath, Dean.	12/31/2012	Closed
Internal	Fiscal Year 2013	12-007 HSC	Academic and Students	Graduate School of Sciences Review	UNTHSC	Cash handling is not properly segregated or safeguarded in the process of cashing receipts and depositing them. Receipts are not all deposited within one day as required by policy.	Low	Develop and implement cash handling procedures that ensure cash is protected and deposited in a timely manner.	Management agrees. The Chair will work with staff to develop and implement procedures that ensure cash is protected and deposited in a timely manner.	Art Eisenberg, Chair	10/7/2012	Closed
Internal	Fiscal Year 2013	12-007 HSC	Academic and Students	Graduate School of Biomedical Sciences Review	UNTHSC	Three projIDs were overpaid and deficits were not cleared within the 90 day close out period.	Low	Require all PIs to submit a defunct deptID (i.e. the PI & R&A deptID) at the time a projID is established that will be used if the PI is no longer active.	Management agrees. OSGM is working with management to implement a process which utilizes the applicable R&A recovery deptID.	LeAnn Forberg, Executive Director, Office of Grant and Contract Management	12/31/2012	Closed
Internal	Fiscal Year 2013	12-007 HSC	Academic and Students	Graduate School of Biomedical Sciences Review	UNTHSC	UNTHSC travel policy regarding partial day meal rates is unclear.	Low	Develop in cooperation with the Office of Financial Planning and Budget a clear partial day meal policy for UNTHSC.	Management agrees. The Business Service Center will submit recommendations to the BSC Operations Committee for standardizing travel policy and procedure across the UNT System. The issue will be resolved by the end of the fiscal year.	Susan Sims, BSC Director of Payments	1/31/2013	Closed
Internal	Fiscal Year 2013	12-008 HSC	Finance	Cost Transfer Process Review	UNTHSC	Cost Transfers - Of the 28 transfers reviewed, 12 transfers had no explanation for why the correction was made over 90 days after the original charges.	Low	Develop a cost transfer form that collects all required information including reason for transfers occurring 90 days after the original charge.	Management agrees. OSGM agrees with the suggestion to develop a cost transfer form. However, we have reviewed federal regulations which state, "cost transfers should be accomplished within... 90 days from discovery of the error." Our current policy requires that the cost transfer form be submitted with federal regulations and will be updated to reflect the language of the federal compliance documents. The cost transfer form will be in line with our modified policy and current federal regulations.	LeAnn Forberg, Executive Director of the Office of Grant and Contract Management and Mason Barakat, Manager, Grant and Contract Accounting	5/31/2013	Closed
Internal	Fiscal Year 2013	12-008 HSC	Finance	Cost Transfer Process Review	UNTHSC	Cost Transfers - Of the 28 transfers reviewed, 12 transfers had no explanation for why the correction was made over 90 days after the original charges.	Low	Require all principal investigators to complete the cost transfer form prior to making the transfer.	We have developed a cost transfer form and will post on the OSGM website for use by faculty and staff.	LeAnn Forberg, Executive Director of the Office of Grant and Contract Management and Mason Barakat, Manager, Grant and Contract Accounting	5/31/2013	Closed
Internal	Fiscal Year 2013	12-008 UNT	Government and Regulatory Compliance	NCAA APR Reporting Review	UNT	Based on the review, Internal Audit found the methods used by the Athletics Compliance Office and the NCAA Certifying Official in the Audit work completed by the former Director for Research Compliance was not available.	NA	None	None	NA	NA	N/A
Internal	Fiscal Year 2013	12-009 HSC	Government and Regulatory Compliance	Compliance Program Review	UNTHSC	Only one individual completing cash payments to individual's participating in training overides for TCOM students.	Moderate	Retain research compliance documentation in accordance with the UNTHSC Records Retention Schedule. Documentation should include, but not limited to: documentation of work performed, findings noted, and solutions implemented.	Management agrees. The Office for Research Compliance will maintain complete	Brain Glabbe, Ph.D., Executive Director for Research Compliance	1/22/2013	Closed
Internal	Fiscal Year 2013	12-009 HSC	Government and Regulatory Compliance	Compliance Program Review	UNTHSC	The Institutional Compliance Office is not made aware of all compliance issues in research.	Moderate	Modify the reporting structure in the Office of Research to ensure that all compliance issues are reported to the Institutional Compliance Office.	Management agrees. Dr. Brain Glabbe has joined the UNTHSC Compliance Council to ensure that research compliance matters and updates are communicated regularly to William LeWhite and other members of the university compliance team.	Brain Glabbe, Ph.D., Executive Director for Research Compliance	1/22/2013	Closed
Internal	Fiscal Year 2013	12-010 UNT	Academic and Students	Academic Programs Review	UNT	Based on results of the procedures performed, all new degree programs established during fiscal year 2011 and 2012 appeared to be in compliance with THCC requirements and university policy.	NA	None	NA	NA	NA	N/A
Internal	Fiscal Year 2013	12-011 HSC	Finance	Texas College of Osteopathic Medicine Dean Expenses Review	UNTHSC	Only one individual completing cash payments to individual's participating in training overides for TCOM students.	Moderate	Develop and implement procedures that ensure cash handling is properly segregated.	Management agrees. TCOM will add a second individual to the distribution process separating the responsibilities of verification of eligibility from distribution.	D. Thomas Dabberny, Associate Dean for Academic Affairs	10/7/2012	Closed
Internal	Fiscal Year 2013	12-011 HSC	Finance	Texas College of Osteopathic Medicine Dean Expenses Review	UNTHSC	Of 12 personal reimbursements to the Dean, 11 were not in full compliance with purchasing policy related to documentation requirements.	Moderate	Ensure personal reimbursements for meals include a list of attendees by name and designation as well as the business purpose.	Management agrees. TCOM will assure full compliance with policy.	Don Pecka, Dean of TCOM	10/7/2012	Closed
Internal	Fiscal Year 2013	12-011 HSC	Finance	Texas College of Osteopathic Medicine Dean Expenses Review	UNTHSC	Of 31 travel vouchers for the Dean, 23 did not have prior approval of travel or support for mileage reimbursements.	Low	Submit Requests for Approval of Travel prior to travel as required by policy.	Management agrees. TCOM will assure full compliance with policy.	Don Pecka, Dean of TCOM	10/7/2012	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2013	12-011 ISC	Finance	Texas College of Osteopathic Medicine Dean Expense Review	UNTISC	0131 travel vouchers for the Dean. 23 did not have prior approval of travel or support for mileage reimbursements.	Low	Submit mileage documentation with travel vouchers as required by policy.	Management agrees. TCOM will assure full compliance with policy.	10/7/2012	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2013	12-012 UNT	Academic and Students	Intra-System/Interagency Review	UNT	Documentation related to the Intra System Agreements between UNT and UNT Dallas does not meet best practice standards.	Moderate	Document amendments to Agreements with signature authorizations; and	Agreements will include signature authorization.	8/31/2013	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2013	12-014 UNT	Academic and Students	Intra-System/Interagency Review	UNT	Documentation related to the Intra System Agreements between UNT and UNT Dallas does not meet best practice standards.	Moderate	Discuss and document future Agreements before the beginning of the fiscal year.	Document all Intra System Agreements before the beginning of the fiscal year. Agreements will include signature authorization.	8/31/2013	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2013	12-014 UNT	Governance and Regulatory Compliance	Mean Green Club Review	UNT	Non-Compliance with UNT Policy 7.2. The procedure for accepting and processing Mean Green Club donations is not in compliance with UNT policy 7.2, Fundraising and Private Support.	Moderate	Coordinate with the Office of Development to be in compliance with UNT policy 7.2, Fundraising and Private Support.	Four years ago the Athletic Department met with Advancement to develop a system to handle Mean Green Club (MGC) Donations. The process was to have all MGC donations go through the Athletic Department. The Athletic Department then would issue an alternate ticket or order from being sent to the foundation where there was no method of processing. Secondly, a large majority of our MGC members renew in August. With the need to immediately process MGC donations, the Athletic Department was unable to process the donations affore of the big time of those orders first going to advancement. This process was streamlined almost four years ago with the agreement of both parties. My remedy would be to modify the policy and I would like to see the Athletic Department and Advancement work together. Management will meet with University Advancement to create a policy revision to be submitted for adoption.	Four years ago the Athletic Department met with Advancement to develop a system to handle Mean Green Club (MGC) Donations. The process was to have all MGC donations go through the Athletic Department. The Athletic Department then would issue an alternate ticket or order from being sent to the foundation where there was no method of processing. Secondly, a large majority of our MGC members renew in August. With the need to immediately process MGC donations, the Athletic Department was unable to process the donations affore of the big time of those orders first going to advancement. This process was streamlined almost four years ago with the agreement of both parties. My remedy would be to modify the policy and I would like to see the Athletic Department and Advancement work together. Management will meet with University Advancement to create a policy revision to be submitted for adoption.	9/17/2013	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	12-014 UNT	Governance and Regulatory Compliance	Mean Green Club Review	UNT	Inappropriately Retaining Credit Card Information- The Mean Green Club is inappropriately retaining credit card information.	Moderate	Process of credit card information is secure manner when there is no longer an immediate need for the information.	Mr. discussed with the Audit staff. All but the last four digits of the credit card number submitted on Mean Green Club renewal forms will be redacted so as to protect the information. Currently stored data will be corrected beginning immediately.	7/29/2013	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2013	12-015 UNT	Finance	Endowment Review	UNT	Non-Compliance with Memorandum of Understanding (MOU) Requirements of The Luce Wurlitzer Foundation Scholarship Endowment - A report, containing academic year ending information about the fund, was not prepared and distributed to the donor.	Low	Develop a process to ensure annual reports are prepared and distributed to the donor. In addition, monitor the process for effectiveness to ensure compliance with MOU requirements.	The Division of Advancement will separate endowment reports for all organizations in their annual reporting process.	3/15/2013	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2013	12-015 UNT	Finance	Endowment Review	UNT	Non-Compliance with Memorandum of Understanding (MOU) Requirements of The J.C. Penney Lectureship in Merchandising - The annual distribution exceeded the MOU provision that up to fifty percent (50%) of the annual distribution may be used to support faculty development.	Low	Develop a process to ensure Faculty development expenditures do not exceed fifty percent (50%) of the annual distribution. In addition, monitor the process for effectiveness to ensure compliance with MOU requirements.	UNT has opened a new disbursement report ID 77951 so it will be easier to monitor spending. The percent of expense for faculty development is documented on a spreadsheet and maintained for this report ID.	12/21/2012	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2013	12-018 DAL	Academic and Students	UNT Dallas Work-Study Student Mentorship Contract	UNT Dallas	Three student workers were paid under the Work-Study Student Mentorship Program without meeting the eligibility requirements. Specifically, two students did not meet the enrollment requirement and one student did not meet the financial need requirement.	Moderate	Discuss with the Office of Research Services how to proceed with the student workers regarding the funds already disbursed to eligible students.	UNT will discuss with the Office of Research Services how to proceed with the student workers regarding the funds already disbursed to eligible students follow sponsor's instructions.	2/28/2013	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2013	12-018 DAL	Academic and Students	UNT Dallas Work-Study Student Mentorship Contract	UNT Dallas	Three student workers were paid under the Work-Study Student Mentorship Program without meeting the eligibility requirements. Specifically, two students did not meet the enrollment requirement and one student did not meet the financial need requirement.	Moderate	Develop a consistent process for verifying student eligibility each semester.	Although there is a process in place to determine eligibility before memora are filed, there is a need to improve the process and modify guidelines. Eligibility will be verified in ES every semester after the 12th day of class (senus day). Mentors will be required to inform the PI of changes in their academic status that may affect their eligibility to continue in the program. Mentors will sign an acknowledgment to document that they received the guidelines and agree to follow those guidelines. The financial aid office will continue to determine financial need. The financial aid administrator verifying eligibility will take screen shots of the students need to document their financial aid eligibility.	2/28/2013	Closed	

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2013	12-020 UNT	Governance and Regulatory Compliance	Animal Care Review	UNT	Animal care and use training is not sufficiently documented or monitored.	Moderate	Develop a System for monitoring and documenting the type of animal care and use training personnel have received.	OED and the ACUC Chair will implement requirements for completion of online training for all personnel involved in an animal care and use protocol before the protocol can be approved by the Institutional Animal Care and Use Committee (IACUC) at the University of Miami School of Medicine. Completion of both a CITI basic ACUC course and a species-specific course (as available) will be required.	Dr. Kenneth Sewell, Associate Vice President for Research	By the end of the fall 2012 semester	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	12-020 UNT	Governance and Regulatory Compliance	Animal Care Review	UNT	The key audit entry code in the Science Research Building's Animal Care Facility is not changed periodically, or when personnel change.	Moderate	Develop a process and procedure for changing the entry codes into the Animal Care Facility of the Science Research Building.	Research building to implement a procedure under which the security code for the facility will be changed at least every three months.	Dr. Kenneth Sewell, Associate Vice President for Research	By the end of the fall 2012 semester	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	12-021 UNT	Finance	Employment Waiver Review	UNT	Incorrectly reporting Employment Waivers - Student Accounting and University Cashiers Services is incorrectly reporting the number of Employment Waivers awarded.	Moderate	Modify the process for Employment Waivers to ensure waivers are properly coded.	Management has modified the business process to ensure Employment Waivers are properly classified and accurately reported in IFS reporting.	Kyle Godwin, Sr. Director Student Accounting and University Cashiers Services	12/1/2012	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	12-021 UNT	Finance	Employment Waiver Review	UNT	Incorrectly reporting Employment Waivers - Student Accounting and University Cashiers Services is incorrectly reporting the number of Employment Waivers awarded.	Moderate	Modify the process for IFS reporting to ensure Employment Waivers are reported in the correct category, either TEC 54.211 or TEC 54.2.12.	Management has modified the business process to ensure Employment Waivers are properly classified and accurately reported in IFS reporting.	Kyle Godwin, Sr. Director Student Accounting and University Cashiers Services	12/1/2012	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	12-021 UNT	Finance	Employment Waiver Review	UNT	Insufficient Review and Approval - There is not sufficient independent review and approval of Employment Waivers prior to processing.	Moderate	SACS, the Graduate School, and the Provost's Office should coordinate to identify a process for independent review/approval of Employment Waivers, either TEC 54.211 or TEC 54.2.12.	Change wording of the Section 2.2.10 of the UNT Policy Manual to reflect the Employment Waiver must be signed by dean of the Graduate School.	Mark Warrell, Dean, The Toulouse Graduate School	8/7/2013	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	12-021 UNT	Finance	Employment Waiver Review	UNT	Insufficient Review and Approval - There is not sufficient independent review and approval of Employment Waivers prior to processing.	Moderate	Change Employment Waiver form to include three questions to help determine if the Employment Waiver form is completed in accordance with eligibility requirements.	Change Employment Waiver form to include three questions to help determine if the Employment Waiver form is completed in accordance with eligibility requirements.	Mark Warrell, Dean, The Toulouse Graduate School	8/7/2013	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	12-021 UNT	Finance	Employment Waiver Review	UNT	Insufficient Review and Approval - There is not sufficient independent review and approval of Employment Waivers prior to processing.	Moderate	Either comply with UNT Policy 2.2.10 by requiring approval by the dean of the graduate school or revise the policy to reflect the actual process for awarding Employment Waivers.	Change processing procedure to require graduate dean's signature prior to final approval by Student Accounting	Mark Warrell, Dean, The Toulouse Graduate School	8/7/2013	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	12-024 UNT	Academic and Students	Student Worker Review	UNT	There is no process in place to reasonably assure that individuals in positions that require enrollment are actually enrolled.	Low	The UNT Career Center, Provost's Office, and UNT Human Resources should coordinate to establish a process to reasonably assure that students in positions that require enrollment are actually enrolled.	Both the Career Center and Provost's Office will perform audits of student employment records in conjunction with the supplemental pay period following the first student payroll in the fall and spring semesters. The Career Center will conduct a random audit of these receiving paychecks are enrolled students.	Shaun Sobier, Student Employment Coordinator Melinda Lilly, Assistant Director for Academic Resources	9/1/2013	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	12-024 UNT	Academic and Students	Student Worker Review	UNT	Internal Audit identified five UNT policies related to student employment that require enrollment; however, not all policies contain the same enrollment requirements.	Low	The UNT Career Center, Provost's Office, and UNT Human Resources should evaluate and modify UNT policies related to student employment so enrollment requirements are as consistent as possible.	Write a new overarching policy for student employment positions, as well as, develop operational procedures for the various job codes connected to the new overarching policy.	Volanda Nemman, Senior Vice Provost Dan Nagel, Executive Director, Career & Leadership Vahere (Robertson) Hodges, Assistant Director, Finance & Administration Ward Bailey, Director, UNT	9/1/2013	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	12-024 UNT	Academic and Students	Student Worker Review	UNT	Internal Audit identified five UNT policies related to student employment that require enrollment; however, not all policies contain the same enrollment requirements.	Low	The Controller's Office should continue their process of evaluating and revising UNT Policy 2.2.26 to ensure compliance with UNT Policy 18.1.9 FERPA.	Write a new overarching policy for student employment positions, as well as, develop operational procedures for the various job codes connected to the new overarching policy.	Volanda Nemman, Senior Vice Provost Dan Nagel, Executive Director, Career & Leadership Vahere (Robertson) Hodges, Assistant Director, Finance & Administration Ward Bailey, Director, UNT	9/1/2013	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	12-024 UNT	Academic and Students	Student Worker Review	UNT	The Controller's Office does not notify an employee's supervisor and Vice President of indebtedness to the University as required by UNT Policy 2.2.26. Employee Indebtedness owed to the University is not reported to the University's Financial Reporting System (FRS) is not sending a report detailing employee indebtedness to the Controller's Office, as required by UNT Policy 2.2.26.	Low	The Controller's Office should continue their process of evaluating and revising UNT Policy 2.2.26 to ensure compliance with UNT Policy 18.1.9 FERPA.	Suggested Management Action 4: We believe that the current policy as submitted complies with FERPA requirements. Once adopted, we will review the policy periodically (not less than every 5 years) for amendment or needed.	Carlo Hernandez, Ed.D. CPA, Associate VP for Finance and Controller	11/7/2012	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Complaint Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status	
Internal	UNT System Internal Audit	Fiscal Year 2013	12-027 DAL	Finance	UNT Dallas Gift Review	UNT Dallas	Gifts and Grant Management – University gifts and grants are being inconsistently managed and monitored.	Moderate	Update UNT Dallas policies and procedures where applicable based on the updated agreement. Coordinate training for advancement and faculty personnel from ORS to detail roles and responsibilities regarding grant management.	University Advancement agrees to update department policies and procedures after the meeting with ORS has concluded.	Doug Smith, Vice President for University Advancement and Beverly Mendoza, Manager of Advancement Services	4/8/2013	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2013	12-027 DAL	Finance	UNT Dallas Gift Review	UNT Dallas	Procedures for managing, tracking, monitoring and reporting gifts are currently being developed in conjunction with the implementation of the Raisers Edge software system.	Moderate	Update and recode current gift processing procedures with UNT policies and procedures already established. Ensure UNT policies and procedures are followed and referenced where required in relation to any and all intra-system cooperation agreement and accreditation requirements.	University Advancement continues to assess gift processing procedures to ensure they meet the highest industry standards that ensure safety, privacy and documentation. University Advancement will update document controls and processing procedures that reflect Raisers Edge implementation.	Doug Smith, Vice President for University Advancement and Beverly Mendoza, Manager of Advancement Services	4/8/2013	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2013	12-027 DAL	Finance	UNT Dallas GRF Review	UNT Dallas	Procedures for managing, tracking, monitoring and reporting gifts are currently being developed in conjunction with the implementation of the Raisers Edge software system.	Moderate	Update and document controls and processing procedures for gifts in the new Raisers Edge fundraising and donor management system. Work with IT Advancement personnel to ensure the system can incorporate our data and update data entry procedures and controls.	University Advancement commits to update and document controls and processing procedures that reflect Raisers Edge implementation, the new relationship with UNT Dallas Foundation, and staffing resources.	Doug Smith, Vice President for University Advancement and Beverly Mendoza, Manager of Advancement Services	4/9/2013	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2013	12-027 DAL	Finance	UNT Dallas GRF Review	UNT Dallas	Procedures for managing, tracking, monitoring and reporting gifts are currently being developed in conjunction with the implementation of the Raisers Edge software system.	Moderate	Determine any changes to management reporting based on the implementation and use of the new system.	University Advancement commits to assess and continually update gift processing procedures.	Doug Smith, Vice President for University Advancement and Beverly Mendoza, Manager of Advancement Services	4/9/2013	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2013	12-028 UCD	Finance	UCD Cash Loss Review	University Center at Dallas	Registration of Duties – One individual was recording, depositing, and reconciling the cash received in the UCD Student Store.	Moderate	To the extent staffing levels permit, separate the duties of recording, depositing, reconciling, and reconciling cash receipts among all frequent individuals.	Monica Castillo, UCD Student Store Cashier, Ely Randles, Office Manager of University Center at Dallas, Araceli Cadena, Coordinator of Recruitment and Advising	Monica Castillo, UCD Student Store Cashier, Ely Randles, Office Manager of University Center at Dallas, Araceli Cadena, Coordinator of Recruitment and Advising	9/10/2012	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2013	12-028 UCD	Finance	UCD Cash Loss Review	University Center at Dallas	Purchasing Cards – The use of purchasing cards was not consistent with policy.	Moderate	Follow the Purchasing Card Guide, specifically as it relates to: • Use of card for UNT business purposes only; • Completing Controlled Item Code Equipment forms; • Unacceptable purchases such as memberships and; and • Keeping a receipt for every purchase on file.	Review items before purchasing to identify that they are within Purchasing Card guidelines.	Bert O'Neil, Executive Director for the Universities Center at Dallas Monica Rodriguez, Assistant to the Vice President for University Center at Dallas Ely Randles, Office Manager of University Center at Dallas Araceli Cadena, Coordinator of Recruitment and Advising	9/14/2012	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2013	12-028 UCD	Finance	UCD Cash Loss Review	University Center at Dallas	Petty Cash – The charge fund was used as petty cash.	Moderate	Follow policy as it relates to the use of petty cash: • Reimburse the charge fund; • Create a petty cash fund through IPS.	University Center at Dallas does not plan on creating a petty cash fund through IPS. UCD will continue to store \$100 in change for the store. The change fund was used for the register at the UCD Student Store. The change fund was reimbursed and continues to have a balance of \$100.	Araceli Cadena, Coordinator of Recruitment and Advising Monica Castillo, UCD Student Store Cashier	9/14/2012	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2013	12-028 UCD	Finance	UCD Cash Loss Review	University Center at Dallas	Passwords – All employees knew the password to access the cash register, including terminated employees.	Moderate	Deactivate the shared password for the cash register and assign each user receiving access their own password.	Nick Sommit, Information Systems Specialist, has changed the UCD Student Store log in a stored file cabinet. UCD will continue to store \$100 in change for the store. The change fund was used for the register at the UCD Student Store. The change fund was reimbursed and continues to have a balance of \$100.	Nick Sommit, Information Systems Specialist, has changed the UCD Student Store log in a stored file cabinet. UCD will continue to store \$100 in change for the store. The change fund was used for the register at the UCD Student Store. The change fund was reimbursed and continues to have a balance of \$100.	9/17/2012	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2013	12-028 UCD	Finance	UCD Cash Loss Review	University Center at Dallas	Cash Register Funds – Cash was left overnight in the cash register inside the store.	Low	Secure cash by securing all funds outside of the student store when the store is closed.	Other register has been closed for the night the money will be locked in a stored file cabinet. Only one individual will have access to this key for the night.	Monica Castillo, UCD Student Store Cashier	9/17/2012	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2013	12-029 UNT	Finance	Recreational Sports Office Cash Handling Review	UNT	The Recreational Sports Office has established effective and efficient procedures for handling cash. Additionally, controls have been established to comply with UNT Policies 2.2.1 and 2.2.11.	NA	None	NA	NA	NA	N/A	
Internal	UNT System Internal Audit	Fiscal Year 2013	12-030 UNT	Academic and Students	Transition Review Economic Development	UNT	Our review of the process and related controls and our testing indicated that the major business procedures and controls are adequate.	NA	None	NA	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2013	13-001 DAL	Governance and Regulatory Compliance	UNT Dallas President's Expenditures Review	UNT Dallas	The UNT Dallas President's travel and non-travel expenditures were in compliance with his employment agreement. Additionally, his compensation for fiscal year 2012 was compliant with his employment agreement.	NA	None	NA	NA	NA	NA	N/A

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2013	13-001 HSC	Governance and Regulatory Compliance	Joint Admission Method Program Review	UNTHSC	Overall, UNTHSC was in compliance with policies, procedures, and standards. All expenditures were in compliance with the guidelines and were properly classified on the Annual Expenditure Report for the fiscal year ended August 31, 2013. In addition, the annual report submitted to JAWP accurately reflects the financial activities of the program.	NA	None	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2013	13-001 SYS	Governance and Regulatory Compliance	Chancellor's Expenditure Review	UNT System	Internal Audit observed a proactive approach to reviewing expenses and reimbursements, with a strong attention to detail and adherence to policy. This level of detail was evidenced through support documentation retained by the Office of the Chancellor. No observations were made during the review that required management action.	NA	None	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2013	13-001 UNT	Governance and Regulatory Compliance	NCAA Minimum HSC President's Expenses Review	UNT	None	NA	NA	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2013	13-002 HSC	Governance and Regulatory Compliance	HSC President's Expenses Review	UNTHSC	Travel, entertainment, and business expenses for which the President was reimbursed, or that were paid on behalf of the President during fiscal year 2013, were in compliance with UNTHSC policies and the employment agreement. Additionally, expenditures reviews were reasonable, appropriate, and documented as to business purpose.	NA	None	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2013	13-002 SYS	Governance and Regulatory Compliance	Vice Chancellor and General Counsel Expenditures Review	UNT System	Based on the result of the procedures performed, Internal Audit noted the following: <ul style="list-style-type: none"> • Travel expenses reimbursed to the Vice Chancellor and General Counsel were deemed appropriate, reasonable, and in compliance with UNT System Travel Policy 04-901, and UNT Travel Policy 2.1.15. • Travel expenditures for the employees of the Office of General Counsel were also deemed appropriate, reasonable, and in compliance with the applicable policies. • This Right to Travel form is prepared for out of state travel. • P-card purchases are performed by one p-card holder and reviewed by the p-card reconciler and approver. • Non-travel expenditures were deemed appropriate for the Office of the Vice Chancellor and General Counsel. • The process and procedure for selecting outside legal counsel includes a review by the Texas Attorney General's office. • Outside legal counsel invoices are reviewed by the requesting department, the Office of General Counsel, and the Texas Attorney General's office. There were no suggested management actions.	NA	None	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2013	13-003 DAL	Finance	UNT Dallas Purchasing Card Review	UNT Dallas	Non-compliance with Business Service Center Purchasing Card Program Guidelines. – The following instances of non-compliance with the BSC program guidelines were noted: <ul style="list-style-type: none"> • Require purchasing cardholders, reconcilers and approvers to attend BSC provided PCard training, and emphasize the importance of complying with purchasing guidelines, University policy, and state regulations. We concur, cardholder and reconciler will be required to complete BSC, Carlos Hernandez, Vice President for Finance and Administration/CFO	Moderate	Require purchasing cardholders, reconcilers and approvers to attend BSC provided PCard training, and emphasize the importance of complying with purchasing guidelines, University policy, and state regulations.	We concur, cardholder and reconciler will be required to complete BSC, Carlos Hernandez, Vice President for Finance and Administration/CFO	8/7/2013	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2013	13-003 HSC	Governance and Regulatory Compliance	Annual UNTHSC Investment Review	UNTHSC	Overall, we found that investments were safeguarded, diversified, and provided sufficient liquidity to meet the reasonable anticipated financial needs of the UNTHSC. UNTHSC is in compliance with the Public Fund Investment Act (PFIA) and the state higher education investment spending requirements.	NA	None	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2013	13-004 HSC	Governance and Regulatory Compliance	Family Medicine Residency Program	UNTHSC	All expenditures were in compliance with the guidelines and were properly classified on the Annual Report for the fiscal year ended August 31, 2013. All expenditures were properly documented, reviewed and accounted for in accordance with the THEEC guidelines.	NA	None	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2013	13-004 UNT	Governance and Regulatory Compliance	President's Expenditures Review	UNT	Overall, the President's travel, business and entertainment, and employment compensation comply with the employment agreement and UNT System Policies. Expenditures appear to be reasonable, appropriate, and well documented to provide assurance as to their business purposes.	NA	None	NA	NA	NA	N/A

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Compliance Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2013	13-005 UNT	Governance and Regulatory Compliance	Student Managed Investment Fund Review	UNT	Annual Audit – The Student Investment Group did not ensure that an annual audit was performed by UNT accounting majors as required by the donor agreement.	Moderate	Establish an audit committee and ensure an annual audit is performed.	Chair of FIREL will meet with the chair of the Department of Accounting to discuss means of encouraging participation in SGE and the audit function by accounting majors. Implementation and compliance rests ultimately with the members of the SGE.	Marcia, Staff, Chair of Finance, Insurance, Real Estate and Law	8/1/2013	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	13-005 UNT	Governance and Regulatory Compliance	Student Managed Investment Fund Review	UNT	Annual Audit – The Student Investment Group did not ensure that an annual audit was performed by UNT accounting majors as required by the donor agreement.	Moderate	Develop strategies to engage accounting and auditing students to perform the annual audit.	Chair of FIREL will meet with the chair of the Department of Accounting to discuss means of encouraging participation in SGE and the audit function by accounting majors. Implementation and compliance rests ultimately with the members of the SGE.	Marcia, Staff, Chair of Finance, Insurance, Real Estate and Law	8/1/2013	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	13-005 UNT	Governance and Regulatory Compliance	Student Managed Investment Fund Review	UNT	Annual Audit – The Student Investment Group did not ensure that an annual audit was performed by UNT accounting majors as required by the donor agreement.	Moderate	Consult with the advisor and accounting faculty to determine incentives that could be offered to encourage student participation in the annual audit.	Chair of FIREL will meet with the chair of the Department of Accounting to discuss means of encouraging participation in SGE and the audit function by accounting majors. Implementation and compliance rests ultimately with the members of the SGE.	Marcia, Staff, Chair of Finance, Insurance, Real Estate and Law	8/1/2013	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	13-005 UNT	Governance and Regulatory Compliance	Student Managed Investment Fund Review	UNT	Maintaining Records – The Student Investment Group did not record and retain meeting minutes and voting records.	Moderate	The Student Investment Group should record and retain meeting minutes, including voting records.	Chair of FIREL will work with the SGE to develop a template for SGE officer. Implementation and compliance rests ultimately with the members of the SGE.	Marcia, Staff, Chair of Finance, Insurance, Real Estate and Law	8/1/2013	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	13-005 UNT	Governance and Regulatory Compliance	Student Managed Investment Fund Review	UNT	Quarterly Reports – Quarterly reports contained inaccuracies related to expenses and revenues and were not completed timely.	Moderate	Consult with the faculty advisor to gain an understanding on how to properly report expense and revenues in the quarterly reports.	The Chair of FIREL will continue to remind SGE leaders prior to the due dates of the reports. Reports will be signed by the preparer and one SGE officer. Implementation and compliance rests ultimately with the members of the SGE.	Marcia, Staff, Chair of Finance, Insurance, Real Estate and Law	7/1/2013	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	13-005 UNT	Governance and Regulatory Compliance	Student Managed Investment Fund Review	UNT	Quarterly Reports – Quarterly reports contained inaccuracies related to expenses and revenues and were not completed timely.	Moderate	Develop a process to ensure reports are completed timely.	Chair of FIREL will continue to remind SGE leaders prior to the due dates of the reports. Reports will be signed by the preparer and one SGE officer. Implementation and compliance rests ultimately with the members of the SGE.	Marcia, Staff, Chair of Finance, Insurance, Real Estate and Law	7/1/2013	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	13-005 UNT	Governance and Regulatory Compliance	Student Managed Investment Fund Review	UNT	Quarterly Reports – Quarterly reports contained inaccuracies related to expenses and revenues and were not completed timely.	Moderate	Establish an audit committee to assist in preparing and reviewing the reports.	Chair of FIREL will continue to remind SGE leaders prior to the due dates of the reports. Reports will be signed by the preparer and one SGE officer. Implementation and compliance rests ultimately with the members of the SGE.	Marcia, Staff, Chair of Finance, Insurance, Real Estate and Law	7/1/2013	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	13-006 HSC	Academic and Students	Financial Aid Review	UNTHSC	Overall, the Office of Financial Aid (OFA) has appropriate procedures and controls in place to comply with the UNTHSC policies and state laws and the U.S. Department of Education regulation.	NA	None	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2013	13-008 HSC	Academic and Students	Student Finance Review	UNTHSC	Overall, the Office of Student Finance has appropriate procedures and controls in place to comply with the UNTHSC policies and state laws.	NA	None	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2013	13-009 HSC	Information Technology	Meaningful Use Stage 1 Attestation Review	UNTHSC	Overall, UNTHSC appropriately documented and attested to Meaningful Use Stage 1 requirements as defined by CMS & HHS. No observations were made during the review that required management action.	NA	None	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2013	13-010 UNT	Finance	UNT Dining Services A/P Audit	UNT	UNT Dining Services is not verifying that they have been billed in accordance with the contract terms with Ben E. Keith.	Moderate	Implement a process and procedure to audit the Ben E. Keith invoices to verify that UNT is billed in accordance with the contract terms.	We will be conducting periodic audits of the Ben E. Keith invoices and verifying the 6.5% margin is being enforced.	Susan Cruz, Business Manager	2/1/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	13-010 UNT	Finance	UNT Dining Services A/P Audit	UNT	UNT Dining Services is not retaining its Retail Dining Services invoices and supporting documentation as required by the Delegated Vendor Payable Agreement with the UNT System Business Service Center.	Low	Develop a procedure to scan Retail Dining Service invoices.	We are committed to completing the upgraded electronic Retail Dining Services invoices as requested. We will be contacting our Retail Vendors and discussing the changes that are required by the University with regards to electronic/invoicing and how we can streamline a process that will work for both parties.	Susan Cruz, Business Manager	9/1/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	13-012 UNT	Academic and Students	Space Planning Review	UNT	OSMFP has not completed a Space Inventory Survey since 2009 which was conducted by Facilities.	Moderate	Suggested Management Action for Director of Office of Space Management and Planning: Conduct periodically a Space Inventory Survey preferably annually if possible, and update information into the Space Management System data base in order to ensure that Management System data base is complete and accurate information recorded in the data base is complete and accurate.	Agreed at time of observation however Survey is currently in progress. OSMFP has invested more than a year in discovery, specification and development of an expanded and more robust system that will not only allow us to complete a survey but also allow us to use the data to make decisions on how to best use our space. The UNTHSC Support, Asset Management and virtually every other unit on campus. Additional audits comments: OSMFP currently maintains the data for the Space Management System in a database that is not accessible by the Director and Dallas campuses as well as some of the space occupied by the System. The combined total of approximately 7.3 million square feet of space, according to industry standards for staff required for CMH systems, should require 3-4 people full time to maintain it after hours. OSMFP should have a plan in place to ensure the maintenance of all system development project management and maintenance of all space data.	Cheryl Benningfield, Space Inventory Manager	4/26/2013	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2013	13-012 UNT	Academic and Student	Space Planning Review	UNT	UNT has both responsibilities (i.e., it is both responsible in using and maintaining the Space Management System data base.	Moderate	Suggested Management Action for Director of Office of Space Management and Planning: Provide appropriate training to another employee in order to ensure continuity of the Space Management System.	Agreed. Although various, the Office Manager has administrative rights of the Space Management System make training of existing regular staff difficult. Each member of the current OSMP staff has a full time position and associated workload and only one person's position can be replaced. The Office Manager has been working on training and ongoing use that would be required to achieve competence in the maintenance of the system does not lend itself to an "additional duties as assigner" task or one that is part-time on occasion role. Additional duties committee has been formed for additional personnel to be trained in the system. FTE has been identified for the Space Management Office especially for four offices is expected to continue. State reporting for the UNT Dallas and System campuses. The addition of the new Law School, Shered Services under the System, and UNT Dallas campus will be added to the system. The Office Manager has identified a staff in OSMP. We will need one additional FTE in order to address these critical issues.	Chief of Research/Field Space Inventory Manager	5/1/2013	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	13-011 UNT	Academic and Student	Space Planning Review	UNT	OSMP does not have detailed operational written procedure addressing the assignment and re-assignment of University space.	Low	Suggested Management Action for Director of Office of Space Management and Planning: Develop detailed written departmental procedures, outlining the OSMP operational processes and controls.	Agreed. At time of observation however certain written procedures have since been written. 1. OSMP now has written procedures for communications and administration approval/non-approval of such requests. 2. OSMP now has written procedures for the Space Inventory Survey process and were published online in April, 2013. Additional written OSMP operational procedures have been identified and are being developed at this time.	Verica Shumate, Office Manager	12/1/2013	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	13-017 UNT	Academic and Student	Parking Services Review	UNT	Parking Meters - Parking operations does not have adequate controls over parking meter receipts. Under current procedures employees theft could occur and remain undetected. Reported receipts from meter parking for fiscal year 2012 were \$448,884.	High	Parking and Transportation Services management should consider the following management actions: Do not provide keys to personnel responsible for collection of receipts which will allow them access to those receipts.	Agreed. Individuals collecting each meter locked storage container do not have access to the container. Once the coinage is dumped into the larger locked collection container via a mechanical process the meter coinage collection container is returned to the meter. The individuals collecting the coinage do not have access to the locked collection container.	Gerry L. Robinson, Ph.D., CAPP Director, Parking and Transportation Services	6/30/2013	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	13-017 UNT	Academic and Student	Parking Services Review	UNT	Parking Meters - Parking operations does not have adequate controls over parking meter receipts. Under current procedures employees theft could occur and remain undetected. Reported receipts from meter parking for fiscal year 2012 were \$448,884.	High	Reconcile revenue recorded in the Meter Manager system to deposit bank receipts.	Agreed. Revenue will be recorded and entered in the Meter Manager system. Bank deposit receipts will be used to reconcile the revenue recorded in the Meter Manager system.	Gerry L. Robinson, Ph.D., CAPP Director, Parking and Transportation Services	12/31/2013	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	13-017 UNT	Academic and Student	Parking Services Review	UNT	Written Procedures - The Parking Office does not have written procedures addressing major business processes.	Moderate	Parking and Transportation Services management should consider the following management actions: Develop detailed written procedures for applicable departmental business processes.	Agreed. Written procedures are being developed addressing the collection, recording, depositing, and reconciliation of parking revenue. The written procedures being drafted for the Parking and Transportation Services operations will provide consistency, and guidance with regards to established University and departmental policies. The Parking Office previously had written procedures and prior management office previously had written procedures and prior management had been directed to update those procedures to maintain consistency with UNT policies and maintain accountability within the operation. Management within the operation was reassigned and a new Director was recruited and first effective January 2013.	Gerry L. Robinson, Ph.D., CAPP Director, Parking and Transportation Services	12/31/2013	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	13-017 UNT	Academic and Student	Parking Services Review	UNT	The following equipment at the Union Circle garage facility is either non-operable or in need of repair: •West Exit Booth - not operable, no power pad to perform transactions, currently out for repair. •West Exit Verifier (stand-alone equipment) - not operable, Internal Power Pad needs repair. In addition, access card reader not operable. •Power Pad - not operable, needs repair. •Scan Net - not operable, however the local system has lost the ability to communicate information to the Scan Net data base. •Pay-Station Equipment - not operable, Power Pad needs repair.	Moderate	Evaluate and determine Parking garage operational and reporting needs.	Agreed. Parking and Transportation Services has evaluated and determined the Parking garage operational and reporting needs.	Gerry L. Robinson, Ph.D., CAPP Director, Parking and Transportation Services	1/31/2014	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status	
Internal	UNT System Internal Audit	Fiscal Year 2013	13-017 UNT	Academic and Students	Parking Services Review	UNT	The following equipment at the Union Circle garage facility is either in May 2013 or inoperable, no power pad to perform transactions, currently out for repair. •West Exit Verifier (stand-alone equipment) – not operable. Internal Power Pad needs repair. In addition, access card reader not operable. •Power Pad needs repair. In addition, access card reader not operable locally, however the local system has lost the ability to communicate information to the Scan Net data base. •Pony-Station Equipment – not operable. Power Pad needs repair.	Moderate	Determine whether to either maintain current garage equipment or replace with new equipment. Review applicable manual and/or software to meet the conditions and needs of the University parking garage operations.	Agreed. PFS is working with our software provider T2 Systems, Inc. to provide a new software package to replace the current software. The plan will include replacing applicable equipment and software to meet the expectations and needs of the University parking garage operations.	Gary L. Robinson, Ph.D., CAPP Director, Parking and Transportation Services	1/31/2014	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2013	13-017 UNT	Academic and Students	Parking Services Review	UNT	There is no reconciliation of the physical inventory of permits kept in the office to permits sold.	Moderate	Maintain a physical inventory record of permits with cumulative balances noting beginning balances, purchased additions, and permit removal for each type of parking permit stored in the office in the storage areas and also for permits maintained in the cabinets in the franchise area.	Agreed. The maintaining of the physical inventory record of permits with cumulative balances noting beginning balances, purchased additions, and permit removal for each type of parking permit stored in the office in the storage areas and also for permits maintained in the cabinets in the franchise area.	Gary L. Robinson, Ph.D., CAPP Director, Parking and Transportation Services	10/31/2013	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2013	13-017 UNT	Academic and Students	Parking Services Review	UNT	There is no reconciliation of the physical inventory of permits kept in the office to permits sold.	Moderate	Reconcile office inventoried permit usage to office sales documentation.	PFS will reconcile office inventoried permit usage to office sales documentation.	Gary L. Robinson, Ph.D., CAPP Director, Parking and Transportation Services	10/31/2013	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2013	13-017 UNT	Academic and Students	Parking Services Review	UNT	Parking Office credit card receipts are not being reconciled to source transaction activity recorded in the T-2 and Scan-Net systems.	Moderate	Reconcile Parking Office credit card receipts to original source transaction activity. Implementation will ensure that credit card revenues are recorded and reconciled to transaction source information to the Scan Net data base.	Agreed. PFS will reconcile Parking Office credit card receipts to original source transaction activity.	Gary L. Robinson, Ph.D., CAPP Director, Parking and Transportation Services	10/31/2014	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2013	13-023 UNT	Academic and Students	Enrollment Management Audit	UNT	None of the departments that process cash receipts were in compliance with UNT Policy 2.1.10.1 Cash Controls. Two departments had no written procedures and two other departments had inadequate written procedures.	Moderate	None of the departments that process cash receipts were in compliance with UNT Policy 2.1.10.1 Cash Controls. Two departments had no written procedures and two other departments had inadequate written procedures.	We will follow through with the suggestion management action plan.	Dr. Elizabeth With, Vice President for Student Affairs	9/7/2013	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2013	13-023 UNT	Academic and Students	Enrollment Management Audit	UNT	None of the departments that process cash receipts were in compliance with UNT Policy 2.1.10.1 Cash Controls. Two departments had no written procedures.	Moderate	Request assistance and a review by Student Accounting and University Catering Services.	We will follow through with the suggestion management action plan.	Dr. Elizabeth With, Vice President for Student Affairs	9/7/2013	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2013	13-023 UNT	Academic and Students	Enrollment Management Audit	UNT	The Student Financial Aid and Scholarship department does not reflect bank account information on checks before scanning into image Now.	Low	Amend the check receiving process to include reducing the bank account number and bank routing number before scanning into image Now.	We will follow through with the suggestion management action plan.	Dr. Elizabeth With, Vice President for Student Affairs	9/7/2013	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2013	13-028 DAL	Academic and Students	UNT Dallas Facilities Certification Review	UNT Dallas	Development projects and acquisitions of real property complied with rules established by the Texas Administrative Code and within the parameters specified in the project applications that were submitted to the State.	NA	None	NA	NA	NA	N/A	
Internal	UNT System Internal Audit	Fiscal Year 2013	13-016 UNT	Finance	UNT Endowment Review Audit	UNT	Students received scholarships from the Texas Apartment Association (TAA) that were not processed through the Office of Student Financial Aid and Scholarships (SFAS). Students enrolled in the Residential Property Management (RPM) program at UNT Dallas are eligible to apply for a scholarship from the TAA. Scholarships awarded by TAA are sent directly to the student. Consequently, the awards are not processed through SFAS.	Low	Recommendations for Chair of the FBRE Department: Coordinate with the Office of Financial Aid to determine if receipt of the TAA scholarships resulted in any over-awards in the current year. If so, adjustments should be recorded and reported as required. Implementation will provide assurance that scholarships awarded by the Texas Apartment Association will be coordinated and processed through the Office of Student Financial Aid and Scholarships. SFAS guidelines and MOU requirements will be achieved, and the overall control environment will be strengthened.	2. The donor established its own nonprofit organization to provide scholarships to students and makes the awards to fully independent of the University. Management has no direct knowledge of which management's knowledge and belief; the funds are paid directly to the students. However, management has no direct knowledge of any such receipts provided by an independent third party. Management is not aware of any mechanism by which it is required to and/or can report scholarships to UNT students of which management has no direct knowledge. Management agrees to consult with the UNT Office of Financial Aid to determine University policy and procedures related to any required reporting of scholarships made to UNT students by their parties when the awards are made. Management agrees to report to the Office of Financial Aid by an independent third party. Management agrees to comply with the policies and procedures prescribed by the Office of Financial Aid.	2. The donor established its own nonprofit organization to provide scholarships to students and makes the awards to fully independent of the University. Management has no direct knowledge of which management's knowledge and belief; the funds are paid directly to the students. However, management has no direct knowledge of any such receipts provided by an independent third party. Management is not aware of any mechanism by which it is required to and/or can report scholarships to UNT students of which management has no direct knowledge. Management agrees to consult with the UNT Office of Financial Aid to determine University policy and procedures related to any required reporting of scholarships made to UNT students by their parties when the awards are made. Management agrees to report to the Office of Financial Aid by an independent third party. Management agrees to comply with the policies and procedures prescribed by the Office of Financial Aid.	Marisa J. Staff, Chair, FBRE	1/27/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	13-016 UNT	Finance	UNT Endowment Review Audit	UNT	The scholarship committee waived the minimum 3.25 GPA requirement to award a scholarship to a student.	Low	Recommendations for Director of the Professional Leadership Program (PLP): Administer endowment distributions in accordance with provisions of the MOU.	We agree that the procedure was not followed, although the donor was consulted for approval. 3. We will consult the UNT General Counsel to determine whether corrective action is needed for the award that was made.	Marilyn K. Wiley, Senior Associate Dean, College of Business	3/7/2014	Closed	

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2013	13-016 UNT	Finance	UNT Endowment Review Audit	UNT	The scholarship committee waived the minimum 3.25 GPA requirement to award a scholarship to a student.	Low	Recommendations for Director of the Professional Leadership Program (PLP): Obtain documented approval (agreement) from stakeholders (donor, university, students, faculty, staff) as appropriate before modifying the provisions of an existing MOU. Generally, the approval should be documented in the same form as the original agreement.	We agree that the procedure was not followed, although the donor was consulted for approval. 4. We will call a meeting including the donor, the PLP director and the PIP assistant director to discuss compliance for future awards and whether MOU modifications are needed, and document the results of the meeting.	Marilyn K. Wiley, Senior Associate Dean, College of Business	3/7/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	13-016 UNT	Finance	UNT Endowment Review Audit	UNT	The scholarship committee waived the minimum 3.25 GPA requirement to award a scholarship to a student.	Low	Recommendations for Director of the Professional Leadership Program (PLP): Consult with Legal Counsel to determine if any or what corrective action needs to be taken. Implementations will provide assurance that stakeholders will be notified of the results of the audit. The audit will be conducted with provisions of the gift agreement will be advanced, potential loss of endowment funds and other gifts will be minimized.strained relations between donors and the University, which might affect future gifts will be deterred; and negative publicity and damage to the University's reputation will be prevented.	We agree that the procedure was not followed, although the donor was consulted for approval. 5. In the future, the PIP director and staff will work closely with the Dean's office to be sure that all scholarships are appropriately awarded in compliance with the MOU provisions.	Marilyn K. Wiley, Senior Associate Dean, College of Business	3/7/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	13-002 DAL	Finance	Finance and Administration Expense Review	UNT Dallas	Numerous instances of non-compliance were noted regarding travel, reimbursement, and PCard transactions. Approximately \$11,000 (FY 2011, 2012, and 2013), Internal Audit observed the following: • The Request to Travel (RTT) form was not consistently present. • Receipts were not consistently provided and were missing (22 instances); and, • Supporting documentation was unorganized and/or not retained. In general, Internal Audit observed numerous business related meals, books, and electronic accessories purchased and subsequently reimbursed. For PCard transactions reviewed totaling approximately \$135,000 (January 2012 – April 2013), Internal Audit also observed the following: • Beverage Purchase Justification forms not consistently used (27 instances); • Exception Request forms not used for restricted purchases (three instances); • Restricted purchases were observed (six instances totaling approximately \$12,000); • Restricted purchases observed such as recurring satellite cable provider and security system bills and notary fees (three instances); • Sales tax was charged (11 instances); and • Receipts were not consistently provided and were missing (12 instances), and did not consistently evidence review by signature of timely, and did not consistently evidence review by signature of	Moderate	Suggested Management Actions for the Vice President for Finance and Administration/CO: Review the PCard guidelines with cardholders, reconcilers, and approvers to help ensure compliance. Ensure all parties understand their responsibilities. BSC provided training should be attended to understand any changes or updates to the process. Review the PCard guidelines with cardholders, reconcilers, and approvers to help ensure compliance. Ensure all parties understand their responsibilities. BSC provided training should be attended to understand any changes or updates to the process.	We concur. PCard holder and reconciler will attend BSC PCard training and will document expectation that cardholder will comply with BSC policy and procedure. Reconciler will monitor utilization trends and notify management of activity that should be transitioned to policy management process. The campus will ensure compliance with BSC policies related to travel and business related reimbursements instead of establishing separate practices.	J. Carlos Hernandez, Vice President for Finance and Administration/CO	12/7/2013	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	13-002 DAL	Finance	Finance and Administration Expense Review	UNT Dallas	Numerous instances of non-compliance were noted regarding travel, reimbursement, and PCard transactions. Approximately \$11,000 (FY 2011, 2012, and 2013), Internal Audit observed the following: • The Request to Travel (RTT) form was not consistently present, signed, and/or complete (11 instances); • Receipts were not consistently provided and were missing (22 instances); and, • Supporting documentation was unorganized and/or not retained. In general, Internal Audit observed numerous business related meals, books, and electronic accessories purchased and subsequently reimbursed. For PCard transactions reviewed totaling approximately \$135,000 (January 2012 – April 2013), Internal Audit also observed the following: • Beverage Purchase Justification forms not consistently used (27 instances); • Exception Request forms not used for restricted purchases (three instances); • Restricted purchases were observed (six instances totaling approximately \$12,000); • Restricted purchases observed such as recurring satellite cable provider and security system bills and notary fees (three instances); • Sales tax was charged (11 instances); and • Monthly PCard statement was not reconciled and/or reviewed timely, and did not consistently evidence review by signature of	Moderate	Suggested Management Actions for the Vice President for Finance and Administration/CO: Clearly delineate responsibilities to assignees who process requests for reimbursement. Reconcilers should be trained to ensure processors understand their responsibilities, and have an established method for complying with guidelines and expectations.	We concur. PCard holder and reconciler will attend BSC PCard training and will document expectation that cardholder will comply with BSC policy and procedure. Reconciler will monitor utilization trends and notify management of activity that should be transitioned to policy management process. The campus will ensure compliance with BSC policies related to travel and business related reimbursements instead of establishing separate practices.	J. Carlos Hernandez, Vice President for Finance and Administration/CO	12/7/2013	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2013	13-007 HSC	Academic and Student	School of Health Professions Review Audit	UNTHSC	<p>UNTHSC does not have comprehensive policies and/or procedures for cash handling. While the Office of Accounting has a cash handling procedure, it does not give specific detail on maintaining of cash balances in a department (i.e. maintaining a record of custody, entrance and exit, reconciliation of cash payments, and independent reconciliation).</p> <p>The following was observed regarding cash handling in the SHP:</p> <ul style="list-style-type: none"> The department withdrew cash to pay research/simulated patients a fee for participation in a study at class. After the cash is provided to the research/simulated patients, the cash is maintained when cash is passed from one employee to another. There was no log showing entrance into the safe where these funds were kept. There was no log showing entrance into the 'Research Participation Custodial Agreement' form. Large cash balances were withdrawn and held for periods exceeding three months. In our sample of withdrawal for research or training patients, three institutionally funded projects had cash outstanding of \$16,150. 	Moderate	<p>Suggested Management Action: For Controller and Chief Budget Officer:</p> <ul style="list-style-type: none"> Update departmental cash handling procedures to follow policies and/or procedures developed by the Office of Accounting. 	<p>Management agrees and will ensure that each department has written policies for handling cash. The suggested response to Item #1 will be included in the guidelines that the school will present prior to February 28, 2014.</p>	<p>Kevin Espinoza, Assistant to the Chief (PT) Kim Williams, Assistant to the Chief (PA)</p>	02/28/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	13-007 HSC	Academic and Student	School of Health Professions Review Audit	UNTHSC	<p>UNTHSC does not have comprehensive policies and/or procedures for cash handling. While the Office of Accounting has a cash handling procedure, it does not give specific detail on maintaining of cash balances in a department (i.e. maintaining a record of custody, entrance and exit, reconciliation of cash payments, and independent reconciliation).</p> <p>The following was observed regarding cash handling in the SHP:</p> <ul style="list-style-type: none"> The department withdrew cash to pay research/simulated patients a fee for participation in a study at class. After the cash is provided to the research/simulated patients, the cash is maintained when cash is passed from one employee to another. There was no log showing entrance into the safe where these funds were kept. Funds were not in the location indicated on the 'Research Participation Custodial Agreement' form. Large cash balances were withdrawn and held for periods exceeding three months. In our sample of withdrawal for research or training patients, three institutionally funded projects had cash outstanding of \$16,150. 	Moderate	<p>Suggested Management Action: For Controller and Chief Budget Officer:</p> <ul style="list-style-type: none"> Determine the funds needed for a three month period and return all excess funds to the original Project or DeptID. Departmental procedures will protect staff members and cash by ensuring that cash is adequately safeguarded. 	<p>Management agrees and will ensure that each department has written policies for handling cash. The suggested response to Item #1 will be included in the guidelines that the school will present prior to February 28, 2014.</p>	<p>Sybil Espinoza, Assistant to the Chief (PT) Kim Williams, Assistant to the Chief (PA)</p>	02/28/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2013	13-016 UNT	Finance	UNT Endowment Review Audit	UNT	<p>Students received scholarships from the Texas Apartment Association and Scholarships (SAS). Students enrolled in the Residential Property Management (RPM) degree program offered by the Department of Finance, Insurance, Real Estate and Law (IREL) are eligible to apply for a scholarship through the UNT Student Financial Aid and Scholarship Program (SFAAS). Consequently, the awards are not processed through SFAAS.</p>	Low	<p>Recommendations for Chair of the IREL Department:</p> <ul style="list-style-type: none"> Establish procedures to work in conjunction with the TAA to identify recipients of scholarships, ascertain the amount of each scholarship awarded, and direct scholarship payments to the Office of Student Financial Aid and Scholarship for coordination with SFAAS. IREL and SFAAS to amend the MOU so that the requirements conform to current practices. 	<p>1: Management agrees that the following portion of the MOU has not been updated to reflect the current requirements of the program with the Donor to identify candidates and recipients for the scholarship.</p> <p>Since the donor chose to not fund the program, the University could not award the scholarship as described in the MOU. Since the program was never created, no scholarships were ever awarded as a result of the program.</p> <p>Management agrees to consult with the donor and the Office of General Counsel to amend the MOU to delete the reference in the statement quoted above.</p>	<p>Michael Braswell, TAA Michael Braswell and Nelson J. SMH, Chair, IREL</p>	3/17/2014	Closed
External	City of Denton	Fiscal Year 2014	7011.1570000 DAB 4150	Governance and Regulatory Compliance	City of Denton MOU	UNT	<p>High mercury content in water sample collected.</p>	NA	<p>Submit the following within 15 days of receipt of this notice: The possible cause of the problem. The steps being taken to minimize or curtail the recurrence of the problem.</p>	<p>The university is taking a comprehensive, multiple-staged approach to minimize the future violations, both in the short and long-term. In addition to continuing our hazardous waste training program, which is required for all individuals who work in laboratories to facilitate compliance with environmental, health and safety laws, following RCRA rules for segregating, packing, and disposing of waste to reduce the chance for pollutants to enter the sanitary sewer or storm water transport systems.</p>	NA	NA	Closed

UNTS Enterprise Audit Report Inventory

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External	City of Denton	Fiscal Year 2014	7011.1570.0002.0488.4143	Governance and Regulatory Compliance	City of Denton NDV	UNT	On November 1, 2013, a sample of wastewater discharged from the Building (outfall 004) had a value of 0.00478 mg/L of mercury which exceeded the state and local limit of 0.006 mg/L.	NA	Submit the following within 15 days of receipt of the notice: The possible cause of the problem. The steps being taken to minimize or curtail the recurrence of the problem.	The university is taking a comprehensive, multiple-staged approach to minimizing future violations, both in the short and long term. In addition to continuing our hazardous waste training program, which is required for all individuals who work in laboratories; inspecting and safety laws; following RCRA rules for segregating, packing, and disposing of waste to reduce the chance for pollutants to enter the sanitary sewer or storm water transport systems.	NA	NA	Closed
External	City of Denton	Fiscal Year 2014	7011.1570.0002.0488.4167	Governance and Regulatory Compliance	City of Denton NDV	UNT	On October 15, 2013, a sample of wastewater discharged from the University Chemistry Building (outfall 004) had a value of 1.9199 mg/L of copper, which exceeded the state and local limit of 0.34 mg/L.	NA	Submit the following within 15 days of receipt of the notice: The possible cause of the problem. The steps being taken to minimize or curtail the recurrence of the problem.	The university is taking a comprehensive, multiple-staged approach to minimizing future violations, both in the short and long term. In addition to continuing our hazardous waste training program, which is required for all individuals who work in laboratories; inspecting and safety laws; following RCRA rules for segregating, packing, and disposing of waste to reduce the chance for pollutants to enter the sanitary sewer or storm water transport systems.	NA	NA	Closed
External	City of Denton	Fiscal Year 2014	7011.1570.0002.0488.4174	Governance and Regulatory Compliance	City of Denton NDV	UNT	On October 25, 2013, a sample of wastewater discharged from the University Discovery Park Building (outfall 005) had a value of 1.3256 mg/L of molybdenum and local limit of 1.18 mg/L.	NA	Submit the following within 15 days of receipt of this notice: The problem per the Notice of Violation issued. The steps being taken to minimize or curtail the recurrence of the problem.	The university is taking a comprehensive, multiple-staged approach to minimizing future violations, both in the short and long term. In addition to continuing our hazardous waste training program, which is required for all individuals who work in laboratories; inspecting and safety laws; following RCRA rules for segregating, packing, and disposing of waste to reduce the chance for pollutants to enter the sanitary sewer or storm water transport systems.	NA	NA	Closed
External	City of Denton	Fiscal Year 2014	7011.1570.0002.0488.4181	Governance and Regulatory Compliance	City of Denton NDV	UNT	High mercury content in water sample collected.	NA	Submit the following within 15 days of receipt of this notice: The possible cause of the problem. The steps being taken to minimize or curtail the recurrence of the problem.	The university is taking a comprehensive, multiple-staged approach to minimizing future violations, both in the short and long term. In addition to continuing our hazardous waste training program, which is required for all individuals who work in laboratories; inspecting and safety laws; following RCRA rules for segregating, packing, and disposing of waste to reduce the chance for pollutants to enter the sanitary sewer or storm water transport systems.	NA	NA	Closed
External	Deloitte & Touche in conjunction with UNT System Internal Audit	Fiscal Year 2014	NA	Finance	University of North Texas System - UNTHSC & UNTHSC Foundation Advancement Process Assessment	UNTHSC, UNTHSC Foundation	UNTHSC and the Foundation deposits received and processed by the UNTHSC advancement function are deposited into separate bank accounts owned by UNTHSC. In addition, UNTHSC and the Foundation have separate legal entities, deposits related to the Foundation should not be combined with UNTHSC funds. Specifically: <ul style="list-style-type: none"> • 55 of 60 contributors sampled totaling \$6,403,499.71 were deposited into the UNTHSC bank account that were intended for the Foundation. • Of that amount, 45 contributions totaling \$5,513,999.71 were made payable to the Foundation and 10 contributions totaling \$889,500.00 were made payable to UNTHSC. 	NA	The Foundation should establish a unique FEIN.	The university is taking a comprehensive, multiple-staged approach to minimizing future violations, both in the short and long term. In addition to continuing our hazardous waste training program, which is required for all individuals who work in laboratories; inspecting and safety laws; following RCRA rules for segregating, packing, and disposing of waste to reduce the chance for pollutants to enter the sanitary sewer or storm water transport systems.	Doug White, Vice President - UNTHSC Institutional Advancement	8/31/2014	Closed
External	Deloitte & Touche in conjunction with UNT System Internal Audit	Fiscal Year 2014	NA	Finance	University of North Texas System - UNTHSC & UNTHSC Foundation Advancement Process Assessment	UNTHSC, UNTHSC Foundation	UNTHSC and the Foundation deposits received and processed by the UNTHSC advancement function are deposited into separate bank accounts owned by UNTHSC and swept nightly into the general operating account for UNTHSC. In addition, UNTHSC and the Foundation have separate legal entities, deposits related to the Foundation should not be combined with UNTHSC funds. Specifically: <ul style="list-style-type: none"> • 55 of 60 contributors sampled totaling \$6,403,499.71 were deposited into the UNTHSC bank account that were intended for the Foundation. • Of that amount, 45 contributions totaling \$5,513,999.71 were made payable to the Foundation and 10 contributions totaling \$889,500.00 were made payable to UNTHSC. 	NA	The Foundation should establish a separate bank account to act as an operating account and create procedures for determining that UNTHSC and Foundation funds are deposited in the correct legal entity.	Establishment of separate bank account for Foundation operations to be completed.	Doug White, Vice President - UNTHSC Institutional Advancement	8/31/2014	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	Deloitte & Touche in conjunction with UNT System Internal Audit	Fiscal Year 2014	NA	Finance	University of North Texas System - UNTHS&C&BUNTHSC Foundation Advancement Process Assessment	UNTHSC, UNTHSC Foundation	UNTHSC and the Foundation deposits received and processed by the UNTHS&C advancement function are deposited into separate bank accounts owned by UNTHS&C and swept nightly into the general ledger. The Foundation deposits are deposited into the Foundation (as a Federal Employer Identification Number (FEIN)). As UNTHSC and the Foundation are separate legal entities, deposits related to the Foundation receipts should not be combined with UNTHS&C funds. Specifically, the Foundation receipts totaling \$6,402,489.71 were deposited into the UNTHS&C bank account that were intended for the Foundation. <ul style="list-style-type: none"> Of that amount, 45 contributions totaling \$5,513,959.71 were made payable to the Foundation and 10 contributions totaling \$888,529.00 were made payable to UNTHSC. 	NA	Determine the amount of existing Foundation funds held in UNTHSC bank accounts and transfer these funds to the new Foundation bank account once the separate FEIN and letter of determination from the IRS are obtained.	Establishment of separate bank account for Foundation operations to be completed.	Doug White, Vice President UNTHSC Institutional Advancement	8/31/2014	Closed
External	Deloitte & Touche in conjunction with UNT System Internal Audit	Fiscal Year 2014	NA	Finance	University of North Texas System - UNTHS&C&BUNTHSC Foundation Advancement Process Assessment	UNTHSC, UNTHSC Foundation	10 of 60 contributions sampled totaling \$888,529.00 were written to UNTHSC and deposited to the UNTHS&C bank account; however, they were not deposited to the UNTHS&C bank account. The advancement function process consists of depositing contributions based on the donor's intent instead of how the check was made payable.	NA	Donor intent should be followed; however, the check should be made payable to the correct legal entity prior to deposit. The UNTHSC advancement function should establish a process to resolve issues where donor's checks are made payable to a legal entity in contradiction to supporting documentation, such as the donor's letter of intent.	• All fundraising materials will state clearly that checks should be made payable to "UNTHSC Foundation" as a first step toward confirming donor intent. • All deposit acknowledgment letters to donors will be sent on UNTHSC Foundation letterhead and contain explicit language confirming deposit of funds to the Foundation. • In occasions when checks are made payable to UNTHSC but clear documentation is provided that donor's intent was to contribute to either raise or provide written confirmation (email) of intent to make gift payable to Foundation.	Doug White, Vice President UNTHSC Institutional Advancement	NA	N/A
External	Deloitte & Touche in conjunction with UNT System Internal Audit	Fiscal Year 2014	NA	Finance	University of North Texas System - UNTHS&C&BUNTHSC Foundation Advancement Process Assessment	UNTHSC, UNTHSC Foundation	10 of 60 contributions sampled totaling \$888,529.00 were written to UNTHSC and deposited to the UNTHS&C bank account. The donor intent indicated the contribution was for the Foundation. The advancement function process consists of depositing contributions based on the donor's intent instead of how the check was made payable.	NA	The UNTHSC advancement function should provide training and documentation to UNTHSC advancement personnel to communicate with donors on deposit requirements.	NA	Doug White, Vice President UNTHSC Institutional Advancement	NA	N/A
External	Deloitte & Touche in conjunction with UNT System Internal Audit	Fiscal Year 2014	NA	Finance	University of North Texas System - UNTHS&C&BUNTHSC Foundation Advancement Process Assessment	UNTHSC, UNTHSC Foundation	There is a cash handling policy for UNTHSC which requires cash or check deposits to be sent to the Cashier's Office within 3 business days of receipt. However, the UNTHSC advancement function does not strictly adhere to this policy, which presents a risk that checks could be misplaced, misused, or not deposited.	NA	The UNTHSC advancement function should follow the UNTHSC Cash handling policy and establish a monitoring process to ensure that the Cashier's Office within 3 business days of receipt.	Recommendation has been implemented, with a check tagging system now in use to confirm compliance with the policy.	Doug White, Vice President UNTHSC Institutional Advancement	NA	Closed
External	Deloitte & Touche in conjunction with UNT System Internal Audit	Fiscal Year 2014	NA	Finance	University of North Texas System - UNTHS&C&BUNTHSC Foundation Advancement Process Assessment	UNTHSC, UNTHSC Foundation	Current business practice is to record contributions received in Baker's Edge within 3 days of receipt; however, there is no UNTHSC advancement policy requiring contributions to be recorded in a timely manner. Baker's Edge reports are not recorded in Baker's Edge and subsequently to the general ledger.	NA	The UNTHSC advancement function should establish a policy and communicate requiring contributions to be recorded in Baker's Edge within 3 business days of receipt.	Practice has been formalized with appropriate staff.	Doug White, Vice President UNTHSC Institutional Advancement	NA	Closed
External	Deloitte & Touche in conjunction with UNT System Internal Audit	Fiscal Year 2014	NA	Finance	University of North Texas System - UNTHS&C&BUNTHSC Foundation Advancement Process Assessment	UNTHSC, UNTHSC Foundation	7 of 56 general ledger postings sampled totaling \$1,296,210.42 were posted to the clearing or operating DeptID. The review process for the clearing account DeptID is not performed monthly and does not receive appropriate approvals. A running balance is maintained in the clearing DeptID and expenditures are being made out of the account, which could potentially misstate the financial position if contributions recorded to this Foundation DeptID are meant for UNTHSC. This issue has also been noted on previous UNTS Internal Audit reports to UNTHSC.	NA	The UNTHSC advancement function should document the clearing DeptID and determine the DeptID is only used for those purposes.	Monthly reconciling has been enacted, with all transfers from the clearing DeptID reviewed and approved by the VP of Institutional Advancement.	Doug White, Vice President UNTHSC Institutional Advancement	NA	Closed
External	Deloitte & Touche in conjunction with UNT System Internal Audit	Fiscal Year 2014	NA	Finance	University of North Texas System - UNTHS&C&BUNTHSC Foundation Advancement Process Assessment	UNTHSC, UNTHSC Foundation	7 of 56 general ledger postings sampled totaling \$1,296,210.42 were posted to the clearing or operating DeptID of the advancement function and not to the permanent DeptID. The review process for the clearing account DeptID is not performed monthly and does not receive appropriate approvals. A running balance is maintained in the clearing DeptID and expenditures are being made out of the account, which could potentially misstate the financial position if contributions recorded to this Foundation DeptID are meant for UNTHSC. This issue has also been noted on previous UNTS Internal Audit reports to UNTHSC.	NA	The UNTHSC advancement function should prepare a reconciliation of the clearing DeptID identifying gifts, deposits, and expenditures that make up the balance.	Monthly reconciling has been enacted, with all transfers from the Clearing DeptID requiring review and approval of the VP of Institutional Advancement.	Doug White, Vice President UNTHSC Institutional Advancement	NA	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	Deloitte & Touche in conjunction with UNT System Internal Audit	Fiscal Year 2014	NA	Finance	University of North Texas System - UNTISC & UNTISC Foundation Advancement Process Assessment	UNTISC, UNTISC Foundation	7 of 56 general ledger postings sampled totaling \$1,296,310.02 were posted to the clearing or operating DeptID of the advancement function and not to the permanent DeptID. The review process for the clearing account DeptID is not performed monthly and does not include appropriate approvals. A unning balance is maintained in the clearing DeptID and expenditures are being made out of the account, which could potentially misstate the financial position if contributions recorded to this Foundation DeptID are meant for UNTISC. This issue has also been noted on previous UNTS Internal Audit reports to UNTISC.	NA	The UNTISC advancement function should reconcile the Clearing DeptID monthly, and move identified outstanding gifts or deposits to permanent DeptIDs.	Monthly reconciling has been enacted, with all transfers from of the Clearing DeptID requiring review and approval of the VP of Institutional Advancement.	Doug White, Vice President UNTISC, Institutional Advancement	NA	Closed
External	Deloitte & Touche in conjunction with UNT System Internal Audit	Fiscal Year 2014	NA	Finance	University of North Texas System - UNTISC & UNTISC Foundation Advancement Process Assessment	UNTISC, UNTISC Foundation	7 of 56 general ledger postings sampled totaling \$1,296,310.02 were posted to the clearing or operating DeptID. The review process for the clearing account DeptID is not performed monthly and does not include appropriate approvals. A unning balance is maintained in the clearing DeptID and expenditures are being made out of the account, which could potentially misstate the financial position if contributions recorded to this Foundation DeptID are meant for UNTISC. This issue has also been noted on previous UNTS Internal Audit reports to UNTISC.	NA	The UNTISC advancement function should not allow expenditures to be posted to the Clearing DeptID.	Monthly reconciling has been enacted, with all transfers from of the Clearing DeptID requiring review and approval of the VP of Institutional Advancement.	Doug White, Vice President UNTISC, Institutional Advancement	NA	Closed
External	Deloitte & Touche in conjunction with UNT System Internal Audit	Fiscal Year 2014	NA	Finance	University of North Texas System - UNTISC & UNTISC Foundation Advancement Process Assessment	UNTISC, UNTISC Foundation	A lack of segregation of duties exists between the personnel responsible for receiving contributions and recording in Raier's Edge. There is not a current process to record mail or in-hand contributions on a receipt log as they are received by the UNTISC advancement function, which increases the risk of contributions not being deposited upon receipt.	NA	The UNTISC advancement function should establish a segregation of duties between receiving contributions and entering contributions into Raier's Edge to provide for adequate checks and balances.	A contribution log has been created and is assigned to a distinct member of the Advancement team for receipt and recording of all gifts received in person or through the mail.	Doug White, Vice President UNTISC, Institutional Advancement	NA	Closed
External	Deloitte & Touche in conjunction with UNT System Internal Audit	Fiscal Year 2014	NA	Finance	University of North Texas System - UNTISC & UNTISC Foundation Advancement Process Assessment	UNTISC, UNTISC Foundation	A lack of segregation of duties exists between the personnel responsible for receiving contributions and recording in Raier's Edge. There is not a current process to record mail or in-hand contributions on a receipt log as they are received by the UNTISC advancement function, which increases the risk of contributions not being deposited upon receipt.	NA	The UNTISC advancement function should establish a segregation of duties between receiving contributions and entering contributions into Raier's Edge to provide for adequate checks and balances.	The contribution log is being reconciled monthly to ensure that all gifts on the log have been recorded in Raier's Edge.	Doug White, Vice President UNTISC, Institutional Advancement	NA	Closed
External	Deloitte & Touche in conjunction with UNT System Internal Audit	Fiscal Year 2014	NA	Finance	University of North Texas System - UNTISC & UNTISC Foundation Advancement Process Assessment	UNTISC, UNTISC Foundation	A lack of segregation of duties exists between the personnel responsible for receiving contributions and recording in Raier's Edge. There is not a current process to record mail or in-hand contributions on a receipt log as they are received by the UNTISC advancement function, which increases the risk of contributions not being deposited upon receipt.	NA	The UNTISC advancement function should establish a process to reconcile the contribution receipt log monthly to Raier's Edge and ES to determine that contributions received have been recorded in Raier's Edge.	The contribution log is being reconciled monthly to ensure that all gifts on the log have been recorded in Raier's Edge.	Doug White, Vice President UNTISC, Institutional Advancement	NA	Closed
External	Deloitte & Touche in conjunction with UNT System Internal Audit	Fiscal Year 2014	NA	Finance	University of North Texas System - UNTISC & UNTISC Foundation Advancement Process Assessment	UNTISC, UNTISC Foundation	The bank reconciliation process performed by the UNTISC accounting function does not resolve unrecorded items in a timely manner due to delays in receiving necessary transaction information from the Foundation. The August 2013 bank reconciliation for the Advancement account had two reconciling items over three months old. The reconciliation was not performed until the following month, which misstates the financial position of UNTISC. If the reconciling items are determined inaccurate.	NA	The UNTISC advancement and recording functions should establish a policy regarding reconciling and should be resolved within one month. The UNTISC advancement function should provide timely recording of transactions to facilitate timely reconciliations.	The practice has been established and is in place.	Doug White, Vice President UNTISC, Institutional Advancement	NA	Closed
External	Deloitte & Touche in conjunction with UNT System Internal Audit	Fiscal Year 2014	NA	Finance	University of North Texas System - UNTISC & UNTISC Foundation Advancement Process Assessment	UNTISC, UNTISC Foundation	7 of 60 contributions reviewed totaling \$220,000 were not recorded in Raier's Edge to the proper DeptID. One contribution totaling \$10,000 was unable to be traced due to lack of supporting documentation provided. Without a review process prior to contributions being entered into Raier's Edge, a risk exists that contributions are not recorded to the correct DeptID and potentially misstating the financial position of UNTISC.	NA	The UNTISC advancement function should research and resolve the three exceptions noted.	NA	Doug White, Vice President UNTISC, Institutional Advancement	NA	N/A
External	Deloitte & Touche in conjunction with UNT System Internal Audit	Fiscal Year 2014	NA	Finance	University of North Texas System - UNTISC & UNTISC Foundation Advancement Process Assessment	UNTISC, UNTISC Foundation	7 of 60 contributions reviewed totaling \$220,000 were not recorded in Raier's Edge to the proper DeptID. One contribution totaling \$10,000 was unable to be traced due to lack of supporting documentation provided. Without a review process prior to contributions being entered into Raier's Edge, a risk exists that contributions are not recorded to the correct DeptID and potentially misstating the financial position of UNTISC.	NA	The UNTISC advancement function should establish a policy requiring review of contributions received and the proposed DeptID prior to being recorded in Raier's Edge.	A new practice has been instituted that requires a second review of donor documentation to better ensure that contributions are assigned to the correct DeptID/Dm/Raier's Edge.	Doug White, Vice President UNTISC, Institutional Advancement	NA	Closed
External	Deloitte & Touche in conjunction with UNT System Internal Audit	Fiscal Year 2014	NA	Finance	University of North Texas System - UNTISC & UNTISC Foundation Advancement Process Assessment	UNTISC, UNTISC Foundation	Reconciliation is not performed between the Raier's Edge system, which acts as a subledger, to the BIS general ledger revenue transactions to assess whether the contributions were recorded to the correct Department. The contribution was not recorded by Raier's Edge. The contribution was not recorded by Raier's Edge. The contribution was not recorded by Raier's Edge. The contribution was not recorded by Raier's Edge.	NA	Research and resolve the three exceptions noted.	NA	Doug White, Vice President UNTISC, Institutional Advancement	NA	N/A

UNTS Enterprise Audit Report Inventory

Internal / External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	Deloitte & Touche in conjunction with UNT System Internal Audit	Fiscal Year 2014	NA	Finance	University of North Texas System - UNTHSC & UNTHSC Foundation Advancement Process Assessment	UNTHSC, UNTHSC Foundation	A reconciliation is not performed between the Raiser's Edge system, which acts as a subledger to the BES general ledger system, transactions to assess whether the contributions were recorded to the correct DeptID on the general ledger as indicated by Raiser's Edge. Three contributions analyzed totaling \$30,018.08 were not properly recorded to the general ledger based on how the contribution was recorded in Raiser's Edge.	NA	The Foundation should meet with the UNTHSC Accounting Office to establish a policy to perform a monthly reconciliation between the general ledger and Raiser's Edge to assess whether contributions recorded in Raiser's Edge were recorded to the correct DeptID in the general ledger.	A monthly reconciliation is now being conducted.	Doug White, Vice President UNTHSC Institutional Advancement	NA	Closed
External	Deloitte & Touche in conjunction with UNT System Internal Audit	Fiscal Year 2014	NA	Finance	University of North Texas System - UNTHSC & UNTHSC Foundation Advancement Process Assessment	UNTHSC, UNTHSC Foundation	A reconciliation is not performed between the Raiser's Edge system, which acts as a subledger to the BES general ledger system, transactions to assess whether the contributions were recorded to the correct DeptID on the general ledger as indicated by Raiser's Edge. Three contributions analyzed totaling \$30,018.08 were not properly recorded to the general ledger based on how the contribution was recorded in Raiser's Edge.	NA	The Foundation shall provide to the UNTHSC Accounting Office an addendum to the support for all journal entries prior to their posting to the general ledger.	A monthly reconciliation is now being conducted.	Doug White, Vice President UNTHSC Institutional Advancement	NA	Closed
External	Deloitte & Touche in conjunction with UNT System Internal Audit	Fiscal Year 2014	NA	Finance	University of North Texas System - UNTHSC & UNTHSC Foundation Advancement Process Assessment	UNTHSC, UNTHSC Foundation	A policy does not exist requiring an executive level review and approval of transfers from the UNTHSC operating account where general contributions are maintained to the Foundation investment account. The ability to transfer funds between bank accounts through these transfers, and the legal ownership of the funds, change through these transfers. The ability to transfer funds between bank accounts provide for an increased risk to the misuse of funds.	NA	The UNTHSC advancement function should establish a policy requiring documentation of executive level review and approval of transfer requests prior to the transfer being executed.	A practice requiring executive level review and approval has been implemented.	Doug White, Vice President UNTHSC Institutional Advancement	NA	Closed
External	Deloitte & Touche in conjunction with UNT System Internal Audit	Fiscal Year 2014	NA	Finance	University of North Texas System - UNTHSC & UNTHSC Foundation Advancement Process Assessment	UNTHSC, UNTHSC Foundation	A policy does not exist requiring review and approval of transfer transactions between DeptIDs prior to being posted to the general ledger. The ability to transfer funds between DeptIDs provides for an increased risk of misrepresentation of funds on the UNTHSC financial statements.	NA	The UNTHSC advancement function should establish a policy requiring executive level review and approval of DeptID transfers prior to their posting to Raiser's Edge and the general ledger.	A practice requiring executive level review and approval of DeptID transfers has been implemented.	Doug White, Vice President UNTHSC Institutional Advancement	NA	Closed
External	Deloitte & Touche in conjunction with UNT System Internal Audit	Fiscal Year 2014	NA	Finance	University of North Texas System - UNTHSC & UNTHSC Foundation Advancement Process Assessment	UNTHSC, UNTHSC Foundation	There is currently not a policy within the advancement function related to the review and approval of DeptID addition, deletion, and modification. The ability to modify DeptIDs increases the risk that funds are misapportioned on the UNTHSC financial statements or that funds are recorded for a purpose in contradiction to the intent of the contribution.	NA	The UNTHSC advancement function should establish a policy requiring review and approval of DeptID addition, deletion, or modification prior to effecting a transfer to Raiser's Edge or the general ledger.	A practice requiring executive level review/approval of DeptID creation or alterations has been implemented.	Doug White, Vice President UNTHSC Institutional Advancement	NA	Closed
External	Food and Drug Administration	Fiscal Year 2014	UNTHSC, Protocol Compliance	Governance and Regulatory Compliance	Protocol Compliance: TCOM/Medical Education	UNTHSC	None	NA	NA	NA	NA	NA	N/A
External	State Auditor's Office	Fiscal Year 2014	14-021	Finance	State of Texas Compliance with Federal Requirements for the Student Financial Assistance Program for the Fiscal Year Ended August 31, 2013	UNT	For 18 percent of 60 students listed, the University of North Texas (UNT) did not submit corrections for changes in education credit amounts to the U.S. Department of Education as required, however, the University accurately verified all required information.	NA	The University should correct the batch process in its financial aid system so that it submits changes in education and credit amounts to the U.S. Department of Education and adjusts applicants' financial aid packages accordingly.	Management made changes to the batch process in U.S. financial aid system so that it submits changes to the U.S. Department of Education. All students affected were corrected.	Dave Guzman, Vice President Thompson	7/7/2013	Closed
External	State Auditor's Office	Fiscal Year 2014	14-021	Finance	State of Texas Compliance with Federal Requirements for the Student Financial Assistance Program for the Fiscal Year Ended August 31, 2014	UNT	For 13.12 percent of 60 students listed, the University did not accurately report the students' enrollment status to NSLDS.	NA	The University should implement a formal process to accurately report state changes and effective dates for unoffically withdrawn students to NSLDS.	Management is attentive to the U.S. Department of Education requirements associated with Student Status Changes resulting from Management Response and Corrective Action Plan. Management is currently reviewing the data and will report the data and timely reporting to the National Student Clearinghouse and the National Student Loan Data System for this population of students.	Bryan Beard	6/7/2013	Closed

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Auditor's Office	Fiscal Year 2014	14-022	Finance	State of Texas Compliance with Federal Requirements for the Development Center for the Fiscal Year Ended August 31, 2013	UNT	One (1 percent) of 70 direct cost transactions tested at the University of North Texas (University) was unallowable. For 1 (1 percent) of 70 direct cost transactions tested, the University incorrectly calculated the amount of the federal expenditure.	NA	The University should establish and implement procedures to ensure that it does not charge unallowable or incorrect costs to federal awards.	The UNT Business Service Center (BSC) agrees. The BSC has corrected the travel reimbursement and the payroll underpayment. The BSC has established business practices to address the recommendation, which include: - Provided additional training to travel staff regarding unallowable expenses on federal funds. - Will participate in ongoing collaboration with the UNT Office of Research and Development to ensure that the University's system of travel expenditures (ERP (PeopleSoft) system now calculates partial months using an annualized hourly rate of pay (2,080 hours). The manual calculation is no longer necessary. The University has implemented a process to review all travel transactions and determined that each transaction was allowable and calculated correctly. However, 1 of 15 travel expenditures tested was unallowable. The University reimbursed the University as part of a travel reimbursement. The UNT Office of Research Services has a written procedure and training in place covering unallowable expenditures on federal awards, including tips. The employee that approved the travel reimbursement was not aware of the procedure and was not able to detect the issue. The issue has been discussed with the employees, and will be reinforced further with all employees.	Robert Walling/Aaron Lemay and Debbie Reynolds	12/2/2013	Closed
External	State Auditor's Office	Fiscal Year 2014	14-022	Finance	State of Texas Compliance with Federal Requirements for the Research and Development Center for the Fiscal Year Ended August 31, 2013	UNT	The University of North Texas (University) did not ensure that certain expenditures that exceeded \$25,000 were not suspended or debated.	NA	The University should document its vendor suspension and debarment verifications for all procurements of at least \$25,000.	The UNT System Business Service Center (BSC) agrees. The BSC has included: - Management Response and Corrective Action Plan 2012: - Added a clause/condition to the UNT System Purchase Order Terms and Conditions on 10/26/12. - Updated the BSC's purchasing staff on EPLS search and documentation requirements on 1/16/13. - Created a procedure to ensure all procurements of at least \$25,000 are documented appropriately and are audited by management daily. All BSC's Services Center Purchasing staff will be re-educating on the EPLS requirements and the need to maintain verification documentation. Purchasing Director/Manager will continue to audit for compliance on a daily basis.	Debbie Reynolds, Carolyn Cross, Jane Tina Joering	12/16/2013	Closed
External	State Auditor's Office	Fiscal Year 2014	14-039	Finance	State Agency, University, and Community College District Compliance with the Public Funds Investment Act and Investment Reporting Requirements	UNT	Not Fully Compliant with the Public Funds Investment Act * (Source: Findings list are based upon reviews of the audit reports issued by the universities' internal or external auditors.)	NA	None	NA	NA	NA	N/A
External	State Auditor's Office	Fiscal Year 2014	14-039	Finance	State Agency, University, and Community College District Compliance with the Public Funds Investment Act and Investment Reporting Requirements	UNTBSC	Not Fully Compliant with the Public Funds Investment Act * (Source: Findings list are based upon reviews of the audit reports issued by the universities' internal or external auditors.)	NA	None	NA	NA	NA	N/A
External	State Auditor's Office	Fiscal Year 2014	14-325	Finance	Federal Director of the Statewide Single Audit Report for the Year Ended August 31, 2013	UNT	NA	NA	None	NA	NA	NA	N/A

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Auditor's Office	Fiscal Year 2014	14-555	Finance	Statewide Single Audit Report for the Year Ended August 31, 2013	UNT	On its SEFA, the University of North Texas (UNT) Financial Assistance Center of Incentive Programs using award year 2013 expenditures of \$6,272,520 and 2012 expenditures of \$6,272,520 and 2011 expenditures of \$6,272,520. UNT also incorrectly included \$6,235,520 of those expenditures in the notes to its SEFA, and understated federal revenue by \$276,738 in the notes to its SEFA. UNT also incorrectly included \$6,235,520 of those expenditures from its SEFA. UNT asserted that it excluded those expenditures because it had a vendor relationship with other state entities; however, UNT could not provide support for that assertion.	NA	None	Corrective action was taken.	NA	NA	N/A
External	State Office of Risk Management	Fiscal Year 2014	NA	Governance and Regulatory Compliance	On-Site Consultation	UNT	14-08-01 Safety: Electrical Safety: GFCI Outlets - SORM noted during the consultation that an outlet in the welding shop within six feet of a tank did not have a GFCI receptacle nor was it on a GFCI circuit.	NA	SORM recommends providing GFCI protection as per the National Electrical Code.	NA	NA	NA	Closed
External	State Office of Risk Management	Fiscal Year 2014	NA	Governance and Regulatory Compliance	On-Site Consultation	UNT Dallas	14-08-01 Safety: Fire Safety: Fire Wall Penetrations - SORM noted during the consultation that some of the fire wall penetrations in the seventh floor electrical room have not been sealed with fire-resistant caulk.	NA	NA	NA	NA	NA	Closed
External	State Office of Risk Management	Fiscal Year 2014	NA	Governance and Regulatory Compliance	On-Site Consultation	UNT System	14-08-01 Safety: Fire Safety: Fire Wall Penetrations - SORM noted during the consultation that some of the fire wall penetrations in the seventh floor electrical room have not been sealed with fire-resistant caulk.	NA	SORM recommends that these areas be sealed with the properly rated fire sealant, as per the NFPA standard.	NA	NA	NA	Closed
External	State Office of Risk Management	Fiscal Year 2014	NA	Governance and Regulatory Compliance	On-Site Consultation	UNT Dallas	14-08-01 Safety: Fire Safety: Fire Wall Penetrations - SORM noted during the consultation that in the manager's office of the kitchen, three power strips were daisy-chained into each other, thereby creating an electrical load capacity hazard.	NA	SORM recommends that UNT Dallas coordinate with the property manager to ensure that the extinguishers and all other safety-related pieces of equipment (such as emergency lighting equipment) are properly maintained and inspected and/or maintained with a frequency as required by the manufacturer or a recognized safety standard. References: NFPA-101 (2012), "Life Safety Code," Chapters 97.4.1 and 99.3.5; NFPA-10 (2013), "Standard for Portable Fire Extinguishers," Chapter 7, and 8.	NA	NA	NA	Closed
External	State Office of Risk Management	Fiscal Year 2014	NA	Governance and Regulatory Compliance	On-Site Consultation	UNT System	14-08-02 Safety: Policies/Procedures: Documented Scheduled Inspections and Maintenance of Safety Equipment - SORM noted during the consultation that the portable fire extinguisher had not been documented as inspected monthly, as per the NFPA standards.	NA	SORM recommends that UNT-Denton ensure that these areas meet the OSHA Hazard Communication standard and the ANSI/ISEA eyewash standard.	NA	NA	NA	Closed
External	State Office of Risk Management	Fiscal Year 2014	NA	Governance and Regulatory Compliance	On-Site Consultation	UNT	14-08-02 Safety: Working/Working Surfaces: Load Capacity Signage - SORM noted during the consultation that an overhead storage area in the welding shop was lacking a weight capacity sign, as per the OSHA standard.	NA	SORM recommends that UNT-Denton ensure that these areas meet the OSHA Hazard Communication standard and the ANSI/ISEA eyewash standard.	NA	NA	NA	Closed
External	State Office of Risk Management	Fiscal Year 2014	NA	Governance and Regulatory Compliance	On-Site Consultation	UNT	14-08-03 Safety: Hazard Communication Program: Bottle Labeling and Auxiliary Eyewash Bottles - SORM noted that in several locations secondary bottles were unstable and auxiliary eyewash bottle solution had expired.	NA	SORM recommends that UNT Dallas coordinate with the vendor and UNT Risk Management Services to ensure that all employees receive this training, as per the OSHA standard.	NA	NA	NA	Closed
External	State Office of Risk Management	Fiscal Year 2014	NA	Governance and Regulatory Compliance	On-Site Consultation	UNT Dallas	14-08-03 Safety: Hazard Communication: OSHA Global Harmonization System (GHS) Training - SORM noted during the consultation that the three-party vendor services on campus has not conducted OSHA Global Harmonization System (GHS) training for its employees.	NA	SORM recommends that UNT-Denton ensure that these areas meet the OSHA Hazard Communication standard and the ANSI/ISEA eyewash standard.	NA	NA	NA	Closed
External	State Office of Risk Management	Fiscal Year 2014	NA	Governance and Regulatory Compliance	On-Site Consultation	UNT	14-08-04 Safety: Electrical Safety: Missing Knockouts (Sycamore Hall) - SORM noted that in Sycamore Hall, an electrical panel was missing the required "knockouts."	NA	SORM recommends that all banks of electrical panels are covered by knockouts, as per the National Electrical Code.	NA	NA	NA	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Reporting Period Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observation	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Office of Risk Management	Fiscal Year 2014	NA	Governance and Regulatory Compliance	On-Site Consultation	UNT Dallas	14-08-04 Safety Hazard: Commensurator's Eyewash Stations (Location) being used in the kitchen. However, no eyewash stations are provided to comply with the safety instructions on the chemicals' Safety Data Sheets.	NA	SORM recommends that UNT Dallas install eyewash stations in the kitchen. UNT Dallas should ensure that all employees who work with these chemicals, including third-party vendor employees, are trained on the location and operation of these stations once installed. Reference: OSHA, 29 CFR 1910.1209; OSHA, 29 CFR 1910.151 (C); ANSI/ISA 138.1 (2009); "Standard for Emergency Eyewashes and Shower Equipment"	NA	NA	Closed	
External	State Office of Risk Management	Fiscal Year 2014	NA	Governance and Regulatory Compliance	On-Site Consultation	UNT	14-08-05 Safety: Fire Safety: Fire Wall Penetrations (Hurley Administration Building) - SORM noted during the consultation that several penetrations through a fire wall in the Hurley Administration Building were not properly sealed, as per the NFPA standard.	NA	SORM recommends that UNT Denton seal the penetrations with the properly rated sealant.	NA	NA	NA	Closed
External	State Office of Risk Management	Fiscal Year 2014	NA	Governance and Regulatory Compliance	On-Site Consultation	UNT	14-08-06 Safety: Fire Safety: Maximum Occupancy (Sign in the Ken Robison Gymnasium was not present.	NA	SORM recommends the posting of this sign as per the NFPA standard.	NA	NA	NA	Closed
External	State Office of Risk Management	Fiscal Year 2014	NA	Governance and Regulatory Compliance	On-Site Consultation	UNT	14-08-07 Safety: Electrical Safety: Labeling and Lockouts (Music Practice Mechanical Room and Zone Maintenance) - SORM noted during the consultation that electrical panels in the Music Practice Mechanical Room and Zone Maintenance were missing proper labels.	NA	SORM recommends correcting this deficiency, as per the National Electrical Code.	NA	NA	NA	Closed
External	State Office of Risk Management	Fiscal Year 2014	NA	Governance and Regulatory Compliance	On-Site Consultation	UNT	14-08-08 Safety: Machine Safety: Guarding of Moving Parts (General Academic Building) - SORM noted during the consultation that the larger return air fans in the General Academic Building were missing guards for their exposed moving parts.	NA	SORM recommends that the university guard the moving parts, as per the OSHA standard.	NA	NA	NA	Closed
External	State Office of Risk Management	Fiscal Year 2014	NA	Governance and Regulatory Compliance	On-Site Consultation	UNT	14-08-09 Safety: Working/Working Surfaces: Dumpsters - SORM noted during the consultation that outside of Central Receiving wooden steps have been erected to allow staff members to dump.	NA	SORM recommends that the university destroy these steps and implement a procedure for dumping trash that does not present such a hazard to employee health and safety.	NA	NA	NA	Closed
External	State Office of Risk Management	Fiscal Year 2014	NA	Governance and Regulatory Compliance	On-Site Consultation	UNT	14-08-10 Safety: Working/Working Surfaces: Storage - SORM noted during the consultation that items were being tied on top of a metal cage in the Concrete Bay without a load capacity sign.	NA	SORM recommends that the university either remove these items from this location or determine and post the load capacity of the roof of the metal cage.	NA	NA	NA	Closed
External	State Office of Risk Management	Fiscal Year 2014	NA	Governance and Regulatory Compliance	On-Site Consultation	UNT	14-08-11 Safety: Electrical Safety: Federal Specific Electrical Panels - SORM noted during the consultation that seven buildings on campus contain Federal Pacific Electric Company electrical panels as part of their electrical systems. These kinds of panels have been noted to present a latent hazard and the danger by malfunctioning was found liable in a class-action lawsuit of fraudulently obtaining the Underwriters Laboratory (UL) certification for some of their electrical panels. There is controversy over these panels. Some electricians believe that the panels are not safe and that the manufacturer has already begun the process of identifying these panels and replacing them where the budget allows. The others have been placed in the capital plan for replacement when funds become available.	NA	SORM recommends that UNT Denton consider the feasibility of NA expediting the funding for this ongoing project. Reference: OSHA, 29 CFR 1910.303 (B)(1)	NA	NA	NA	Closed
External	State Office of Risk Management	Fiscal Year 2014	NA	Governance and Regulatory Compliance	On-Site Consultation	UNT	14-08-12 Safety: Policies/Procedures: Regulatory Protection Program (Medical) - SORM noted during the consultation that for path-shop employees, the university is using a third-party vendor to conduct fit evaluations being conducted to determine that employees are physically capable of wearing respirators.	NA	SORM recommends that the university review their procedures in this area and ensure that they comply with the OSHA standard. Reference: OSHA, 29 CFR 1910.134	NA	NA	NA	Closed
External	State Office of Risk Management	Fiscal Year 2014	NA	Governance and Regulatory Compliance	On-Site Consultation	UNT	14-08-13 Safety: Policies/Procedures: Occupational Noise Exposures - SORM noted during the consultation that in the North Chiles Plant noise levels were wanted measurement for a potential occupational noise exposure program.	NA	SORM recommends that the university measure all work areas for noise exposure and if they are above the action threshold, then the university should take the additional measures required by OSHA to determine if the exposures are above the action threshold for an 8-hour Time-Weighted Average. If they are, then the university should implement a hearing conservation program should be implemented. Reference: OSHA, 29 CFR 1910.95	NA	NA	NA	Closed
External	State Office of Risk Management	Fiscal Year 2014	NA	Governance and Regulatory Compliance	On-Site Consultation	UNT	14-08-14 Risk Management: Risk Registers: Facilities (Facilities) - SORM noted during the consultation that there are some building issues (such as IT projects) that do not necessarily require the notice of the Facilities Department even though they can affect structural issues within a building.	NA	SORM recommends that the university consider the feasibility of NA functions to be coordinated through the Facilities Department in some formal manner. Reference: BMTSA Guidelines, Volume II, Section Two, Chapter 2; Subchapter 2.3	NA	NA	NA	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Response Period	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	Texas Department of State Health Services	Fiscal Year 2014	1020837	Governance and Regulatory Compliance	Notices of Violation	UNT	Violation 2 – Entrance exposure exceeded limits for Abdomen (KUB) procedure	NA	For each violation: 1. Describe the specific steps taken to correct the violation. 2. Describe the steps taken to prevent it from happening again. 3. The date when full compliance was, or will be achieved.	a. Specific Steps Taken to Correct Violation: The Abdomen (KUB) system has preprogrammed techniques. The individual the University hired to be the Radiation Safety Officer (TDSHS approval pending), in consultation with the University current setting for chest X-ray. In addition, the technologist has reviewed the power exposures for the abdomen. The technologist now uses a below 450 millirem technique. b. Steps Taken to Prevent Violation from Recurring: The x-ray technologist has reviewed the technique chart and certified that she has read the manufacturer-issued operations manual. In addition, the technologist has been directed not to alter the current setting for chest X-rays. c. Date Full Compliance Was or Will be Achieved: The correct preprogrammed techniques were selected on August 26, 2014. The University has been notified of the violation. The vendor manufacturer's operation manual on that same date. The vendor inspected the machine on March 12, 2014. Operation and safety procedure and a verification (sign-off) procedure for the radiation machine will be implemented no later than October 31, 2014. As requested, enclosed please find a copy of the service report for the machine. a. Specific Steps Taken to Correct Violation The University is in the process of developing operating and safety procedures for the machine. The vendor has been notified of the violation. The vendor manufacturer's operation manual on that same date. The vendor inspected the machine on March 12, 2014. Operation and safety procedure and a verification (sign-off) procedure for the radiation machine will be implemented no later than October 31, 2014. As requested, enclosed please find a copy of the service report for the machine. b. Steps Taken to Prevent Violation from Recurring The University will require all individuals who operate radiation machines to read the operating and safety procedures for each device they operate and sign a document verifying they have read and understood the procedures. The Radiation Safety Officer will sign or verify the procedures. The vendor will be notified of the violation in accordance with the university's record retention policy. c. Date Full Compliance Was or Will be Achieved	NA	10/31/2014	Closed
External	Texas Department of State Health Services	Fiscal Year 2014	1020837	Governance and Regulatory Compliance	Notices of Violation	UNT	Violation 3 – No documentation showing individual radiation machine operators read operating and safety procedures	NA	For each violation: 1. Describe the specific steps taken to correct the violation. 2. Describe the steps taken to prevent it from happening again. 3. The date when full compliance was, or will be achieved.	a. Specific Steps Taken to Correct Violation The University is in the process of developing operating and safety procedures for the machine. The vendor has been notified of the violation. The vendor manufacturer's operation manual on that same date. The vendor inspected the machine on March 12, 2014. Operation and safety procedure and a verification (sign-off) procedure for the radiation machine will be implemented no later than October 31, 2014. As requested, enclosed please find a copy of the service report for the machine. b. Steps Taken to Prevent Violation from Recurring The University will require all individuals who operate radiation machines to read the operating and safety procedures for each device they operate and sign a document verifying they have read and understood the procedures. The Radiation Safety Officer will sign or verify the procedures. The vendor will be notified of the violation in accordance with the university's record retention policy. c. Date Full Compliance Was or Will be Achieved	NA	10/31/2014	Closed
External	Texas Department of State Health Services	Fiscal Year 2014	1020985	Governance and Regulatory Compliance	Notices of Violation	UNT	1. We had not had the Fluoroscopic Entrance Skin Exposures measured within 14 minutes.	NA	For each violation: 1. Describe the specific steps taken to correct the violation. 2. Describe the steps taken to prevent it from happening again. 3. The date when full compliance was, or will be achieved.	This station is an error. We had an inspection of this system on 3/1/2014. The vendor has been notified of the violation. The vendor manufacturer's operation manual on that same date. The vendor inspected the machine on March 12, 2014. Operation and safety procedure and a verification (sign-off) procedure for the radiation machine will be implemented no later than October 31, 2014. As requested, enclosed please find a copy of the service report for the machine. b. Steps Taken to Prevent Violation from Recurring The University will require all individuals who operate radiation machines to read the operating and safety procedures for each device they operate and sign a document verifying they have read and understood the procedures. The Radiation Safety Officer will sign or verify the procedures. The vendor will be notified of the violation in accordance with the university's record retention policy. c. Date Full Compliance Was or Will be Achieved	NA	NA	Closed
External	Texas Department of State Health Services	Fiscal Year 2014	1020985	Governance and Regulatory Compliance	Notices of Violation	UNT	2. We had not created specific Operating and Safety Procedures for all radiation producing devices and had them signed annually by the operators and installed by the RSO.	NA	For each violation: 1. Describe the specific steps taken to correct the violation. 2. Describe the steps taken to prevent it from happening again. 3. The date when full compliance was, or will be achieved.	Since this system is only operated by one individual (Dr. Michael House), I did not feel it was necessary to develop Operating and Safety Procedures for him to sign. Based on this violation, however, I will request that the vendor be notified of the violation. The vendor will be notified of the violation. The vendor manufacturer's operation manual on that same date. The vendor inspected the machine on March 12, 2014. Operation and safety procedure and a verification (sign-off) procedure for the radiation machine will be implemented no later than October 31, 2014. As requested, enclosed please find a copy of the service report for the machine. b. Steps Taken to Prevent Violation from Recurring The University will require all individuals who operate radiation machines to read the operating and safety procedures for each device they operate and sign a document verifying they have read and understood the procedures. The Radiation Safety Officer will sign or verify the procedures. The vendor will be notified of the violation in accordance with the university's record retention policy. c. Date Full Compliance Was or Will be Achieved	NA	NA	Closed
External	Texas Department of State Health Services	Fiscal Year 2014	1020985	Governance and Regulatory Compliance	Notices of Violation	UNT	3. The station was not notified of the change in RSO within 30 days following the change.	NA	For each violation: 1. Describe the specific steps taken to correct the violation. 2. Describe the steps taken to prevent it from happening again. 3. The date when full compliance was, or will be achieved.	This was an oversight of the current RSO. The vendor has been notified of the violation. The vendor manufacturer's operation manual on that same date. The vendor inspected the machine on March 12, 2014. Operation and safety procedure and a verification (sign-off) procedure for the radiation machine will be implemented no later than October 31, 2014. As requested, enclosed please find a copy of the service report for the machine. b. Steps Taken to Prevent Violation from Recurring The University will require all individuals who operate radiation machines to read the operating and safety procedures for each device they operate and sign a document verifying they have read and understood the procedures. The Radiation Safety Officer will sign or verify the procedures. The vendor will be notified of the violation in accordance with the university's record retention policy. c. Date Full Compliance Was or Will be Achieved	NA	NA	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2014	13-027 UNT	Academic and Students	UNT Kristin Farmer Autism Audit	UNT	The UNT Kristin Farmer Autism Center's (KFAC) Business Plan does not appear to be achievable. The KFAC's Business Plan presents a detail cost structure for provided services as \$5,500 per month per child, or \$66,000 annually. KFAC was to serve 40 children monthly generating an annual income of \$2,640,000; however, the Center's capacity can only operate with 20 full-time and additional part-time clients. Additionally, there is no presentation or explanation of how these services will be paid by the client. Examples would include insurance coverage, partnering with local school districts, or scholarships.	High	Management Action for the Vice Provost for Academic Resources and Dean of the College of Education: Establish a team with the knowledge and expertise to evaluate the KFAC's Business Plan.	The Vice Provost for Academic Resources agrees with all the recommendations. 1. The Vice Provost for Academic Resources with the Dean of the College of Education to compose an evaluation team with the knowledge and expertise to evaluate the KFAC's Business Plan. This team will consist of members of UNT and the community who can help to advise on individual components of the plan.	Dr. Allen Clark, Vice Provost for Academic Resources	4/01/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	13-027 UNT	Academic and Students	UNT Kristin Farmer Autism Audit	UNT	The UNT Kristin Farmer Autism Center's (KFAC) Business Plan does not appear to be achievable. The KFAC's Business Plan presents a detail cost structure for provided services as \$5,500 per month per child, or \$66,000 annually. KFAC was to serve 40 children monthly generating an annual income of \$2,640,000; however, the Center's capacity can only operate with 20 full-time and additional part-time clients. Additionally, there is no presentation or explanation of how these services will be paid by the client. Examples would include insurance coverage, partnering with local school districts, or scholarships.	High	Management Action for the Vice Provost for Academic Resources and Dean of the College of Education: Assess that all sources of revenue have been identified and validated through the development of a funding model of service provided by the center.	2. Assess that all sources of revenue have been identified and validated through the development of a funding model of service provided by the center.	Dr. Kevin Callahan, Executive Director of the Kristin Farmer Autism Center	4/01/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	13-027 UNT	Academic and Students	UNT Kristin Farmer Autism Audit	UNT	The UNT Kristin Farmer Autism Center's (KFAC) Business Plan does not appear to be achievable. The KFAC's Business Plan presents a detail cost structure for provided services as \$5,500 per month per child, or \$66,000 annually. KFAC was to serve 40 children monthly generating an annual income of \$2,640,000; however, the Center's capacity can only operate with 20 full-time and additional part-time clients. Additionally, there is no presentation or explanation of how these services will be paid by the client. Examples would include insurance coverage, partnering with local school districts, or scholarships.	High	Management Action for the Vice Provost for Academic Resources and Dean of the College of Education: Perform a cost/benefit analysis of the KFAC; and	The Vice Provost for Academic Resources agrees with all the recommendations. 3. A cost/benefit analysis will be included as part of the updated business plan.	Dr. Kevin Callahan, Executive Director of the Kristin Farmer Autism Center	4/01/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	13-027 UNT	Academic and Students	UNT Kristin Farmer Autism Audit	UNT	The UNT Kristin Farmer Autism Center's (KFAC) Business Plan does not appear to be achievable. The KFAC's Business Plan presents a detail cost structure for provided services as \$5,500 per month per child, or \$66,000 annually. KFAC was to serve 40 children monthly generating an annual income of \$2,640,000; however, the Center's capacity can only operate with 20 full-time and additional part-time clients. Additionally, there is no presentation or explanation of how these services will be paid by the client. Examples would include insurance coverage, partnering with local school districts, or scholarships.	High	Management Action for the Vice Provost for Academic Resources and Dean of the College of Education: Prepare a Memorandum of Understanding to document the financial funding agreements between the KFAC, the Provost, and the Office and the University. Implementation will provide assurance that a thorough implementation of the funding model is in place for the model. Additionally, a cost/benefit analysis of the KFAC will be performed.	4. Prepare a Memorandum of Understanding to document the financial funding agreements between the KFAC, the Provost, and the Office and the University. Implementation will provide assurance that a thorough implementation of the funding model is in place for the model. Additionally, a cost/benefit analysis of the KFAC will be performed.	Dr. Allen Clark, Vice Provost for Academic Resources	3/12/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-001 ISC	Governance and Regulatory Compliance	Family Medicine Residency Program	UNTHSC	None	None	NA	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2014	14-001 UNT	Governance and Regulatory Compliance	NCAA Agreed Upon Procedures	UNT	We performed a limited review of the control environment related to football ticket sales. We noted weaknesses related to complimentary tickets and no reconciliations of complimentary tickets or unpaid student tickets.	NA	We recommend that the Athletics department strengthen the controls related to complimentary tickets (including complimentary tickets which should include documentation of each complimentary ticket recipient, and perform reconciliations of complimentary and student tickets.	The athletic department agrees with a recommendation that additional steps can be taken to further assure the integrity of complimentary tickets. The athletic department will: 1. On a weekly basis reconcile a. student tickets b. tickets with Ticketmaster to assure that all protocols are in place to link personnel who can print or distribute comp tickets. 3. On a monthly basis, spot check and report on comp ticket in blocks. (to assure proper approvals are in block).	Mike Ashbaugh, Troy Taylor	1/12/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-001 UNT	Governance and Regulatory Compliance	NCAA Agreed Upon Procedures	UNT	Future game guarantees are not accrued when contracts are executed.	NA	We recommend that game guarantees be accrued in the financial reporting period when the contracts are executed.	The athletic department agrees to create accounts receivable for game contracts. We will consult with Financial Reporting to record existing and future contracts using GAAP amounts. The athletic department notes that in most cases the guaranteed amount in the event a scheduled contest is not played is not the same as the face value of the contract for the game. Accounting will consult with financial reporting to determine the amount to be recorded.	Mike Ashbaugh	1/12/2014	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2014	14-001 UNT	Governance and Regulatory Compliance	NCAA Athlete/Upson Procedures	UNT	NCAA Subpart 11.2.2, Athletically Related Income, requires annual reporting of all athletically related income and benefits from sources outside the institution. This reporting is to also be provided to the President. During the audit, Athletics did not have all party compensation was received by the Athletics Department employees that met the criteria to be disclosed in the financial statements.	NA	We recommend that the Athletics Department develop a process for assessing that all reports are obtained and completed appropriately, and determine if any additional steps are necessary for this process to be fully compliant with NCAA Bylaw 11.2.2.	This Athletics Department has always collected all forms in a timely manner through the Compliance Officer. This year due to a change in the Compliance Officer, all forms were not collected. To alleviate this from happening again the athletic department will have the Compliance Officer to create a list of staff required to submit forms. 2. Meet with staff and department personnel to get each form signed and recorded on an excel spreadsheet. 3. Athletic Director and Senior Associate Athletic Director for Business Affairs will set calendar reminders to meet with Compliance Officer and complete certification submission date. Athletics notes that forms for 2011 and 2012 were requested after the review and all forms were provided immediately. This is a commitment that our procedures under normal circumstances will be followed.	RCA Villarreal, Mike Abhaugh, Scott Hobbs	1/15/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-001 UNT	Governance and Regulatory Compliance	NCAA Agreed Upon Procedures	UNT	Future game guarantees are not recorded when contracts are executed.	NA	We recommend that game guarantees be recorded when the contracts are executed.	We will consult with Financial Reporting to record existing and future contracts using GAAP as a guideline for recording these amounts. The athletic department notes that in most cases the guaranteed amount is not played is not the same as the face value of the contract when the game is played. Again we will consult with Financial Reporting to determine the amount to be reported.	Mike Abhaugh	1/15/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-001 UNT	Governance and Regulatory Compliance	NCAA Agreed Upon Procedures	UNT	Non cash benefits for Athletic Department employees. When recalculating a sample of the calendar year 2012 W-2s and reviewing other supporting documentation, temporary housing benefits for several of the employees' W-2s as taxable income.	NA	We recommend that any necessary corrections be made to prior year W-2's.	The UNT System BSC agrees and will review the documentation provided by internal Audit.	Carol McFarland, BSC Tax Accountant	3/31/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-001 UNT	Governance and Regulatory Compliance	NCAA Agreed Upon Procedures	UNT	In calendar year 2011, the tax treatment for employee cell phone allowances and cell phone purchase reimbursements was changed entity-wide to a non-taxable expense reimbursement. The change was not documented and required documentation to ensure that the cell phone expense reimbursement did not exceed the employee's actual business expense and the reimbursements provided for the IRS required documentation to support the expense. The BSC did not consider with the current tax treatment and practices, and need to be revised.	NA	We recommend that the Vice President for Information Technology and CO, in conjunction with the Business Service Center review the current tax treatment of cell phone purchase reimbursements, and update the cell phone policy accordingly. Additionally, policy training to cell phone allowance recipients should be provided to ensure compliance with policy requirements.	The Vice Provost for Information Technology and CO, in conjunction with the Business Service Center and IT Shared services, will review the current tax treatment practice for cell phone purchase reimbursements and update the cell phone policy accordingly. Further, appropriate policy training for cell phone allowance recipients will be developed to ensure compliance with policy requirements.	John Hooper, UNT Vice Provost for Information Technology and CO	9/17/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-001 UNT	Governance and Regulatory Compliance	NCAA Agreed Upon Procedures	UNT	When recalculating a sample of the calendar year 2012 W-2s and documentation, an overstatement of wages in one employee's W-2 Box 4, wages was identified. After consulting with the Business Service Center (BSC), it was determined that a year-end adjustment was made twice for over wages. The BSC will issue a W-2r reducing over wages by \$1,750.00.	NA	We recommend that the Business Service Center review the employees wages to ensure that all wages reported on the institutions' W-2s are accurate.	The UNT System BSC agrees	Carol McFarland, BSC Tax Accountant	3/31/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-001 UNT	Governance and Regulatory Compliance	NCAA Agreed Upon Procedures	UNT	During the review of recruiting policies, it was noted that no policy manual exists, just a collection of documents. These documents did not address recruiting expenses.	NA	We recommend that policies be developed specific to recruiting expenses to assist in assuring compliance with all NCAA regulations.	The Athletic Department currently has documented procedures given to every new coach upon arrival at UNT. The procedures are: 1. Has a training session with each coach for staff at hand to cover policies 2. Gives each coach a NCAA Rule Book which lists all applicable rules and bylaws 3. Technology and online file of department policies on travel and credit card use 4. Annually test coaches on rules The athletic department agrees to review other university policy manuals to strengthen our existing policies and manuals.	RCA Villarreal, Mike Abhaugh, Patsy Wells, Becky Hall, Scott Hobbs	8/7/2014	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Review Period Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2014	14-001 UNT	Governance and Regulatory Compliance	NCAA Agreed Upon Procedures	UNT	During the review of team travel policies, it was noted that the travel do not address all relevant NCAA Bylaws.	NA	We recommend that the policies be reviewed and updated to address all relevant NCAA regulations are addressed.	The Athletic Department currently has documented procedures given to the University. The department currently: 1. Has a training session with each coach or staff as hired to cover policies on each a NCAA rule book which lists all applicable rules and bylaws. 2. Provides a hardcopy and online file of department policies on travel and credit card use. 3. Annually test coaches on rules. 4. Annually review other university policy manuals to strengthen our existing policies and manuals. It is not the practice of the Athletic Department to process journal entries without proper documentation. In the future, there are no journal entries without documentation in the Athletic Department. Department agrees to do the following: 1. Require documentation review on all transactions with sport. 2. The Athletic Department will follow the policy set by Financial Reporting for journal entry documentation. 3. The supporting documentation reviewed was only the partial items during the expense report. The balance of the documentation was available during the next month's expense statements. In addition, the particular bill was problematic due to a mistake in normal hotel billing. The hotel's accounting were not available from the hotel. Documentation of these irregularities, including e-mails from hotel management, was attached to expense report. Concerning the supporting documentation provided and required by the Athletic Department during the recosting period. The recosting of expenses is a necessary process due to a number of factors both in athletics and other departments will conduct a review of why recastings were required. The athletic department will continue to reduce the number of recastings by: 1. Performing monthly reviews of accounts and account numbers to ensure they are accurate. 2. Review changes of account numbers made once transactions leave the athletic department. The first two bills reviewed were those with the longest pay date, both of which were over 13 months old. The company's billing, one that had been sold 13 months ago. The athletic department intends to review each of the specified bills that were late in payment to identify where the delays are taking place in order to determine within the terms listed from the vendor. This process will take some time but will be completed by the end of March. The athletic department will immediately take the following actions through review of payment process from P.O. to payment and each step in between. 1. Review and check the statement date of each bill submitted for payment. 2. Review records of dates bills are transmitted for payment to campus or the BSC.	Mike Abbaugh, Troy Taylor	8/17/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-001 UNT	Governance and Regulatory Compliance	NCAA Agreed Upon Procedures	UNT	During the course of the review, we noted that detailed supporting documentation for two unallowable. These transactions were journal entries prepared by Athletics Department staff to move an expense into one account from another.	NA	We recommend that Athletics retain detailed supporting documentation for all journal entries.	It is not the practice of the Athletic Department to process journal entries without proper documentation. In the future, there are no journal entries without documentation in the Athletic Department. Department agrees to do the following: 1. Require documentation review on all transactions with sport. 2. The Athletic Department will follow the policy set by Financial Reporting for journal entry documentation. 3. The supporting documentation reviewed was only the partial items during the expense report. The balance of the documentation was available during the next month's expense statements. In addition, the particular bill was problematic due to a mistake in normal hotel billing. The hotel's accounting were not available from the hotel. Documentation of these irregularities, including e-mails from hotel management, was attached to expense report. Concerning the supporting documentation provided and required by the Athletic Department during the recosting period. The recosting of expenses is a necessary process due to a number of factors both in athletics and other departments will conduct a review of why recastings were required. The athletic department will continue to reduce the number of recastings by: 1. Performing monthly reviews of accounts and account numbers to ensure they are accurate. 2. Review changes of account numbers made once transactions leave the athletic department.	Mike Abbaugh, Troy Taylor	1/15/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-001 UNT	Governance and Regulatory Compliance	NCAA Agreed Upon Procedures	UNT	One expense was not fully supported by the supporting documentation. However, the documentation renumbered \$11,306.65, however only \$9,873.34 of that expense could be matched to travel receipts. However, the documentation submitted included an explanation that there were issues with the billing from the hotel. This expense was to note charges for travel expenses from Other Operating Expenses to Coaching Salaries, Benefits and Bonuses Paid by the University and Related Entities.	NA	We recommend that only expenses that can be supported by documentation should be handled via a purchase order.	The supporting documentation reviewed was only the partial items during the expense report. The balance of the documentation was available during the next month's expense statements. In addition, the particular bill was problematic due to a mistake in normal hotel billing. The hotel's accounting were not available from the hotel. Documentation of these irregularities, including e-mails from hotel management, was attached to expense report. Concerning the supporting documentation provided and required by the Athletic Department during the recosting period. The recosting of expenses is a necessary process due to a number of factors both in athletics and other departments will conduct a review of why recastings were required. The athletic department will continue to reduce the number of recastings by: 1. Performing monthly reviews of accounts and account numbers to ensure they are accurate. 2. Review changes of account numbers made once transactions leave the athletic department.	Mike Abbaugh, Troy Taylor	5/17/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-001 UNT	Governance and Regulatory Compliance	NCAA Agreed Upon Procedures	UNT	Twenty-eight percent of the invoices reviewed in our samples were not properly supported by the supporting documentation. Invoices totaling \$167,126.10, spanned two fiscal years resulting in expenses reported in the wrong financial reporting period.	NA	We recommend that the Athletics Department assure that all invoices are properly supported by the supporting documentation and are paid and expensed in the year in which the expense occurred.	The Controller's Office and Financial Reporting are developing a written standard for journal entry documentation and review the supporting documentation for journal entries. Supporting documentation for journals with line item amounts less than \$3,000 will continue to be deposited in accordance with UNT's Records Management and Retention policy 10.10. This will require a culture change throughout campus and numerous training sessions.	Mike Abbaugh, Troy Taylor, Clint Richard	1/15/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-001 UNT	Governance and Regulatory Compliance	NCAA Agreed Upon Procedures	UNT	It was noted during the course of the review that all journal template entries booked by the Athletic Department, are booked using the current process of documentation by Financial Reporting. The current process of booking journal entries is for an employee to submit a journal template to Financial Reporting for review that consists of an account type match and a budget check. It is expected that the department will submit journal entries for review. Lack of review of supporting documentation can result in inappropriate, inaccurate journal entries and/or errors and discrepancies going undetected.	NA	We recommend that Financial Reporting develop a written standard for journal entry documentation and review the supporting documentation for journal entries.	Supporting documentation for journals with line item amounts less than \$3,000 will continue to be deposited in accordance with UNT's Records Management and Retention policy 10.10. This will require a culture change throughout campus and numerous training sessions.	Lee Muna, Associate Vice President for Finance and Controller	6/17/2014	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2014	14-002-315	Governance and Regulatory Compliance	FY 2013 Investments Review Audit	UNT System	As of August 31, 2013, UNT reported an investment in both agency and individual securities. UNT System Regulation 08.2000 does not include these investments as authorized investments. These investments were authorized by the policy in effect at the time of purchase. In fiscal year 2013, no new investments were made. The audit was completed in August 2013 and the findings of the three agency securities outlined in FY 2013, and one outlined in September 2013.	Low	Recommended Management Action for Andrew Harris, Vice President for Finance and Administration (UNT): Assure all investments are authorized by current policy. Implementation will ensure that all investments are supported by a Board approved regulation.	Agree. The S&P investment will mature 9/25/2014. UNT will reinvest in Finance compliance with the current investment regulations.	Jean Bush, Sr. Associate VP for Finance	9/25/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-002-315	Governance and Regulatory Compliance	FY 2013 Investments Review Audit	UNT System	UNT System, UNT, and UNT Dallas do not have fully executed bank deposit agreements with Wells Fargo as of August 31, 2013. A draft agreement has been completed, but the agreement has not been finalized and executed.	High	Recommendation for Allen Clemson, Vice Chancellor for Finance and Administration (UNT), UNT Dallas, Carlos Hernandez, Vice President for Finance and Administration (UNT Dallas): Finalize the UNT System, UNT, and UNT Dallas bank deposit agreement with Wells Fargo. Implementation will help ensure that Board of Regents expectations are met, bank deposits are safeguarded, and any favorable terms are in force.	UNT Dallas Response: Agree. Management will continue to work with the Office of the General Counsel to finalize the written agreement and expects to have a newly executed agreement by April 1, 2014. UNT Dallas Response: Agree. Management will continue to work with the Office of the General Counsel to finalize the written agreement and expects to have a newly executed agreement by April 1, 2014. UNT System Response: Agree. Bring closure to all unresolved issues and finalize depository agreements.	UNT Allen Clemson, Vice Chancellor for Finance and Administration (UNT Dallas), Carlos Hernandez, Vice President for Finance and Administration (UNT Dallas), UNT System: Alan Stucky	4/1/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-002-315	Governance and Regulatory Compliance	FY 2013 Investments Review Audit	UNT System	The Investment Portfolio Summary graph reported in the UNT the Quarterly Investment Report for the period ending May 31, 2013 was not submitted to the Board of Regents as its first regularly scheduled board meeting following the end of the fiscal year as required by System Regulation 08.2000. \$1,485,566.64 versus the \$204,939.53 reported.	Low	Recommended Management Action for Andrew Harris, Vice President for Finance and Administration (UNT): Review the UNT Quarterly Investment Report to assure the accuracy of information prior to the issuance of the quarterly report to the Board of Regents and posting of the report on the UNT System website. Implementation will ensure that the information reported on a Quarterly Investment Report is complete and accurate.	Agree. A correction to the May 31, 2013 quarterly investment report will be included with the next presentation of quarterly investment reports to the Board of Regents.	Jean Bush, Sr. Associate VP for Finance	5/20/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-002-315	Governance and Regulatory Compliance	FY 2013 Investments Review Audit	UNT System	A report of investment performance over the course of the year was not submitted to the Board of Regents at its first regularly scheduled board meeting following the end of the fiscal year as required by System Regulation 08.2000.	Moderate	Recommended Management Action for Allen Clemson, Vice Chancellor for Administration and Chief of Staff (UNT System): At the end of each fiscal year, prepare and submit a report of investment performance for the year to the UNT System Board of Regents at its first regularly scheduled board meeting. Implementation will ensure compliance with UNT System Regulation, 08.2000.	UNT System Response: Agree. Submit a report of investment performance to the Board of Regents at its first regularly scheduled board meeting following the end of the fiscal year. Expected Implementation Date: immediately	Carolyn Whitlock	7/20/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-002-16C	Governance and Regulatory Compliance	FY 2013 Investments Review Audit	UNT/HSIC	UNT/HSIC did not include disclosure of an external investment advisor in response to the SAO's disclosure requirement question. UNT/HSIC answered "no" to the question "Does the institution employ outside investment advisors or managers." However, the response should be stated to yes, since the UNT/HSIC use the UNT/HSIC Foundation for management of its endowment funds.	Moderate	Recommended action for Senior Vice President of Finance and Chief Finance Officer: Update the UNT/HSIC website investment disclosure to document use of an external advisor or managers pertaining to the use of the UNT/HSIC Foundation for management of its endowment funds. Reporting requirements are met and responses to regulatory questions have been properly noted.	Management agrees with recommendations. Management will update its website investment disclosures to reflect that UNT/HSIC uses an external advisor/manager, the UNT/HSIC Foundation, for management of some endowment funds.	Geoffrey ScarPELL, Controller and Chief Budget Officer	2/15/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-002-16C	Governance and Regulatory Compliance	FY 2013 Investments Review Audit	UNT/HSIC	The first three quarterly investment reports for fiscal year 2013 were not published to the institution's website within the timeframe required by the SAO. The quarterly investment reports for November 30, 2012, February 28, 2013, and May 31, 2013 were not published to the institution's website. The quarterly reports published on the institution's website within 90 days of the end of the quarter or 7 days after the investment report is presented to the Board, whichever occurs first. The August 31, 2013 quarterly report was published within SAO guidelines.	Low	Recommended action for Director of Financial Reporting: Publish Quarterly Investment Reports to the institution's website within 90 days after the end of the quarter or 7 days after the investment report is presented to the Board, whichever occurs first. Implementation will help ensure transparency and that SAO reporting requirements are met.	Management agrees with recommendations. Management will implement procedures to ensure that Quarterly Investment Reports are published to the institution's website within 90 days of the end of the quarter or 7 days after the report is presented to the Board, whichever occurs first. Expected Implementation Date: Previously implemented.	Geoffrey ScarPELL, Controller and Chief Budget Officer	2/15/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-002-16C	Governance and Regulatory Compliance	FY 2013 Investments Review Audit	UNT/HSIC	UNT/HSIC Annual Tracking Report for investment reporting for fiscal year 2012 was not submitted within the timeframe required by the SAO. The Annual Tracking Report for investment reporting seeds investment website options to the SAO. For fiscal year 2012, the report was not submitted to the SAO until February 1, 2013. The fiscal year 2013 annual tracking report was submitted on December 11, 2013.	Low	Recommended action for Director of Financial Reporting: Seed the Annual Tracking Report for investment reporting to the SAO by December 31. Implementation will help ensure that RIG 5 reporting requirements are met.	Management agrees with recommendations. Management will implement procedures to ensure that the Annual Tracking Report for investment reporting is submitted to the SAO by December 31st of each year. Expected Implementation Date: Previously implemented.	Geoffrey ScarPELL, Controller and Chief Budget Officer	2/15/2014	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2014	14-002 ISC	Governance and Regulatory Compliance	FY 2013 Investments Review Audit	UNTISC	UNTISC does not have a current executed bank depository agreement with JPMorgan Chase. The bank depository agreement with JPMorgan Chase expired on August 31, 2012. The agreement states: "The term may be extended for 90 days, subject to the agreement of both parties, and such extension not to exceed 60 days." According to the Chief Finance Officer of UNTISC, a draft agreement has been completed, but the agreement has not been executed.	High	Recommended action for Senior Vice President of Finance and Chief Finance Officer: A. Analyze and fully execute the UNTISC Bank Depository Agreement with JPMorgan Chase. Implementation will help ensure that both expectations are met, reports are safeguarded, and any favorable terms are in force.	Management agrees with accommodation. Although the written terms have continued to operate under the agreement, with the same terms until the new contract can be finalized. Management will continue to work with the Office of General Counsel to finalize the written agreement.	John A. Harman, Senior Vice President for Finance and CFO	4/7/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-002 ISC	Governance and Regulatory Compliance	FY 2013 Investments Review Audit	UNTISC	UNTISC does not have a Management Agreement with the UNTISC Foundation to manage UNTISC Medical Professional Liability Self-Insurance Funds. UNTISC has an executed management agreement with the UNTISC Foundation, but this agreement does not include the management of Medical Professional Liability Self-Insurance Funds.	Moderate	Recommended action for Senior Vice President of Finance and Chief Finance Officer: Execute a new exhibit to the current agreement with the UNTISC Foundation to include the management of Medical Professional Liability Self-Insurance Funds. Implementation will help ensure that Medical Professional Liability Self-Insurance Funds are adequately safeguarded and protected.	Management agrees with accommodation. Prior to January 17, 2014 an exhibit did not exist. However, management executed Exhibit C to the Investment Management Agreement between the UNTISC and the UNTISC Foundation. The change in institutional finance leadership in early FY2013 may have contributed to the delay in submitting since funds were initially invested with the foundation prior to the transition in leadership.	John A. Harman, Senior Vice President for Finance and CFO	2/7/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-002 ISC	Governance and Regulatory Compliance	FY 2013 Investments Review Audit	UNTISC	Signatory authority for the former UNTISC, Vice President of Finance and CFO was not removed from the bank account until ten months after he left his position. The former Vice President of Finance and CFO was not removed from the bank account until ten months while not in a role to warrant that authority.	Low	Recommended actions for Controller and Chief Budget Officer: Develop a process to ensure that banking signatory authority is removed from individuals who are no longer in a position of authority and only individuals with proper authority are active. Implementation will help ensure funds are adequately safeguarded and controlled.	Management agrees with accommodation. Management will work with system business service center and commercial banking personnel to ensure that banking signature cards submitted for changes in signatory authority are reviewed and approved in a timely fashion and only individuals with proper authority are active.	Geoffrey Scarpelli, Comptroller and Chief Budget Officer	3/7/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	15-010 ISC	Information Technology	UNT Health NextGen EPM Post-Implementation Review	UNTISC	During the prior administration, contract amendments valued for the NextGen EPM System functionality totaling more than \$1.02 million were approved and executed internally, but without the consent of the UNT System Board of Regents. The NextGen EPM system implementation included two original contract amendments. The two amendments were approved by the Board of Regents on May 12, 2011 in the amount of \$2.45 Million (\$2 Million for professional services and \$450,000 for hardware and infrastructure). Beginning on January 20, 2012, the first of an additional 17 contract amendments totaling \$1,025,111 were approved and executed internally. The implementation of the NextGen EPM system is a separate bill center for Co-rectional Medicine and 2) additional applications licenses related to medical student and resident activity. Each individual contract amendment was approved and executed by the Board of Regents. The Board of Regents provided approval or Board Order was provided to the Board of Regents noting the additional amendments and cost.	High	Recommendation details for the current Senior Vice President for Finance and CFO: Ensure procedures are established for the new UNTISC Administration to ensure approval of the UNT System Board of Regents for all contract amendments exceeding \$1 million. Implementation will provide assurance that the Board of Regents are aware of and approve all contract amendments related to projects that in aggregate total more than \$1 million.	Management agrees. Additional contract amendments were executed over an eleven month period that in total exceeded \$1M. This was necessary to expand functionality and include the Correctional Medicine practice which was not envisioned in the original project scope. Management will develop a written procedure to be followed by all areas of the institution and in support of Regents Rule 3.9, that reinforces the importance of management fully evaluating project scope and related estimated expenditures for contracted services. If subsequent to board approval, project scope is materially amended or management will inform the Board and seek advance approval where required.	John A. Harman, Senior Vice President for Finance and CFO	6/7/2014	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2014	13-010 ISC	Information Technology	UNT Health NextGen EPM Post-Implementation Review	UNTHSC	<p>Access privileges to the UNTHSC network and NextGen EPM system were not immediately disabled when users terminate their employment from the UNT Health.</p> <p>The NextGen EPM system is used by UNT Health for patient scheduling, reporting, and claims management including billing and payment posting. Both a UNTHSC network account and EPM user account are required in order to access the system.</p> <p>A review of active NextGen EPM user accounts in August 2013 revealed the following:</p> <ul style="list-style-type: none"> • Five active NextGen EPM user accounts were for users that were no longer working at UNT Health. • Five active NextGen EPM user accounts were for former residents no longer working at UNT Health. • Six network accounts, including four employees and two residents, were active. Dates of termination for these employees ranged from December 2012 to June 2013. • Two network accounts, including one employee and one resident, were disabled within two and three months of termination. • Two network accounts, including one employee and one resident, were immediately disabled. 	Moderate	<p>Recommendations for the Director, Process Improvement: Develop and implement a termination checklist for supervisors that includes a step to notify information Technology and Records and Information Management of a user's termination so network access can be disabled immediately.</p> <p>UNT Health has also approved the implementation of the following to address the recommendations above:</p> <ol style="list-style-type: none"> 1. NextGen has been configured to disable a user that has not logged into NextGen within a 30-day time period. 2. These scenarios require intervention/review by the HIM Security Division. 	<p>What Action Management Committed To Do:</p> <ol style="list-style-type: none"> 1. A termination checklist for UNT Health Clinic Supervisors that includes notification to terminate a user's NextGen access and network access will be created and distributed. 2. NextGen has also approved the implementation of the following to address the recommendations above: 	Joe Allen, Director, Process Improvement, UNT Health Steve Woodsall, Director, Records and Information Management	5/15/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	13-010 ISC	Information Technology	UNT Health NextGen EPM Post-Implementation Review	UNTHSC	<p>Access privileges to the UNTHSC network and NextGen EPM system were not immediately disabled when users terminate their employment from the UNT Health.</p> <p>The NextGen EPM system is used by UNT Health for patient scheduling, reporting, and claims management including billing and payment posting. Both a UNTHSC network account and EPM user account are required in order to access the system.</p> <p>A review of active NextGen EPM user accounts in August 2013 revealed the following:</p> <ul style="list-style-type: none"> • Five active NextGen EPM user accounts were for users that were no longer working at UNT Health. • Five active NextGen EPM user accounts were for former residents no longer working at UNT Health. • Six network accounts, including four employees and two residents, were active. Dates of termination for these employees ranged from December 2012 to June 2013. • Two network accounts, including one employee and one resident, were disabled within two and three months of termination. • Two network accounts, including one employee and one resident, were immediately disabled. 	Moderate	<p>Recommendations for the Director, Process Improvement: Submit notifications to deactivate network access for active EPM users who are no longer employed with UNT Health.</p>	<p>What Action Management Committed To Do:</p> <ol style="list-style-type: none"> 2. Network access for users who are no longer employed has already been deactivated. <p>UNT Health has also approved the implementation of the following to address the recommendations above:</p> <ol style="list-style-type: none"> 2. NextGen also forces a user to change their password after 120 days. This will ensure that users who are no longer employed with UNT Health are not able to log in. (This follows the network security protocol as well.) These scenarios require intervention/review by the HIM Security Division. 	Joe Allen, Director, Process Improvement, UNT Health Steve Woodsall, Director, Records and Information Management	5/15/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	13-010 ISC	Information Technology	UNT Health NextGen EPM Post-Implementation Review	UNTHSC	<p>Access privileges to the UNTHSC network and NextGen EPM system were not immediately disabled when users terminate their employment from the UNT Health.</p> <p>The NextGen EPM system is used by UNT Health for patient scheduling, reporting, and claims management including billing and payment posting. Both a UNTHSC network account and EPM user account are required in order to access the system.</p> <p>A review of active NextGen EPM user accounts in August 2013 revealed the following:</p> <ul style="list-style-type: none"> • Five active NextGen EPM user accounts were for users that were no longer working at UNT Health. • Five active NextGen EPM user accounts were for former residents no longer working at UNT Health. • Six network accounts, including four employees and two residents, were active. Dates of termination for these employees ranged from December 2012 to June 2013. • Two network accounts, including one employee and one resident, were disabled within two and three months of termination. • Two network accounts, including one employee and one resident, were immediately disabled. 	Moderate	<p>Recommendations for the Director, Records and Information Management: Update the UNT Health NextGen User Request form to include a field for expiration date which will be filled in for those users who are given authorized access for a limited period of time.</p>	<p>What Action Management Committed To Do:</p> <ol style="list-style-type: none"> 3. The UNT Health NextGen User Request form will include a field for an expiration date which will be filled in for those users who are given authorized access for a limited period of time. 	Joe Allen, Director, Process Improvement, UNT Health Steve Woodsall, Director, Records and Information Management	5/15/2014	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2014	13-010 ISC	Information Technology	UNT Health NextGen EPM Post-Implementation Review	UNTHSC	<p>Access privileges to the UNTHSC network and NextGen EPM system were not immediately disabled when users terminate their employment from the UNT Health.</p> <p>The NextGen EPM system is used by UNT Health for patient care, billing, and payment processing. Both UNTHSC network accounts and EPM user accounts are required in order to access the system.</p> <p>A review of active NextGen EPM user accounts in August 2013 revealed the following:</p> <ul style="list-style-type: none"> • Five active NextGen EPM user accounts were for users that were no longer employed by UNT Health. • Five active NextGen EPM user accounts were for former residents no longer working at UNT Health. • Six network accounts, including four employees and two residents, were active. Dates of termination for these employees ranged from December 2012 to June 2013. • Two network accounts, including one employee and one resident, were disabled within two and three months of termination. • Two network accounts, including one employee and one resident, were immediately disabled. 	Moderate	<p>Recommendations for the Director, Records and Information Management:</p> <p>Provide training to supervisory personnel regarding the updated implementation of the NextGen EPM system. This implementation will provide assurance that network and NextGen EPM users are immediately disabled and active NextGen EPM users are current employees and residents.</p>	<p>What Action Management Commits To Do:</p> <p>4. Training will be provided to UNT Health supervisors regarding the changes made to and the purpose of the UNT Health NextGen User Request Form and process.</p>	<p>Joie Allen, Director, Process Improvement, UNT Health</p> <p>Steve Woodall, Director, Records and Information Management</p>	5/15/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	13-010 ISC	Information Technology	UNT Health NextGen EPM Post-Implementation Review	UNTHSC	<p>Access privileges to the UNTHSC network and NextGen EPM system were not immediately disabled when users terminate their employment from the UNT Health.</p> <p>The NextGen EPM system is used by UNT Health for patient care, billing, and payment processing. Both UNTHSC network accounts and EPM user accounts are required in order to access the system.</p> <p>A review of active NextGen EPM user accounts in August 2013 revealed the following:</p> <ul style="list-style-type: none"> • Five active NextGen EPM user accounts were for users that were no longer employed by UNT Health. • Five active NextGen EPM user accounts were for former residents no longer working at UNT Health. • Six network accounts, including four employees and two residents, were active. Dates of termination for these employees ranged from December 2012 to June 2013. • Two network accounts, including one employee and one resident, were disabled within two and three months of termination. • Two network accounts, including one employee and one resident, were immediately disabled. 	NA	<p>Recommendations for Vice President of Administration & Chief of Staff:</p> <p>If the President elect, to delegate authority to approve incidental fees, ensure appropriate documentation is in place to document such delegation. Further guidelines should also be documented outlining how often incidental fees are reviewed and reaffirmed.</p>	<p>What Action Management Commits To Do:</p> <p>5. The Chief, Compliance and Risk Management Officer and the Director of Information Security will conduct a review of the UNTHSC network and NextGen EPM user accounts to ensure that users no longer authorized to access those systems or other UNTHSC network resources. If needed, changes in the process will be implemented in addition to the changes recommended by the audit. The Director of Information Security and the Chief, Compliance and Risk Management Officer will be provided by the Dean of TCOO/Interim Chief Medical Officer for UNT Health.</p> <p>Since the audit, UNT Health has also approved the implementation of the following to address the recommendations above:</p>	<p>Anthony Tisserot, Director of IT Infrastructure and Security</p> <p>Aime E. Long, Chief Compliance Officer</p> <p>Dr. Don Pevlak, Dean – TCOO and Interim Chief Medical Officer – UNT Health</p>	7/1/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	13-011 ISC	Academic and Students	Approval of Incidental Fees Review	UNTHSC	<p>UNTHSC does not have documentation in place to formally delegate authority for approval and review of incidental fees.</p> <p>The incidental fees at UNTHSC are split into three different categories: library fees, library materials fees, and other fees. Each category of incidental fees currently has its own approval process. The following are the results of testing for each category tested:</p> <ul style="list-style-type: none"> • Library fees were approved by the President. • Library materials fees were approved by the President. • Other fees were approved by the Provost without any formal delegation of authority from the President. • Two did not have approval documentation available. • Seven library fees were approved by the President since 1993. • All seven library fees tested. • All seven were approved by the Library Director without any formal delegation of authority from the President. • Library fees were reviewed annually. • Twenty-four were approved by the President. • Twenty-four were approved by the President. • Five did not have approval documentation available. 	Moderate	<p>Recommendations for Vice President of Administration & Chief of Staff:</p> <p>If the President elect, to delegate authority to approve incidental fees, ensure appropriate documentation is in place to document such delegation. Further guidelines should also be documented outlining how often incidental fees are reviewed and reaffirmed.</p>	<p>Management Agrees. Management commits to work with the President and Provost to develop proper documentation of delegation of approval of incidental fees to the Provost from the President. In addition, management will develop guidelines to ensure that the review process occurs in compliance with state law and Regents Rules.</p> <p>Additional Comments: Once made aware of this compliance issue and prior to completion of this audit, the Provost's Office re-established procedures to ensure that incidental fees are being approved appropriately by the President until further documentation is developed.</p>	<p>Jennifer Treviño, Vice President of Administration & Chief of Staff</p>	7/1/2014	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Expected Implementation Date	Individual Responsible for Implementation	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2014	13-011 HSC	Academic and Students	Approval of Incidental Fees Review	UNTHSC	<p>UNTHSC does not have documentation in place to formally delegate authority for approval and review of incidental fees.</p> <p>UNTHSC does not have a process for reviewing incidental fees. Categories of incidental fees currently fall into three categories: course charges, library fees, and all other incidental fees. Each category of incidental fees currently has its own approval process. The following are the results of testing for each category of incidental fees tested:</p> <ul style="list-style-type: none"> • Eight were appropriately approved by the BOR. • Ten were approved by the Provost without any formal delegation of authority from the President. • Two did not have approval documentation available. • One was approved by the Provost without any formal delegation of authority from the President. • All seven were approved by the Library Director without any formal delegation of authority from the President. • One was approved by the Provost without any formal delegation of authority from the President. • Twenty-four were appropriately approved by the President. • Five did not have approval documentation available. 	Moderate	<p>Recommendations for Vice President of Administration & Chief of Staff:</p> <p>Review all incidental fees to ensure appropriate approval and supporting documentation is in place.</p> <p>Implementation will help ensure that all incidental fees are properly approved in accordance to state law and reviewed and reaffirmed periodically.</p>	<p>Management agrees. Management commits to work with the President and Provost to develop proper documentation of delegation of authority for approval and review of incidental fees. Management will also develop appropriate guidelines to ensure the required review and reaffirmation process occurs in compliance with state law and Regents Rules.</p> <p>Additional Comments: Once made aware of this compliance issue and prior to completion of this audit, the Provost's Office re-established procedures to ensure that incidental fees are being approved appropriately by the President until further documentation is developed.</p>	7/1/2014	Jennifer Treviño, Vice President of Administration & Chief of Staff	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-004 HSC	Academic and Students	Anatomical Lab Review Audit	UNTHSC	<p>Required forms and fees were not processed to the SAB. Additionally, documentation was not retained or updated to evidence the Annual Cadaver and Use Report was filed for the period ended July 31, 2013. For four of the 18 files reviewed, a Form A indicating receipt of a donor cadaver had not been filed and the \$8 SAB fee had not been remitted to the SAB. These donors were received in the lab during January 2013. Additionally, the Department did not retain a copy of the Annual Cadaver and Use Report filed with the SAB for the period ended July 31, 2013. Internal Audit could not confirm that the report was filed or was filed in a timely manner.</p>	Moderate	<p>Recommendations for the Director of Anatomical Services:</p> <p>Review donor records to ensure that all required forms and fees have been filed and submitted for all donors to the SAB.</p>	<p>Management agrees. A procedure plan is in the process of being created to address the SAB Coordination. Additionally, going forward a confirmation from the SAB will be obtained to evidence receipt of all required reports and will maintain copies of all documents filed with the SAB.</p>	9/1/2014	Robin Becker, Director of the Willed Body Program	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-004 HSC	Academic and Students	Anatomical Lab Review Audit	UNTHSC	<p>Required forms and fees were not processed to the SAB. Additionally, documentation was not retained or updated to evidence the Annual Cadaver and Use Report was filed for the period ended July 31, 2013. For four of the 18 files reviewed, a Form A indicating receipt of a donor cadaver had not been filed and the \$8 SAB fee had not been remitted to the SAB. These donors were received in the lab during January 2013. Additionally, the Department did not retain a copy of the Annual Cadaver and Use Report filed with the SAB for the period ended July 31, 2013. Internal Audit could not confirm that the report was filed or was filed in a timely manner.</p>	Moderate	<p>Recommendations for the Director of Anatomical Services:</p> <p>Develop a process to ensure forms and fees are processed with the SAB and recorded properly.</p>	<p>Management agrees. A procedure plan is in the process of being created to address the SAB Coordination. Additionally, going forward a confirmation from the SAB will be obtained to evidence receipt of all required reports and will maintain copies of all documents filed with the SAB.</p>	9/1/2014	Robin Becker, Director of the Willed Body Program	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-004 HSC	Academic and Students	Anatomical Lab Review Audit	UNTHSC	<p>Unauthorized individuals have card key access to the Laboratory and Embalming Room (RES 228) was 303 and the Gross Anatomy Lab (RES 242) was 2,380. Based on the review performed by the Laboratory and Embalming Room access users determined that there were 175 unauthorized users for the embalming room and 1,839 unauthorized users for the Gross Anatomy Lab.</p>	Moderate	<p>Recommended action for the Director of Anatomical Services and Chair of Investigative Pathology:</p> <p>Remove access to the Laboratory and Embalming Room where bodies and anatomical specimens are held for unauthorized individuals.</p>	<p>Management agrees to review the Access List immediately and at the end of each semester and send a list to Campus Police of individuals who need to have their badge access deactivated.</p>	5/30/2014	Stacy Clapp, Sr. Administrative Coordinator	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-004 HSC	Academic and Students	Anatomical Lab Review Audit	UNTHSC	<p>Unauthorized individuals have card key access to the Laboratory and Embalming Room (RES 228) was 303 and the Gross Anatomy Lab (RES 242) was 2,380. Based on the review performed by the Laboratory and Embalming Room access users determined that there were 175 unauthorized users for the embalming room and 1,839 unauthorized users for the Gross Anatomy Lab.</p>	Moderate	<p>Recommended action for the Director of Anatomical Services and Chair of Investigative Pathology:</p> <p>Develop a process to periodically review the lists of individuals with Laboratory and Embalming Room access and remove unauthorized users. This process will provide assurance that only authorized individuals have access to the laboratories.</p>	<p>Management agrees to review the Access List immediately and at the end of each semester and send a list to Campus Police of individuals who need to have their badge access deactivated.</p>	5/30/2014	Stacy Clapp, Sr. Administrative Coordinator	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2014	14-004 HSC	Academic and Student	Anatomical Lab Review Audit	UNTHSC	The Department did not perform an informal bid process for selecting a vendor to perform cremation services during the review period. The Department did not perform an informal bid process to obtain cremation services during the period under review. The Department has used the same vendor for many years.	Low	Recommendation for the Director of Anatomical Services: The Department should proceed through an informal bid process for crematorium services. Implementation will provide assurance that UNTHSC obtains the best value for its services and compliance with the UNTHSC Purchasing Guidelines.	Management agrees. At least 3 informal bids will be requested before issuing contract.	Robin Reicher, Director of the Wilded Body Program	9/1/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-004 HSC	Academic and Student	Anatomical Lab Review Audit	UNTHSC	The Department does not have written policies and procedures for its operations including maintenance or records and for the proper handling of anatomical specimens. The files and spreadsheets maintained by the Department noted many items that were incomplete and not updated in a timely manner. It was noted in 8 of 18 files in our sample that the donor information was not updated. There were also many errors in the files, for example, date of cremation, return of cremains, and cremains received by/ sent were often not updated in the files. Some of the same items were noted in the spreadsheets maintained by the Department. The Department is currently storing non-return cremains in a storage cabinet.	Low	Recommendation for the Director of Anatomical Services: In consultation with the Office of General Counsel, develop policies and written processes for all processes of the Department including maintenance of records and for the proper disposal of non-return cremains. The Department will be responsible for the development of policies and procedures for consistency and guidance with Departmental processes.	Management agrees. A Policy and Procedures document is being created.	Robin Reicher, Director of the Wilded Body Program	9/1/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-004 HSC	Academic and Student	Anatomical Lab Review Audit	UNTHSC	The Department does not maintain an inventory of anatomical specimens. The items do not maintain an inventory of anatomical specimens. Anatomical specimens are removed from donors and retained in labeled boxes, in the lab, for teaching purposes. They are not numbered with the donor's SAB number and can be retained in the lab for teaching purposes. The cremains are not returned when they are no longer usable. The cremains are not returned.	Low	Recommended action for the Director of Anatomical Services: Consider maintaining an inventory of anatomical specimens that contains an item number, date specimen retained, description and location. Implementation will provide assurance that the Department has a record of anatomical specimens.	Management agrees. A spreadsheet will be created to document specimens and their locations. A form will be created for each specimen that will include the donor's Name, Name of Administrative Coordinator, Date of check in, Name of person checking specimen back in.	Robin Reicher, Director of the Wilded Body Program and Administrative Coordinator	7/1/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-010-015	Finance	Bank Account Authorization Review Audit	UNT System	A policy has not been established requiring executive level approval of checks exceeding a set monetary threshold.	High	Recommended action for the Vice Chancellor for Finance: Create a formal UNT System regulation or policy requiring executive level review and signature of checks for all transactions exceeding an established dollar threshold.	Management concurs with the recommendation to create a formal UNT System regulation requiring executive level review and signature of checks for all transactions exceeding an established dollar threshold. Management has assigned resources to begin the research and development of this policy and will quickly develop drafts for leadership review and approval. The Vice Chancellor for Finance will implement the interim policy that will require the signature of the Vice Chancellor for Finance for all checks over \$500,000 and the Chancellor/President for checks equal to or greater than \$1,000,000.	VC for Finance	7/1/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-010-015	Finance	Bank Account Authorization Review Audit	UNT System	Employees with signature card authority also have access to alter the general ledger through the ability to process journal entries within the ES PeopleSoft system. Internal Audit noted three instances where an authorized signer on the general ledger was not present and the employee had the authority to create and approve journal entries directly in the system.	High	Recommended actions for the Vice Chancellor for Finance: Review all current employees with bank signature authority and confirm appropriate segregation of duties exist.	Management concurs with the recommendation to review all current employees with bank signature authority and confirm appropriate segregation of duties exist. Immediate review is being completed in high priority areas with action being taken as warranted. An interim policy is being immediately established that the System Treasurer will be responsible for adding and deleting all bank signatory authority. This immediate provision will include scheduled inventory and segregation of duties.	VC for Finance	7/1/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-010-015	Finance	Bank Account Authorization Review Audit	UNT System	The removal of signatory authority access for terminating employees of the nine employees that left their signatory role during fiscal year 2014 was not completed. Internal Audit noted three bank accounts. Three employees were removed within two weeks. Additional review of the two remaining employees revealed the following: <ul style="list-style-type: none"> One UNT employee remained with signatory authority over two bank accounts. One HSC employee held signatory authority for over ten months while not in a role to warrant that authority, as also identified in the recent Fiscal Year 2013 Investment Review (Audit No. 14-002 HSC). 	High	Recommended actions for the Vice Chancellor for Finance: Develop a process to ensure that banking signatory authority is removed from employees who are terminated. Review all current employees with bank signature authority and confirm appropriate segregation of duties exist. Review all current employees with bank signature authority and confirm appropriate segregation of duties exist.	Management concurs with the recommendations that bank signatory authority is kept up to date and there is a policy created that specifies who will ensure they remain current at all times.	VC for Finance	7/1/2014	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2014	14-001-SYS	Finance	Bank Account Authorization Review Audit	UNT System	<p>The removal of eligibility criteria for access to University employees' bank accounts was not completed timely during fiscal year 2013. Five were not removed immediately from University bank accounts. Three employees were removed within two weeks. The review of the two remaining employees revealed the following:</p> <ul style="list-style-type: none"> One UNT employee remained with regulatory authority over two years after retiring from the University. The IRS-Cmployee held signature authority to cover for months. The IRS-Cmployee held signature authority to cover for months. <p>Recent Fiscal Year 2013 Investment Review (Audit No. 14-002-HSC).</p>	High	<p>Recommended actions for the Vice Chancellor for Finance: Implement a System-wide policy specifying a responsible party to monitor University bank accounts for the prompt removal of individuals who no longer would have authorized banking regulatory authority.</p>	<p>Management concurs with the recommendation that bank regulatory authority be kept up to date and where a policy created that specifies who will ensure they remain current at all times.</p>	VC for Finance	7/1/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-001-SYS	Finance	Bank Account Authorization Review Audit	UNT System	<p>UNT System, UNT, and UNT Dallas were not compliant with the records retention requirements outlined in 13 Tex. Admin. Code § 6.10 by not retaining historical signature cards.</p> <p>Signature cards for UNT, UNT Dallas, and UNT System bank accounts are archived once they are superseded and not retained by UNT Financial Reporting personnel as required by the ISC.</p>	Moderate	<p>Recommended actions for the Vice Chancellor for Finance: Establish a process to ensure retention of signature cards, once superseded, through the end of the fiscal year and an additional three years in accordance with the state record retention requirements.</p>	<p>Management concurs with the recommendation to review and update policies, procedures, and processes are in place along with adequate staff training to retain records in compliance with The Texas State Records Retention Schedule.</p>	VC for Finance	7/1/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-001-SYS	Finance	Bank Account Authorization Review Audit	UNT System	<p>The Office of Financial Reporting & Operations discovered a University bank account was not properly terminated at the end of the fiscal year. In May of 2013, the UNT Financial Reporting personnel discovered the UNT's Federal F+e Loans bank account was being managed in the Student Financial Aid and Scholarships Office.</p>	Moderate	<p>Recommended actions for the Vice Chancellor for Finance: Develop a UNT System policy that documents the authority and requirements to establish, maintain, update, and close bank accounts, which includes:</p> <ul style="list-style-type: none"> An annual confirmation verifying directly with the bank, all individuals who have signature authority on the account, their name, their title, listed as their customer, or owns a UNT ID number, and A statement of where each entity's signature cards and policy statements are to be maintained. 	<p>Management concurs with the recommendation to develop a policy that documents the authority and requirements to establish, maintain, update, and close bank accounts, which includes:</p> <ul style="list-style-type: none"> An annual confirmation verifying directly with the bank, all individuals who have signature authority on the account, their name, their title, listed as their customer, or owns a UNT ID number, and A statement of where each entity's signature cards and policy statements are to be maintained. 	VC for Finance	7/1/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-001-SYS, 14-003-UNT, 14-003-HSC, 14-001-DAL	Governance and Regulatory Compliance	Chancellor's and Presidents' Reviews Audit	UNT System	<p>Certain services over a several year period provided to or paid on behalf of the former UNT President qualify as a non-cash fringe benefit and may be subject to taxation under Internal Revenue Code Sections 402(a)(2) and 409(a)(2). The former UNT President's health insurance, lawn service, maid service, NITA job service, and residential telephone service were among others.</p>	High	<p>It is recommended that the Associate Vice Chancellor for Business Services:</p> <ul style="list-style-type: none"> Coordinate with the office of General Counsel to evaluate the tax implications of the former UNT President's health insurance, lawn service, maid service, NITA job service, and residential telephone service as required. Implement a process to ensure compliance with Internal Revenue Code. 	<p>The UNT System Business Service Center agrees with the recommendation.</p> <p>The Office of General Counsel to evaluate any tax implications for the former UNT President's health insurance, lawn service, maid service, NITA job service, and residential telephone service as required. A W-2C will be issued to the individual and the IRS for each calendar year as necessary.</p>	Carol McFarland, Tax Accountant	5/30/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-001-SYS, 14-003-UNT, 14-003-HSC, 14-001-DAL	Governance and Regulatory Compliance	Chancellor's and Presidents' Reviews Audit	UNT System	<p>Policies do not specifically require itemized business meal receipts in accordance with IRS requirements. Some of the receipts submitted identify the number of meals provided or the number of individuals served on the vendor receipt. However, in accordance with institutional policies, the Chancellor's and Presidents' Offices noted the names of the individuals that were served.</p>	Moderate	<p>It is recommended that the Associate Vice Chancellor for Business Services:</p> <ul style="list-style-type: none"> In coordination with the Business Services Operations Committee, develop and implement a comprehensive system-wide travel and expense policy that includes a requirement that individuals seeking reimbursement for business meals to submit itemized receipts for the meals. Update the policy to require the number of individuals served in support of reimbursement requests. Further, this travel and expense policy should be comprehensive and ensure compliance with all IRS requirements. Implement a requirement that itemized receipts for business meals be included with all reimbursement requests should assure any tax issues related to business meals are addressed and it will assure that only allowable expenses are reimbursed. Update the policy to require the number of individuals served in support of reimbursement requests. 	<p>The UNT System Business Service Center agrees with the recommendation.</p> <p>The Associate Vice Chancellor for Business Services is coordinating with the Business Services Operations Committee to update the policy to require itemized receipts for business meals and to update the policy to require the number of individuals served in support of reimbursement requests. Further, this travel and expense policy should be comprehensive and ensure compliance with all IRS requirements.</p>	Dobbe Reynolds, Executive Director of Procurement Services	5/1/2014	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2014	14-015 HSC & UNT	Governance and Regulatory Compliance	Cancer Prevention and Research Institute of Texas (CPRI) Audit	UNTHSC, UNT	<p>Fifteen areas were reviewed for compliance with CPRI guidelines and institutional policies at UNTHSC and UNT. Exceptions were noted in the five areas below:</p> <ol style="list-style-type: none"> 1. Reimbursement and Expenditure Reporting <ul style="list-style-type: none"> • Reimbursement and expenditure reports were not submitted by UNTHSC within 90 days of the quarter covered as required. • Grant Closeout <ul style="list-style-type: none"> • The final financial status report for UNTHSC grant P1010399 was submitted 122 days after the grant end date and not within 90 days as required. • Expenditures <ul style="list-style-type: none"> • For the grants under review, non-travel expenditures totaling \$1,160,111 were reviewed (or 59% of the total population: \$1,927,277), as well as travel expenditures totaling \$44,607 (or 100% of the population). The following results were noted from the testing: <ul style="list-style-type: none"> • A. Non-travel labor charges for one temporary employee could not be substantiated via supporting documentation. Subsequently, internal Audit tested the additional \$2,044 of temporary labor charges for this temporary employee during the testing period and was not able to substantiate them via supporting documentation. • P100069 found two mobile phone service charges that included an allowable \$10 telecommunication service fee (total \$20). • Reporting 	Moderate	Remove telecommunication service charges from CPRI grants. Implementation will provide assurance that grant conditions for reporting requirements and allowable	Mazen Barakat, Director of Grants and Contract Management	8/15/2014	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2014	14-015 HSC & UNT	Governance and Regulatory Compliance	Cancer Prevention and Research Institute of Texas (CPRI) Audit	UNTHSC, UNT	<p>Fifteen areas were reviewed for compliance with CPRI guidelines and institutional policies at UNTHSC and UNT. Exceptions were noted in the five areas below:</p> <ol style="list-style-type: none"> 1. Reimbursement and Expenditure Reporting <ul style="list-style-type: none"> • Seven of 26 quarterly financial status reports reviewed were not submitted by UNTHSC within 90 days of the quarter covered as required. • Grant Closeout <ul style="list-style-type: none"> • The final financial status report for UNTHSC grant P1010399 was submitted 122 days after the grant end date and not within 90 days as required. 2. Grant Closeout <ul style="list-style-type: none"> • For the grants under review, non-travel expenditures totaling \$110,111 were reviewed (or 59% of the total population: \$187,277), as well as travel expenditures totaling \$44,607 (or 100% of the population). The following results were noted from the testing: <ul style="list-style-type: none"> • A. Non-travel labor charges for one temporary employee selected for testing totaling \$2,044 on UNTHSC grant P100195 could not be substantiated via supporting documentation. Subsequently, internal Audit tested the additional \$2,044 of temporary labor charges for this temporary employee during the testing period and was not able to substantiate them via supporting documentation. • B. A review of non-travel expenditures for UNTHSC grant P100069 found two mobile phone service charges that included an allowable \$10 telecommunication service fee (total \$20). • Reporting 	Moderate	Work with CPRI to resolve expended funds that could not be justified. Implementation will provide assurance that grant conditions for reporting requirements and allowable	Work with CPRI to resolve expended funds that could not be justified. Implementation will provide assurance that grant conditions for reporting requirements and allowable. Additional Comments: Human Resources (HR) was unable to locate timesheets for one hourly paid individual; however, through a written request to the individual, the employee provided the timesheet. The specific dates of the requested timesheet, the employees who maintained the timekeeping records were re-located to a new building on campus. The letter also indicates a filing system has been established at the new location that ensures future compliance with the requirement for timekeeping records in accordance to university policy.	Mazen Barakat, Director of Grants and Contract Management	12/21/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-016 UNT	Finance	UNT Endowment Review Audit	UNT	<p>The composition of the scholarship committee does not conform to requirements outlined in the Frank Kracken PIP Endowment MOU. The Director for Budget and Administration in the College of Business Dean's Office stated the committee "should fully meet the requirements of the MOU." The committee members are listed below in an email communication from an Administrative Coordinator in the Professional Leadership Program (PLP) College of Business, who described the composition of the Scholarship Committee as follows: <ul style="list-style-type: none"> • Chair: Professor of the Assistant Director, and the Chairman of the PIP Advisory Board. </p>	Low	Recommend for Director of the Professional Leadership Program (PLP); <ul style="list-style-type: none"> • Reorganize the Frank Kracken PIP Endowment scholarship committee to include the following members: <ul style="list-style-type: none"> • At least three (3) College of Business faculty members; • Representatives of the PIP Advisory Board; • College of Business Administration staff. <p>Implementation will provide assurance of compliance with the MOU and other gifts, strained relations between donors and the damage to the university's reputation.</p>	We agree that the scholarship committee was not properly constituted in accordance with the MOU. Because of difficulty in convening such a large group, the PIP director will first meet with the donor to discuss revising the MOU to allow a smaller group to serve on the committee, and will document the outcome appropriately. Following that meeting, the PIP director will closely adhere to the current or revised MOU, as applicable, in organizing the scholarship committee with oversight by the Dean's Office.	Marilyn K. Wiley, Senior Associate Dean, College of Business	3/7/2014	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2014	14-023 UNT	Finance	Adjusting Journal Entry Investigation	UNT	The Net Position in FY2012 and FY2013 Financial Statements for the UNT System are not reconciling. The former Accounts Vice President for Finance and Controller and the former Director of Financial Reporting and Operations were aware of the unreconciled differences and potentially uncollectible receivables prior to the issuance of the FY2012 and FY2013 UNT and UNTS financial statements. The former Director of Financial Reporting and Operations was not diligent in verifying the accuracy of the data rather than valuing the validity of these differences as to whether they were true assets of the UNTS.	High	Develop and document a UNT Allowance for Doubtful Accounts Policy. The policy should include the process to establish guidelines for monthly estimating uncollectible amounts.	UNT/UNTS cover and will review the current UNT Allowance for Doubtful Accounts Policy. The policy will be reviewed for potential for modification to ensure the policy and stated procedures result in an accurate estimate. Any required revisions to the current Policy will be completed before August 31, 2014. UNT/UNTS will periodically evaluate all receivables in light of this Policy to determine receivable collectivity and appropriate asset value.	Dan Stephens, Assistant Vice-Chancellor, Finance Controller	Original 08/31/14 Revised 08/14/2015	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-004 UNT	Governance and Regulatory Compliance	Student-Managed Investment Fund Review	UNT	The name of a former employee is listed as the contact on monthly statements	Moderate	Recommendation for the Chair of Finance, Insurance, Real Estate, and Law: Coordinate with the Vice President for Finance and Administration to correct the contact name on the monthly statement. Implementation will provide assurance that the current Vice President of Finance and Administration will be notified of the error and assist in ensuring compliance with Section 3.2.	1. Management agrees. The chair of the FIREL Department has scheduled a meeting for January 29, 2015 with the Vice President for Finance to discuss the issue.	The Chair of FIREL with assistance from the Vice President of Finance and Administration	1/29/2015	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	12-003 SYS	Finance	Construction Close-out Process Review	UNT System	Three construction project accounts associated with completed projects at UNT Dallas remain open with deficit balances totaling \$214,807. When a construction project has been determined to be substantially complete, this starts the beginning of the one year project warranty period. During this warranty period steps are usually taken by System facilities to close the project by the end of the warranty period. However, this process has been delayed due to the deficit balances.	Low	Suggested Management Action for James Maguire, Vice Chancellor for Facilities Planning and Construction & Chief Architect: Work with UNT Dallas personnel and take appropriate steps to identify funding to cover the account deficits, and then close the project accounts associated with the construction of the buildings at UNT Dallas.	UNT System Facilities agrees with the report finding. UNT System Facilities will review the status of the buildings at UNT Dallas. UNT System Facilities will meet with UNT Dallas budget personnel to identify appropriate expenditures that can be moved from deficit accounts to accounts with available funds and then assist them in the closing the associated accounts.	Don Lynch, Director of System Facilities Administration	1/31/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	12-003 SYS	Finance	Construction Close-out Process Review	UNT System	Three construction project accounts associated with completed projects at UNT Dallas remain open with deficit balances totaling \$214,807. When a construction project has been determined to be substantially complete, this starts the beginning of the one year project warranty period. During this warranty period steps are usually taken by System facilities to close the project by the end of the warranty period. However, this process has been delayed due to the deficit balances.	Low	Suggested Management Action for James Maguire, Vice Chancellor for Facilities Planning and Construction & Chief Architect: Develop procedures and controls to assure that construction accounts are closed in a timely manner and expenditures cannot be charged to the accounts until the construction is complete. The construction will ensure that UNT Dallas project accounts are closed and the deficit spending is addressed.	UNT System Facilities agrees with the report finding. UNT System Facilities will review the status of the buildings at UNT Dallas. UNT System Facilities will meet with UNT Dallas budget personnel to identify appropriate expenditures that can be moved from deficit accounts to accounts with available funds and then assist them in the closing the associated accounts.	Don Lynch, Director of System Facilities Administration	1/31/2014	Closed
Internal	UNT System Internal Audit	Fiscal Year 2014	14-005 UNT	Governance and Regulatory Compliance	JAMP Review	UNT	Based on the results of the procedures performed, activities and functions related to JAMP financial activity appear to be effective and functioning as intended. Expenditures were in compliance with the JAMP Agreement and JAMP Expenditure Guidelines. In addition, the final FY 2013 JAMP Expenditure Report prepared by the Office of the Vice President for Finance and Administration is in compliance with the Expenditures for fiscal year 2013 totaling \$16,135; resulting in \$577 in unspent funds. These funds are in the process of being returned to the JAMP Council.	NA	None	NA	NA	NA	N/A
External	State Office of Risk Management	Fiscal Year 2013	NA	Governance and Regulatory Compliance	On-Site Consultation	UNTHSC	15-04-02 Safety: Chemical Safety: Respiratory Protection Program - During the consultation, SORM noted that UNTHSC has a functional sprinker Data Sheets, chemicals being used on campus have been assigned OSHA Permissible Exposure Limits and/or ACGIH Threshold Limit Values (TLVs) and that UNTHSC has procedures in place to determine the level of the employees' exposure to these hazards.	NA	SORM recommends that UNTHSC measure the levels that the employees are exposed to. Based on the results of the testing, an OSHA-compliant respiratory protection program may need to be implemented.	We will partner with our School of Public Health to perform exposure assessment on employees.	Matthew Morous, Director, Safety Office	9/22/2015	Closed
External	State Office of Risk Management	Fiscal Year 2015	NA	Governance and Regulatory Compliance	On-Site Consultation	UNTHSC	15-04-02 Safety: Fire Safety: Sprinkler System Maintenance - During the consultation, SORM noted that UNTHSC has a functional sprinker Data Sheets, chemicals being used on campus have been assigned OSHA Permissible Exposure Limits and/or ACGIH Threshold Limit Values (TLVs) and that UNTHSC has procedures in place to determine the level of the employees' exposure to these hazards.	NA	SORM recommends that UNTHSC work with the third-party vendor and the UNTHSC maintenance personnel to ensure that the UNTHSC fire alarm and sprinkler systems conform to NFPA-25. If the vendor's procedures are out of compliance with this standard, SORM recommends that the university consider terminating the contract with this vendor as soon as possible, and contracting with a vendor who will comply with the standard.	We will meet with the vendor and discuss inspection procedures, requirements, and evaluate if the vendor can meet our needs. If they cannot we will begin the process of selecting a new vendor.	Matthew Morous, Director, Safety Office	6/30/2015	Closed

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status	
External	State Office of Risk Management	Fiscal Year 2015	NA	Governance and Regulatory Compliance	On-Site Consultation	UNTHSC	15-04-03 Safety: Hazard Communication - Eyewash, Wash Caps (EAD Building) - SORM noted during the consultation that required nozzle caps on eyewash stations in the EAD Building were missing. Without these nozzle caps, dust and other debris can present an additional hazard to an employee flushing their eyes from a chemical exposure.	NA	SORM recommends that UNTHSC replace the required nozzle caps, as per the OSHA and ANSI standards.	Submitted work order to have the nozzle caps replaced with a type that is not easily broken.	Matthew Morous, Director, Safety Office	5/11/2015	Closed	
External	State Office of Risk Management	Fiscal Year 2015	NA	Governance and Regulatory Compliance	On-Site Consultation	UNTHSC	15-04-05 Safety: Fire Safety: GFCI (Electronic Water Fountain) - SORM noted during the consultation that an electronic water fountain in the library was not protected by a GFCI. A circuit breaker, as required by the National Electrical Code.	NA	SORM recommends that UNTHSC provide the protection, either in the receptacle or on the circuit breaker.	Work order has been submitted to replace all outlets near water fountains with GFCI outlets.	Matthew Morous, Director, Safety Office	6/30/2015	Closed	
External	State Office of Risk Management	Fiscal Year 2015	NA	Governance and Regulatory Compliance	On-Site Consultation	UNTHSC	15-04-05 Safety: Fire Safety: Standpipe Cap - SORM noted during the consultation that a standpipe in front of the cooling towers on the fourth floor of the building was not protected by a standpipe cap. Debris may accumulate in the hose connection such that the system may malfunction.	NA	SORM recommends that UNTHSC replace this cap, as per the NFPA standard.	A work order has been issued to replace the cap.	Matthew Morous, Director, Safety Office	5/31/2015	Closed	
External	State Office of Risk Management	Fiscal Year 2015	NA	Governance and Regulatory Compliance	On-Site Consultation	UNTHSC	15-04-06 Safety: Fire Safety: Sprinkler Heads - SORM noted during the consultation that an electrical panelboard in the internal hallway was missing a required knockout, thereby creating a fire hazard. One sprinkler head on the fifth floor was recessed into the ceiling tile. In these conditions, these sprinkler heads will not function as designed by the manufacturer, and thereby present a fire hazard.	NA	SORM recommends that UNTHSC repair these sprinkler heads, as per the NFPA standard. SORM also recommends that UNTHSC promptly correct any deficiencies once they are noted.	We will inspect the sprayer heads more thoroughly and correct the deficiencies as per the NFPA standard. SORM will also provide greater oversight in this task. A work order has been placed to repair the items observed during the inspection.	Matthew Morous, Director, Safety Office	8/31/2015	Closed	
External	State Office of Risk Management	Fiscal Year 2015	NA	Governance and Regulatory Compliance	On-Site Consultation	UNTHSC	15-04-07 Safety: Fire Safety: Electrical Panelboards - SORM noted during the consultation that an electrical panelboard in the internal hallway was missing a required knockout, thereby creating a fire hazard.	NA	SORM recommends that UNTHSC insert the required knockout, as per the National Electrical Code.	A work order has been submitted to replace the knockout in the panel.	Matthew Morous, Director, Safety Office	5/31/2015	Closed	
External	State Office of Risk Management	Fiscal Year 2015	NA	Governance and Regulatory Compliance	On-Site Consultation	UNTHSC	15-04-08 Safety: Fire Safety: Exit Sign - SORM noted during the consultation that an exit sign on the 5th floor of the MET was incorrectly indicating a path of travel.	NA	SORM recommends that UNTHSC correct this sign to properly direct the flow of traffic in an emergency.	A work order has been submitted to change this signage.	Matthew Morous, Director, Safety Office	5/31/2015	Closed	
External	Commission on Education for Public Health Accreditation Committee	Fiscal Year 2015	UNTHSC: CEH Accreditation	Regulatory Compliance	National CEH Certification	UNTHSC	Accreditation approved through 12/31/2022.	NA	None	NA	NA	NA	N/A	
External	DeLoire & Touché in conjunction with UNT System Internal Audit	Fiscal Year 2015	NA	Finance	University of North Texas System - University of North Texas Health Science Center - Benefits Funding Proportionality Analysis	UNTHSC	Based on the methodology used, the analyst identified no excess benefit expenditures or eligible salary expenditures reimbursed paid to UNTHSC. Additionally, the AY2012 & AY2013 Accounting Policy Statement 011 forms submitted by UNTHSC were reviewed with no material issues identified.	NA	None	NA	NA	NA	N/A	
External	DeLoire & Touché in conjunction with UNT System Internal Audit	Fiscal Year 2015	NA	Finance	University of North Texas System - Benefits Funding Proportionality Analysis	UNT System	Based on the methodology used, the analyst identified no excess benefit expenditures or eligible salary expenditures reimbursed to UNTS.	NA	None	NA	NA	NA	N/A	
External	DeLoire & Touché in conjunction with UNT System Internal Audit	Fiscal Year 2015	NA	Finance	University of North Texas System - Benefits Funding Proportionality Analysis	UNT Dallas	The following exceptions were identified through the analysis of the appropriation year 2012 APF 011 form submitted to the TXCPA and should be discussed with TXCPA for any required remediation: it appears that the amount of the reimbursement for the TXCPA was not included in section 2c of the finalized form. This amount was recorded as \$0.00 instead of \$353,077.69. - The TRS expenditure component of the local funds adjustment section of the APF-011 was reported as \$156,137.00 instead of \$210,107.00. - The TRS expenditure component of the local funds adjustment section of the APF-011 was reported as \$156,137.00 instead of \$210,107.00.	NA	None	NA	NA	NA	NA	N/A

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	Deloitte & Touche in coordination with UNT System Internal Audit	Fiscal Year 2015	NA	Finance	University of North Texas System Financial Reporting Analysis	UNT System	Lack of Compliance with Generally Accepted Accounting Principles (GAAP). The process related to the preparation of the combined financial statements and related disclosures is not well defined and documented and does not require a detailed review and verification of financial information to substantiate the accuracy and completeness of the information presented. As a result, there is a risk that information presented or disclosed in accordance with GAAP. Some of the specific issues noted throughout this report point to specific errors identified, however there is a risk that other errors in the financial statements may exist and should be addressed to determine the proper presentation in accordance with GAAP.	High	Implement a process to validate financial statements are prepared and presented in accordance with GAAP. This should include implementing a process for proper detailed review by management of the financial statements. The definition of roles and responsibilities relative to the preparation and review of the financial statements; footnotes are included; and disclosures supporting the financial statements, including the cash flow statement, the footnotes to the financial statements, and the management discussion and analysis. Management will review the details of the consolidation working paper footnotes for the fiscal year 2015 financial statements to identify errors or missing disclosures. Management will perform an analysis of the Chart of Accounts to deactivate unnecessary or obsolete accounts and procedures to review the Chart of Accounts on a periodic basis.	Through the UNTS Financial Transformation project sponsored by the Board of Regents and management, this observation is being addressed in the Financial Statement Integrity Thread and Account Reconciliation and Validation Thread.	NA	N/A	
External	Deloitte & Touche in coordination with UNT System Internal Audit	Fiscal Year 2015	NA	Finance	University of North Texas System Financial Reporting Analysis	UNT System	Lack of Compliance with Generally Accepted Accounting Principles (GAAP). The process related to the preparation of the combined financial statements and related disclosures is not well defined and documented and does not require a detailed review and verification of financial information to substantiate the accuracy and completeness of the information presented. As a result, there is a risk that information presented or disclosed in accordance with GAAP. Some of the specific issues noted throughout this report point to specific errors identified, however there is a risk that other errors in the financial statements may exist and should be addressed to determine the proper presentation in accordance with GAAP.	High	Independently review the detail of the consolidation working paper footnotes for the fiscal year 2015 financial statements to identify errors or missing disclosures.	Through the UNTS Financial Transformation project sponsored by the Board of Regents and management, this observation is being addressed in the Financial Statement Integrity Thread and Account Reconciliation and Validation Thread.	NA	N/A	
External	Deloitte & Touche in coordination with UNT System Internal Audit	Fiscal Year 2015	NA	Finance	University of North Texas System Financial Reporting Analysis	UNT System	Lack of Compliance with Generally Accepted Accounting Principles (GAAP). The process related to the preparation of the combined financial statements and related disclosures is not well defined and documented and does not require a detailed review and verification of financial information to substantiate the accuracy and completeness of the information presented. As a result, there is a risk that information presented or disclosed in accordance with GAAP. Some of the specific issues noted throughout this report point to specific errors identified, however there is a risk that other errors in the financial statements may exist and should be addressed to determine the proper presentation in accordance with GAAP.	High	Perform an analysis of the Chart of Accounts to deactivate unnecessary or unused accounts, and implement procedures to review the Chart of Accounts on a periodic basis.	Through the UNTS Financial Transformation project sponsored by the Board of Regents and management, this observation is being addressed in the Financial Statement Integrity Thread and Account Reconciliation and Validation Thread.	NA	N/A	
External	Deloitte & Touche in coordination with UNT System Internal Audit	Fiscal Year 2015	NA	Finance	University of North Texas System Financial Reporting Analysis	UNT System	Undocumented or Ineffectively Established Financial Business Procedures: While some financial policies and procedures have been established, there is currently no formal process in place to review, revise, and evaluate these guidelines on a periodic basis to facilitate applicability and performance and determine that they are consistently followed. Management will perform a formal review over policies and procedures subjects UNTS to potential non-compliance with GAAP, as well as regulatory and compliance requirements.	High	Perform personnel assessments to determine what low knowledgeable employees with requisite higher education and governmental accounting and financial reporting experience are assigned to critical financial reporting positions. In addition, management will evaluate current practices in the evaluation, including minimum requirements for supervisory/managerial positions in order to promote accountability of financial processes.	Through the UNTS Financial Transformation project sponsored by the Board of Regents and management, this observation is being addressed in the Change Management and Governance Thread.	NA	N/A	
External	Deloitte & Touche in coordination with UNT System Internal Audit	Fiscal Year 2015	NA	Finance	University of North Texas System Financial Reporting Analysis	UNT System	Undocumented or Ineffectively Established Financial Business Procedures: While some financial policies and procedures have been established, there is currently no formal process in place to review, revise, and evaluate these guidelines on a periodic basis to facilitate applicability and performance and determine that they are consistently followed. Management will perform a formal review over policies and procedures subjects UNTS to potential non-compliance with GAAP, as well as regulatory and compliance requirements.	High	Include an initiative to fully inventory and review existing financial policies and procedures. Additionally, consideration should be given as part of this review, to determine whether policies and procedures fully meet management's intentions and are in accordance with GAAP. A formal review process will be implemented to ensure that all policies and procedures are reviewed on periodic basis going forward (at least annually).	Through the UNTS Financial Transformation project sponsored by the Board of Regents and management, management has identified financially significant policies that are currently being drafted within the Policies & Procedures Thread.	NA	N/A	

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Reporting Period Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	Deloitte & Touche in coordination with UNT System Internal Audit	Fiscal Year 2015	NA	Finance	University of North Texas System Financial Reporting Analysis	UNT System	<p>Imprecise segregation of duties (SOD) between job responsibilities: conflicts have not been established by management. This includes preventative or detective measures within applications, business process, and recording of transactions to the general ledger.</p>	High	<p>Management should promptly establish policies and procedures for account reconciliation practices to confirm significant accounts and ensure management of the account reconciliation process does not provide proper oversight of the accuracy of UNTS's general ledger and the financial statements.</p> <p>Account balances were not reconciled as of August 31, 2013; the balances on the reconciliations did not agree to the general ledger and, if applicable, respective subsidiary ledgers, detail, and Reconciling items were not researched and debited on a timely basis; and The reconciliations were not performed on a timely basis.</p>	<p>Through the UNTS Financial Transformation project sponsored by the Board of Regents and management, this observation is being addressed in the Business Process Remediation Thread and IT Alignment Thread.</p>	NA	NA	N/A
External	Deloitte & Touche in coordination with UNT System Internal Audit	Fiscal Year 2015	NA	Finance	University of North Texas System Financial Reporting Analysis	UNT System	<p>Absence of formal Journal Entry Review and Supporting Documentation Requirements: current journal entry practices do not prevent nor detect the recording of invalid or unsupported transactions to the general ledger. Standards for supporting documentation and supervisor review have not been formally established across UNTS. As a result:</p> <ul style="list-style-type: none"> Journal entries are not properly supported; Journal entries were made that are not properly reviewed by someone separate from the preparer; Individuals in functions outside of the normal financial accounting and reporting function had the authority and responsibility to prepare and review journal entries; and In a number of processes, transactions were accumulated to record journal entries once a month instead of each time a transaction occurred. 	High	<p>Management should promptly establish procedures governing account reconciliation practices to confirm significant accounts and ensure management of the account reconciliation process does not provide proper oversight of the accuracy of UNTS's general ledger and the financial statements. Management should issue guidance on researching and resolving reconciling differences to confirm that such differences are investigated for proper accounting treatments. Management should require a supervisor or manager with requisite knowledge of the account to review the reconciliation for completeness and accuracy, as well as standardize and define an appropriate account reconciliation.</p>	<p>Through the UNTS Financial Transformation project sponsored by the Board of Regents and management, this observation is being addressed in the Business Process Remediation Thread and Policies & Procedures Thread.</p>	NA	NA	N/A
External	Deloitte & Touche in coordination with UNT System Internal Audit	Fiscal Year 2015	NA	Finance	University of North Texas System Financial Reporting Analysis	UNT System	<p>Absence of Formal Journal Entry Review and Supporting Documentation Requirements: current journal entry practices do not prevent nor detect the recording of invalid or unsupported transactions to the general ledger. Standards for supporting documentation and supervisor review have not been formally established across UNTS. As a result:</p> <ul style="list-style-type: none"> Journal entries are not properly supported; Individuals in functions outside of the normal financial accounting and reporting function had the authority and responsibility to prepare and review journal entries; and In a number of processes, transactions were accumulated to record journal entries once a month instead of each time a transaction occurred. 	High	<p>Management should promptly establish procedures governing account reconciliation practices to confirm significant accounts and ensure management of the account reconciliation process does not provide proper oversight of the accuracy of UNTS's general ledger and the financial statements. Management should issue guidance on researching and resolving reconciling differences to confirm that such differences are investigated for proper accounting treatments. Management should require a supervisor or manager with requisite knowledge of the account to review the reconciliation for completeness and accuracy, as well as standardize and define an appropriate account reconciliation.</p>	<p>Through the UNTS Financial Transformation project sponsored by the Board of Regents and management, this observation is being addressed in the Business Process Remediation Thread and Policies & Procedures Thread.</p>	NA	NA	N/A
External	Deloitte & Touche in coordination with UNT System Internal Audit	Fiscal Year 2015	NA	Finance	University of North Texas System Financial Reporting Analysis	UNT System	<p>Absence of Formal Journal Entry Review and Supporting Documentation Requirements: current journal entry practices do not prevent nor detect the recording of invalid or unsupported transactions to the general ledger. Standards for supporting documentation and supervisor review have not been formally established across UNTS. As a result:</p> <ul style="list-style-type: none"> Journal entries are not properly supported; Individuals in functions outside of the normal financial accounting and reporting function had the authority and responsibility to prepare and review journal entries; and In a number of processes, transactions were accumulated to record journal entries once a month instead of each time a transaction occurred. 	High	<p>Management should promptly establish procedures governing account reconciliation practices to confirm significant accounts and ensure management of the account reconciliation process does not provide proper oversight of the accuracy of UNTS's general ledger and the financial statements. Management should issue guidance on researching and resolving reconciling differences to confirm that such differences are investigated for proper accounting treatments. Management should require a supervisor or manager with requisite knowledge of the account to review the reconciliation for completeness and accuracy, as well as standardize and define an appropriate account reconciliation.</p>	<p>Through the UNTS Financial Transformation project sponsored by the Board of Regents and management, this observation is being addressed in the Business Process Remediation Thread and Policies & Procedures Thread.</p>	NA	NA	N/A
External	Deloitte & Touche in coordination with UNT System Internal Audit	Fiscal Year 2015	NA	Finance	University of North Texas System Financial Reporting Analysis	UNT System	<p>Absence of Formal Journal Entry Review and Supporting Documentation Requirements: current journal entry practices do not prevent nor detect the recording of invalid or unsupported transactions to the general ledger. Standards for supporting documentation and supervisor review have not been formally established across UNTS. As a result:</p> <ul style="list-style-type: none"> Journal entries are not properly supported; Individuals in functions outside of the normal financial accounting and reporting function had the authority and responsibility to prepare and review journal entries; and In a number of processes, transactions were accumulated to record journal entries once a month instead of each time a transaction occurred. 	High	<p>Management should promptly establish procedures governing account reconciliation practices to confirm significant accounts and ensure management of the account reconciliation process does not provide proper oversight of the accuracy of UNTS's general ledger and the financial statements. Management should issue guidance on researching and resolving reconciling differences to confirm that such differences are investigated for proper accounting treatments. Management should require a supervisor or manager with requisite knowledge of the account to review the reconciliation for completeness and accuracy, as well as standardize and define an appropriate account reconciliation.</p>	<p>Through the UNTS Financial Transformation project sponsored by the Board of Regents and management, this observation is being addressed in the Business Process Remediation Thread and Policies & Procedures Thread.</p>	NA	NA	N/A

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Reviewed	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	Deloitte & Touche in coordination with UNT System Internal Audit	Fiscal Year 2015	NA	Finance	University of North Texas System Financial Reporting Analysis	UNT System	Absence of Formal Journal Entry Review and Supporting Documentation Requirements: Current journal entry practices do not prevent nor detect the recording of invalid or unsupported transactions to the general ledger. Standards for supporting documentation and supervisor review have not been formally established across UNTS. As a result: <ul style="list-style-type: none"> Journal entries were made that are not properly reviewed by someone separate from the preparer; Individuals in functions outside of the normal financial accounting and reporting function had the authority and responsibility to prepare and review journal entries; and In a number of processes, transactions were accumulated to record journal entries once a month instead of each time a transaction occurred. 	High	Configure PeopleSoft so that approvers cannot approve their own entries.	Through the UNTS Financial Transformation project sponsored by the Board of Regents and management, this observation is being addressed in the Business Process Remediation Thread and Policies & Procedures Thread.	NA	NA	N/A
External	Deloitte & Touche in coordination with UNT System Internal Audit	Fiscal Year 2015	NA	Finance	University of North Texas System Financial Reporting Analysis	UNT System	Documentation Requirements: Current journal entry practices do not prevent nor detect the recording of invalid or unsupported transactions to the general ledger. Standards for supporting documentation and supervisor review have not been formally established across UNTS. As a result: <ul style="list-style-type: none"> Journal entries are not properly supported; Individuals in functions outside of the normal financial accounting and reporting function had the authority and responsibility to prepare and review journal entries; and In a number of processes, transactions were accumulated to record journal entries once a month instead of each time a transaction occurred. 	High	Establish a formal written policy that disallows approval from approving their own entries and/or from creating entries, sending them to a bookkeeper to place into PeopleSoft, and then approving them.	Through the UNTS Financial Transformation project sponsored by the Board of Regents and management, this observation is being addressed in the Business Process Remediation Thread and Policies & Procedures Thread.	NA	NA	N/A
External	Deloitte & Touche in coordination with UNT System Internal Audit	Fiscal Year 2015	NA	Finance	University of North Texas System Financial Reporting Analysis	UNT System	Absence of Formal Journal Entry Review and Supporting Documentation Requirements: Current journal entry practices do not prevent nor detect the recording of invalid or unsupported transactions to the general ledger. Standards for supporting documentation and supervisor review have not been formally established across UNTS. As a result: <ul style="list-style-type: none"> Journal entries are not properly supported; Individuals in functions outside of the normal financial accounting and reporting function had the authority and responsibility to prepare and review journal entries; and In a number of processes, transactions were accumulated to record journal entries once a month instead of each time a transaction occurred. 	High	Establish formal written policies that require entries to be reviewed by someone other than the original creator.	Through the UNTS Financial Transformation project sponsored by the Board of Regents and management, this observation is being addressed in the Business Process Remediation Thread and Policies & Procedures Thread.	NA	NA	N/A
External	Deloitte & Touche in coordination with UNT System Internal Audit	Fiscal Year 2015	NA	Finance	University of North Texas System Financial Reporting Analysis	UNT System	Absence of Formal Journal Entry Review and Supporting Documentation Requirements: Current journal entry practices do not prevent nor detect the recording of invalid or unsupported transactions to the general ledger. Standards for supporting documentation and supervisor review have not been formally established across UNTS. As a result: <ul style="list-style-type: none"> Journal entries are not properly supported; Individuals in functions outside of the normal financial accounting and reporting function had the authority and responsibility to prepare and review journal entries; and In a number of processes, transactions were accumulated to record journal entries once a month instead of each time a transaction occurred. 	High	Establish dollar amount thresholds that each level of bookkeeper can create as well as the minimum level of review required prior to posting.	Through the UNTS Financial Transformation project sponsored by the Board of Regents and management, this observation is being addressed in the Business Process Remediation Thread and Policies & Procedures Thread.	NA	NA	N/A

UNTS Enterprise Audit Report Inventory

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External	Deloitte & Touche in coordination with UNT System Internal Audit	Fiscal Year 2015	NA	Finance	University of North Texas System Financial Reporting Analysis	UNT System	Absence of normal Journal Entry Review and Supporting Documentation Requirements: Current journal entry practices do not prevent nor detect the recording of invalid or unsupported transactions to the general ledger. Standards for supporting documentation requirements have not been formally established across UNTS. As a result: - Journal entries are not properly supported; - Journal entries were made that are not properly reviewed by someone separate from the preparer; - Journal entries are not properly reconciled to general ledger accounting and reporting function had the authority and responsibility to prepare and review journal entries; and - In a number of processes, transactions were accumulated to record journal entries once a month instead of each time a transaction occurred.	High	Restrict the preparation and review of financial entries to individuals with financial accounting and reporting responsibilities.	Through the UNTS Financial Transformation project sponsored by the Board of Regents and management, this observation is being addressed in the Business Process Remediation Thread and Policy & Procedures Thread.	NA	NA	N/A
External	Deloitte & Touche in coordination with UNT System Internal Audit	Fiscal Year 2015	NA	Finance	University of North Texas System Financial Reporting Analysis	UNT System	Undocumented Business Processes: UNTS has not maintained written documentation for certain business processes identified as key by UNTS management. Management cannot efficiently identify, nor do they have sufficient documentation, the significant flow of transactions, including ownership of the processes impacting its components and the consolidated financial statements.	High	Implement an initiative to document business processes to validate that current documentation is properly prepared and maintained.	Through the UNTS Financial Transformation project sponsored by the Board of Regents and management, this observation is being addressed in the Business Process Remediation Thread.	NA	NA	N/A
External	Deloitte & Touche in coordination with UNT System Internal Audit	Fiscal Year 2015	NA	Finance	University of North Texas System Financial Reporting Analysis	UNT System	Undocumented Business Processes: UNTS has not maintained written documentation for certain business processes identified as key by UNTS management. Management cannot efficiently identify, nor do they have sufficient documentation, the significant flow of transactions, including ownership of the processes impacting its components and the consolidated financial statements.	High	Additionally, management should consider repairing desired end-state documentation, such as narratives and graphical process flows, as part of its finance transformation objectives to address identified process gaps.	Through the UNTS Financial Transformation project sponsored by the Board of Regents and management, this observation is being addressed in the Business Process Remediation Thread.	NA	NA	N/A
External	Deloitte & Touche in coordination with UNT System Internal Audit	Fiscal Year 2015	NA	Finance	University of North Texas System Financial Reporting Analysis	UNT System	Inefficient Internal Control Design and Implementation: There are currently no governing practices to determine proper internal controls over financial reporting have been established by UNTS management to meet management's financial reporting assertions. Additionally, upon comparison of UNTS's current internal controls to best practices, management has identified areas where the design and implementation of internal controls needed to facilitate the preparation of accurate and reliable financial reporting were identified.	High	Implement an initiative for accurate business processes to verify internal controls over financial reporting are appropriately identified, implemented, and monitored by leveraging a risk-based assessment methodology. As part of this initiative, management should determine that internal controls are designed and implemented to meet the circumstances for its financial statement assertions. Management should consider adopting the Committee of Sponsoring Organizations of the Treadway Commission (COSO) Internal Control-Integrated Framework as their basis for implementing effective internal controls.	Through the UNTS Financial Transformation project sponsored by the Board of Regents and management, this observation is being addressed in the Business Process Remediation Thread and Mock Audit Thread.	NA	NA	N/A
External	Deloitte & Touche in coordination with UNT System Internal Audit	Fiscal Year 2015	NA	Finance	University of North Texas System Financial Reporting Analysis	UNT System	Inappropriate Design of Information Technology Controls: Management currently has internal control design gaps in the database security procedures supporting the Peoplesoft financials application. Security administration roles have not been fully and formally defined, and the logging and review of security events are not performed. Following applications related to financial statement audit: Blackboard; HSC Health – UNT Health Epicor; Dining Services; Facilities; Telecom – Wysoff; and Residential Management System (Housing).	Moderate	Implement an updated General Information Technology Controls (GITCs) framework for applications, databases, and operating systems that directly or indirectly impact the financial statements.	Through the UNTS Financial Transformation project sponsored by the Board of Regents and management, this observation is being addressed in the IT Alignment Thread.	NA	NA	N/A
External	Deloitte & Touche in coordination with UNT System Internal Audit	Fiscal Year 2015	NA	Finance	University of North Texas System Financial Reporting Analysis	UNT System	Improper Design of Information Technology Controls: Management currently has internal control design gaps in the database security procedures supporting the Peoplesoft financials application. Security administration roles have not been fully and formally defined, and the logging and review of security events are not performed. Additionally, management has not performed a review of the following applications related to financial statement audit: Blackboard; HSC Health – UNT Health Epicor; Dining Services; Facilities; Telecom – Wysoff; and Residential Management System (Housing).	Moderate	Management should perform a similar review of financially significant applications to assess the design and implementation of GITCs outside of Peoplesoft.	Through the UNTS Financial Transformation project sponsored by the Board of Regents and management, this observation is being addressed in the IT Alignment Thread.	NA	NA	N/A
External	Deloitte & Touche in coordination with UNT System Internal Audit	Fiscal Year 2015	NA	Finance	University of North Texas System Financial Reporting Analysis	UNT System	Lack of Continuous Accounting and Technical Training for Financial Reporting: Financial reporting office staff and management receive insufficient training on accounting methodologies, generally accepted accounting principles, financial reporting, internal controls, Peoplesoft, and the application of policy and procedures.	High	Research and implement regular financial reporting office-wide training for staff and managers on "soft" issues accounting for changes in accounting principles, internal controls, and Peoplesoft. Management should foster a culture of learning and continuous improvement.	Through the UNTS Financial Transformation project sponsored by the Board of Regents and management, this observation is being addressed in the Change Management Thread.	NA	NA	N/A

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	Grant Thornton	Fiscal Year 2013	NA	Finance	Consolidated Annual Financial Report of the University of Texas System	UNT System	In our opinion, based on our audit and the report of the other auditors, the financial statements referred to above present fairly, in all material respects, the financial position and the results of operations and the discretionary component unit of the System as of August 31, 2014, and the respective changes in financial position and, where applicable, cash flows thereof for the year then ended in accordance with accounting principles generally accepted in the United States of America.	NA	None	NA	NA	NA	N/A
External	CPRT	Fiscal Year 2013	NA	Research	Cancer Prevention and Research Institute of Texas (CPRT) Report on Compliance with State Expenditures of State Awards	UNTHSC, UNT	In our opinion, the financial statement referred to above presents fairly, in all material respects, the expenditures of state awards for the CPRT program of the University for the years ended August 31, 2013 and 2014. All accounting principles generally accepted in the United States of America. This audit was outsourced to Grant Thornton.	NA	None	NA	NA	NA	N/A
External	CPRT	Fiscal Year 2013	NA	Research	Cancer Prevention and Research Institute of Texas (CPRT) Report on Compliance with State Expenditures of State Awards	UNTHSC, UNT	As a result of our audit, we noted that the University had incomplete support for four out of the twenty-two and one out of twenty-five judgmentally selected expenditures for fiscal years 2013 and 2014, respectively. To be allowable under State awards, costs must have complete and accurate documentation. This audit was outsourced to Grant Thornton.	NA	We recommend that the University maintain supporting documentation in accordance with record retention guidelines to evidence that funds were properly expended relative to all CPRT grants. We also recommend that the university work with the agency to resolve expended funds that could not be substantiated.	Management agrees with the recommendation and will work with the Principal Investigators (PIs) and department administrators with CPRT awards to review procedures for tracking and retaining appropriate documentation for participant incentive expenditures.	NA	NA	Closed
External	CPRT	Fiscal Year 2013	NA	Research	Cancer Prevention and Research Institute of Texas (CPRT) Report on Compliance with State Expenditures of State Awards	UNTHSC, UNT	As a result of our audit, we noted that the University was reimbursed for one travel related expenditure, in which the travel did not occur. The University did not subsequently reimburse CPRT for the expenditures. This audit was outsourced to Grant Thornton.	NA	We recommend that the University implement controls that will identify all grant related travel credits so that they may be applied to the grant department. Any credits should be refunded in the financial status report.	BSC identified this problem and has changed the procedure to ensure payments are only made against actual receipts on rental vehicles. The Office of Grant and Contract Management is in the process of requesting a revised check to send to CPRT.	NA	NA	Closed
External	CPRT	Fiscal Year 2013	NA	Research	Cancer Prevention and Research Institute of Texas (CPRT) Report on Compliance with State Expenditures of State Awards	UNTHSC, UNT	As a result of our audit, we noted that one employee listed on the FY 2014 Time and Effort Report was not included in the Personnel Level of Effort in the approved budget. Additionally, we noted two employees listed on the approved budget that were not included in the approved Personnel Level of Effort budget. This audit was outsourced to Grant Thornton.	NA	We recommend that the University review their policies and procedures to inform CPRT of any changes made in personnel to the original approved grant budget. All employees who are on the Personnel Level of Effort section of the approved grant budget or communicated to and approved by CPRT.	Management agrees with the recommendation and will work with the PIs and department administrators to review procedures for managing the Personnel Level of Effort budget.	NA	NA	Closed
External	Ward & Associates P.C.	Fiscal Year 2013	NA	Governance and Regulatory Compliance	FY2014 NCAA Agreed-Upon Procedures (Athletics)	UNT	We obtained the intercollegiate athletics statements of revenue and expense for the year ended August 31, 2014 as prepared by the department and included herein. We compared the amounts on the statements to the fiscal year 2014 transactions listing or verified proper summarization of amounts from the transactions listing of the entire athletic department and found differences. These differences were primarily category misclassifications, which were subsequently corrected. Additionally, we performed a review of the transactions listing for items improperly excluded from the statements. No such amount were found.	NA	Re-class all amounts listed on line 26 (Equipment, uniforms and supplies) under Non-Program Specific report appropriately. Per department ID 6800 and 60316 in the Non-program Specific report to Line 35 (Other Operating Expenses).	None	NA	NA	Closed
External	Ward & Associates P.C.	Fiscal Year 2013	NA	Governance and Regulatory Compliance	FY2014 NCAA Agreed-Upon Procedures (Athletics)	UNT	We obtained the intercollegiate athletics statements of revenue and expense for the year ended August 31, 2014 as prepared by the department and included herein. We compared the amounts on the statements to the fiscal year 2014 transactions listing or verified proper summarization of amounts from the transactions listing of the entire athletic department and found differences. These differences were primarily category misclassifications, which were subsequently corrected. Additionally, we performed a review of the transactions listing for items improperly excluded from the statements. No such amount were found.	NA	Re-class all amounts listed on Line 25 (Team Travel) under department ID 6800 and 60316 in the Non-program Specific report to Line 35 (Other Operating Expenses).	None	NA	NA	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	Wier & Associates P.C.	Fiscal Year 2013	NA	Governance and Regulatory Compliance	17/2014 NCAA Agreed-Upon Procedures (Athletic)	UNT	We obtained the intercollegiate athletic statements of revenue and expenses for the year ended August 31, 2014 as prepared by management and included herein. We compared the amounts on the statements to the 2014 COA budget for the athletic department and the entire athletic department and found differences. These differences were primarily category misclassifications, which were subsequently corrected. Additionally, we performed a review of the transactions for the year and copy excluded from the statements. No such amounts were found.	NA	Provide explanations for the highlighted variances on each attached report. If any items need to be re-classified after examination of the variances please do so accordingly and re-submit the appropriate report(s) to our firm.	None	NA	NA	Closed
External	State Auditor's Office	Fiscal Year 2013	15-021	Finance	State of Texas Complies with Federal Requirements for the Student Financial Cluster for the Fiscal Year Ended August 31, 2014	UNT	Cost of Attendance - Eligibility - Cost of Attendance for 28 (47 University) incorrectly or inconsistently calculated COA. Specifically, the University included loan fees for Direct PLUS Loans in the COA budget for all dependent students, regardless of whether those loans were repaid. The University should only include a loan process to remove the loan fees from the COA budget if a student does not accept a Direct PLUS loan. Because the University included loan fees for those students, it over awarded financial assistance to 3 of those 28 students. Not removing Direct PLUS loan fees from COA when necessary could result in higher COA budgets and increases the risk of over awarding financial assistance.	NA	The University should: - Include loan fees in COA only for students who receive loans.	Cost of Attendance changes to include loan fees in the COA budget Implementation Date: August 2014 Responsible Persons: Debra Guzman-Torres and Lacey Thompson	Debra Guzman-Torres and Lacey Thompson	8/7/2014	Closed
External	State Auditor's Office	Fiscal Year 2013	15-021	Finance	State of Texas Complies with Federal Requirements for the Student Financial Cluster for the Fiscal Year Ended August 31, 2014	UNT	Satisfactorily Academic Progress... The University's SAP policy does not meet all federal requirements. As a result, for 6 (11 percent) of 54 students, the University incorrectly disbursed financial assistance to five of the six students tested who did not meet SAP requirements. Having a policy that allows students to progress through their maximum time frame increases the risk of federal assistance being disbursed to ineligible students. In addition, the University's SAP policy is less strict than its academic progress policy for graduate students. For 13 percent of 60 students tested, the University of Texas (UNT) did not correctly verify required information on the student's FAFSA and did not correct student SFR information when benefits as untaxed income for that student, which resulted in an error on the University's verification process. When auditors brought that issue to the University's attention, it removed the Social Security benefits as untaxed income and submitted corrections to the student's SFR. Not properly verifying FAFSA information can result in errors over awarding or under awarding student financial assistance.	NA	The University should: - Ensure that its SAP policy meets federal requirements by including the appropriate SAP requirement on a cumulative basis, rather than an annual basis, ensuring that the policy requires students to graduate within the maximum time frame and making the policy at least as strict as UNT's academic policy.	Satisfactorily Academic Progress Management made changes to its sap policy to meet federal requirements. The University will continue to monitor the cumulative basis for graduate students with the maximum time frame. For graduate students, management made changes to the policy to make it at least as strict as UNT's academic policy.	Debra Guzman-Torres and Lacey Thompson	8/7/2014	Closed
External	State Auditor's Office	Fiscal Year 2013	15-021	Finance	State of Texas Complies with Federal Requirements for the Student Financial Cluster for the Fiscal Year Ended August 31, 2014	UNT	For 13 percent of 60 students tested, the University of Texas (UNT) did not correctly verify required information on the student's FAFSA and did not correct student SFR information when benefits as untaxed income for that student, which resulted in an error on the University's verification process. When auditors brought that issue to the University's attention, it removed the Social Security benefits as untaxed income and submitted corrections to the student's SFR. Not properly verifying FAFSA information can result in errors over awarding or under awarding student financial assistance.	NA	The University should correctly verify all required FAFSA information for students selected for verification and request updated SFRs, when required.	Management made changes to ensure that Social Security benefits for students selected for verification corrected the SFR information for the one student.	Debra Guzman-Torres and Lacey Thompson	12/7/2014	Closed
External	State Auditor's Office	Fiscal Year 2013	15-022	Finance	State of Texas Complies with Federal Requirements for the Research and Development Cluster for the Fiscal Year Ended August 31, 2014	UNT	None	NA	None	NA	NA	NA	N/A
External	State Auditor's Office	Fiscal Year 2013	15-313	Finance	Federal Portion of the State of Texas Report for the Year Ended August 31, 2014	UNT	None	NA	None	NA	NA	NA	N/A
External	State Office of Risk Management	Fiscal Year 2015	NA	Governance and Regulatory Compliance	COOP Plan Evaluation	UNTHSC	COOP Plan of Continuity of Operations (COOP) Plan - Emergency Operations Plan should be updated throughout the University's COOP Plan. A COOP Plan should be a stand-alone plan.	NA	UNTHSC should have a Standby Emergency Operations Plan to respond to and recover from an emergency. The emergency group of continuity is the continuation of essential functions during all-hazard emergencies or other situations that may disrupt normal operations.	Greater distinction will be made between the COOP and the EOP.	David L. Lunsford, Associate Director of Emergency Management and Business Continuity	8/31/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Review Period Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observation	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Office of Risk Management	Fiscal Year 2015	NA	Governance and Regulatory Compliance	COOP-15-02 Emergency Evacuation Group (EAG) - UNTSC should identify alternatives for the EAG.	UNTSC	COOP-15-02 Emergency Evacuation Group (EAG) - UNTSC should identify alternatives for the EAG.	NA	UNTSC should identify alternatives for the EAG for key positions in the event of an emergency. The EAG should be informed of and accept their roles and responsibilities, in writing.	This terminology has been changed and Orders of Succession has been implemented.	Frank Lutz, Associate Director of Risk Management and Business Continuity	8/31/2016	Closed
External	State Office of Risk Management	Fiscal Year 2015	NA	Governance and Regulatory Compliance	COOP-15-03 Consideration should be given to the University of North Texas System Enterprise COOP to include all campuses.	UNTSC	COOP-15-03 Consideration should be given to the University of North Texas System Enterprise COOP to include all campuses.	NA	In the future, the University of North Texas should consider creating an enterprise COOP Program to include all campuses. Uniform standards would assist in limiting redundancy and creating an effective model for the system and its campuses.	This has been discussed between the campus emergency managers. The system does not have a position responsible for coordination of a COOP program.	Matthew Marcus, Director, Safety Office	2/1/2016	Closed
External	Texas Comptroller of Public Accounts	Fiscal Year 2015	773-15-01	Finance	Post-Payment Audit	UNT Dallas	Payroll transactions and payroll deductions: Non-compliance with Human Resource Information System (HRIS) reporting requirements.	NA	The University must ensure that all payroll and personnel transactions are reported to HRIS in a timely manner: <ul style="list-style-type: none"> Payroll transactions are timely when they are reported and posted by the seventh day of the month following their payment date. 	The University agrees with this finding and requirements. HRIS reporting is managed by the payroll area in the UNT System Controller's Office. The payroll system was upgraded to a new version of PeopleSoft during the time period of the review. Concurrently, the payroll system was corrected shortly after the system conversion was complete. New and existing employees are receiving training to ensure timely reporting is maintained.	Mary Davis, Director of Payroll	NA	Closed
External	Texas Comptroller of Public Accounts	Fiscal Year 2015	773-15-01	Finance	Post-Payment Audit	UNT Dallas	Payroll transactions and payroll deductions: Non-compliance with Human Resource Information System (HRIS) reporting requirements.	NA	The University must ensure that all payroll and personnel transactions are reported to HRIS in a timely manner: <ul style="list-style-type: none"> Payroll transactions are timely when they are reported and posted by the seventh day of the month following their payment date. 	HRIS reporting is managed by the payroll area in the UNT System Controller's Office. The payroll system was upgraded to a new version of PeopleSoft during the time period of the review. Concurrently, the payroll system was corrected shortly after the system conversion was complete. New and existing employees are receiving training to ensure timely reporting is maintained.	Mary Davis, Director of Payroll	NA	Closed
External	Texas Comptroller of Public Accounts	Fiscal Year 2015	773-15-01	Finance	Post-Payment Audit	UNT Dallas	Security: One employee who retained the security to expend funds after authority expired.	NA	The Center must ensure that all payroll and personnel transactions are reported to HRIS in a timely manner: <ul style="list-style-type: none"> Personnel transactions are timely when they are successfully reported to HRIS on or before the seventh day of the month following their effective date. 	Despite UNT Dallas promptly relaying internal notices of terminated employees via an electronic payroll request, there was a breakdown of automatic electronic communication between the campus and UNT System which has since been remediated. Furthermore, the USAS System which has been centralized by Sept. 1, 2015. The formalization of centralization will allow for improved communication and monitoring of employee terminations or relocations. Processes within the System will be established to ensure confirmation is received from the campus and the different offices to ensure that all terminations and relocations are matched with employee terminations or USAS relocations.	Randal J. Saxton, Senior Director of System Business Support Services	9/1/2015	Closed
External	Texas Comptroller of Public Accounts	Fiscal Year 2015	783-15-01	Finance	Post-Payment Audit	UNTSC	Payroll transactions and payroll deductions: Non-compliance with Human Resource Information System (HRIS) reporting requirements.	NA	The Center must ensure that all payroll and personnel transactions are reported to HRIS in a timely manner: <ul style="list-style-type: none"> Personnel transactions are timely when they are successfully reported to HRIS on or before the seventh day of the month following their effective date. 	The UNT Health Science Center agrees with this finding and requirements. HRIS reporting is currently managed by the Payroll Department in the UNT System Controller's Office. The payroll system was upgraded to a new version of PeopleSoft during the time period of the review. Concurrently, the department experienced significant turnover in staffing and is now stabilized. However, it is important to note that the delayed reporting issue was corrected shortly after the system conversion was complete and all employees (new and existing) continue to receive ongoing training to ensure timely reporting is maintained.	Mary Davis, Director of Payroll	NA	Closed
External	Texas Comptroller of Public Accounts	Fiscal Year 2015	783-15-01	Finance	Post-Payment Audit	UNTSC	Payroll transactions and payroll deductions: Non-compliance with Human Resource Information System (HRIS) reporting requirements.	NA	The Center must ensure that all payroll and personnel transactions are reported to HRIS in a timely manner: <ul style="list-style-type: none"> Payroll transactions are timely when they are reported and posted by the seventh day of the month following their payment date. 	The UNT Health Science Center agrees with this finding and requirements. HRIS reporting is currently managed by the Payroll Department in the UNT System Controller's Office. The payroll system was upgraded to a new version of PeopleSoft during the time period of the review. Concurrently, the department experienced significant turnover in staffing and is now stabilized. However, it is important to note that the delayed reporting issue was corrected shortly after the system conversion was complete and all employees (new and existing) continue to receive ongoing training to ensure timely reporting is maintained.	Mary Davis, Director of Payroll	NA	Closed
External	Texas Higher Education Coordinating Board	Fiscal Year 2015	NA	Governance and Regulatory Compliance	Compliance Audit of Formula Funding (Approved by Legislature)	UNT	No findings/deficiencies.	NA	None	NA	NA	NA	N/A

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Reported	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	CHRT	Fiscal Year 2015	G53184	Research	CHRT Grant Financial Statement Audit (State) (Office of Grant and Contract Administration)	UNT	No findings/differences. This audit was outsourced to Grant Thornton.	NA	None	NA	NA	NA	N/A
External	OneStar Foundation	Fiscal Year 2015	GR190, GR426, GR4271	Research	OneStar Financial and compliance audit (Federal) (Office of Grant and Contract Administration)	UNT	No findings/differences.	NA	None	NA	NA	NA	N/A
External	Texas Higher Education Coordinating Board	Fiscal Year 2015	GR167 P-16	Research	College Readiness Grant Financial audit (State) (Office of Grant and Contract Administration)	UNT	No findings/differences.	NA	None	NA	NA	NA	N/A
External	Texas Higher Education Coordinating Board	Fiscal Year 2015	PR4006	Research	Challenge Grant Financial Statement Audit (Office of Grant and Contract Administration)	UNT	No findings/differences.	NA	None	NA	NA	NA	N/A
External	Texas Higher Education Coordinating Board	Fiscal Year 2015	GR2659	Research	Smelia National Lab Financial Statement and compliance audit (Office of Grant and Contract Administration)	UNT	No findings/differences.	NA	None	NA	NA	NA	N/A
External	Merle & Associates P.C.	Fiscal Year 2015	NA	Governance and Regulatory Compliance	FY2014 NCAA Agreed-Upon Procedures (Athletics)	UNT	We obtained the intercollegiate athletics statements of revenue and expenses for the year ended August 31, 2015 as prepared by management and included herein. We compared the amounts on the statements to the fiscal year 2015 transactions listing or verified the entire athletic department and found differences. These differences were primarily category misclassifications, which were subsequently corrected. Additionally, we performed a review of the transactions listing for items improperly excluded from the statements. No such amounts were found.	NA	Provide Direct Institutional Support budget to actual figures for the year ended August 31, 2015 and explain any variances above 10% and \$50,000.	None	NA	NA	Closed
External	Merle & Associates P.C.	Fiscal Year 2015	NA	Governance and Regulatory Compliance	FY2014 NCAA Agreed-Upon Procedures (Athletics)	UNT	We obtained the intercollegiate athletics statements of revenue and expenses for the year ended August 31, 2015 as prepared by management and included herein. We compared the amounts on the statements to the fiscal year 2015 transactions listing or verified the proper summation of amounts from the transactions listing of the entire athletic department and found differences. These differences were primarily category misclassifications, which were subsequently corrected. Additionally, we performed a review of the transactions listing for items improperly excluded from the statements. No such amounts were found.	NA	Confirm the placement of Medical Expenses and Insurance is in line with NCAA and University standards and best practices.	None	NA	NA	Closed
External	Merle & Associates P.C.	Fiscal Year 2015	NA	Governance and Regulatory Compliance	FY2014 NCAA Agreed-Upon Procedures (Athletics)	UNT	We obtained the intercollegiate athletics statements of revenue and expenses for the year ended August 31, 2015 as prepared by management and included herein. We compared the amounts on the statements to the fiscal year 2015 transactions listing or verified the entire athletic department and found differences. These differences were primarily category misclassifications, which were subsequently corrected. Additionally, we performed a review of the transactions listing for items improperly excluded from the statements. No such amounts were found.	NA	Provide evaluations for any variances that exceed 10% and \$50,000. If any items need to be reclassified after examination of the variances, please do so accordingly and re-submit the appropriate report.	None	NA	NA	Closed
External	Merle & Associates P.C.	Fiscal Year 2015	NA	Governance and Regulatory Compliance	FY2014 NCAA Agreed-Upon Procedures (Athletics)	UNT	We obtained the intercollegiate athletics statements of revenue and expenses for the year ended August 31, 2015 as prepared by management and included herein. We compared the amounts on the statements to the fiscal year 2015 transactions listing or verified the entire athletic department and found differences. These differences were primarily category misclassifications, which were subsequently corrected. Additionally, we performed a review of the transactions listing for items improperly excluded from the statements. No such amounts were found.	NA	Confirm the placement of all NCAA distributions is in line with NCAA and University standards and best practices.	None	NA	NA	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	Maris & Associates P.C.	Fiscal Year 2015	NA	Governance and Regulatory Compliance	F2021AUGA Review Upon Procedures (Athletics)	UNT	We obtained the interrelated athletic statements of revenue and expenses for the year ended August 31, 2015 as prepared by management and included herein. We compared the amounts on the statements to the fiscal year 2015 transactions listing or verified proper allocations of amounts from the transactions listing of the proper category. We identified several misallocations which were primarily category misallocations, which were subsequently corrected. Additionally, we performed a review of the transactions listing for items improperly excluded from the statements. No such amounts were found.	NA	Confirm on Receipt Expense exit for F2016 that need to be moved to F2015.	None	NA	NA	Closed
External	Texas Health and Human Services Commission (HHS)	Fiscal Year 2015	UNTHSC.13890111.2.6	Research	Review of Project Milestone Progress; 1115 Waiver	UNTHSC	Midpoint Assessment: Identity Risk To Project Achievement - Project #13890111.2.6 This audit was outsourced to Myers and Stauffer, LLC.	NA	None	NA	NA	NA	N/A
External	Texas Health and Human Services Commission (HHS)	Fiscal Year 2015	UNTHSC.13890111.1.7	Research	Review of Project Milestone Progress; 1115 Waiver	UNTHSC	Midpoint Assessment: Identity Risk To Project Achievement - Project #13890111.1.7	NA	None	NA	NA	NA	N/A
External	Texas Health and Human Services Commission (HHS)	Fiscal Year 2015	UNTHSC.13890111.1.8	Research	Review of Project Milestone Progress; 1115 Waiver	UNTHSC	This audit was outsourced to Myers and Stauffer, LLC #13890111.8	NA	Possible Plan Modification: Provider (HHS) should consider revising the language for the goal 1.8.3 to make clear they are reporting on individuals. NOTE: HHS completed revision.	NA	NA	NA	N/A
External	Texas Health and Human Services Commission (HHS)	Fiscal Year 2015	UNTHSC.13890111.1.4	Research	Review of Project Milestone Progress; 1115 Waiver	UNTHSC	Midpoint Assessment: Identity Risk To Project Achievement - Project #13890111.4 This audit was outsourced to Myers and Stauffer, LLC NA. This was outsourced to Boice-Allemann.com.	NA	None	NA	NA	NA	N/A
External	National Science Foundation	Fiscal Year 2015	NA	Research	National Science Foundation (NSF) Desk Review of all NSF Awards (DSCA)	UNT	Payroll transactions and payroll deductions: incorrect payment of accrued vacation time.	NA	We recommend the System enhance its internal controls to prevent incorrect payments of accrued vacation time. The System should consider recovering the amount of overpayments in accordance with Texas Government Code, Chapter 205, Section 205.001. In addition, the System must compensate the employee for the underpaid amount.	The UNT System Administrator agrees with the finding and was in a stage of transition to a centralized shared service organization established to provide payroll services to all UNT System institutions. The UNT System is also currently undergoing a major financial transformation to review all financial-related processing activities throughout all institutions. All payroll processing activities are being reviewed to establish best practices and controls that will help minimize errors in the future. Vacation payouts were calculated using an annualized approach. The underpayment error identified an unknown weakness in the approach and therefore identified a need to change the methodology, which has been implemented. The System will be reviewing the vacation payout calculations were completed with no review. A new process has been implemented that provides for a secondary review of payroll calculations. The two overpayments that were the result of human error were analyzed to determine the cost/benefit for attempting to collect overpayments from past employees.	Abdul Mohammad, Senior Director of Operations	NA	Closed
External	Texas Comptroller of Public Accounts	Fiscal Year 2015	769-15-01	Finance	Post-Payment Audit	UNT System		NA					

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	Texas Comptroller of Public Accounts	Fiscal Year 2015	769-15-01	Finance	Post-Payment Audit	UNT System	Payroll transactions and payroll deductions: incorrect longevity payment amount.	NA	The System should verify months of service data for its employees and enhance its internal controls to prevent incorrect longevity payment amounts. In addition, the System should verify all personnel files and ensure that prior state service is properly verified and documented for its employees.	The UNT System Administration agrees with this finding and requirements. During the time period audited, the Human Resources Department was not able to provide HR related services to all UNT System institutions. The UNT System is currently undergoing a major financial system upgrade. Longevity processing is being reviewed throughout all institutions. Longevity processing is being reviewed to establish best practices and controls that will help minimize errors in the future. The Human Resources Department will realize implementation of an automated process that calculates state service date and creates a Prior State Service web page on our Human Resources website to provide each employee with general information about Prior State Service and prior state service periods we have on record. The overpayment amounts identified during the audit were collected from the employees. Update 07/17/2017: Human Resources has over 1,500 employees whose months of service data still needs to be reworked. Dorothy Cumming has updated the implementation date to January 31, 2018. (per Joey Axson)	Lurt Levin, Associate Vice Chancellor Human Resources	Original 09/01/2016 Revised 01/31/2018	Closed
External	Texas Comptroller of Public Accounts	Fiscal Year 2015	769-15-01	Finance	Post-Payment Audit	UNT System	Payroll transactions and payroll Deductions: Non-compliance with Human Resource Information System (HRIS) reporting requirements.	NA	The System must ensure that all payroll and personnel transactions are reported to HRIS in a timely manner: • Personnel transactions are timely when they are successfully reported to HRIS on or before the seventh day of the month following the effective date.	Update 07/17/2017: The UNT System Administration agrees with this finding and requirements. HRIS reporting is currently managed by the Payroll Department in the UNT System Controller's Office. The Payroll System was upgraded to a new version of Peoplesoft during the time period of the review. Concurrently, the department experienced significant turnover in staffing and is now stabilized. However, it is important to note that the delayed reporting issue was corrected shortly after the system conversion was complete and all payroll transactions were reported to HRIS in a timely manner to ensure timely reporting is reinstated.	Abdul Behabehmad, Senior Director of Operations	NA	Closed
External	Texas Comptroller of Public Accounts	Fiscal Year 2015	769-15-01	Finance	Post-Payment Audit	UNT System	Payroll transactions and payroll Deductions: Non-compliance with Human Resource Information System (HRIS) reporting requirements.	NA	The System must ensure that the persons responsible for sending deauthorized employee's revocation on or before the date the revocation becomes effective. The system must also follow through with the Comptroller's office to ensure receipt of the request and removal of the employee's salary.	The UNT System Administration agrees with this finding and requirements. HRIS reporting is currently managed by the Payroll Department in the UNT System Controller's Office. The Payroll System was upgraded to a new version of Peoplesoft during the time period of the review. Concurrently, the department experienced significant turnover in staffing and is now stabilized. However, it is important to note that the delayed reporting issue was corrected shortly after the system conversion was complete and all payroll transactions were reported to HRIS in a timely manner to ensure timely reporting is reinstated.	Abdul Behabehmad, Senior Director of Operations	NA	Closed
External	Texas Comptroller of Public Accounts	Fiscal Year 2015	769-15-01	Finance	Post-Payment Audit	UNT System	Security: Four employees who retained the ability to expend funds after termination.	NA	The System must ensure that the persons responsible for sending deauthorized employee's revocation on or before the date the revocation becomes effective. The system must also follow through with the Comptroller's office to ensure receipt of the request and removal of the employee's salary.	The UNT System Administration agrees with this finding and requirements. The process and oversight of managing approvals for expenditures was placed under scrutiny and a new centralized tracking process has been identified to improve controls in this area. This new process will be implemented next fiscal year (beginning September 1, 2015) to ensure that all expenditures are properly approved and authorized in a timely manner. Future system enhancements are planned to include automated notification of employees terminating who have senior level authority for expenditures to critical systems, including USAS, HRIS, banking and internal systems. The UNT System Administration will also work closely with the State Comptroller's Office to confirm receipt of requests related to terminating users in the future.	John Saxon, Senior Director of UNT System Business Support Services	12/21/2015	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	Texas Comptroller of Public Accounts	Fiscal Year 2015	789-15-01	Finance	Post-Payment Audit	UNT System	Security: • One employee who retained the security to expedite funds after authority expired.	NA	The System must ensure that the person responsible for expediting the Comptroller these certificates is aware of the designated employee's revocation on or before the date the revocation becomes effective. The System must also follow through with the Comptroller to ensure the receipt of the notification and that the removal of the employee's security occurs.	The UNT System Administration agrees with the finding and requirements. The process and receipt of incoming BGAS access was placed under scrutiny and a new centralized tracking process has been identified to improve controls in this area. This new centralization process will be implemented next fiscal year (beginning Sept. 1, 2015) and will be implemented in a timely manner. Future system enhancements are planned to include automated notification of employees terminating who have senior level authority for expenditure approvals and access to critical systems, including USGS, HHS, banking and internal systems. The UNT System Administration will also work closely with the State Comptroller's Office to confirm receipt of requests related to terminating access in the future.	Wayne Saxon, Senior Director/UNT System Business Support Services	12/31/2015	Closed
External	Texas Comptroller of Public Accounts	Fiscal Year 2015	789-15-01	Finance	Post-Payment Audit	UNT System	Internal Control Structure: Two employees can adjust payment instructions in the Texas Identification Number System (TINS) and approve paper vouchers.	NA	The System should periodically review the controls over expenditure processing and aggregate each task to the extent possible so that no individual is able to access payments without oversight.	The UNT System Administration agrees with the finding and requirements. The UNT System is also currently undergoing a major process re-engineering project. All USGS, TINS and signature card processing activities are being reviewed to establish best practices and controls that will help minimize errors in the future.	Jewey Saxon, Senior Director/UNT System Business Support Services	12/31/2015	Closed
External	State Office of Risk Management	Fiscal Year 2015	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	15-07-03 Safety: Electrical Safety: Adequate Power (Chemical Bulker) SORM noted during the consultation that UNT-Denton was utilizing an extension cord as a permanent conduit of power in the chemical bulker outside of the Chemistry Building.	NA	SORM recommends that UNT-Denton install the correct number and array of electrical power receptacles and circuits to meet the electrical needs of the chemical bulker, as per the OSHA standard referenced below. Reference: OSHA 309.105 (b)(1)(ii)(B)	Charles Fox, Director of Environmental Management	9/30/2015	Closed	
External	State Office of Risk Management	Fiscal Year 2015	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT Dallas	15-07-03 Safety: Electrical Safety: Knowledge in Electrical Panelboard SORM noted during the consultation that knockouts were missing from a panelboard on the fourth floor of Building 1 in the mechanical room.	NA	SORM recommends that UNT-Dallas report the proper knockouts per the electrical code. Reference: NFPA-70(2014), "National Electrical Code," Article 110.12(A)	Wayne Morris, Assistant Director for Facilities	8/31/2015	Closed	
External	State Office of Risk Management	Fiscal Year 2015	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT System	15-07-03 Safety: Emergency Management: Shelter-in-Place Drill SORM noted during the consultation that UNT System has not yet conducted a shelter-in-place drill for employees located in the building at 1901 Main Street in Dallas.	NA	SORM recommends that UNT System conduct a shelter-in-place drill for these employees in order to enhance their knowledge of appropriate protocols in the event of an emergency. Reference: BMTSA Guidelines, Volume II, Section Two, Chapter 6, Subchapter 6.5	Justin Stewart, Assistant Director Programs & Investigations Coordinator	9/30/2015	Closed	
External	State Office of Risk Management	Fiscal Year 2015	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	15-07-03 Safety: Electrical Safety: GFCI for Vending Machines (Terrill Hall) SORM noted during the consultation that the cord and plug connected vending machines in Terrill Hall do not have a ground-fault circuit interrupter as an integral part of the attachment plug.	NA	SORM recommends that UNT-Denton protect these machines by complying with the relevant section of the National Electrical Code, as referenced below. Reference: NFPA-70 (2014), "National Electrical Code," Article 422.51(A) and (B)	Randy Eric, Senior Director, Facilities Maintenance	12/31/2015	Closed	
External	State Office of Risk Management	Fiscal Year 2015	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT Dallas	15-07-03 Safety: Fire Safety: Fire Door Rating SORM noted during the consultation that the walls in Room 361 of the UNT Dallas campus do not have the correct fire door rating. The door of the room was missing the correct marking to determine its fire rating.	NA	SORM recommends that UNT-Dallas work with the door manufacturer to determine its fire rating, mark it properly, or replace it with a door that meets the correct fire door rating. References: NFPA-101 (2015), "Life Safety Code," Chapter 7.2.1.15.2; NFPA-80 (2016), "Fire Doors and Opening Protective," Chapters 4.1.4, 4.1.4.2.1, and 4.2.1.1	Wayne Morris, Assistant Director for Facilities	9/30/2015	Closed	
External	State Office of Risk Management	Fiscal Year 2015	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	15-07-03 Safety: Accessibility: Fire Extinguisher Containers (Terrill Hall) SORM noted during the consultation that the metal fire extinguisher containers in Terrill Hall do not have the correct height from the floor to the top of the handle to be no more than 54 inches from the wall into the circulation path. After measurement, if they are indeed protruding 4 inches or greater from the wall.	NA	SORM recommends that UNT-Denton install boxes from the bottom of the fire extinguisher containers to the floor to meet Texas Accessibility Standards requirements. If they are fewer than 10, the fire extinguisher containers may be installed in a row. Reference: Texas Accessibility Standards, Chapter 3, Section 307, "Protruding Objects"	Randy Eric, Senior Director, Facilities Maintenance	3/31/2016	Closed	
External	State Office of Risk Management	Fiscal Year 2015	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT Dallas	15-07-03 Safety: Electrical Safety: Vending Machines (GFCI) SORM noted during the consultation that the cord and plug connected vending machines on the UNT Dallas campus did not have a ground-fault circuit interrupter as an integral part of the attachment plug.	NA	SORM recommends that UNT-Dallas protect these machines by complying with the relevant section of the National Electrical Code, as referenced below. Reference: NFPA-70 (2014), "National Electrical Code," Article 422.51(A) and (B)	Wayne Morris, Assistant Director for Facilities	9/30/2015	Closed	
External	State Office of Risk Management	Fiscal Year 2015	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	15-07-03 Safety: Fire Safety: Hoekwastweg (Terrill Hall - Basement) SORM noted during the consultation that a large quantity of banners, boxes and other paperwork has accumulated in the basement of Terrill Hall, representing an increased fire load for the building.	NA	SORM recommends that UNT-Denton remove these items from this area and store them in a manner that does not represent such a hazard. Reference: BMTSA Guidelines, Volume II, Section Two, Chapter 6, Subchapter 6.8	Vicki Campbell, Psychology Chair	8/31/2016	Closed	

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status	
External	State Office of Risk Management	Fiscal Year 2015	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	15-07-05 Safety- Fire Safety- Exit Signage (Terrill Hall) SORM noted during the consultation that one emergency egress in Terrill Hall lacked code-compliant exit signage.	NA	SORM recommends that UNT-Denton erect and maintain exit signage in this area that meets the requirements of the Life Safety Code. References: NFPA-101 (2014), "Life Safety Code," Chapters 99.2.10; 7.10.2.1; 3.3.188.6	NA	Randy Fife, Senior Director, Facilities Maintenance	12/15/2015	Closed	
External	State Office of Risk Management	Fiscal Year 2015	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	15-07-05 Safety- Fire Safety- Marking of Kitchen Appliances SORM noted during the consultation that some of the mobile cooking appliances in the kitchen of Bruce Hall had not had their proper locations marked relative to the fire suppression nozzles in the ventilation hood.	NA	SORM recommends that UNT-Denton have a qualified professional determine the proper locations for fire (and all) mobile kitchen appliances relative to the fire suppression systems' nozzles, and then mark the locations in some manner, such as with a red dot, that is clearly visible. The marking should be returned to their proper locations after cleaning, etc., to maintain the integrity of the ventilation-hood fire suppression system. References: NFPA-96 (2014), "Standard for Ventilation and Fire Protection of Commercial Cooking Operations," Chapters 12.1.2.1; 12.1.2.1.3.1	NA	Bill McKeave	6/31/2016	Closed	
External	State Office of Risk Management	Fiscal Year 2015	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	15-07-07 Safety- Fire Safety- Emergency Egress (Bruce Hall Kitchen- Fire Alarm) SORM noted during the consultation that the emergency egress for employees working the serving lines in the Bruce Hall Dining Facility does not appear to comply with the Life Safety Code with regard to unobstructed access to an exit point in the event of an emergency.	NA	SORM recommends that UNT-Denton arrange the egress in this area to be in accordance with the Life Safety Code. Reference: NFPA-101 (2014), "Life Safety Code," Chapter 10.2.1.1.1	NA	Randy Fife, Senior Director, Facilities Maintenance	8/31/2016	Closed	
External	State Office of Risk Management	Fiscal Year 2015	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	15-07-08 Safety- Hazard Communication/Chemical Safety/GHS Pool Chemicals a) SORM noted during the consultation that the Material Safety Data Sheets being used in the pool chemical stockroom, and do not meet the requirements of the Globally Harmonized System of Classification and Labelling of Chemicals (GHS.)	NA	SORM recommends that UNT contact all of their chemical manufacturers (for all campuses/locations where chemicals are being used) and request GHS-compliant Safety Data Sheets, which are mandatory for manufacturers to supply to employees as of June 1, 2015.	NA	Charlie Fox, Director of Environmental Management	9/15/2015	Closed	
External	State Office of Risk Management	Fiscal Year 2015	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	15-07-08 Safety- Hazard Communication/Chemical Safety/GHS Pool Chemicals b) SORM noted during the consultation that no measurements of levels of exposure to the pool chemicals being used in the training room have been conducted and documented to determine if they are being used in accordance with the manufacturer's instructions. SORM recommended by employees using these chemicals as part of their job duties.	NA	SORM recommends that UNT-Denton determine and document the level of exposure to the chemicals being used and then determine (based on information contained within the new Safety Data Sheets to be provided by the chemical manufacturers) how to protect the employees with appropriate Personal Protective Equipment (PPE) and/or Engineering Controls. Additionally, the university could also choose to transfer this risk via contracting with a third-party vendor, or by using less hazardous chemicals. References: OSHA, 29 CFR 1910.1200, "Hazard Communication Standard for Hazardous Chemicals and Hazardous Mixtures"; OSHA, 29 CFR 1910.1201, "Globally Harmonized System of Classification and Labeling of Chemicals (GHS)"; https://www.osha.gov/sg/hazcom/effectivedates.html	NA	NA	NA	NA	Closed
External	Hartford Steam Boiler Inspection and Insurance Company (Hartford Steam Boiler and Fidelity Group Inc.)	Fiscal Year 2015	NA	Governance and Regulatory Compliance	Loss Prevention Report, Food Safety Audit	UNT	21 reports/audits performed; 34 findings identified. For more detailed information please see the reports from Risk Management.	NA	NA	NA	NA	NA	NA	N/A

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Risk was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	Hartford Steam Boiler, Machinery and Insurance Company (HSB)	Fiscal Year 2015	NA	Governance and Regulatory Compliance	Loss Prevention Report	UNTISC	2 reports prepared; no findings identified. For more detailed information please see the reports from Risk Management.	NA	NA	NA	NA	NA	N/A
External	State Fire Marshal's Office	Fiscal Year 2015	RND12282C	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Denton Residential	UNT	Bruce Hall is a 247 room four story structure classified as a mixed occupancy consisting of a residential dormitory, and assembly. Features of fire protection include a complete fire alarm system, sprinkler system, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 1 The basement area located under the kitchen has only one means of egress and was formally considered a normally unoccupied space that was used for storage only. Within the last year, the kitchen's dishwashing unit were installed in the area. This changed the area use to a normally occupied area since employees now work in the space and a second means of egress is now required. NFPA 101, Life Safety Code, Chapter 29.2.4.1 and 7.4.1.1	Second exit to be planned and installed.	NA	8/7/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RND12282C	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Denton Residential	UNT	Bruce Hall is a 247 room four story structure classified as a mixed occupancy consisting of a residential dormitory, and assembly. Features of fire protection include a complete fire alarm system, smoke detection, sprinkler system, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 2 The music practice cube area on the first floor has only one means of egress and has low ceiling height for mechanical equipment hanging from the ceiling. NFPA 101, Life Safety Code, Chapter 29.2.4.1, 7.4.1.1, and 7.1.5.1	Second exit to be planned and installed.	NA	8/7/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RND12282C	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Denton Residential	UNT	Bruce Hall is a 247 room four story structure classified as a mixed occupancy consisting of a residential dormitory, and assembly. Features of fire protection include a complete fire alarm system, smoke detection, sprinkler system, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 3 In the first floor laundry/old elevator control equipment the fire alarm control cable in the hallway is not secured to the floor as the drip pan under the unit that appears to be hydraulic fluid. NFPA 101, Life Safety Code, Chapters 4.6.12.1	Inquiring with the elevator maintenance company about completing an N/A equipment demo.	NA	8/7/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RND12282C	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Denton Residential	UNT	Bruce Hall is a 247 room four story structure classified as a mixed occupancy consisting of a residential dormitory, and assembly. Features of fire protection include a complete fire alarm system, smoke detection, sprinkler system, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 4 Dormitory rooms are not provided with a required exit path adjacent to the exit door from each sleeping room. A diagram label reflect the actual floor arrangement, room identification and exit path travel from each sleeping room. NFPA 101, Life Safety Code, Chapter 29.7.4.1	Exit path diagrams being produced in-house.	NA	8/31/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RND13193C	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNT	Building 1104 Fireproof 1 is a current annual inspection tag. The last inspection tag is dated 8/6/2009.	NA	N/A	NA	NA	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RND13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	The sprinkler system lacks a current annual inspection tag. The last inspection tag is dated 2009.	NA	N/A	Fire sprinkler system will be inspected and updated as required.	Tommy Jones, Firefighter/FM/IJACD	12/7/2014	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Building 1108 Finding 1 - The sprinkler system lacks a current annual inspection tag. The last inspection tag is dated 2009.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1	Completed.	NA	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Building 1108 Finding 2 - The fire alarm system lacks a current annual inspection tag. The last inspection tag is dated 10/94. The fire alarm control panel indicates a trouble signal and is also in alarm status as well as the alarm silence switch has been activated. It is unknown by the Risk Management staff how long this panel has been in this status.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1	Fire alarm system will be inspected and updated as required.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services, Risk Management Services	12/7/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Building 1108 Unit 3000 Finding 1 - The secondary exit sign by room 3012 does not work when tested in the battery backup power mode.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1	Facilities will repair exit sign.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services, Risk Management Services	12/7/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193C	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNT	Building 1108 Unit 3000 Finding 1 - rooms 3008 and 3042 lack an approved handlings outside the door.	NA	NFPA 101, Life Safety Code, Chapters 39.2.1.1.1, 7.2.1.3.2 and 7.1.10.1	NA	NA	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Building 1108 Unit 3000 Finding 2 - room 3042 equipped with panic hardware and has an additional locking device installed.	NA	NFPA 101, Life Safety Code, Chapters 39.2.2.2.1, 7.2.1.3.12 and 7.2.1.3.14	Door systems will remove additional locking device.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services, Risk Management Services	12/7/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Building 1108 Unit 3000 Finding 3 - The exit door by room 3042 lacks an approved landing outside the door. Vegetation has been cut down outside the door and the remains of the bush create a tripping hazard.	NA	NFPA 101, Life Safety Code, Chapters 39.2.1.1.1, 7.2.1.3.2 and 7.1.10.1	Facilities will remove vegetation and add sidewalk.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services, Risk Management Services	3/31/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Building 1112 Unit 4000 Finding 1 - The training room has an occupant load in excess of 100 when the room divider is open and lacks the required panic hardware on the doors.	NA	NFPA 101, Life Safety Code, Chapter 13.2.2.2.3	Will install panic hardware.	NA	3/31/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Building 1112 Unit 4000 Finding 2 - The training room has an occupant load in excess of 100 when the room divider is open and lacks the required panic hardware on the doors.	NA	NFPA 101, Life Safety Code, Chapter 13.2.2.2.3	Panic hardware will be installed.	Tommy Jones, Firefighter/BMT, ACO, J.A.T. Emergency Services, Risk Management Services	3/31/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Building 1112 Unit 4000 Finding 2 - The fire alarm panel lacks a current annual inspection tag. The last inspection tag is dated February 2013.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1	Fire systems to conduct inspection.	Tommy Jones, Firefighter/BMT, ACO, J.A.T. Emergency Services, Risk Management Services	12/23/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Building 1112 Unit 4000 Finding 3 - The fire sprinkler system lacks a current annual inspection tag. The last inspection tag is dated February 2013.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1	Fire systems to conduct inspection.	Tommy Jones, Firefighter/BMT, ACO, J.A.T. Emergency Services, Risk Management Services	12/7/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO12282C	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Denton Residential	UNT	Clark Hall Clark Hall is a 233 room three-story existing dormitory occupancy. Features of fire protection include fire alarm system and portable fire extinguishers. The building has a fire alarm system and emergency generator power with illuminated exit lights and emergency generator power.	NA	FD-903 Dormitory rooms are not provided with a required exit path diagram on or immediately adjacent to each sleeping room. A diagram shall reflect the actual floor arrangement, room identification and exit path travel from each room.	Exit path diagrams being produced in house.	NA	8/31/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO12282C	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Denton Residential	UNT	College Inn The College Inn consists of four three-story buildings with a total of 286 rooms classified as a mixed occupancy consisting of existing apartment, dormitory, assembly and business. Each building has a door to the exterior. The upper floors have a concrete walkway that connects to a breezeway which provides egress from the units. Features of fire protection include a complete fire alarm system and portable extinguishers.	NA	NFPA 101, Life Safety Code, Chapter 29.7.4.1 The West section second floor by the 200 number rooms and third floor by the 300 number rooms exterior walkways have dead ends in excess of the allowed 20 foot maximum. NFPA 101, Life Safety Code, Chapter 29.2.1.1, 31.2.1, 31.2.1 and 7.5.3.3	We have hired licensed engineer (RL Wood) to perform an assessment of the balconies and design the new stairs needed. The assessment has been performed and we are waiting on the final report. Once we have the report and subsequent drawings we will hire a contractor to install.	NA	8/17/2015	Closed

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2015	RRO12282C	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Denton Residential	UNT	Kerr Hall Building A is a 476 room seven-story high-rise, classified as a mixed occupancy of dormitory and assembly. Features of fire protection include a standpipe, sprinkler coverage throughout, standpipe, fixed suppression for commercial looking appliance and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	<p>RNOING 2 Dormitory rooms are not provided with a required exit path diagram on or immediately adjacent to the door. A diagram shall reflect the actual floor arrangement, room identification and exit path travel from each room.</p> <p>NFPA 101, Life Safety Code, Chapter 29.7.4.1</p>	Exit path diagrams being produced in-house.	NA	8/31/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO12282C	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Denton Residential	UNT	Kerr Hall Building B is a 476 room eight-story high-rise, classified as a mixed occupancy of dormitory and business. Features of fire protection include a standpipe, sprinkler coverage throughout, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	<p>RNOING 1 Dormitory rooms are not provided with a required exit path diagram on or immediately adjacent to the door. A diagram shall reflect the actual floor arrangement, room identification and exit path travel from each room.</p> <p>NFPA 101, Life Safety Code, Chapter 29.7.4.1</p>	Exit path diagrams being produced in-house.	NA	8/31/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13155A	Governance and Regulatory Compliance	Fire Safety Inspection Report - Kristen Farmer Autism Center	UNT	One building was re-inspected with the following violations remaining. Please respond to this office within 20 days of receipt of this report, detailing your intentions to correct the violations and a timeline for their completion.	NA	<p>Firing 1 Multiple exit doors including the main entrance are equipped with electronically-controlled egress system that does not meet NFPA 101, Life Safety Code, Chapter 7.1.1.6.1 and 7.1.1.6.2. Written documentation was not available at the time the inspection was conducted. • The doors shall unlock upon activation of the fire sprinkler system. • The doors shall unlock upon loss of building power controlling the locking system. • Once the lock has been released by application of the releasing device relocking shall be by manual means only. • The doors shall be equipped with panic hardware. NFPA 101, Life Safety Code, Chapters 39.2.2.1.5 and 7.1.6.1</p>	Fire and Door Systems will reconfigure delayed-egress locking system to meet NFPA 101, Chapter 39.2.2.1.5 and 7.1.6.1 and add required sign at doors.	Tommy Jones, Firefighter/BMT A.C.O J.A.T. Emergency Services Risk Management	11/20/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13155A	Governance and Regulatory Compliance	Fire Safety Inspection Report - Kristen Farmer Autism Center	UNT	One building was re-inspected with the following violations remaining. Please respond to this office within 20 days of receipt of this report, detailing your intentions to correct the violations and a timeline for their completion.	NA	<p>Firing 2 The front main entrance doors have delayed egress locking devices installed. Assembly occupancy shall not have delayed egress locking devices on the main entrance exit doors. NFPA 101, Life Safety Code, Chapters 1.1.2.1.2.3 and 7.1.6.1</p>	Fire and Door Systems will research solutions.	Tommy Jones, Firefighter/BMT A.C.O J.A.T. Emergency Services Risk Management	4/20/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13155A	Governance and Regulatory Compliance	Fire Safety Inspection Report - Kristen Farmer Autism Center	UNT	One building was re-inspected with the following violations remaining. Please respond to this office within 20 days of receipt of this report, detailing your intentions to correct the violations and a timeline for their completion.	NA	<p>Firing 3 The main exit door by the fire alarm control panel is equipped with panic hardware and has an additional key locking device installed. NFPA 101, Life Safety Code, Chapters 39.2.2.2.1, 7.2.1.5.12, 7.2.1.5.1 and 7.2.1.5.102</p>	Door systems will remove locking device.	Tommy Jones, Firefighter/BMT A.C.O J.A.T. Emergency Services Risk Management	2/26/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13155A	Governance and Regulatory Compliance	Fire Safety Inspection Report - Kristen Farmer Autism Center	UNT	One building was re-inspected with the following violations remaining. Please respond to this office within 20 days of receipt of this report, detailing your intentions to correct the violations and a timeline for their completion.	NA	<p>Firing 4 Both sets of exit doors leading to the playground are equipped with panic hardware and have an additional key locking device installed.</p>	Door systems will remove locking device.	Tommy Jones, Firefighter/BMT A.C.O J.A.T. Emergency Services Risk Management	2/26/2015	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observation	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2015	RR013155A	Governance and Regulatory Compliance	Fire Safety Inspection Report - Kristen Farmer Autism Center	UNT	Kristen Farmer Autism Center One building was re-inspected with the following violations remaining. Please respond to this office within 20 days of receipt of this report, detailing your intentions to correct the violations and a timeline for their completion.	NA	Finding 5 The manual reset gate is equipped with a manual reset lever and a fire alarm pull station. The manual reset lever is not labeled with the word "RESET" and the fire alarm pull station is not labeled with the word "FIRE ALARM". The manual reset lever is not labeled with the word "RESET" and the fire alarm pull station is not labeled with the word "FIRE ALARM".	Fire and door systems will remain in place until the manual reset lever and the fire alarm pull station are labeled with the word "RESET" and "FIRE ALARM" respectively.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management	11/20/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RR013155A	Governance and Regulatory Compliance	Fire Safety Inspection Report - Kristen Farmer Autism Center	UNT	Kristen Farmer Autism Center One building was re-inspected with the following violations remaining. Please respond to this office within 20 days of receipt of this report, detailing your intentions to correct the violations and a timeline for their completion.	NA	Finding 6 The main entrance room has an occupancy load in excess of 100 persons. The occupancy load is 100 persons and the room contains 110 persons.	Pat hardware to be installed on all exit doors from multipurpose room.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management	11/20/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RR013155A	Governance and Regulatory Compliance	Fire Safety Inspection Report - Kristen Farmer Autism Center	UNT	Kristen Farmer Autism Center One building was re-inspected with the following violations remaining. Please respond to this office within 20 days of receipt of this report, detailing your intentions to correct the violations and a timeline for their completion.	NA	Finding 7 The emergency light unit by room 115 is used to store large amount of combustible material.	Storage will be removed.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management	11/20/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RR013155A	Governance and Regulatory Compliance	Fire Safety Inspection Report - Kristen Farmer Autism Center	UNT	Kristen Farmer Autism Center One building was re-inspected with the following violations remaining. Please respond to this office within 20 days of receipt of this report, detailing your intentions to correct the violations and a timeline for their completion.	NA	Finding 8 The emergency light unit by room 117 does not operate when tested.	Facilities will repair emergency light.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management	4/20/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RR013155A	Governance and Regulatory Compliance	Fire Safety Inspection Report - Kristen Farmer Autism Center	UNT	Kristen Farmer Autism Center One building was re-inspected with the following violations remaining. Please respond to this office within 20 days of receipt of this report, detailing your intentions to correct the violations and a timeline for their completion.	NA	Finding 9 The fire alarm system lacks a current annual inspection tag. The last inspection tag is dated August 2012.	Completed	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RR013155A	Governance and Regulatory Compliance	Fire Safety Inspection Report - Kristen Farmer Autism Center	UNT	Kristen Farmer Autism Center One building was re-inspected with the following violations remaining. Please respond to this office within 20 days of receipt of this report, detailing your intentions to correct the violations and a timeline for their completion.	NA	Finding 10 The fire sprinkler system lacks a current annual inspection tag. The last inspection tag is dated 2013, no other information is provided on the tag.	In progress	Tommy Jones, Firefighter/BMT, ACO	11/20/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RR013155A	Governance and Regulatory Compliance	Fire Safety Inspection Report - Kristen Farmer Autism Center	UNT	Kristen Farmer Autism Center One building was re-inspected with the following violations remaining. Please respond to this office within 20 days of receipt of this report, detailing your intentions to correct the violations and a timeline for their completion.	NA	Finding 11 The fire department connection for the fire sprinkler system is missing the protective cover on one of the 2 1/2 inch connections.	Completed	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RR013155A	Governance and Regulatory Compliance	Fire Safety Inspection Report - Kristen Farmer Autism Center	UNT	Kristen Farmer Autism Center One building was re-inspected with the following violations remaining. Please respond to this office within 20 days of receipt of this report, detailing your intentions to correct the violations and a timeline for their completion.	NA	Finding 12 The wall and ceiling construction separating the business occupancy from the dwelling unit occupancy lacks the required two hour fire rated construction.	Plans to show the occupancy of this area to offices, stairs and add a second exit is added.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management	8/31/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RR013155A	Governance and Regulatory Compliance	Fire Safety Inspection Report - Kristen Farmer Autism Center	UNT	Kristen Farmer Autism Center One building was re-inspected with the following violations remaining. Please respond to this office within 20 days of receipt of this report, detailing your intentions to correct the violations and a timeline for their completion.	NA	Finding 13 The smoke detector in the second floor dwelling unit living area has been removed from the ceiling.	Fire systems investigated location and determined detector had been moved to location above stairs. Base removed and covered.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management	Completed	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RR013155A	Governance and Regulatory Compliance	Fire Safety Inspection Report - Kristen Farmer Autism Center	UNT	Kristen Farmer Autism Center One building was re-inspected with the following violations remaining. Please respond to this office within 20 days of receipt of this report, detailing your intentions to correct the violations and a timeline for their completion.	NA	Finding 14 Power strips are inter-connected throughout the office areas.	Inter-connected power strips will be removed.	Tommy Jones, Firefighter/BMT, ACO	11/20/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RR013155A	Governance and Regulatory Compliance	Fire Safety Inspection Report - Kristen Farmer Autism Center	UNT	Kristen Farmer Autism Center One building was re-inspected with the following violations remaining. Please respond to this office within 20 days of receipt of this report, detailing your intentions to correct the violations and a timeline for their completion.	NA	Finding 15 An electrical splice box is missing the cover plate in room 140.	Extension cord will be removed.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management	11/20/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RR013155A	Governance and Regulatory Compliance	Fire Safety Inspection Report - Kristen Farmer Autism Center	UNT	Kristen Farmer Autism Center One building was re-inspected with the following violations remaining. Please respond to this office within 20 days of receipt of this report, detailing your intentions to correct the violations and a timeline for their completion.	NA	Finding 16 An electrical splice box is missing the cover plate in room 140.	Box cover will be replaced	Tommy Jones, Firefighter/BMT, ACO	11/20/2014	Closed

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13125-B	Governance and Regulatory Compliance	Fire Safety Inspection Report - Kristen Farmer Autism Center	UNT	One building was re-inspected with the following violations remaining. Please respond to this office within 20 days of receipt of this report, detailing your intentions to correct the violations and a timeline for their completion.	NA	<p>Findings 1</p> <p>Multiple exit doors including the main entrance are equipped with electronically controlled egress system that does not meet NFPA 101 Life Safety Code requirements in the following areas:</p> <ul style="list-style-type: none"> • The doors were not available at the time the inspection was conducted. • The doors shall unlock upon activation of the fire sprinkler system • The doors shall unlock upon loss of building power controlling • Once the lock has been released by application of the releasing device relocking shall be by manual means only. • A readily visible sign shall be placed on each door <p>NFPA 101, Life Safety Code, Chapters 392.2.2.5 and 7.1.6.1</p>	Signs are in place. Still need to test operations on the doors.	Tommy Jones, Firefighter/BMT JACD J.A.T. Emergency Services Risk Management	4/22/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13125-B	Governance and Regulatory Compliance	Fire Safety Inspection Report - Kristen Farmer Autism Center	UNT	One building was re-inspected with the following violations remaining. Please respond to this office within 20 days of receipt of this report, detailing your intentions to correct the violations and a timeline for their completion.	NA	<p>Findings 3</p> <p>The north east exit door by the fire alarm control panel is equipped with panic hardware and has an additional key locking device installed.</p> <p>NFPA 101, Life Safety Code, Chapters 392.2.2.1, 7.2.1.5.12, 7.2.1.5.1 and 7.1.1.10.2</p>	Door systems will remove locking device.	Tommy Jones, Firefighter/BMT JACD J.A.T. Emergency Services Risk Management	2/26/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13125-B	Governance and Regulatory Compliance	Fire Safety Inspection Report - Kristen Farmer Autism Center	UNT	One building was re-inspected with the following violations remaining. Please respond to this office within 20 days of receipt of this report, detailing your intentions to correct the violations and a timeline for their completion.	NA	<p>Findings 3</p> <p>Both sets of exit doors leading to the playground are equipped with panic hardware and have an additional key locking device installed.</p> <p>NFPA 101, Life Safety Code, Chapters 392.2.2.1, 7.2.1.5.12, 7.2.1.5.1 and 7.1.1.10.2</p>	Door systems will remove locking device.	Tommy Jones, Firefighter/BMT JACD J.A.T. Emergency Services Risk Management	2/26/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13125-B	Governance and Regulatory Compliance	Fire Safety Inspection Report - Kristen Farmer Autism Center	UNT	One building was re-inspected with the following violations remaining. Please respond to this office within 20 days of receipt of this report, detailing your intentions to correct the violations and a timeline for their completion.	NA	<p>Findings 4</p> <p>The playground exit gate is equipped with a maglock with a request to exit button and also has standard latching lever hardware installed. Opening the gate requires more than the one motion allowed by the code. The motion was not available to show that the maglock releases upon loss of building power and activation of the fire sprinkler activated fire alarm system.</p> <p>NFPA 101, Life Safety Code, Chapters 392.2.2.1 and 7.2.1.6.2</p>	Fire and door systems will research violations. Need to repair mag lock and remove latch from a passable handle.	Tommy Jones, Firefighter/BMT JACD J.A.T. Emergency Services Risk Management	4/29/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13125-B	Governance and Regulatory Compliance	Fire Safety Inspection Report - Kristen Farmer Autism Center	UNT	One building was re-inspected with the following violations remaining. Please respond to this office within 20 days of receipt of this report, detailing your intentions to correct the violations and a timeline for their completion.	NA	<p>Findings 5</p> <p>The panic escape alarm has an occupancy load in excess of 100 people and lacks the required panic hardware on the exit doors.</p> <p>NFPA 101, Life Safety Code, Chapter 13.2.2.2.3</p>	Panic hardware installed on all exit doors. Complete.	Tommy Jones, Firefighter/BMT JACD J.A.T. Emergency Services Risk Management	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13125-B	Governance and Regulatory Compliance	Fire Safety Inspection Report - Kristen Farmer Autism Center	UNT	One building was re-inspected with the following violations remaining. Please respond to this office within 20 days of receipt of this report, detailing your intentions to correct the violations and a timeline for their completion.	NA	<p>Findings 6</p> <p>The wall and ceiling construction separating the business occupancy from the dwelling unit occupancy lacks the required two hour fire rated construction.</p> <p>NFPA 101, Life Safety Code, Chapters 391.3.1.1, 6.1.14.1 and 6.1.14.4</p>	Will send official letter to building representative not to use the space.	Tommy Jones, Firefighter/BMT JACD J.A.T. Emergency Services Risk Management	3/31/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO1228-C	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Denton Residential	UNT	Legends Hall is a four-story 276 room structure classified as existing dormitory occupancy. The fire protection includes a complete fire alarm system, full standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies.	NA	<p>Findings 1</p> <p>Legends Hall is a four-story 276 room structure classified as existing dormitory occupancy. The fire protection includes a complete fire alarm system, full standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies.</p>	Sealing penetrations in progress.	NA	1/31/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO1228-C	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Denton Residential	UNT	Legends Hall is a four-story 276 room structure classified as existing dormitory occupancy. The fire protection includes a complete fire alarm system, full standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies.	NA	<p>Findings 2</p> <p>Dormitory rooms are not provided with a required exit path diagram on or immediately adjacent to the exit door from each sleeping room. A diagram showing the required exit path, including the required fire alarm arrangement, room identification and exit path travel from each room.</p> <p>NFPA 101, Life Safety Code, Chapter 29.7.4.1</p>	Exit path diagrams being produced in-house.	NA	8/31/2015	Closed

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report Issued	Audit Number	Audit Category	Report Name	Complaint Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2015	RRO12282E	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Denton Residential	UNT	Wagler Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINING1 Dormitory rooms are not provided with a required exit path diagram on or immediately adjacent to the exit door from each sleeping room. A diagram adjacent to the exit door from each sleeping room shall reflect the actual floor arrangement, room identification and exit path travel from each room.	Install exit path diagram in each room.	NA	1/29/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO12282C	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Denton Residential	UNT	Wagler Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINING1 Dormitory rooms are not provided with a required exit path diagram on or immediately adjacent to the exit door from each sleeping room. A diagram adjacent to the exit door from each sleeping room shall reflect the actual floor arrangement, room identification and exit path travel from each room.	Exit path diagrams being produced in-house.	NA	8/31/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO12282C	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Denton Residential	UNT	Moquet Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, sprinkler coverage throughout and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINING1 Uneasly vertical penetrations exist where the electrical panels are located throughout the building.	Sealing penetrations in progress.	NA	1/31/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO12282C	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Denton Residential	UNT	Moquet Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, sprinkler coverage throughout and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINING2 A communicating space between the first and second floors exists and is open to the egress corridor on the second floor.	Install fire-rated wall.	NA	8/7/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO12282C	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Denton Residential	UNT	Moquet Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, sprinkler coverage throughout and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINING3 Warning is installed on the bottom section of the corridor door at the end of the building and does not meet class A or B interior finish requirements.	Apply intumescent paint.	NA	8/31/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO12282C	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Denton Residential	UNT	Moquet Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, sprinkler coverage throughout and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINING4 Dormitory rooms are not provided with a required exit path diagram on or immediately adjacent to the exit door from each sleeping room. A diagram adjacent to the exit door from each sleeping room shall reflect the actual floor arrangement, room identification and exit path travel from each room.	Exit path diagrams being produced in-house.	NA	8/31/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Rick and Trey's Sports Bar/Finding 1 is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, sprinkler coverage throughout and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	NFPA 101, Life Safety Code, Chapter 29.7.4.1 Rick and Trey's Sports Bar will complete installation of a vent hood or wet chemical fire suppression system. Risk Management Services (RMS) will verify.	Rick and Trey's Sports Bar will complete installation of a vent hood or wet chemical fire suppression system. Risk Management Services (RMS) will verify.	NA	3/31/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193C	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Rick and Trey's Sports Bar/Finding 1 is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, sprinkler coverage throughout and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	NFPA 101, Life Safety Code, Chapter 13.3.2.3; and NFPA 96 Commercial Cooking Operations Operational features violation	NA	NA	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Rick and Trey's Sports Bar/Finding 1 is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, sprinkler coverage throughout and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1 The fire alarm system lacks a current annual inspection tag. The system was installed in 2012 and has not been inspected since the installation.	UNT will coordinate with lease to repair exit sign	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management Services	12/7/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Rick and Trey's Sports Bar/Finding 1 is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, sprinkler coverage throughout and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1 The fire alarm system lacks a current annual inspection tag. The system was installed in 2012 and has not been inspected since the installation.	Rick and Trey's Sports Bar must complete inspection. RMS will verify.	JACO Risk Management Services	12/7/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Rick and Trey's Sports Bar/Finding 1 is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, sprinkler coverage throughout and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1 The fire alarm system lacks a current annual inspection tag. The system was installed in 2012 and has not been inspected since the installation.	Rick and Trey's Sports Bar must complete inspection. RMS will verify.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management Services	12/7/2014	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2015	RR013133A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Rick and Trey's Sports Bar Finding 3: The wet chemical fire suppression system installed to protect commercial cooking appliances under the vent hood system lacks a current semiannual inspection tag. The system was installed in 2012 and has not been inspected since the installation. The extinguisher is not inspected and the extinguisher is not behind the cooking equipment and if the system was activated little or no agent would spray on the cooking equipment.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1	Rick and Trey's Sports Bar must complete inspection. RMS will verify.	Tommy Jones, Firefighter/FMT, ACO U.A.T. Emergency Services Risk Management Services	12/7/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RR013133A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Rick and Trey's Sports Bar Finding 13: The portable fire extinguishers throughout the building lack current annual inspection tags. The last inspection was conducted in July of 2014. Note: The extinguishers have University inspection tags.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1	Rick and Trey's Sports Bar must complete inspection. RMS will verify.	Tommy Jones, Firefighter/FMT, ACO U.A.T. Emergency Services Risk Management Services	12/7/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RR013133A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Rick and Trey's Sports Bar Finding 14: A second cooking range is located in the kitchen across the room from the existing range. The range is protected by a wet hose or wet chemical fire suppression system.	NA	NFPA 101, Life Safety Code, Chapter 13.2.2, 9.2.3, and NFPA 96 Standard for Ventilation	Rick and Trey's Sports Bar must install a complete Type I cooking hood system equipped with an automatic fire suppression system that is listed for use in the kitchen. The fire suppression system and the monitoring are complete. RMS will verify.	Tommy Jones, Firefighter/FMT, ACO U.A.T. Emergency Services Risk Management Services	12/23/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RR013133A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Rick and Trey's Sports Bar Finding 15: The area between occupancy loads calculated by the City of Denton prior to the expansion of both areas and the university buying the property. The occupancy loads need to be re-calculated by the campus Fire Marshal and up to date signs posted.	NA	NFPA 101, Life Safety Code, Chapters 13.7.9.3.1, 13.7.9.3.2 and 13.7.9.3.3	UNT to recalculate occupancy loads.	Tommy Jones, Firefighter/FMT, ACO U.A.T. Emergency Services Risk Management Services	12/7/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RR013133A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Rick and Trey's Sports Bar Finding 2: The emergency lighting units do not operate when tested.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1	UNT will coordinate with lease to repair emergency lights.	Tommy Jones, Firefighter/FMT, ACO U.A.T. Emergency Services Risk Management Services	12/7/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RR013133A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Rick and Trey's Sports Bar Finding 3: The illuminated exit sign by the rest room hallway in the main bar area is not illuminated in the normal building power mode.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1	UNT will coordinate with lease to repair exit sign.	Tommy Jones, Firefighter/FMT, ACO U.A.T. Emergency Services Risk Management Services	12/7/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RR013133A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Rick and Trey's Sports Bar Finding 4: The fenced in outdoor patio seating area has an occupant load in excess of 50 and lacks the required remotely located second exit.	NA	NFPA 101, Life Safety Code, Chapter 13.2.4.4	Rick and Trey's Sports Bar must install second exit. RIK Management System (RMS) will verify.	Tommy Jones, Firefighter/FMT, ACO U.A.T. Emergency Services Risk Management Services	12/7/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RR013133A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Rick and Trey's Sports Bar Finding 5: The patio area exit sign directs occupants away from the exit gate and into an area without an exit.	NA	NFPA 101, Life Safety Code, Chapters 13.2.10.1 and 7.10.2.2	Rick and Trey's Sports Bar must install second exit sign. RMS will verify.	Tommy Jones, Firefighter/FMT, ACO U.A.T. Emergency Services Risk Management Services	12/7/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RR013133A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Rick and Trey's Sports Bar Finding 6: The patio exit gate lacks an exit sign to clearly identify the exit location.	NA	NFPA 101, Life Safety Code, Chapters 13.2.10.1 and 7.10.1.2.1	Rick and Trey's Sports Bar must install exit sign. RMS will verify.	Tommy Jones, Firefighter/FMT, ACO U.A.T. Emergency Services Risk Management Services	12/7/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RR013133A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Rick and Trey's Sports Bar Finding 7: The door panic hardware/deadbolt locks installed and lack the required panic hardware.	NA	NFPA 101, Life Safety Code, Chapter 7.1.2.2.3	Rick and Trey's Sports Bar must install panic hardware and remove deadbolt locks. RMS will verify.	Tommy Jones, Firefighter/FMT, ACO U.A.T. Emergency Services Risk Management Services	12/7/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RR013133A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Rick and Trey's Sports Bar Finding 8: The door panic hardware/deadbolt locks installed and lack the required panic hardware. Note At the time of the inspection the bar was open for business. The bar owner was called in from home to unlock the door.	NA	NFPA 101, Life Safety Code, Chapters 7.1.2.1.1 and 7.1.2.1.3	Rick and Trey's Sports Bar must install panic hardware and remove deadbolt locks. RMS will verify.	Tommy Jones, Firefighter/FMT, ACO U.A.T. Emergency Services Risk Management Services	12/7/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RR013133A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Rick and Trey's Sports Bar Finding 9: A large beer pong game restrict access to the rear exit on the main bar side.	NA	NFPA 101, Life Safety Code, Chapters 13.2.5.1.1 and 7.1.10.1 and 7.1.10.2.1	Rick and Trey's Sports Bar must move beer pong game. RMS will verify.	Tommy Jones, Firefighter/FMT, ACO U.A.T. Emergency Services Risk Management Services	12/7/2014	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Reported	Audit Number	Audit Category	Report Name	Component Institution	Key Observation	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2015	RRO12292C	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Denton Residential	UNT	Suite F-404 in 3172 room three-story structure classified as existing apartment occupancy. Features of fire protection include a complete fire alarm system, full automatic sprinkler fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 1 There is inadequate space between the first and second floors exits and is open to the egress. NFPA 101, Life Safety Code, Chapters 313.6.3.1.1 and 8.6.6	Install fire-rated wall.	NA	8/17/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO12292C	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Denton Residential	UNT	Traditions Hall occupancy features of fire protection include a complete fire alarm system, full automatic sprinkler system, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 1 There is inadequate space between the first and second floors exits and is open to the egress. NFPA 101, Life Safety Code, Chapters 293.3.1.1.1 and 8.6.6	Install fire-rated wall.	NA	8/17/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO12292C	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Denton Residential	UNT	Traditions Hall occupancy features of fire protection include a complete fire alarm system, full automatic sprinkler system, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 2 There is inadequate space between the first and second floors exits and is open to the egress. NFPA 101, Life Safety Code, Chapter 293.3.1.1.1 and 8.6.6	Exit path diagrams being produced in-house.	NA	8/31/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	The portable fire extinguishers lack annual inspection tags.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1	UNT will coordinate with lease to inspect fire extinguishers.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management Services	12/7/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	The portable fire extinguishers lack annual inspection tags.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1	Tenant will have the fire extinguishers inspected.	NA	3/31/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Units 110 Finding 2 The portable fire extinguishers are used to power exercise equipment throughout the room.	NA	NFPA 101, Life Safety Code, Chapters 393.5.1.9.1.2; and NFPA 70 National Electrical Code	Tenant will remove extension cords. RMS will verify.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management Services	1/29/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Units 110 Finding 2 The portable fire extinguishers are used to power exercise equipment throughout the room.	NA	NFPA 101, Life Safety Code, Chapters 393.5.1.9.1.2; and NFPA 70 National Electrical Code	Tenant will have the extension cords removed.	NA	3/31/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Units 110 Finding 3 The electrical outlet within six feet of the sink lacks Ground Fault Circuit Interrupter (GFCI) protection.	NA	NFPA 101, Life Safety Code, Chapters 393.5.1.9.1.2; and NFPA 70 National Electrical Code	Tenant will install GFCI protection. RMS will verify.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management Services	1/29/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Units 110 Finding 4 The electrical outlet located behind the clothes dryer is missing the protective cover plate.	NA	NFPA 101, Life Safety Code, Chapters 393.5.1.9.1.2; and NFPA 70 National Electrical Code	Tenant will install cover plate. RMS will verify.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management Services	1/29/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Units 112 Finding 1 The fire alarm system installation not been completed the system is not operational.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1	The fire alarm system installation has been completed.	NA	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Units 112 Finding 1 The fire alarm system lacks a current inspection tag.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1	New system, installation in progress.	Tommy Jones, Firefighter/BMT, ACO	1/29/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Units 112 Finding 2 The main entrance lacks a manual fire alarm pull station within five feet of the exit door.	NA	NFPA 101, Life Safety Code, Chapters 393.4.1.9.1.6.2.3; and NFPA 72 National Fire Alarm and Signaling Code	Will install manual fire alarm pull station near front door.	Tommy Jones, Firefighter/BMT, ACO	1/29/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Units 112 Finding 2 The main entrance lacks a manual fire alarm pull station within five feet of the exit door.	NA	NFPA 101, Life Safety Code, Chapters 393.4.1.9.1.6.2.3; and NFPA 72 National Fire Alarm and Signaling Code	Will install manual fire alarm pull station near front door.	NA	3/31/2015	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Unit 111 Finding 3 The portable fire extinguishers lack current inspection tags. The last inspection was conducted in July 2013.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1	Fire Systems to conduct inspection.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management Services	12/7/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Unit 111 Finding 4 Storage is located in front of the electrical panels.	NA	NFPA 101, Life Safety Code, Chapters 39.2.2.2.1, 9.1.2, and NFPA 70 National Electrical Code	Occupant will remove storage. RMs will verify.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management Services	1/20/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Unit 111 Finding 1 The portable fire extinguishers lack current inspection tags.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1	Fire Systems will conduct inspection. If spaces is unoccupied, fire extinguishers will be removed until such time the space is re-occupied.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management Services	1/20/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Unit 120 Finding 1 The rear exit door has a sliding dead bolt installed in addition to the standard door lock.	NA	NFPA 101, Life Safety Code, Chapters 39.2.2.2.1, 7.2.1.5.1, and 7.2.1.5.9 and 7.2.1.5.10	Sliding dead bolt lock to be removed.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management Services	12/7/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Unit 120 Finding 3 The portable fire extinguishers lack a current annual inspection tag. The last inspection tag is dated July 2013.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1	Fire Systems will conduct inspection. If spaces is unoccupied, fire extinguishers will be removed until such time the space is re-occupied.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management Services	12/7/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Unit 120 Finding 3 The unsecured gas lines into the building lack protective caps.	NA	NFPA 101, Life Safety Code, Chapters 13.5.1 and 9.1.1	Facilities will install protective caps.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management Services	12/7/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Unit 200 Finding 1 The main entrance door has a keyed dead bolt installed but is missing the thumb latch on the interior side of the door.	NA	NFPA 101, Life Safety Code, Chapters 39.2.2.2.1, 7.2.1.5.1, 5.1, and 7.2.1.5.3	Space unoccupied. When space is occupied, will bring locks up to code.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management Services	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Unit 210 Finding 1 The main entrance/exit door is equipped with panic hardware and has an additional locking device installed.	NA	NFPA 101, Life Safety Code, Chapters 39.2.2.2.1, 7.2.1.5.12 and 7.2.5.10.2	Space unoccupied. When space is occupied, will bring locks up to code.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management Services	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Unit 210 Finding 2 The rear double exit door is equipped with standard latching locking hardware installed and has an additional locking device installed.	NA	NFPA 101, Life Safety Code, Chapters 39.2.2.2.1, 7.2.1.5.1 and 7.2.1.5.10.2	Space unoccupied. When space is occupied, will bring locks up to code.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management Services	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Unit 220 Finding 1 The main entrance/exit door is equipped with panic hardware and has an additional locking device installed.	NA	NFPA 101, Life Safety Code, Chapters 39.2.2.2.1, 7.2.1.5.12 and 7.2.5.10.2	Space unoccupied. When space is occupied, will bring locks up to code.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management Services	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Unit 220 Finding 1b The sprinkler heads in the corridor by room 2249 all have the orange protective shipping covers installed.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1	Fire systems to remove covers.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management Services	12/7/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Unit 225 Finding 1 The main entrance door is equipped with a double cylinder dead bolt locking device.	NA	NFPA 101, Life Safety Code, Chapters 39.2.2.2.1, 7.2.1.5.1 and 7.2.1.5.12	Space unoccupied. When space is occupied, will bring locks up to code.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management Services	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Unit 3000 Finding 1 The main entrance/exit door is equipped with panic hardware and has an additional locking device installed.	NA	NFPA 101, Life Safety Code, Chapters 39.2.2.2.1, 7.2.1.5.12 and 7.2.5.10.2	Door systems removed additional locking device. Complete.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management Services	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Unit 3000 Finding 2 The exit door by room 3002 lacks an approved landing outside the door and the remains of the bush create a tripping hazard.	NA	NFPA 101, Life Safety Code, Chapters 39.2.1.1, 7.2.1.3.2 and 7.1.10.1	Remove vegetation and add sidewalk. Feague Nail & Perkins is designing the Woodhill 3000 ADA parking modifications and has included this within their scope.	Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management Services	3/31/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193C	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNT	Unit 333 Finding 1 The fire extinguishers and the adjacent stairs are blocked by the door office is not properly fire stopped at the joint where the wall meets the roof.	NA	NFPA 101, Life Safety Code, Chapters 8.3.6.1, 8.3.6.2 and 8.3.6.5 NA		Tommy Jones, Firefighter/BMT, J.A.T. Emergency Services Risk Management Services	NA	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Unit 337 Finding 1 The emergency light unit by exam room 3 does not work when tested.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1	Tenant will fix light.	2/15/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Unit 337 Finding 1 The illuminated exit sign by the blood draw station does not work when tested in the facility backup power mode.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1	Tenant responsible to repair exit sign.	1/30/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Unit 337 Finding 2 The emergency light unit by exam room 3 does not work when tested.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1	Tenant responsible to repair emergency light.	1/30/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Unit 337 Finding 3 Surge protector are interconnected in the office area.	NA	NFPA 101, Life Safety Code, Chapters 38.5.1.9.1.2; and NFPA 70 National Electrical Code	Completed	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Unit 337 Finding 4 Surge protector are interconnected in the office area.	NA	NFPA 101, Life Safety Code, Chapters 38.5.1.9.1.2; and NFPA 70 National Electrical Code	Tenant will remove outlet adapters.	1/30/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Unit 365 Finding 1 There are multiple backing devices installed on all egress doors.	NA	NFPA 101, Life Safety Code, Chapters 13.2.2.2 and 7.2.1.5.10	Space is unoccupied. When space is occupied, will bring lock up to code.	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Unit 365 Finding 2 The fire alarm system lacks a current annual inspection tag. The last inspection tag is dated 2010.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1	Fire Systems will conduct inspection.	12/1/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Unit 365 Finding 3 The fire sprinkler system lacks a current annual inspection tag. The last inspection tag is dated 2009.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1	Fire Systems will conduct inspection.	12/1/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO13193A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Woodhill Square	UNT	Unit 100, 106 and 108 Finding 1 The portable fire extinguishers lack current annual inspection tags.	NA	NFPA 101, Life Safety Code, Chapter 4.6.12.1	Fire Systems will conduct inspection.	1/22/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO12282C	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Denton Residential	UNT	Victory Hall Victory Hall is a four-story mixed occupancy consisting of existing dormitory and assembly use. Features of fire protection include a complete fire alarm system, throughout and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINING1 The sidewall sprinkler head in stair 2-ground floor has receded and is obstructed by the gypsum wall board. Refer to the Fire Code, Chapter 4.6.12.1, and NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems	Fire systems is sourcing the correct cover for the sprinkler head.	8/31/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO12282C	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Denton Residential	UNT	Victory Hall Victory Hall is a four-story mixed occupancy consisting of existing dormitory and assembly use. Features of fire protection include a complete fire alarm system, sprinkler coverage throughout and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINING2 Dormitory rooms are not provided with a required exit path diagram on or immediately adjacent to the exit door from each sleeping room. A diagram shall reflect the actual floor management, room identification and exit path travel from each room.	Exit path diagrams being produced in-house.	8/31/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO12282C	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Denton Residential	UNT	West Hall West Hall is a three-story structure classified as a mixed occupancy of dormitory and assembly use. Features of fire protection include a complete fire alarm system, and portable fire extinguishers. The building is equipped with illuminated exit signs, and emergency lighting units in the event of emergencies involving power loss.	NA	FINING1 The commercial cooking equipment has wheels on the units and allows the units to be located in an area not in direct alignment with the UL-300 suppression system nozzle coverage as originally designed. Refer to NFPA 101, Life Safety Code, Chapter 29.2.3.1, and NFPA 96, Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations	Requesting Dining input	5/29/2015	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2015	RRO12282-C	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Denton Residential	UNT	West Hall is a three-story structure classified as a mixed occupancy of existing assembly and dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, and portable fire extinguishers. The building is equipped with illuminated exit signs, and emergency lighting units in the event of emergencies involving power loss.	NA	FN01NOG.2 The boiler room has unsealed penetrations. NFPA 101, Life Safety Code, Chapters 4.6.12.1 and 8.3.5.1	Hiring a contractor to complete the work.	NA	12/29/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO12282-C	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Denton Residential	UNT	West Hall is a three-story structure classified as a mixed occupancy of existing assembly and dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, and portable fire extinguishers. The building is equipped with illuminated exit signs, and emergency lighting units in the event of emergencies involving power loss.	NA	FN01NOG.3 The U-300 wet chemical fire suppression system is not tagged during "no electrical and off-gas" testing. NFPA 101, Life Safety Code, Chapters 4.6.12.1	Electrician is scheduled to complete the work next week.	NA	12/7/2014	Closed
External	State Fire Marshal's Office	Fiscal Year 2015	RRO12282-C	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas, Denton Residential	UNT	West Hall is a three-story structure classified as a mixed occupancy of dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, and portable fire extinguishers. The building is equipped with illuminated exit signs, and emergency lighting units in the event of emergencies involving power loss.	NA	FN01NOG.4 Dormitory rooms are not provided with a required exit path diagram. Exit path diagrams being produced in-house. Diagrams shall reflect the actual floor arrangement, room identification and exit path travel from each room. NFPA 101, Life Safety Code, Chapter 20.7.4.1	Exit path diagrams being produced in-house.	NA	8/31/2015	Closed
Internal	UNT System Internal Audit	Fiscal Year 2015	1507 HSC	Governance and Regulatory Compliance	Family Medicine Residency Program	UNT/HSIC	None	NA	NA	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2015	1532 UNT	Governance and Regulatory Compliance	UNT Facilities Certification Review	UNT	Based on the results of procedures performed, we concluded the projects and acquisitions of real property submitted to Texas Higher Education Coordinating Board (THECB) (received required approvals, re: projects and acquisitions of real property) are in compliance with rules established by the Texas Administrative Code and within the parameters specified in the project applications that were submitted to THECB.	NA	None	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2015	1502 UNT	Governance and Regulatory Compliance	UNT Presidents' Expenditures	UNT	Travel reimbursements were not reviewed and approved by the Chancellor as required by the terms of the employment agreements. Instead, travel reimbursements were reviewed and approved by Vice President for Finance or the Vice President for Research. We observed that the travel agreements prior to the end of 2014 were not reviewed and approved by the Chancellor. We observed that the Chancellor changed this practice and now all vouchers are approved by the Chancellor.	NA	None	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2015	1501 SYS	Governance and Regulatory Compliance	Chancellor's Expenditures Review	UNT System	None	NA	None	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2015	1508 HSC	Governance and Regulatory Compliance	HSC Presidents' Expenditures Review	UNT/HSIC	Auditor reviewed purchases made via the procurement (EProc) process and with the purchasing card (PCard) for fiscal year 2014. The results disclosed that PCard reconciliations did not contain a management signature. The auditor recommended that management during the review, who agreed to take the PCard refresher training course offered by the BSC and that future expense reports generated by the Citibank Global Management System are prepared and approved by the Chancellor. The auditor also recommended that future expense reports generated by the Citibank Global Management System are prepared and approved by the Chancellor.	NA	None	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2015	1504 DAL	Governance and Regulatory Compliance	UNT Dallas Presidents' Expenditures Review	UNT Dallas	Auditor reviewed purchases made via the procurement (EProc) process and with the purchasing card (PCard) for fiscal year 2014. The results disclosed that PCard reconciliations did not contain a management signature. The auditor recommended that management during the review, who agreed to take the PCard refresher training course offered by the BSC and that future expense reports generated by the Citibank Global Management System are prepared and approved by the Chancellor.	NA	None	NA	NA	NA	N/A
Internal	UNT System IT Shared Services	Fiscal Year 2015	NA	Information Technology	Local Audit of Phone Numbers and User Access - IT Shared Services	UNT System	NA	NA	NA	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2015	1508 UNT	Governance and Regulatory Compliance	Shared Services Investment Fund Review	UNT	Based on procedures performed the SMF was in compliance with the Donor's Agreement for calendar year 2014. The funds were appropriately accounted for in accordance with guidelines.	NA	None	NA	NA	NA	N/A

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2015	1506 UNT	Governance and Regulatory Compliance	FY 2014 Investments Audit	UNT	Accuracy of Quarterly Investment Report - The book and market value amounts reported in the Total Cash and Investment Amounts section of the Quarterly Investment Report for the period ending May 31, 2014, were not accurate.	Low	Implement a review process of the UNT Quarterly Investment Reports to assure the accuracy of information prior to the Board of Trustees' approval. The Quarterly Investment Report and the report on the Institutional Investment Disclosure website.	Concur. It is imperative that information reported by finance be complete and accurate. Implement a review process of investment reporting prior to issuance to the Board or posting to the public.	James Maudin, Associate Vice Chancellor for Treasury	11/20/2015	Closed
Internal	UNT System Internal Audit	Fiscal Year 2015	1526 UNTHSC & UNT	Governance and Regulatory Compliance	Cancer Prevention and Research Institute of Texas (CPRI)	UNTHSC	Non-compliance with Business Support Services (BSS) Purchasing Policy - BSS Purchasing Policies for obtaining gift cards used as research participant payments were not followed for 6 of 23 (26%) transactions reviewed for grant ID PP110390. A total of \$8,000 in cash was disbursed from BSS at the request of the University to an UNTHSC employee, who then purchased gift cards from a local vendor.	High	We recommend the Assistant Vice President of Research Administration at UNTHSC to re-educate faculty and staff on the correct process for the attainment of gift cards used as research participant payments.	Management agrees with the recommendation and will send a group email to all active award account holders and will post in the Daily Administration forum guidelines for purchasing gift cards for research participants.	Lorain Forberg, AVP Research Administration	11/23/2015	Closed
Internal	UNT System Internal Audit	Fiscal Year 2015	1526 UNTHSC & UNT	Governance and Regulatory Compliance	Cancer Prevention and Research Institute of Texas (CPRI)	UNT	Non-compliance with Business Support Services (BSS) Purchasing Policy - BSS Purchasing Policies for obtaining gift cards used as research participant payments were not followed for 6 of 23 (26%) transactions reviewed for grant ID PP110390. A total of \$8,000 in cash was disbursed from BSS at the request of the University to an UNTHSC employee, who then purchased gift cards from a local vendor.	High	We recommend the Assistant Vice President of Research Administration at UNTHSC to re-educate faculty and staff on policies related to the attainment of gift cards used as research participant payments.	Management agrees with the recommendation and will send a group email to all active award account holders and will post in the Daily Administration forum guidelines for purchasing gift cards for research participants.	Lorain Forberg, AVP Research Administration	11/23/2015	Closed
Internal	UNT System Internal Audit	Fiscal Year 2015	1526 UNTHSC & UNT	Governance and Regulatory Compliance	Cancer Prevention and Research Institute of Texas (CPRI)	UNTHSC	Non-compliance with Business Support Services (BSS) Purchasing Policy - BSS Purchasing Policies for obtaining gift cards used as research participant payments were not followed for 6 of 23 (26%) transactions reviewed for grant ID PP110390. A total of \$8,000 in cash was disbursed from BSS at the request of the University to an UNTHSC employee, who then purchased gift cards from a local vendor.	High	In addition, we recommend the Associate Vice Chancellor for Finance and Administration to re-educate staff on the review process of support documentation that is provided by UNT components to ensure it is appropriate based on the request.	Business Support Services (formerly Business Services Grant) concurs with the recommendation. We have notified our procurement staff of the expectation that they follow the current guideline associated with the gift card purchases. Additionally, we have also implemented a secondary approval process for all gift card purchases requests. The secondary approval must come from the Senior Director of Procurement, Director of Purchasing or Associate Vice Chancellor for Finance and Administration effectively immediately (10/29/2015).	Doreen Aher, Associate Vice Chancellor for Finance and Administration	10/29/2015	Closed
Internal	UNT System Internal Audit	Fiscal Year 2015	1526 UNTHSC & UNT	Governance and Regulatory Compliance	Cancer Prevention and Research Institute of Texas (CPRI)	UNT	Non-compliance with Business Support Services (BSS) Purchasing Policy - BSS Purchasing Policies for obtaining gift cards used as research participant payments were not followed for 6 of 23 (26%) transactions reviewed for grant ID PP110390. A total of \$8,000 in cash was disbursed from BSS at the request of the University to an UNTHSC employee, who then purchased gift cards from a local vendor.	High	In addition, we recommend the Associate Vice Chancellor for Finance and Administration to re-educate staff on the review process of support documentation that is provided by UNT components to ensure it is appropriate based on the request.	Business Support Services (formerly Business Services Grant) concurs with the recommendation. We have notified our procurement staff of the expectation that they follow the current guideline associated with the gift card purchases. Additionally, we have also implemented a secondary approval process for all gift card purchases requests. The secondary approval must come from the Senior Director of Procurement, Director of Purchasing or Associate Vice Chancellor for Finance and Administration effectively immediately (10/29/2015).	Doreen Aher, Associate Vice Chancellor for Finance and Administration	10/29/2015	Closed
Internal	UNT System Internal Audit	Fiscal Year 2015	1506 HSC	Governance and Regulatory Compliance	FY 2014 Investments Audit	UNTHSC	UNTHSC is in compliance with the PPA, Regents Rule 10.100, and the UNT System Policy 04e.2000. The audit report issued by Grant Thornton on August 12, 2015.	NA	None	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2015	1505 SYS	Governance and Regulatory Compliance	FY 2014 Investments Audit	UNT System	Compliance with System Policy Requirements - Based on Internal Audit findings, the resulting recalculation of short term and long term investment percentages for UNT System based on market values were 50.0% and 49.4% respectively. These percentage investment results were not within established Board approved investment range requirements for short and long term investments.	Low	Review the Investment of System Funds Regulation percentages to determine if the percentage requirement ranges should be updated to reflect the potential actual investment needs of the UNT System and its institutions.	Concur. System Regulation 04e.2000 is already under review for investment pool. In addition, the increased professional staffing in Treasury will allow for improved compliance with the current and future versions of the regulation.	James Maudin, Associate Vice Chancellor for Treasury	12/2/2015	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Reported	Audit Number	Audit Category	Report Name	Component Institution	Key Observation	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2015	15-03 DAL	Governance and Compliance	FY 2014 Investments Audit	UNT Dallas	UNT Dallas is in compliance with the FPA, Regenera Solar \$1,100, and the UNT 2010-2012 and 2013-2015 UNT Policies in compliance with state higher education investment reporting requirements including SAO Article III, Rider 5 requirements.	NA	None	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2015	15-031 UNT	Academic and Student	Office of Sustainability Audit	UNT	<ul style="list-style-type: none"> Three employees were paid from the Environmental Service Fee (ESF) fund while working on activities not eligible under the fund. The following specific issues were identified: <ul style="list-style-type: none"> A student employee was paid \$1,795 from the fund while working on a website not related to the fund. The Assistant Director was paid \$1,643 from the fund from January 2015 to May 2015 while working on activities not related to the fund. 	Moderate	<p>Recommendations to Hope Garcia, Executive Director of Student Affairs Administration:</p> <ol style="list-style-type: none"> Determine all payroll amounts incorrectly expensed to the fund and move to appropriate funding sources. 	Management agrees. Management agrees to locate a new fund that more appropriately aligns with increased expenses.	Elizabeth With, Vice President of Student Affairs and Hope Garcia, Executive Director of Student Affairs Administration	2/1/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2015	15-031 UNT	Academic and Student	Office of Sustainability Audit	UNT	<ul style="list-style-type: none"> Three employees were paid from the Environmental Service Fee (ESF) fund while working on activities not eligible under the fund. The following specific issues were identified: <ul style="list-style-type: none"> A student employee was paid \$1,919 from the fund while working on a website not related to the fund. The Assistant Director was paid \$1,643 from the fund from January 2015 to May 2015 while working on activities not related to the fund. 	Moderate	<p>Recommendations to Hope Garcia, Executive Director of Student Affairs Administration:</p> <ol style="list-style-type: none"> Determine all payroll amounts incorrectly expensed to the fund and move to appropriate funding sources. 	Management agrees. An advisor of the We Mean Green Fund (WMGF) will oversee activity of the WMGF Committee and provide guidance to committee on purpose of the fee and allowable purposes of the Environmental Service Fee (ESF) and ongoing training for returning and new committee members.	Hope Garcia, Executive Director of Student Affairs Administration and Gary Cooke, Student Coordinator of Sustainability	2/1/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2015	15-031 UNT	Academic and Student	Office of Sustainability Audit	UNT	<ul style="list-style-type: none"> Excess funds transferred from the Environmental Service Fee (ESF) fund to another department for an approved project were not claimed after project was completed. \$3,818 out of the total funds transferred for a project remained with the department when the project was complete. The excess funds were not transferred back to the fund. 	Low	<p>Recommendations to Hope Garcia, Executive Director of Student Affairs Administration:</p> <ol style="list-style-type: none"> Recover funds remaining after the project was completed. 	Management agrees. Management agrees to determine the department that was transferred funds and request the excess of \$3,818 be returned.	Elizabeth With, Vice President of Student Affairs and Hope Garcia, Executive Director of Student Affairs Administration	2/1/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2015	15-031 UNT	Academic and Student	Office of Sustainability Audit	UNT	<ul style="list-style-type: none"> Excess funds transferred from the Environmental Service Fee (ESF) fund to another department for an approved project were not claimed after project was completed. \$10 was used to pay for a parking pass. \$875 was used to purchase tablets. 	Low	<p>Recommendations to Hope Garcia, Executive Director of Student Affairs Administration:</p> <ol style="list-style-type: none"> Recover funds transferred for a project remained with the department when the project was complete. The excess funds were not transferred back to the fund. 	Management agrees. If funds are committed to an effort in partnership with another department, funds may only be used in one of two ways: <ol style="list-style-type: none"> Through DDO which lists exact line item costs. Through the WMGF Committee and ongoing training for returning and new committee members. 	Hope Garcia, Executive Director of Student Affairs Administration	2/1/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2015	15-031 UNT	Academic and Student	Office of Sustainability Audit	UNT	<ul style="list-style-type: none"> Two tablets and a parking pass were not eligible to be paid using Environmental Service Fee (ESF). \$10 was used to pay for a parking pass. \$875 was used to purchase tablets. 	Low	<p>Recommendations to Hope Garcia, Executive Director of Student Affairs Administration:</p> <ol style="list-style-type: none"> Recover funds transferred for a project remained with the department when the project was complete. The excess funds were not transferred back to the fund. 	Management agrees. An advisor of the We Mean Green Fund (WMGF) will oversee activity of the WMGF Committee and provide guidance to committee on purpose of the fee and allowable purposes through the Committee Bylaws and ongoing training for returning and new committee members.	Hope Garcia, Executive Director of Student Affairs Administration and Gary Cooke, Student Coordinator of Sustainability	2/1/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2015	15-031 UNT	Academic and Student	Office of Sustainability Audit	UNT	<ul style="list-style-type: none"> Two tablets and a parking pass were not eligible to be paid using Environmental Service Fee (ESF). \$10 was used to pay for a parking pass. \$875 was used to purchase tablets. 	Low	<p>Recommendations to Hope Garcia, Executive Director of Student Affairs Administration:</p> <ol style="list-style-type: none"> Recover funds transferred for a project remained with the department when the project was complete. The excess funds were not transferred back to the fund. 	Management agrees. An advisor of the We Mean Green Fund (WMGF) will oversee activity of the WMGF Committee and provide guidance to committee on purpose of the fee and allowable purposes through the Committee Bylaws and ongoing training for returning and new committee members.	Hope Garcia, Executive Director of Student Affairs Administration and Gary Cooke, Student Coordinator of Sustainability	2/1/2016	Closed
Internal	UNT/SEC Institutional Compliance Office	Fiscal Year 2015	NA	Governance and Regulatory Compliance	Safety and Security Audit (conducted by UNT/SEC Institutional Compliance Office)	UNT/SEC	Safety Coordinator Training needs to be completed by each Safety Coordinator	NA	Institutional Compliance recommends that the Safety Office maintains a process that ensures that each UNT/SEC Safety Coordinator is trained in the new Safety Training set to roll out in September 2015.	Matthew Morous, Director, Safety Office	9/2015	Closed	
Internal	UNT/SEC Institutional Compliance Office	Fiscal Year 2015	NA	Governance and Regulatory Compliance	Safety and Security Audit (conducted by UNT/SEC Institutional Compliance Office)	UNT/SEC	Institutional Compliance (IC) found that per the Fire Drill Report, corrective actions needed to be implemented and another Fire Drill should have been scheduled five to six months after to evaluate the efficacy of the corrective actions. Facilities had completed a Fire Drill in May 2015. UNT/SEC Safety Officer decided to perform the next drill in the building after the upgrade was completed. Funding for the fire alarm upgrade has been secured by facilities for fiscal year 2016. The engineering has been completed, the next steps in the installation. Brian Jordan is the Project Manager.	NA	IC recommends that the Safety Office conduct at least one emergency fire drill exercise in the PCC and other high occupancy, multi-story buildings.	Matthew Morous, Director, Safety Office	10/26/2016	Closed	
External	City of Denton	Fiscal Year 2016	NA	Governance and Regulatory Compliance	FPA, OIA, and Grease (FOU) Trap Inspection	UNT	No findings/issues identified.	NA	No findings/issues identified.	No findings/issues identified.	NA	NA	N/A

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	City of Denton	Fiscal Year 2016	7011.0640.0002.6192.7927	Governance and Regulatory Compliance	City of Denton NDV	UNT	During compliance monitoring activities conducted by the City of Denton on April 19, 2016, the mercury value for a sample collected from the UNT Sanitary Sewer System (SSS) was 0.0002 mg/L, which is above the maximum contaminant level (MCL) of 0.0002 mg/L established by the permit. As a result, UNT is Non-Compliant pursuant to City of Denton Code of Ordinances Chapter 26 Section 26-187, to wit: discharge of wastewater containing mercury exceeding established Local Limits into Sanitary Sewer System.	NA	Submit the following within 15 days of receipt of this notice: The problem per the Notice of Violation issued. The cause of the problem. The steps being taken to minimize or curtail the recurrence of the problem.	The university is taking a comprehensive, multiple-staged approach to minimizing future violations, both in the short and long term. In addition, the university is currently conducting a risk assessment which is required for all individuals who work in laboratory, engineering, and laboratory to facilitate compliance with environmental, and health and safety laws, following RCRA rules for segregating, packing, and disposing of waste to reduce the chance for pollutants to enter the sanitary sewer or storm water transport systems.	NA	NA	Closed
External	City of Denton	Fiscal Year 2016	7011.0640.0002.6192.7934	Governance and Regulatory Compliance	City of Denton NDV	UNT	During compliance monitoring activities conducted by the City of Denton between April 19, and April 21, 2016, the copper values for three samples collected on April 19, 2016, were 1.38 mg/L, 1.38 mg/L, and 1.38 mg/L, which are above the maximum contaminant level (MCL) of 0.05 mg/L established by the permit. As a result, UNT is Non-Compliant pursuant to City of Denton Code of Ordinances Chapter 26 Section 26-187, to wit: discharge of wastewater containing mercury exceeding established Local Limits into Sanitary Sewer System.	NA	Submit the following within 15 days of receipt of this notice: The problem per the Notice of Violation issued. The cause of the problem. The steps being taken to minimize or curtail the recurrence of the problem.	The university is taking a comprehensive, multiple-staged approach to minimizing future violations, both in the short and long term. In addition, the university is currently conducting a risk assessment which is required for all individuals who work in laboratory, engineering, and laboratory to facilitate compliance with environmental, and health and safety laws, following RCRA rules for segregating, packing, and disposing of waste to reduce the chance for pollutants to enter the sanitary sewer or storm water transport systems.	NA	NA	Closed
External	Nyers and Staffler LC on behalf of Texas Health and Human Services Commission (HHSC)	Fiscal Year 2016	UNTHSC.138980111.3.208	Governance and Regulatory Compliance	Verification of Patient Outcome Baseline Achievement: 1115 Waiver	UNTHSC	No errors found in baseline. Supporting documentation for sample baseline data had 2 identified issues. Baseline Rate = 703128	None		NA	NA	NA	N/A
External	Nyers and Staffler LC on behalf of Texas Health and Human Services Commission (HHSC)	Fiscal Year 2016	UNTHSC.138980111.3.204	Governance and Regulatory Compliance	Verification of Patient Outcome Baseline Achievement: 1115 Waiver	UNTHSC	Verify Patient Outcome Baseline Data - Project#138980111.3.204	None		NA	NA	NA	N/A
External	Nyers and Staffler LC on behalf of Texas Health and Human Services Commission (HHSC)	Fiscal Year 2016	UNTHSC.138980111.3.205	Governance and Regulatory Compliance	Verification of Patient Outcome Baseline Achievement: 1115 Waiver	UNTHSC	Verify that 72 Patients Received Services Between 10/1/2013 and 9/30/2014 - Project#138980111.3.205	None		NA	NA	NA	N/A
External	Nyers and Staffler LC on behalf of Texas Health and Human Services Commission (HHSC)	Fiscal Year 2016	UNTHSC.138980111.2	Governance and Regulatory Compliance	Verification of Community Based Clinics/Mobile Teams Milestone Achievement	UNTHSC	Verify that 2 community based clinics were established and providing services between 10/1/2013 and 9/30/2014. Verify that 4 mobile clinic teams were established and providing services between 10/1/2013 and 9/30/2014. - Project#138980111.2	None		NA	NA	NA	N/A
External	State Auditor's Office	Fiscal Year 2016	16-016	Finance	State of Texas Federal Requirements for the Student Financial Assistance Cluster for the Fiscal Year Ended August 31, 2015	UNT	Cost of Attendance: For 15 (04 percent) of 62 students tested, the University of North Texas (University) incorrectly or inconsistently calculated COA. Making incorrect COA calculations could result in under awards, or over awards of financial assistance.	NA	The University should: Include in its fee in COA only for students who receive loans and ensure that it does not make over awards of financial assistance as a result of removing the loan fees.	Cost of Attendance (COA) Management implemented changes last year in August 2014 to include loan fees in the COA budget for students who receive loans and ensure that the changes do not cause a result of removing the loan fees. Management modified the existing process to make adjustments more frequently throughout the year. Management implemented changes to identify students who have ISIR to calculate each student's COA based on the correct budget.	Dena Guman-Torres and Lucy Thompson	7/1/2015	Closed
External	State Auditor's Office	Fiscal Year 2016	16-016	Finance	State of Texas Federal Requirements for the Student Financial Assistance Cluster for the Fiscal Year Ended August 31, 2015	UNT	Cost of Attendance: For 15 (04 percent) of 62 students tested, the University of North Texas (University) incorrectly or inconsistently calculated COA. Making incorrect COA calculations could result in under awards, or over awards of financial assistance.	NA	The University should: Calculate each student's COA based on the correct budget.	Cost of Attendance (COA) Management implemented changes last year in August 2014 to include loan fees in the COA budget for students who receive loans and ensure that the changes do not cause a result of removing the loan fees. Management modified the existing process to make adjustments more frequently throughout the year. Management implemented changes to identify students who have ISIR to calculate each student's COA based on the correct budget.	Dena Guman-Torres and Lucy Thompson	7/1/2015	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Compliance Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Auditor's Office	Fiscal Year 2014	16-016	Finance	State of Texas Compliance with Federal Requirements for the Student Financial Assistance Cluster for the Fiscal Year Ended August 31, 2015	UNT	Satisfactorily Academic Progress: The University's SAP policy did not meet certain federal requirements at the beginning of the award year. As a result, for 2.19 percent of 62 students tested, the University did not correctly determine their SAP status.	NA	The University should: Continue to ensure that its SAP policy meets federal requirements by calculating the quantitative pace of students who are on probation. The University should ensure that the policy requires students to graduate within the maximum time frame, and making the SAP policy as strict as its academic policy.	Satisfactorily Academic Progress: Management implemented changes in November 2014, after it was identified by the auditors, to its SAP policy to meet federal requirements. Management also implemented changes to ensure that the policy requires students to graduate within the maximum time frame to make the SAP policy as strict as its academic policy.	Peter Guman-Torres and Lacey Thompson	11/7/2014	Closed
External	State Auditor's Office	Fiscal Year 2018	16-016	Finance	State of Texas Compliance with Federal Requirements for the Student Financial Assistance Cluster for the Fiscal Year Ended August 31, 2015	UNT	Federal Pell Grant: The University did not disburse Federal Pell Grant funds to one student who was eligible to receive those funds.	NA	The University should: Disburse Federal Pell Grant funds to all eligible students.	Management implemented changes to ensure the disbursement of Federal Pell Grant funds to all eligible students.	Amy Coyne and Lacey Thompson	7/7/2015	Closed
External	State Auditor's Office	Fiscal Year 2018	16-016	Finance	State of Texas Compliance with Federal Requirements for the Student Financial Assistance Cluster for the Fiscal Year Ended August 31, 2015	UNT	For 4.17 percent of 60 students who had a status change, the University submitted inaccurate effective dates to NSLDS. That occurred because the University had identified errors in its February 2015 enrollment report. That delay caused the effective dates to be reflected inaccurately in NSLDS. Not reporting effective dates accurately could affect determinations that guarantors, lenders, and other parties could make regarding the federal government's payment of interest subsidies.	NA	The University should accurately report effective dates to NSLDS.	Management is attentive to the U.S. Department of Education requirements regarding reporting dates of student enrollment status changes. Management has implemented a Clearinghouse Enrollment Report to help ensure the accuracy of enrollment change dates.	Bryan Heard	8/7/2015	Closed
External	State Auditor's Office	Fiscal Year 2018	16-017	Research	State of Texas Compliance with Federal Requirements for the Research and Development Cluster Ended August 31, 2015	UNT	During this audit, the University of North Texas's (University) Office of General Counsel disclosed to auditors that the University conducted an internal investigation related to the effort that one of its researchers charged to a federal award. The University determined that the associated payroll charges of \$68,236 resulted from the University's internal investigation. The University conducted an internal investigation related to the increased risk related to payroll charges. Auditors tested additional payroll related expenditures at the University but did not identify any additional instances of noncompliance or control deficiencies.	NA	2015-127 The University should: Coordinate the repayment of all questioned costs with the awarding agency.	The University of North Texas will refund \$68,236 in questioned costs from the next invoice submitted to the awarding agency. Supporting documentation will be provided to the State Auditor's Office.	Dr. David Schultz and Britt Krojczyk	2/29/2016	Closed
External	State Auditor's Office	Fiscal Year 2018	16-017	Research	State of Texas Compliance with Federal Requirements for the Research and Development Cluster Ended August 31, 2015	UNT	During this audit, the University of North Texas's (University) Office of General Counsel disclosed to auditors that the University conducted an internal investigation related to the effort that one of its researchers charged to a federal award. The University determined that the associated payroll charges of \$68,236 resulted from the University's internal investigation. The University conducted an internal investigation related to the increased risk related to payroll charges. Auditors tested additional payroll related expenditures at the University but did not identify any additional instances of noncompliance or control deficiencies.	NA	2015-127 The University should: Coordinate the repayment of all questioned costs with the awarding agency.	A regular training regimen is being implemented with all principal investigators involved in federally funded research. The training regimen includes a review of the University's supporting documentation for hours worked and allocation of effort.	Dr. David Schultz and Britt Krojczyk	9/30/2016	Closed
External	State Auditor's Office	Fiscal Year 2018	16-027	Finance	Agencies' Higher Education Institutions' and Community Colleges' Compliance with the Department Reporting Requirements	All Components	Were Not Fully Compliant with the Act (Source: State Auditor's Office review of the compliance audit reports that internal or external auditors issued.)	NA	None	NA	NA	NA	N/A
External	State Auditor's Office	Fiscal Year 2018	16-037	Finance	Federal Portion of the Statewide Single Audit Report for the Year Ended August 31, 2015	UNT	NA	NA	None	NA	NA	NA	N/A

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Risk Management Program Review	UNT Dallas	16-11-03 Safety: Fire Safety, Mechanical/Electrical Equipment Rooms - SORM noted during the consultation that mechanical, boiler, and electrical equipment ("chiller") rooms on campus were being used to store combustible materials such as cardboard boxes, paper, etc.	NA	SORM recommends that the university remove all combustible electrical equipment rooms in accordance with the NFPA standard referenced below. (Note: Chapter 10.8.5.2 of NFPA-101 states that electrical equipment in the room shall be permitted) In one area of the large mechanical room in Building 1, a room has been constructed which built to code would be sufficient to house combustible materials. Currently, it does not meet the code and combustible materials should be removed from this location. Reference: NFPA-1 (2015), "Fire Code," Chapter 10.8.5.1, 10.8.5.2	When have proposals and plans from 3 contractors to bring the storage area up.	Wayne Mcennis, Assistant Director for Facilities	4/30/2016	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Risk Management Program Review	UNT Dallas	16-11-03 Safety: Fire Safety, Emergency Equipment/Hazard Communication (Chiller Room #147) - SORM noted during the consultation that the Chiller Room (#147) was being used for equipment that is not intended for use in that room. This room has emergency procedures for a spill of the chiller chemical which include the use of Self-Contained Breathing Apparatus (SCBA) gear. However, gears to the gear is blocked by all of the fire equipment being stored in the room. In addition, there are no eyewash stations (MSDS) for an eyewash station present in the room.	NA	SORM recommends that the university immediately clean out this room such that the emergency procedures can be implemented as required, implement an OSHA-compliant hazard communication program, install an ANSI-compliant eyewash station in the room, and install an ANSI-compliant eyewash station in the room. All employees exposed to these hazards should be trained on safety policies and procedures in regard to the eyewash station program. Reference: OSHA 29 CFR 1910.1200, "Hazard Communication;" ANSI (SA, 3358.1 (2014), "Standard for Emergency Eyewash and Shower Equipment"	On 1/28/16 was submitted a RFP for a Modular building that will eliminate the need to store these items in the machine room.	Wayne Mcennis, Assistant Director for Facilities	Expected Imp. Date: 3/30/2016 Revised Imp. Date: 2/28/2017	All SORM recommendations are open until the next SORM visit. Management Update: The modular building was acquired a 860sq. ft. Modular building. This building was used to store all storage and items that were in Electrical and Mechanical rooms.
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Risk Management Program Review	UNT Dallas	16-11-03 Safety: Electrical Safety: Exterior Outlet (Outside of Kitchen) - SORM noted during the consultation that the exterior outlet of the kitchen was missing its required cover.	NA	SORM recommends that the university replace this cover in accordance with the NFPA standard referenced below. Reference: NFPA 70 (2014), "National Electrical Code," Article 406.9 (B) (1)	Recommendation has been implemented.	Wayne Mcennis, Assistant Director for Facilities	12/2/2015	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Risk Management Program Review	UNT Dallas	16-11-04 Safety: Fire Safety: Firestop in Telecommunications Room - SORM noted during the consultation that the firestop in the telecommunications room was missing its required cover.	NA	SORM recommends that the university firestop their telecommunications in accordance with the NFPA standard referenced below. Reference: NFPA-101 (2015), "Life Safety Code," Chapter 8.3.5.1	Recommendation has been implemented.	Wayne Mcennis, Assistant Director for Facilities	12/2/2015	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Risk Management Program Review	UNT Dallas	16-11-05 Safety: Fire Safety: Fire Alarm Equipment and Assemblies - SORM noted during the consultation that the fire doors and assemblies on campus were in varying states of compliance with the fire and life safety codes with regard to the display of their fire-resistance ratings.	NA	SORM recommends that the university conduct an inventory of all fire doors, equipment, and assemblies and then ensure that each are labeled in accordance with the NFPA standard referenced below. Reference: NFPA-101 (2015), "Life Safety Code," Chapters 8.3.1, 8.3.2, 8.3.2.2, 8.3.2.3, 8.3.2.3.1	We're going through the build of the university and after from construction to confirm the fire code ratings and have it displayed properly. Also working with UNT Risk Management to get them properly rated.	Wayne Mcennis, Assistant Director for Facilities	Expected Imp. Date: 3/30/2016 Revised Imp. Date: N/A	All SORM recommendations are open until the next SORM visit. Management Update: Provided O&L 0.18: The as built were checked and the items in question were not scheduled to be Fire Resistant.
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Risk Management Program Review	UNT Dallas	16-11-05 Safety: Light Bulb Cover (Mechanical Room Building #11) - SORM noted during the consultation that light bulbs in the southeast corner of the mechanical room in Building #11 were fewer than eight feet from ground level and were missing a required cover.	NA	SORM recommends that the university cover these bulbs, as per the OSHA standard referenced below. Reference: OSHA, 29 CFR 1910.305 (j)(1)(ii)	Recommendation has been implemented.	Wayne Mcennis, Assistant Director for Facilities	1/14/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Risk Management Program Review	UNT Dallas	16-11-08 Risk Management Policies/Procedures: Facilities Maintenance Staff - SOM noted during the consultation that there were several factors that may cause additional stresses on the structure of the building. The structure of the building may be affected by the following factors: a) Growth in the square footage of the university's structures, with buildings being constructed and/or the expansion of current facilities. b) New emphasis from the Texas State Fire Marshal's Office on the enforcement of the SFMO directive from 2006 about frequency of testing of insurance lift lines. c) The State Fire Marshal's Office, who is the Authority Having Jurisdiction regarding fire/life safety of all state assets. This standard works in conjunction with the previously adopted NFPA-101 (Life Safety Code), however, it covers many more hazards.	NA	Considering these and other factors, SOM recommends that the university use a formal risk assessment process to consider whether the current structure and size of the facilities are appropriate for the intended use. The university should be aware of the current structure and size of the facilities and the intended use of the facilities. Reference: NIOSH Guidelines, Volume III, Section Two, Chapter 2, Subchapter 2.4	Risk assessment to be completed by 7/31/16	Wayne Morris, Assistant Director for Facilities	Expected Imp. Date: 7/31/2016 Revised Imp. Date: N/A	All SOM recommendations are open until the next SOM visit. Management Update: No risk assessment was completed. However, we were recently allowed to hire 1 additional electrician and 1 Facilities Tech.
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Risk Management Program Review	UNT TSC	16-11-03 Safety: Fire Safety: Fire Extinguisher (Library) - SOM noted during the consultation that the fire extinguisher in the Center for Career and Leadership in the Library, was a carbon dioxide (CO2) type of extinguisher.	NA	SOM recommends that UNT TSC replace this extinguisher with an A/B/C Dry Chemical type of extinguisher due to the hazard associated with carbon dioxide extinguishers in this location, as per the NFPA standards referenced below. References: NFPA-101 (2015), "Life Safety Code," Chapters 9.3.5; 9.7.4.1; NFPA-10 (2013), "Standard for Portable Fire Extinguishers," Chapters 5.1.3.2.1; 5.1.1	Fire Extinguisher was replaced with the proper type.	Matthew Morous, Director, Safety Office	11/13/2015	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Risk Management Program Review	UNT TSC	16-11-02 Safety: Fire Safety: Exit Signs (PCC Building) - SOM noted during the consultation that the hallway on the first floor near room 174 was lacking a required exit sign to direct traffic in emergency situations.	NA	SOM recommends that the university install an approved, listed exit sign in accordance with the NFPA standard referenced below. References: NFPA-101 (2015), "Life Safety Code," Chapters 9.2.10; 7.10.2.1	Signs will be ordered and installed by facilities.	Matthew Morous, Director, Safety Office	1/31/2016	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Risk Management Program Review	UNT TSC	16-11-03 Safety: Fire Safety: Extinguisher Plate (PCC Building) - SOM noted during the consultation that an extinguisher plate was missing from the fire extinguisher in the first floor of the PCC building, near room 174.	NA	SOM recommends that the university replace this extinguisher plate in accordance with the NFPA standard referenced below. References: NFPA-101 (2015), "Life Safety Code," Chapters 4.6.12.4.9; 7.11.1; NFPA-13 (2005), "Standard for the Installation of Sprinkler Systems," Chapter 6.2.7	Extinguisher plate was replaced.	Matthew Morous, Director, Safety Office	11/6/2015	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Risk Management Program Review	UNT TSC	16-11-03 Safety: Electrical Safety: Junction Box Cover (RES Building) - SOM noted during the consultation that a junction box in room 1M3 on the first floor of the RES building was missing its required cover.	NA	SOM recommends that the university cover the junction box in accordance with the NFPA standard referenced below. Reference: NFPA-70 (2014), "National Electrical Code," Article 314.28(C)	Cover was replaced by facilities.	Matthew Morous, Director, Safety Office	11/17/2015	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Risk Management Program Review	UNT TSC	16-11-05 Safety: Fire Safety: Exit Signs (PCC Building) - SOM noted during the consultation that many of the exit signs at the end of the hallways in the PCC Building were insufficiently lit and some were pointing in the wrong direction for egress.	NA	SOM recommends that the university replace all exit signs that are not illuminated in accordance with the NFPA standard below, and ensure that the chevrons point in the correct direction of travel. Reference: NFPA-101 (2015), "Life Safety Code," Chapters 9.2.10; 7.10.5.1	Signs will be ordered and installed by facilities.	Matthew Morous, Director, Safety Office	1/31/2016	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Risk Management Program Review	UNT TSC	16-11-05 Safety: Chemical Safety/Hazard Communication: Eyewash Stations (RES Building) - SOM noted during the consultation that many of the eyewash stations in the RES Building had not been inspected and/or adjusted to 2015.	NA	SOM recommends that the university conduct documented inspections of these eyewash stations with a frequency in accordance with the manufacturer's specifications and the ANSI Reference: ANSI/ISEA (2014), #358.1, "Standard for Emergency Eyewash and Shower Equipment"	The Safety Office has created an inspection checklist with frequencies for eyewashes and safety showers, and will conduct the inspections according.	Matthew Morous, Director, Safety Office	11/30/2015	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Risk Management Program Review	UNT TSC	16-11-07 Safety: Fire Safety: Mechanical/Boiler/Electrical Equipment (Boiler Room) - SOM noted during the consultation that the boiler room was not adequately protected from fire. The boiler room was being used to store combustible materials, such as cardboard boxes, paper, etc.	NA	SOM recommends that the university remove all combustible materials from the boiler room in accordance with the NFPA standard referenced below. Reference: NFPA-101 (2015), "Life Safety Code," Chapter 10.10.9.5.2	Combustible materials have been removed from mechanical/electrical boiler room.	Matthew Morous, Director, Safety Office	12/4/2015	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Risk Management Program Review	UNT TSC	16-11-08 Safety: Occupational Noise: Testing (EAB Boiler Room) - SOM noted during the consultation that the EAB Boiler Room was an area of concern with regard to excess occupational noise.	NA	SOM recommends that the university measure the noise levels in this area as per the OSHA standard referenced below, and implement a hearing protection program above the threshold. Reference: OSHA, 29 CFR 1910.95, "Occupational Noise Testing"	Noise levels were measured and were determined to be below the OSHA threshold for implementing a hearing protection program. A hearing protection program above the threshold will be conducted on proper usage of hearing protection for employees who may work in that area.	Matthew Morous, Director, Safety Office	12/11/2015	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Risk Management Program Review	UNT TSC	16-11-05 Safety: Fire Safety: Electrical Panelboards (EAB Building) - SOM noted during the consultation that an electrical panelboard in room 5ME1 was missing a list of what each circuit breaker controls.	NA	SOM recommends that the university have the panelboard in accordance with the NFPA standard referenced below. Reference: NFPA-70 (2014), "National Electrical Code," Article 408.4	The Facilities Electrician has been assigned to properly label the panel board	Matthew Morous, Director, Safety Office	1/23/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Review was Based	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	CPRT	Fiscal Year 2016	NA	Research	Cancer Prevention and Tobacco Program-Specific Audit Report	UNTHSC, UNT	2014-003 Condition—One employee on the FY 2014 Time and Effort budget was not included in the approved Personnel Level of Effort budget. Additionally, two Research Assistants were not included in the approved Personnel Level of Effort budget. Questioned Costs - \$3,322.15 Context - The University added a second Program Coordinator to the program in 2013. The University is currently reviewing the Personnel Level of Effort budget. CPRT requires notification of all changes in personnel. Changes in key personnel that dedicate at least 10% of their time to a CPRT approved project or program must also be communicated in writing to CPRT. This audit was outsourced to BKD, LLP.	None	None	NA	NA	NA	Closed
External	Food and Drug Administration	Fiscal Year 2016	UNTHSC: Protocol Compliance	Governance and Regulatory Compliance	Protocol Compliance; TCOM/Medical Education	UNTHSC	None	NA	None	NA	NA	NA	N/A
External	International Association of Business Schools Administrators	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Review for IACLEA Accreditation	UNTHSC	IACLEA Accreditation	None	None	NA	NA	NA	N/A
External	Department of Education	Fiscal Year 2016	NA	Finance	Financial Aid Audit	UNT Dallas	No findings/deficiencies.	None	None	NA	NA	NA	N/A
External	State Fire Marshal's Office	Fiscal Year 2016	RB011761F	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNT Dallas	Building One - Finding 1: The building was inspected for the fifth time with the following previously listed violations not corrected. Please respond to this office within 30 days of receipt of this report, detailing your intentions to correct the violations and a new timeline for their completion. The original inspection was conducted in July of 2013. Timelines for corrective actions supplied by the University are not being met. The UNT System Fire Marshal has been notified of the lack of correcting the outstanding violations by the UNT Dallas campus staff. The fire doors at the following locations are missing the bottom vertical rod and floor latching point or have not had fire pins installed. Double doors by rooms 362 and 381 corridor and stairwell.	NA	NFA 101, Life Safety Code, Chapter 8.3.3 and NFA 80 Standard for Fire Doors and other Opening Protectives	NA has corrected... Vertical rods and floor latching were installed earlier this year.	Wayne McNeill, Assistant Director for Facilities	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RB011761F	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNT Dallas	Building One - Finding 2: Two buildings were re-inspected for the fifth time with the following previously listed violations not corrected. Please respond to this office within 30 days of receipt of this report, detailing your intentions to correct the violations and a new timeline for their completion. The original inspection was conducted in July of 2013. Timelines for corrective actions supplied by the University are not being met. The UNT System Fire Marshal has been notified of the lack of correcting the outstanding violations by the UNT Dallas campus staff. The area under the stairwell on the first floor has been enclosed and is used for storage. The entrance to this area is located in the stairwell. The enclosure has been removed however storage still remains under the stairs.	NA	NFA 101, Life Safety Code, Chapters 392.2.3.1, 72.2.3.2 and 72.2.3.1	The enclosed storage under the stairwell has been removed.	Wayne McNeill, Assistant Director for Facilities	NA	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Response Period	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2016	RB011761F	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNT Dallas	Founders Hall - Finding 1: Two buildings were re-inspected for the fire alarm system. The fire alarm system was inspected and found to be in compliance. Please respond to this office within 30 days of receipt of this report, detailing your intentions to correct the violations and a new timeline for their completion. The original inspection was conducted in July of 2013. Timelines for corrective actions supplied by the University are not being met. The UNT System Fire Marshal has been notified of the lack of correcting the outstanding violations by the UNT Dallas campus staff. The fire doors throughout the building are missing the bottom vertical rod and floor latching point.	NA	NFPA 101, Life Safety Code, Chapters 8.3.3, Land NFPA 80 Standard for Fire Doors and other Opening Protectives Building Services Violation	There was one set of fire doors that were identified needing the bottom vertical rod and that has been installed.	Wayne Menzies, Assistant Director for Facilities	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RB011762F	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNT Dallas	Founders Hall - Finding 2: Two buildings were re-inspected for the fire alarm system. The fire alarm system was inspected and found to be in compliance. Please respond to this office within 30 days of receipt of this report, detailing your intentions to correct the violations and a new timeline for their completion. The original inspection was conducted in July of 2013. Timelines for corrective actions supplied by the University are not being met. The UNT System Fire Marshal has been notified of the lack of correcting the outstanding violations by the UNT Dallas campus staff. There is unapproved storage of miscellaneous items in mechanical rooms and penthouses.	NA	NFPA 101, Life Safety Code, Chapters 9.6.1, 9.1.2, 9.1.3, NFPA 70, National Electrical Code and NFPA 96A, Standards for the Installation of Air Conditioning and Ventilating Systems	We will have the storage issue in the building and the work in issue in a Modular building to close the items. I am actually meeting with the company on Tuesday 10/19/16, to walk the site where it will be placed.	Wayne Menzies, Assistant Director for Facilities	Expected Imp. Date: NA Revised Imp. Date: N/A	All GORM recommendations are open until the next SOMM visit. Management Update Provided 04.10.18: In Fall of 2016, we installed a new fire alarm system in the Modular building. This acquisition allowed us to remove all storage and items that were in electrical and mechanical rooms.
External	Department of the Treasury Internal Revenue Service	Fiscal Year 2016	N/A	Finance	Tax Exempt and Government Entities Examinations	UNT Dallas	The audit identified the deficiencies discussed in the enclosed addendum. To avoid penalties, loss of exempt status, or both, you must comply with the requirements specified in the addendum. We audited the returns for the tax periods listed above and determined your organization continues to qualify for exemption from federal income tax under section 510(c)(3) of the Internal Revenue Code. We accept your returns as filed.	NA	During the examination of your Form 990, Return of Organization Exempt from Income Tax, for tax year ended December 31, 2014, we noted the following: 1) During our examination of the organization's Form 990, and related records, we determined that when you completed Schedule A, "Reason for Exemption from Section Status", you checked the box for 170(b)(1)(A)(i) of the Code. The examination and interview held that you are not a church. You also indicated that you are a Type III functionally integrated, a supporting organization. Based on the information provided, we determined that the classification of your organization's exempt status is Section 509(e)(3) and 170(b)(1)(A)(iv). Accordingly, please check the correct box in the future.	NA	NA	N/A	
External	Department of the Treasury Internal Revenue Service	Fiscal Year 2016	N/A	Finance	Tax Exempt and Government Entities Examinations	UNT Dallas	The audit identified the deficiencies discussed in the enclosed addendum. To avoid penalties, loss of exempt status, or both, you must comply with the requirements specified in the addendum. We audited the returns for the tax periods listed above and determined your organization continues to qualify for exemption from federal income tax under section 510(c)(3) of the Internal Revenue Code. We accept your returns as filed.	NA	During the examination of your Form 990, Return of Organization Exempt from Income Tax, for tax year ended December 31, 2014, we noted the following: 2) During our review of your Form 990, we noted that some information was not reported on your return. You should make certain that accurate information is reported on your return in the future. Omitting material information from your Form 990 may subject you to penalties under section 6651(c) of the Internal Revenue Code of 1986.	NA	NA	N/A	
External	CPRT	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Random Disk Review	UNT/ESC	None	NA	None	NA	NA	NA	N/A
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT System	ESC-11-01 Safety: Fire Alarm System (Woodhall - ESC) SOMM noted during the consultation that the fire alarm system was overdue for its annual inspection.	NA	SOMM recommends that the university have the system inspected as soon as possible and annually thereafter, as per the NFPA standards referenced below. NFPA standards referenced below: NFPA 72, National Fire Alarm and Signaling Code - Chapter 6.6.3.6.4.4, Article 7.2.0.10, "In-Room Fire Alarm and Signaling Code," Chapter and Table 4.3.1	NA	NA	Closed	

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Review Period Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observation	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT System	16-11-03 Safety: Fire Safety: Exit Sign (Marquiss - BSC) - SORM noted during the consultation that the exit sign on the part of the office near room 4007, the electrical room, a path of emergency egress is not clearly identified by exit signage.	NA	SORM recommends that the university install approved listed, UL listed exit signs that are clearly visible from the building. Exit signs should be placed in accordance with the requirements of the NFPA standard referenced below. Reference: NFPA-101 (2015), "Life Safety Code," Chapter 8.5.1.	NA	NA	Closed	
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Risk Management Program Review	UNT Dallas	16-11-03 Safety: Electrical Safety: Exterior Outlet (Outside of Kitchen) - SORM noted during the consultation that an exterior outlet outside of the kitchen was missing its required cover.	NA	SORM recommends that the university replace this cover in accordance with the NFPA standard referenced below. Reference: NFPA-70 (2014), "National Electrical Code," Article 406.9 (B)(1).	Recommendation has been implemented.	Wayne Mcennis, Assistant Director for Facilities	12/2/2015	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT System	16-11-03 Safety: Fire Safety: Escalation Panel (Woodhall - BSC) - SORM noted during the consultation that an escalation panel was missing over a sprinkler head in room 4202 A.	NA	SORM recommends that the university replace this escalation panel in accordance with the NFPA standard referenced below. Reference: NFPA-101 (2015), "Life Safety Code," Chapters 8.5.1.4, 9.7.1.1, NFPA-13 (2016), "Standard for the Installation of Sprinkler Systems," Chapter 6.2.7.	NA	NA	Closed	
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	16-11-03 Safety: Fire Safety: Firestops in Mechanical Rooms (West and Chilton halls) - The mechanical and electrical rooms in West Hall and Chilton Hall were lacking required firestops on wall penetrations.	NA	SORM recommends that the university determine the fire rating of the door and then label it according to the NFPA standard referenced below. Reference: NFPA-101 (2015), "Life Safety Code," Chapter 8.3.1.	All penetrations will be fire stopped.	Randy Fife, Senior Director, Facilities Maintenance	4/7/2016	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	16-11-03 Safety: Fire Safety: Fire Door (Mechanical Room - West Hall) - SORM noted during the consultation that a fire door in a mechanical room of West Hall was not displaying its fire rating.	NA	SORM recommends that the university determine the fire rating of the door and then label it according to the NFPA standard referenced below. Reference: NFPA-101 (2015), "Life Safety Code," Chapter 8.3.1.	The fire rating of the door will be determined and posted.	Randy Fife, Senior Director, Facilities Maintenance	1/29/2016	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Risk Management Program Review	UNT Dallas	16-11-03 Safety: Fire Safety: Firestops in Telecommunications Room - SORM noted during the consultation that telecommunications room penetrations on wall penetrations on wall penetrations inside out to data-communications wing.	NA	SORM recommends that the university determine the fire rating of the door and then label it according to the NFPA standard referenced below. Reference: NFPA-101 (2015), "Life Safety Code," Chapter 8.3.1.	Recommendation has been implemented.	Wayne Mcennis, Assistant Director for Facilities	12/2/2015	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	16-11-03 Safety: Fire Safety: Evacuation Diagrams and Room Numbers - SORM noted during the consultation that the evacuation diagrams provided in the South wing of West Hall indicate room numbers with a fourth floor designation, even though they are on the first floor of the building. Since this can be extremely confusing to emergency responders, the diagrams should be updated to reflect the actual floor with the particular lay-out of this building as might be desired.	NA	SORM recommends that the university consider the feasibility of redesigning the diagrams to reflect the actual floor with the particular lay-out of this building as might be desired.	Will redesign the south wing numbers to reduce confusion.	Randy Fife, Senior Director, Facilities Maintenance	8/31/2016	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Risk Management Program Review	UNT Dallas	16-11-03 Safety: Fire Safety: Fire Doors, Equipment, and Assemblies - SORM noted during the consultation that the fire doors and fire resistance ratings of the doors in the mechanical rooms in the Marquiss Hall and Marquis Hall did not have the required fire and life safety codes with regard to the display of their fire resistance ratings.	NA	We still haven't been able to verify through the submittals. All fire doors, equipment, and assemblies are then ensure that they are in accordance with the NFPA standard referenced below. Reference: NFPA-101 (2015), "Life Safety Code," Chapter 8.3.1, 8.3.3.2, 8.3.3.2.2, 8.3.3.2.3, 8.3.3.2.3.1.	We still haven't been able to verify through the submittals.	Wayne Mcennis, Assistant Director for Facilities	Expected Imp. Date: 3/30/2016 Revised Imp. Date: N/A	All SORM recommendations are open and will be completed by SORM visit.
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	16-11-03 Safety: Electrical Safety: Water in Mechanical Rooms (Sycamore Hall and Marquis Hall) - SORM noted during the consultation that a significant amount of water was on the floor of the mechanical rooms in Sycamore and Marquis Halls.	NA	SORM recommends that the university determine the source of the water leakage and prevent the accumulation by either repairing the leak or improving the drainage process in these areas.	Condensation leak on AHU1 at Marquis has been repaired. Clogged floor drain at Sycamore has been cleared.	Randy Fife, Senior Director, Facilities Maintenance	12/7/2015	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Risk Management Program Review	UNT Dallas	16-11-03 Safety: Light Bulb Cover (Mechanical Room-Building #1) - SORM noted during the consultation that light bulbs in the southeast corner of the room were missing their light bulb covers. The light bulbs were on the ground level and were missing a required cover.	NA	SORM recommends that the university cover these bulbs, as per the OSHA standard referenced below. Reference: OSHA, 29 CFR 1910.333 (b) and 302 (b).	Recommendation has been implemented.	Wayne Mcennis, Assistant Director for Facilities	1/7/2016	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	16-11-03 Safety: Fire Alarm System (Matthews Hall) - SORM noted during the consultation that the fire alarm system in Matthews Hall was overdue for its annual inspection.	NA	SORM recommends that the university have the system inspected annually thereafter, as per the NFPA standard referenced below. Reference: NFPA-101 (2015), "Life Safety Code," Chapter 9.6.1.3, 9.6.1.4; NFPA-72 (2016), "National Fire Alarm and Signaling Code," Chapter 10 and Table 10.3.1.	NA	Randy Fife, Senior Director, Facilities Maintenance	11/25/2015	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Risk Management Report	UNT Dallas	16-11-03 Safety: Fire Safety: Storage Units: Hallways - SORM noted	NA	SORM recommends that the university conduct with the fire department to remove the unsecured and		Wayne Mcennis, Assistant	1/29/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observation	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Risk Management Program Review	UNT Dallas	16-11-08 Risk Management: Policies/Procedures: Facilities Management: The current fire safety code is not being updated. There were several factors that make use of existing codes on current structures of the facilities maintenance staff, potentially resulting in required maintenance procedures not being completed as required by various safety codes. These factors include but are not limited to: a) Growth in the square footage of the university's structures, with new buildings being constructed and/or the expansion of current facilities. b) New emphasis from the Texas State Fire Marshal's Office on the testing of natural gas lines. c) Adoption of NFPA 1 (Fire Code-2012) as the inspection document of the State Fire Marshal's Office, who is the Authority Having Jurisdiction regarding the fire safety code. d) The current fire code works in conjunction with the model standard NFPA 101 (Life Safety Code), however, it covers many more hazards.	NA	Considering these and other factors, SORM recommends that the university consider whether the current fire code is adequate to meet these needs and others that may emerge over time. Reference: NFPA 101 (2015), "Life Safety Code," Chapter 7, Subchapter 7.4	Risk assessment to be complete by 7/31/16	Wayne Mcenis, Assistant Director for Facilities	Expected Imp. Date: 7/31/2016 Revised Imp. Date: N/A	All SORM recommendations are open and the current SORM visit. Management Update Provided 04.10.18. New staff has been added to help relieve the current workload. Plans to accommodate the growth are being considered.
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	16-11-09 Safety: Light Bulb (Crumley Hall) SORM noted during the consultation that a light bulb in room A/C 3 of Crumley Hall fewer than eight feet from ground level was missing a required cover.	NA	SORM recommends that the university cover this bulb, as per the OSHA standard referenced below. Reference: OSHA, 29 CFR 1910.305 (j)(1)(ii)	NA	Ready File, Senior Director, Facilities Maintenance	12/23/2015	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	16-11-10 Safety: Electrical Safety: Open Junction Boxes (Clark Hall) SORM noted during the consultation that junction boxes in the boiler room of Clark Hall were uncovered.	NA	SORM recommends that the university cover these junction boxes in the boiler room of Clark Hall as per the National Electrical Code, Article 314.2(B)	NA	Ready File, Senior Director, Facilities Maintenance	12/23/2015	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	16-11-11 Safety: Fire Safety: Fire Suppression System (Clark Hall Bakery) SORM noted during the consultation that the mobile cooling equipment beneath the nozzles of the fire suppression system of the Clark Hall Bakery did not have its proper location marked relative to the nozzles.	NA	SORM recommends that the university have a qualified individual determine the exact error location for this piece of equipment, and then mark the location so that the fire suppression system will function as intended by the manufacturer in the event of a fire. Reference: NFPA 101 (2015), "Life Safety Code," Chapter 50.1.1, 50.6.1.2.2, 50.6.1.2.3, 50.6.1.2.3.1	Correct proper location for the fire suppression system of the Clark Hall Bakery will be determined and marked by a qualified professional.	Ready File, Senior Director, Facilities Maintenance	2/12/2016	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	16-11-11 Safety: Fire Safety: Electromagnetic Door Release/Holder (Clark Hall) SORM noted during the consultation that an electromagnetic door release/holder operates as intended by the manufacturer as per the NFPA standard referenced below. Reference: NFPA 101 (2015), "Life Safety Code," Chapter 12.4.6.3.1, 12.4.6.3.2, 12.4.6.3.3, 12.4.6.3.7.2	NA	Will fix the electromagnetic door.	NA	Ready File, Senior Director, Facilities Maintenance	3/31/2016	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	16-11-12 Safety: Fire Safety: Exit Signs (Clark Hall) SORM noted during the consultation that an exit sign in front of room 311 in Clark Hall is not sufficiently lit. b) SORM noted that an exit sign near room 354 had its chevrons indicating a wrong direction of travel.	NA	SORM recommends that the university install an approved, lit-up exit sign in front of room 311 in Clark Hall as per the requirements of the NFPA standard referenced below. SORM recommends that the university ensure that this sign indicates the correct direction of travel for emergency situations. Reference: NFPA 101 (2015), "Life Safety Code," Chapters 29.2.1.1, 29.2.10, 7.10, 7.10.5.1, 7.10.5.2	NA	Ready File, Senior Director, Facilities Maintenance	12/23/2015	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	16-11-13 Safety: Machine Safety: Machine Guard (McConnell Hall) SORM noted during the consultation that a machine guard handler in the boiler room of McConnell Hall was missing a required guard.	NA	SORM recommends that the university gear of this part in the boiler room of McConnell Hall as per the OSHA standard referenced below. Reference: OSHA, 29 CFR 1910.212(l)(1)	Replace missing guard.	Ready File, Senior Director, Facilities Maintenance	1/29/2016	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	16-11-14 Safety: Fire Safety: Fire Extinguisher - Monthly Inspections (McConnell Hall) SORM noted during the consultation that a fire extinguisher in the boiler room of McConnell Hall was overdue for its monthly required inspection.	NA	SORM recommends that the university conduct documented inspections of this fire extinguisher, as per the NFPA standards referenced below. Reference: NFPA 101 (2015), "Life Safety Code," Chapters 99.3.5, 99.3, NFPA 10 (2013), "Standard for Portable Fire Extinguishers"	NA	Ready File, Senior Director, Facilities Maintenance	12/23/2015	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	16-11-15 Risk Management: Property Conservation: Roofing (McConnell Hall) SORM noted during the consultation that the roof of McConnell Hall was exhibiting "bubbling" in many places.	NA	SORM recommends that the university consider the feasibility of contacting with a licensed roofing contractor to determine the best course of action regarding these early signs of roofing weakness. Reference: NFPA 101 (2015), "Life Safety Code," Chapter 11, "Property Conservation Program"	Will conduct a feasibility study to determine the best course of action.	Ready File, Senior Director, Facilities Maintenance	6/31/2016	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	16-11-16 Safety: Electrical Safety: Panelboard Latches (McConnell Hall) SORM noted during the consultation that two electrical panelboard doors in McConnell Hall (room A/C 5) were inoperably locked by having non-functional latches.	NA	SORM recommends that the university replace these latches to ensure that the panelboards can be opened, as per the NFPA standard referenced below. Reference: NFPA 70 (2014), "National Electrical Code," Article 240.24(A)	Non-functioning latches will be replaced.	Ready File, Senior Director, Facilities Maintenance	1/29/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	16-11-17 Safety: Electrical Safety: Water Leak (McCord Hall) McConnell Hall had a significant leak above one of the ceiling tiles, resulting in rust and water accumulation above the ceiling.	NA	SORM recommends that the university determine the source of the leak and ensure that the water will no longer present these hazards in this room. References: RMTSA Guidelines, Volume II, Section One, Chapter 1, Property Conservation Program	NA	Randy Fife, Senior Director, Facilities Maintenance	12/23/2015	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	16-11-18 Safety: Electrical Safety: GFCI for Electric Water Fountains (Chilton Hall) SORM noted during the consultation that at least a electric water fountain outlets in Chilton Hall were not protected by GFCI, as required.	NA	All circuits will be replaced with GFCI circuits.	NA	Randy Fife, Senior Director, Facilities Maintenance	9/7/2016	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	16-11-19 Risk Management: Policies/Procedures: Expressing Breast (SORM noted during the consultation that although the university has procedures in place for allowing employees to express breast milk in the workplace, there is not currently a written policy in place to address this issue.	NA	SORM recommends that the university implement such a written policy in order to comply with Texas Bill Act, passed by the legislature in 2015. Reference: House Bill 786, Texas State Legislature, 2015. http://www.legis.state.tx.us/lookdoc.do?billText=pdf/HB0786.pdf&page=50	NA	Randy Fife, Senior Director, Facilities Maintenance	8/31/2016	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	16-11-20 Safety: Electrical Safety: Exterior Outlet Near Goobey Chapel SORM noted during the consultation that an exterior outlet near Goobey Chapel was missing its required cover.	NA	SORM recommends that the university install a cover in accordance with the NFPA standard referenced below. Reference: NFPA-70 (2014), "National Electrical Code," Article 405.2 (B)(1)	NA	Randy Fife, Senior Director, Facilities Maintenance	12/23/2015	Closed
External	State Office of Risk Management	Fiscal Year 2016	NA	Governance and Regulatory Compliance	On-Site Consultation Report	UNT	16-11-21 Safety: Electrical Safety: Facilities SORM noted during the consultation that there were several factors that may cause additional stresses on the current structure of the facilities maintenance staff, potentially resulting in required safety codes. These factors include but are not limited to: a) Growth in the square footage of the university's structures, with new buildings being constructed and/or the expansion of current buildings. b) New emphasis from the Texas State Fire Marshal's Office on the testing of natural gas lines. c) Adoption of NFPA 1 (Fire Code-2012) as the inspection document for fire safety. d) Jurisdiction regarding fire safety of all state assets. This standard works in conjunction with the previously-adopted NFPA-101 (Life Safety Code), however, it covers many more hazards and conditions.	NA	SORM recommends that the university use a formal risk assessment process to consider whether the current structure and size of the facilities maintenance staff is and will continue to be adequate to meet these needs and others that may emerge over time. References: RMTSA Guidelines, Volume II, Section Two, Chapter 2, Subchapter 2.4	NA	Randy Fife, Senior Director, Facilities Maintenance	7/31/2016	Closed
External	Hartford Steam Boiler Inspection and Insurance Company (HSB), CHA Group Inc., CHA Healthcare	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Loss Prevention Report - Healthcare Risk Control	UNT	31 reports/audits performed; 110 findings identified; for more detailed information please see the reports from Risk Management.	NA	NA	NA	NA	NA	N/A
External	Hartford Steam Boiler Inspection and Insurance Company (HSB), CHA Healthcare	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Loss Prevention Report - Healthcare Risk Control	UNTISC	6 reports/audits performed; 6 findings identified; for more detailed information please see the reports from Risk Management.	NA	NA	NA	NA	NA	N/A
External	State Fire Marshal's Office	Fiscal Year 2016	HRD12282E	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Brace Hall is a 247 room four story structure classified as a mixed occupancy consisting of existing dormitory, and assembly. Features of fire protection include a complete fire alarm system, sprinkler system, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	WARNING 1 Means of egress area located under the kitchen has only one means of egress and was formally considered a normally unoccupied space that was used for storage only. Within the last year or so two offices and a large dishwashing unit were located in this space. The building is currently occupied as a residence since employees now work in the space and a second approved means of egress is now required. NFPA 101, Life Safety Code, Chapters 292.4.1 and 74.1.1	NA	Facilities has met with architect. May require design review board approvals.	9/31/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	HRD12283E	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Brace Hall is a 247 room four story structure classified as a mixed occupancy consisting of existing dormitory, and assembly. Features of fire protection include a complete fire alarm system, sprinkler system, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	WARNING 2 The music practice cube area on the first floor has only one means of egress. NFPA 101, Life Safety Code, Chapters 292.4.1, 7.4.1.1 and 71.5.1	NA	Facilities has met with architect. May require design review board approvals.	8/31/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observation	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2016	RR012282E	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four-story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 3 Emergency escape routes provided with a required exit path leading to an immediately adjacent exit door from each sleeping room. A diagram shall reflect the actual floor arrangement, room identification and exit path travel from each room. NFPA 101, Life Safety Code, Chapter 29.7.4.1	Initial exit path diagram in each room.	NA	12/31/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR01509A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four-story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 11 Smoke doors in the following areas do not close properly: 1) Corridor smoke door by room A325 2) Fourth floor stairwell fire door "D" wing 3) Stairwell door by room A325 NFPA 1, Fire Code, Chapter 12.4.1.1, 12.4.6.3.1 and 12.4.6.5.2(6)	Facilities will repair doors.	NA	10/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR01509A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four-story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 1 Means of egress was blocked under the kitchen bar only one unoccupied space that was used for storage only. Two offices and a large dishwashing unit have been installed in the area. This changed the area use to a normally occupied area since means of egress is now required. (2013 violation) NFPA 1, Fire Code, Chapter 14.9.1.1	UNT will evaluate the best course of action for completion.	NA	1/7/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR01509A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four-story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 15 On "X" mark, the third floor corridor lacks an adequate number of emergency lighting units. NFPA 1, Fire Code, Chapter 14.13.1.1 and NFPA 101, Life Safety Code, Chapters 29.2.3.1 and 73.2.1	Facilities to add lighting.	NA	10/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR01509A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four-story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 7 Fire alarm control panels display fire system troubles. NFPA 1, Fire Code, Chapter 4.5.8.1	Facilities will determine cause of system trouble and make repairs if needed.	NA	10/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR01509A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four-story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 13 Emergency exit doors are blocked by northeast cafeteria emergency exit doors. (Corrected at the time of the inspection) NFPA 1, Fire Code, Chapters 4.4.3.1.1 and 14.4.1	Corrected at the time of inspection.	NA	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR01509A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four-story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 14 The kitchen UL 300 wet chemical fire suppression system that can result in the shutdown of the sprinkler system. NFPA 1, Fire Code, Chapter 13.3.3.3	Facilities will replace missing ceiling tiles.	NA	8/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR01509A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four-story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 15 The kitchen UL 300 wet chemical fire suppression system for the kitchen was replaced in December of 2015. The "tag status" "No electric shut down". NFPA 1, Fire Code, Chapter 90.4.6.1	UNT will evaluate the best course of action for completion.	NA	10/7/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 16 The kitchen fryer unit is on wheels and lacks an approved method to determine the unit is in the proper design location. NFPA 1, Fire Code, Chapter 50.6.1.2.3.1	UNT will install wheel locking device.	NA	10/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 17 Caterina fire doors in the following locations are missing vertical bottom rods and floor latching points or fire pins. 2 North east emergency exit 2 North west emergency exit 2 East Emergency exit 2 West Emergency exit NFPA 1, Fire Code, Chapters 4.4.3.1.1, 4.4.3.1.2, 4.4.3.1.3, and NFPA 80 Standard for Fire Doors and Other Opening Protectives, Chapter 4.6.3.1.1	Facilities will add bottom rods and floor latching points (or fire pins).	NA	10/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 18 The Powerade vending machine located on the 3 rd wing second floor is blocking the exit access. NFPA 1, Fire Code, Chapters 4.4.3.1.1 and 14.4.1	UNT will move the machine away from the exit access.	NA	8/1/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 19 Newshair fire extinguisher located by the dishwasher in the basement has the pin pulled. NFPA 1, Fire Code, Chapter 4.5.8.1	Pin was replaced.	NA	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 20 In the open position by electric hold open devices but lack the required smoke detectors located within five feet of the doors to activate door release in the event of a fire. 2 Corridor smoke door by room D02 2 Corridor smoke door by room D03 2 Corridor smoke door by room D11 2 Corridor smoke door third floor by room A325 2 Corridor smoke door by room D320 2 Corridor smoke door by room D300 2 Corridor smoke door by room B302 2 Corridor smoke door by room C301 2 Corridor smoke door by room C221 2 Corridor fire door by room A201 2 Corridor fire door by room B205 2 Corridor fire door by room B222 2 Corridor fire door by room A121 2 Corridor fire door by room B101. NFPA 1, Fire Code, Chapter 14.5.4.2(3)	Facilities will add smoke detectors.	NA	12/2/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 21 The basement stair well from the kitchen area lacks a rated enclosure. The stairs are open at the top and bottom. Currently there are no fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss. NFPA 1, Fire Code, Chapter 14.6.1.1 and 14.3.1	UNT will evaluate the best course of action for completion.	NA	1/7/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 21 The emergency light unit in stairwell 1.1 on the first floor failed to operate when tested. NFPA 1, Fire Code, Chapter 4.5.8.1	UNT will replace faulty light.	NA	8/7/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 2.2 On the first floor of "X" wing in the Ford room, a sprinkler head is missing the escutcheon. NFPA 1.1 Fire Code, Chapter 13.3.3.2	Facilities will install escutcheon.	NA	8/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 2.3 In the Jon Collins room there is a battery operated smoke alarm on the wall that failed to operate when tested. NFPA 1.1 Fire Code, Chapter 4.5.3.1	Facilities will remove smoke alarm.	NA	8/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 2.4 The Jon Collins room exterior double exit doors have the right side leaf locked with dead bolts and the right side door leaf only provides a 24 inch exit width. The minimum exit width for double doors is 48 inches clear width. NFPA 1.1 Fire Code, Chapter 14.8.3.4.1.2	UNT will evaluate the best course of action for completion.	NA	8/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 2.5 The Jon Collins room lacks an illuminated exit sign over the door leading to the egress corridor. NFPA 1.1 Fire Code, Chapter 14.14.1.2.1	Facilities will install an illuminated exit sign.	NA	8/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 2.6 The electrical room located off the first floor of "X" wing and Hall Director's laundry room has an unused opening in the circuit breaker panel. NFPA 1.1 Fire Code, Chapter 11.1.1.2	Facilities will cover opening.	NA	8/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 2.7 At stairwell 1.1 on the first floor of "X" wing, the double fire doors are missing the center mullion entering the door unable to latch. NFPA 1.1 Fire Code, Chapter 12.4.6.3.1 and 12.4.6.3.1(4)	Facilities will replace missing center mullion.	NA	8/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 2.8 A fire alarm control panel is used as a replacement for emergency wiring on the second floor in the "X" wing IT closet server rack. NFPA 1.1 Fire Code, Chapter 11.1.1.7.6	UNT will remove extension cord.	NA	8/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 3 The following areas lack UL listed fire rating labels or labels from another recognized testing lab. 1) Fire door second floor south west stairwell 2) Fire door and frame fourth floor 3) Fire door stairwell east "C" wing 4) Fire door first floor west stairwell 5) Fire door 8 wing west stairwell third floor 6) Fire door and frame stairwell across from room B310 7) Fire door and frame third floor C wing by room C310 8) Fire door second floor "X" wing 9) Fire door first floor stairwell 1.1 NFPA 1.1 Fire Code, Chapter 12.7.3.2.2 and 12.7.3.1	Facilities will add UL labels.	NA	12/7/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	<p>FIN006.4 Sprinkler heads in the following areas have the orange shipping protectors still installed.</p> <ul style="list-style-type: none"> Room A105 Second floor ADA bathroom <p>NFPA 1, Fire Code, Chapter 13.3.3.2</p>	Facilities will remove all orange shipping protectors.	NA	10/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	<p>FIN006.5 Sprinkler protection is missing in the following locations.</p> <ul style="list-style-type: none"> Electrical room D458 Electrical room D wing Storage closet Second floor IT closet Second floor electrical room by dumb water Second floor "B" wing IT room Second floor "C" wing IT room First floor "X" wing electrical room Basement music practice room enclosed cubes <p>NFPA 1, Fire Code, Chapter 13.3.1.2</p>	UNT will add sprinkler protection.	NA	10/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	<p>FIN006.6 Unsealed or improperly sealed penetrations are present in the following locations.</p> <ul style="list-style-type: none"> Room D460 unsealed penetrations Room D460 unsealed penetrations Room D460 unsealed penetrations Room 2073 unsealed and improperly sealed penetrations Storage room by room B310 unsealed penetrations Storage closet across from room C210 unsealed penetrations Storage closet across from room C210 unsealed penetrations 2" x 4" wing second floor laundry room unapproved yellow spray foam Second floor IT closet unsealed penetrations 2" x 4" wing second floor laundry room unsealed four inch conduit Closet across from room A211 unsealed penetrations Closet across from A110 unsealed penetrations Closet across from A110 unsealed penetrations Closet across from A110 unsealed penetrations <p>NFPA 1, Fire Code, Chapter 12.7.5.1</p>	Facilities will properly seal all penetrations.	NA	10/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	<p>FIN006.7 Room D470 has storage on a top shelf that will block the sprinkler discharge pattern.</p> <p>NFPA 1, Fire Code, Chapter 10.19.3.2</p>	UNT will remove the storage.	NA	10/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	<p>FIN006.8 On the fourth floor of "B" wing the attic fire door lacks the required closing device.</p> <p>NFPA 1, Fire Code, Chapter 12.4.6.3.1; and 12.4.6.3.2(4)</p>	UNT will add the closing device.	NA	10/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	<p>FIN006.9 The emergency egress floor plate are missing from the back of all dorm room doors.</p> <p>NFPA 1, Fire Code, Chapter 20.9.2.4.1</p>	Floor plates will be created and placed on all dorm room doors.	NA	9/1/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Review Period Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observation	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2016	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	The College consists of four three-story buildings with a total of 286 rooms classified as a mixed occupancy consisting of existing apartment, dormitory, dorm room and apartments have a door to the exterior. The upper floors have a concrete walkway that connects to a breezeway which provides egress from the units. Features of fire protection include a complete fire alarm system and portable extinguishers.	NA	FINOING 3 The West section, second floor by the 200 number rooms and third floor by the 300 number rooms exterior walkways have electrical splice boxes missing the cover plates. NFPA 1, Fire Code, Chapter 14.1.1, 11.1.1.0	Facilities will replace missing cover plates.	NA	8/17/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RK012282E	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	The College consists of four three-story buildings with a total of 286 rooms classified as a mixed occupancy consisting of existing apartment, dormitory, dorm room and apartments have a door to the exterior. The upper floors have a concrete walkway that connects to a breezeway which provides egress from the units. Features of fire protection include a complete fire alarm system and portable extinguishers.	NA	FINOING 1 The West section second floor by the 200 number rooms and third floor by the 300 number rooms exterior walkways have electrical splice boxes missing the cover plates. NFPA 1, Fire Code, Chapters 29.2.1.1, 31.2.1.1 and 7.5.3.3	We have hired licensed engineer (R. Woods) to perform an assessment of the balconies and design the new stairs needed. The assessment has been performed and we are waiting on the final report. Once we have the report and subsequent drawings we will hire a contractor to install.	NA	1/21/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RK012282E	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	The College consists of four three-story buildings with a total of 286 rooms classified as a mixed occupancy consisting of existing apartment, dormitory, dorm room and apartments have a door to the exterior. The upper floors have a concrete walkway that connects to a breezeway which provides egress from the units. Features of fire protection include a complete fire alarm system and portable extinguishers.	NA	FINOING 2 The South East side of the building exterior walkway has dead ends in excess of the allowed 20 foot maximum. NFPA 101, Life Safety Code, Chapters 29.2.1.1, 31.2.1.1 and 7.5.3.3	We have hired licensed engineer (R. Woods) to perform an assessment of the balconies and design the new stairs needed. The assessment has been performed and we are waiting on the final report. Once we have the report and subsequent drawings we will hire a contractor to install.	NA	1/21/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RK012282E	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	The College consists of four three-story buildings with a total of 286 rooms classified as a mixed occupancy consisting of existing apartment, dormitory, dorm room and apartments have a door to the exterior. The upper floors have a concrete walkway that connects to a breezeway which provides egress from the units. Features of fire protection include a complete fire alarm system and portable extinguishers.	NA	FINOING 3 The West section, second floor by the 200 number rooms and third floor by the 300 number rooms exterior walkways have electrical splice boxes missing the cover plates. NFPA 101, Life Safety Code, Chapters 4.6.12.1 and 8.5.5.1	UNT will seal penetrations.	NA	1/21/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RK012282E	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	The College consists of four three-story buildings with a total of 286 rooms classified as a mixed occupancy consisting of existing apartment, dormitory, dorm room and apartments have a door to the exterior. The upper floors have a concrete walkway that connects to a breezeway which provides egress from the units. Features of fire protection include a complete fire alarm system and portable extinguishers.	NA	FINOING 4 Dormitory rooms are not provided with a required exit path diagram on or immediately adjacent to the exit door from each sleeping room. A diagram shall reflect the actual floor number, room identification and exit path travel from each room. NFPA 101, Life Safety Code, Chapter 29.7.4.1	Install exit path diagram in each room.	NA	1/20/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	The College consists of four three-story buildings classified as a mixed occupancy consisting of existing apartment, dormitory, dorm room and apartments have a door to the exterior. The upper floors have a concrete walkway that connects to a breezeway which provides egress from the units. Features of fire protection include a complete fire alarm system and portable extinguishers.	NA	FINOING 1 The West section, second floor by the 200 number rooms and third floor by the 300 number rooms exterior walkways have electrical splice boxes missing the cover plates. NFPA 1, Fire Code, Chapter 14.1.0.3.4 and NFPA 101, Life Safety Code, Chapters 31.2.5.1, 31.2.4.1, 7.5.3.3 and 7.5.1	UNT will install exterior stairwell.	NA	9/17/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	The College consists of four three-story buildings classified as a mixed occupancy consisting of existing apartment, dormitory, dorm room and apartments have a door to the exterior. The upper floors have a concrete walkway that connects to a breezeway which provides egress from the units. Features of fire protection include a complete fire alarm system and portable extinguishers.	NA	FINOING 10 The survey center east exit door can only open about 18 inches. The survey center east exit door has a fire electrical conduit running outside at the top of the doorway. NFPA 1, Fire Code, Chapters 14.4.1, 4.4.3.1.1, 4.4.3.1.3 and 14.5.1.5	UNT will evaluate the best course of action for completion.	NA	12/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	The College consists of four three-story buildings classified as a mixed occupancy consisting of existing apartment, dormitory, dorm room and apartments have a door to the exterior. The upper floors have a concrete walkway that connects to a breezeway which provides egress from the units. Features of fire protection include a complete fire alarm system and portable extinguishers.	NA	FINOING 11 The egress corridor outside suites 51 'A' and 'C' is used as a storage area for computer boxes and computer equipment. NFPA 1, Fire Code, Chapter 14.1.1	UNT will remove boxes and computer equipment.	NA	8/17/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	College Inn consists of four three-story buildings classified as a mixed occupancy of existing apartment buildings, existing dormitory, existing assembly and existing business. Each dorm room and apartments have a door to the exterior. The upper floors have a concrete walkway that connects to a breezeway which provides egress from the units. Features of fire protection include a complete fire alarm system and portable extinguishers.	NA	<p>FINDING 3 The mechanical chase areas have unsealed or improperly sealed (2014 Violation) NFA 1.1 Fire Code, Chapter 127.5.1</p>	Facilities will properly seal penetrations.	NA	1/7/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	College Inn consists of four three-story buildings classified as a mixed occupancy of existing apartment buildings, existing dormitory, existing assembly and existing business. Each dorm room and apartments have a door to the exterior. The upper floors have a concrete walkway that connects to a breezeway which provides egress from the units. Features of fire protection include a complete fire alarm system and portable extinguishers.	NA	<p>FINDING 4 Portable fire extinguishers in the following areas lack current inspection tags: 1. Room E445 (kitchen) last inspection April 2011 2. Room W338 last inspection June 2014 3. Custodial office second floor two extinguishers last inspection 2001 4. 869 last inspection 2013 5. Boiler room last inspection 2013 NFA 1.1 Fire Code, Chapter 4.5.8.1</p>	Facilities inspected the portable fire extinguishers.	NA	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	College Inn consists of four three-story buildings classified as a mixed occupancy of existing apartment buildings, existing dormitory, existing assembly and existing business. Each dorm room and apartments have a door to the exterior. The upper floors have a concrete walkway that connects to a breezeway which provides egress from the units. Features of fire protection include a complete fire alarm system and portable extinguishers.	NA	<p>FINDING 5 Emergency light failed to operate when tested in the Computing Center by main entrance. NFA 1.1 Fire Code, Chapter 4.5.8.1</p>	Facilities will repair emergency light.	NA	9/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	College Inn consists of four three-story buildings classified as a mixed occupancy of existing apartment buildings, existing dormitory, existing assembly and existing business. Each dorm room and apartments have a door to the exterior. The upper floors have a concrete walkway that connects to a breezeway which provides egress from the units. Features of fire protection include a complete fire alarm system and portable extinguishers.	NA	<p>FINDING 6 Facilities will replace the electrical outlet for the water fountain in the Computing Center by main entrance. NFA 1.1 Fire Code, Chapter 11.1.1.0</p>	Facilities will replace cover plate.	NA	8/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	College Inn consists of four three-story buildings classified as a mixed occupancy of existing apartment buildings, existing dormitory, existing assembly and existing business. Each dorm room and apartments have a door to the exterior. The upper floors have a concrete walkway that connects to a breezeway which provides egress from the units. Features of fire protection include a complete fire alarm system and portable extinguishers.	NA	<p>FINDING 7 The building lacks exterior emergency lighting for second floor NFA 1.1 Fire Code, Chapter 14.13.1.1(1); and NFA 1.01, Life Safety Code, Chapters 31.2.9 and 7.9</p>	UNT will evaluate the best course of action for completion.	NA	9/7/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	College Inn consists of four three-story buildings classified as a mixed occupancy of existing apartment buildings, existing dormitory, existing assembly and existing business. Each dorm room and apartments have a door to the exterior. The upper floors have a concrete walkway that connects to a breezeway which provides egress from the units. Features of fire protection include a complete fire alarm system and portable extinguishers.	NA	<p>FINDING 8 The Maroon room has an occupant load in excess of 49 people (Power space) NFA 1.1 Fire Code, Chapter 14.13.1.1(1); and NFA 1.01, Life Safety Code, Chapters 31.2.9 and 7.9 Additionally occupants cannot exit through a kitchen area. Limit the occupant load of this room to 49 people and remove exit signs from the unit. Features of fire protection include a complete fire alarm system and portable extinguishers. NFA 1.1 Fire Code, Chapter 4.1.2.1, 4.1.5.2, 4.1.5.3, 4.1.3.1.2 and 14.10.2.1</p>	UNT will evaluate the best course of action for completion.	NA	9/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	College Inn consists of four three-story buildings classified as a mixed occupancy of existing apartment buildings, existing dormitory, existing assembly and existing business. Each dorm room and apartments have a door to the exterior. The upper floors have a concrete walkway that connects to a breezeway which provides egress from the units. Features of fire protection include a complete fire alarm system and portable extinguishers.	NA	<p>FINDING 9 The Maroon room control panel is indicating troubles on the system (Power space) NFA 1.1 Fire Code, Chapter 4.5.8.1</p>	Facilities repaired power supply.	NA	NA	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Cumley Hall is a three-story mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	<p>FINING 1 UNT will patch signs, the rooms are not to be occupied by order of the State Fire Marshal's Office.</p> <p>NOTE: The violation was noted several inspection cycles ago by the SFMO and the university was instructed at that time they were not to use these rooms. During this inspection it was noted that the rooms were occupied. The SFMO and the University stated the Risk Management Department told them since the building was retro fitted with a fire sprinkler system the rooms could now be used. THE SFMO instructed the university the rooms are not to be occupied until the rooms are considered for building. The university was ordered to lock the rooms and post signs the rooms are not to be occupied by order of the State Fire Marshal's Office. Chapter 14.10.1.5, and NFPA 101, Life Safety Code, Chapter 29.2.5.5</p>	UNT will patch signs, the rooms are not to be occupied by order of the State Fire Marshal's Office.	NA	8/17/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Cumley Hall is a three-story mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	<p>FINING 10 The stairwell fire door in corridor A by room 117 has exposed electrical wiring not in conduit. NFPA 1, Fire Code, Chapter 11.1.3</p>	Facilities will repair exit sign.	NA	9/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Cumley Hall is a three-story mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	<p>FINING 11 The stairwell fire door on the third floor center stairwell has a continuous hinge and does not have UL listing information on NFPA 1, Fire Code, Chapters 12.7.3.1, 12.7.3.2.2 and 12.7.3.2.3</p>	UNT attached UL listing on hinge.	NA	8/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Cumley Hall is a three-story mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	<p>FINING 2 The stairwell fire door on the third floor center stairwell has a continuous hinge and does not have UL listing information on NFPA 1, Fire Code, Chapter 14.3.1(10)</p>	UNT whether to remove ducts or install fire smoke dampers.	NA	1/7/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Cumley Hall is a three-story mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	<p>FINING 3 The second floor C wing has a trash chute missing a section of the fire door. A fire in the trash chute will spread fire and smoke into the second floor. NFPA 1, Fire Code, Chapters 11.6.1.2 and 12.7.4</p>	Door will be repaired.	NA	8/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Cumley Hall is a three-story mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	<p>FINING 4 The copy supply room has a hole in the ceiling around the splice box. NFPA 1, Fire Code, Chapter 12.3.3.1</p>	Hole will be patched.	NA	8/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Cumley Hall is a three-story mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	<p>FINING 5 Paneling is applied to the walls located in the first floor business office corridor that does not meet class A or B interior finish requirements. NFPA 1, Fire Code, Chapter 20.13.3.2.1</p>	UNT will evaluate the best course of action for completion.	NA	8/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Cumley Hall is a three-story mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	<p>FINING 6 The A/C 1 room has an unsealed floor penetration. NFPA 1, Fire Code, Chapter 12.7.5.1</p>	Facilities will properly seal penetration.	NA	8/7/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Cumley Hall is a three-story mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 7 The first floor large conference room occupant load exceeds 50 people and lacks the required emergency lighting. Features of fire protection include a complete fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	Facilities will install required emergency lighting.	NA	8/17/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Cumley Hall is a three-story mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 8 Room 102 has interconnected power strip.	UNT will remove the interconnected power strips.	NA	8/17/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Cumley Hall is a three-story mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 9 The door separating the business occupancy from the dormitory occupancy lacks a fire rating. Provide documentation this door is fire rated. Features of fire protection include a complete fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	UNT will provide documentation.	NA	1/17/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO12282E	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Honors Hall is a 200-room five-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, sprinkler coverage throughout, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 1 The fire sprinkler system is yellow tagged stating gauges lack 5 year test.	Facilities will conduct the 5 year test.	NA	12/31/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Honors Hall is a five-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system with smoke detection, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 2 The penthouse attic area lacks sprinkler protection and is used for storage of combustible material.	UNT will evaluate the best course of action for completion.	NA	12/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Honors Hall is a five-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system with smoke detection, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 3 The penthouse attic area has unsealed penetrations.	Facilities will properly seal penetrations.	NA	12/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Honors Hall is a five-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system with smoke detection, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 4 The fire alarm control panel lacks an annual inspection tag. The last inspection was conducted in August 2014.	Facilities will conduct an inspection.	NA	8/17/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Honors Hall is a five-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system with smoke detection, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 5 The emergency egress floor plain diagram signs are missing from the floor plan. Features of fire protection include a complete fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	Facilities will develop and post floor plans on all room doors.	NA	9/17/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO12282E	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Legends Hall is a four-story structure classified as existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 1 Dormitory rooms are not provided with a required exit path diagram on or immediately adjacent to the exit door from each sleeping room. A diagram shall reflect the actual floor arrangement, room identification and exit path travel from each room. Features of fire protection include a complete fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	Facilities will conduct an inspection.	NA	12/31/2015	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Review Period Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observation	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Legends Hall is a four-story structure classified as existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system, at-staircase, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 1 The following locations have continuous hinges that do not have UL listing information on hinge: <ul style="list-style-type: none"> Fourth floor stairwell 01 Third floor stairwell 03 Third floor stairwell 02 Second floor stairwell 02 Second floor stairwell 01 First floor stairwell 01 NFPA 1, Fire Code, Chapters 12.7.3.1, 12.7.3.2.2 and 12.7.3.2.3	UNT will add UL listing on hinges.	NA	10/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Legends Hall is a four-story structure classified as existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system, at-staircase, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 2 The following locations lack a UL listed fire rating label or label from another recognized testing lab: <ul style="list-style-type: none"> Second floor stairwell 02 Second floor stairwell 02 First floor stairwell 01, right side door NFPA 1, Fire Code, Chapters 12.7.3.1, 12.7.3.2.2 and 12.7.3.2.3	UNT will add UL listed fire rating label to each floor.	NA	10/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Legends Hall is a four-story structure classified as existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system, at-staircase, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 3 The first floor stairwell sensor exit door only partially opens due to the bottom of the door contacting the ground. NFPA 1, Fire Code, Chapter 14.4.1, 14.5.1.5 and 14.5.1.1	UNT will evaluate the best course of action for completion.	NA	9/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Legends Hall is a four-story structure classified as existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system, at-staircase, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 4 The fire alarm system floor plate design does not comply with the back of all dormitory room doors (2014 edition) NFPA 1, Fire Code, Chapter 20.8.2.4.1	Facilities will develop and post floor plans on all room doors.	NA	9/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Legends Hall is a four-story structure classified as existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system, at-staircase, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 5 The sprinkler system hydraulic calculation plate is missing from the room. NFPA 1, Fire Code, Chapter 13.3.3.2	UNT will add the required plates to the riser.	NA	12/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Legends Hall is a four-story structure classified as existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system, at-staircase, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 6 Unsealed penetrations are present in the following locations: <ul style="list-style-type: none"> Room 257A Room 257B Room 257C NFPA 1, Fire Code, Chapter 12.7.5.1	Facilities will properly seal penetrations.	NA	10/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Legends Hall is a four-story structure classified as existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system, at-staircase, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 7 The fire alarm system coverage and is used for combustible storage. NFPA 1, Fire Code, Chapters 13.3.2.16.2 and 10.19.5.1	UNT will evaluate the best course of action for completion.	NA	3/7/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Magpie Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 1 Fire doors throughout the building (21 locations) have not been inspected for UL listing label is located. Unable to verify doors are fire rated. NFPA 1, Fire Code, Chapters 12.7.3.1, 12.7.3.2.2 and 12.7.3.2.3	Facilities verified that all fire doors are fire rated.	NA	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Magpie Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 10 Room A128 the ceiling light fixture is missing the cover. NFPA 1, Fire Code, Chapter 11.1.2	Facilities will replace cover.	NA	9/7/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Review Period Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observation	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Maple Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	Room B120 has a large hole in the fire wall. NFPA 1, Fire Code, Chapter 4.5.8.1.	Facilities will repair hole.	NA	9/1/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Maple Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	Fire doors in the following locations lack UL listed fire rated door labels: Fire doors in the following locations lack UL listed fire rating door labels or labels from another recognized testing lab. Main stair C wing Stairwell C third floor south stairwell Door by C123 Door by C128 Stair door by A134 Wing second floor corridor NFPA 1, Fire Code, Chapters 12.7.3.2, 12.7.3.2 and 12.7.3.1	Facilities will add UL listed fire rated door labels. Facilities will add UL listed fire rating door labels or labels from another recognized testing lab.	NA	10/1/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Maple Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	Unable to verify that some of the lighting fixtures are equipped with emergency generator power. NFPA 1, Fire Code, Chapter 14.13.1.101 and NFPA 101, Life Safety Code, Chapters 29.2.9.1 and 7.9	Facilities will determine that capability.	NA	1/1/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Maple Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	Room 128 does not have UL listing information on hinge. First floor corridor by room 128 Stairwell C third floor Stairwell A second floor Stairwell B second floor Corridor by room A134 NFPA 1, Fire Code, Chapters 12.7.3.1, 12.7.3.2, 12.7.3.2 and 12.7.3.3	UNT added UL listings to all hinges.	NA	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Maple Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	Room 3 The following corridors have fiberglass reinforced plastic (FRP) ceiling panels installed in the drop ceiling grids. Documentation is not provided to verify that the FRP ceiling panels meet Class A or B interior finish requirements for use in corridors. B wing second floor B wing first floor B wing second floor C wing second floor C wing first floor D wing second floor D wing first floor D wing second floor D wing third floor NFPA 1, Fire Code, Chapter 20.8.3.3(2)	Facilities will provide documentation.	NA	1/1/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Maple Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	Room 4 Improperly sealed penetrations are present in the following locations: B F20 Mechanical room non rated yellow spray foam B F20 IT room 4 inch conduit floor and ceiling B F20 IT room 4 inch conduit floor and ceiling B F20 IT room 4 inch conduit floor and ceiling B F20 IT room 4 inch conduit floor and ceiling NFPA 1, Fire Code, Chapter 12.7.5.1	Facilities will properly seal penetrations.	NA	10/1/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Maple Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	Room 5 Starwell fire rated doors at the following locations have holes in the fire wall: Starwell C third floor Starwell D second floor NFPA 1, Fire Code, Chapter 12.4.6.9.1 and 12.4.6.9.1(1)	Facilities will repair doors.	NA	10/1/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Maple Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	Room 6 Room 610 has a multi outlet adapter plugged into a power strip. NFPA 1, Fire Code, Chapter 11.1.5.2	Multi outlet adapter was removed from the power strip.	NA	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Maple Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	Room 7 Mechanical room B132 has an extension cord wired into the HVAC controller to supply power to the unit. NFPA 1, Fire Code, Chapter 11.1.2	Facilities will replace extension cords with a permanent solution.	NA	9/1/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2016	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Maple Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 8 The corridor fire door by room C23 has a ventilation grate installed in the bottom of the door. NFPA 1, Fire Code, Chapter 12.4.6.9.1 and 12.4.6.9.1(10)	UNT will evaluate the best course of action for completion.	NA	1/1/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Maple Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 9 Room B03 has inter-connected power strips. NFPA 1, Fire Code, Chapter 11.1.1.6.2	UNT will remove inter-connected power strips.	NA	9/1/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Maple Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 12 Stairwell signage is missing in the following locations. Stairwell signs are not required by the existing building however they are required by the code and they must be installed: D D corridor south third floor D F wing west stairwell third floor D A wing west stairwell third floor D B wing west stairwell second floor D B wing south stairwell second floor D E wing corridor across from room 201 D D wing south stairwell first floor NFPA 1, Fire Code, Chapter 6.1.1.4.1	Facilities will add signage.	NA	10/1/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RK012282E	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	McCormell Hall is a 206 room three-story structure classified as a mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of an emergency involving power loss.	NA	FINDING 1 Dormitory rooms are not provided with a required exit path diagram showing the route to the exit door from each sleeping room. A diagram shall reflect the actual floor arrangement, room identification and exit path travel from each room. NFPA 101, Life Safety Code, Chapter 29.7.4.1	Install exit path diagram in each room.	NA	12/1/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	McCormell Hall is a three-story structure classified as a mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of an emergency involving power loss.	NA	FINDING 1 Corridor smoke or fire doors in the following locations are held open by devices that are not required by the code. Required smoke detectors located within five feet of the doors to activate door release in the event of a fire. D Fire door first floor main stairwell D Fire door second floor room 332 D Corridor smoke door by room 333 D Double smoke doors by SH03 NFPA 1, Fire Code, Chapter 14.5.4.2(3)	Facilities will add smoke detectors.	NA	12/1/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	McCormell Hall is a three-story structure classified as a mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of an emergency involving power loss.	NA	FINDING 10 A ladder is stored in the first floor main stairwell. NFPA 1, Fire Code, Chapters 14.4.1, 14.6.3.1 and 4.4.3.1.1	Facilities will remove the ladder.	NA	8/1/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	McCormell Hall is a three-story structure classified as a mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of an emergency involving power loss.	NA	FINDING 11 Signage for fire exit egress signs are missing from the back of all dormitory room doors (201A-Ventilation). NFPA 1, Fire Code, Chapter 20.8.2.4.1	Facilities will develop and post the sign on all room doors	NA	8/1/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	McCormell Hall is a three-story structure classified as a mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of an emergency involving power loss.	NA	FINDING 12 Room 404DA is being used as a wood shop. Saw dust was observed on work benches and the floor. This room is located in the rear of the building. The building is currently under construction separation between industrial occupancy and assembly occupancy. Discontinue use of this room as a wood shop or other industrial type occupancy. NFPA 1, Fire Code, Chapter 6.1.1.4.1.1	UNT will discontinue use of this room as a wood shop or other industrial type occupancy	NA	1/1/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	McCormell Hall is a three-story structure classified as a mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit lights, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 2 In "B" wing south, the third floor stairwell door strike plate is missing. NFPA 1, Fire Code, Chapter 12.4.6.5.1 and 12.4.6.5.1(4)	Facilities will replace the missing strike plate.	NA	10/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	McCormell Hall is a three-story structure classified as a mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit lights, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 3 Unsealed or improperly sealed penetrations are present in the following locations: 1 Room A/C 7 Unsealed and unapproved yellow spray foam insulation. 2 Room A/C 9 unapproved yellow spray foam used 3 Room A/C 8 unsealed 4 Room A/C 5 unapproved yellow spray foam used 5 Room A/C 5 has an 18"x18" hole in wall covered with plywood sheetrock. NFPA 1, Fire Code, Chapter 12.7.5.1	Facilities will properly seal all penetrations.	NA	10/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	McCormell Hall is a three-story structure classified as a mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit lights, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 4 Unable to verify building is equipped with the required emergency lighting. NFPA 1, Fire Code, Chapter 14.3.1.1(1); and NFPA 101, Life Safety Code, Chapter 29.2.9.1	Facilities will provide verification.	NA	10/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	McCormell Hall is a three-story structure classified as a mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit lights, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 5 Room A130 located under the stairs has a sign posted "No storage by order of State Fire Marshal" and is used for storage of combustible items. NFPA 1, Fire Code, Chapter 14.6.3	Resolved	NA	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	McCormell Hall is a three-story structure classified as a mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit lights, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 6 Room lacks emergency lighting. NFPA 1, Fire Code, Chapter 14.3.1.1(1); and NFPA 101, Life Safety Code, Chapter 29.2.9.1	Facilities will add emergency lighting.	NA	1/7/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	McCormell Hall is a three-story structure classified as a mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit lights, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 7 The first floor corridor fire door have an electronic locking device that is not working. NFPA 1, Fire Code, Chapter 14.3.1.1(1); and NFPA 101, Life Safety Code, Chapter 14.5.2.6(6)	Facilities will provide documentation.	NA	12/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	McCormell Hall is a three-story structure classified as a mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit lights, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 8 The stage lighting wires have a section where the plug has been pulled away from the outer protective sheath exposing the wiring. NFPA 1, Fire Code, Chapter 11.1.2	Facilities will replace the wiring.	NA	10/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	McCormell Hall is a three-story structure classified as a mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit lights, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 9 The standpipe system lacks an annual inspection tag. NFPA 1, Fire Code, Chapter 13.2.3.3	Inspection will be performed.	NA	10/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO12282E	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Moore Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit lights, and a generator for back-up power in the event of emergencies involving power loss.	NA	FINDING 1 Fire alarm is installed in the bottom section of the corridor for the entire building. The building does not meet code A for interior finish requirements. NFPA 101, Life Safety Code, Chapter 29.3.3.2 and 10.2.3	Scheduled for completion in FY2016	NA	8/31/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Review was based	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status	
External	State Fire Marshal's Office	Fiscal Year 2016	RRO12282E	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Moart Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 2 The cable TV/Electrical room by 232 has a carpet, ceiling machine blocking access to the electrical panels. (Corrected at the time of the inspection) NFA 1 Fire Code, Chapter 4.5.8.1	Initial exit path diagram in each room.	NA	1/29/2015	Closed	
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Moart Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 1 Wiring is installed on the bottom section of the corridor walls and stairwells throughout the building and does not meet class A or B interior finish requirements. (Listed in 2014 inspection) NFA 1 Fire Code, Chapter 28.8.3.2 (2)	Compliance measures are in progress.	NA	9/7/2016	Closed	
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Moart Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 2 Dormitory rooms are not provided with a required exit path diagram on or immediately adjacent to the actual floor sleeping room. A diagram shall reflect the actual floor arrangement, room identification and exit path travel from each room. (Listed in 2014 inspection) NFA 1 Fire Code, Chapter 20.8.2.4.1	UNT will develop and place exit diagrams in each room.	NA	9/7/2016	Closed	
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Moart Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 3 The cable TV/Electrical room by 232 has a carpet, ceiling machine blocking access to the electrical panels. (Corrected at the time of the inspection) NFA 1 Fire Code, Chapter 4.5.8.1	NA	NA	NA	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Moart Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 4 The wall-mounted emergency lighting unit has come loose from the wall. NFA 1 Fire Code, Chapter 4.5.8.1	Facilities will repair emergency lighting unit.	NA	9/7/2016	Closed	
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Moart Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 5 The fire alarm control panel (FACP) is not properly covered by a lockable door. NFA 1 Fire Code, Chapter 4.5.8.1	NA	NA	NA	Closed	
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Moart Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 6 The sprinkler head in the corridor by room 120 is not properly installed and extends below the ceiling causing the escutcheon not to properly cover the ceiling penetration. NFA 1 Fire Code, Chapter 4.5.8.1	Facilities will properly re-install sprinkler head	NA	12/7/2016	Closed	
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Moart Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 7 The three fire sprinkler systems are yellow tagged staging gauges lack 5-year test and ball drive valve on all three tags. Dated 12/15/14. NFA 1 Fire Code, Chapter 4.5.8.1	UNT will conduct 5 year test.	NA	12/7/2016	Closed	
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Moart Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 8 The IDC is visually obstructed by bushes and lacks an illuminated exit sign. NFA 1 Fire Code, Chapters 13.1.3, 13.1.4 and 13.1.4.1	Facilities will remove bushes and add identification sign.	NA	9/7/2016	Closed	
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Moart Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 9 The center stairwell first floor has an unsealed penetration around the security camera wire. NFA 1 Fire Code, Chapter 12.7.5.1	Facilities will properly seal penetration.	NA	9/7/2016	Closed	
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Rawlins Hall is a four-story new dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 1 Room 512 the IDF room has boxes of trash stored in the room. NFA 1 Fire Code, Chapter 10.10.1.1	Trash has been removed.	NA	NA	Closed	

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Rawlins Hall is a four-story new dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system, standpipe system, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 3 Stairwell 3 on the first floor is being used for storage. NFPA 1, Fire Code, Chapters 14.4 and 10.13.4	Stored material have been removed from level 1 of stair 3	NA	8/17/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Rawlins Hall is a four-story new dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system, standpipe system, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 8 At stairwell 3 on the first floor, the exit door leading to the exterior of the building lacks an illuminated exit sign. NFPA 1, Fire Code, Chapter 14.1.1.1.1	Illuminated exit sign for this location has been ordered and will be installed upon receipt.	NA	8/17/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Rawlins Hall is a four-story new dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system, standpipe system, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 9 The corridor fire doors by room 266 B do not close and latch properly. NFPA 1, Fire Code, Chapter 12.4.6.9.2(6) and (8)	Corridor fire doors by room 266 B have been verified to close and latch properly.	NA	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO12282E	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Santa Fe Hall is a three-story structure classified as existing apartment occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power.	NA	FINDING 1 Fire escape are not provided with a required exit path diagram on or immediately adjacent to the exit door from each sleeping room. A diagram shall reflect the actual floor arrangement, room identification and exit path travel from each room. 101, Life Safety Code, Chapter 29.7.4.1	NA	NA	8/31/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Santa Fe Hall is a three-story structure classified as existing apartment occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power.	NA	FINDING 1 The three fire sprinkler risers are yellow tagged since December 2015. Tags state gauges, not replaced or 5 year calibration". NFPA 1, Fire Code, Chapter 13.3.3.2	Facilities will conduct calibration.	NA	12/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Santa Fe Hall is a three-story structure classified as existing apartment occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power.	NA	FINDING 2 Unsealed or improperly sealed penetrations are present in the following locations: 1) Telephone room unsealed ceiling and floor penetrations 2) Cable TV room unsealed ceiling and floor penetrations 3) Room ST3H 4) Room ST 2H 5) Mechanical room 222 6) Mechanical room by room 225 7) Room A/C2A 8) Main electrical room first floor above main switch gear not properly sealed and unsealed penetrations are present in the following locations: 9) Corridor by room 203 NFPA 1, Fire Code, Chapter 12.7.5.1	Facilities will properly seal all penetrations.	NA	9/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Santa Fe Hall is a three-story structure classified as existing apartment occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power.	NA	FINDING 3 Emergency lights failed to operate when tested in the following locations: 1) Stairwell B third floor 2) Corridor by room 203 NFPA 1, Fire Code, Chapter 4.5.6.1	Facilities will repair emergency lights.	NA	9/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Santa Fe Hall is a three-story structure classified as existing apartment occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power.	NA	FINDING 4 Sprinkler heads are missing escutcheons in the following areas: 1) Room ST3H 2) Room ST3H NFPA 1, Fire Code, Chapter 4.5.6.1	Facilities will replace escutcheons.	NA	9/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Santa Fe Hall is a three-story structure classified as existing apartment occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power.	NA	FINDING 5 Fire doors in stairwell B on the first floor lack a UL listed fire rating label or label from another recognized testing lab. NFPA 1, Fire Code, Chapter 12.7.3.2.2	Facilities will install UL listed fire rating label.	NA	10/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Santa Fe Hall is a three-story structure classified as existing apartment occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power.	NA	FINDING 6 Mechanical room and custodial closets are located off of stairwell B. The mechanical room requires a one hour rated fire door separation from the exit enclosure. NFPA 1, Fire Code, Chapter 14.3.1.1, (9)(10) and 4.3.1.9 (C)	UNT will evaluate the best course of action for completion.	NA	1/7/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15039A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Traditions Hall is a three-story existing dormitory occupancy. Features include fire alarm system, fire extinguishers, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	FN008-8 Starwell 1.1 fire door is missing the strike plate. NFPA 1, Fire Code, Chapter 12.4.6.3.1 and 12.4.6.3.1(4)	Facilities will replace strike plate.	NA	9/17/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15039A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Traditions Hall is a three-story existing dormitory occupancy. Features include fire alarm system, fire extinguishers, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	NA	FN008-9 Room 1000B has a cover missing from the splice box. NFPA 1, Fire Code, Chapters 11.1.1.1.0	Facilities will replace cover.	NA	8/17/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO12282E	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Victory Hall is a four-story mixed occupancy consisting of existing dormitory and existing assembly use. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator or power.	NA	FN008-11 Dormitory rooms are not provided with a required exit path diagram on the wall adjacent to the door from each room. Exit signs are not provided for the main floor, an arrangement, room identification and exit path travel from each room. NFPA 101, Life Safety Code, Chapter 29.7.4.1	Install exit path diagram in each room.	NA	12/9/2015	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15039A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Victory Hall is a four-story mixed occupancy consisting of existing dormitory and existing assembly use. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator or power.	NA	FN008-10 Fire extinguishers in the following locations lack a current annual inspection tag: B Fourth floor custodial closet room 4100 last inspection July 2012 B Storage room 2100 last inspection September 2011 B Storage room 2176 last inspection January 2008 B Storage room 2176 last inspection September 2014 B Storage room 2176 last inspection July 2015 B Storage room 1112 last inspection July 2015 B Room 3207 last inspection June 2013 B Storage room 3280 last inspection September 2014 B ITT room 2250 no inspection tag on extinguisher, year of manufacture 2010 B ITT room located off mechanical room 2280 no inspection tag on extinguisher, year of manufacture 2004 NFPA 1, Fire Code, Chapter 4.3.3.1	UNT will inspect fire extinguishers.	NA	8/17/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15039A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Victory Hall is a four-story mixed occupancy consisting of existing dormitory and existing assembly use. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator or power.	NA	FN008-10 Housing security room located off mechanical room 2280 has a power strip plugged into a UPS. NFPA 1, Fire Code, Chapter 11.1.6.2	Facilities will replace power strip with a more permanent solution.	NA	9/17/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15039A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Victory Hall is a four-story mixed occupancy consisting of existing dormitory and existing assembly use. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator or power.	NA	FN008-11 NFPA 1, Fire Code, Chapter 11.1.2.6	Facilities will replace cord with a more permanent solution.	NA	9/17/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15039A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Victory Hall is a four-story mixed occupancy consisting of existing dormitory and existing assembly use. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator or power.	NA	FN008-12 The first floor lobby fire doors lack vertical bottom rods and floor latching points or fire pins. (4 sets) NFPA 1, Fire Code, Chapter 4.3.3.1 and 4.3.3.1(4). 85.0406 for fire doors and other opening protection, Chapter 4.6.3.1.1	UNT will evaluate the best course of action for completion.	NA	10/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15039A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Victory Hall is a four-story mixed occupancy consisting of existing dormitory and existing assembly use. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator or power.	NA	FN008-13 NFPA 1, Fire Code, Chapter 14.1.4.2(1)	Smoke detectors will be added.	NA	12/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RRO15039A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Victory Hall is a four-story mixed occupancy consisting of existing dormitory and existing assembly use. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator or power.	NA	FN008-14 Mechanical room 2280 has storage of materials not related to mechanical equipment operation. These items include but not limited to mop buckets, mop pads, furniture, ceiling fans. NFPA 1, Fire Code, Chapter 10.13.5.1	UNT will remove all materials not related to mechanical operations.	NA	8/7/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Victory Hall is a four-story mixed occupancy consisting of existing dormitory and existing assembly use. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator or power.	NA	<p>FINDING 3 Both speaker heads in the fire pump building still have the orange shipping protectors installed on the heads. Note: This building is approximately one and a half years old and these protectors should have been removed at the time the building was constructed. The contractor should have removed the speaker protectors and university staff failed to notice the protectors still in place. NFPA 1, Fire Code, Chapter 13.3.3.2</p>	Facilities will remove orange shipping protectors.	NA	9/1/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Victory Hall is a four-story mixed occupancy consisting of existing dormitory and existing assembly use. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator or power.	NA	<p>FINDING 3 The fire alarm control panel is displaying the following trouble signals: 1 Battery trouble 2 Alarm lock NFPA 1, Fire Code, Chapter 4.5.6.1</p>	Facilities resolved the trouble signals.	NA	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Victory Hall is a four-story mixed occupancy consisting of existing dormitory and existing assembly use. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator or power.	NA	<p>FINDING 4 The corridor travel distance between fire alarm pull stations and fire alarm control panels is 366 feet. NFPA 1, Fire Code, Chapter 13.7.1.4.8.5</p>	UNT will evaluate the best course of action for completion.	NA	10/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Victory Hall is a four-story mixed occupancy consisting of existing dormitory and existing assembly use. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator or power.	NA	<p>FINDING 5 The emergency egress floor plan diagram signs are missing from the back of all dormitory room doors. NFPA 1, Fire Code, Chapter 20.8.2.4.1</p>	Facilities will develop signs and install them on all room doors.	NA	8/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Victory Hall is a four-story mixed occupancy consisting of existing dormitory and existing assembly use. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator or power.	NA	<p>FINDING 6 Unsealed or improperly sealed penetrations are present in the following locations: 1 Fire pump room unsealed penetrations 2 Custodial closet room 4116 unsealed penetrations 3 Storage room 4152 unsealed penetrations 4 Custodial room 4176 unsealed penetrations 5 IT room 2116 unsealed penetrations 6 IT room 2162 unsealed penetrations 7 IT room 2162 unsealed penetrations 8 IT room 2162 unsealed penetrations 9 Laundry room 1115 unsealed yellow spray foam penetrations 10 Housing security room of mechanical room 2280 unsealed penetrations 11 Room 2250 unsealed penetrations 12 Room 2250 unsealed penetrations 13 Room 2210 unsealed penetrations 14 Room 2210 unsealed penetrations NFPA 1, Fire Code, Chapter 12.7.5.1</p>	Facilities will properly seal all penetrations.	NA	12/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Victory Hall is a four-story mixed occupancy consisting of existing dormitory and existing assembly use. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator or power.	NA	<p>FINDING 7 Fire doors throughout the building lack the latch plates (17 locations). NFPA 1, Fire Code, Chapters 12.4.6.9.1 and 12.4.6.9.2 (4)</p>	UNT will install latch plates.	NA	10/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Victory Hall is a four-story mixed occupancy consisting of existing dormitory and existing assembly use. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator or power.	NA	<p>FINDING 8 Fire doors at the following locations have continuous hinges that do not have UL listing information on hinge: 1 First floor East elevator lobby door 2 Fourth floor East elevator lobby door NFPA 1, Fire Code, Chapters 12.7.3.1, 12.7.3.2 and 12.7.3.2.3</p>	Facilities will install UL labels on hinges.	NA	10/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Victory Hall is a four-story mixed occupancy consisting of existing dormitory and existing assembly use. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator or power.	NA	<p>FINDING 9 Fire doors are missing off electric door controller studs and cable boxes for the exhaust controls in mechanical room 2280. NFPA 1, Fire Code, Chapter 11.1.1.0</p>	Facilities will replace covers.	NA	9/1/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observation	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated emergency lighting units in the event of emergencies involving power loss.	NA	FINDING 1 The fire protection is missing in the following locations: 1. Kitchen walk under R2 2. Fire Pump room second floor of mechanical room A/C3 no sprinkler protection 3. Fire alarm control room, lack of sprinkler protection under duct work that exceeds 4 feet wide 4. First floor A/C1A room incomplete sprinkler coverage NFPA 1, Fire Code, Chapter 13.3.1.2	UNT will evaluate the best course of action for completion.	NA	8/17/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated emergency lighting units in the event of emergencies involving power loss.	NA	FINDING 10 The emergency egress floor plates are missing from the back of all dorm room doors. (2104 violation) NFPA 1, Fire Code, Chapter 20.02.4.1	Facilities will develop and post floor plans on all room doors.	NA	9/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated emergency lighting units in the event of emergencies involving power loss.	NA	FINDING 11 Unable to verify that the building is supplied with the required emergency lighting. NFPA 1, Fire Code, Chapter 14.13.1.1(1)	UNT will evaluate the best course of action for completion.	NA	8/17/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated emergency lighting units in the event of emergencies involving power loss.	NA	FINDING 13 The fire alarm located in the kitchen has the electrical wire pulled out of this splice box, exposing the wiring. NFPA 1, Fire Code, Chapter 11.1.1.2	Facilities will repair electrical wiring.	NA	8/17/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated emergency lighting units in the event of emergencies involving power loss.	NA	FINDING 13 The fire alarm walk in cooler number 1 spray foam is on the sprinkler head. NFPA 1, Fire Code, Chapter 13.3.3.2	Facilities will remove the spray foam.	NA	9/17/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated emergency lighting units in the event of emergencies involving power loss.	NA	FINDING 14 The mechanical cooling appliances wet chemical suppression system has an enclosed appliance with a discharge nozzle located above it. The cooling appliances have been moved since the original installation and this nozzle no longer covers any open equipment. Upon discharge of the system this will cause damage to the equipment. NFPA 1, Fire Code, Chapter 4.5.8.1	Facilities will adjust coverage.	NA	12/2/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated emergency lighting units in the event of emergencies involving power loss.	NA	FINDING 15 The carbon monoxide detector threshold is raised approximately four inches above the floor level creating a trip hazard to occupants exiting the building. NFPA 1, Fire Code, Chapter 14.1, and NFPA 101 Life Safety Code, Chapter 7.2.1.3.4	Facilities will level the threshold.	NA	8/17/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated emergency lighting units in the event of emergencies involving power loss.	NA	FINDING 16 The first floor center stairwell door was found locked open at the time of the inspection. (Connected at the time of the inspection) NFPA 1, Fire Code, Chapter 4.5.4.1	(Corrects at the time of the inspection)	NA	NA	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2016	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting units in the event of emergencies involving power loss.	NA	FINDING 1 The fire extinguisher located in the graduate student apartment lacks a current annual inspection tag. The last inspection was conducted in 2007. NFPA 1.1 Fire Code, Chapter 4.5.8.1	UNT will inspect the fire extinguisher.	NA	8/17/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting units in the event of emergencies involving power loss.	NA	FINDING 3 The fire alarm control panel lacks a current annual inspection tag. NFPA 1.1 Fire Code, Chapters 12.7.3.2 and 12.7.3.2.3	Facilities will add UL listed fire rating label.	NA	1/7/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting units in the event of emergencies involving power loss.	NA	FINDING 19 The fire alarm control panel lacks a current annual inspection tag. NFPA 1.1 Fire Code, Chapter 13.3.3.2.4.5.8.1	Facilities will fix the connections.	NA	9/17/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting units in the event of emergencies involving power loss.	NA	FINDING 2 The fire alarm control panel lacks a current annual inspection tag. NFPA 1.1 Fire Code, Chapter 13.3.3.2	Facilities will remove the orange shipping protectors.	NA	9/17/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting units in the event of emergencies involving power loss.	NA	FINDING 3 The fire alarm control panel lacks a current annual inspection tag. NFPA 1.1 Fire Code, Chapter 4.5.8.1	Facilities will perform an inspection.	NA	8/17/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting units in the event of emergencies involving power loss.	NA	FINDING 4 The east, west, north and south stairwells on floors one through three are not protected with fire-rated doors. The doors are not required 1 hour fire rating. NFPA 1.1 Fire Code, Chapter 4.4.3.1(1)	UNT will evaluate the best course of action for completion.	NA	12/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting units in the event of emergencies involving power loss.	NA	FINDING 5 The corridor smoke door by room 612 does not close properly. NFPA 1.1 Fire Code, Chapter 4.5.8.1	Facilities will fix door.	NA	9/17/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting units in the event of emergencies involving power loss.	NA	FINDING 6 The corridor smoke detector by room AC EA is hanging from the ceiling. NFPA 1.1 Fire Code, Chapter 4.5.8.1	Facilities repaired smoke detector.	NA	NA	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observation	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2016	BR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated emergency lighting units in the event of emergencies involving power loss.	NA	FINDING 7 The following door has an existing hinge installed but lacks a UL label or stamp that they are listed for fire door installation. 2 Second floor north west stairwell 2 Third floor north east stairwell 2 Third floor north west stairwell 2 Second floor center stairwell 2 First floor north west stairwell 2 First floor south center stairwell 2 First floor south west stairwell NFPA 1, Fire Code, Chapter 12.7.3.1, 12.7.3.2 and 12.7.3.2.3	UI labels will be attached to all hinges.	NA	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	BR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated emergency lighting units in the event of emergencies involving power loss.	NA	FINDING 8 The stairwells have HVAC vents penetrating the exit enclosure. (18 locations) NFPA 1, Fire Code, Chapter 14.3.1(10)	Facilities will properly seal penetrations.	NA	1/1/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	BR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated emergency lighting units in the event of emergencies involving power loss.	NA	FINDING 9 The first floor east stairwell door has holes in the door from a previous hinge. NFPA 1, Fire Code, Chapter 12.4.6.9.2(1) (d)	Facilities will repair door.	NA	10/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2016	BR012282E	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is equipped with illuminated emergency lighting units in the event of emergencies involving power loss.	NA	FINDING 3 Dormitory rooms are not provided with a required exit path adjacent to the exit door from each sleeping room. A diagram panel reflect the actual floor plan, room identification and exit path travel from each room. NFPA 101, Life Safety Code, Chapter 29.7.4.1	Install exit path diagram in each room.	NA	12/31/2015	Closed
External	Texas Commission on Environmental Quality	Fiscal Year 2016	1335965	Governance and Regulatory Compliance	Notice of Violation	UNT	On May 14, 2016, it was determined that University of North Texas did not submit an emissions inventory (EI) for calendar year 2015 for their main campus and discovery park site as requested. This is a violation of 30 TAC Chapter 101.106(c), which states which states that "The emissions inventory shall contain emissions data from the previous calendar year and shall be due on March 31 of each year or as directed by the commission". Emissions related data submitted under a special inventory request made under subsection (b)(3) of this section are due as detailed in the letter of request.	NA	Based on the submission of the 2015 EI by University of North Texas, the violation has been resolved.	NA	NA	NA	Closed
External	Texas Department of State Health Services	Fiscal Year 2016	1031172	Governance and Regulatory Compliance	X-Ray Registration Inspection	UNT	This notice is to acknowledge that the Texas Department of State Health Services (DSHS) conducted an inspection of or visited your business on the date listed above. The information that has been gathered is subject to further department review, and you may receive additional correspondence as a result.	NA	No recommendations/issue.	No recommendations/issue.	NA	NA	N/A
External	Texas Department of State Health Services	Fiscal Year 2016	1033529	Governance and Regulatory Compliance	X-Ray Registration Inspection	UNT	This notice is to acknowledge that the Texas Department of State Health Services (DSHS) conducted an inspection of or visited your business on the date listed above. The information that has been gathered is subject to further department review, and you may receive additional correspondence as a result.	NA	No recommendations/issue.	No recommendations/issue.	NA	NA	N/A
External	Texas Education Agency (TEA)	Fiscal Year 2016	NA	Research	NA	UNT	IS Prologs reviewed as part of FY 2016 year-end AFR (Annual Financial and Compliance Report) audit. This was outsourced to Grant Thornton.	NA	NA	NA	NA	NA	N/A

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Reviewed	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2016	16-406 UNT	Academic and Students	COI Dean's Transitional Audit	UNT	<p>1. The UNT System Travel Guidelines are not consistently followed in internal audit reviewed a sample of 17 vouchers out of a population of 145 vouchers in the College of Information. The following instances of noncompliance were noted:</p> <ul style="list-style-type: none"> • Reimbursement of personal travel with business travel on a Federal grant. • Conference agenda not attached with support documentation. • Missing Travel Budget Authorization form (preapproval to travel), and • Administrative Coordinator signing vouchers in traveler's name with their emailed consent. 	Moderate	Recommendations for Interim Dean of the College of Information: <ol style="list-style-type: none"> Evaluate the personal travel on the Federal Grant and work with the Office of Grants and Contracts Administration to determine what action needs to be taken. 	We agree and are taking the actions below. <p>A transfer was processed on 7/8/2016 through the Office of Grants and Contracts to move the allowable expenses from the Federal grant to the appropriate indirect cost or discretionary account. Only appropriate and allocable expenses will remain on the Federal award.</p> <p>Email notification of UNTS Travel Guidelines was sent on 6/30/2016, which included a pdf and PowerPoint presentation from the UNT's Business Service Center's Process Training section that consists of travel authorization & voucher training. All staff and faculty will be required to participate in on-site group training sessions provided by the BSC regarding UNT travel in either the summer or fall semesters, followed by regularly scheduled updates every fiscal year.</p> <p>All faculty and staff will be tasked on how to create and utilize a certified electronic signature process for submitting and/or approving vouchers. Signing vouchers this way will be strongly encouraged if they are not physically available to sign the voucher.</p> <p>All travel reimbursement documentation will be reviewed during the approval process.</p>	Dean of the College of Information	3/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-406 UNT	Academic and Students	COI Dean's Transitional Audit	UNT	<p>1. The UNT System Travel Guidelines are not consistently followed in internal audit reviewed a sample of 17 vouchers out of a population of 145 vouchers in the College of Information. The following instances of noncompliance were noted:</p> <ul style="list-style-type: none"> • Reimbursement of personal travel with business travel on a Federal grant. • Conference agenda not attached with support documentation. • Missing Travel Budget Authorization form (preapproval to travel), and • Administrative Coordinator signing vouchers in traveler's name with their emailed consent. 	Moderate	Recommendations for Interim Dean of the College of Information: <ol style="list-style-type: none"> Ensure that the UNT System Travel Guidelines are consistently followed in the College of Information by performing a thorough review of travel reimbursement documentation. 	We agree and are taking the actions below. <p>A transfer was processed on 7/8/2016 through the Office of Grants and Contracts to move the allowable expenses from the Federal grant to the appropriate indirect cost or discretionary account. Only appropriate and allocable expenses will remain on the Federal award.</p> <p>Email notification of UNTS Travel Guidelines was sent on 6/30/2016, which included a pdf and PowerPoint presentation from the UNT's Business Service Center's Process Training section that consists of travel authorization & voucher training. All staff and faculty will be required to participate in on-site group training sessions provided by the BSC regarding UNT travel in either the summer or fall semesters, followed by regularly scheduled updates every fiscal year.</p> <p>All faculty and staff will be trained on how to create and utilize a certified electronic signature process for submitting and/or approving vouchers. Signing vouchers this way will be strongly encouraged if they are not physically available to sign the voucher.</p> <p>All travel reimbursement documentation will be reviewed during the approval process.</p>	Dean of the College of Information	3/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-406 UNT	Academic and Students	COI Dean's Transitional Audit	UNT	<p>2. Accounts in the College of Information are not being managed in accordance with UNT Policy 2.1.10 (Account Holder Responsibility).</p> <p>The Chair of the Department of Library Information Sciences (LIS) and the interim Department Chair of Learning Technologies (LT) were not notified of the transition for the deptIDs for which higher is the holder of record.</p> <p>Additionally, the Chair of LIS communicated to Internal Audit that he does not have sufficient time or resources to review the transactions. The College Budget Officer is performing this task. Because the College Budget Officer position has undergone turnover, it is uncertain as to how long it has been since reconciliations have been performed.</p>	Moderate	Recommendations for Interim Dean of the College of Information: <ol style="list-style-type: none"> Ensure all DeptID holders in COI obtain training from the UNT Budget Office to gain a better understanding of the responsibilities outlined in the UNT Policy 2.1.10 Account Holder Responsibility. 	The department Chair review Cognos accounts in all his financial reports. The College Budget Officer will review all accounts across the college, monitored deficits, and advised department chairs and support staff with regard to financial operations. <p>All Dept ID holders and support staff will be required to attend updated training for UNT policies. We will work with the UNT Budget Office so that all account holders and their support staff can gain a better understanding of their responsibilities.</p> <p>Going forward, department assistants and chairs will perform the necessary actions to comply with Account Holder Responsibility policy and will work closely with the College budget officer to reconcile their accounts.</p>	Dean of the College of Information	3/1/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2016	16-006 UNT	Academic and Students	COI Dean's Transitional Audit	UNT	<p>2. Access to the College of Information records being managed in accordance with UNT Policy 2.10 (Accountability/Responsibility) by the Chair of the Department of Library Information Sciences (LIS) and the interim Department Chair of Learning Technologies (LT) were not reviewed for all transactions for the laptops for which he/she is the holder of record.</p> <p>Additionally, the Chair of LIS communicated to Internal Audit that he does not have sufficient time or resources to review the transactions. The College Budget Officer is performing this task. Because the College Budget Officer position has undergone turnover, it is uncertain as to how long it has been since reconciliations have been performed.</p>	Moderate	<p>Recommendations for interim Dean of the College of Information:</p> <p>2a. Ensure all DeptID holders in COI perform the necessary action to comply with the Account Holder Responsibility policy, including but not limited to, reviewing all financial transactions.</p>	<p>The interim Chair, Anthony Gentry, assisted with this financial transaction and gave them a line with UNT Policy 2.10. In the past, the College Budget Officer helped reconcile all accounts across the college, monitored deficits, and advised department chairs and support staff with regard to financial operations.</p> <p>All Dept ID holders and support staff will be required to attend updated training for UNT policies. We will work with the UNT Budget Office so that all account holders and their support staff can gain a better understanding of their responsibilities.</p> <p>Going forward, department assistants and chairs will perform the necessary actions to comply with Account Holder Responsibility policy and will work closely with the College budget officer to reconcile their accounts.</p>	Dean of the College of Information	3/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-006 UNT	Academic and Students	COI Dean's Transitional Audit	UNT	<p>3. UNT cash handling policies were not consistently followed in the College of Information.</p> <p>Cash receipts were not collected, safeguarded, deposited, and/or recorded in accordance with cash handling policies. Additionally, written cash handling procedures in the College of Information were either nonexistent or incomplete as required by policy.</p>	Moderate	<p>Recommendations for interim Dean of the College of Information:</p> <p>3a. Ensure compliance with University cash handling policies, including the development of written cash handling procedures.</p>	<p>We agree.</p> <p>Going forward, individuals who collect, safeguard, deposit, and/or reconcile currency for the College will perform the necessary actions to comply with UNT's Cash Handling policy. We will work closely with the College budget officer to create and implement a written cash handling procedure for the College as required by UNT policy.</p> <p>E-mail notification of UNT System's Cash Handling policy was sent on 7/2/2016 to all staff and faculty. This email included a pdf and the necessary steps for collecting, safeguarding, depositing, and recording cash receipts. Open Alerts Support section. All staff and faculty will be required to participate in on-site group training sessions provided by the UNT Operations Support section regarding cash handling in either the summer or fall semesters, followed by regularly scheduled updates every fiscal year.</p>	Dean of the College of Information	3/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-006 UNT	Academic and Students	COI Dean's Transitional Audit	UNT	<p>3. UNT cash handling policies were not consistently followed in the College of Information.</p> <p>Cash receipts were not collected, safeguarded, deposited, and/or recorded in accordance with cash handling policies. Additionally, written cash handling procedures in the College of Information were either nonexistent or incomplete as required by policy.</p>	Moderate	<p>Recommendations for interim Dean of the College of Information:</p> <p>3b. Ensure individuals with cash handling responsibilities receive training on University cash handling policies and departmental written procedures.</p>	<p>We agree.</p> <p>Going forward, individuals who collect, safeguard, deposit, and/or reconcile currency for the College will perform the necessary actions to comply with UNT's Cash Handling policy. We will work closely with the College budget officer to create and implement a written cash handling procedure for the College as required by UNT policy.</p> <p>E-mail notification of UNT System's Cash Handling policy was sent on 7/2/2016 to all staff and faculty. This email included a pdf and the corresponding Cash handling guidelines handbook from the UNT Operations Support section. All staff and faculty will be required to participate in on-site group training sessions provided by the UNT Operations Support section regarding cash handling in either the summer or fall semesters, followed by regularly scheduled updates every fiscal year.</p>	Dean of the College of Information	3/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-006 UNT	Academic and Students	COI Dean's Transitional Audit	UNT	<p>4. The UNTS Business Service Center Purchasing Card Program Guide was not consistently followed in the College of Information.</p> <p>Internal Audit reviewed a sample of three months of transactions for 10 purchasing cardholders in the College of Information. The following instances of noncompliance were noted:</p> <ul style="list-style-type: none"> Not obtaining annual on-line purchasing card refresher training Missing signatures from the card holder, reconciler, and the approver. Missing verification of State of Texas vendor warrant hold status on required purchases. Missing receipts for purchases. Sales tax paid without subsequent reimbursement, and Not obtaining prior approval for the purchase of alcohol for an event and software, as required. 	Moderate	<p>Recommendations for interim Dean of the College of Information:</p> <p>4a. Ensure that all purchasing cardholders, reconcilers, and approvers receive training on purchasing card guidelines.</p>	<p>We agree.</p> <p>Each PC cardholder, reconciler, and approver will attend training and will also participate in a refresher course every available semester. An email will be sent to all PC cardholders reminding them that they must have the correct signatures from the holder, reconciler, and approver. Alcohol purchasing guidelines will also be included. BIC training will be offered during the fall semester.</p> <p>UNTS Business Service Center Purchasing Card Program Guide will be consistently followed and reviewed regularly to ensure compliance.</p>	Dean of the College of Information	3/1/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2016	16-006 UNT	Academic and Students	CO Dean's Transitional Audit	UNT	<p>1. The UNTS Business Services Center Purchasing Card Program Guide was not consistently followed in the College of Information.</p> <p>Internal Audit reviewed a sample of three months of transactions for 10 purchasing cardholders in the College of Information. The review identified the following issues:</p> <ul style="list-style-type: none"> • Not obtaining annual on-line purchasing card refresher training during fiscal year 2015. • Missing signatures from the card holder, recorder, and the approver. • Missing verification of State of Texas vendor warrant hold status on required purchases. • Missing vendor receipts. • Sales tax paid without subsequent reimbursement, and • Not obtaining prior approval for the purchase of alcohol for an event and advance of cost required. <p>5. The scholarship criteria listed on the Department of Library and Information Science website do not match all the criteria in the corresponding donor agreement.</p> <p>There were 28 scholarships in the College of Information for which Internal Audit received an agreement identifying the criteria for awarding the scholarship. Internal Audit reviewed the criteria on the Library and Information Science website. Internal Audit found that the criteria listed on the website contained discrepancies from the criteria in the agreement.</p> <p>6. Student Financial Aid and Scholarships Best Practices for Scholarships and Awards are not consistently followed within the departments in the College of Information.</p> <p>Internal Audit noted scholarship process inadequacies, specifically:</p> <ul style="list-style-type: none"> • No working departmental policies; • No meeting minutes; and • Donor participating in the scholarship committee and involved in award selection. 	Moderate	<p>Recommendations for Interim Dean of the College of Information:</p> <p>4b. Ensure that the UNTS Business Services Center Purchasing Card Program Guide is consistently followed in the College of Information.</p>	<p>We agree.</p> <p>Each card holder, recorder, and approver will attend training and will also participate in a refresher training course as made available. An email will be sent to all card holders reminding them that they are required to complete the refresher training. The refresher training will be scheduled the week of Aug 8th. Additional card training will be offered during the fall semester.</p> <p>UNTS Business Services Center Purchasing Card Program Guide will be consistently followed and reviewed regularly to ensure compliance.</p>	Dean of the College of Information	3/17/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-006 UNT	Academic and Students	CO Dean's Transitional Audit	UNT	<p>5. The scholarship criteria listed on the Department of Library and Information Science website do not match all the criteria in the corresponding donor agreement.</p> <p>There were 28 scholarships in the College of Information for which Internal Audit received an agreement identifying the criteria for awarding the scholarship. Internal Audit reviewed the criteria on the Library and Information Science website. Internal Audit found that the criteria listed on the website contained discrepancies from the criteria in the agreement.</p> <p>6. Student Financial Aid and Scholarships Best Practices for Scholarships and Awards are not consistently followed within the departments in the College of Information.</p> <p>Internal Audit noted scholarship process inadequacies, specifically:</p> <ul style="list-style-type: none"> • No working departmental policies; • No meeting minutes; and • Donor participating in the scholarship committee and involved in award selection. 	Moderate	<p>Recommendation for Interim Dean of the College of Information:</p> <p>5a. Ensure all scholarships are advertised in accordance with donor agreements.</p>	<p>We agree.</p> <p>All CO websites will be reviewed and any discrepancies will be rectified. We will ensure that the webmasters are reviewing the criteria for compliance for each advertised scholarship.</p>	Dean of the College of Information	10/17/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-006 UNT	Academic and Students	CO Dean's Transitional Audit	UNT	<p>6. Student Financial Aid and Scholarships Best Practices for Scholarships and Awards are not consistently followed within the departments in the College of Information.</p> <p>Internal Audit noted scholarship process inadequacies, specifically:</p> <ul style="list-style-type: none"> • No working departmental policies; • No meeting minutes; and • Donor participating in the scholarship committee and involved in award selection. 	Moderate	<p>Recommendation for Interim Dean of the College of Information:</p> <p>6a. Ensure that the Student Financial Aid and Scholarships Best Practices for Scholarships and Awards are consistently followed within the departments in the College of Information, specifically:</p> <ul style="list-style-type: none"> • Create a department policy for awarding scholarships; • Hold committee meetings and document minutes; and • Ensure appropriate personnel are involved in the scholarship selection process. 	<p>We agree.</p> <p>The departments will ensure that each scholarship is in line with UNT's policies and best practices, and we will also create a department policy for awarding scholarships. The departments will ensure that the committees will keep minutes of all meetings and document the procedure in the selection process. Donor participation will be in line with UNT policy. Scholarship award process training will be provided on July 28th, 2016 as a follow up to an earlier meeting.</p>	Dean of the College of Information	12/17/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-006 UNT	Academic and Students	CO Dean's Transitional Audit	UNT	<p>7. When the School of Library and Information Sciences became a department in the College of Information, the existing scholarship agreements were not evaluated to determine the appropriate program of study for which the scholarship should be offered. Additionally, the UNT Division of Advancement and the College of Information had a different number of endowed scholarships within the College of Information.</p> <p>The scholarship agreements were prepared and written to provide scholarships for the School of Library and Information Sciences. Once the School of Library and Information Sciences became a department, the scholarships were awarded solely to those studying within the Department of Library and Information Sciences.</p> <p>7. When the School of Library and Information Sciences became a department in the College of Information, the existing scholarship agreements were not evaluated to determine the appropriate program of study for which the scholarship should be offered. Additionally, the UNT Division of Advancement and the College of Information had a different number of endowed scholarships within the College of Information.</p> <p>The scholarship agreements were prepared and written to provide scholarships for the School of Library and Information Sciences. Once the school became a department in the College of Information, these scholarships were awarded solely to those studying within the Department of Library and Information Sciences.</p>	Low	<p>Recommendations for Interim Dean of the College of Information:</p> <p>7a. Coordinate with the Office of General Counsel and Advancement to examine the language and donor's intent to determine the appropriate program of study for which the scholarships can be offered.</p>	<p>Advancement did not provide information about the Many Noble endowed scholarship to the department and the scholarship was not listed in Cognos with the rest of the other scholarships. When the US budget was separated from the college budget in 2012, all endowed scholarships were awarded according to the MOUs.</p> <p>The dean of the College of Information will ask UNT General Counsel to examine the language and donor intent.</p> <p>The College of Information's Advancement representative will work with the School of Library and Information Sciences to determine the existing number of scholarships that are eligible to be awarded.</p>	Dean of the College of Information	1/17/2017 Rev. 07/01/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-006 UNT	Academic and Students	CO Dean's Transitional Audit	UNT	<p>7. When the School of Library and Information Sciences became a department in the College of Information, the existing scholarship agreements were not evaluated to determine the appropriate program of study for which the scholarship should be offered. Additionally, the UNT Division of Advancement and the College of Information had a different number of endowed scholarships within the College of Information.</p> <p>The scholarship agreements were prepared and written to provide scholarships for the School of Library and Information Sciences. Once the school became a department in the College of Information, these scholarships were awarded solely to those studying within the Department of Library and Information Sciences.</p>	Low	<p>Recommendations for Interim Dean of the College of Information:</p> <p>7b. Coordinate with UNT Division of Advancement to obtain a list of all endowed scholarships awarded according to the MOUs. The College of Information and determine which are eligible to be awarded.</p>	<p>Advancement did not provide information about the Many Noble endowed scholarship to the department and the scholarship was not listed in Cognos with the rest of the other scholarships. When the US budget was separated from the college budget in 2012, all endowed scholarships were awarded according to the MOUs.</p> <p>The dean of the College of Information will ask UNT General Counsel to examine the language and donor intent.</p> <p>The College of Information's Advancement representative will work closely with the College scholarship representative to ascertain the existing number of scholarships that are eligible to be awarded.</p>	Dean of the College of Information	1/17/2017 Rev. 07/01/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Review Period Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observation	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2016	16-022 HSC	Governance and Regulatory Compliance	School of Public Health (Unit Specific Management Control Review)	UNTHSC	<p>Currently, UNTHSC utilizes an incremental budget model, in which budget allocations are based upon the funding levels of the previous years. However, the model is not sufficient to ensure allocated amounts are adequate based on business needs and to achieve institutional goals and initiatives.</p> <p>In addition, although UNTHSC has operating budget guidelines, there are no formalized principles. Budget principles help create overarching values for prioritization and resource allocation which management adhere to as the budget is developed. Furthermore, policies and procedures are not sufficiently developed to clarify and crystallize the intent behind how the University will manage its financial resources.</p>	High	<p>Recommendation to the UNTHSC President and Interim Chief Financial Officer:</p> <p>1a. Review and assess alternative budget models and adopt a model that aligns with institutional goals and initiatives.</p>	<p>a. The Health Science Center (HSC) will establish a budget advisory committee to provide recommendations regarding the underlying principles and procedures to the President's cabinet. The President's cabinet will discuss and determine the best course of action in budgeting for HSC, with the goal of developing a budget model for the FY 2018 budget process. This budgeting model will be completed by September 1, 2017.</p>	Gregory R. Anderson, Interim Chief Financial Officer	9/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-022 HSC	Governance and Regulatory Compliance	School of Public Health (Unit Specific Management Control Review)	UNTHSC	<p>Currently, UNTHSC utilizes an incremental budget model, in which budget allocations are based upon the funding levels of the previous years. However, the model is not sufficient to ensure allocated amounts are adequate based on business needs and to achieve institutional goals and initiatives.</p> <p>In addition, although UNTHSC has operating budget guidelines, there are no formalized principles. Budget principles help create overarching values for prioritization and resource allocation which management adhere to as the budget is developed. Furthermore, policies and procedures are not sufficiently developed to clarify and crystallize the intent behind how the University will manage its financial resources.</p>	High	<p>Recommendation to the UNTHSC President and Interim Chief Financial Officer:</p> <p>1b. Develop institutional principles, policies and procedures.</p>	<p>b. Based on the determination by the President's cabinet, budget principles, policy and procedures will be developed which support the accomplishment of the HSC objectives and initiatives consistent with the strategic plan. The proposed budget policy will be submitted to the Office of General Counsel (OGC) by September 5, 2017.</p>	Gregory R. Anderson, Interim Chief Financial Officer	9/5/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-022 HSC	Governance and Regulatory Compliance	School of Public Health (Unit Specific Management Control Review)	UNTHSC	<p>Currently, UNTHSC utilizes an incremental budget model, in which budget allocations are based upon the funding levels of the previous years. However, the model is not sufficient to ensure allocated amounts are adequate based on business needs and to achieve institutional goals and initiatives.</p> <p>In addition, although UNTHSC has operating budget guidelines, there are no formalized principles. Budget principles help create overarching values for prioritization and resource allocation which management adhere to as the budget is developed. Furthermore, policies and procedures are not sufficiently developed to clarify and crystallize the intent behind how the University will manage its financial resources.</p>	High	<p>Recommendation to the UNTHSC President and Interim Chief Financial Officer:</p> <p>1c. Communicate newly developed principles, policies and procedures to pertinent employees. Management should consider posting these documents on the UNTHSC website.</p>	<p>c. Once developed, the proposed budget policy will be submitted to OGC for approval by September 5, 2017 and once OGC approves, then the budget policy and procedures will be communicated to the employees and posted on the UNTHSC website.</p>	Gregory R. Anderson, Interim Chief Financial Officer	9/2/2017 Rev. 10/9/17	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-022 HSC	Governance and Regulatory Compliance	School of Public Health (Unit Specific Management Control Review)	UNTHSC	<p>There was a change in the format of the Quarterly Budget Reports that became effective in Q2 FY2016 to exclude prior year balances. However, the current year budget amounts as well as the prior year balances, however, the Q2 Quarterly Budget Report only showed current year budget amounts. Therefore, the total available budget in the Q2 Budget Report was understated by the following:</p> <ul style="list-style-type: none"> Tobacco Settlement Funds - \$264,582 Designated Tuition Funds - \$43,282 <p>Additionally, prior year revenue generating activities of \$233,784 was also included in the Q2 Quarterly Budget Report. This amount comprises of Facilities & Administrative cost recovery from grants for the amount of \$383,855.</p>	Moderate	<p>Recommendation to the Interim Chief Financial Officer:</p> <p>2a. Management should determine why change in information needs to be included in the Quarterly Budget Reports and develop a standard operating procedure.</p>	<p>a. Management will establish a task force to determine what relevant information needs to be included in quarterly budget reports, including the amount of prior year revenue generating activities. Management will submit standard operating procedures. These recommendations will be submitted to the President's cabinet for discussion and approval by January 12, 2017.</p>	Gregory R. Anderson, Interim Chief Financial Officer	1/12/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-022 HSC	Governance and Regulatory Compliance	School of Public Health (Unit Specific Management Control Review)	UNTHSC	<p>There was a change in the format of the Quarterly Budget Reports that became effective in Q2 FY2016 to exclude prior year balances brought forward. The Q1 Quarterly Budget Report reflected the current year budget amounts as well as the prior year balances; however, the Q2 Quarterly Budget Report only showed current year budget amounts. Therefore, the total available budget in the Q2 Budget Report was understated by the following:</p> <ul style="list-style-type: none"> Tobacco Settlement Funds - \$264,582 Designated Tuition Funds - \$43,282 <p>Additionally, prior year revenue generating activities of \$233,784 was also included in the Q2 Quarterly Budget Report. This amount comprises of Facilities & Administrative cost recovery from grants for the amount of \$383,855.</p>	Moderate	<p>Recommendation to the Interim Chief Financial Officer:</p> <p>2b. Once standard operating procedures have been developed, management should communicate to all relevant parties.</p>	<p>b. Once prepared, the finance office will communicate to all relevant parties the procedures to be used by February 10, 2017.</p>	Gregory R. Anderson, Interim Chief Financial Officer	2/10/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2016	16-022 HSC	Governance and Regulatory Compliance	School of Public Health (Unit-Specific Management Control Review)	UNTISC	<p>Safeguarding measures of student fee payments received are not being reviewed using the reconciliation procedure at the Office of Admissions. Specifically, the following were noted:</p> <ul style="list-style-type: none"> • Current (prospective) students are not provided with receipts when making payments for various fees unless requested by the student. • Reconciliation processes are not in place to verify that application and deferral fees, a manual unofficial receipt from a generic receipt logbook was provided to students upon request. • Reconciliation processes are not in place to verify that assurance and deferral fees are properly credited towards the correct student account. • Reconciliation processes are not in place to verify that application and change of concentration fees were properly recorded in the correct departmental account. 	Moderate	<p>Recommendation for the Director of Financial Services – Student Finance:</p> <ol style="list-style-type: none"> Work with Student Accounting and University Cashiering Services to change your process to require students paying in person to pay directly at the cashiering office and obtain an acknowledgment receipt from the cashiering office by mail to send their checks directly to the cashiering office. 	We concur with your findings and agree to partner with the appropriate staff from the cashiering office to evaluate and improve internal controls at the UNTISC, School of Public Health. Key team members from UNT System Student Accounting and UNT System Financial Systems support will work with the appropriate staff (as appropriate), are implemented by no later than August 1, 2017.	Jeanne Olson, Director of Financial Services – Student Finance	8/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-022 HSC	Governance and Regulatory Compliance	School of Public Health (Unit-Specific Management Control Review)	UNTISC	<p>Safeguarding measures of student fee payments received are not being reviewed using the reconciliation procedure at the Office of Admissions. Specifically, the following were noted:</p> <ul style="list-style-type: none"> • Current (prospective) students are not provided with receipts when making payments for various fees unless requested by the student. • Reconciliation processes are not in place to verify that application and deferral fees, a manual unofficial receipt from a generic receipt logbook was provided to students upon request. • Reconciliation processes are not in place to verify that assurance and deferral fees are properly credited towards the correct student account. • Reconciliation processes are not in place to verify that application and change of concentration fees were properly recorded in the correct departmental account. 	Moderate	<p>Recommendation for Associate Dean of School of Public Health:</p> <ol style="list-style-type: none"> Develop procedures to help ensure that all fees collected are reconciled on a regular basis to the University accounting system and to the respective student account. 	The School of Public Health, Office of Admissions will establish a procedure to: a. Redirect on-site cash received to the Cashier's Office, located in the Student Services Center of the UNTISC campus, in the same building as the Office of Admission. Student will make payment to the Cashier, who will provide proof of payment to the Office of Admission. b. Redirect deposits by mail directly to the Cashiering Office. c. Establish a procedure for the Office of Admission to be notified when a manual unofficial receipt is collected by the Cashier's office. d. Mail a log of all fees collected as outlined by the Cashier's office to the Cashiering Office. e. Work with Financial Services as a process improvement to automate items 1 and 2 above within their stipulated implementation date of August 1, 2017.	Matt Nolan, Associate Director of Admissions & Student Services	3/1/2017 Rev. 08/01/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-022 HSC	Governance and Regulatory Compliance	School of Public Health (Unit-Specific Management Control Review)	UNTISC	<p>While obtaining an understanding of UNTISC Cashiering as it related to the safeguarding of student funds, we noted opportunities for improvement. Although UNTISC Cashiering Office is a keypad control access room with glass windows and limited access to only authorized personnel, the following exceptions were noted:</p> <ul style="list-style-type: none"> • The drawers (cash registers) in which funds are kept do not have locks to ensure that each cashier is accountable for her assigned drawer. • The bank deposit bag is not kept in the safe until the armored truck arrives for pick up. • Cashiers have their purses in the cashiering room rather than having purses kept in a locker. • The two cashiers have only received cash handling training once, which was at the beginning of their employment in the last three and six year tenure. 	Moderate	<p>Recommendations for the Director of Financial Services – Student Finance:</p> <ol style="list-style-type: none"> Establish a mandatory annual cash handling training for all personnel handling cash at UNTISC. 	We concur with your findings and agree to evaluate and implement internal controls at the UNTISC campus in Fort Worth. Key team members from UNT System Student Accounting and UNT System Controller's Office will work with the appropriate staff (as necessary) at the campus to ensure these recommendations, and others as appropriate, are implemented by no later than August 1, 2017.	Jeanne Olson, Director of Financial Services – Student Finance	8/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-022 HSC	Governance and Regulatory Compliance	School of Public Health (Unit-Specific Management Control Review)	UNTISC	<p>While obtaining an understanding of UNTISC Cashiering as it related to the safeguarding of student funds, we noted opportunities for improvement. Although UNTISC Cashiering Office is a keypad control access room with glass windows and limited access to only authorized personnel, the following exceptions were noted:</p> <ul style="list-style-type: none"> • The drawers (cash registers) in which funds are kept do not have locks to ensure that each cashier is accountable for her assigned drawer. • The bank deposit bag is not kept in the safe until the armored truck arrives for pick up. • Cashiers have their purses in the cashiering room rather than having purses kept in a locker. • The two cashiers have only received cash handling training once, which was at the beginning of their employment in the last three and six year tenure. 	Moderate	<p>Recommendations for the Director of Financial Services – Student Finance:</p> <ol style="list-style-type: none"> Require all cash handling personnel to sign a statement acknowledging that they have been trained, read and understand the relevant policies and procedures. 	We concur with your findings and agree to evaluate and implement internal controls at the UNTISC campus in Fort Worth. Key team members from UNT System Student Accounting and UNT System Controller's Office will work with the appropriate staff (as necessary) at the campus to ensure these recommendations, and others as appropriate, are implemented by no later than August 1, 2017.	Jeanne Olson, Director of Financial Services – Student Finance	8/1/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2016	16-021 HSC	Governance and Regulatory Compliance	School of Public Health (Unit Specific Management Control Review)	UNTHSC	<p>While obtaining an understanding of UNTHSC Cashiering as it related to the process of receiving and depositing funds by the School of Public Health, we noted opportunities for improvement. Although, UNTHSC Cashiering Office is a keypad control access room with glass windows and limited access to only authorized personnel, the following exceptions were noted:</p> <ul style="list-style-type: none"> The drawers (cash registers) in which funds are kept, do not have locks to ensure that each cashier is accountable for her assigned drawer. The bank deposit bag is not kept in the safe until the armored truck arrives for pick up. Cashiers have their purses in the cashiering room rather than having purses kept in a locker. The two cashiers have only received cash handling training once, which was at the beginning of their employment in the last three and six year tenure. 	Moderate	<p>Recommendations for the Director of Financial Services – Student Finance:</p> <ul style="list-style-type: none"> Work with the UNTHSC Cashiering Office to modify Cash Handling Procedures to require cash handling annual training. 	We concur with your findings and agree to work with and implement the recommendations as needed for reducing risk and improving internal controls at the UNTHSC Campus in Fort Worth. Key team members from UNT System Student Accounting and UNT System Controller's Office will work with the appropriate staff (as necessary) at the campus to ensure these recommendations, and others as deemed appropriate, are implemented by no later than August 1, 2017.	Jeanne Olson, Director of Financial Services – Student Finance	8/17/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-021 HSC	Governance and Regulatory Compliance	School of Public Health (Unit Specific Management Control Review)	UNTHSC	<p>While obtaining an understanding of UNTHSC Cashiering as it related to the process of receiving and depositing funds by the School of Public Health, we noted opportunities for improvement. Although, UNTHSC Cashiering Office is a keypad control access room with glass windows and limited access to only authorized personnel, the following exceptions were noted:</p> <ul style="list-style-type: none"> The drawers (cash registers) in which funds are kept, do not have locks to ensure that each cashier is accountable for her assigned drawer. The bank deposit bag is not kept in the safe until the armored truck arrives for pick up. Cashiers have their purses in the cashiering room rather than having purses kept in a locker. The two cashiers have only received cash handling training once, which was at the beginning of their employment in the last three and six year tenure. 	Moderate	<p>Recommendations for the Director of Financial Services – Student Finance:</p> <ul style="list-style-type: none"> Ad. Consider expanding the mandatory annual cash handling training and acknowledgement statement requirements to other University components. 	We concur with your findings and agree to evaluate and implement the recommendations as presented for reducing risk and improving internal controls at the UNTHSC Campus in Fort Worth. Key team members from UNT System Student Accounting and UNT System Controller's Office will work with the appropriate staff (as necessary) at the campus to ensure these recommendations, and others as deemed appropriate, are implemented by no later than August 1, 2017.	Jeanne Olson, Director of Financial Services – Student Finance	8/17/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-021 HSC	Governance and Regulatory Compliance	School of Public Health (Unit Specific Management Control Review)	UNTHSC	<p>While obtaining an understanding of UNTHSC Cashiering as it related to the process of receiving and depositing funds by the School of Public Health, we noted opportunities for improvement. Although, UNTHSC Cashiering Office is a keypad control access room with glass windows and limited access to only authorized personnel, the following exceptions were noted:</p> <ul style="list-style-type: none"> The drawers (cash registers) in which funds are kept, do not have locks to ensure that each cashier is accountable for her assigned drawer. The bank deposit bag is not kept in the safe until the armored truck arrives for pick up. Cashiers have their purses in the cashiering room rather than having purses kept in a locker. The two cashiers have only received cash handling training once, which was at the beginning of their employment in the last three and six year tenure. 	Moderate	<p>Recommendations for the Director of Financial Services – Student Finance:</p> <ul style="list-style-type: none"> Ad. Ensure all bank deposit bags are kept in the safe until the armored truck arrives. 	We concur with your findings and agree to evaluate and implement the recommendations as presented for reducing risk and improving internal controls at the UNTHSC Campus in Fort Worth. Key team members from UNT System Student Accounting and UNT System Controller's Office will work with the appropriate staff (as necessary) at the campus to ensure these recommendations, and others as deemed appropriate, are implemented by no later than August 1, 2017.	Jeanne Olson, Director of Financial Services – Student Finance	8/17/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-021 HSC	Governance and Regulatory Compliance	School of Public Health (Unit Specific Management Control Review)	UNTHSC	<p>While obtaining an understanding of UNTHSC Cashiering as it related to the process of receiving and depositing funds by the School of Public Health, we noted opportunities for improvement. Although, UNTHSC Cashiering Office is a keypad control access room with glass windows and limited access to only authorized personnel, the following exceptions were noted:</p> <ul style="list-style-type: none"> The drawers (cash registers) in which funds are kept, do not have locks to ensure that each cashier is accountable for her assigned drawer. The bank deposit bag is not kept in the safe until the armored truck arrives for pick up. Cashiers have their purses in the cashiering room rather than having purses kept in a locker. The two cashiers have only received cash handling training once, which was at the beginning of their employment in the last three and six year tenure. 	Moderate	<p>Recommendations for the Director of Financial Services – Student Finance:</p> <ul style="list-style-type: none"> Ad. Consider utilizing a desktop check scanner. 	We concur with your findings and agree to evaluate and implement the recommendations as presented for reducing risk and improving internal controls at the UNTHSC Campus in Fort Worth. Key team members from UNT System Student Accounting and UNT System Controller's Office will work with the appropriate staff (as necessary) at the campus to ensure these recommendations, and others as deemed appropriate, are implemented by no later than August 1, 2017.	Jeanne Olson, Director of Financial Services – Student Finance	8/17/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNTS System Internal Audit	Fiscal Year 2016	16-022 ISC	Governance and Regulatory Compliance	School of Public Health (Unit Specific Management Control Review)	UNTSIC	While obtaining an understanding of UNTSIC Cybering as it related to the process of receiving and depositing funds by the School of Public Health, we noted opportunities for improvement. Although, the School of Public Health has implemented controls with firewalls, windows and limited access to only authorized personnel, the following exceptions were noted: <ul style="list-style-type: none"> The drawers (cash registers) in which funds are kept do not have ensure that each cashier is accountable for their assigned drawer. 	Moderate	Recommendations for the Director of Financial Services – Student Finance: 1. Review all papers and belongings in a locker or drawer away from where the money is kept.	We concur with your findings and agree to evaluate and implement the recommendations as presented for reducing risk and improving internal controls at the UNTSIC campus in Fort Worth. Key team members from the UNTSIC campus will work with the appropriate staff (as necessary) at the campus to ensure these recommendations, and others as deemed appropriate, are implemented by no later than August 1, 2017.	Jeanne Olson, Director of Financial Services – Student Finance	8/1/2017	Closed
Internal	UNTS System Internal Audit	Fiscal Year 2016	16-022 ISC	Governance and Regulatory Compliance	School of Public Health (Unit Specific Management Control Review)	UNTSIC	During our review of School of Public Health Payroll, we noted that UNTS System Administration Policy 03.003 Longevity Pay is outdated and it is not in compliance with the state. Specifically, as of September 1, 2005 the longevity pay was raised from \$20 per month to \$25 per month. The longevity pay is not updated every two years of service which is in violation of the policy (adequacy). It is important to note that the longevity pay is approximately calculated in the University Payroll System in accordance with the state.	Low	Recommendation for the Human Resources Director: 1. Modify University Administrative Policy regarding Longevity Pay to help ensure compliance with the state laws.	Management worked with the UNT System Policy Manager to update/modify the University Administrative Policy. The updated policy was submitted to the Office of General Counsel for review during the audit.	Gary Finney, Human Resources Director	7/15/2016	Closed
Internal	UNTSIC Institutional Review Board	Fiscal Year 2016	NA	Governance and Regulatory Compliance	PKU Human Microbiome Protocol	UNTSIC	None	NA	NA	NA	NA	NA	N/A
Internal	UNTS System Internal Audit	Fiscal Year 2016	16-022 SIS	Information Technology	IT Privacy and Data Protection	UNT System	Responsibility for IT Security is decentralized and communication concerning the responsibilities of each party should be strengthened. ITSS establishes the policies for the UNT Enterprise concerning requirements for installing and maintaining anti-virus and encryption software on all laptops. The primary responsibility of the IT Managers or Custodians to ensure these policies are carried out. IA talked to the Managers of UNTS, UNT CAS and UNTD and they were not aware of the encryption software on the laptops. The IT Managers do not follow procedures to ensure the software installed is maintained and current. They do not receive directive communication from ITSS regarding accountability and responsibility for maintaining this software.	High	Recommendations for ITSS: 1. ITSS should utilize a communication framework detailing how responsibility for installation and maintenance of anti-virus and encryption software on laptops, as well as inventory of laptops, will be disseminated.	IT Shared Services will utilize the following existing frameworks that address the recommendations of this observation #1: 1. The framework that establishes security responsibilities for the management of information resources, including laptops, which is defined and communicated online in the following resources: a. UNT System Information Security Policy 6.1000, Section 16.004(3), "Information Security Structure"; b. UNT System Information Security Policy 6.1000, Section 2, "Information Security Role"; c. UNT System Information Security Handbook, Section 6, "Information Security Structure"; and d. Texas Administrative Code Chapter 202 and ISO 27001 and ISO 27002 and e. UNT System Information Security Mandate: Mobile Device Encryption. 2. The UNT System Information Security Handbook, sections 10.4.1-10.4.4 and 12.4.1-12.4.2, which is available online and establishes requirements for management and installation of anti-virus and encryption software. 3. UNT System committees established to communicate and coordinate IT projects and issues, including a listserve that is used to communicate information technology, security, anti-virus and encryption services issues to IT personnel across the UNT System and the Institutions. The UNT Committee is called the Technical System committees, called the ITSS Technology Advisory group. This group meets every other month. Representation in each committee address the recommendations of this observation #1: 1. The framework that establishes security responsibilities for the management of information resources, including laptops, which is defined and communicated online in the following resources: a. UNT System Information Security Policy 6.1000, Section 16.004(3), "Information Security Structure"; b. UNT System Information Security Policy 6.1000, Section 2, "Information Security Role"; and c. UNT System Information Security Handbook, Section 6, "Information Security Structure"; and d. Texas Administrative Code Chapter 202 and ISO 27001 and ISO 27002 and e. UNT System Information Security Mandate: Mobile Device Encryption. 2. The UNT System Information Security Handbook, sections 10.4.1-10.4.4 and 12.4.1-12.4.2, which is available online and establishes requirements for management and installation of anti-virus and encryption software. 3. UNT and UNT System committees established to communicate campus related IT projects and issues, in addition to a listserve that is used to communicate information technology, security, anti-virus and encryption services issues to IT personnel across the UNT System and the Institutions. The UNT Committee is called the Technical System committees, called the ITSS Technology Advisory group. This group meets every other month. Representation in each committee	Charlotte Russell, Chief Information Security Officer	3/31/2017	Closed
Internal	UNTS System Internal Audit	Fiscal Year 2016	16-022 SIS	Information Technology	IT Privacy and Data Protection	UNT System	Responsibility for IT Security is decentralized and communication concerning the responsibilities of each party should be strengthened. ITSS establishes the policies for the UNT Enterprise concerning requirements for installing and maintaining anti-virus and encryption software on all laptops. It is then the responsibility of the IT Managers or Custodians to ensure these policies are carried out. IA talked to the Managers of UNTS, UNT CAS and UNTD and they were not aware of the encryption software on the laptops. The IT Managers do not follow procedures to ensure the software installed is maintained and current. They do not receive directive communication from ITSS regarding accountability and responsibility for maintaining this software.	High	Recommendations for ITSS: 1. ITSS may use an appropriate existing committee or create a new security concerns, including anti-virus and encryption software maintenance. Such a committee should include representatives from across the University at all levels, not just IT personnel.	IT Shared Services will utilize the following existing frameworks that address the recommendations of this observation #1: 1. The framework that establishes security responsibilities for the management of information resources, including laptops, which is defined and communicated online in the following resources: a. UNT System Information Security Policy 6.1000, Section 16.004(3), "Information Security Structure"; b. UNT System Information Security Policy 6.1000, Section 2, "Information Security Role"; and c. UNT System Information Security Handbook, Section 6, "Information Security Structure"; and d. Texas Administrative Code Chapter 202 and ISO 27001 and ISO 27002 and e. UNT System Information Security Mandate: Mobile Device Encryption. 2. The UNT System Information Security Handbook, sections 10.4.1-10.4.4 and 12.4.1-12.4.2, which is available online and establishes requirements for management and installation of anti-virus and encryption software. 3. UNT and UNT System committees established to communicate campus related IT projects and issues, in addition to a listserve that is used to communicate information technology, security, anti-virus and encryption services issues to IT personnel across the UNT System and the Institutions. The UNT Committee is called the Technical System committees, called the ITSS Technology Advisory group. This group meets every other month. Representation in each committee	Charlotte Russell, Chief Information Security Officer	3/31/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2016	16-02-215	Information Technology	IT Privacy and Data Protection	UNT System	Inventory list of laptops provided by Asset Management is not complete and accurate. Asset Management (AM) is responsible for maintaining an inventory of all laptops in the UNT System. This list was managed by ES. IA obtained a list of laptops from asset management for UNT, UNTS, and UNTD, which contained 4688 entries. Listing from ePO provided to IA contained 3771 laptops for the entire UNT Enterprises. IA attempted to find those machines in the asset management listing. Only 53 machines were found due to the asset management listing only sporadically including the machine name, the key field in ePO. Review of the lists provided, from ES or ePO, indicated the type of asset/machine. UNT maintains an inventory list which contained 85 laptops. Asset Management's listing indicated 387 laptops assigned to UNTD. CIO does not maintain an independent inventory list of laptops and IA attempted to find those machines in the asset management listing. Management's listing.	High	IA recommends Asset Management review their processes to ensure they result in an accurate laptop inventory across the Enterprise. IA should then conduct an audit of the Asset Management listing. This listing was managed by ES. IA obtained a list of laptops from asset management for UNT, UNTS, and UNTD, which contained 4688 entries. Listing from ePO provided to IA contained 3771 laptops for the entire UNT Enterprises. IA attempted to find those machines in the asset management listing. Only 53 machines were found due to the asset management listing only sporadically including the machine name, the key field in ePO. Review of the lists provided, from ES or ePO, indicated the type of asset/machine. UNT maintains an inventory list which contained 85 laptops. Asset Management's listing indicated 387 laptops assigned to UNTD. CIO does not maintain an independent inventory list of laptops and IA attempted to find those machines in the asset management listing. Management's listing.	NA	NA	N/A	
Internal	UNT System Internal Audit	Fiscal Year 2016	16-02-215	Information Technology	IT Privacy and Data Protection	UNT System	Inventory listing of laptops from Asset Management and listing of laptops in ePO are not reconciled. IA obtained a list of laptops from Asset Management pulled from ES 9.0, which contained 4688 entries for UNT, UNTS, and UNTD. 3771 laptops containing anti-virus software were found in ePO for the UNT System. IA attempted to find those machines in the asset management listing. Only 53 machines were found due to the asset management listing only sporadically including the machine name, the key field in ePO.	High	Recommendation for ITMS: ITMS should develop and submit a policy requiring a periodic reconciliation of laptops in Asset Management's inventory to the list of laptops in ePO. This will help determine if all required laptops are equipped with encryption and anti-virus software.	Per discussion that ensued between the leadership of ITSS (Bama Dawkins, Director of Information Security), ITMS (Bama Dawkins) and Internal Audit (Tracy Gung, Mike Taylor, and Sue Page) on August 11, 2016, all parties agreed to an alternative to this recommendation, due to non-compatibility of the asset management system with ePO. The two technologies are used for unique purposes: inventory, and ePO is a software management tool used by ITSS to centrally manage the distribution of anti-virus and encryption software to institutionally owned devices. These tools do not capture the same type of information that would be needed to support reconciliation, system, installed, or comparable information, is not stored in either system. ITSS will establish a requirement for departments to install current versions of anti-virus and encryption software deployment tools on all newly acquired laptops. By installing the anti-virus and encryption software on all laptops, the asset management system and ePO management inventory will initially be indicative of devices that are protected with these solutions. Thereafter, the annual check-in recommendation will support review and compliance as noted in Observation #1.	Charlotte Russell, Chief Information Security Officer	3/31/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-02-215	Information Technology	IT Privacy and Data Protection	UNT System	Inventory listing of laptops from Asset Management and listing of laptops in ePO are not reconciled. IA obtained a list of laptops from Asset Management pulled from ES 9.0, which contained 4688 entries for UNT, UNTS, and UNTD. 3771 laptops containing anti-virus software were found in ePO for the UNT System. IA attempted to find those machines in the asset management listing. Only 53 machines were found due to the asset management listing only sporadically including the machine name, the key field in ePO.	High	Recommendation for IT Managers: IT Managers should develop a process to periodically reconcile the laptop asset management inventory with ePO in compliance with the new policy.	Per discussion that ensued between the leadership of ITSS (Bama Dawkins, Director of Information Security), ITMS (Bama Dawkins) and Internal Audit (Tracy Gung, Mike Taylor, and Sue Page) on August 11, 2016, all parties agreed to an alternative to this recommendation, due to non-compatibility of the asset management system with ePO. The two technologies are used for unique purposes: inventory, and ePO is a software management tool used by ITSS to centrally manage the distribution of anti-virus and encryption software to institutionally owned devices. These tools do not capture the same type of information that would be needed to support reconciliation, system, installed, or comparable information, is not stored in either system. ITSS will establish a requirement for departments to install current versions of anti-virus and encryption software deployment tools on all newly acquired laptops. By installing the anti-virus and encryption software on all laptops, the asset management system and ePO management inventory will initially be indicative of devices that are protected with these solutions. Thereafter, the annual check-in recommendation will support review and compliance as noted in Observation #1.	Charlotte Russell, Chief Information Security Officer	3/31/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2016	16-102-215	Information Technology	IT Privacy and Data Protection	UNT System	No follow-up for laptops not checking in. ITSS maintains the ePO system, supplying the McAfee tool for people building laptops to put anti-virus and encryption software on machines. ePO also updates these machines with the most recent software upgrades when the machines access the network, normally every 15 minutes. ITSS does not require follow-up on machines that have not checked in within a certain timeframe.	High	Recommendations for ITSS: ITSS should develop and submit a policy requiring IT Managers investigate machines not checking into ePO within a defined timeframe or not containing anti-virus updates per definition.	Computer images that include anti-virus and encryption software are deployed to laptops by campus departments. ITSS does not have access to the images and is therefore unable to update them. In addition, ITSS does not manage departmental operations or processes associated with management of laptops. ITSS will establish a requirement for laptops to be connected to anti-virus and encryption software updates. In cases where a laptop is not connected to anti-virus and encryption software updates, a security exception will be considered if mitigating controls can be established to protect the respective device. ITSS will establish a requirement for IT managers to remove laptops from ePO that have been superseded and are no longer in use. ITSS will establish a requirement for IT managers to investigate the following: • Laptops that do not check into ePO within an established timeframe; • Laptops that do not receive anti-virus updates. Documentation listing the reasons why a laptop does not check into ePO will be required to be maintained by the IT Manager. In cases where a laptop is not capable of checking in due to inability to run institutionally owned and managed anti-virus or encryption software or solution, a security exception will be considered if mitigating controls can be established to protect the respective device.	Charlotte Russell, Chief Information Security Officer	3/31/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-102-215	Information Technology	IT Privacy and Data Protection	UNT System	No follow-up for laptops not checking in. ITSS maintains the ePO system, supplying the McAfee tool for people building laptops to put anti-virus and encryption software on machines. ePO also updates these machines with the most recent software upgrades when the machines access the network, normally every 15 minutes. ITSS does not require follow-up on machines that have not checked in within a certain timeframe.	High	Recommendations for ITSS: ITSS should develop and submit a policy requiring laptops owners to bring the laptop into campus and connect directly to the UNT network at least annually to receive required updates. Reason for not checking in should be documented, and/or machine access removed from the UNT network.	Computer images that include anti-virus and encryption software are deployed to laptops by campus departments. ITSS does not have access to the images and is therefore unable to update them. In addition, ITSS does not manage departmental operations or processes associated with management of laptops. ITSS will establish a requirement for laptops to be connected to anti-virus and encryption software updates. In cases where a laptop is not capable of running a specific institutionally managed anti-virus or encryption software solution, a security exception will be considered if mitigating controls can be established to protect the respective device. ITSS will establish a requirement for IT managers to remove laptops from ePO that have been superseded and are no longer in use. ITSS will establish a requirement for IT managers to investigate the following: • Laptops that do not check into ePO within an established timeframe; • Laptops that do not receive anti-virus updates. Documentation listing the reasons why a laptop does not check into ePO will be required to be maintained by the IT Manager. In cases where a laptop is not capable of checking in due to inability to run institutionally owned and managed anti-virus or encryption software or solution, a security exception will be considered if mitigating controls can be established to protect the respective device.	Charlotte Russell, Chief Information Security Officer	3/31/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-102-215	Information Technology	IT Privacy and Data Protection	UNT System	No follow-up for laptops not checking in. ITSS maintains the ePO system, supplying the McAfee tool for people building laptops to put anti-virus and encryption software on machines. ePO also updates these machines with the most recent software upgrades when the machines access the network, normally every 15 minutes. ITSS does not require follow-up on machines that have not checked in within a certain timeframe.	High	Recommendation for IT Managers: IT Managers should remove laptops from ePO that are superseded and no longer in use.	IA communicated with CAO Assistant Dean for Information Technology Services, Tim Christian, regarding removing laptops from ePO that are superseded and no longer in use. He agreed to follow the policy set by ITSS.	Tim Christian, Assistant Dean for Information Technology Services	3/31/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status	
Internal	UNT System Internal Audit	Fiscal Year 2016	16-102-515	Information Technology	IT Privacy and Data Protection	UNT System	<p>Use of the ePO tool is not required to install and monitor anti-virus and encryption software on laptops.</p> <p>While most IT Managers use the ePO agent to install anti-virus and encryption software on laptops, there is no requirement to do so. Installation of anti-virus and encryption software is required but use of a specific tool is not required.</p>	Moderate	<p>Recommendation for ITSS: ITSS should develop and submit a standard requiring all IT Managers use one tool to install anti-virus and encryption software on laptops during the build process.</p>	<p>Anti-virus software is deployed to devices in a variety of methods, including direct acquisition from anti-virus software vendors (e.g., McAfee, Symantec, etc.) and through the use of a central management tool used by IT Shared Services to centrally manage the distribution of anti-virus and encryption software to institutionally owned devices, including laptops. Detection of the installation of anti-virus and encryption software can be done manually (by physically inspecting the device) or it can be done through the use of management tools such as ePO.</p> <p>ITSS will establish a standard requiring the use of the ITSS actioned tool to install anti-virus and encryption software on all institutionally owned devices is not capable of running a specific anti-virus or encryption software solution, a security exception will be considered if mitigating control can be established to protect the respective device.</p>	Cheleke Russell, Chief Information Security Officer	3/31/2017	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2016	16-102-515	Information Technology	IT Privacy and Data Protection	UNT System	<p>Standard for compliant and non-compliant anti-virus updates on laptops does not take into account last check-in date.</p> <p>The current definition of laptops being compliant with anti-virus No findings/deficiencies.</p>	Moderate	<p>Recommendation for ITSS: ITSS should establish a new definition of when a laptop is considered compliant, taking into account when their last</p>	<p>ITSS will update and document the conditions in which a laptop is considered compliant with the last check-in date requirement.</p>	Cheleke Russell, Chief Information Security Officer	3/01/2017	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2016	16-106 UNT	Governance and Regulatory Compliance	Selected Grants Reporting and Science Foundation Audit	UNT		NA	None	NA	NA	NA	N/A	
Internal	UNT System Internal Audit	Fiscal Year 2016	16-020 UNT	Governance and Regulatory Compliance	International Travel Process Audit	UNT	<p>Listed below are reasons for conducting an audit at a later time: 1. A System-wide travel regulation, which will contain a section on international travel requiring registration for all individuals traveling on University business, will need to be approved and implemented. 2. RMS International travel registration mechanism will need to be implemented. 3. It is needed to establish an internet connect to ensure that all individuals traveling internationally on University business register their travel. 4. Management may want to consider possible consequences for those individuals who do not comply with the international travel registration process. 5. Funding for future improvements and/or expansion of the international travel registration mechanism, if determined applicable has not been obtained. 6. Need to update the UNT System Travel Guidelines and applicable travel procedure, etc.</p>	NA	None	NA	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2016	16-101 UNT	Governance and Regulatory Compliance	Toulouse Graduate School	UNT	<p>1. No Application Fee Policy: Internal Audit was unable to locate any policy that directly address the use of the Graduate School application fee. The Interim Dean of the Toulouse Graduate School, stated that application fees can be used for any purpose due to their flexibility, and the Interim Dean was not aware of any policies governing the use of the application fee. The Interim Dean of the Toulouse Graduate School, stated that application fees can be used for any purpose due to their flexibility.</p>	Moderate	<p>Recommendation for Vice Provost of the Toulouse Graduate School: 1a. Consult with the Vice President for Finance and Administration to develop a policy specifying appropriate uses for the Graduate School application fee.</p>	<p>Historically the majority of the application fee was used to fund staff positions in the Graduate School. The Vice President for Finance is responsible for application processing are paid from the application fee account. This is consistent with the intended use of the funds. In addition the residual funds will be directed toward processing of applications and the staff on that fee have moved under admissions and consistent with the change in the budget line, we communicated with the VP of</p>	Rebecca Lohringer, Executive Director of Admissions	Rev. 08/21/2017	Closed	

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2016	16-08 UNT	Governance and Regulatory Compliance	Business Process Operations - Athletic Department	UNT	1. Intercollegiate Athletics Fee - The UNT Intercollegiate Athletics Fee was increased \$1 per semester credit hour (SCH) from \$109/SCH to \$110/SCH starting in the Spring of 2016 without a student general assembly. This action is in violation of the Texas Education Code Section 54.5191. Therefore, this action resulted in the overbilling of students.	High	Recommendations for the Vice President of Finance and Administration and the Vice President of Athletics: a. Coordinate with the Office of General Counsel to take appropriate actions to rectify the overbilling of students.	The fees for athletics were returned to \$10 per hour with links. The last appropriately authorized amounts, prior to registration for Finance and Administration, were returned to the appropriate offices. All extra \$1 per hour collected for the two previous terms, all refunds will be made by November 30, 2016.	Bob Brown, Vice President for Finance and Administration	11/20/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-08 UNT	Governance and Regulatory Compliance	Business Process Operations - Athletic Department	UNT	1. Intercollegiate Athletics Fee - The UNT Intercollegiate Athletics Fee was increased \$1 per semester credit hour (SCH) from \$109/SCH to \$110/SCH starting in the Spring of 2016 without a student general assembly. This action is in violation of the Texas Education Code Section 54.5191. Therefore, this action resulted in the overbilling of students. 2. Inadequate Safeguarding Measures - Safeguarding measures of blank check stock are not adequate. Specifically, the following were noted: • There is a small unsecured moveable safe on a shelf in the custodian's office which includes blank pre-numbered checks and the safe combination of another safe located in Athletics administration. • There is no documentation listing the check numbers of the blank checks kept in safe. • The Athletic Department Working Fund maximum balance is \$20,000, though the estimated potential amount needed during peak months is \$5,000.	High	Recommendations for the Vice President of Finance and Administration and the Vice President of Athletics: a. Identify and re-bill students who were charged excess fees as a result of non-compliance with the Texas Education Code 54.5191 from Spring 2016 to current. b. Obtain a larger unmovable safe.	The fees for athletics were returned to \$10 per hour with links. The last appropriately authorized amounts, prior to registration for Finance and Administration, were returned to the appropriate offices. All extra \$1 per hour collected for the two previous terms, all refunds will be made by November 30, 2016.	Bob Brown, Vice President for Finance and Administration	11/20/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-08 UNT	Governance and Regulatory Compliance	Business Process Operations - Athletic Department	UNT	2. Inadequate Safeguarding Measures - Safeguarding measures of blank check stock are not adequate. Specifically, the following were noted: • There is a small unsecured moveable safe on a shelf in the custodian's office which includes blank pre-numbered checks and the safe combination of another safe located in Athletics administration. • There is no documentation listing the check numbers of the blank checks kept in safe. • The Athletic Department Working Fund maximum balance is \$20,000, though the estimated potential amount needed during peak months is \$5,000.	High	Recommendation for Assistant Athletic Director, Business Operations: a. Obtain a larger unmovable safe.	The Department of Athletics agrees with the recommendations. A large unmovable safe has been purchased.	Pilar Bradford, Assistant Athletic Director	2/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-08 UNT	Governance and Regulatory Compliance	Business Process Operations - Athletic Department	UNT	2. Inadequate Safeguarding Measures - Safeguarding measures of blank check stock are not adequate. Specifically, the following were noted: • There is a small unsecured moveable safe on a shelf in the custodian's office which includes blank pre-numbered checks and the safe combination of another safe located in Athletics administration. • There is no documentation listing the check numbers of the blank checks kept in safe. • The Athletic Department Working Fund maximum balance is \$20,000, though the estimated potential amount needed during peak months is \$5,000.	High	Recommendation for Assistant Athletic Director, Business Operations: b. Maintain a listing of check numbers for the blank check stock that is kept secured in the safe.	The Department of Athletics agrees with the recommendations. A listing of check numbers for blank stock will be maintained and updated after each inventory.	Pilar Bradford, Assistant Athletic Director	2/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-08 UNT	Governance and Regulatory Compliance	Business Process Operations - Athletic Department	UNT	2. Inadequate Safeguarding Measures - Safeguarding measures of blank check stock are not adequate. Specifically, the following were noted: • There is a small unsecured moveable safe on a shelf in the custodian's office which includes blank pre-numbered checks and the safe combination of another safe located in Athletics administration. • There is no documentation listing the check numbers of the blank checks kept in safe. • The Athletic Department Working Fund maximum balance is \$20,000, though the estimated potential amount needed during peak months is \$5,000.	High	Recommendation for Assistant Athletic Director, Business Operations: c. Reduce the working fund balance of the Athletic Department Working Fund to a lower amount which will still meet the needs of the department.	The Department of Athletics agrees with the recommendations. Athletics will work with the Controller's office in BSC to reduce the fund to \$10,000.00.	Pilar Bradford, Assistant Athletic Director	2/1/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2016	16-408 UNT	Governance and Regulatory Compliance	Business Process Operations - Athletic Department	UNT	<p>3. Parking Revenue – Testing of parking revenue identified the following reconciliation reports had material differences between expected receipts and actual monies deposited to Student Accounting and University Cashiering Services. In detail parking payments from four football games identified a shortage of \$558,000, \$515,000, \$46,000, and an overage of \$140,000.</p> <ul style="list-style-type: none"> • The explanation noted on the reconciliation report regarding the over/short dollar difference were inadequate or missing. • The reconciliation reports reviewed were signed by a UNT Athletic employee; however, the signature on the report by the employee was not the signature of the representative for the department as "CSC" and the actual name was not used. • There are no written procedures outlining the steps to be taken by UNT Athletic personnel with regards to parking operations after CSC collects and provides the parking funds to UNT Athletics personnel. 	High	<p>Recommendations for Senior Associate Athletic Director Business Operations:</p> <ol style="list-style-type: none"> Develop procedures to help ensure that funds are appropriately accounted for, reconciled and deposited timely. 	<p>The Department of Athletics agrees with the recommendations.</p> <ul style="list-style-type: none"> • Procedures related to the parking funds will be formally documented. • All pertinent personnel will be trained on the procedures. • Reconciliation of parking funds will take place in a timely manner to ensure compliance with the institutional mandates regarding cash deposits. All overages/shortages will be appropriately documented. 	Pilar Bradford, Assistant Athletic Director	11/7/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-408 UNT	Governance and Regulatory Compliance	Business Process Operations - Athletic Department	UNT	<p>3. Parking Revenue – Testing of parking revenue identified the following reconciliation reports had material differences between expected receipts and actual monies deposited to Student Accounting and University Cashiering Services. In detail parking payments from four football games identified a shortage of \$558,000, \$515,000, \$46,000, and an overage of \$140,000.</p> <ul style="list-style-type: none"> • The explanations noted on the reconciliation report regarding the over/short dollar difference were inadequate or missing. • The reconciliation reports reviewed were signed by a UNT Athletic employee; however, the signature on the report by the employee was not the signature of the representative for the department as "CSC" and the actual name was not used. • There are no written procedures outlining the steps to be taken by UNT Athletic personnel with regards to parking operations after CSC collects and provides the parking funds to UNT Athletics personnel. 	High	<p>Recommendations for Senior Associate Athletic Director Business Operations:</p> <ol style="list-style-type: none"> Train pertinent UNT personnel on the parking procedures expected to be developed. 	<p>The Department of Athletics agrees with the recommendations.</p> <ul style="list-style-type: none"> • Procedures related to the parking funds will be formally documented. • All pertinent personnel will be trained on the procedures. • Reconciliation of parking funds will take place in a timely manner to ensure compliance with the institutional mandates regarding cash deposits. All overages/shortages will be appropriately documented. 	Pilar Bradford, Assistant Athletic Director	11/7/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-408 UNT	Governance and Regulatory Compliance	Business Process Operations - Athletic Department	UNT	<p>3. Parking Revenue – Testing of parking revenue identified the following reconciliation reports had material differences between expected receipts and actual monies deposited to Student Accounting and University Cashiering Services. In detail parking payments from four football games identified a shortage of \$558,000, \$515,000, \$46,000, and an overage of \$140,000.</p> <ul style="list-style-type: none"> • The explanations noted on the reconciliation report regarding the over/short dollar difference were inadequate or missing. • The reconciliation reports reviewed were signed by a UNT Athletic employee; however, the signature on the report by the employee was not the signature of the representative for the department as "CSC" and the actual name was not used. • There are no written procedures outlining the steps to be taken by UNT Athletic personnel with regards to parking operations after CSC collects and provides the parking funds to UNT Athletics personnel. 	High	<p>Recommendations for Senior Associate Athletic Director Business Operations:</p> <ol style="list-style-type: none"> Ensure adequate documentation is notated when there is an overage/shortage. 	<p>The Department of Athletics agrees with the recommendations.</p> <ul style="list-style-type: none"> • Procedures related to the parking funds will be formally documented. • All pertinent personnel will be trained on the procedures. • Reconciliation of parking funds will take place in a timely manner to ensure compliance with the institutional mandates regarding cash deposits. All overages/shortages will be appropriately documented. 	Pilar Bradford, Assistant Athletic Director	11/7/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency Internal Audit	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2016	16-408 UNT	Governance and Regulatory Compliance	Business Process Operations -Athletic Department	UNT	<p>3. Parking Revenue – Testing identified that funds are not delivered timely to the UNT Student Accounting and University Catering Services (SAUCS) within five days in accordance with the UNT Policy 10.024. Additionally, funds are not deposited timely within seven days after received by the institution in accordance with the Texas Education Code § 51.003. In detail, the following were noted:</p> <ul style="list-style-type: none"> • Funds were received on September 25, 2015 (total amount of \$12,593.00) for parking; however, these funds were not provided to SAUCS for deposit until September 28, 2015 and subsequently, deposited by SAUCS into the bank on September 28, 2015. • Funds were received on October 17, 2015 (total amount of \$54,100.00) for parking; however, these funds were not provided to SAUCS for deposit until October 26, 2015 and deposited by SAUCS into the bank on the same day. • Funds were received on October 31, 2015 (total amount of \$6,334.00) for parking; however, these funds were not provided to SAUCS for deposit until November 17, 2015 and subsequently, deposited by SAUCS into the bank on November 18, 2015. • Funds were received from November 23 – 25, 2015 (total amount of \$40,110.00) from concessions; however, these funds were not provided to SAUCS for deposit until December 1, 2015; and subsequently, deposited by SAUCS into the bank on December 3, 2015. • Funds were received from July 6 – 17, 2016 (total amount of \$51,289.00) from the ticketing office; however, these funds were not provided to SAUCS for deposit until July 26, 2016. 	High	<p>Recommendations for Senior Associate Athletic Director, Business Operations:</p> <p>d. Month or until sustained compliance is achieved.</p>	<ul style="list-style-type: none"> • The Department of Athletics agrees with the recommendations. • All pertinent personnel will be trained on the procedures. • Reconciliation of parking funds will take place in a timely manner to ensure compliance with the institutional mandates regarding cash deposits. All overage/shortages will be appropriately documented. 	Pilar Bradford, Assistant Athletic Director	11/7/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-408 UNT	Governance and Regulatory Compliance	Business Process Operations -Athletic Department	UNT	<p>4. Deposit of Funds – Testing identified that funds are not delivered timely to the UNT Student Accounting and University Catering Services (SAUCS) within five days in accordance with the UNT Policy 10.024. Additionally, funds are not deposited timely within seven days after received by the institution in accordance with the Texas Education Code § 51.003. In detail, the following were noted:</p> <ul style="list-style-type: none"> • Funds were received on September 19, 2015 (total amount of \$12,593.00) for parking; however, these funds were not provided to SAUCS for deposit until September 28, 2015 and subsequently, deposited by SAUCS into the bank on September 28, 2015. • Funds were received on October 17, 2015 (total amount of \$54,100.00) for parking; however, these funds were not provided to SAUCS for deposit until October 26, 2015 and deposited by SAUCS into the bank on the same day. • Funds were received on October 31, 2015 (total amount of \$6,334.00) for parking; however, these funds were not provided to SAUCS for deposit until November 17, 2015 and subsequently, deposited by SAUCS into the bank on November 18, 2015. • Funds were received from November 23 – 25, 2015 (total amount of \$40,110.00) from concessions; however, these funds were not provided to SAUCS for deposit until December 1, 2015; and subsequently, deposited by SAUCS into the bank on December 3, 2015. • Funds were received from July 6 – 17, 2016 (total amount of \$51,289.00) from the ticketing office; however, these funds were not provided to SAUCS for deposit until July 26, 2016. 	Moderate	<p>Recommendations for the Senior Associate Athletic Director, Business Operations:</p> <p>a. Re-evaluate applicable personnel on cash handling policy requirements.</p>	<ul style="list-style-type: none"> • The Business Process Trainer (UNT Finance and Administration) will conduct cash handling training on a regular basis to Athletics staff whose responsibilities including the use of cash. • Athletics has scheduled a meeting with UNTS Financial Services on October 18, 2016 to determine the best options to deposit checks and cash. • The Athletic Department Business Office will perform periodic reviews to ensure funds are being deposited timely. 	Pilar Bradford, Assistant Athletic Director	8/7/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-408 UNT	Governance and Regulatory Compliance	Business Process Operations -Athletic Department	UNT	<p>4. Deposit of Funds – Testing identified that funds are not delivered timely to the UNT Student Accounting and University Catering Services (SAUCS) within five days in accordance with the UNT Policy 10.024. Additionally, funds are not deposited timely within seven days after received by the institution in accordance with the Texas Education Code § 51.003. In detail, the following were noted:</p> <ul style="list-style-type: none"> • Funds were received on September 19, 2015 (total amount of \$12,593.00) for parking; however, these funds were not provided to SAUCS for deposit until September 28, 2015 and subsequently, deposited by SAUCS into the bank on September 28, 2015. • Funds were received on October 17, 2015 (total amount of \$54,100.00) for parking; however, these funds were not provided to SAUCS for deposit until October 26, 2015 and deposited by SAUCS into the bank on the same day. • Funds were received on October 31, 2015 (total amount of \$6,334.00) for parking; however, these funds were not provided to SAUCS for deposit until November 17, 2015 and subsequently, deposited by SAUCS into the bank on November 18, 2015. • Funds were received from November 23 – 25, 2015 (total amount of \$40,110.00) from concessions; however, these funds were not provided to SAUCS for deposit until December 1, 2015; and subsequently, deposited by SAUCS into the bank on December 3, 2015. • Funds were received from July 6 – 17, 2016 (total amount of \$51,289.00) from the ticketing office; however, these funds were not provided to SAUCS for deposit until July 26, 2016. 	Moderate	<p>Recommendations for the Senior Associate Athletic Director, Business Operations:</p> <p>b. Management should perform a periodic review to ensure funds are being deposited timely.</p>	<ul style="list-style-type: none"> • The Department of Athletics agrees with the recommendations. • The Business Process Trainer-UNT Finance and Administration will conduct cash handling training on a regular basis to Athletics staff whose responsibilities including the use of cash. • Athletics has scheduled a meeting with UNTS Financial Services on October 18, 2016 to determine the best options to deposit checks and cash. • The Athletic Department Business Office will perform periodic reviews to ensure funds are being deposited timely. 	Pilar Bradford, Assistant Athletic Director	8/7/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2016	16-408 UNT	Governance and Regulatory Compliance	Business Process Operations - Athletic Department	UNT	<p>4. Deposit of Funds - Testing identified that funds are not delivered timely for the UNT Student Accounting and University Catering Services (SAUCS) within five days in accordance with the UNT Policy 10.024. Additionally, funds are not deposited timely within seven days after received by the institution in accordance with the Texas Education Code § 51.003. In detail, the following were noted:</p> <ul style="list-style-type: none"> Funds were received on September 19, 2015 (total amount of \$12,592.00) for parking; however, these funds were not provided to SAUCS for deposit until September 25, 2015 and subsequently, deposited by SAUCS into the bank on October 1, 2015 (total amount of \$4,100.00) for parking; however, these funds were not provided to SAUCS for deposit until October 26, 2015 and deposited by SAUCS into the bank on the same day. Funds were received on September 31, 2015 (total amount of \$6,334.00) for parking; however, these funds were not provided to SAUCS for deposit until November 17, 2015; and subsequently, deposited by SAUCS into the bank on November 18, 2015. Funds were received on October 2, 2015 (total amount of \$40,100.00) from concessions; however, these funds were not provided to SAUCS for deposit until December 1, 2015; and subsequently, deposited by SAUCS into the bank on December 3, 2015. Funds were received from July 5 - 17, 2016 (total amount of \$51,289.00) from the ticketing office; however, these funds were not provided to SAUCS for deposit until July 25, 2016; and subsequently, deposited by SAUCS into the bank on July 26, 2016. 	Moderate	<p>Recommendations for the Senior Associate - Athletic Director, Business Operations:</p> <ul style="list-style-type: none"> Coordinate with UNTS Financial Services to determine if the current cash handling training on a regular basis to Athletics staff (i.e. lockbox, desktop check scanner, and secure safe) is sufficient to meet UNT Policy 10.024 and Texas Education Code § 51.003 deposit requirements. The Athletic Department Business Office will perform periodic reviews to ensure funds are being deposited timely. 	Four Bradford, Assistant Athletic Director	8/7/2017	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2016	16-408 UNT	Governance and Regulatory Compliance	Business Process Operations - Athletic Department	UNT	<p>4. Deposit of Funds - Testing identified that funds are not delivered timely for the UNT Student Accounting and University Catering Services (SAUCS) within five days in accordance with the UNT Policy 10.024. Additionally, funds are not deposited timely within seven days after received by the institution in accordance with the Texas Education Code § 51.003. In detail, the following were noted:</p> <ul style="list-style-type: none"> Funds were received on September 25, 2015 (total amount of \$12,592.00) for parking; however, these funds were not provided to SAUCS for deposit until September 25, 2015 and subsequently, deposited by SAUCS into the bank on October 1, 2015 (total amount of \$4,100.00) for parking; however, these funds were not provided to SAUCS for deposit until October 26, 2015 and deposited by SAUCS into the bank on the same day. Funds were received on September 31, 2015 (total amount of \$6,334.00) for parking; however, these funds were not provided to SAUCS for deposit until November 17, 2015; and subsequently, deposited by SAUCS into the bank on November 18, 2015. Funds were received on October 2, 2015 (total amount of \$40,100.00) from concessions; however, these funds were not provided to SAUCS for deposit until December 1, 2015; and subsequently, deposited by SAUCS into the bank on December 3, 2015. Funds were received from July 5 - 17, 2016 (total amount of \$51,289.00) from the ticketing office; however, these funds were not provided to SAUCS for deposit until July 25, 2016; and subsequently, deposited by SAUCS into the bank on July 26, 2016. 	Moderate	<p>Recommendations for the Director of Financial Services - Student Finance:</p> <ul style="list-style-type: none"> Evaluate the current requirements for the cash handling policy to ensure the funds received from other departments that are not within five days is sufficient to meet the Texas Education Code deposit requirement of seven days. 	Jeane Olson, Director of Financial Services - Student Finance	8/7/2017	Closed	

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Reviewed	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2016	16-008 UNT	Governance and Regulatory Compliance	Business Process Operations - Athletic Department	UNT	<p>4. Deposit of Funds - Testing identified that funds are not delivered to the Student Financial Services (SAUCS) within the time frame required by the UNT Policy 10.024. Additionally, funds are not deposited timely within seven days after received by the institution in accordance with the Texas Education Code § 51.003. In detail, the following were noted:</p> <ul style="list-style-type: none"> • \$12,592,000 for parking; however, these funds were not provided to SAUCS for deposit until September 28, 2015; and subsequently, deposited by SAUCS into the bank on September 28, 2015. • \$4,100 were received on October 17, 2015 (total amount of \$4,100) for the same reason. • SAUCS for deposit until October 26, 2015 and deposited by SAUCS into the bank on the same day. • Funds were received on October 31, 2015 (total amount of \$4,100) for the same reason. • SAUCS for deposit until November 17, 2015; and subsequently, deposited by SAUCS into the bank on November 18, 2015. • Funds were received from November 23 - 25, 2015 (total amount of \$40,110.00) from concessions; however, these funds were not deposited until November 23, 2015. • Funds were received on November 23, 2015 and subsequently, deposited by SAUCS into the bank on December 3, 2015. • Funds were received from July 5 - 17, 2016 (total amount of \$51,289,000) for the Student Office; however, these funds were not deposited by SAUCS into the bank on July 26, 2016. <p>5. Sexual Abuse and Child Molestation Awareness Training and Background Checks - Testing for the completion of sexual abuse and child molestation awareness training and background checks for all sports camp workers (i.e. Men's Basketball, Women's Basketball, Football, Tennis, Swimming and Soccer) in FY 2016 identified the following:</p> <ul style="list-style-type: none"> • 13 out of 158 (8%) did not complete the mandatory sexual abuse and child molestation awareness training. • 8 out of 158 (5%) did not have evidence that a background check was conducted. 	Moderate	<p>Recommendations for the Director of Financial Services - Student Finance:</p> <ul style="list-style-type: none"> • Student Financial Services will assist UNT Operations Support with communicating any changes to the UNT Cash Handling policy 10.006 as requested by UNT Operations Support to the pertinent departments that receive money. • If a policy change is made regarding deposit requirements, communicate this information to all pertinent departments that receive money. • The Department of Athletics will assist UNT Operations Support in implementing the new Cash Handling policy to the Athletics department during a meeting on 10/19/2016 and will continue to coordinate training and awareness of the new policy to other campus departments by August 1, 2017. 	Jean Olson, Director of Financial Services - Student Finance	8/17/2017	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2016	16-008 UNT	Governance and Regulatory Compliance	Business Process Operations - Athletic Department	UNT	<p>5. Sexual Abuse and Child Molestation Awareness Training and Background Checks - Testing for the completion of sexual abuse and child molestation awareness training and background checks for all sports camp workers (i.e. Men's Basketball, Women's Basketball, Football, Tennis, Swimming and Soccer) in FY 2016 identified the following:</p> <ul style="list-style-type: none"> • 13 out of 158 (8%) did not complete the mandatory sexual abuse and child molestation awareness training. • 8 out of 158 (5%) did not have evidence that a background check was conducted. 	Moderate	<p>Recommendations for Senior Associate Athletic Director - Business Operations:</p> <ul style="list-style-type: none"> • Establish controls to ensure that all sports camp workers complete the required sexual abuse and child molestation awareness training prior to the start of the sports camp. 	The Department of Athletics agrees with the recommendations. Athletics will work with sports camp directors to ensure that all sports camp employees complete the required sexual abuse and child molestation awareness training prior to the start of each camp.	Mike McLaughlin, Sr. Associate Athletic Director - Plar Bradford, Assistant Athletic Director, and Cindy Ford, Business Office Coordinator	4/12/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-008 UNT	Governance and Regulatory Compliance	Business Process Operations - Athletic Department	UNT	<p>5. Sexual Abuse and Child Molestation Awareness Training and Background Checks - Testing for the completion of sexual abuse and child molestation awareness training and background checks for all sports camp workers (i.e. Men's Basketball, Women's Basketball, Football, Tennis, Swimming and Soccer) in FY 2016 identified the following:</p> <ul style="list-style-type: none"> • 13 out of 158 (8%) did not complete the mandatory sexual abuse and child molestation awareness training. • 8 out of 158 (5%) did not have evidence that a background check was conducted. 	Moderate	<p>Recommendations for Senior Associate Athletic Director - Business Operations:</p> <ul style="list-style-type: none"> • Establish controls to ensure that Risk Management personnel receive the necessary information to ensure that background checks are conducted for all sports camp workers prior to the start of the sport camp. 	The Department of Athletics agrees with the recommendations. Athletics will work with risk management to establish controls and ensure that they receive the necessary information that background checks are conducted for all camp employees.	Mike McLaughlin, Sr. Associate Athletic Director - Plar Bradford, Assistant Athletic Director, and Cindy Ford, Business Office Coordinator	4/12/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-008 UNT	Governance and Regulatory Compliance	Business Process Operations - Athletic Department	UNT	<p>5. Sexual Abuse and Child Molestation Awareness Training and Background Checks - Testing for the completion of sexual abuse and child molestation awareness training and background checks for all sports camp workers (i.e. Men's Basketball, Women's Basketball, Football, Tennis, Swimming and Soccer) in FY 2016 identified the following:</p> <ul style="list-style-type: none"> • 13 out of 158 (8%) did not complete the mandatory sexual abuse and child molestation awareness training. • 8 out of 158 (5%) did not have evidence that a background check was conducted. 	Moderate	<p>Recommendations for Senior Associate Athletic Director - Business Operations:</p> <ul style="list-style-type: none"> • Communicate consistently with Risk Management personnel to ensure that they have received and/or have on file for each sports camp worker evidence of completion of mandatory sexual abuse and child molestation awareness training and background checks. 	The Department of Athletics agrees with the recommendations. Athletics will communicate with Risk Management personnel to ensure that they have received and/or have on file for each sports camp worker evidence of completion of mandatory sexual abuse and child molestation awareness training and background checks.	Mike McLaughlin, Sr. Associate Athletic Director - Plar Bradford, Assistant Athletic Director, and Cindy Ford, Business Office Coordinator	4/12/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2016	16-008 UNT	Governance and Regulatory Compliance	Business Process Operations - Athletic Department	UNT	<p>6. Insurance Coverage for Sports Camps - Testing of insurance coverage for sports camp participants (i.e. Men's Basketball, Women's Basketball, Football, Tennis, Swimming and Soccer) in FY 2016 identified the following:</p> <ul style="list-style-type: none"> 3 out of 136 (2%) volleyball sports camp participants did not have insurance coverage. Weighted average participant age was 16.5 years old. Management for the camp participants who had insurance coverage: <ul style="list-style-type: none"> Swimming was sponsored through NKE which requires insurance; however, the proof of insurance certificate was not provided to risk management by the camp director. <p>7. Endowed Scholarships - The following observations were noted with regards to Endowed Athletic Scholarships:</p> <ul style="list-style-type: none"> Criteria used by the committee did not always fully agree with the donor Memorandum of Understanding and/or other support documents. Documented procedures are not in place with regards to the awarding process for endowed Athletic scholar-ships. Minutes are not being prepared to document the actions taken at Athletics endowed awarding committee meetings. 	Moderate	<p>Recommendation for Senior Associate Athletic Director Business Operations:</p> <ul style="list-style-type: none"> Re-educate the Sports Camp Directors on the importance of providing notification and documentation to UNT Risk Management that camp insurance has been purchased for their camps prior to the start of each camp. (This notification means) for their sports camp prior to the start of the camp. 	<p>The Department of Athletics agrees with the recommendations. Athletics will work with each sports camp director to ensure that they provide UNT Risk Management with documentation that insurance has been purchased for their camps prior to the start of each camp.</p>	Mike Ashbaugh, Sr. Associate Athletic Director	4/12/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-008 UNT	Governance and Regulatory Compliance	Business Process Operations - Athletic Department	UNT	<p>7. Endowed Scholarships - The following observations were noted with regards to Endowed Athletic Scholarships:</p> <ul style="list-style-type: none"> Criteria used by the committee did not always fully agree with the donor Memorandum of Understanding and/or other support documents. Documented procedures are not in place with regards to the awarding process for endowed Athletic scholar-ships. Minutes are not being prepared to document the actions taken at Athletics endowed awarding committee meetings. 	Moderate	<p>Recommendations for Associate Athletic Director Compliance:</p> <ul style="list-style-type: none"> Ensure that the endowed scholarship criteria used by the committee agrees with eligibility requirements established by the donor. The Athletic Compliance Office is currently working with the Universities and Athletic Development Offices to obtain Memorandums of Understanding (MOUs) for all endowed athletic scholarships. The complete gathering of this information will be completed by the end of the fiscal year. The committee matches the requirements and intent of the donor. 	<p>The Department of Athletics agrees with the recommendations. Athletics awards all of the athletic endowed scholarships during the summer months. The committee reviews the recommendations for the upcoming academic year as well as completing the paperwork for the award winners of the previous year.</p>	Scott Hobbs, Sr. Associate Athletic Director - Compliance.	2/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-008 UNT	Governance and Regulatory Compliance	Business Process Operations - Athletic Department	UNT	<p>7. Endowed Scholarships - The following observations were noted with regards to Endowed Athletic Scholarships:</p> <ul style="list-style-type: none"> Criteria used by the committee did not always fully agree with the donor Memorandum of Understanding and/or other support documents. Documented procedures are not in place with regards to the awarding process for endowed Athletic scholar-ships. Minutes are not being prepared to document the actions taken at Athletics endowed awarding committee meetings. 	Moderate	<p>Recommendations for Associate Athletic Director Compliance:</p> <ul style="list-style-type: none"> Develop written procedures to document processes and procedures pertaining to the awarding of Athletic endowed scholarships for eligible student athletes. 	<p>The Department of Athletics agrees with the recommendations. Athletics awards all of the athletic endowed scholarships during the summer months. The committee reviews the recommendations for the upcoming academic year as well as completing the paperwork for the award winners of the previous year.</p> <ul style="list-style-type: none"> Once all the MOUs have been gathered, Athletics will formally develop its written policies and procedures for awarding of both the endowed scholarship and any general athletic donor scholarships. 	Scott Hobbs, Sr. Associate Athletic Director - Compliance.	2/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-008 UNT	Governance and Regulatory Compliance	Business Process Operations - Athletic Department	UNT	<p>7. Endowed Scholarships - The following observations were noted with regards to Endowed Athletic Scholarships:</p> <ul style="list-style-type: none"> Criteria used by the committee did not always fully agree with the donor Memorandum of Understanding and/or other support documents. Documented procedures are not in place with regards to the awarding process for endowed Athletic scholar-ships. Minutes are not being prepared to document the actions taken at Athletics endowed awarding committee meetings. 	Moderate	<p>Recommendations for Associate Athletic Director Compliance:</p> <ul style="list-style-type: none"> Written minutes should be maintained on Athletics endowed scholarship committee meetings. 	<p>The Department of Athletics agrees with the recommendations. Athletics awards all of the athletic endowed scholarships during the summer months. The committee reviews the recommendations for the upcoming academic year as well as completing the paperwork for the award winners of the previous year.</p> <ul style="list-style-type: none"> Athletics will maintain official records for actions taken at committee meetings for endowed scholarships. 	Scott Hobbs, Sr. Associate Athletic Director - Compliance.	2/1/2017 Rev. 08/31/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-005 UNT	Governance and Regulatory Compliance	Student Managed Investment Fund Review	UNT	<p>Annual Report Completion Date - The annual report was prepared 47 days late.</p>	Moderate	<p>Present additional information, such as remarks from the Board of Directors, symposiums attended, and other activities, in a separate report at a later date.</p>	<p>The department chair has visited with the incoming President of the SIG regarding the recommendations. He has agreed to share the recommendations with the SIG Board of Directors and will plan to meet the 45 day deadline for the 2017 annual financial report and reports thereafter.</p>	SG Board of Directors	NA	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-005 UNT	Governance and Regulatory Compliance	Student Managed Investment Fund Review	UNT	<p>Annual Report Completion Date - The annual report was prepared 47 days late.</p>	Moderate	<p>Present additional information, such as remarks from the Board of Directors, symposiums attended, and other activities, in a separate report at a later date.</p>	<p>The department chair has visited with the incoming President of the SIG regarding the recommendations. He has agreed to share the recommendations with the SIG Board of Directors and will plan to meet the 45 day deadline for the 2017 annual financial report and reports thereafter.</p>	SG Board of Directors	NA	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-005 UNT	Governance and Regulatory Compliance	Student Managed Investment Fund Review	UNT	<p>Annual Report Completion Date - The annual report was prepared 47 days late.</p>	Low	<p>Ensure that Senior Analysts and Portfolio Managers include the number of shares on the Voting Summary form. Designate one person to ensure the Voting Summary form to include the number of shares.</p>	<p>In Spring 2016, the SIG Board of Directors adopted and began using a Recommendation form and an Equity Offer Form. Each form provides a specific location for the number of shares to be sold or purchased.</p>	SG Board of Directors	NA	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2016	16-004, 16-009	Governance and Regulatory Compliance	FY 2015 Investment Compliance Audit	UNT System, UNT, UNT DALLAS, UNTHSC	1. Conflict of interest – UNT System / UNT / UNT Dallas – The current conflict of interest policy relies on self-disclosure. Currently, there is no formal process in place to determine and document if an investment officer or any authorized designee has a personal business relationship with a business organization offering to engage in an investment transaction with UNT System, UNT, and UNT Dallas.	High	1a. Management to work with Office of General Counsel and Human Resources to establish a mechanism, which includes a self-disclosure form, through which investment officers will report annually any real or perceived conflicts of interest.	Management will work with Office of General Counsel, Human Resources, and the campuses to establish and implement a self-disclosure form and procedure that will both provide training on and address conflicts of interest.	James Maudin, Associate Vice Chancellor for Treasury	Original 8/31/2016 Revised 06/01/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-004, 16-009	Governance and Regulatory Compliance	FY 2015 Investment Compliance Audit	UNT System, UNT, UNT DALLAS, UNTHSC	2. Conflict of interest – UNT System / UNT / UNT Dallas – The current conflict of interest policy relies on self-disclosure. Currently, there is no formal process in place to determine and document if an investment officer or any authorized designee has a personal business relationship with a business organization offering to engage in an investment transaction with UNT System, UNT, and UNT Dallas.	High	1b. Implement or require annual conflict of interest training for all investment officers and responsible parties to conflict of interest and steps they would need to take in the event of a concern.	Management will work with Office of General Counsel, Human Resources, and the campuses to establish and implement a self-disclosure form and procedure that will both provide training on and address conflicts of interest.	James Maudin, Associate Vice Chancellor for Treasury	Original 08/31/2016 Revised 06/01/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-004, 16-009	Governance and Regulatory Compliance	FY 2015 Investment Compliance Audit	UNT System, UNT, UNT DALLAS, UNTHSC	3. Conflict of interest – UNT System / UNT / UNT Dallas – The current conflict of interest policy relies on self-disclosure. Currently, there is no formal process in place to determine and document if an investment officer or any authorized designee has a personal business relationship with a business organization offering to engage in an investment transaction with UNT System, UNT, and UNT Dallas.	High	1c. For staff positions which do not require an annual conflict of interest training, periodic acknowledgment of the institution's ethics policy from staff, which has conflict of interest embedded within the policy.	Management will work with Office of General Counsel, Human Resources, and the campuses to establish and implement a self-disclosure form and procedure that will both provide training on and address conflicts of interest.	James Maudin, Associate Vice Chancellor for Treasury	Original 08/31/2016 Revised 03/21/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-004, 16-009	Governance and Regulatory Compliance	FY 2015 Investment Compliance Audit	UNT System, UNT, UNT DALLAS, UNTHSC	4. Bank Adversum Certificate of Authority – UNT – testing identified two terminated employees with access to the UNT repurchase sweep account ending in account number 2833.	Moderate	2a. To work with the Institutional CFO's in establishing an annual monitoring process to ensure applicable staff completed an annual conflict of interest disclosure form.	Online log on credentials were disabled prior to the employees' termination. Management will review existing processes for all access for terminated employees. In addition, Treasury will work with the CFO's regarding establishing a review that occurs no less than annually.	James Maudin, Associate Vice Chancellor for Treasury	6/30/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-004, 16-009	Governance and Regulatory Compliance	FY 2015 Investment Compliance Audit	UNT System, UNT, UNT DALLAS, UNTHSC	5. Conflict of interest – UNTHSC – One out of three employees (33%) who have access to investment related bank accounts did not complete a conflict of interest disclosure form.	Moderate	2b. For employees that have an employment status change which includes termination, establish a process to remove access immediately.	Management will work with the UNTHSC Compliance Office to establish and implement procedures to notify employees when they have not completed the Conflict Disclosure Form within the required time frame established by UNTHSC and a process for educating staff about possibly detecting conflicts of interest.	James Maudin, Associate Vice Chancellor for Treasury	6/30/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-004, 16-009	Governance and Regulatory Compliance	FY 2015 Investment Compliance Audit	UNT System, UNT, UNT DALLAS, UNTHSC	6. Conflict of interest – UNTHSC – One out of three employees (33%) who have access to investment related bank accounts did not complete a conflict of interest disclosure form.	Moderate	3a. Require all applicable staff to be re-educated on the policy.	Management will work with the UNTHSC Compliance Office to establish and implement procedures to notify employees when they have not completed the Conflict Disclosure Form within the required time frame established by UNTHSC and a process for educating staff about possibly detecting conflicts of interest.	Debra Willett, UNTHSC Director Financial Planning & Policy Analysis	5/31/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-004, 16-009	Governance and Regulatory Compliance	FY 2015 Investment Compliance Audit	UNT System, UNT, UNT DALLAS, UNTHSC	7. Inaccuracy of Quarterly Investment Report – UNT System / UNT / UNT Dallas – Testing of the accuracy of quarterly investment reports identified footing errors, instances of ending and beginning balances for successive quarters not matching, incorrect balances for the third quarter and incorrect investment report posted on the investment disclosure website.	Moderate	3b. Work with the Office of Compliance to implement a monitoring process to ensure applicable staff completed an annual conflict of interest disclosure form.	Management will work with the UNTHSC Compliance Office to establish and implement procedures to notify employees when they have not completed the Conflict Disclosure Form within the required time frame established by UNTHSC and a process for educating staff about possibly detecting conflicts of interest.	Debra Willett, UNTHSC Director Financial Planning & Policy Analysis	5/31/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-004, 16-009	Governance and Regulatory Compliance	FY 2015 Investment Compliance Audit	UNT System, UNT, UNT DALLAS, UNTHSC	8. Inaccuracy of Quarterly Investment Report – UNT System / UNT / UNT Dallas – Testing of the accuracy of quarterly investment reports identified footing errors, instances of ending and beginning balances for successive quarters not matching, incorrect balances for the third quarter and incorrect investment report posted on the investment disclosure website.	Moderate	4a. Review fiscal year 2015 quarterly investment reports for which ending and beginning balances for successive quarters did not match and make necessary corrections. Then, update the investment disclosure website with the corrected reports.	Fiscal Year 2015 was a transitional year organizationally for a consolidated treasury operation. Treasury has already begun working with the campuses to ensure that the investment reports on the website are accurate and will continue to do so. A quality review process of these reports has been implemented and will go forward include ensuring that the posting to each campus' website is accurate and complete.	James Maudin, Associate Vice Chancellor for Treasury	3/31/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-004, 16-009	Governance and Regulatory Compliance	FY 2015 Investment Compliance Audit	UNT System, UNT, UNT DALLAS, UNTHSC	9. Inaccuracy of Quarterly Investment Report – UNT System / UNT / UNT Dallas – Testing of the accuracy of quarterly investment reports identified footing errors, instances of ending and beginning balances for successive quarters not matching, incorrect balances for the third quarter and incorrect investment report posted on the investment disclosure website.	Moderate	4b. Implement a review process for quarterly investment reports to ensure the accuracy of data to be reported prior to the issuance to the Board of Regents and posting on the institution's investment disclosure website.	Fiscal Year 2015 was a transitional year organizationally for a consolidated treasury operation. Treasury has already begun working with the campuses to ensure that the investment reports on the website are accurate and will continue to do so. A quality review process of these reports has been implemented and will go forward include ensuring that the posting to each campus' website is accurate and complete.	James Maudin, Associate Vice Chancellor for Treasury	3/31/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2016	16-004, 16-009	Governance and Regulatory Compliance	FY 2015 Investment Compliance Audit	UNT System, UNT, UNT DALLS, UNTHSC	8. Reconciliation to the General Ledger – UNTHSC – The cash account balance per the investment report was different from the balance recorded in the general ledger as of August 31, 2015. The balance per the quarterly investment report was understated by \$4,430,988.57.	Moderate	5a. Establish a process to ensure year-end close is performed on a timely basis.	FY15 was the first time UNTHSC's financial close was managed by UNT System Controller staff, none of whom had experience in prior UNTHSC year-end financial close activities. The year-end financial close process continues to improve since the Financial Transformation Project began. The System Controller is preparing a timeline/schedule that will require each institution to complete their annual financial reports by early October. This would result in general ledger balances being fully reconciled and finalized by the end of September. In addition, the staff will ensure reported cash balances reconcile to the GL.	Paula Welch, Associate Controller for Treasury	10/31/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-004, 16-009	Governance and Regulatory Compliance	FY 2015 Investment Compliance Audit	UNT System, UNT, UNT DALLS, UNTHSC	8. Reconciliation to the General Ledger – UNTHSC – The cash account balance per the investment report was different from the balance recorded in the general ledger as of August 31, 2015. The balance per the quarterly investment report was understated by \$4,430,988.57.	Moderate	5b. Establish a review process to ensure balances in the quarterly investment reports reconcile to the balances in the general ledger.	FY15 was the first time UNTHSC's financial close was managed by UNT System Controller staff, none of whom had experience in prior UNTHSC year-end financial close activities. The year-end financial close process continues to improve since the Financial Transformation Project began. The System Controller is preparing a timeline/schedule that will require each institution to complete their annual financial reports by early October. This would result in general ledger balances being fully reconciled and finalized by the end of September. In addition, the staff will ensure reported cash balances reconcile to the GL.	Paula Welch, Associate Controller for Treasury	10/31/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-004, 16-009	Governance and Regulatory Compliance	FY 2015 Investment Compliance Audit	UNT System, UNT, UNT DALLS, UNTHSC	8. Presentation of the UNTHSC and UNTHSC Foundation Investments on the Quarterly Investment Reports – UNTHSC – The August 31, 2015 UNTHSC Quarterly Investment Report did not reflect the separation of investments belonging to UNTHSC and to UNTHSC Foundation.	Low	6a. For subsequent periods, UNTHSC should identify and exclude all investments belonging to UNTHSC Foundation from the financial statements and investment reports. If investments are included in the quarterly investment reports which amounts is for UNTHSC, and for Foundation.	Management believes the Board of Regents should have quarterly visibility to all investments that exist for the benefit of the System and therefore each Foundation's investments should not be excluded. Therefore, the Board of Regents should ensure that the System Controller is in the process of reformulating all investment reports and will ensure that endowments, both campus and foundation, are included yet clearly labeled. A quality review of these reports is important and has been implemented to ensure that reports to the Board are accurate.	James Mauldin, Associate Vice Chancellor for Treasury	3/31/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-004, 16-009	Governance and Regulatory Compliance	FY 2015 Investment Compliance Audit	UNT System, UNT, UNT DALLS, UNTHSC	8. Presentation of the UNTHSC and UNTHSC Foundation Investments on the Quarterly Investment Reports – UNTHSC – The August 31, 2015 UNTHSC Quarterly Investment Report did not reflect the separation of investments belonging to UNTHSC and to UNTHSC Foundation.	Low	6b. Establish a review process to ensure investments in the quarterly investment reports are appropriate.	Management believes the Board of Regents should have quarterly visibility to all investments that exist for the benefit of the System and therefore each Foundation's investments should not be excluded. However, we do agree that they should be clearly labeled as such. Therefore, the Board of Regents should ensure that the System Controller is in the process of reformulating all investment reports and will ensure that endowments, both campus and foundation, are included yet clearly labeled. A quality review of these reports is important and has been implemented to ensure that reports to the Board are accurate.	James Mauldin, Associate Vice Chancellor for Treasury	3/31/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-004, 16-009	Governance and Regulatory Compliance	FY 2015 Investment Compliance Audit	UNT System, UNT, UNT DALLS, UNTHSC	7. Short Term Pool/Long Term Pool Burgees – UNT System / UNT / UNT DALLS – For certain months in fiscal year 2015, short term working capital funds and long term reserves percentage of available assets on hand were outside the ranges prescribed by policy. Additionally, the percentage of investments that were in the long term pool remained within the range as required by the deposit.	Low	7a. Review the investment of System Funds Regulation 08.2000 pertaining to short and long term investment percentages to determine if the percentage requirement ranges should be updated to reflect the financial environment of UNT System and its institutions.	This has already been addressed in the investment policy adopted by the Board on November 20, 2015.	James Mauldin, Associate Vice Chancellor for Treasury	11/20/2015	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-004, 16-009	Governance and Regulatory Compliance	FY 2015 Investment Compliance Audit	UNT System, UNT, UNT DALLS, UNTHSC	8. Reconciliation to the General Ledger – UNTHSC – For 11 days in August 2015, collateralization for deposit accounts fell below 100% of deposit.	Low	8a. Management should establish and follow procedures to inform the bank of changes in the amount or activity of deposits, that may exceed UNTHSC's collateral value, within a reasonable time before the change occurs.	Management has been aware of this need and has already targeted the implementation of a new format that will be standard across the System for the first report on fiscal year 2016.	Barbara Holt, UNTHSC Senior Director Financial Operations	3/1/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-004, 16-009	Governance and Regulatory Compliance	FY 2015 Investment Compliance Audit	UNT System, UNT, UNT DALLS, UNTHSC	8. Format and Content of Quarterly Investment Reports – UNT System / UNT / UNT DALLS / UNTHSC – The format and content of quarterly investment reports is not consistent across all institutions.	Low	8b. Management should determine an appropriate reporting format and once established utilize the new format for all institutions.	Management has been aware of this need and has already targeted the implementation of a new format that will be standard across the System for the first report on fiscal year 2016.	James Mauldin, Associate Vice Chancellor for Treasury	2/25/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-004, 16-009	Governance and Regulatory Compliance	FY 2015 Investment Compliance Audit	UNT System, UNT, UNT DALLS, UNTHSC	10. Annual Review and Adoption of financial institutions – UNT System – There was no indication that Board of Regents reviewed and adopted a list of financial institutions for fiscal year 2015.	Low	10a. Establish procedures to ensure compliance with System Regulation 08.2000, Section 2005, paragraph 10 or review the System Regulation to see if requirement is applicable as is and make changes as necessary.	Management will review the regulation to determine the appropriateness of the wording as this is not a requirement in the Public Funds Investment ACT. Based upon the findings, either the regulation will be revised or procedures will be modified to ensure compliance.	James Mauldin, Associate Vice Chancellor for Treasury	11/02/2016 Revised Date: 06/30/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2016	16-004, 16-009	Governance and Regulatory Compliance	FY 2015 Investment Compliance Audit	UNT System, UNT, UNT Dallas, UNTBSC	11. Outdated Investment Policy - UNTBSC. An outdated institutional investment policy is posted on the website under Chapter 10: Fiscal Management. However, this policy was superseded by System Regulation 08.2000 which was approved in August 2012.	Low	11. Management should update the website to reflect System Regulation 08.2000 and revisions made should be communicated to appropriate personnel.	Management is in agreement with the recommendation. Management will implement additional steps to the current set of procedures to ensure timely updating of investment policies and maintaining all required investment disclosures on the institution's website.	Debra Willett, UNTBSC Director of Financial Planning & Policy Analysis	3/1/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-011 BSC	Governance and Regulatory Compliance	Joint Admission Medical Program Audit	UNTBSC	Non-Compliance with University Policy - The Joint Admission Medical Program (JAMP) agreement was not properly set up in accordance to University Policy Chapter 13.123.	High	Work with appropriate management from the Office of Grants and Contract Management and the Office of Finance to set up JAMP as a sponsored project.	We are in agreement with moving JAMP funds to the Office of Grants and Contract Management. It should be noted that this has never been recommended in any previous audit.	Mike Kennedy, Director of Admissions	12/21/2015	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-011 BSC	Governance and Regulatory Compliance	Joint Admission Medical Program Audit	UNTBSC	UNT Information Security Users Guidelines - Credit Card Sensitive Information	High	Provide training to appropriate personnel in regards to the UNT Information Security Users Guide and PCI Best Practices.	The Purchasing Card Program Supervisor sends a copy of the Citibank statement that includes the full account number for each month as supporting documentation for the payment. The account number will be redacting going forward.	Kimberly Ben, Purchasing Card Program Supervisor	10/28/2015	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-011 BSC	Governance and Regulatory Compliance	Joint Admission Medical Program Audit	UNTBSC	Back of Reconciliation Process - Internal Audit was unable to validate the reconciliation process between the FY 2015 Expenditure Reports to the University's Accounting System.	High	Develop procedures to help ensure that the expenditures recorded in the Expenditure Report are reconciled on a regular Accounting System.	The Purchasing Card Program Supervisor sends a copy of the Citibank statement that includes the full account number for each month as supporting documentation for the payment. The account number will be redacting going forward.	Kimberly Ben, Purchasing Card Program Supervisor	10/28/2015	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-011 BSC	Governance and Regulatory Compliance	Joint Admission Medical Program Audit	UNTBSC	Non-Compliance with JAMP Medical School Expenditure Guidelines - Time and Effort Reporting - During our review of payroll activities related to JAMP, we noted that the JAMP Coordinator salary project was based on an estimated average of annual time and effort.	High	Develop procedures to track and verify the accuracy of actual time and effort devoted to the program to help ensure compliance with the JAMP Medical School Expenditure Guidelines.	We are in agreement with this assessment. We will update periodic reconciliation periods to review JAMP expenditures to the Accounting System.	Mike Kennedy, Director of Admissions	3/1/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-011 BSC	Governance and Regulatory Compliance	Joint Admission Medical Program Audit	UNTBSC	Non-Compliance with JAMP Medical School Expenditure Guidelines - Time and Effort Reporting - During our review of payroll activities related to JAMP, we noted that the JAMP Coordinator salary project was based on an estimated average of annual time and effort.	High	Re-evaluate percentage of salary distribution based on actual time and effort to help ensure that it is proportionate to the direct support to the JAMP Project.	We are in agreement with the assessment that there is no official tracking of the JAMP Coordinator time and effort (only estimates). With the move of financials to the Office of Grants and Contract Management this will be a part of a new process for reporting time. It should be noted that this has never been recommended in any previous audit.	Mike Kennedy, Director of Admissions	3/1/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-011 BSC	Governance and Regulatory Compliance	Joint Admission Medical Program Audit	UNTBSC	Non-Compliance with JAMP Medical School Expenditure Guidelines - Out of State Travel (Unallowable Cost) - A total of \$1,309.11 was used to fund out-of-state travel as a direct administrative cost under the JAMP Administrative Distribution.	High	Use different fiscal buckets to cover the cost of state travel procedures and reimburse the JAMP Program account for the amount of \$1,309.11.	We are in agreement with this assessment. We will review JAMP expenditure guidelines to ensure compliance. We will identify another account to reimburse JAMP for the aforementioned expenditures. We also feel that the move of JAMP Financials to the Office of Grants and Contract Management will be a better process moving forward.	Mike Kennedy, Director of Admissions	12/1/2015	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-011 BSC	Governance and Regulatory Compliance	Joint Admission Medical Program Audit	UNTBSC	Non-Compliance with JAMP Medical School Expenditure Guidelines - Out of State Travel (Unallowable Cost) - A total of \$1,309.11 was used to fund out-of-state travel as a direct administrative cost under the JAMP Administrative Distribution.	High	Reconcile the JAMP Coordinator on the JAMP Medical Expenditure Guidelines.	We are in agreement with this assessment. We will review JAMP expenditure guidelines to ensure compliance. We will identify another account to reimburse JAMP for the aforementioned expenditures. We also feel that the move of JAMP Financials to the Office of Grants and Contract Management will be a better process moving forward.	Mike Kennedy, Director of Admissions	12/1/2015	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-011 BSC	Governance and Regulatory Compliance	Joint Admission Medical Program Audit	UNTBSC	Inadequate Monitoring of Expenditures - Two expenditures were incorrectly processed resulting in an overpayment of \$1,225.00 from the JAMP fund.	High	Request repayment from the JAMP Coordinator for the amount over-reimbursed of \$225.00.	The \$225 reimbursement has been repaid as of 10/22/2015. We will request a refund from the Department of Medical Education for JAMP expenditures (Approximately every 90 days) to review JAMP expenditures.	Mike Kennedy, Director of Admissions	12/1/2015	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-011 BSC	Governance and Regulatory Compliance	Joint Admission Medical Program Audit	UNTBSC	Inadequate Monitoring of Expenditures - Two expenditures were incorrectly processed resulting in an overpayment of \$1,225.00 from the JAMP fund.	High	Develop expenditure verification procedures to help ensure that all transactions entered into the Accounting System are verified and approved by the appropriate office for correction.	The \$225 reimbursement has been repaid as of 10/22/2015. We will request a refund from the Department of Medical Education for JAMP expenditures (Approximately every 90 days) to review JAMP expenditures.	Mike Kennedy, Director of Admissions	12/1/2015	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-011 BSC	Governance and Regulatory Compliance	Joint Admission Medical Program Audit	UNTBSC	Student Wages - For 27 timescard, reviewed, hours reported on three timescard could not be reconciled to the student employees' payroll disbursement, for a net effect of \$55.00.	Moderate	Require all personnel entering and approving time and labor to be re-educated on the hourly Payroll Guidelines.	We are in agreement with this assessment. All staff who are in responsible for time cards will undergo training through BSC on time and labor entry. Internal office procedures will be put in the place to allow more time for reconciliation of hourly payroll.	Mike Kennedy, Director of Admissions	3/1/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-011 BSC	Governance and Regulatory Compliance	Joint Admission Medical Program Audit	UNTBSC	Student Wages - For 27 timescard, reviewed, hours reported on three timescard could not be reconciled to the student employees' payroll disbursement, for a net effect of \$55.00.	Moderate	Implement a process to reconcile time entered in E5 Time and labor entry. Internal office procedures will be put in the place to allow more time for reconciliation of hourly payroll.	We are in agreement with this assessment. All staff who are in responsible for time cards will undergo training through BSC on time and labor entry. Internal office procedures will be put in the place to allow more time for reconciliation of hourly payroll.	Mike Kennedy, Director of Admissions	3/1/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-011 BSC	Governance and Regulatory Compliance	Joint Admission Medical Program Audit	UNTBSC	Non-Compliance with Purchasing Card (P-Card) Guidelines - P-card Guidelines were not always followed.	Moderate	Require all current P-Card holders, reconcilers and approvers to be retrained on P-Card policies and procedures.	We are in agreement with this assessment. Prior to this audit, changes were made in the P-Card usage process within the department. We have moved all P-Card approving to one account holder and assigned a second approver to the account. We expect this change will decrease risk for noncompliance.	Mike Kennedy, Director of Admissions	1/1/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2016	16-011 ISC	Governance and Regulatory Compliance	Joint Admission Medical Program Audit	UNTBSC	Non-Compliance with Purchasing Card (P-Card) Guidelines - P-card Guidelines were not always followed.	Moderate	Follow University Business Service P-Card Guidelines.	We are in agreement with this assessment. Prior to this audit, changes were made in the P-Card usage process within the department. We have moved all P-Card spending to one account holder and assigned a new reconciler to all P-Card transactions. We expect this change will be a decrease in risk for noncompliance.	Mike Kennedy, Director of Admissions	1/1/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-011 ISC	Governance and Regulatory Compliance	Joint Admission Medical Program Audit	UNTBSC	Inappropriately Billing Expenditures to Incorrect Fiscal Year - Testing identified two expenditures that they were not processed within the appropriate fiscal year.	Moderate	Re-evaluate the JAMP Coordinator on the JAMP Expenditure Report process and monitor until sustained compliance is achieved.	We are in agreement with this assessment. We will set aside periodic reconciliation periods (approximately every 90 days) to review JAMP expenditures. We also feel that the move of JAMP financials to the Office of Grants and Contract Management will be a better process.	Mike Kennedy, Director of Admissions	12/1/2015	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-011 ISC	Governance and Regulatory Compliance	Joint Admission Medical Program Audit	UNTBSC	Improper Commingling of Revenues and Expenditures - Testing identified that the Summer Internship Program and the Administration Distribution funds are deposited into and expended from the same Department ID.	Low	Consider separating the sources of funds after the JAMP funds are set up as a sponsored project, to help ensure that expenditures are applied to the appropriate funding source.	Office of Grants and Contract Management will follow all standard policies and procedures for project ID management and JAMP terms and conditions.	Lecton Forberg, Assistant VP, Research Administration, Grants and Contract Management	12/01/2015	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-011 ISC	Governance and Regulatory Compliance	Joint Admission Medical Program Audit	UNTBSC	Un timely Replenishment of Petty Cash - An amount of \$20.97 spent from the JAMP Petty Cash Fund was not replenished in order to be reflected on the Accounting System and the Expenditure Report.	Low	Modify BSC Petty Cash Fund Procedures to enforce the requirement for custodians to replenish the petty cash on a monthly basis, at a minimum, and communicate the updated procedures to all appropriate personnel.	We concur.	Paula J. Webb, Associate Controller	7/31/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-011 ISC	Governance and Regulatory Compliance	Joint Admission Medical Program Audit	UNTBSC	Inadequate Support Documentation - Adequate support documentation for 14 of 14 expenditures was not used or not sufficient to support the expenditures for 12 of 31 (39%) expenditures reviewed related to JAMP activities.	Low	Obtain adequate support for JAMP activities to help ensure that funds are provided for the direct support of JAMP participants.	We are in agreement with this assessment. The Director of Admissions will require all JAMP funds disbursements include a log of participants.	Mike Kennedy, Director of Admissions	12/1/2015	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-011 ISC	Governance and Regulatory Compliance	Joint Admission Medical Program Audit	UNTBSC	Un timely Return of Incident FY 2014 Funds - An amount of \$361,91 of Incident FY 2014 funds was returned untimely to the JAMP Council. The check was issued on December 2, 2014 to refund unspent FY 2014 funds.	Low	Develop a procedure to help ensure that any unspent JAMP funds are returned to the JAMP Council in a timely manner in accordance with JAMP Medical Expenditure Guidelines.	We are in agreement with this assessment. We will establish an internal deadline prior to September 30 for reimbursement for unspent funds. This is predicted that the Office of Grants and Contract Management is able to provide timely financial data.	Mike Kennedy, Director of Admissions	3/1/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-011 ISC	Governance and Regulatory Compliance	Joint Admission Medical Program Audit	UNTBSC	Non-Compliance with Travel Guidelines - Un timely Submission of Travel Vouchers - Travel Guidelines were not always followed.	Low	Provide training to faculty and staff on travel policies to help ensure that University Travel Guidelines are followed.	We are in agreement with this assessment. All staff who work with JAMP travel funding will undergo training from BSC. We will set aside periodic reconciliation periods (approximately every 90 days) to review JAMP expenditures. We also feel that the move of JAMP financials to the Office of Grants and Contract Management will be a better process moving forward.	Mike Kennedy, Director of Admissions	3/1/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-011 ISC	Governance and Regulatory Compliance	Joint Admission Medical Program Audit	UNTBSC	Non-Compliance with Travel Guidelines - Un timely Submission of Travel Vouchers - Travel Guidelines were not always followed.	Low	Develop procedures to help ensure travel vouchers are submitted timely to the Business Support Services Travel Department.	We are in agreement with this assessment. All staff who work with JAMP travel funding will undergo training from BSC. We will set aside periodic reconciliation periods (approximately every 90 days) to review JAMP expenditures. We also feel that the move of JAMP financials to the Office of Grants and Contract Management will be a better process moving forward.	Mike Kennedy, Director of Admissions	3/1/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Students	UNT Dallas Student Fees Audit	UNT Dallas	1. UNT System: Personally identifiable information of the cashiering area, we identified personally identifiable information (PII) (i.e. social security numbers, birth certificates, marriage licenses) related to waiver support documentation which dates back to 2007. 2. UNT System: Cash Control – Deposits – Testing identified that funds are not deposited timely within seven days after received by the institution in accordance with the Texas Education Code § 11.003. Additionally, it was noted that funds are received from students by the cashiering area and are not deposited into the UNT System's Student Accountant's Office (SAO) until the following business day. The Student Register for deposits is not timely built.	High	1a. Develop procedures to help ensure that all personally identifiable information (PII) is appropriately protected against inappropriate access and use in compliance with applicable laws and regulations. 1b. Review applicable retention policy and statute limitation in regards to identifying if these documents can be destroyed.	We concur with your findings and agree to evaluate and implement the recommendations as presented for reducing risk and improving internal controls at the UNT Dallas main campus and UNT Dallas College of Law campus in downtown Dallas. Certain key PII information has been identified for review and we will be implementing the recommendations as presented for reducing risk and improving PII information has been transferred out of the UNT Dallas cashier's area and into the UNT System Accounting team to centrally manage and ensure appropriate retention policies are implemented at both campus locations to ensure PII document retention policies are in compliance with applicable state & federal statutes.	Jeanne Olson, Director of Financial Service- Student Finance	11/02/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Students	UNT Dallas Student Fees Audit	UNT Dallas	1. UNT System: Personally identifiable information of the cashiering area, we identified personally identifiable information (PII) (i.e. social security numbers, birth certificates, marriage licenses) related to waiver support documentation which dates back to 2007. 2. UNT System: Cash Control – Deposits – Testing identified that funds are not deposited timely within seven days after received by the institution in accordance with the Texas Education Code § 11.003. Additionally, it was noted that funds are received from students by the cashiering area and are not deposited into the UNT System's Student Accountant's Office (SAO) until the following business day. The Student Register for deposits is not timely built.	High	1a. Develop procedures to help ensure that funds are timely deposited in the institution's bank account in accordance with the statute. 1b. Review applicable retention policy and statute limitation in regards to identifying if these documents can be destroyed.	We concur with your findings and agree to evaluate and implement the recommendations as presented for reducing risk and improving internal controls at the UNT Dallas main campus and UNT Dallas College of Law campus in downtown Dallas. Key team members from UNT System Treasury are working with certain 3rd party vendors from the banking and security industries to evaluate the cost / benefit of available improved cash collection technology & armored car service collection procedures.	Jeanne Olson, Director of Financial Service- Student Finance	11/02/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Students	UNT Dallas Student Fees Audit	UNT Dallas	3. UNT System: Inadequate Safeguarding Measures for Payments Received - Safeguarding measures of payments received are not adequate during the collection, receipting, depositing and reconciliation processes.	High	3a. Re-educate personnel on cash handling procedures.	We concur with your findings and agree to evaluate and implement the recommendations as presented for reducing risk and improving internal controls at the UNT Dallas main campus and UNT Dallas College of Law campus in downtown Dallas. Key team members from both campus locations will work with the appropriate staff (as necessary) at both campus locations to ensure these recommendations, and others as deemed appropriate, are implemented by no later than November 30, 2016 (six months or less).	Jeanne Olson, Director of Financial Service- Student Finance	11/02/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Student	UNT Dallas Student Fees Audit	UNT Dallas	3. UNT System: Inadequate Safeguarding Measures for Payments Received - Safeguarding measures of payments received are not adequate during the collection, receipting, depositing and reconciliation processes.	High	3a. Maintain a receipt log for all cash receipts and reconcile monthly to help ensure that all receipts are accounted for.	We concur with your findings and agree to evaluate and implement the recommendations as presented for reducing risk and improving internal controls at the UNT Dallas main campus and UNT Dallas College of Law campus in downtown Dallas. Key team members from UNT System Student Accounting and UNT System Controller's Office will work with the appropriate staff (as necessary) at both campus locations to ensure these recommendations, and others as deemed appropriate, are implemented by no later than November 30, 2016 (six months or less).	Jeanne Olson, Director of Financial Service- Student Finance	11/02/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Students	UNT Dallas Student Fees Audit	UNT Dallas	7. UNT Dallas Security Devices - Although our walkthrough of UNT Dallas Security Devices identified the following University Administration has initiated a search of security technology vendors prior to this review: <ul style="list-style-type: none"> • 16 of 25 cameras (64%) were not working properly and no video images were available at the time of review • cameras were not identifiable by a location • record retention protocols were not established • cameras over cashing were not appropriately positioned to ensure full coverage • cameras and panic buttons were not being tested; therefore, we were unsure whether or not they are actually functioning. 	High	7a. Test all cameras and panic buttons currently in place.	UNT Dallas has begun work on a comprehensive building security technology project as recommended by Internal Audit. The project includes an overhaul of the campus' current security alarm, access, and camera systems. Additionally the campus will implement an emergency notification system including laptop/desktop computer panic buttons in specified locations. The two cameras in the Student Finance cash handling area have been re-positioned as requested. The remainder of the project will be implemented in stages as soon as vendors and funding are approved.	C. Eff. Jaynes, Chief of Police	3/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Students	UNT Dallas Student Fees Audit	UNT Dallas	7. UNT Dallas Security Devices - Although our walkthrough of UNT Dallas Security Devices identified the following University Administration has initiated a search of security technology vendors prior to this review: <ul style="list-style-type: none"> • 4 out of 25 cameras (16%) were not working properly and no video images were available at the time of review • cameras were not identifiable by a location • record retention protocols were not established • cameras over cashing were not appropriately positioned to ensure full coverage • cameras and panic buttons were not being tested; therefore, we were unsure whether or not they are actually functioning. 	High	7b. Repair / replace / reposition nonfunctioning devices.	UNT Dallas has begun work on a comprehensive building security technology project as recommended by Internal Audit. The project includes an overhaul of the campus' current security alarm, access, and camera systems. Additionally the campus will implement an emergency notification system including laptop/desktop computer panic buttons in specified locations. The two cameras in the Student Finance cash handling area have been re-positioned as requested. The remainder of the project will be implemented in stages as soon as vendors and funding are approved.	C. Eff. Jaynes, Chief of Police	3/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Students	UNT Dallas Student Fees Audit	UNT Dallas	7. UNT Dallas Security Devices - Although our walkthrough of UNT Dallas Security Devices identified the following University Administration has initiated a search of security technology vendors prior to this review: <ul style="list-style-type: none"> • 4 out of 25 cameras (16%) were not working properly and no video images were not identifiable by a location • cameras were not identifiable by a location • record retention protocols were not established • cameras over cashing were not appropriately positioned to ensure full coverage 	High	7c. Develop a process to periodically test all cameras and panic buttons.	UNT Dallas has begun work on a comprehensive building security technology project as recommended by Internal Audit. The project includes an overhaul of the campus' current security alarm, access, and camera systems. Additionally the campus will implement an emergency notification system including laptop/desktop computer panic buttons in specified locations. The two cameras in the Student Finance cash handling area have been re-positioned as requested. The remainder of the project will be implemented in stages as soon as vendors and funding are approved.	C. Eff. Jaynes, Chief of Police	3/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Students	UNT Dallas Student Fees Audit	UNT Dallas	8. UNT Dallas Recalculation of Application/Orientation Fees - The number of undergraduate/graduate applicants submitting an application fee payment and the number of students submitting an orientation fee payment are not recorded to revenues recorded in the University Accounting System to help ensure that all payments received were posted in the proper accounts.	High	8a. Develop procedures to help ensure that all application fee and orientation fee revenues collected are recorded on a regular basis to the University Accounting System.	VP of Student Access and Success will work with the Director of Undergraduate Admissions and the Director of Graduate Admissions to document procedures that ensure application and orientation fee payments are reconciled to match payments with postings of the University Accounting System. The Director of Admissions will coordinate with Student Finance to correct any inaccurate postings for FY16.	Stephanie Holley, Vice President of Student Access and Success	2/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Students	UNT Dallas Student Fees Audit	UNT Dallas	8. UNT Dallas Recalculation of Application/Orientation Fees - The number of undergraduate/graduate applicants submitting an application fee payment and the number of students submitting an orientation fee payment are not recorded to revenues recorded in each respective account in the University Accounting System to help ensure that all payments received were posted in the proper accounts.	High	8b. Identify any application and orientation fees recorded in the incorrect account and work with Accounting to make any necessary adjusting entries for FY 2016.	VP of Student Access and Success will work with the Director of Undergraduate Admissions and the Director of Graduate Admissions to document procedures that ensure application and orientation fee payments are reconciled to match payments with postings of the University Accounting System. The Director of Admissions will coordinate with Student Finance to correct any inaccurate postings for FY16.	Stephanie Holley, Vice President of Student Access and Success	2/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Students	UNT Dallas Student Fees Audit	UNT Dallas	9. UNT Dallas Conflict of Interest - Student Workers: During our review of payroll expenditures funded by Student Services Fees, we noted that 3 out of 5 Student Service Fee Advisory Committee members for FY 2015 and 2 out of 5 members for FY 2016 appointed by the Student Service Fee Advisory Committee were currently working as Student Assistants for the Office of Student Affairs.	High	9a. Update the UNT Dallas Student Service Fee Advisory Committee bylaws to prohibit any Student Service Fee Advisory Committee member to be a compensated Student Assistant of any Student Services fee funded departments other than the Committee itself.	The Student Service Fee Advisory Committee Bylaws will be updated to reflect that students who are currently student assistants and funded by student fees may not hold a seat by either Student Government Association appointment or president appointment.	Jamaka Chapelle, Dean of Student Affairs	Revised 01/24/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Students	UNT Dallas Student Fees Audit	UNT Dallas	10. UNT Dallas Academic Catalogs - During our review of the UNT Dallas Undergraduate and Graduate Catalogs for academic years 2013-2014, 2014-2015 and 2015-2016, we noted that the Catalogs do not provide the student's current, complete and accurate information.	Moderate	10a. Update the University Catalog to include accurate tuition and fee information.	VP of Student Access and Success will work with Office of the Registrar to implement a thorough catalog review and revision process to be completed by the end of the fiscal year. Information is being gathered from each department's section, not owned by that division/department. Catalog will be updated to cover current, complete and accurate information.	Stephanie Holley, Vice President of Student Access and Success	2/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Students	UNT Dallas Student Fees Audit	UNT Dallas	10. UNT Dallas Academic Catalogs - During our review of the UNT Dallas Undergraduate and Graduate Catalogs for academic years 2013-2014, 2014-2015 and 2015-2016, we noted that the Catalogs do not provide the student's current, complete and accurate information.	Moderate	10b. Develop departmental procedures to help ensure that published University Catalogs reflect current tuition and fee information in compliance with University Board of Regents Rules.	VP of Student Access and Success will work with Office of the Registrar to implement a thorough catalog review and revision process to be completed by each department, even when department information is complete and accurate. Information is being gathered from each division/department. Catalog will be updated to cover current, complete and accurate information.	Stephanie Holley, Vice President of Student Access and Success	2/1/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Students	UNT Dallas Student Fees Audit	UNT Dallas	11. UNT Dallas Apply Fees Billing and Refunds - During our review of graduate application fee credit card payments submitted through Apply Fees, we noted that applicants were inconsistently charged from February 2014 to September 2015 for graduate application fees.	Moderate	11a. Work with Apply Fees to identify the reason for the rate discrepancy between fall and spring semesters.	VP of Student Access and Success will work with the Director of Graduate Admissions to request that Apply Fees identify why inaccurate charges were applied inconsistently to applicants during fall and spring semesters. VP and Directors will also work together with Apply Fees to identify students improperly charged and refund any overcharges.	Stephanie Holley, Vice President of Student Access and Success	2/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Students	UNT Dallas Student Fees Audit	UNT Dallas	11. UNT Dallas Apply Fees Billing and Refunds - During our review of graduate application fee credit card payments submitted through Apply Fees, we noted that applicants were inconsistently charged from February 2014 to September 2015 for graduate application fees.	Moderate	11b. Identify and refund any applicants that have been overcharged.	VP of Student Access and Success will work with the Director of Graduate Admissions to request that Apply Fees identify why inaccurate charges were applied inconsistently to applicants during fall and spring semesters. VP and Directors will also work together with Apply Fees to identify students improperly charged and refund any overcharges.	Stephanie Holley, Vice President of Student Access and Success	2/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Students	UNT Dallas Student Fees Audit	UNT Dallas	12. UNT Dallas Discrepancy in Billing of 2nd Bachelor's Degree Program - The 2nd Bachelor's application fee amount was not consistently charged to students paying online and via check, money order, or cash to UNT Dallas but \$60.00 online through Helmet (Online Business/Payment Solution). Although students are not instructed to pay online, this payment option is available on the University website.	Moderate	12a. Work with Student Accounting and University cashbearing to update Helmet to \$50.00.	VP of Student Access and Success will work with the UNT System Director of Financial Services, Student Finance and the Director of Graduate Admissions to ensure Helmet is charging the correct amount together to ensure that all students, who may have overpaid are refunded.	Stephanie Holley, Vice President of Student Access and Success	2/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Students	UNT Dallas Student Fees Audit	UNT Dallas	12. UNT Dallas Discrepancy in Billing of 2nd Bachelor's Degree Program - The 2nd Bachelor's application fee amount was not consistently charged to students paying online and via check, money order, or cash to UNT Dallas but \$60.00 online through Helmet (Online Business/Payment Solution). Although students are not instructed to pay online, this payment option is available on the University website.	Moderate	12b. Identify and refund all students that have overpaid since Summer 2014.	VP of Student Access and Success will work with the UNT System Director of Financial Services, Student Finance and the Director of Graduate Admissions to ensure Helmet is charging the correct amount together to ensure that all students, who may have overpaid are refunded.	Stephanie Holley, Vice President of Student Access and Success	2/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Students	UNT Dallas Student Fees Audit	UNT Dallas	13. UNT Dallas Student Services Fee Assessment Process - Since our review of the Student Services Fee Assessment Process last year, during our review we noted that current SF process does not encompass the study of SF amount to assist in evaluating if current rate/amount is sufficient to cover the cost of student services.	Moderate	13a. The Student Services Fee Advisory Committee should be developed and distributed to all students to identify areas of increased need of student service fee funds. Based on the survey data collected the SFAC will conduct a cost analysis to address feasibility. Based on the results of the analysis and survey data the SFAC will develop a study and approved by the cost analysis and results from the needs assessment survey.	The Student Services Fee Advisory Committee will identify an individual to lead the development of the survey. The survey will be developed and distributed to all students to identify areas of increased need of student service fee funds. Based on the survey data collected the SFAC will conduct a cost analysis to address feasibility. Based on the results of the analysis and survey data the SFAC will develop a study and approved by the cost analysis and results from the needs assessment survey.	Jamacka Chapelle, Dean of Student Affairs	4/30/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Students	UNT Dallas Student Fees Audit	UNT Dallas	14. UNT Dallas Instructional Fee Assessment Process - There is not an instruction of fees or changes to existing instructional fee for colleges/schools to request a review of new fees or changes to existing fees.	Moderate	14a. Develop procedures to determine guidelines to help ensure that instructional fee books are updated and approved. Review and approval before presented to the President.	The UNT Dallas Instructional Fee Study was drafted and submitted to the Office of General Counsel for review and approval.	Charles Baily, UNT Dallas Vice President and Sector Vice President for Academic Excellence and Student Success	June 6, 2016 (action plan implemented)	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Students	UNT Dallas Student Fees Audit	UNT Dallas	15. UNT Dallas Student Tuition and Fees Policy - During our review of the UNT Dallas Student Tuition and Fees Policy, we noted that the policy was developed and will be submitted to the Office of General Counsel for review and approval.	Moderate	15a. The draft tuition and fees policy should be modified to include the Student Tuition and Fees elements and be submitted to the Office of General Counsel for review and approval.	The UNT Dallas Tuition and Fees Policy was drafted and submitted to the Office of General Counsel for review and approval.	Daniel Edelman, Chief Financial Officer and Executive Vice President for Finance and Administration	3/29/2016 (action plan implemented)	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Students	UNT Dallas Student Fees Audit	UNT Dallas	15. UNT Dallas Incident Fee Account Balances - During our review of six incident fee accounts for UNT Dallas and UNT Dallas College of Law for FY 2014, FY 2015 and FY 2016, we noted incident fee account balances were not rolled forward at the end of each fiscal year. Furthermore, testing identified 1 out of 6 incident fee accounts had a large unexpended balance for FY 2015.	Moderate	15b. Update the account in University Accounting System to roll forward at the end of each fiscal year.	With these recommendations, the Budget Office will have a chance to roll budget closing rules and determine which budget balances roll forward into next fiscal year and which fund balances will close at the end of the fiscal year. A proposed list of incidental and student services fees accounts to roll forward will be communicated and approved by the Chief Financial Officer and the Executive Vice President for Finance and Administration.	April Barner, Assistant Vice President of Budgeting and Planning	7/1/2016 Revised 01/02/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Students	UNT Dallas Student Fees Audit	UNT Dallas	16. UNT Dallas Incident Fee Account Balances - During our review of six incident fee accounts for UNT Dallas and UNT Dallas College of Law for FY 2014, FY 2015 and FY 2016, we noted incident fee account balances were not rolled forward at the end of each fiscal year. Furthermore, testing identified 1 out of 6 incident fee accounts had a large unexpended balance for FY 2015.	Moderate	16b. Establish an annual requirement for account holders to provide a formal justification for accumulated unexpended balance over an established threshold.	With these recommendations, the Budget Office will have a chance to roll budget closing rules and determine which budget balances roll forward into next fiscal year and which fund balances will close at the end of the fiscal year. A proposed list of incidental and student services fees accounts to roll forward will be communicated and approved by the Chief Financial Officer and the Executive Vice President for Finance and Administration.	April Barner, Assistant Vice President of Budgeting and Planning	7/31/2016 Revised 03/01/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal / External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Student	UNT Dallas Student Fee Audit	UNT Dallas	<p>17. UNT Dallas Student Services Fee Advisory Committee Composition</p> <p>During our review of the FY 2014-2015 UNT Dallas Student Service Fee Advisory Committee composition, we noted that the student government appointed five undergraduates students as a representative of all students enrolled at the institution. When the committee was formed, the student government were graduate students. Additionally, when the committee was deliberated on FY 2016, none of the members appointed by the student government were graduate or law students.</p> <p>Furthermore, we noted that since UNT Dallas and UNT Dallas College of Law are not within the same reasonably contiguous geographic area, some activities funded partially with student services fees may not be easily accessible and directly benefiting the Law student community.</p>	Moderate	17. Modify current Fee Advisory Committee below to include composition requirements provided by the Texas Education Code § 54.5031 Student Fee Advisory Committee to help ensure that student government appointees are representative of all students enrolled at the institution.	<p>The Student Services Fee Advisory Committee will ensure that the Student Government Association appoint one graduate student, and one college of law student to ensure representation of all students at UNT Dallas.</p> <p>Student Affairs will continue to expand the current process to ensure representation of all students at UNT Dallas. We will continue to work with the Student Affairs to our Veterans Success Center and the Gym. They are also notified through UNT Dallas Announcements each week with the weekly programing and activities that we offer for our students via the following:</p> <ul style="list-style-type: none"> • We will continue to work in collaboration with the Student Affairs office at the College of Law, so that COL students continue to be notified through UNT Dallas Announcements (sent by a member of the Student Affairs office) for our students. • Student Affairs remains committed to ensuring that all UNT Dallas students have access to services for which their fees provide. • We will continue to diligently work with the College of Law to further ensure that we take advantage of services that their fees provide for on both campuses. 	Janetis Chappie, Dean of Student Affairs	8/15/2016 Revised 01/24/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Student	UNT Dallas Student Fee Audit	UNT Dallas	<p>17. Develop a process to help ensure that student services activities funded with student services fees at UNT Dallas are more easily accessible to the College of Law students.</p>	Moderate	17. Develop a process to help ensure that student services activities funded with student services fees at UNT Dallas are more easily accessible to the College of Law students.	<p>The Student Services Fee Advisory Committee will ensure that the Student Government Association appoint one graduate student, and one college of law student to ensure representation of all students at UNT Dallas.</p> <p>Student Affairs will continue to expand the current process to ensure representation of all students at UNT Dallas. We will continue to work with the Student Affairs to our Veterans Success Center and the Gym. They are also notified through UNT Dallas Announcements each week with the weekly programing and activities that we offer for our students via the following:</p> <ul style="list-style-type: none"> • We will continue to work in collaboration with the Student Affairs office at the College of Law, so that COL students continue to be notified through UNT Dallas Announcements (sent by a member of the Student Affairs office) for our students. • Student Affairs remains committed to ensuring that all UNT Dallas students have access to services for which their fees provide. • We will continue to diligently work with the College of Law to further ensure that we take advantage of services that their fees provide for on both campuses. 	Janetis Chappie, Dean of Student Affairs	8/15/2016 Revised 01/24/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Student	UNT Dallas Student Fee Audit	UNT Dallas	<p>18. UNT Dallas: incidental fee-Approval Documentation: The Student Services Fee Advisory Committee reviewed applications received from \$60.00 to \$40.00 and \$60.00 to \$50.00, respectively, and a \$30.00 late application fee was no longer assessed for any applications submitted since Summer 2014. However, a formal application review process was not implemented as the approval of this change in application fee was not available for our review.</p>	Moderate	18. Develop procedures to help to ensure appropriate approval process for incidental fees and ensure appropriate documentation is retained.	<p>The following management action plans are a affirmation in regards to the recommendations made and approved by the UNT Dallas President on June 3, 2016:</p> <ul style="list-style-type: none"> • Effective immediately, all incidental fees shall be frozen at rates established as set forth in this memo and no new incidental fees shall be assessed. • A proposed policy regarding incidental fees shall be submitted for your approval within the next 60 days and implemented by February 2017. • We will ensure that incidental fees charged for FY 2016 (and prior years) do not exceed the UNT System Board Briefing dated January 22, 2010 (UNT at Dallas Tuition for FY 2011 and 2012 and Fees for FY 2013). Apparently, over the years, a number of incidental fees being charged has increased as well as changes in the rates assessed. • A proposed policy regarding incidental fees shall be submitted for your approval within the next 60 days and implemented by February 2017. • We will ensure that incidental fees charged for FY 2016 (and prior years) do not exceed the UNT System Board Briefing dated January 22, 2010 (UNT at Dallas Tuition for FY 2011 and 2012 and Fees for FY 2013). Apparently, over the years, a number of incidental fees being charged has increased as well as changes in the rates assessed. • Pursuant with UNT System Board of Regents Rule, Chapter 7 – Student Affairs, Education and Funding (07-A03.2.d), authority has been delegated to the President of UNT Dallas to set the appropriate incidental fees for the UNT Dallas campus. • Incidental Fees shall be assessed through Student Financial Services by SF Item Type. College of Law specific fees shall contain appropriate Organizational Departments located in the College of Law. We are General Ledger interface mapping to direct the activity to Organizational Departments located in the College of Law. We are Financial Services, they include application fee. 	David Edelman, Chief Financial Officer President for Finance and Administration	8/15/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Reviewed	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Students	UNT Dallas Student Fees Audit	UNT Dallas	<p>19. UNT Dallas: Additional Funds Collected from Students - The Office of Student Affairs collects additional funds from students for a few student oriented activities as a participation fee to ensure proper planning for activities. Specifically, the College of Law may charge this additional fee to ensure student participation. The participation fee varies for these events from \$5.00 to \$15.00 and is determined in collaboration with the Student Bar Association (SBA) elected leaders.</p> <p>For FY 2016 the College of Law was allocated \$60,000.00 by the Student Service Fee Advisory Committee to be able to serve the College's student body needs. Although the College of Law expended only \$7,157.66 as of January 2016, major events funded by student fees such as the Barristers' Ball and Open-the-Hump are planned later in the Spring Semester.</p>	Moderate	19a. Plan/Determine what the student services fees will be utilized for.	<p>We concur that we need to plan/determine what the student services fees will be utilized for and will continue to do so within the guidelines of the statutory Student Services Fee Advisory Committee (SSFAC) process.</p> <ul style="list-style-type: none"> We will work with the SBA and student organizations on their budget proposal deadlines each semester. While we will expend all Student Services Fees each year, we will notify students that some events may require a minimal participation fee. No additional funds will be commingled with student services fees. Funds collected will have appropriate aggregation of duties when receiving, processing, and depositing money. The Office of Student Affairs will record cash/money order payments on carbon receipts. The receipts will state the name of the payer and the name of the Student Affairs staff person who received the payment. An administrative assistant from another law school department will review/reconcile the payments received with the deposit of the cash/money order payments will be given to Candice Birks, the law school bursar, who will sign a statement confirm receipt of the funds. 	Rebecca Greenan, College of Law - Assistant Dean of Students	5/31/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Students	UNT Dallas Student Fees Audit	UNT Dallas	<p>19. UNT Dallas: Additional Funds Collected from Students - The Office of Student Affairs collects additional funds from students for a few student oriented activities as a participation fee to ensure proper planning for activities. Specifically, the College of Law may charge this additional fee to ensure student participation. The participation fee varies for these events from \$5.00 to \$15.00 and is determined in collaboration with the Student Bar Association (SBA) elected leaders.</p> <p>For FY 2016 the College of Law was allocated \$60,000.00 by the Student Service Fee Advisory Committee to be able to serve the College's student body needs. Although the College of Law expended only \$7,157.66 as of January 2016, major events funded by student fees such as the Barristers' Ball and Open-the-Hump are planned later in the Spring Semester.</p>	Moderate	19b. Determine if the fees allocated to the College by the Student Service Fee Advisory Committee will cover the cost and relate to students that additional funds will be needed to participate in the event/activity.	<p>We concur that we need to plan/determine what the student services fees will be utilized for and will continue to do so within the guidelines of the statutory Student Services Fee Advisory Committee (SSFAC) process.</p> <ul style="list-style-type: none"> We will work with the SBA and student organizations on their budget proposal deadlines each semester. While we will expend all Student Services Fees each year, we will notify students that some events may require a minimal participation fee. No additional funds will be commingled with student services fees. Funds collected will have appropriate aggregation of duties when receiving, processing, and depositing money. The Office of Student Affairs will record cash/money order payments on carbon receipts. The receipts will state the name of the payer and the name of the Student Affairs staff person who received the payment. An administrative assistant from another law school department will review/reconcile the payments received with the deposit of the cash/money order payments will be given to Candice Birks, the law school bursar, who will sign a statement confirm receipt of the funds. 	Rebecca Greenan, College of Law - Assistant Dean of Students	5/31/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Students	UNT Dallas Student Fees Audit	UNT Dallas	<p>19. UNT Dallas: Additional Funds Collected from Students - The Office of Student Affairs collects additional funds from students for a few student oriented activities as a participation fee to ensure proper planning for activities. Specifically, the College of Law may charge this additional fee to ensure student participation. The participation fee varies for these events from \$5.00 to \$15.00 and is determined in collaboration with the Student Bar Association (SBA) elected leaders.</p> <p>For FY 2016 the College of Law was allocated \$60,000.00 by the Student Service Fee Advisory Committee to be able to serve the College's student body needs. Although the College of Law expended only \$7,157.66 as of January 2016, major events funded by student fees such as the Barristers' Ball and Open-the-Hump are planned later in the Spring Semester.</p>	Moderate	19c. Additional funds collected should be deposited with the same chart string account as a credit to expense with a unique identifying purpose value. Also, funds collected should have appropriate aggregation of duties when receiving, processing and depositing the money.	<p>We concur that we need to plan/determine what the student services fees will be utilized for and will continue to do so within the guidelines of the statutory Student Services Fee Advisory Committee (SSFAC) process.</p> <ul style="list-style-type: none"> We will work with the SBA and student organizations on their budget proposal deadlines each semester. While we will expend all Student Services Fees each year, we will notify students that some events may require a minimal participation fee. No additional funds will be commingled with student services fees. Funds collected will have appropriate aggregation of duties when receiving, processing, and depositing money. The Office of Student Affairs will record cash/money order payments on carbon receipts. The receipts will state the name of the payer and the name of the Student Affairs staff person who received the payment. An administrative assistant from another law school department will review/reconcile the payments received with the deposit of the cash/money order payments will be given to Candice Birks, the law school bursar, who will sign a statement confirm receipt of the funds. 	Rebecca Greenan, College of Law - Assistant Dean of Students	5/31/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Students	UNT Dallas Student Fees Audit	UNT Dallas	20. UNT Dallas College of Law Seat Deposit Reconciliation- Reconciliation procedure have not been performed to verify that seat deposits sent by admitted law students to UNT College of Law Admissions Office were properly credited towards the correct account. The Office has been instructed to ensure that the correct chart of accounts if seat deposits were forfeited.	Moderate	20a. Develop reconciliation procedures to help ensure that seat deposit checks received were credited towards the correct student account if the student enrolled or were properly recorded in the correct chart of accounts. If the seat deposit was forfeited:	The College of Law Office of Admissions will work with the Information Technology Manager at Dallas to establish a query report to be run weekly to ensure seat deposits received by the Office are timely processed and the respective state office accounts are updated by the end of the business day. The Office will also implement a process to prevent or identify processing errors early—as a checks and balance mechanism. Additionally, the Office of Admissions will work with the Information Technology Manager at Dallas to ensure that the current accountancy in BES to verify this information in the system. If there is a discrepancy found with seat deposits not being posted to a student's account or posted to the wrong student account, the Office of Admissions will work with the Information Technology Manager at Dallas to ensure that the account is corrected. In the event that the Assistant to the Assistant Director of Admissions, in the event that the Assistant Dean is out of the office to ensure that the report is reconciled weekly in the Assistant Dean's absence.	Valerie James, College of Law Assistant Dean for Admissions and Scholarships	9/17/2016 Revised 01/21/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-024 DAL	Academic and Students	UNT Dallas Student Fees Audit	UNT Dallas	21. UNT Dallas College of Law Academic Catalog- Although the total cost of attendance is included in the 2015-2016 UNT Dallas College of Law Academic Catalog, it does not include a description of the amount of each fee to be charged to students.	Moderate	21a. Develop procedures to help ensure that future academic catalogs include a description of the amount of each fee to be charged to students in accordance with the statute.	The three individuals who work on this page for the College of Law (rating are: 1) Assistant Director of Registration and Student Finance, 2) Assistant Director of Financial Services, and 3) Assistant Director of Marketing and Communications. These three have been informed that moving forward, the incidental fees should be broken down and specifically identified/explained so that students have complete transparency as to the fee being charged and paid. In addition, the Office of Admissions will update the current website, by semester: https://weboodyssey.unt.edu/current-student/financial-services/fees-tuition-and-fees .	Reynaldo Valencia, College of Law Associate Dean for Finance and Student Services and Professor of Law	8/12/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-008 HSC	Governance and Regulatory Compliance	President's Expenditure Review	UNTHSC	Travel reimbursements paid to or on behalf of the President were in excess of the amount allowed for the President's travel. The President's System (travel) employees sign and receive travel reimbursements included proper documentation, not all travel budget authorization forms were signed/approved by the Chancellor, as required by UNT System Travel Guidelines. Additionally, the President's travel reimbursement payments without all the appropriate approval signatures.	NA	None	Management will ensure that approval from the Chancellor will be obtained for all Travel Budget Authorization forms.	NA	NA	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-101 SYS	Information Technology	Audit of IT Governance - IT Shared Services	UNT System	The IT Governance Audit was very enlightening as it involved an in-depth analysis of the organizational structure and communication channels, as well as the current IT governance framework and plans, strategic plan and risk assessment, and website/web application publishing. During the course of the audit, the team found that IT is making significant efforts on strengthening information used throughout the System and found that all terms are working to set up as a sponsored project in accordance with the Health Science Center's policies and procedures. The Family Medicine Residency Program (FMRP) agreement is not set up as a sponsored project in accordance with the Health Science Center's policies and procedures. The Office of Finance is not set up as a sponsored project in accordance with the Health Science Center's policies and procedures.	NA	None	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2016	16-010 HSC	Governance and Regulatory Compliance	Family Medicine Residency Programs	UNTHSC	The Family Medicine Residency Program (FMRP) agreement is not set up as a sponsored project in accordance with the Health Science Center's policies and procedures. The Office of Finance is not set up as a sponsored project in accordance with the Health Science Center's policies and procedures.	High	Recommendation for the Associate Dean for Educational Programs is to: Work with appropriate management from the Office of Grant and Contract Management and the Office of Finance to set up the FMRP as a sponsored project.	1. Associate Dean for Educational Programs will work with appropriate management from the Office of Grant and Contract Management and the Office of Finance to set up the FMRP as a sponsored project.	Lisa R. Nash, DO, Associate Dean for Educational Programs and Professor of Family Medicine, UNTHSC	5/31/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2016	16-010 ISC	Governance and Regulatory Compliance	Family Medicine Residency Program	UNTHSC	The Family Medicine Residency Program (FMRP) agreement is not set up as a sponsored project in accordance with the Health Science Center Policy and it is not processed or monitored for financial performance by the Office of Grant and Contract Management.	High	Recommendation for the Provost & Executive Vice President, Academic Affairs is to: Identify all grants, contracts or cooperative agreements (i.e., sponsored projects) that are currently active (pending approval and collaborate with the Office of Grant and Contract Management to assess if these agreements should be identified as sponsored projects. Once identified, work with Office of Grant and Contract Management to set up as sponsored projects.	2. The Provost office will coordinate review of the final outstanding Texas Higher Education Coordinating Board (THECB) contract number 14178 between Texas College of Osteopathic Medicine (TCOM) and OCGM to determine if a new Profit should be established. Review will be completed by 3/31/2016. OCGM will coordinate with TCOM to allow for necessary accounting corrections prior to the blank-out dates. For future awards, the Provost office will ensure that all contracts submitted for signature by the Provost will have been vetted and approved by OCGM. OCGM will coordinate with OGA to ensure contracts that incorporate the State of Texas Uniform Grant Management Standards as a requirement of the award are routed through OCGM for review and project management.	Thomas V. Provoct & Executive Vice President, Academic Affairs / Leah Forberg, Assistant Vice President, Research Administration	3/31/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-010 ISC	Governance and Regulatory Compliance	Family Medicine Residency Program	UNTHSC	Internal Audit noted control deficiencies over the preparation of the FMRP Annual Financial Report (AFR). THE FMRP AFR is not prepared at a level required to ensure accurate financial reporting. We identified the following financial reporting errors after the FMRP AFR preparation methodology was validated by Texas Higher Education Coordinating Board (THECB): B. Professional Service Revenue B.1 - Total gross charge amount for Professional Service Charges was reported only for the two primary locations (i.e. 300 primary family medicine and 300 specialty family medicine) for the FMRP. We do not certify that the effort charged was based on actual activity.	High	Recommendation for the Provost, Vice President of Finance/ Chief Financial Officer and FMRP Director is to: The FMRP Annual Financial Report should be prepared by the office of finance in collaboration with the department in an effort to ensure accurate financial reporting.	Send a memo to faculty, specifically FCC-PC, Family Medicine, East Branch Internal Medicine, FCC-PC, General Internal Medicine and FCC-PC (OM) noted by the auditors under Revenues A, B, and C, above are unrelated in any way to the Family Residency Program (funded under this grant and are not to be included in the financial report. Administrator	Lisa R. Naah, D.O., Associate Dean for Educational Programs / Barbara Holt, Senior Director Financial Operations / Jessica Chavez, Texas OPTI Administrator	4/31/2016 Revised: 10/31/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-010 ISC	Governance and Regulatory Compliance	Family Medicine Residency Program	UNTHSC	Testing identified the following: The Procurement Card (P-Card) Expenditure Report which was submitted for the Board/ THECB grant for fiscal year 2015 was not retained at the department level and was unavailable for review. Occasionally, the reconciler and approver is serving a dual role in the P-Card Expenditure review process.	High	Recommendation for the FMRP Director is to: Work with the Office of Grant and Contract Management to help ensure that the grant is in compliance with the Texas' Uniform Grant Management Standards for time and effort reporting requirements.	The Associate Dean for Educational Programs will work with the Office of Finance to develop and implement procedures to collect and report on financial activity related to the program in a manner that is in compliance with the Coordinating Board's financial reporting guidelines.	Lisa R. Naah, D.O., Associate Dean for Educational Programs / Jessica Chavez, Texas OPTI Administrator	4/31/2016 Revised: 10/31/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-010 ISC	Governance and Regulatory Compliance	Family Medicine Residency Program	UNTHSC	Testing identified the following: The Procurement Card (P-Card) Expenditure Report which was submitted for the Board/ THECB grant for fiscal year 2015 was not retained at the department level and was unavailable for review. Occasionally, the reconciler and approver is serving a dual role in the P-Card Expenditure review process.	Moderate	Recommendations for the Associate Dean of Educational Programs are to: Require all current P-Card holders, reconcilers and approvers to be retrained on P-Card policies and procedures.	The Associate Dean for Educational Programs will require signature approval by three different individuals for final reconciliation/approval of P-Card documentation. Transition to electronic filing of P-Card documentation resolves issue on retention of documents.	Lisa R. Naah, D.O., Associate Dean for Educational Programs / Jessica Chavez, Texas OPTI Administrator	3/31/2016 Revised: 10/31/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-010 ISC	Governance and Regulatory Compliance	Family Medicine Residency Program	UNTHSC	Testing identified the following: The Procurement Card (P-Card) Expenditure Report which was submitted for the Board/ THECB grant for fiscal year 2015 was not retained at the department level and was unavailable for review. Occasionally, the reconciler and approver is serving a dual role in the P-Card Expenditure review process.	Moderate	Recommendations for the Associate Dean of Educational Programs are to: Follow University Business Service Center P-Card Guidelines.	The Associate Dean for Educational Programs will require signature approval by three different individuals for final reconciliation/approval of P-Card documentation. Transition to electronic filing of P-Card documentation resolves issue on retention of documents.	Lisa R. Naah, D.O., Associate Dean for Educational Programs / Jessica Chavez, Texas OPTI Administrator	3/31/2016 Revised: 10/31/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2016	16-010 USC	Governance and Regulatory Compliance	Family Medicine Residency Program	UNTHSC	The FMRF grant was not properly classified in the UNTHSC Accounting System for fiscal year 2013 and fiscal year 2014. During our review for the FMRF grant in the UNTHSC Accounting System, we noted that for fiscal year 2013 and fiscal year 2014 funds passed from the Texas Higher Education Coordinating Board (THECB) to UNTHSC were compared to fiscal year 2015 funds, which were classified as State Grant Pass Through Revenue - Non Operational. Based on the audited fiscal year 2013 and fiscal year 2014 FMRF Annual Financial Reports, the support received from THECB was supplemental to the Program. The Associate Dean for Educational Programs also confirmed that the FMRF will be conducted regardless of the additional funds received from THECB.	Low	Recommendations for the UNTHSC Associate Controller are to: Work with the Texas Comptroller of Public Accounts to determine if prior years' classifications should be corrected.	Associate Dean for Educational Programs will work with appropriate management from the UNT System's Office to ensure the classification of the FMRF grant is correct. In addition, the UNT System's Controller's Office will work with the Texas Comptroller of Public Accounts to make a determination if prior year Annual Financial Reports need to be adjusted to report the proper classification of the program's funds.	Lisa R. Nash, DO, Associate Dean for Educational Programs Paula Welch, Associate Controller / Jessica Chavez, Texas OPTI Administrator	5/31/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-010 USC	Governance and Regulatory Compliance	Family Medicine Residency Program	UNTHSC	The FMRF grant was not properly classified in the UNTHSC Accounting System for fiscal year 2013 and fiscal year 2014. During our review of classification of revenues and proper recording for the FMRF grant in the UNTHSC Accounting System, we noted that for fiscal year 2013 and fiscal year 2014 funds passed from the Texas Higher Education Coordinating Board (THECB) to UNTHSC were compared to State Grant Pass Through Revenue - Operational compared to fiscal year 2015 funds, which were classified as State Grant Pass Through Revenue - Non Operational. Based on the audited fiscal year 2013 and fiscal year 2014 FMRF Annual Financial Reports, the support received from THECB was supplemental to the Program. The Associate Dean for Educational Programs also confirmed that the FMRF will be conducted regardless of the additional funds received from THECB.	Low	Recommendations for the UNTHSC Associate Controller are to: Re-educate personnel on financial reporting of state grant pass through revenues to help ensure compliance with the Texas Comptroller of Public Accounts guidelines.	Associate Dean for Educational Programs will work with appropriate management from the UNT System's Office to ensure the classification of the FMRF grant is correct. In addition, the UNT System's Controller's Office will work with the Texas Comptroller of Public Accounts to make a determination if prior year Annual Financial Reports need to be adjusted to report the proper classification of the program's funds.	Lisa R. Nash, DO, Associate Dean for Educational Programs Paula Welch, Associate Controller / Jessica Chavez, Texas OPTI Administrator	5/31/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-021 UNT	Academic and Students	Student Service Fee Audit	UNT	The current process for monitoring Student Service Fee allocations is not sufficient to ensure funds are not over-spent and funds are spent in accordance with approved purposes. Internal Audit reviewed and tested the Student Service Fee (SSF) process and allocations for fiscal year 2015. Out of 57 SSF dept ID allocations, 9 instances were identified where total expenditures exceeded available SSF account revenues. If additional other funding sources were not obtained by SSF dept ID holder then deficit balances were charged to the SSF reserve account at year end.	Low	Recommendations for Vice President for Student Affairs: 1.a. Coordinate with the UNT Budget Office to establish a process to ensure that only transfers approved by the Vice President for Student Affairs Office are processed.	a. Management agrees. Establish process to ensure no transfers are processed by the UNT Budget Office without approval from the VPSA Office. b. Management agrees. Send memo to all dept ID holders outlining approval process to transfer funds; also discuss during meetings with SSF dept ID holders (held as SSF process begins and when awards are made).	Dr. Elizabeth With, Vice President for Student Affairs	7/31/2016 Actual 08/29/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-021 UNT	Academic and Students	Student Service Fee Audit	UNT	The current process for monitoring Student Service Fee allocations is not sufficient to ensure funds are not over-spent and funds are spent in accordance with approved purposes. Internal Audit reviewed and tested the Student Service Fee (SSF) process and allocations for fiscal year 2015. Out of 57 SSF dept ID allocations, 9 instances were identified where total expenditures exceeded available SSF account revenues. If additional other funding sources were not obtained by SSF dept ID holder then deficit balances were charged to the SSF reserve account at year end.	Low	Recommendations for Vice President for Student Affairs: 1.b. Provide training to SSF dept ID holders with regard to their responsibilities in receiving and recording SSF funds. 1.c. Establish a process to identify potential deficit situations, including steps/procedures to be taken, and consequences for SSF dept ID holders for non-compliance.	Dr. Elizabeth With, Vice President for Student Affairs	7/31/2016 Actual 08/29/2016	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2016	16-021 UNT	Academic and Students	Student Service Fee Audit	UNT	The current process for monitoring Student Service Fee allocations is not sufficient to ensure funds are not over-spent and funds are spent in accordance with approved purposes. Internal Audit reviewed and tested the Student Service Fee (SSF) process and allocations for fiscal year 2015. Out of 57 SSF dept ID allocations, 9 instances were identified where total expenditures exceeded available SSF account revenues. If additional other funding sources were not obtained by SSF dept ID holder then deficit balances were charged to the SSF reserve account at year end.	Low	Recommendations for Vice President for Student Affairs: 1.c. Establish a process to identify potential deficit situations, including steps/procedures to be taken, and consequences for SSF dept ID holders for non-compliance.	Dr. Elizabeth With, Vice President for Student Affairs	7/31/2016 Actual 08/29/2016	Closed	

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2016	16-005 UNT	Governance and Regulatory Compliance	UNT Student Money Management Center	UNT	<p>1. The rate of default for the Green Loan Program (GLP) is high as compared to similar loans managed by the Student Money Management Center (SMWC) and at this rate, the loan program is unsustainable.</p> <ul style="list-style-type: none"> • For loans issued prior to August 2013, the collection rate since August 2013 to January 2016 is 9% - less than 4% per year. Over all default rate for old and new loans is 72%. <p>2. The current practice at Student Money Management Center (SMWC) is that management has some discretion as to the loan amounts and the repayment period for the Green Loan Program (GLP). Current procedures do not sufficiently document when and how much management discretion is allowable.</p> <ul style="list-style-type: none"> • There is some management discretion as to the amount of fees to charge, for 1 out of 24 loans tested, an exception was noted where the total fees and charges due was \$23,220 late charge and \$3 service charge. Only \$17 was collected while \$6 was waived. • Management also has some discretion as to the repayment date. For example, management can alter the repayment date if it falls on a weekend and if the student is aware of a difficulty in repaying before the deadline. 	Moderate	<p>Recommendations for Paul Goebel, Assistant Director II, Student Money Management Center:</p> <p>2a. Review current GLP manual and update for procedures to include the current practice at SMWC. Management should define the exceptions and starting how and when management discretion should be applied, and also ensure that it is consistent with the current practice.</p> <p>2b. Establish a specific periodic review process to ensure that the GLP manual is accurate and adequately address relevant procedures should indicate the last time it was reviewed.</p>	<p>1. Review loans issued prior to August 2013 and document current status, all appropriate blocks are in place, and all necessary documents are in file.</p>	Dorella Chapman, Student Services Coordinator II	8/01/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-005 UNT	Governance and Regulatory Compliance	UNT Student Money Management Center	UNT	<p>3. The current practice at Student Money Management Center (SMWC) is that management has some discretion as to the loan amounts and the repayment period for the Green Loan Program (GLP). Current procedures do not sufficiently document when and how much management discretion is allowable.</p> <ul style="list-style-type: none"> • For 1 out of 24 loans tested, an exception was noted where the total fees and charges due was \$23,220 late charge and \$3 service charge. Only \$17 was collected while \$6 was waived. • Management also has some discretion as to the repayment date. For example, management can alter the repayment date if it falls on a weekend and if the student is aware of a difficulty in repaying before the deadline. 	Moderate	<p>Recommendations for Paul Goebel, Assistant Director II, Student Money Management Center:</p> <p>3a. Review non-current loans and document current status e.g. whether any when a student graduated, whether they are a current loan, and ensure proper blocks are in place.</p>	<p>2. Review loans issued prior to August 2013 and document current status, all appropriate blocks are in place, and all necessary documents are in file.</p>	Dorella Chapman, Student Services Coordinator II	8/17/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-005 UNT	Governance and Regulatory Compliance	UNT Student Money Management Center	UNT	<p>4. There is variance between promissory notes and transcript blocks were not in place as required by the Green Loan Program (GLP) manual terms and conditions.</p> <p>5. Promissory notes and transcript blocks were missing for old loans issued prior to August 2013. There were also instances relating to current loans. Incomplete documentation and lack of enforcement of blocks reduce the chance of repayment of loans.</p>	Moderate	<p>Recommendations for Paul Goebel, Assistant Director II, Student Money Management Center:</p> <p>3b. Establish a review process to ensure that appropriate blocks are being placed on students' accounts with non-current loans.</p>	<p>3. Review loans issued prior to August 2013 and document current status, all appropriate blocks are in place, and all necessary documents are in file.</p>	Dorella Chapman, Student Services Coordinator II	8/17/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-005 UNT	Governance and Regulatory Compliance	UNT Student Money Management Center	UNT	<p>6. There is variance between promissory notes and transcript blocks were not in place as required by the Green Loan Program (GLP) manual terms and conditions.</p> <p>7. There is a variance between the amount of fund balance per the promissory notes and the amount of fund balance per the transcript blocks. The total amount of donations received into the fund - \$22,626, and fund balance per the general ledger - \$16,217.</p>	Moderate	<p>Recommendations for Paul Goebel, Assistant Director II, Student Money Management Center:</p> <p>4. Coordinate with Financial Reporting to conduct a thorough and comprehensive reconciliation of the Green Loan account.</p>	<p>b. Identify process to ensure timely posting of relevant blocks to student accounts. Documentation of the process and monthly review checklist will be included in the updated program manual.</p>	Paul Goebel, Assistant Director II, SMWC	8/17/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-005 UNT	Governance and Regulatory Compliance	UNT Student Money Management Center	UNT	<p>8. There is variance between promissory notes and transcript blocks were not in place as required by the Green Loan Program (GLP) manual terms and conditions.</p> <p>9. There is a variance between the amount of fund balance per the promissory notes and the amount of fund balance per the transcript blocks. The total amount of donations received into the fund - \$22,626, and fund balance per the general ledger - \$16,217.</p>	Moderate	<p>Recommendations for Paul Goebel, Assistant Director II, Student Money Management Center:</p> <p>5. Coordinate with Financial Reporting to conduct a thorough and comprehensive reconciliation of the Green Loan account.</p>	<p>a. Coordinate with Financial Reporting to conduct a thorough and comprehensive reconciliation of the Green Loan account.</p>	Paul Goebel, Assistant Director II, SMWC	1/15/2017 Rev. 08/31/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2016	16-405 UNT	Governance and Regulatory Compliance	UNT Student Money Management Center	UNT	A. There is variance between petty cash records, total amount of donations received to the fund, and the general ledger. The Green Loan Program (GLP) manual requires the Student Money Management Center (SMAC) records - \$16,345, 04/1/16 of the total amount of donations received into the fund - \$22,625, and fund balance per the general ledger - \$16,217.	Moderate	Recommendations for Paul Goebel, Assistant Director III, Student Money Management Center: 7a. Update policies to include procedures for periodic reconciliation with the General Ledger.	b. Coordinate with Financial Reporting to determine policies and procedures for periodic reconciliation. Include this information in GLP manual.	Danielle Champagne, Student Services Coordinator II	1/12/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-405 UNT	Governance and Regulatory Compliance	UNT Student Money Management Center	UNT	5. There are instances where information on Student Money Management Center (SMAC) website is not consistent with information in the procedures Green Loan Program (GLP) manual. One of the terms and conditions listed on the SMAC's website and in the GLP manual says that both transcript and registration blocks will be applied to late and default accounts but the intention and practice is to use transcript blocks only.	Low	Recommendations for Paul Goebel, Assistant Director III, Student Money Management Center: 5a. Review information currently posted to SMAC website for accuracy and consistency with policies and procedures.	a. Information posted to SMAC website has been reviewed for consistency with policies and procedures.	Danielle Champagne, Student Services Coordinator II	8/12/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-405 UNT	Governance and Regulatory Compliance	UNT Student Money Management Center	UNT	5. There are instances where information on Student Money Management Center (SMAC) website is not consistent with information in the procedures Green Loan Program (GLP) manual. The GLP manual says that both transcript and registration blocks will be applied to late and default accounts but the intention and practice is to use transcript blocks only.	Low	Recommendations for Paul Goebel, Assistant Director III, Student Money Management Center: 5b. Establish a process to ensure review of information posted to SMAC website is performed periodically.	b. Annual date of website review has been set as August 1. Documentation of this step will be included in the revised Green Loan Program Manual.	Paul Goebel, Assistant Director III, SMAC	8/7/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-405 UNT	Governance and Regulatory Compliance	UNT Student Money Management Center	UNT	6. The Green Loan Program (GLP) is not being maintained on an imprest basis as required by UNT cash handling policies. The Green Loan petty cash fund is not being maintained on an imprest basis. The principal is retained in the petty cash fund to be used to disburse for new loans.	Low	Recommendation for Paul Goebel, Assistant Director III, Student Money Management Center: 6a. Coordinate with Financial Reporting and Vice President for Finance and Administration, UNT, to determine how to best comply with UNT cash handling policies.	a. Coordinate with Student Accounting and University Cashiering Services to transition loan program to an electronic disbursement, and payments system (non-cash). This will eliminate the need for the SMAC to handle any cash.	Paul Goebel, Assistant Director III, SMAC	9/7/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-405 UNT	Governance and Regulatory Compliance	UNT Student Money Management Center	UNT	7. The Student Money Management Center (SMAC) uses pre-numbered receipts but the receipts do not comply with SMAC's set forth in UNT policies. SMAC uses pre-numbered receipts but the receipts have not been approved by Student Accounting and University Cashiering Services. The receipts are not numbered and do not have UNT reported on as required by UNT Sales and Receipt of Funds Policy 2.2.1.	Low	Recommendations for Assistant Director III, Student Money Management Center: 7a. Coordinate with SAUCS to obtain receipts that comply with UNT sales and receipt of Funds Policy 2.2.1.	a. Obtain approved receipt book from UNT Printing Services.	Danielle Champagne, Student Services Coordinator II	6/23/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2016	16-405 UNT	Governance and Regulatory Compliance	UNT Student Money Management Center	UNT	7. The Student Money Management Center (SMAC) uses pre-numbered receipts but the receipts do not comply with SMAC's set forth in UNT policies. SMAC uses pre-numbered receipts but the receipts have not been approved by Student Accounting and University Cashiering Services (SAUCS) as to form and content as required by cash handling policies. The receipts are not numbered and do not have UNT reported on as required by UNT Sales and Receipt of Funds Policy 2.2.1.	Low	Recommendations for Assistant Director III, Student Money Management Center: 7b. Establish a process to ensure that all receipts issued are cleared by SAUCS as to form.	b. Implement the use of SAUCS-approved receipts and payment report procedures.	Danielle Champagne, Student Services Coordinator II	6/23/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External (Source)	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal (Co-Source)	PWC	Fiscal Year 2016	NA	Governance and Regulatory Compliance	UNT System Benefits Proportionality Internal Audit	UNT	<p>Through review of the each entity's Benefits Proportionality files, IA identified the following:</p> <ul style="list-style-type: none"> - Even though UNT documented procedure, accounting information, spreadsheets within the source documentation file, there were not sufficient comments and/or notes embedded in the cells in the Section tabs explaining information was obtained or what information was used for calculation. - UNT and UNTD did not utilize a "Lead Workpaper" tab within their source documentation files. This separate tab could be used to document all and calculations related to the amounts recorded in the Section tabs as well as to embed notes and comments explaining the source of information in a more concise manner. - There was not an "Information/Documentation Needed to Complete the APS 011 Form" section within the source documentation file used by the source to document the information needed for completion and review instructions. State information, and other information, was not formally documented for use in subsequent years. It was noted, through review of the each entity's Benefits Proportionality processes and regulations of corresponding source documentation and spreadsheets within the source documentation file, there were not sufficient comments and/or notes embedded in the cells in the Section tabs explaining where information was obtained or what information was used for calculation. - UNT and UNTD did not utilize a "Lead Workpaper" tab within their source documentation files. This separate tab could be used to document all amounts and calculations related to the amounts recorded in the Section tabs to embed notes and comments explaining the source of information in a clearer and more concise manner. - There was not an "Information/Documentation Needed to Complete the APS 011 Form" section within the source documentation file used by the source to document the information needed for completion and review instructions. State information, and other information, was not formally documented for use in subsequent years. It was noted, through review of the each entity's Benefits Proportionality processes and regulations of corresponding source documentation and spreadsheets within the source documentation file, there were not sufficient comments and/or notes embedded in the cells in the Section tabs explaining where information was obtained or what information was used for calculation. 	Moderate	UNT should embed comment and/or notes within the supporting documentation excel file to explain specific details of key amounts, calculations, and sources of information.	NA	NA	N/A	
Internal (Co-Source)	PWC	Fiscal Year 2016	NA	Governance and Regulatory Compliance	UNT System Benefits Proportionality Internal Audit	UNT	<p>Through review of the each entity's Benefits Proportionality processes and regulations of corresponding source documentation and spreadsheets within the source documentation file, there were not sufficient comments and/or notes embedded in the cells in the Section tabs explaining where information was obtained or what information was used for calculation. - UNT and UNTD did not utilize a "Lead Workpaper" tab within their source documentation files. This separate tab could be used to document all amounts and calculations related to the amounts recorded in the Section tabs to embed notes and comments explaining the source of information in a clearer and more concise manner. - There was not an "Information/Documentation Needed to Complete the APS 011 Form" section within the source documentation file used by the source to document the information needed for completion and review instructions. State information, and other information, was not formally documented for use in subsequent years. It was noted, through review of the each entity's Benefits Proportionality processes and regulations of corresponding source documentation and spreadsheets within the source documentation file, there were not sufficient comments and/or notes embedded in the cells in the Section tabs explaining where information was obtained or what information was used for calculation. </p>	Moderate	UNT and UNTD should implement a "Lead Workpaper" separate from the formal sections that would be used to detail source information. The separate tab could include the Method of Finance calculation, the Local Funds Adjustment calculation, and each benefits calculation.	NA	NA	N/A	

UNTS Enterprise Audit Report Inventory

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Internal (Co-Source)	PWC	Fiscal Year 2016	NA	Governance and Regulatory Compliance	UNT System Benefits Proportionality Internal Audit	UNT Dabula	<p>Through review of the each entity's Benefits Proportionality files, IA identified the following:</p> <ul style="list-style-type: none"> - Even though UNT documented procedures, accounting information, spreadsheets within the source documentation file, there were not sufficient comments and/or notes embedded in the cells in the Section tabs explaining where information was obtained or what information was used for calculation. - UNT and UNTD did not utilize a "Last Workpaper" tab within their source documentation files. This separate tab could be used to document all amounts and calculations related to the amounts recorded in the Section tabs as well as to embed notes and comments explaining the source of information in a more concise manner. - There was not an "Information/Documentation Needed to Complete the APS 011 Form" section within the source documentation file used by the entity to document the source of information used in completing the APS 011 Form (such as completion and review instructions, State information, and other information), was not formally documented for use in subsequent years. It was noted, 	Moderate	<p>UNT and UNTD should implement a "Last Workpaper" separate tab from the format sections that would be used to set all source documentation and other important information. This workpaper could include the Method of Finance calculation, the Method of Adjustment calculation, and each benefits calculation.</p>	NA	NA	NA	N/A
Internal (Co-Source)	PWC	Fiscal Year 2016	NA	Governance and Regulatory Compliance	UNT System Benefits Proportionality Internal Audit	UNT	<p>Through review of the each entity's Benefits Proportionality processes and inspection of source documentation files, IA identified the following:</p> <ul style="list-style-type: none"> - Even though UNT documented procedures, accounting information, and spreadsheets within the source documentation file, there were not sufficient comments and/or notes embedded in the cells in the Section tabs explaining where information was obtained or what information was used for calculation. - UNT and UNTD did not utilize a "Last Workpaper" tab within their source documentation files. This separate tab could be used to document all amounts and calculations related to the amounts recorded in the Section tabs as well as to embed notes and comments explaining the source of information in a more concise manner. - There was not an "Information/Documentation Needed to Complete the APS 011 Form" section within the source documentation file used by the entity to document the source of information used in completing the APS 011 Form (such as completion and review instructions, State information, and other information), was not formally documented for use in subsequent years. It was noted, 	Moderate	<p>All entities within the UNT System should consider including a section for "Information/Documentation Needed to Complete the APS 011 Form" within their source documentation files to include the following:</p> <ul style="list-style-type: none"> - APS 011 form and instructions (RWK website) - Method of Finance (General Appropriations Act) - Method of Adjustment - Spreadsheets from Repaidsoft General Ledger - APS Check report - Instructions for updating the completed form and performing internal reviews by the entity and the UNT System - Other related and important documentation 	NA	NA	NA	N/A

UNTS Enterprise Audit Report Inventory

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Internal (Co-Sourced)	PwC	Fiscal Year 2016	NA	Governance and Regulatory Compliance	UNT System Benefits Proportionality Internal Audit	UNT Dallas	<p>Through review of the each entity's Benefits Proportionality processes and inspection of corresponding source documentation files, I identified the following:</p> <ul style="list-style-type: none"> - Even though UNT documented procedures, accounting information, screenshots within the source documentation file, there were not sufficient comments and/or notes embedded in the cells in the Section tabs where information was obtained or what information was used for calculation. - UNT and UNTD did not utilize a "Lead Workpaper" tab within their source documentation files. This separate tab could be used to document all amounts and calculations related to the amounts recorded in the Section tabs as well as to embed notes and comments explaining the source of information and more concise manner. - There was not an "Information/Documentation Needed to Complete the APS 011 Form" section within the source documentation files used by each entity of the UNT System. As a result, significant information relevant to completing the APS 011 Form (such as completion and review instructions, State information, and other information), was not documented. 	Moderate	<p>All entities within the UNT System should consider including a section for "Information/Documentation Needed to Complete the APS 011 Form". It would be helpful to include the following:</p> <ul style="list-style-type: none"> - Method of Finance (General Appropriations Act) - Applicable USAS Screens - APS Check report - Instructions for updating the completed form and performing internal reviews by the entity and the UNT System - Key contacts within the State and the UNT System - Other related and important documentation 	NA	NA	NA	
Internal (Co-Sourced)	PwC	Fiscal Year 2016	NA	Governance and Regulatory Compliance	UNT System Benefits Proportionality Internal Audit	UNTFSIC	<p>Through review of the each entity's Benefits Proportionality processes and inspection of corresponding source documentation files, I identified the following:</p> <ul style="list-style-type: none"> - Even though UNT documented procedures, accounting information, and screenshots within the source documentation file, there were not sufficient comments and/or notes embedded in the cells in the Section tabs where information was obtained or what information was used for calculation. - UNT and UNTD did not utilize a "Lead Workpaper" tab within their source documentation files. This separate tab could be used to document all amounts and calculations related to the amounts recorded in the Section tabs as well as to embed notes and comments explaining the source of information and more concise manner. - There was not an "Information/Documentation Needed to Complete the APS 011 Form" section within the source documentation files used by each entity of the UNT System. As a result, significant information relevant to completing the APS 011 Form (such as completion and review instructions, State information, and other information), was not documented. 	Moderate	<p>All entities within the UNT System should consider including a section for "Information/Documentation Needed to Complete the APS 011 Form". It would be helpful to include the following:</p> <ul style="list-style-type: none"> - Method of Finance (General Appropriations Act) - Applicable USAS Screens - APS Check report - Instructions for updating the completed form and performing internal reviews by the entity and the UNT System - Key contacts within the State and the UNT System - Other related and important documentation 	NA	NA	NA	
Internal (Co-Sourced)	PwC	Fiscal Year 2016	NA	Governance and Regulatory Compliance	UNT System Benefits Proportionality Internal Audit	UNT	<p>Through review of procedures related to Benefits Proportionality, I identified that as part of APS 011 Form completion procedures, UNT and UNTD do not obtain an APS Check report from the ACO and compare the report information to the amounts used in the APS 011 Form. As a result, significant information relevant to completing the APS 011 Form (such as completion and review instructions, State information, and other information), was not documented. </p>	Moderate	<p>UNT and UNTD should obtain the APS Check report from the assigned ACO and perform a reconciliation of UNT and UNTD amounts, respectively, to State amounts.</p>	NA	NA	NA	

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Internal (Co-Sourced)	PWC	Fiscal Year 2016	NA	Governance and Regulatory Compliance	UNT System Benefits Proportionality Internal Audit	UNT Dallas	Through review of processes related to Benefits Proportionality, IA identified that as part of APS 011 Form completion procedures, UNT and UNTD were not periodically performing a "mock completion" of the report information to the amounts used in the APS 011 Form. This APS Check report includes the USAS expenses by benefit and appropriation. As such, UNT and UNTD were not performing a reconciliation comparing their recorded amounts to amounts provided by the State in order to ensure accuracy of the overall form.	Moderate	UNT and UNTD should obtain the APS Check report from the assigned ACO and perform a reconciliation of UNT and UNTD amounts, respectively, to state amounts.	NA	NA	NA	N/A
Internal (Co-Sourced)	PWC	Fiscal Year 2016	NA	Governance and Regulatory Compliance	UNT System Benefits Proportionality Internal Audit	UNT Dallas	Through review of processes related to Benefits Proportionality, ISC and UNTD were not periodically performing a "mock completion" of the report information to the amounts used in the APS 011 Form. This APS Check report includes the USAS expenses by benefit and appropriation. As such, UNT and UNTD were not performing a reconciliation comparing their recorded amounts to amounts provided by the State in order to ensure accuracy of the overall form.	Moderate	UNTD and ISC should establish a routine for periodically completing preliminary templates of the APS011 form and formally documenting the preliminary templates in source recommendation files.	NA	NA	NA	N/A
Internal (Co-Sourced)	PWC	Fiscal Year 2016	NA	Governance and Regulatory Compliance	UNT System Benefits Proportionality Internal Audit	UNTBSC	Through review of processes related to Benefits Proportionality, IA identified that as part of APS 011 Form completion procedures, ISC and UNTD were not periodically performing a "mock completion" of the report information to the amounts used in the APS 011 Form. This APS Check report includes the USAS expenses by benefit and appropriation. As such, UNT and UNTD were not performing a reconciliation comparing their recorded amounts to amounts provided by the State in order to ensure accuracy of the overall form.	Moderate	UNTD and ISC should establish a routine for periodically completing preliminary templates of the APS011 form and formally documenting the preliminary templates in source recommendation files.	NA	NA	NA	N/A
External	Accreditation Council for Pharmacy Education	Fiscal Year 2016	NA	Governance and Regulatory Compliance	Review for Pharmacy Education Accreditation	UNTBSC	Accreditation Council for Pharmacy Education	NA	None	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2017	17-021 UNT	Governance and Regulatory Compliance	Residence Hall - Student Safety Practices	UNT	1. AED, CPR, First Aid Training Each residence hall has an AED (Automated External Defibrillator) that Director and residence hall staff have received training by UNT to use the AED, administer CPR (Cardiopulmonary Resuscitation), and basic first aid. Each residence hall has a document called a "Fire Alarm" that provides instructions on what to do in the event of a fire.	High	Recommendation for Gina Vanacore, Director of Housing and Residence Life: 1.1. Provide AED, CPR, and basic first aid training to Hall Directors, Resident Assistants and Desk Clerks.	1. A Language compelling staff to apply first aid or CPR has been removed from staff operating and instruction flip charts. Voluntary first aid / CPR training will be offered to staff each semester beginning fall 2017	Gina M. Vanacore, Director of Housing and Residence Life	12/31/2017	Closed

UNTS Enterprise Audit Report Inventory

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External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTBSC	<p>MET Building The MET Building is a five-story structure classified as a mixed occupancy consisting of existing assembly and existing business. Features of fire protection include a fire sprinkler system, fire alarm system with smoke detection and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.</p>	NA	<p>VIOLATION 2 The penthouse boiler room has two electrical splice boxes with the covers removed. NFPA 1, Fire Code, Chapter 11.1.1.1.D</p>	Covers will be replaced.	NA	1/31/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTBSC	<p>MET Building The MET Building is a five-story structure classified as a mixed occupancy consisting of existing assembly and existing business. Features of fire protection include a fire sprinkler system, fire alarm system with smoke detection and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.</p>	NA	<p>VIOLATION 3 An extension cord is used as a permanent wiring at the 5th floor receptionist desk.</p>	Outlet will be installed and extension cord will be removed.	NA	11/24/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTBSC	<p>MET Building The MET Building is a five-story structure classified as a mixed occupancy consisting of existing assembly and existing business. Features of fire protection include a fire sprinkler system, fire alarm system with smoke detection and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.</p>	NA	<p>VIOLATION 4 Unsecured gas cylinders in Room 421 and in the Penthouse. NFPA 1, Fire Code, Chapter 63.3.1.8.4</p>	Mounting hardware will be installed and cylinders will be secured.	NA	12/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTBSC	<p>MET Building The MET Building is a five-story structure classified as a mixed occupancy consisting of existing assembly and existing business. Features of fire protection include a fire sprinkler system, fire alarm system with smoke detection and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.</p>	NA	<p>VIOLATION 5 Fire alarm control panel is obstructed near Room 420. NFPA 1, Fire Code, Chapters 4.3.1.1, 3.4.4.1 and 14.10.2</p>	Equipment will be moved.	NA	12/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTBSC	<p>MET Building The MET Building is a five-story structure classified as a mixed occupancy consisting of existing assembly and existing business. Features of fire protection include a fire sprinkler system, fire alarm system with smoke detection and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.</p>	NA	<p>VIOLATION 6 There are missing ceiling tiles in room IE4 auditorium support room. NFPA 1, Fire Code, Chapter 13.1.7.4.3.9</p>	Ceiling tiles will be replaced.	NA	12/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTBSC	<p>MET Building The MET Building is a five-story structure classified as a mixed occupancy consisting of existing assembly and existing business. Features of fire protection include a fire sprinkler system, fire alarm system with smoke detection and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.</p>	NA	<p>VIOLATION 7 Room 432 has a sprinkler head missing the escutcheon ring. NFPA 1, Fire Code, Chapter 4.5.3.1</p>	Parts will be replaced.	NA	12/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTBSC	<p>MET Building The MET Building is a five-story structure classified as a mixed occupancy consisting of existing assembly and existing business. Features of fire protection include a fire sprinkler system, fire alarm system with smoke detection and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.</p>	NA	<p>VIOLATION 8 The fire department connection is obstructed by vegetation. NFPA 1, Fire Code, Chapter 7.3.1.3, 7.3.1.4, and 7.3.1.4.1</p>	A clear path will be created.	NA	12/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTBSC	<p>MET Building The MET Building is a five-story structure classified as a mixed occupancy consisting of existing assembly and existing business. Features of fire protection include a fire sprinkler system, fire alarm system with smoke detection and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.</p>	NA	<p>VIOLATION 9 The copy machine located outside cabool WSTN W3N obstructs the egress corridor to less than three feet.</p>	The copy machine will be relocated.	NA	12/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTBSC	<p>MET Building The MET Building is a five-story structure classified as a mixed occupancy consisting of existing assembly and existing business. Features of fire protection include a fire sprinkler system, fire alarm system with smoke detection and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.</p>	NA	<p>VIOLATION 10 The following rooms have unsealed penetrations: Room 301 Room 302 Room 303 Room 304 Room 305 Room 306 Room 307 Room 308 Room 309 Room 310 Room 311 Room 312 Room 313 Room 314 Room 315 Room 316 Room 317 Room 318 Room 319 Room 320 Room 321 Room 322 Room 323 Room 324 Room 325 Room 326 Room 327 Room 328 Room 329 Room 330 Room 331 Room 332 Room 333 Room 334 Room 335 Room 336 Room 337 Room 338 Room 339 Room 340 Room 341 Room 342 Room 343 Room 344 Room 345 Room 346 Room 347 Room 348 Room 349 Room 350 Room 351 Room 352 Room 353 Room 354 Room 355 Room 356 Room 357 Room 358 Room 359 Room 360 Room 361 Room 362 Room 363 Room 364 Room 365 Room 366 Room 367 Room 368 Room 369 Room 370 Room 371 Room 372 Room 373 Room 374 Room 375 Room 376 Room 377 Room 378 Room 379 Room 380 Room 381 Room 382 Room 383 Room 384 Room 385 Room 386 Room 387 Room 388 Room 389 Room 390 Room 391 Room 392 Room 393 Room 394 Room 395 Room 396 Room 397 Room 398 Room 399 Room 400 Room 401 Room 402 Room 403 Room 404 Room 405 Room 406 Room 407 Room 408 Room 409 Room 410 Room 411 Room 412 Room 413 Room 414 Room 415 Room 416 Room 417 Room 418 Room 419 Room 420 Room 421 Room 422 Room 423 Room 424 Room 425 Room 426 Room 427 Room 428 Room 429 Room 430 Room 431 Room 432 Room 433 Room 434 Room 435 Room 436 Room 437 Room 438 Room 439 Room 440 Room 441 Room 442 Room 443 Room 444 Room 445 Room 446 Room 447 Room 448 Room 449 Room 450 Room 451 Room 452 Room 453 Room 454 Room 455 Room 456 Room 457 Room 458 Room 459 Room 460 Room 461 Room 462 Room 463 Room 464 Room 465 Room 466 Room 467 Room 468 Room 469 Room 470 Room 471 Room 472 Room 473 Room 474 Room 475 Room 476 Room 477 Room 478 Room 479 Room 480 Room 481 Room 482 Room 483 Room 484 Room 485 Room 486 Room 487 Room 488 Room 489 Room 490 Room 491 Room 492 Room 493 Room 494 Room 495 Room 496 Room 497 Room 498 Room 499 Room 500 Room 501 Room 502 Room 503 Room 504 Room 505 Room 506 Room 507 Room 508 Room 509 Room 510 Room 511 Room 512 Room 513 Room 514 Room 515 Room 516 Room 517 Room 518 Room 519 Room 520 Room 521 Room 522 Room 523 Room 524 Room 525 Room 526 Room 527 Room 528 Room 529 Room 530 Room 531 Room 532 Room 533 Room 534 Room 535 Room 536 Room 537 Room 538 Room 539 Room 540 Room 541 Room 542 Room 543 Room 544 Room 545 Room 546 Room 547 Room 548 Room 549 Room 550 Room 551 Room 552 Room 553 Room 554 Room 555 Room 556 Room 557 Room 558 Room 559 Room 560 Room 561 Room 562 Room 563 Room 564 Room 565 Room 566 Room 567 Room 568 Room 569 Room 570 Room 571 Room 572 Room 573 Room 574 Room 575 Room 576 Room 577 Room 578 Room 579 Room 580 Room 581 Room 582 Room 583 Room 584 Room 585 Room 586 Room 587 Room 588 Room 589 Room 590 Room 591 Room 592 Room 593 Room 594 Room 595 Room 596 Room 597 Room 598 Room 599 Room 600 Room 601 Room 602 Room 603 Room 604 Room 605 Room 606 Room 607 Room 608 Room 609 Room 610 Room 611 Room 612 Room 613 Room 614 Room 615 Room 616 Room 617 Room 618 Room 619 Room 620 Room 621 Room 622 Room 623 Room 624 Room 625 Room 626 Room 627 Room 628 Room 629 Room 630 Room 631 Room 632 Room 633 Room 634 Room 635 Room 636 Room 637 Room 638 Room 639 Room 640 Room 641 Room 642 Room 643 Room 644 Room 645 Room 646 Room 647 Room 648 Room 649 Room 650 Room 651 Room 652 Room 653 Room 654 Room 655 Room 656 Room 657 Room 658 Room 659 Room 660 Room 661 Room 662 Room 663 Room 664 Room 665 Room 666 Room 667 Room 668 Room 669 Room 670 Room 671 Room 672 Room 673 Room 674 Room 675 Room 676 Room 677 Room 678 Room 679 Room 680 Room 681 Room 682 Room 683 Room 684 Room 685 Room 686 Room 687 Room 688 Room 689 Room 690 Room 691 Room 692 Room 693 Room 694 Room 695 Room 696 Room 697 Room 698 Room 699 Room 700 Room 701 Room 702 Room 703 Room 704 Room 705 Room 706 Room 707 Room 708 Room 709 Room 710 Room 711 Room 712 Room 713 Room 714 Room 715 Room 716 Room 717 Room 718 Room 719 Room 720 Room 721 Room 722 Room 723 Room 724 Room 725 Room 726 Room 727 Room 728 Room 729 Room 730 Room 731 Room 732 Room 733 Room 734 Room 735 Room 736 Room 737 Room 738 Room 739 Room 740 Room 741 Room 742 Room 743 Room 744 Room 745 Room 746 Room 747 Room 748 Room 749 Room 750 Room 751 Room 752 Room 753 Room 754 Room 755 Room 756 Room 757 Room 758 Room 759 Room 760 Room 761 Room 762 Room 763 Room 764 Room 765 Room 766 Room 767 Room 768 Room 769 Room 770 Room 771 Room 772 Room 773 Room 774 Room 775 Room 776 Room 777 Room 778 Room 779 Room 780 Room 781 Room 782 Room 783 Room 784 Room 785 Room 786 Room 787 Room 788 Room 789 Room 790 Room 791 Room 792 Room 793 Room 794 Room 795 Room 796 Room 797 Room 798 Room 799 Room 800 Room 801 Room 802 Room 803 Room 804 Room 805 Room 806 Room 807 Room 808 Room 809 Room 810 Room 811 Room 812 Room 813 Room 814 Room 815 Room 816 Room 817 Room 818 Room 819 Room 820 Room 821 Room 822 Room 823 Room 824 Room 825 Room 826 Room 827 Room 828 Room 829 Room 830 Room 831 Room 832 Room 833 Room 834 Room 835 Room 836 Room 837 Room 838 Room 839 Room 840 Room 841 Room 842 Room 843 Room 844 Room 845 Room 846 Room 847 Room 848 Room 849 Room 850 Room 851 Room 852 Room 853 Room 854 Room 855 Room 856 Room 857 Room 858 Room 859 Room 860 Room 861 Room 862 Room 863 Room 864 Room 865 Room 866 Room 867 Room 868 Room 869 Room 870 Room 871 Room 872 Room 873 Room 874 Room 875 Room 876 Room 877 Room 878 Room 879 Room 880 Room 881 Room 882 Room 883 Room 884 Room 885 Room 886 Room 887 Room 888 Room 889 Room 890 Room 891 Room 892 Room 893 Room 894 Room 895 Room 896 Room 897 Room 898 Room 899 Room 900 Room 901 Room 902 Room 903 Room 904 Room 905 Room 906 Room 907 Room 908 Room 909 Room 910 Room 911 Room 912 Room 913 Room 914 Room 915 Room 916 Room 917 Room 918 Room 919 Room 920 Room 921 Room 922 Room 923 Room 924 Room 925 Room 926 Room 927 Room 928 Room 929 Room 930 Room 931 Room 932 Room 933 Room 934 Room 935 Room 936 Room 937 Room 938 Room 939 Room 940 Room 941 Room 942 Room 943 Room 944 Room 945 Room 946 Room 947 Room 948 Room 949 Room 950 Room 951 Room 952 Room 953 Room 954 Room 955 Room 956 Room 957 Room 958 Room 959 Room 960 Room 961 Room 962 Room 963 Room 964 Room 965 Room 966 Room 967 Room 968 Room 969 Room 970 Room 971 Room 972 Room 973 Room 974 Room 975 Room 976 Room 977 Room 978 Room 979 Room 980 Room 981 Room 982 Room 983 Room 984 Room 985 Room 986 Room 987 Room 988 Room 989 Room 990 Room 991 Room 992 Room 993 Room 994 Room 995 Room 996 Room 997 Room 998 Room 999 Room 1000</p>	Penetrations will be properly sealed.	NA	11/24/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Reviewed	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTBSC	MET Building is a five-story structure classified as a mixed occupancy consisting of existing assembly and existing business. Features of fire protection include a fire sprinkler system, fire alarm system with smoke detection and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 11 The fire door emergency shut pull station has a protective cover marked fire alarm. NFPA 1, Fire Code, Chapter 4.5.8.1	Cover will be replaced.	NA	12/2/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTBSC	MET Building is a five-story structure with a basement classified as a mixed occupancy consisting of existing assembly and existing business. Features of fire protection include a fire sprinkler system, fire alarm system with smoke detection and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 12 There are unsecured gas cylinders in the following rooms: 3124 3130 NFPA 1, Fire Code, Chapter 63.3.1.8.4	We need to consult with our local fire authority for possible solutions. Once consultation takes place we will be able to provide a timeline.	NA	1/13/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTBSC	RES Building is a five-story structure with a basement classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator.	NA	VIOLATION 1 There are unsecured gas cylinders in the following rooms: 3124 3130 NFPA 1, Fire Code, Chapter 63.3.1.8.4	Mounting hardware will be installed and cylinders will be secured.	NA	12/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTBSC	RES Building is a five-story structure with a basement classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator.	NA	VIOLATION 3 The exit hallway is obstructed in the following locations: 1st floor cross hallway NFPA 1, Fire Code, Chapters 4.4.3.1.1 and 14.4.1	Equipment will be relocated.	NA	12/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTBSC	RES Building is a five-story structure with a basement classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator.	NA	VIOLATION 3 There are missing ceiling tiles in the following rooms: 406 240 NFPA 1, Fire Code, Chapter 13.7.4.3.9	Ceiling tiles will be replaced.	NA	12/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTBSC	RES Building is a five-story structure with a basement classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator.	NA	VIOLATION 4 There are unsealed penetrations in the following rooms: 4M1 240 2M1 1M3 NFPA 1, Fire Code, Chapter 12.7.5.1	Penetrations will be properly sealed.	NA	11/06/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTBSC	RES Building is a five-story structure with a basement classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator.	NA	VIOLATION 5 The fire hood is being used for storage in the following rooms: 310 240 NFPA 1, Fire Code, Chapter 4.5.8.1	Items will be removed and stored properly.	NA	12/29/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTBSC	RES Building is a five-story structure with a basement classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator.	NA	VIOLATION 6 The chemical fume hoods throughout the building had current inspection labels. The last inspection was dated 3/20/15 (US Votolab). NFPA 1, Fire Code, Chapter 4.5.8.1	All hoods will be inspected and labeled properly.	NA	10/16/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	RES Building The RES building is a five-story structure with a basement classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator.	NA	VIOLATION 7 There are containers of hazardous chemicals improperly stored in the following rooms: -118 NFA 1.1 Fire Code, Chapter 34.4.1.1	Chemicals will be stored properly.	NA	12/9/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	RES Building The RES building is a five-story structure with a basement classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator.	NA	VIOLATION 8 The fire alarm panel was not tagged on 6/24/16 and UNTR Staff state the system is current and operational, but no white tag is present. NFA 1.1 Fire Code, Chapter 11.1.7.6 and 11.1.7.5	This violation is in the CBI building, not RES. See the RES section for corrective action.	NA	12/26/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	RES Building The RES building is a five-story structure with a basement classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator.	NA	VIOLATION 9 There are unused openings in the electrical panels in the following rooms: -2M1 -126 -E01 -OIA Sect 2 VIOLATION 10 The fire alarm panel was not tagged on 6/24/16 and UNTR Staff state the system is current and operational, but no white tag is present. NFA 1.1 Fire Code, Chapter 4.5.8.1	All openings in panels will have covers. Correct tags will be attached.	NA	1/31/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	RES Building The RES building is a five-story structure with a basement classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator.	NA	VIOLATION 11 The fire alarm panel was not tagged on 6/24/16 and UNTR Staff state the system is current and operational, but no white tag is present. NFA 1.1 Fire Code, Chapter 4.5.8.1	Correct tags will be attached.	NA	12/2/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	RES Building The RES building is a five-story structure with a basement classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator.	NA	VIOLATION 11 The fire alarm panel was not tagged on 6/24/16 and UNTR Staff state the system is current and operational, but no white tag is present. NFA 1.1 Fire Code, Chapter 4.5.8.1	Facilities will be replaced.	NA	1/31/2017	Closed
Internal (Co-Sourced)	PWC	Fiscal Year 2017	17-303 UNT	Governance and Regulatory Compliance	Student Managed Investment Fund (SMIF)	UNT	1. Broker cost and services evaluation A broker services evaluation was not performed since appointment of the investment broker as required by the MOU. The Fidelity broker services have not been re-evaluated since establishing the account in 2008 as required by Section 92 of the MOU. The MOU	Low	1.1. The SMIF should implement a documented Policy & process for periodically evaluating the cost and benefits of the investment broker.	1a. Because of the small balance in the fund and the fact that the fund is currently with a leading provider, the probability of acquiring better service for less cost seems unlikely. Regardless, the SMIF will implement and document	SMG Board of Directors	Exp. Impl. Date: 11/31/2017 Revised Impl. Date: 03/31/2018	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	RES Building The RES building is a five-story structure with a basement classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator.	NA	VIOLATION 13 Surge protectors are being used in the following rooms: -406 -448 NFA 1.1 Fire Code, Chapter 10.1.7	Adapters will be removed and equipment properly connected.	NA	12/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	RES Building The RES building is a five-story structure with a basement classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator.	NA	VIOLATION 14 Appliances are plugged into surge protectors in the following rooms: -20H -20J -20K NFA 1.1 Fire Code, Chapter 10.1.7	Outlets will be installed and appliances correctly connected.	NA	1/22/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	RES Building The RES building is a five-story structure with a basement classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator.	NA	VIOLATION 15 There is exposed wiring in the following rooms: -2M1 -2M2 -E01 NFA 1.1 Fire Code, Chapter 10.1.7.2 and NFA 70. National Electrical Code, Articles 300.3(A) and 300.4	Wiring will be properly capped and protected.	NA	1/31/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTHSC	RES Building The RES building is a five-story structure with a basement classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator.	NA	VIOLATION 16 The exit signs are not illuminated in the basement area. NFPA 1, Fire Code, Chapter 4.5.8.1.	Signs will either be replaced or repaired.	NA	1/31/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTHSC	RES Building The RES building is a five-story structure with a basement classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator.	NA	VIOLATION 17 The fire speaker riser lacks appropriate valve signage. NFPA 1, Fire Code, Chapter 13.3.3.2 and NFPA 25, Standard for the Inspection, Testing and Maintenance of Water Based Fire Protection Systems, Table 5.1.1.2	Signage will be installed.	NA	1/31/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTHSC	RES Building The RES building is a five-story structure with a basement classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator.	NA	VIOLATION 18 The basement lacks audio visual occupant notification appliances for the fire alarm. NFPA 1, Fire Code, Chapter 13.7.1.4.10.1	Proper equipment will be installed in the basement.	NA	4/21/2017 Revised 01/01/2018	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTHSC	RES Building The RES building is a five-story structure with a basement classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator.	NA	VIOLATION 19 Storage is piled within 18 inches of the sprinkler head in hall 240. NFPA 1, Fire Code, Chapter 10.19.3.2	Items will be removed and stored properly.	NA	11/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTHSC	RES Building The RES building is a five-story structure with a basement classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator.	NA	VIOLATION 20 There is wiring hanging from the fire sprinkler system piping in room 456. NFPA 1, Fire Code, Chapter 13.3.3.2 and NFPA 25, Standard for the Inspection, Testing and Maintenance of Water Based Fire Protection Systems, Chapter 5.2.2.2	Wiring will be removed.	NA	1/31/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTHSC	RES Building The RES building is a five-story structure with a basement classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator.	NA	VIOLATION 31 Non-UL listed electrical outlets are suspended from the ceiling in room 456. NFPA 1, Fire Code, Chapter 11.1.3; and NFPA 70, National Electrical Code 300.3	Proper outlets will be installed and Non-UL outlets will be removed.	NA	1/31/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTHSC	RES Building The RES building is a five-story structure with a basement classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator.	NA	VIOLATION 22 Surge protectors are daisy-chained in room 406. NFPA 1, Fire Code, Chapter 11.1.6.2	Surge protectors will only be plugged into wall outlets.	NA	11/23/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-417 UNT	Governance and Regulatory Compliance	LUPD Business Process Audit	UNT	1. Commingled funds When the new chart of accounts went into implementation, Lifelong Learning and Professional Development (LUPD) donations, University of North Texas Institute-Association (UNI) fees, and camp and conference fees were commingled with other LUPD funds. The chart string totaling approximately \$520,000 as of August 31, 2017, upon approval of the Other Lifelong Learning Institute (OLI) program. www.unt.edu/OLI/untart.html were also commingled.	High	Recommendation for Lifelong Learning and Professional Development (LUPD): 1.1.b. Reconcile all LUPD funds in the account.	Dr. G. Our office is still working with the budget and financial reporting offices to reconcile and verify that all funds (expenses and revenue) are in the correct and appropriate chart strings as it pertains to OLIU.	Stephanie Banks, Director of Lifelong Learning and Professional Development	Orig. 2/28/2018 Rev. 05/15/2018	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTHSC	RES Building The RES building is a five-story structure with a basement classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator.	NA	VIOLATION 24 The door leading from the chiller room to the main part of the building has a key-operated lock. There is no secondary exit from the chiller room. NFPA 1, Fire Code, Chapter 14.5.2.1 and 14.5.2.3	We need clarity on this location, as the chiller room seems to have adequate exits.	NA	NA	Closed

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	<p>CBI Building The CBI Building is a six-story structure with a penthouse classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and an emergency generator.</p>	NA	<p>VIOLATION 1 Storage is piled within 18 inches of sprinkler head in the following rooms: -Room 250 -Room 251 -Room 440 -Room 460 -Room 500 -Room 501 -Room 551</p>	All storage will be relocated as needed.	NA	12/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	<p>CBI Building The CBI Building is a six-story structure with a penthouse classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and an emergency generator.</p>	NA	<p>VIOLATION 2 There are unsealed penetrations in the following locations: -Room 2ME2 -Room 3ME1 -Room 4E1 -Room 4E2 -Room EE1 -5MEC north chase :IT rooms all six floors NFPA 1, Fire Code, Chapter 12.7.5.1</p>	All penetrations will be properly sealed.	NA	1/31/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	<p>CBI Building The CBI Building is a six-story structure with a penthouse classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs, and an emergency generator.</p>	NA	<p>VIOLATION 3 The chemical fume hood is being used for storage in the following rooms: -323 -440 -460 -500 -504 -504 -551 -552 Fire Code, Chapter 4.5.6.1</p>	Materials will be removed from hoods and stored properly.	NA	12/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	<p>CBI Building The CBI Building is a six-story structure with a penthouse classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs, and an emergency generator.</p>	NA	<p>VIOLATION 4 The chemical fume hoods throughout the building lack current inspection labels. The last inspection was May 2015. [51 Violation] NFPA 1, Fire Code, Chapter 4.5.6.1</p>	All fume hoods will be inspected and properly labeled.	NA	10/16/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	<p>CBI Building The CBI Building is a six-story structure with a penthouse classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs, and an emergency generator.</p>	NA	<p>VIOLATION 5 There are 5 gallon cans of flammable liquid being stored on the lab floor in Room 511, which should be stored in flammable liquid cabinet. NFPA 1, Fire Code, Chapter 34.4.4.1</p>	Flammable materials will be stored in flammable cabinets.	NA	12/29/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	<p>CBI Building The CBI Building is a six-story structure with a penthouse classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs, and an emergency generator.</p>	NA	<p>VIOLATION 6 An extension cord is used as permanent wiring and is running through the ceiling. NFPA 1, Fire Code, Chapters 11.1.7.6 and 11.1.7.5</p>	Extension cord will be removed.	NA	12/29/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	<p>CBI Building The CBI Building is a six-story structure with a penthouse classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs, and an emergency generator.</p>	NA	<p>VIOLATION 7 There are unsealed openings in electrical panel 31B in the third floor pipe chase. NFPA 1, Fire Code, Chapter 11.1.2, NFPA 70, National Electrical Code, Article 408.7</p>	All openings in panels will have covers.	NA	1/31/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	<p>CBI Building The CBI Building is a six-story structure with a penthouse classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs, and an emergency generator.</p>	NA	<p>VIOLATION 8 Stairwell doors will not close and latch due to excessive stairwell pressurization in the following rooms: -440 -351 -352 -251 NFPA 1, Fire Code, Chapter 4.5.6.1</p>	Air balancing will be adjusted to correct issue, or hardware will be installed if necessary.	NA	1/31/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Reviewed	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNITSC	CBI Building is a six-story structure with a penthouse classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and an emergency generator.	NA	VIOLATION 9 Two large wood crates block corridor egress by room 355. NFPA 1, Fire Code, Chapter 14.4.3.1.1 and 14.4.1	All cylinders will be secured.	NA	12/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNITSC	CBI Building is a six-story structure with a penthouse classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs, and an emergency generator.	NA	VIOLATION 10 Two large wood crates block corridor egress by room 355. NFPA 1, Fire Code, Chapter 14.4.3.1.1 and 14.4.1	Equipment will be removed.	NA	12/23/2016 Revised 04/10/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNITSC	CBI Building is a six-story structure with a penthouse classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs, and an emergency generator.	NA	VIOLATION 11 Stairwell two first floor has unapproved storage under the stairs. NFPA 1, Fire Code, Chapter 14.4.3.1.1	Storage will be removed.	NA	12/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNITSC	Event Building is an eight-story structure with a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs, and an emergency generator.	NA	VIOLATION 1 There are missing ceiling tiles in the following locations: -4th floor elevator -2nd floor cross hall NFPA 1, Fire Code, Chapter 13.7.4.3.9	Ceiling tiles will be replaced.	NA	12/23/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-417 UNT	Governance and Regulatory Compliance	LUPD Business Process Audit	UNT	1. Commingled funds When the new chart of accounts went into implementation, Lifelong Learning and Professional Development (LUPD) locations, University of North Texas Learning Association (UNTLA) fees, and camp and program fees were commingled with the other LUPD locations. Upon approval of the Other Lifelong Learning Institute (OLI) program in UNT, \$100,000 of OLI grant funds were also commingled in the Event Building.	High	Revisions dates for Stephenie Banks, Director of Lifelong Learning and Professional Development (LUPD); 1.1.4. Ensure all LUPD activities are moved into separate chart strings to be tracked and reported individually.	Mr. Cray and conference will be managed by "One Stop Shop" LUPD office. All entities of LUPD, CERT, JUNTRA & OLI, all have their own dedicated funds and funds, with plans to assign purpose codes for better financial reporting/tracking for all chartstrings.	Stephenie Banks, Director of Lifelong Learning and Professional Development	Orig. 2/26/2018 Rev. 05/15/2018	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNITSC	Event Building is an eight-story structure with a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 3 Room B3 have self-closing mechanisms that do not function properly. NFPA 1, Fire Code, Chapter 12.4.6.1.9.1	Hardware will be repaired or replaced.	NA	1/31/2017 Revised 03/02/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNITSC	Event Building is an eight-story structure with a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 4 There are missing ceiling tiles in the following locations: NFPA 1, Fire Code, Chapter 14.6.3	Materials will be removed and stored properly.	NA	12/23/2016 Revised 04/20/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNITSC	Event Building is an eight-story structure with a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 5 There are unused openings in the electrical panels in the existing room. NFPA 70, National Electrical Code, Article 408.7	All openings in panels will have covers.	NA	1/31/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTBSC	The Evert Building is an eight-story structure with a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire extinguisher system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 6 There are unsealed penetrations in the following rooms: -5A3 -6A3 -6B3 -7A3 -7B3 -2E1 NFPA 1, Fire Code, Chapter 12.7.5.1	All penetrations will be properly sealed.	NA	1/17/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTBSC	The Evert Building is an eight-story structure with a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire extinguisher system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 7 Storages piled within 18 inches of the sprinkler head in room 662. NFPA 1, Fire Code, Chapter 10.19.3.2	Storage will be removed.	NA	12/21/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTBSC	The Evert Building is an eight-story structure with a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire extinguisher system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 8 The chemical fume hoods are being used for storage in the following rooms: -632 -546 -544 -544 NFPA 1, Fire Code, Chapter 4.5.8.1 and NFPA 45, Standard on Fire Protection for Laboratories Using Chemicals, Chapter 9.2.3.7	All fume hoods will be inspected and labeled. NFPA 1, Fire Code, Chapter 4.5.8.1	NA	10/17/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTBSC	The Evert Building is an eight-story structure with a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire extinguisher system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 9 The chemical fume hoods are being used for storage in the following rooms: -632 -546 -544 -544 NFPA 1, Fire Code, Chapter 4.5.8.1 and NFPA 45, Standard on Fire Protection for Laboratories Using Chemicals, Chapter 9.2.3.7	Chemicals will be removed and stored properly.	NA	12/21/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTBSC	The Evert Building is an eight-story structure with a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire extinguisher system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 10 The cylinders of hazardous chemicals are improperly stored in the following rooms: -546 -544 -474 NFPA 1, Fire Code, Chapter 34.4.1.1	Chemicals will be stored properly.	NA	12/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTBSC	The Evert Building is an eight-story structure with a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire extinguisher system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 11 There are unsecured gas cylinders in room 554. NFPA 1, Fire Code, Chapter 63.3.1.8.4	All cylinders will be secured properly.	NA	12/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTBSC	The Evert Building is an eight-story structure with a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire extinguisher system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 12 Electrical junction boxes in following rooms are missing the protective covers: -3A3 -3A3 -4A3 -474 -8M1 NFPA 1, Fire Code, Chapter 11.1.1.10	Protective covers will be replaced	NA	1/17/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Review Based	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-414 UNT	Governance and Regulatory Compliance	Classroom Support Services	UNT	1. Computer Use policy needs clarification. UNT 14.003 Computer Use Policy section B states "The University will not limit access to any information due to its content as long as it meets the standard of legality." Such activity is further defined in section I.A, which states: "Criminal and illegal use may involve, but is not limited to, unauthorized access, intentional corruption or misuse of computer resources, theft, obscenity and child pornography."	High	Recommendations for Associate Vice President, Information Services & Accreditation: 1.1.a. The Associate Vice President, Information Services & Accreditation, under authority of the Vice President for Finance and Administration, should convene a series of discussions with representatives from the Office of Information Services and System IT professionals and the UNT System Office of General Counsel to identify evolutions in campus missions, operations and environments and evaluate where and how the current computer use policy may be outdated or in need of development over the next reasonable number of years and their possible impact.	1.a. We agree. Dr. Clark will convene the series of discussions with representatives from the Office of Information Services and System IT professionals and the UNT System Office of General Counsel to identify evolutions in campus missions, operations and environments and evaluate where and how the current computer use policy may be outdated or in need of development over the next reasonable number of years and their possible impact.	Dr. Allen Clark, Associate Vice President for Information Services and Transportation, UNT	12/31/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2017	17-414 UNT	Governance and Regulatory Compliance	Classroom Support Services	UNT	1. Computer Use policy needs clarification. UNT 14.003 Computer Use Policy section B states "The University will not limit access to any information due to its content as long as it meets the standard of legality." Such activity is further defined in section I.A, which states: "Criminal and illegal use may involve, but is not limited to, unauthorized access, intentional corruption or misuse of computer resources, theft, obscenity and child pornography."	High	Recommendations for Associate Vice President, Information Services & Accreditation: 1.1.b. Assign responsibility for amending UNT 14.003 Computer Use policy per the committee's decisions.	1.b. We agree. Based on the committee's findings, the Computer Use Policy will be assigned for an update by the appropriate individual.	Dr. Allen Clark, Associate Vice President for Information Services and Transportation, UNT	12/31/2018	Open
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	Library is a five-story structure with a basement classified as a mixed occupancy consisting of seating assembly and existing business. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs, emergency lighting and a generator.	NA	VIOLATION 1 Room 126 computer area has extension cords used as a makeshift power strip. The extension cords are not labeled and the blue inspection tag is not properly filled out. NFPA 1, Fire Code, Chapter 4.6.12.1, and The 28 Texas Department of Insurance Chapter 3433B Fire Alarm and Signaling Code, Fire Alarm rules, Chapters 34.622 and 34.622	Labels and tags will be installed.	NA	12/2/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	Library is a five-story structure with a basement classified as a mixed occupancy consisting of seating assembly and existing business. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs, emergency lighting and a generator.	NA	VIOLATION 2 Room 126 computer area has extension cords used as a makeshift power strip. The extension cords are not labeled and the blue inspection tag is not properly filled out. NFPA 1, Fire Code, Chapter 11.1.7.6	Electrical outlets or appropriate wiring will be installed.	NA	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	Library is a five-story structure with a basement classified as a mixed occupancy consisting of seating assembly and existing business. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs, emergency lighting and a generator.	NA	VIOLATION 3 Room 126A is missing the cover plate for the light switch. NFPA 1, Fire Code, Chapter 11.1.10	Cover plate will be replaced.	NA	1/31/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	Library is a five-story structure with a basement classified as a mixed occupancy consisting of seating assembly and existing business. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs, emergency lighting and a generator.	NA	VIOLATION 4 Room 126A is missing penetrations in the following rooms: -3ME2 -3ME1 NFPA 1, Fire Code, Chapter 12.7.5.1	All penetrations will be properly sealed.	NA	1/27/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	Library is a five-story structure with a basement classified as a mixed occupancy consisting of seating assembly and existing business. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs, emergency lighting and a generator.	NA	VIOLATION 5 A sprinkler head in room 134A is missing the escutcheon. NFPA 1, Fire Code, Chapter 4.5.8.1	Sprinkler head will be repaired.	NA	12/2/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	St. Emilion Restaurant The St. Emilion Restaurant is a two-story structure classified as an existing assembly occupancy. Features of fire protection include a UL300 wet chemical fire suppression system, single-station smoke detectors and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 1 An electric deep fryer unit is not contained within the hood and is not protected by the hood fire suppression system. Additionally, the unit does not shut down upon activation of the hood fire suppression system. (NPA 1, Fire Code, Chapter 50.1.1, 50.4.3.2, 50.4.4.3, 50.4.6.1; and NFPA 96 Standard for Ventilation Control and Fire Protection of Commercial Cooking Equipment, Chapter 10.1.2)	Equipment will be removed.	NA	11/1/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	St. Emilion Restaurant The St. Emilion Restaurant is a two-story structure classified as an existing assembly occupancy. Features of fire protection include a UL300 wet chemical fire suppression system, single-station smoke detectors and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 2 The dining room electrical outlet is missing the protective cover plate. (NPA 1, Fire Code, Chapter 11.1.1.D)	The electrical plate will be replaced.	NA	1/31/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	St. Emilion Restaurant The St. Emilion Restaurant is a two-story structure classified as an existing assembly occupancy. Features of fire protection include a UL300 wet chemical fire suppression system, single-station smoke detectors and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 3 Extension cords are used as a substitute for permanent wiring in the kitchen. (NPA 1, Fire Code, Chapter 11.1.7.6)	Extension cords will be removed.	NA	1/31/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	Blue House 800 Clifton Street The Blue House is a one-story structure classified as an existing business occupancy. Features of fire protection include single-station, battery operated smoke detectors and portable fire extinguishers. Illuminated exit signs are provided.	NA	VIOLATION 1 There are interconnected power strips in room 101. (NPA 1, Fire Code, Chapter 11.1.6.2)	Power strips will only be plugged into wall outlets.	NA	12/31/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	Blue House 800 Clifton Street The Blue House is a one-story structure classified as an existing business occupancy. Features of fire protection include single-station, battery operated smoke detectors and portable fire extinguishers. Illuminated exit signs are provided.	NA	VIOLATION 2 The side exit door will not open, it appears to be painted shut. The forces required to open the door by manual means shall not exceed 15 lbs. The door shall be opened to the minimum required width. These forces shall be applied at the latch stile. (NPA 1, Fire Code, Chapter 14.5.1.5.1)	Door will be repaired to open easily.	NA	1/31/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	Blue House 800 Clifton Street The Blue House is a one-story structure classified as an existing business occupancy. Features of fire protection include single-station, battery operated smoke detectors and portable fire extinguishers. Illuminated exit signs are provided.	NA	VIOLATION 3 The garage located under the house is used for storage of combustible materials and lacks a fire rated separation from the main structure. The garage is separated from the main structure by exposed wood flooring. (NPA 1, Fire Code, Chapter 10.19.6; and NFPA 101, Life Safety Code, Chapter 8.7.1.1)	Combustible materials will be removed.	NA	3/1/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	Former Daycare Building (3620 Modlin) The Former Daycare Building is a single-story structure currently classified as an existing business occupancy. Features of fire protection include a fire alarm and detection system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting. (Currently the building is temporarily being used as an office and may be a daycare again in the future.)	NA	VIOLATION 1 The kitchen UL300 suppression system lacks a current inspection tag. The last inspection was conducted in February 2015. (NPA 1, Fire Code, Chapter 4.5.E1)	Kitchen suppression system will either be inspected properly or kitchen will be removed.	NA	4/1/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	Former Daycare Building (3620 Modlin) The Former Daycare Building is a single-story structure currently classified as an existing business occupancy. Features of fire protection include a fire alarm and detection system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting. (Currently the building is temporarily being used as an office and may be a daycare again in the future.)	NA	VIOLATION 2 The class K portable fire extinguisher is missing from its mounting location. (NPA 1, Fire Code, Chapter 4.5.E1)	Fire extinguisher will be mounted properly.	NA	3/31/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNITWSC	Former - Daycare Building (3620 Modlin Street) The former daycare building is a single-story structure currently classified as an existing business occupancy. Features of fire protection include a fire alarm and detection system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting. (Currently the building is temporarily being used as an office and may be a daycare again in the future.)	NA	VIOLATION 3 In room 3 the center cubical has interconnected power of fips. NFPA 1.1 Fire Code, Chapter 11.1.6.2	Power fips will only be plugged into wall outlets.	NA	11/2/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNITWSC	Former - Daycare Building (3620 Modlin Street) The former daycare building is a single-story structure currently classified as an existing business occupancy. Features of fire protection include a fire alarm and detection system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting. (Currently the building is temporarily being used as an office and may be a daycare again in the future.)	NA	VIOLATION 4 Photocopy machines in the following locations are blocked by fire alarm pull stations: -Room 2 (Room 2 Corrected at the time of the inspection) -Room 5 NFPA 1.1 Fire Code, Chapter 13.7.1.4.8.7	Copy machines will be relocated.	NA	12/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNITWSC	The Sleep Lab (3632 Modlin Street) The Sleep Lab is a two-story structure classified as an existing business occupancy. Features of fire protection include battery operated smoke detectors and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 1 In room 106 an electrical outlet is missing the protective cover plate. NFPA 1.1 Fire Code, Chapter 11.1.1.10	Outlet cover plate will be replaced.	NA	1/31/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNITWSC	The Sleep Lab (3632 Modlin Street) The Sleep Lab is a two-story structure classified as an existing business occupancy. Features of fire protection include battery operated smoke detectors and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 2 The fire doors separating the egress stairwell exit enclosure from the first floor are propped in the open position. NFPA 1.1 Fire Code, Chapter 11.6.3.2	Doors will be closed and occupant trained to keep doors closed.	NA	12/9/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNITWSC	The Police Services and Parking Garage (1600 Mattison Ave) The building is classified as a four-story open parking structure and a single-story police building. The building is classified as a mixed occupancy consisting of existing business and existing storage. Features of fire protection in the garage include fire alarm and detection system, fire extinguishers, fire alarm system, fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lights.	NA	VIOLATION 1 Fire extinguishers are not available on portable fire extinguishers. NFPA 1.1 Fire Code, Chapter 13.6.2	Extinguishers will be installed throughout the building.	NA	3/31/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNITWSC	The Police Services and Parking Garage (1600 Mattison Ave) The Police Services and Parking Garage building consists of a four-story open parking structure and a single-story police building. The building is classified as a mixed occupancy consisting of existing business and existing storage. Features of fire protection in the garage include fire alarm and detection system, fire extinguishers, fire alarm system and emergency lighting are provided in the stairwells. The Police building has a fire alarm system, fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lights.	NA	VIOLATION 2 The Police Department room writing room has an extension cord connected to a power strip. NFPA 1.1 Fire Code, Chapter 11.1.6.2	Extension cord will be removed and power strip connected to a wall outlet.	NA	1/31/2017	Closed

UNTS Enterprise Audit Report Inventory

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External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNITBSC	Patient Care Center The Patient Care Center is a six-story structure classified as an existing business occupancy. Features of fire protection include a fire sprinkler system, fire alarm system, and portable fire extinguishers. The building is equipped with illuminated exit signs, emergency lighting and an emergency generator.	NA	VIOLATION 1 There are unsealed penetrations in the following rooms: -6E2 -6S9A -2CM1 -3CM1 -3S9A8 -2E1 -2E2 -2E3 -2E4 -2E5 -2E6 -2E7 -2E8 -2E9 -2E10 -2E11 -2E12 -2E13 -2E14 -2E15 -2E16 -2E17 -2E18 -2E19 -2E20 -2E21 -2E22 -2E23 -2E24 -2E25 -2E26 -2E27 -2E28 -2E29 -2E30 -2E31 -2E32 -2E33 -2E34 -2E35 -2E36 -2E37 -2E38 -2E39 -2E40 -2E41 -2E42 -2E43 -2E44 -2E45 -2E46 -2E47 -2E48 -2E49 -2E50 -2E51 -2E52 -2E53 -2E54 -2E55 -2E56 -2E57 -2E58 -2E59 -2E60 -2E61 -2E62 -2E63 -2E64 -2E65 -2E66 -2E67 -2E68 -2E69 -2E70 -2E71 -2E72 -2E73 -2E74 -2E75 -2E76 -2E77 -2E78 -2E79 -2E80 -2E81 -2E82 -2E83 -2E84 -2E85 -2E86 -2E87 -2E88 -2E89 -2E90 -2E91 -2E92 -2E93 -2E94 -2E95 -2E96 -2E97 -2E98 -2E99 -2E100 -2E101 -2E102 -2E103 -2E104 -2E105 -2E106 -2E107 -2E108 -2E109 -2E110 -2E111 -2E112 -2E113 -2E114 -2E115 -2E116 -2E117 -2E118 -2E119 -2E120 -2E121 -2E122 -2E123 -2E124 -2E125 -2E126 -2E127 -2E128 -2E129 -2E130 -2E131 -2E132 -2E133 -2E134 -2E135 -2E136 -2E137 -2E138 -2E139 -2E140 -2E141 -2E142 -2E143 -2E144 -2E145 -2E146 -2E147 -2E148 -2E149 -2E150 -2E151 -2E152 -2E153 -2E154 -2E155 -2E156 -2E157 -2E158 -2E159 -2E160 -2E161 -2E162 -2E163 -2E164 -2E165 -2E166 -2E167 -2E168 -2E169 -2E170 -2E171 -2E172 -2E173 -2E174 -2E175 -2E176 -2E177 -2E178 -2E179 -2E180 -2E181 -2E182 -2E183 -2E184 -2E185 -2E186 -2E187 -2E188 -2E189 -2E190 -2E191 -2E192 -2E193 -2E194 -2E195 -2E196 -2E197 -2E198 -2E199 -2E200 -2E201 -2E202 -2E203 -2E204 -2E205 -2E206 -2E207 -2E208 -2E209 -2E210 -2E211 -2E212 -2E213 -2E214 -2E215 -2E216 -2E217 -2E218 -2E219 -2E220 -2E221 -2E222 -2E223 -2E224 -2E225 -2E226 -2E227 -2E228 -2E229 -2E230 -2E231 -2E232 -2E233 -2E234 -2E235 -2E236 -2E237 -2E238 -2E239 -2E240 -2E241 -2E242 -2E243 -2E244 -2E245 -2E246 -2E247 -2E248 -2E249 -2E250 -2E251 -2E252 -2E253 -2E254 -2E255 -2E256 -2E257 -2E258 -2E259 -2E260 -2E261 -2E262 -2E263 -2E264 -2E265 -2E266 -2E267 -2E268 -2E269 -2E270 -2E271 -2E272 -2E273 -2E274 -2E275 -2E276 -2E277 -2E278 -2E279 -2E280 -2E281 -2E282 -2E283 -2E284 -2E285 -2E286 -2E287 -2E288 -2E289 -2E290 -2E291 -2E292 -2E293 -2E294 -2E295 -2E296 -2E297 -2E298 -2E299 -2E300 -2E301 -2E302 -2E303 -2E304 -2E305 -2E306 -2E307 -2E308 -2E309 -2E310 -2E311 -2E312 -2E313 -2E314 -2E315 -2E316 -2E317 -2E318 -2E319 -2E320 -2E321 -2E322 -2E323 -2E324 -2E325 -2E326 -2E327 -2E328 -2E329 -2E330 -2E331 -2E332 -2E333 -2E334 -2E335 -2E336 -2E337 -2E338 -2E339 -2E340 -2E341 -2E342 -2E343 -2E344 -2E345 -2E346 -2E347 -2E348 -2E349 -2E350 -2E351 -2E352 -2E353 -2E354 -2E355 -2E356 -2E357 -2E358 -2E359 -2E360 -2E361 -2E362 -2E363 -2E364 -2E365 -2E366 -2E367 -2E368 -2E369 -2E370 -2E371 -2E372 -2E373 -2E374 -2E375 -2E376 -2E377 -2E378 -2E379 -2E380 -2E381 -2E382 -2E383 -2E384 -2E385 -2E386 -2E387 -2E388 -2E389 -2E390 -2E391 -2E392 -2E393 -2E394 -2E395 -2E396 -2E397 -2E398 -2E399 -2E400 -2E401 -2E402 -2E403 -2E404 -2E405 -2E406 -2E407 -2E408 -2E409 -2E410 -2E411 -2E412 -2E413 -2E414 -2E415 -2E416 -2E417 -2E418 -2E419 -2E420 -2E421 -2E422 -2E423 -2E424 -2E425 -2E426 -2E427 -2E428 -2E429 -2E430 -2E431 -2E432 -2E433 -2E434 -2E435 -2E436 -2E437 -2E438 -2E439 -2E440 -2E441 -2E442 -2E443 -2E444 -2E445 -2E446 -2E447 -2E448 -2E449 -2E450 -2E451 -2E452 -2E453 -2E454 -2E455 -2E456 -2E457 -2E458 -2E459 -2E460 -2E461 -2E462 -2E463 -2E464 -2E465 -2E466 -2E467 -2E468 -2E469 -2E470 -2E471 -2E472 -2E473 -2E474 -2E475 -2E476 -2E477 -2E478 -2E479 -2E480 -2E481 -2E482 -2E483 -2E484 -2E485 -2E486 -2E487 -2E488 -2E489 -2E490 -2E491 -2E492 -2E493 -2E494 -2E495 -2E496 -2E497 -2E498 -2E499 -2E500 -2E501 -2E502 -2E503 -2E504 -2E505 -2E506 -2E507 -2E508 -2E509 -2E510 -2E511 -2E512 -2E513 -2E514 -2E515 -2E516 -2E517 -2E518 -2E519 -2E520 -2E521 -2E522 -2E523 -2E524 -2E525 -2E526 -2E527 -2E528 -2E529 -2E530 -2E531 -2E532 -2E533 -2E534 -2E535 -2E536 -2E537 -2E538 -2E539 -2E540 -2E541 -2E542 -2E543 -2E544 -2E545 -2E546 -2E547 -2E548 -2E549 -2E550 -2E551 -2E552 -2E553 -2E554 -2E555 -2E556 -2E557 -2E558 -2E559 -2E560 -2E561 -2E562 -2E563 -2E564 -2E565 -2E566 -2E567 -2E568 -2E569 -2E570 -2E571 -2E572 -2E573 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External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNITBSC	Patient Care Center The Patient Care Center is a six-story structure classified as an existing business occupancy. Features of fire protection include a fire sprinkler system, fire alarm system, and portable fire extinguishers. The building is equipped with illuminated exit signs, emergency lighting and an emergency generator.	NA	VIOLATION 2 There are unused openings in the electrical panels in the following rooms: -4E1 -4E2 -4E3 -4E4 -4E5 -4E6 -4E7 -4E8 -4E9 -4E10 -4E11 -4E12 -4E13 -4E14 -4E15 -4E16 -4E17 -4E18 -4E19 -4E20 -4E21 -4E22 -4E23 -4E24 -4E25 -4E26 -4E27 -4E28 -4E29 -4E30 -4E31 -4E32 -4E33 -4E34 -4E35 -4E36 -4E37 -4E38 -4E39 -4E40 -4E41 -4E42 -4E43 -4E44 -4E45 -4E46 -4E47 -4E48 -4E49 -4E50 -4E51 -4E52 -4E53 -4E54 -4E55 -4E56 -4E57 -4E58 -4E59 -4E60 -4E61 -4E62 -4E63 -4E64 -4E65 -4E66 -4E67 -4E68 -4E69 -4E70 -4E71 -4E72 -4E73 -4E74 -4E75 -4E76 -4E77 -4E78 -4E79 -4E80 -4E81 -4E82 -4E83 -4E84 -4E85 -4E86 -4E87 -4E88 -4E89 -4E90 -4E91 -4E92 -4E93 -4E94 -4E95 -4E96 -4E97 -4E98 -4E99 -4E100 -4E101 -4E102 -4E103 -4E104 -4E105 -4E106 -4E107 -4E108 -4E109 -4E110 -4E111 -4E112 -4E113 -4E114 -4E115 -4E116 -4E117 -4E118 -4E119 -4E120 -4E121 -4E122 -4E123 -4E124 -4E125 -4E126 -4E127 -4E128 -4E129 -4E130 -4E131 -4E132 -4E133 -4E134 -4E135 -4E136 -4E137 -4E138 -4E139 -4E140 -4E141 -4E142 -4E143 -4E144 -4E145 -4E146 -4E147 -4E148 -4E149 -4E150 -4E151 -4E152 -4E153 -4E154 -4E155 -4E156 -4E157 -4E158 -4E159 -4E160 -4E161 -4E162 -4E163 -4E164 -4E165 -4E166 -4E167 -4E168 -4E169 -4E170 -4E171 -4E172 -4E173 -4E174 -4E175 -4E176 -4E177 -4E178 -4E179 -4E180 -4E181 -4E182 -4E183 -4E184 -4E185 -4E186 -4E187 -4E188 -4E189 -4E190 -4E191 -4E192 -4E193 -4E194 -4E195 -4E196 -4E197 -4E198 -4E199 -4E200 -4E201 -4E202 -4E203 -4E204 -4E205 -4E206 -4E207 -4E208 -4E209 -4E210 -4E211 -4E212 -4E213 -4E214 -4E215 -4E216 -4E217 -4E218 -4E219 -4E220 -4E221 -4E222 -4E223 -4E224 -4E225 -4E226 -4E227 -4E228 -4E229 -4E230 -4E231 -4E232 -4E233 -4E234 -4E235 -4E236 -4E237 -4E238 -4E239 -4E240 -4E241 -4E242 -4E243 -4E244 -4E245 -4E246 -4E247 -4E248 -4E249 -4E250 -4E251 -4E252 -4E253 -4E254 -4E255 -4E256 -4E257 -4E258 -4E259 -4E260 -4E261 -4E262 -4E263 -4E264 -4E265 -4E266 -4E267 -4E268 -4E269 -4E270 -4E271 -4E272 -4E273 -4E274 -4E275 -4E276 -4E277 -4E278 -4E279 -4E280 -4E281 -4E282 -4E283 -4E284 -4E285 -4E286 -4E287 -4E288 -4E289 -4E290 -4E291 -4E292 -4E293 -4E294 -4E295 -4E296 -4E297 -4E298 -4E299 -4E300 -4E301 -4E302 -4E303 -4E304 -4E305 -4E306 -4E307 -4E308 -4E309 -4E310 -4E311 -4E312 -4E313 -4E314 -4E315 -4E316 -4E317 -4E318 -4E319 -4E320 -4E321 -4E322 -4E323 -4E324 -4E325 -4E326 -4E327 -4E328 -4E329 -4E330 -4E331 -4E332 -4E333 -4E334 -4E335 -4E336 -4E337 -4E338 -4E339 -4E340 -4E341 -4E342 -4E343 -4E344 -4E345 -4E346 -4E347 -4E348 -4E349 -4E350 -4E351 -4E352 -4E353 -4E354 -4E355 -4E356 -4E357 -4E358 -4E359 -4E360 -4E361 -4E362 -4E363 -4E364 -4E365 -4E366 -4E367 -4E368 -4E369 -4E370 -4E371 -4E372 -4E373 -4E374 -4E375 -4E376 -4E377 -4E378 -4E379 -4E380 -4E381 -4E382 -4E383 -4E384 -4E385 -4E386 -4E387 -4E388 -4E389 -4E390 -4E391 -4E392 -4E393 -4E394 -4E395 -4E396 -4E397 -4E398 -4E399 -4E400 -4E401 -4E402 -4E403 -4E404 -4E405 -4E406 -4E407 -4E408 -4E409 -4E410 -4E411 -4E412 -4E413 -4E414 -4E415 -4E416 -4E417 -4E418 -4E419 -4E420 -4E421 -4E422 -4E423 -4E424 -4E425 -4E426 -4E427 -4E428 -4E429 -4E430 -4E431 -4E432 -4E433 -4E434 -4E435 -4E436 -4E437 -4E438 -4E439 -4E440 -4E441 -4E442 -4E443 -4E444 -4E445 -4E446 -4E447 -4E448 -4E449 -4E450 -4E451 -4E452 -4E453 -4E454 -4E455 -4E456 -4E457 -4E458 -4E459 -4E460 -4E461 -4E462 -4E463 -4E464 -4E465 -4E466 -4E467 -4E468 -4E469 -4E470 -4E471 -4E472 -4E473 -4E474 -4E475 -4E476 -4E477 -4E478 -4E479 -4E480 -4E481 -4E482 -4E483 -4E484 -4E485 -4E486 -4E487 -4E488 -4E489 -4E490 -4E491 -4E492 -4E493 -4E494 -4E495 -4E496 -4E497 -4E498 -4E499 -4E				

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	Patient Care Center The Patient Care Center is a six-story structure classified as an existing business occupancy. Features of fire protection include a fire sprinkler system, fire alarm system, and portable fire extinguishers. The building is equipped with illuminated exit signs, emergency lighting and an emergency generator.	NA	VIOLATION 8 The fire door near room 451 is obstructed by the carpet and will not close properly. NFPA 1, Fire Code, Chapter 4.5.8.1	The fire doors will be repaired or removed if it is determined they are no longer necessary.	NA	12/23/2016 Revised 05/01/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	Patient Care Center The Patient Care Center is a six-story structure classified as an existing business occupancy. Features of fire protection include a fire sprinkler system, fire alarm system, and portable fire extinguishers. The building is equipped with illuminated exit signs, emergency lighting and an emergency generator.	NA	VIOLATION 9 The fire door near room 584 requires more than 15 pounds to open. The forces required to open the door by manual means shall not exceed 15 lbs to release the latch, 30 lbs to set the door in motion, and 5 lbs to hold the door open. These forces shall be applied at the latch side. NFPA 1, Fire Code, Chapter 4.5.1.1	The fire doors will be repaired or removed if it is determined they are no longer necessary.	NA	1/31/2017 Revised 05/01/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	Patient Care Center The Patient Care Center is a six-story structure classified as an existing business occupancy. Features of fire protection include a fire sprinkler system, fire alarm system, and portable fire extinguishers. The building is equipped with illuminated exit signs, emergency lighting and an emergency generator.	NA	VIOLATION 10 The Fire Department Connection (FDC) is obstructed at the front of the building. NFPA 1, Fire Code, Chapters 13.1.3, 13.1.4, and 13.1.4.1	A clear path will be created to the FDC.	NA	12/21/2016 Revised 05/01/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	Patient Care Center The Patient Care Center is a six-story structure classified as an existing business occupancy. Features of fire protection include a fire sprinkler system, fire alarm system, and portable fire extinguishers. The building is equipped with illuminated exit signs, emergency lighting and an emergency generator.	NA	VIOLATION 11 The fire door in the perthouse air handler room is missing the cover. NFPA 1, Fire Code, Chapter 11.1.1.0	Function box cover will be replaced.	NA	1/31/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	Patient Care Center The Patient Care Center is a six-story structure classified as an existing business occupancy. Features of fire protection include a fire sprinkler system, fire alarm system, and portable fire extinguishers. The building is equipped with illuminated exit signs, emergency lighting and an emergency generator.	NA	VIOLATION 12 There are two fire doors in the following locations have been altered or were inappropriately installed and will not function properly when activated: -5th floor north lobby -5th floor north lobby NFPA 1, Fire Code, Chapter 4.5.8.1	Sprinkler equipment will be repaired or replaced.	NA	1/29/2017 Revised 05/01/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	Student Services Building (1002 Montgomery) The Student Services Building is a two-story structure classified as an existing business occupancy. Features of fire protection include a fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 1 There is an unsealed penetration in IT room 322. NFPA 1, Fire Code, Chapter 12.7.5.1	All penetrations will be properly sealed.	NA	12/21/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	Founders Activity Center/PACE Building (B515 W 7th St.) The Founders Activity Center/PACE Building is a two-story structure classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include single-station smoke detectors and portable fire extinguishers. The building is equipped with illuminated exit signs.	NA	VIOLATION 1 An extension cord is used as a replacement for permanent wiring at the second floor reception desk. NFPA 1, Fire Code, Chapter 11.1.1.7.6	The extension cord will be removed.	NA	1/31/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	Founders Activity Center/PACE Building (B515 W 7th St.) The Founders Activity Center/PACE Building is a two-story structure classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include single-station smoke detectors and portable fire extinguishers. The building is equipped with illuminated exit signs.	NA	VIOLATION 2 The fire door near exit is partly blocked by a rack for fire weights. NFPA 1, Fire Code, Chapters 4.4.3.1.1 and 14.4.1	Weight rack will be relocated.	NA	12/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTRSC	Founders Activity Center/PACE Building (B515 W 7th St.) The Founders Activity Center/PACE Building is a two-story structure classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include single-station smoke detectors and portable fire extinguishers. The building is equipped with illuminated exit signs.	NA	VIOLATION 3 The fire door near exit has a piece of furniture blocking the door. NFPA 1, Fire Code, Chapters 4.4.3.1.1 and 14.4.1	Rebar will be removed.	NA	12/23/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Review Period Based	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNITSC	Founders Activity Center/PACE Building (3515 W. 7th St.) structure classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include single-station smoke detectors and portable fire extinguishers. The building is equipped with illuminated exit signs.	NA	VIOLATION 4 Occupants do not have access to the secondary exit from the second floor. NFPA 1, Fire Code, Chapters 14.5.2.1 and 14.5.2.3	Door hardware will be replaced to prevent anyone from being locked in the room.	NA	3/17/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNITSC	The 7th Street Strip Building is a one-story structure classified as an existing business occupancy. Features of fire protection include single-station smoke detectors. The building is equipped with illuminated exit signs. At the time of the inspection only unit 3609 was occupied the other sections of the building are undergoing renovations. UNIT 3609 SEC. May, DDS, Office	NA	VIOLATION 1 In the corridor closet O2 bottles are stored with an artificial Christmas tree. NFPA 1, Fire Code, Chapter 4.1.3.3.2.1	Christmas tree will be removed.	NA	12/21/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNITSC	3609 SEC. May, DDS, Office The 7th Street - Professional and Continuing Education Center is a one-story structure classified as an existing business occupancy. Features of fire protection include a fire alarm system with smoke detection and portable fire extinguishers. Illuminated exit signs are provided.	NA	VIOLATION 1 The fire alarm system lacks a current inspection label. The last inspection was conducted in July 2015. NFPA 1, Fire Code, Chapter 4.5.8.1	Inspection tags will be properly installed.	NA	12/29/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNITSC	FEB General Services Building The FEB General Services Building is a one-story structure classified as an existing business occupancy. Features of fire protection include a complete fire alarm system, full fire sprinkler system, and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 1 The installation label is missing on the fire alarm panel. NFPA 1, Fire Code, Chapter 4.5.8.1	Labels will be properly installed.	NA	12/29/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNITSC	FEB General Services Building The FEB General Services Building is a one-story structure classified as an existing business occupancy. Features of fire protection include fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 2 There are combustible materials stored around the gas water heater in room 111. NFPA 1, Fire Code, Chapter 10.19.5.	Combustible materials will be removed.	NA	3/17/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNITSC	SEW Building The SEW Building is a one-story structure classified as an existing business occupancy and used as a clinic. Features of fire protection include single-station battery operated smoke alarms and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 1 The exit exterior exit door by room 139 is a marked exit with an illuminated exit sign but has a sign on the door stating not an exit door (no fire department inspection) NFPA 1, Fire Code, Chapter 4.5.8.1	Corrected.	NA	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNITSC	May Building The May Building is a single-story structure classified as an existing business occupancy and is used as a clinic. Features of fire protection include single-station battery operated smoke alarms and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 1 The exit signs throughout the building are not illuminated. NFPA 1, Fire Code, Chapter 4.5.8.1	Exit signs will be repaired or replaced.	NA	1/21/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNITSC	May Building The May Building is a single-story structure classified as an existing business occupancy and is used as a clinic. Features of fire protection include single-station battery operated smoke alarms and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 2 The junction box in the room 1M1 is missing the cover. NFPA 1, Fire Code, Chapter 11.1.1.1.D	Junction box cover will be installed.	NA	1/21/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNITSC	May Building The May Building is a single-story structure classified as an existing business occupancy and is used as a clinic. Features of fire protection include single-station battery operated smoke alarms and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 3 There are missing ceiling tiles in room 137. NFPA 1, Fire Code, Chapter 13.7.4.3.9	Ceiling tiles will be replaced.	NA	12/23/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	Hartford Steam Boiler Inspection and Insurance Company (HSB)	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Loss Prevention Report	UNT	6 reports/audits performed. For more detailed information please see the reports from Risk Management.	NA	NA	NA	NA	NA	N/A
External	Hartford Steam Boiler Inspection and Insurance Company (HSB)	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Loss Prevention Report, Healthcare Risk Control	UNTHSC	2 reports/audits performed; no findings identified. For more detailed information please see the reports from Risk Management.	NA	NA	NA	NA	NA	N/A
External	State Office of Risk Management	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Risk Management Program Review Report	UNT	17-11-03 Safety - Fire Safety: Portable Fire Extinguishers (Frisco Campus) During this RMPR, SORM noted that the portable fire extinguishers on the Frisco Campus lacked an indication that they are being inspected monthly, as required by the Life Safety Code. 17-11-03 Safety - Fire Safety: Emergency Preparedness: Shelter-in-Place Drill (Frisco Campus) During this RMPR, SORM noted that a shelter-in-place drill had not yet been conducted for this location.	NA	SORM recommends that UNT communicate with the building power/maintenance personnel to ensure that these inspections are occurring, as required. Inspections must be documented either on each extinguisher's tag or in a separate database or log. References: NFPA-101 (2015), "Life Safety Code," Chapters 9.3.5, 9.9; NFPA-101 (2013), "Standard for Portable Fire Extinguishers," Chapters 7.2.1.2, 7.2.1.2.1, 7.2.2	UNT will communicate with building owner to ensure that these inspections are occurring.	Shauna Barbato, Assistant Director	1/27/2017	Closed
External	State Office of Risk Management	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Risk Management Program Review Report	UNT	17-11-03 Safety - Emergency Preparedness: Shelter-in-Place Drill (Frisco Campus) During this RMPR, SORM noted that there were combustible materials such as cardboard boxes and filters being stored beneath an emergency egress stairwell.	NA	SORM recommends that UNT conduct a drill for this location to include the students to the degree that this is feasible. Identifying the occupancy of specific locations for a shelter in place drill is a key element of the current management practice and can help improve the current plan in place. Reference: SORM, RMTBA Guidelines, Volume III, Section Two, Chapter 6, Subchapter 6.5	UNT will conduct shelter-in-place drills before the end of the spring semester.	Shauna Barbato, Assistant Director	4/30/2017	Closed
External	State Office of Risk Management	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Risk Management Program Review Report	UNT	17-11-03 Safety - Fire Safety: Combustible Materials Storage (Frisco Campus) During this RMPR, SORM noted that there were combustible materials such as cardboard boxes and filters being stored beneath an emergency egress stairwell.	NA	SORM recommends that UNT work with the landlord to remove these combustible materials from this area, in accordance with the Fire Code, as referenced below. Reference: NFPA-1 (2015), "Fire Code," Chapter 10.9.4	All combustible materials have been removed.	Shauna Barbato, Assistant Director	12/16/2016	Closed
External	State Office of Risk Management	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Risk Management Program Review Report	UNT	17-11-03 Safety - Hazard Communication: Safety Data Sheets and Eyewash Station (Pool Recreation Center (Denton Campus)) During this RMPR, SORM noted that in room #39, the "pool room" in the Pool Recreation Center, there were hazardous chemicals being stored and dilated relative to the maintenance of the swimming pool. The chemicals were not properly labeled, and no eyewash station was present even though the MSDS for these chemicals indicated the need for an eyewash station.	NA	SORM recommends that the university install an eyewash station in this room and ensure that all the chemicals have their current Safety Data Sheets from the manufacturer or distributor, as required by federal law. Reference: OSHA, 29 CFR 1910.1200, "Hazard Communication - Requirements for Labels and Safety Data Sheets," Standard for Emergency Eyewash and Shower Equipment	UNT will install an eyewash station and update the SDS sheets.	Scott Dunlap, Program Director for Environmental Risk	2/29/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	Health Resources and Services Administration (HSA)	Fiscal Year 2017	NA	Governance and Regulatory Compliance	On-Site Fiscal Program Monitoring Review	UNTHSC	The primary scope of this on-site visit was to review program objectives and progress. OSCM met with HSA for 30 minutes making introductions and providing a brief overview of organization and process.	NA	None	None	NA	NA	N/A
External	State Fire Marshal's Office	Fiscal Year 2017	RRO1509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Division Residential	UNT	Rawlings Hall is a four-story dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system, standpipes system, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	N/A	<p>Findings 1</p> <p>The corridor fire doors by room 266 B do not close and latch properly.</p> <p>NFPA 1, Fire Code, Chapter 12.4.6.9.2(G) and (8)</p>	UNT will repair doors to latch properly.	NA	2/2/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RRO1509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Division Residential	UNT	Rawlings Hall is a four-story dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system, standpipes system, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	N/A	<p>Findings 2</p> <p>Unsealed or improperly sealed penetrations are present in the following locations: -Room 355 Security closet -Apartment 280 hole in ceiling by entrance door -Apartment 280 hole in ceiling by security stand mineral wool not secured in place by fire caulking.</p> <p>NFPA 1, Fire Code, Chapter 12.7.5.1 and 12.3.3.1</p>	UNT will properly seal penetrations.	NA	2/2/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RRO1509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Division Residential	UNT	Rawlings Hall is a four-story dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system, standpipes system, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	N/A	<p>Findings 3</p> <p>Multi-purpose room 270 A/B has an occupant load in excess of 49 people and lacks the required exit signs. NFPA 1, Fire Code, Chapters 20.1.4.7.1 and 44.14.1.1</p>	UNT will install exit signs	NA	2/2/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-415 UNT	Governance and Regulatory Compliance	Faculty and Staff International Travel Audit	UNT System	1. International Travel Registration Control Process An internal control process is not established to ensure that all individuals registered with UNT System, UNT, UNTHSC or UNT Dallas business have registered with UNT Risk Management prior to departure. Thus, UNT Risk Management does not know the total number and location of individuals traveling internationally. Additionally, there are no travel policies that address international travel registration at the UNT System, UNT, UNTHSC, and UNT Dallas. Currently, the international traveler acknowledges they will register their travel plans with UNT Risk Management using the IBA form and that they will register their international travel plans with UNT Risk Management prior to departure.	High	<p>Recommendation for Rachel Burdge, UNT System Policy Manager: 1.3.8. Revise UNT System travel policy for consistency with UNT System Regulation 08.15000.</p>	3a. I will revise UNT System Administration travel policy for consistency with UNT System Regulation 08.15000.	Rachel Burdge, UNT System Policy Manager	2/28/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	RR01509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Cumley Hall is a three-story mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	N/A	Fringing 1 There is a dead end corridor on both the second and third floors that exceeds the maximum allowable dead end distance of 228 and 229 feet respectively. The third floor rooms 228 and 229 cannot be normally occupied due to the excessive dead-end corridor distance. Note: Rooms no longer being used. NOTE: The violation was noted several inspection cycles ago by the SFAO and the university was instructed at that time they were not to use these rooms. During this inspection it was observed the rooms were again being used. The housing staff advised that the rooms were not being used. The fire alarm system building was retro fitted with a fire sprinkler system the rooms could now be used. THE SFAO instructed the university the rooms cannot be used, the code does not allow dead end rooms to exceed 50 feet in unimpeded travel or sprinklered buildings. The rooms are not to be occupied by order of the State Fire Marshal's Office. NFPA 1.1 Fire Code, Chapter 14.10.1.5, and NFPA 101, Life Safety Code, Chapter 22.2.3.5	Completed. Rooms are no longer being used.	NA	11/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR01509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Cumley Hall is a three-story mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	N/A	Fringing 2 The stairwell have HVAC vent ducts penetrating the exit enclosure in approximately 12 locations. NFPA 1.1 Fire Code, Chapter 14.3.1(10)	Completed. Vents are closed.	NA	11/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR01509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Cumley Hall is a three-story mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	N/A	Fringing 3 Paneling is applied to the walls located in the first floor business office corridor that does not meet class A or B interior finish requirements. NFPA 1.1 Fire Code, Chapter 20.3.3.2.1	UNT will replace paneling.	NA	4/9/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR01509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Cumley Hall is a three-story mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	N/A	Fringing 4 The first floor A/C 31 room has an unsealed floor penetration. NFPA 1.1 Fire Code, Chapter 12.7.5.1	UNT will seal penetrations.	NA	3/7/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR01509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Cumley Hall is a three-story mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	N/A	Fringing 5 The door separating the business occupancy from the dormitory occupancy lacks a fire rating. Provide documentation this door is not located in a fire wall. NFPA 1.1 Fire Code 6.1.1.4.1(a)	UNT will provide documentation.	NA	8/7/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR01509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Cumley Hall is a three-story mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	N/A	Fringing 6 The stairwell fire door on the third floor center stairwell has a continuous hinge and does not have UL listing information on the hinge. NFPA 1.1 Fire Code, Chapter 12.7.3.1, 12.7.2.2 and 12.7.3.3	UNT will label the hinge.	NA	3/7/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire alarm, fire extinguishers, fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	N/A	<p>Findings 1</p> <ul style="list-style-type: none"> Unsealed or improperly sealed penetrations are present in the following rooms: <ul style="list-style-type: none"> -Room 4253A Several unsealed penetrations -Room 4753A Several unsealed penetrations -Mechanical room 633A Several unsealed penetrations -Mechanical room 641A Unsealed sprinkler pipe and unsealed yellow spray foam used -Room 631A Floor penetrations -Mechanical room 553A non-fire rated yellow spray foam used -Mechanical room 553A non-fire rated yellow spray foam used -Mechanical room 553A non-fire rated yellow spray foam used -Mechanical room 555A non-fire rated yellow spray foam used -Room 507A Floor conduit unsealed -Room 483A non-fire rated yellow spray foam used -Room 483A non-fire rated yellow spray foam used -Electrical room next to 441A non-fire rated yellow spray foam used -Room 405A non-fire rated yellow spray foam used -Room 405A non-fire rated yellow spray foam used and unsealed -Electrical room next to 313A non-fire rated yellow spray foam used -Room 341A non-fire rated yellow spray foam used 	UNT will seal penetrations.	NA	5/7/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-415 UNT	Governance and Regulatory Compliance	Facility and Staff Internal Travel Audit	UNT Dallas	1. International Travel Registration Control Process An internal control process is not established to ensure that all individuals traveling internationally on either UNT System, UNT, UNTSC or UNT Dallas business have registered with UNT Risk Management prior to departure. Thus, UNT Risk Management does not have their number and location of individuals traveling internationally. Additionally, there are no travel policies that address international travel registration at the UNT System, UNT, UNTSC, and UNT Dallas. The UNT Dallas travel policy does not require international traveler travel plans with UNT Risk Management using the IBA former acknowledgment statement. However, there is no certification that the international traveler has registered prior to departure.	High	<p>Recommendation for HD Sturman, Assistant Vice President for Accreditation, Training and Policy: 1.6.a. Establish a UNT Dallas travel policy consistent with UNT System Regulation 08.15000.</p>	ia. The management action plan is to look at the UNT System Regulation and take our policy to track the regulation.	HL D. Sturman, Assistant Vice President for Accreditation, Training and Policy (UNT Dallas)	Exp: 3/17/2018 Rec: 09/12/2018	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire alarm, fire extinguishers, fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	N/A	<p>Findings 3</p> <p>The corridor sprinkler head by room 238A is missing the head section. NFPA 1, Fire Code, Chapter 45.5.1.</p>	UNT will order new escutcheons, may have to replace sprinkler heads if escutcheons cannot be located due to sprinkler head age	NA	3/17/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire alarm, fire extinguishers, fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	N/A	<p>Findings 4</p> <p>The cafeteria has a posted occupant load of 203 people. The main entrance door have keycard doorbells with thumb switches. The main entrance door will be supplied with panic hardware or fire exit hardware only. NFPA 1, Fire Code, Chapter 14.5.3.4.2</p>	UNT will install panic hardware.	NA	4/8/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire alarm, fire extinguishers, fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	N/A	<p>Findings 5</p> <p>The kitchen flame broiled grill is on wheels and lacks an approved method to insure the appliance is in the approved position. NFPA 1, Fire Code, Chapter 50.6.1.2.3.1</p>	Seal torch will install stops to position the equipment.	NA	4/8/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal (Co-Sourced)	PWC	Fiscal Year 2017	17-310 DAL	Governance and Regulatory Compliance	Scholarship Review	UNT Dallas	<p>1. Overall Governance of Scholarships</p> <p>Opportunities exist for strengthening internal control processes management of scholarships.</p> <p>Donations are received by various departments at UNT Dallas (including UNT Dallas, UNT Dallas Center for Leadership & Social Ad and gift funds. Additional, management is in the process of creating a general scholarship committee, updating application criteria to be in line with the donor's intent, and developing necessary processes and procedures and policy if applicable based on the story of best practices.</p>	Moderate	<p>1.1. L.A. Financial Aid & Scholarships should work with the donor to update the application criteria for Fund 240776 to be in alignment with the MOU and consider removing the personal criteria or creating a general scholarship committee, updating application criteria to be in line with the donor's intent, and developing necessary processes and procedures and policy if applicable based on the story of best practices.</p>	Stephanie Holley, VP for Student Access & Success	9/1/2018	Open	
External	State Fire Marshal's Office	Fiscal Year 2017	RN01509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	<p>Maple Hall</p> <p>Maple Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.</p>	N/A	<p>Finding 1</p> <p>The following corridors have fiberglass reinforced plastic (FRP) ceiling panels installed in the drop ceiling grids. Documentation was not available at the time of the inspection that FRP ceiling tiles meet class A or B interior finish requirements for use in corridors.</p> <ul style="list-style-type: none"> - B wing second floor - B wing first floor - C wing second floor - C wing first floor 	NA	8/31/2017	Closed	
External	State Fire Marshal's Office	Fiscal Year 2017	RN01509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	<p>Maple Hall</p> <p>Maple Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.</p>	N/A	<p>Finding 2</p> <p>Unsealed or improperly sealed penetrations are present in the following locations.</p> <ul style="list-style-type: none"> - FC2 Mechanical room non-rated yellow gray foam - F201 fire room 4 inch conduit floor and ceiling - A-C-HR room B321 floor, non-rated yellow gray foam 	NA	4/17/2017	Closed	
External	State Fire Marshal's Office	Fiscal Year 2017	RN01509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	<p>Maple Hall</p> <p>Maple Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.</p>	N/A	<p>Finding 3</p> <p>Stairwell fire rated doors at the following locations have holes in the door.</p> <ul style="list-style-type: none"> - Stairwell C third floor - Stairwell D second floor 	NA	4/17/2017	Closed	
External	State Fire Marshal's Office	Fiscal Year 2017	RN01509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	<p>Maple Hall</p> <p>Maple Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.</p>	N/A	<p>Finding 4</p> <p>Mechanical room B132 has an extension cord wired into the HVAC controller to supply power to the unit.</p>	NA	4/17/2017	Closed	
External	State Fire Marshal's Office	Fiscal Year 2017	RN01509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	<p>Maple Hall</p> <p>Maple Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.</p>	N/A	<p>Finding 5</p> <p>The corridor fire door by room C123 has a ventilation grate installed in the bottom of the door.</p>	NA	4/17/2017	Closed	
External	State Fire Marshal's Office	Fiscal Year 2017	RN01509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	<p>Maple Hall</p> <p>Maple Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.</p>	N/A	<p>Finding 6</p> <p>Stairwell signage is missing in the following locations. Stairwell signs are not required by code in this existing building however since signs have been installed they must be maintained.</p> <ul style="list-style-type: none"> - D corridor south third floor - A wing west stairwell second floor - A wing south stairwell second floor - B wing south stairwell second floor - B wing south stairwell second floor - D wing south stairwell first floor 	NA	5/1/2017	Closed	

UNTS Enterprise Audit Report Inventory

Internal/ External (Source)	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal (Co-Source)	PwC	Fiscal Year 2017	17-310 DAL	Governance and Regulatory Compliance	Scholarship Review	UNT Dallas	<p>1. Overall Governance of Scholarships</p> <p>Opportunities exist for strengthening internal control processes management of scholarships.</p> <p>Donations are received by various departments at UNT Dallas (College of Law). If the funds are received by any department other than Financial Aid & Scholarships to be awarded to students, an authorization form is filled out and sent to the Financial Aid & Scholarships office. While institutional scholarships decisions are automated, and External scholarships are selected by the donor and passed through the system from the donor to the students. Donor Note: Management was aware of concerns around Scholarship Committee and sharing of information. Management requested that the review specifically address these areas. See below for details on the observations related to the management of scholarships.</p> <p>2. Scholarship Compliance</p> <p>Moart Hall</p> <p>Moart Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.</p>	Moderate	<p>1.1. UNT Dallas should establish a review process for the recommended scholarship award process. The award process should be in compliance with the University's policy. Additionally, management should consider removing the additional criteria or creating an addendum to the original MOU for Fund 24005.</p>	Stephanie Holley, VP for Student Access & Success	9/17/2018	Open	
External	State Fire Marshal's Office	Fiscal Year 2017	RRO15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas at Denton Residential	UNT	<p>1. Overall Governance of Scholarships</p> <p>Opportunities exist for strengthening internal control processes management of scholarships.</p> <p>Donations are received by various departments at UNT Dallas (College of Law). If the funds are received by any department other than Financial Aid & Scholarships to be awarded to students, an authorization form is filled out and sent to the Financial Aid & Scholarships office. While institutional scholarships decisions are automated, and External scholarships are selected by the donor and passed through the system from the donor to the students. Donor Note: Management was aware of concerns around Scholarship Committee and sharing of information. Management requested that the review specifically address these areas. See below for details on the observations related to the management of scholarships.</p> <p>2. Scholarship Compliance</p> <p>Moart Hall</p> <p>Moart Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.</p>	N/A	<p>1.1. C. Financial Aid & Scholarships should evaluate the date at which the accounts are reviewed and/or implement a system of reviewing all open/current recipients of renewable awards to verify eligibility.</p>	UNT will seal the penetration.	NA	2/17/2017	Closed
Internal (Co-Source)	PwC	Fiscal Year 2017	17-310 DAL	Governance and Regulatory Compliance	Scholarship Review	UNT Dallas	<p>1. Overall Governance of Scholarships</p> <p>Opportunities exist for strengthening internal control processes management of scholarships.</p> <p>Donations are received by various departments at UNT Dallas (College of Law). If the funds are received by any department other than Financial Aid & Scholarships to be awarded to students, an authorization form is filled out and sent to the Financial Aid & Scholarships office. While institutional scholarships decisions are automated, and External scholarships are selected by the donor and passed through the system from the donor to the students. Donor Note: Management was aware of concerns around Scholarship Committee and sharing of information. Management requested that the review specifically address these areas. See below for details on the observations related to the management of scholarships.</p> <p>2. Scholarship Compliance</p> <p>Moart Hall</p> <p>Moart Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.</p>	Moderate	<p>1.1. C. Financial Aid & Scholarships should evaluate the date at which the accounts are reviewed and/or implement a system of reviewing all open/current recipients of renewable awards to verify eligibility.</p>	<p>1.1. Director of Financial Aid has been hired effective 8/29/2017. Also, funding has been increased to the Accountant focused on Scholarships, Financial Aid, and gift funds. Additionally, management is in the process of creating a general scholarship committee, updating application criteria to be in compliance with the MOU's and developing necessary processes and procedures and policy if applicable based on the study of best practices.</p>	Stephanie Holley, VP for Student Access & Success	9/17/2018	Open
External	State Fire Marshal's Office	Fiscal Year 2017	RRO15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas at Denton Residential	UNT	<p>1. Overall Governance of Scholarships</p> <p>Opportunities exist for strengthening internal control processes management of scholarships.</p> <p>Donations are received by various departments at UNT Dallas (College of Law). If the funds are received by any department other than Financial Aid & Scholarships to be awarded to students, an authorization form is filled out and sent to the Financial Aid & Scholarships office. While institutional scholarships decisions are automated, and External scholarships are selected by the donor and passed through the system from the donor to the students. Donor Note: Management was aware of concerns around Scholarship Committee and sharing of information. Management requested that the review specifically address these areas. See below for details on the observations related to the management of scholarships.</p> <p>2. Scholarship Compliance</p> <p>Moart Hall</p> <p>Moart Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.</p>	N/A	<p>1.1. C. Financial Aid & Scholarships should evaluate the date at which the accounts are reviewed and/or implement a system of reviewing all open/current recipients of renewable awards to verify eligibility.</p>	<p>1.1. C. Financial Aid & Scholarships should evaluate the date at which the accounts are reviewed and/or implement a system of reviewing all open/current recipients of renewable awards to verify eligibility.</p>	NA	12/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RRO15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas at Denton Residential	UNT	<p>1. Overall Governance of Scholarships</p> <p>Opportunities exist for strengthening internal control processes management of scholarships.</p> <p>Donations are received by various departments at UNT Dallas (College of Law). If the funds are received by any department other than Financial Aid & Scholarships to be awarded to students, an authorization form is filled out and sent to the Financial Aid & Scholarships office. While institutional scholarships decisions are automated, and External scholarships are selected by the donor and passed through the system from the donor to the students. Donor Note: Management was aware of concerns around Scholarship Committee and sharing of information. Management requested that the review specifically address these areas. See below for details on the observations related to the management of scholarships.</p> <p>2. Scholarship Compliance</p> <p>Moart Hall</p> <p>Moart Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.</p>	N/A	<p>1.1. C. Financial Aid & Scholarships should evaluate the date at which the accounts are reviewed and/or implement a system of reviewing all open/current recipients of renewable awards to verify eligibility.</p>	<p>1.1. C. Financial Aid & Scholarships should evaluate the date at which the accounts are reviewed and/or implement a system of reviewing all open/current recipients of renewable awards to verify eligibility.</p>	NA	12/23/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Reported as of	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	RND1509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	<p>Victory Hall</p> <p>Victory Hall is a four-story mixed occupancy consisting of existing dormitory and existing assembly use. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.</p>	N/A	<p>Finding 9</p> <p>The first floor elevator lobby fire doors lack vertical bottom rods and floor latching points or fire pins. (4.443) NFA 1. Fire Code, Chapter 12.4.1; and NFA.80 Standard for Fire Doors and Other Opening Protectives, Chapter 4.6.3.1</p>	UNT will replace vertical bottom rods and add floor latching points.	NA	3/17/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND1509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	<p>Victory Hall</p> <p>Victory Hall is a four-story mixed occupancy consisting of existing dormitory and existing assembly use. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.</p>	N/A	<p>Finding 10</p> <p>Mechanical room 2200 has storage of materials not related to mechanical equipment. Storage of materials is not limited to mop buckets, mops, paint, furniture, ceiling tiles. NFA 1. Fire Code, Chapter 10.1B.5.1</p>	UNT will remove those materials.	NA	8/31/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND1509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	<p>Honors Hall</p> <p>Honors Hall is a five-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system with smoke detection, fire sprinkler system, fire pump and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.</p>	N/A	<p>Finding 11</p> <p>The penthouse attic area lacks sprinkler protection and is used for storage of combustible material. NFA 1. Fire Code, Chapter 7.13.2.10.3 and 10.15.6</p>	UNT will remove combustible material.	NA	8/31/2017	Closed
Internal (Go-Sourced)	PwC	Fiscal Year 2017	17-210 DAL	Governance and Regulatory Compliance	Scholarships Review	UNT Dallas	<p>1. Overall Governance of Scholarships</p> <p>Opportunities exist for strengthening internal control processes related to the management of scholarships.</p> <p>Donations are received by various departments at UNT Dallas (including UNT Dallas College of Law). If the funds are received by any department other than Financial Aid, the donor is not awarded to students, an authorization form is filed out and sent to the UNT Dallas, Financial Aid & Scholarships office. While decisions are automated, and external scholarships are selected by the UNT Dallas, Financial Aid & Scholarships office, while decisions are passed through the system from the donor to the students, donor scholarships are backed by a written gift agreement outlining the use of the funds. The management of donor scholarships is managed by the UNT Dallas, Financial Aid & Scholarships Committee and sharing of information and requested that the review specifically address these areas. See below for details on the observations related to the management of scholarships</p> <p>I. Scholarship Compliance</p>	Moderate	<p>I.1. Financial Aid & Scholarships</p> <p>Individuals should have access to the disbursement power function (i.e. Director of Financial Aid, Disbursement Services, and gift funds. Additionally, management is in the process of creating a general scholarship application criteria to be in alignment with respective MDUs, and developing necessary processes and applicable based on the study of best practices.</p>	<p>The Director of Financial Aid has been allocated to hire an Accountant focused on scholarship disbursement and gift funds. Additionally, management is in the process of creating a general scholarship application criteria to be in alignment with respective MDUs, and developing necessary processes and applicable based on the study of best practices.</p>	Stephanie Holiday, VP for Student Affairs & Success	9/17/2018	Open
External	State Fire Marshal's Office	Fiscal Year 2017	RND1509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	<p>Traditions Hall</p> <p>Traditions Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.</p>	N/A	<p>Finding 1</p> <p>The third floor elevator lobby doors do not latch. NFA 1. Fire Code, Chapter 12.4.6.3.1 and 12.4.6.3.1(8)</p>	UNT will adjust closure.	NA	2/17/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND1509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	<p>Traditions Hall</p> <p>Traditions Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.</p>	N/A	<p>Finding 2</p> <p>Unsealed or improperly sealed penetrations are present in the following locations: - Room 373 ceiling penetrations - Room H205.4 inch conduit not sealed - Six electrical rooms throughout the building 3/4 inch conduit NFA 1. Fire Code, Chapter 12.7.15.1</p>	UNT will seal penetrations.	NA	2/17/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External (Co- Sourced)	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal (Co-Sourced)	PWC	Fiscal Year 2017	17-310 DAL	Governance and Regulatory Compliance	Scholarship Review	UNT Dallas	<p>1. Overall Governance of Scholarships Opportunities exist for strengthening internal control processes related to the management of scholarships.</p> <p>Donations are received by various departments at UNT Dallas & Scholarships to be awarded to students, an authorization form is than Financial Aid College of Law. If the funds are received by any department other than Financial Aid the UNT Dallas' Financial Aid & Scholarships office. While institutional scholarship decisions are automated, and external scholarships are selected by the donor and the system from the donor to the students. Donor scholarships are backed by a written gift agreement outlining the use of the funds. Note: Management was aware of concerns around Scholarship Committee and Sharing of requested that the review specifically address these areas. See below for details on the observations related to the management of scholarships</p> <p>1. Scholarships Compliance</p>	Moderate	<p>1.2.a. UNT Dallas Student Access and Success, along with the scholarship committee, which would be comprised of members from various departments, Student Access and Success, Advancement, Financial Aid & Scholarships, Leadership Programs, Academic Affairs, and Finance & Administration. This committee should establish a system of communication to departments receive pertinent information regarding related scholarships. Additionally, the committee should establish scholarships, establish a system for reviewing/updating policies and procedures on at least an annual basis.</p> <p>2a. Director of Financial Aid has been hired effective 9/1/2018. The position has been allocated to hire an Accountant focused on Scholarships, Financial Aid, and gift funds. Additionally, process of creating a general scholarship committee, updating policies, and alignment with respective MOUs, and developing necessary processes and procedure and policy if the study of best practices.</p>	Stephanie Holley, VP for Student Access & Success	9/1/2018	Open	
External	State Fire Marshal's Office	Fiscal Year 2017	RRO15098	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	<p>Traditions Hall Traditions Hall is a three-story existing dormitory. Features of fire protection include a complete fire alarm system, fire sprinkler system, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.</p>	N/A	<p>Firing 4 The third floor stairwell 3.2 panic bar lacks a label indicating the bar is UL listed fire exit hardware. NFPA 1, Fire Code, Chapter 14.3.3.4.2</p>	UNT will install fire rated device.	NA	2/1/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RRO15098	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	<p>Traditions Hall Traditions Hall is a three-story existing dormitory. Features of fire protection include a complete fire alarm system, fire sprinkler system, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.</p>	N/A	<p>Firing 5 Stairwells are missing the stairwell identification signs in the following locations: - Stairwell 2.5 - Stairwell 1.1 - Stairwell 1.2 NFPA 1, Fire Code, Chapter 10.1.2.3.</p>	UNT will add signage.	NA	3/1/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RRO15098	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	<p>Traditions Hall Traditions Hall is a three-story existing dormitory. Features of fire protection include a complete fire alarm system, fire sprinkler system, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.</p>	N/A	<p>Firing 6 In room 149 a new fire ceiling has been installed. The sprinkler heads have not been relocated below the new ceiling. NFPA 1, Fire Code, Chapter 4.5.8.1</p>	UNT will move sprinkler head into new ceiling.	NA	3/1/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RRO15098	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	<p>Traditions Hall Traditions Hall is a three-story existing dormitory. Features of fire protection include a complete fire alarm system, fire sprinkler system, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.</p>	N/A	<p>Firing 7 Elevator lobby fire doors are on electronic hold open devices that lack the required smoke detectors within five feet of the door. NFPA 1, Fire Code, Chapter 14.5.4.1.13</p>	Completed. UNT installed smoke detectors.	NA	11/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RRO15098	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	<p>Santa Fe Hall Santa Fe Hall is a three-story structure classified as a six-story dormitory. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.</p>	N/A	<p>Firing 1 The new fire sprinkler head in yellow tagged lobby December 2015. The state painter, not released or 5 year calibration. NFPA 1, Fire Code, Chapter 13.3.2</p>	Completed. UNT replaced gauges.	NA	11/23/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Santa Fe Hall is a three-story structure classified as existing apartment occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power.	N/A	Inspected or improperly sealed penetrations are present in the following locations: - Telephone room unsealed ceiling and floor penetrations - Cable TV room unsealed ceiling and floor penetrations - Room 333J unsealed ceiling and floor penetrations - Room 333K unsealed ceiling and floor penetrations - Room 333L unsealed ceiling and floor penetrations	UNT will seal penetrations.	NA	3/17/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Santa Fe Hall is a three-story structure classified as existing apartment occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power.	N/A	Emergency lights failed to operate when tested in the following locations: - Stairwell B third floor - Stairwell A third floor - Corridor by room 203 NFA 1.1 Fire Code, Chapter 4.5.6.1	UNT will repair or replace emergency lights.	NA	2/17/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Santa Fe Hall is a three-story structure classified as existing apartment occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power.	N/A	Sprinkler heads are missing escutcheons in the following areas: - Stairwell A third floor - Room 333J NFA 1.1 Fire Code, Chapter 4.5.6.1	UNT will install escutcheons.	NA	3/17/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Santa Fe Hall is a three-story structure classified as existing apartment occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power.	N/A	Fire doors in stairwell B on the first floor lack a tilt listed fire rating label or label from another recognized testing lab. NFA 1.1 Fire Code, Chapter 12.7.3.2.2	Install fire rated hardware	NA	5/17/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Santa Fe Hall is a three-story structure classified as existing apartment occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power.	N/A	Mechanical room and custodial closet are located off of stairwell enclosure. The mechanical room requires a one hour rated fire door separation from the exit enclosure NFA 1.1 Fire Code, Chapter 14.3.1.1, (9)10) and 14.3.1.9 (C)	UNT will evaluate the best course of action for completion.	NA	8/31/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Santa Fe Hall is a three-story structure classified as existing apartment occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power.	N/A	Storage located by room 227 has a single cylinder dead bolt lock installed with the key side located inside the room and a thumb latch on the exterior side. Occupants can be locked inside the room. NFA 1.1 Fire Code, Chapters 4.4.3.1.2, 4.4.5.2.1, and 4.4.5.2.3	UNT will reverse door hardware.	NA	2/17/2017	Closed
Internal (Co-Sourced)	PWC	Fiscal Year 2017	17-202 ISC	Governance and Regulatory Compliance	Financial Review of UNT HSC Reserves	UNT/HSC	1. Proprietary Upgrade Several IT system-related issues have resulted from the recent upgrade and subsequent chart of accounts conversion, causing HSC colleges, and departments to ineffectively monitor their accounts. As part of the Peoplesoft system upgrade that went live on March 1, 2017.	Moderate	1.1. a. Used primarily for performing financial responsibilities, including managing budgets and recording expenses. b. for two projects out of the nine contracts reviewed, there were no errors identified in the financial statements. 2. Department of Health and Human Services that were inaccurately coded to a Health and Human Services Budget Envelope Accounting and provides additional training to HSC personnel responsible for account management to ensure proper use of the relevant account chart strings. Additionally, HSC should consider adding system control (i.e., data	1. HSC Finance and Planning and the HSC System Controller's Office will continue to work together to identify any processes that were not properly created by the Peoplesoft upgrade and conversion.	Geoffrey Scarpelli, Vice President for Planning, and Paula Welch, Associate Controller	8/31/2018	Open
Internal (Co-Sourced)	PWC	Fiscal Year 2017	17-202 ISC	Governance and Regulatory Compliance	Financial Review of UNT HSC Reserves	UNT/HSC	1. Proprietary Upgrade Several IT system-related issues have resulted from the recent upgrade and subsequent chart of accounts conversion, causing HSC colleges, and departments to ineffectively monitor their accounts. As part of the Peoplesoft system upgrade that went live on March 1, 2017.	Moderate	2. HSC Finance and Planning and the HSC System Controller's Office are currently developing a training program for HSC departments to increase the understanding on how to use the accounting system.	Geoffrey Scarpelli, Vice President for Planning, and Paula Welch, Associate Controller	10/25/2017	Closed	

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	RRO1509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Legends Hall is a four-story structure classified as existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.	N/A	Finding 2 The sprinkler system hydraulic calculation plate is missing from the fire room.	UNT will have hydraulic plates redone and installed.	NA	3/17/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RRO1509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Legends Hall is a four-story structure classified as existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.	N/A	Finding 3 The penthouse area lacks sprinkler system coverage and is used for combustible storage.	UNT will remove combustible storage.	NA	8/31/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-413 DAL	Governance and Regulatory Compliance	Community Counseling Clinic Audit	UNT Dallas	1. Protected Health Information During our review of the Clinic, we noted that the patient health information (PHI) is not protected sufficiently to ensure compliance with the Texas Medical Records Privacy Act (Texas House Bill 3007/ Texas Health & Safety Code § 131). 2. Graduate students were asked to purchase their own flash drive to store Clinic's PHI. Although graduate students were instructed in the course syllabus, to purchase an encrypted flash drive, no authorized personnel were notified of this requirement. The type of flash drive the students were using was not encrypted. The students were not notified of the completion of the course and the Clinic did not have a protocol or procedure to sanitize sensitive information on the students' flash drive to permanently delete patient PHI. 3. We were informed by the instructor that graduate students documented their session notes on their personal computers/tablets at home. The Clinic did not have a protocol or procedure for ensuring that the patient health records on students' personal computers/tablets were encrypted or properly sanitized after the sessions on their personal that and/or laptops since January 2014. 4. We were informed by the instructor that graduate students Specialist that graduate students were asked to record counseling sessions on their personal that and/or laptops since January 2014. 5. We were informed by the instructor that graduate students practice stopped at the beginning of Spring 2017. 6. Recorded sessions on the Clinic's recording equipment were stored at home.	High	Recommendations for the Provost: 1.1.a. Prohibit Clinic personnel (i.e. faculty, staff) and students from using any personal electronic and external devices (i.e. iPad, smartphones, laptops, flash and hard drives, etc.) to record or store PHI.	1.a. To ensure security we discontinued the use of personal electronic devices for recording sessions. We purchased four (4) University Mini PCs to be used in therapy rooms. We need to purchase additional university equipment for the remaining therapy rooms.	Betsy Stewart, Provost, Student of Academic Affairs	8/31/2019	Open
External	State Fire Marshal's Office	Fiscal Year 2017	RRO1509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	College Inn The College Inn consists of four three-story buildings classified as a mixed occupancy of existing apartment buildings, existing dormitory, existing assembly and existing business. Each dorm room and apartments have a door to the exterior. The upper floors have a concrete walkway that connects to a breezeway which provides egress from the units. Features of fire protection include a complete fire alarm system and portable extinguishers.	N/A	Finding 2 The mechanical chase areas have unsheathed or improperly sealed (2041 violation) NFA 1.1 Fire Code, Chapter 127.5.1.1	UNT will seal penetrations.	NA	8/31/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RRO1509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	College Inn The College Inn consists of four three-story buildings classified as a mixed occupancy of existing apartment buildings, existing dormitory, existing assembly and existing business. Each dorm room and apartments have a door to the exterior. The upper floors have a concrete walkway that connects to a breezeway which provides egress from the units. Features of fire protection include a complete fire alarm system and portable extinguishers.	N/A	Finding 3 The emergency light failed to operate when tested in the Common Center building. NFA 1.1 Fire Code, Chapter 4.5.8.1	UNT will repair or replace emergency light.	NA	2/17/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RRO1509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	College Inn The College Inn consists of four three-story buildings classified as a mixed occupancy of existing apartment buildings, existing dormitory, existing assembly and existing business. Each dorm room and apartments have a door to the exterior. The upper floors have a concrete walkway that connects to a breezeway which provides egress from the units. Features of fire protection include a complete fire alarm system and portable extinguishers.	N/A	Finding 4 The building lacks exterior emergency lighting for second floor egress. NFA 1.1 Fire Code, Chapter 14.13.1.1(1); and NFPA 101, Life Safety Code, Chapters 312.9 and 7.9	UNT will add exterior lighting and exit signage.	NA	8/31/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	College Inn The College Inn consists of four three-story buildings classified as a mixed occupancy of existing apartment buildings, existing dormitory, and existing business. Each dormitory and existing business apartment has a door to the exterior. The upper floors have a concrete walkway that connects to a breezeway which provides egress from the units. Features of fire protection include a complete fire alarm system and portable extinguishers.	N/A	Finding 5 The fire alarm control panel is indicating troubles on the system (Power supply) NFA 1.1 Fire Code, Chapter 4.5.6.1	UNT will repair power supply.	NA	2/1/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	College Inn The College Inn consists of four three-story buildings classified as a mixed occupancy of existing apartment buildings, existing dormitory, and existing business. Each dormitory and existing business apartment has a door to the exterior. The upper floors have a concrete walkway that connects to a breezeway which provides egress from the units. Features of fire protection include a complete fire alarm system and portable extinguishers.	N/A	Finding 6 The computing center east exit store front glass doors have fire alarm installed on the doors making the doors blind in with the fire alarm system. The doors have fire curtains installed. NFA 1.1 Fire Code, Chapter 14.4.2.1	Completed. UNT removed curtains.	NA	11/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	College Inn The College Inn consists of four three-story buildings classified as a mixed occupancy of existing apartment buildings, existing dormitory, and existing business. Each dormitory and existing business apartment has a door to the exterior. The upper floors have a concrete walkway that connects to a breezeway which provides egress from the units. Features of fire protection include a complete fire alarm system and portable extinguishers.	N/A	Finding 7 Documentation was not available at the time of the inspection for the fire alarm system. The fire alarm system has been tested and approved for vertical wall application. Carpet installed on walls or ceilings shall meet class A requirements and in accordance with the requirements of NFPA 1 Fire Code. Manufacturers documentation shall be supplied. NFPA 1 Fire Code. Manufacturers documentation shall be supplied. NFPA 1 approved testing methods and meets or exceeds the code standard. NFA 1.1 Fire Code, Chapter 12.5.5.1	UNT will evaluate the best course of action for completion.	NA	8/31/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building includes a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting units in the event of emergencies involving power loss.	N/A	Finding 1 Sprinkler protection is missing in the following locations. - Kitchen walk in cooler #2 no sprinkler protection - RE-ENT room second floor off mechanical room A/C3 no sprinkler protection - Twelve mechanical rooms lack sprinkler protection under duct work - Fire alarm control panel is not providing adequate sprinkler coverage NFA 1.1 Fire Code, Chapter 13.3.1.2	UNT will add sprinkler protection.	NA	2/1/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting units in the event of emergencies involving power loss.	N/A	Finding 2 The east, west, north and south stairwells on floors one through three have a chase in the stairwell with cover plates that lack the required 1 hour fire rating. (14 locations) NFA 1.1 Fire Code, Chapter 14.3.1(1)	UNT will replace access panels w/ fire rated panels.	NA	5/1/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting units in the event of emergencies involving power loss.	N/A	Finding 3 The corridor smoke door by room 612 does not close properly. NFA 1.1 Fire Code, Chapter 4.5.6.1	UNT will adjust closure.	NA	2/1/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting units in the event of emergencies involving power loss.	N/A	Finding 4 The stairwells have HVAC vents penetrating the exit enclosure. NFA 1.1 Fire Code, Chapter 14.3.1(10)	Completed. UNT sealed vents.	NA	11/23/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is equipped with a fire alarm system, fire sprinkler system, portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting units in the event of emergency power loss.	N/A	Finding 5 The first floor east stair well door has holes in the door from a previous hinge. NFPA 1.1 Fire Code, Chapter 12.4.6.3.2(1) (f)	UNT will seal holes in door or replace door.	N/A	2/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-413 DAL	Governance and Regulatory Compliance	Community Counseling Clinic Audit	UNT Dallas	1. Protected Health Information During our review of the Clinic, we noted that the patient health information (PHI) is not protected sufficiently to ensure compliance with the Health Information Privacy Act (Texas House Bill 3507/ Texas Health & Safety Code § 191). Specifically, we noted the following: a. Graduate students were asked to purchase their own flash drive to store their personal information. The students were not informed of the risks of using a personal flash drive, nor instructed on how to properly use a flash drive. b. The students kept their own flash drive after the completion of the course and the Clinic did not have a protocol or procedure to retrieve the flash drive. c. We were informed by the Interim Director that graduates students documented their session notes on their personal computers/laptops at home. The Clinic did not have a protocol or procedure for ensuring the security of the information stored on the students' flash drives to permanently delete patient PHI. d. We were informed by the Interim Director that graduates students documented their session notes on their personal computers/laptops at home. The Clinic did not have a protocol or procedure for ensuring the security of the information stored on the students' flash drives to permanently delete patient PHI. e. We were informed by the Interim Director and the Administrative Director that the Clinic's recording equipment were not operating. This information was reported to the State Fire Marshal's Office in January 2014. f. Recorded sessions on the Clinic's recording equipment were stored on the Clinic's recording equipment.	High	Recommendations for the Provost: 1.1.b. Require that all patient PHI to be stored on encrypted University issued devices. Create a log to document all PHI that is stored on personal devices and reconcile what it is documented on the log to ensure all devices have been returned.	1b. We worked with the University of North Texas at Dallas OIT department to implement recording equipment and secure recording software. Paragon, which works well for general recording and review. The Paragon data is encrypted in both transfer and resting state. OIT will be responsible for the secure storage of the data. We will create a log to document all University devices checked out to faculty, staff, or students and reconcile what it is documented on the log with OIT to ensure all devices are sanitized once a semester. We will work with OIT to ensure all devices are sanitized once a semester.	Betsy Stewart, Provost/ Executive Vice President of Academic Affairs	6/31/2019	Open
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is equipped with a fire alarm system, fire sprinkler system, portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting units in the event of emergency power loss.	N/A	Finding 7 Unable to verify that the building is supplied with the required emergency lighting. NFPA 1.1 Fire Code, Chapter 14.1.3.1.1(1)	UNT will verify that the building is supplied with emergency lighting.	N/A	2/1/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is equipped with a fire alarm system, fire sprinkler system, portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting units in the event of emergency power loss.	N/A	Finding 8 In the kitchen walk in cooler number 1 spray foam is on the sprinkler head. NFPA 1.1 Fire Code, Chapter 13.3.3.2	UNT will replace sprinkler head fixture.	N/A	2/1/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is equipped with a fire alarm system, fire sprinkler system, portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting units in the event of emergency power loss.	N/A	Finding 9 The kitchen commercial cooking appliances wet chemical suppression system has an enclosed appliance with a discharge nozzle located above it. The existing appliances have been replaced with new appliances. The new appliances have been covered with any open equipment. Upon discharge of the system this nozzle will spray wet chemical on the floor. NFPA 1.1 Fire Code, Chapter 4.5.8.1	UNT will evaluate the best course of action for completion.	N/A	6/31/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-413 DAL	Governance and Regulatory Compliance	Community Counseling Clinic Audit	UNT Dallas	<p>1. Protected Health Information During our review of the Clinic, we noted that the patient health information (PHI) is not protected sufficiently to ensure compliance with the Health Information Privacy Act (Texas House Bill 3507 Texas Health & Safety Code § 191). Specifically, we noted the following: a. Graduate students were asked to purchase their own flash drive to store their work. The Clinic did not have a protocol or procedure for ensuring that the flash drives were properly sanitized after the students use them. b. We were informed by the Interim Director that graduates students documented their session notes on their personal computers/laptops at home. The Clinic did not have a protocol or procedure for ensuring that the information on the personal computers/laptops was properly encrypted or otherwise protected. c. We were informed by the Interim Director and the Administrative Services Director that the Clinic's recording equipment were not operating. This practice stopped at the beginning of Spring 2017 semester. d. Recorded sessions on the Clinic's recording equipment were stored on a hard drive.</p>	High	<p>Recommendations for the proctor: 1.1. Develop medical record privacy guidelines for Clinic personnel (i.e. faculty, staff) and students to help ensure compliance with the Texas Medical Records Privacy Act. 1.2. Develop a protocol for ensuring that the flash drives are properly sanitized after the students use them. 1.3. Develop a protocol for ensuring that the information on the personal computers/laptops is properly encrypted or otherwise protected. 1.4. Develop a protocol for ensuring that the Clinic's recording equipment are properly maintained and operating.</p>	<p>1.1. Counseling faculty are reviewing current Masters and Practicum handbooks and will develop medical record privacy guidelines that align with the Texas Medical Records Privacy Act for all faculty, staff, and students. We will make sure the guidelines are included in both the Counseling program's Masters Handbook and the Practicum Handbook.</p>	Bethy Stewart, Provost/ Executive Vice President of Academic Affairs	8/31/2019	Open
External	State Fire Marshal's Office	Fiscal Year 2017	RRO15098	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	<p>West Hall West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, fire sprinkler system and fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting units in the event of emergencies involving power loss.</p>	N/A	<p>Finding 11 The main mechanical room has an open electrical splice box. NFPA 1.1 Fire Code, Chapter 11.1.1.0</p>	<p>UNT will replace cover.</p>	NA	2/17/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RRO15098	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	<p>McCormell Hall McCormell Hall is a three-story structure classified as a mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire extinguishers, fire sprinkler system, fire extinguishers and illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.</p>	N/A	<p>Finding 1 Corridor smoke or fire doors in the following locations are held in the open position by electric hold open devices but lack the required smoke detectors located within five feet of the doors. -Room 101 -Room 102 -Room 103 -Room 104 -Room 105 -Room 106 -Room 107 -Room 108 -Room 109 -Room 110 -Room 111 -Room 112 -Room 113 -Room 114 -Room 115 -Room 116 -Room 117 -Room 118 -Room 119 -Room 120 -Room 121 -Room 122 -Room 123 -Room 124 -Room 125 -Room 126 -Room 127 -Room 128 -Room 129 -Room 130 -Room 131 -Room 132 -Room 133 -Room 134 -Room 135 -Room 136 -Room 137 -Room 138 -Room 139 -Room 140 -Room 141 -Room 142 -Room 143 -Room 144 -Room 145 -Room 146 -Room 147 -Room 148 -Room 149 -Room 150 -Room 151 -Room 152 -Room 153 -Room 154 -Room 155 -Room 156 -Room 157 -Room 158 -Room 159 -Room 160 -Room 161 -Room 162 -Room 163 -Room 164 -Room 165 -Room 166 -Room 167 -Room 168 -Room 169 -Room 170 -Room 171 -Room 172 -Room 173 -Room 174 -Room 175 -Room 176 -Room 177 -Room 178 -Room 179 -Room 180 -Room 181 -Room 182 -Room 183 -Room 184 -Room 185 -Room 186 -Room 187 -Room 188 -Room 189 -Room 190 -Room 191 -Room 192 -Room 193 -Room 194 -Room 195 -Room 196 -Room 197 -Room 198 -Room 199 -Room 200 -Room 201 -Room 202 -Room 203 -Room 204 -Room 205 -Room 206 -Room 207 -Room 208 -Room 209 -Room 210 -Room 211 -Room 212 -Room 213 -Room 214 -Room 215 -Room 216 -Room 217 -Room 218 -Room 219 -Room 220 -Room 221 -Room 222 -Room 223 -Room 224 -Room 225 -Room 226 -Room 227 -Room 228 -Room 229 -Room 230 -Room 231 -Room 232 -Room 233 -Room 234 -Room 235 -Room 236 -Room 237 -Room 238 -Room 239 -Room 240 -Room 241 -Room 242 -Room 243 -Room 244 -Room 245 -Room 246 -Room 247 -Room 248 -Room 249 -Room 250 -Room 251 -Room 252 -Room 253 -Room 254 -Room 255 -Room 256 -Room 257 -Room 258 -Room 259 -Room 260 -Room 261 -Room 262 -Room 263 -Room 264 -Room 265 -Room 266 -Room 267 -Room 268 -Room 269 -Room 270 -Room 271 -Room 272 -Room 273 -Room 274 -Room 275 -Room 276 -Room 277 -Room 278 -Room 279 -Room 280 -Room 281 -Room 282 -Room 283 -Room 284 -Room 285 -Room 286 -Room 287 -Room 288 -Room 289 -Room 290 -Room 291 -Room 292 -Room 293 -Room 294 -Room 295 -Room 296 -Room 297 -Room 298 -Room 299 -Room 300 -Room 301 -Room 302 -Room 303 -Room 304 -Room 305 -Room 306 -Room 307 -Room 308 -Room 309 -Room 310 -Room 311 -Room 312 -Room 313 -Room 314 -Room 315 -Room 316 -Room 317 -Room 318 -Room 319 -Room 320 -Room 321 -Room 322 -Room 323 -Room 324 -Room 325 -Room 326 -Room 327 -Room 328 -Room 329 -Room 330 -Room 331 -Room 332 -Room 333 -Room 334 -Room 335 -Room 336 -Room 337 -Room 338 -Room 339 -Room 340 -Room 341 -Room 342 -Room 343 -Room 344 -Room 345 -Room 346 -Room 347 -Room 348 -Room 349 -Room 350 -Room 351 -Room 352 -Room 353 -Room 354 -Room 355 -Room 356 -Room 357 -Room 358 -Room 359 -Room 360 -Room 361 -Room 362 -Room 363 -Room 364 -Room 365 -Room 366 -Room 367 -Room 368 -Room 369 -Room 370 -Room 371 -Room 372 -Room 373 -Room 374 -Room 375 -Room 376 -Room 377 -Room 378 -Room 379 -Room 380 -Room 381 -Room 382 -Room 383 -Room 384 -Room 385 -Room 386 -Room 387 -Room 388 -Room 389 -Room 390 -Room 391 -Room 392 -Room 393 -Room 394 -Room 395 -Room 396 -Room 397 -Room 398 -Room 399 -Room 400 -Room 401 -Room 402 -Room 403 -Room 404 -Room 405 -Room 406 -Room 407 -Room 408 -Room 409 -Room 410 -Room 411 -Room 412 -Room 413 -Room 414 -Room 415 -Room 416 -Room 417 -Room 418 -Room 419 -Room 420 -Room 421 -Room 422 -Room 423 -Room 424 -Room 425 -Room 426 -Room 427 -Room 428 -Room 429 -Room 430 -Room 431 -Room 432 -Room 433 -Room 434 -Room 435 -Room 436 -Room 437 -Room 438 -Room 439 -Room 440 -Room 441 -Room 442 -Room 443 -Room 444 -Room 445 -Room 446 -Room 447 -Room 448 -Room 449 -Room 450 -Room 451 -Room 452 -Room 453 -Room 454 -Room 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555 -Room 556 -Room 557 -Room 558 -Room 559 -Room 560 -Room 561 -Room 562 -Room 563 -Room 564 -Room 565 -Room 566 -Room 567 -Room 568 -Room 569 -Room 570 -Room 571 -Room 572 -Room 573 -Room 574 -Room 575 -Room 576 -Room 577 -Room 578 -Room 579 -Room 580 -Room 581 -Room 582 -Room 583 -Room 584 -Room 585 -Room 586 -Room 587 -Room 588 -Room 589 -Room 590 -Room 591 -Room 592 -Room 593 -Room 594 -Room 595 -Room 596 -Room 597 -Room 598 -Room 599 -Room 600 -Room 601 -Room 602 -Room 603 -Room 604 -Room 605 -Room 606 -Room 607 -Room 608 -Room 609 -Room 610 -Room 611 -Room 612 -Room 613 -Room 614 -Room 615 -Room 616 -Room 617 -Room 618 -Room 619 -Room 620 -Room 621 -Room 622 -Room 623 -Room 624 -Room 625 -Room 626 -Room 627 -Room 628 -Room 629 -Room 630 -Room 631 -Room 632 -Room 633 -Room 634 -Room 635 -Room 636 -Room 637 -Room 638 -Room 639 -Room 640 -Room 641 -Room 642 -Room 643 -Room 644 -Room 645 -Room 646 -Room 647 -Room 648 -Room 649 -Room 650 -Room 651 -Room 652 -Room 653 -Room 654 -Room 655 -Room 656 -Room 657 -Room 658 -Room 659 -Room 660 -Room 661 -Room 662 -Room 663 -Room 664 -Room 665 -Room 666 -Room 667 -Room 668 -Room 669 -Room 670 -Room 671 -Room 672 -Room 673 -Room 674 -Room 675 -Room 676 -Room 677 -Room 678 -Room 679 -Room 680 -Room 681 -Room 682 -Room 683 -Room 684 -Room 685 -Room 686 -Room 687 -Room 688 -Room 689 -Room 690 -Room 691 -Room 692 -Room 693 -Room 694 -Room 695 -Room 696 -Room 697 -Room 698 -Room 699 -Room 700 -Room 701 -Room 702 -Room 703 -Room 704 -Room 705 -Room 706 -Room 707 -Room 708 -Room 709 -Room 710 -Room 711 -Room 712 -Room 713 -Room 714 -Room 715 -Room 716 -Room 717 -Room 718 -Room 719 -Room 720 -Room 721 -Room 722 -Room 723 -Room 724 -Room 725 -Room 726 -Room 727 -Room 728 -Room 729 -Room 730 -Room 731 -Room 732 -Room 733 -Room 734 -Room 735 -Room 736 -Room 737 -Room 738 -Room 739 -Room 740 -Room 741 -Room 742 -Room 743 -Room 744 -Room 745 -Room 746 -Room 747 -Room 748 -Room 749 -Room 750 -Room 751 -Room 752 -Room 753 -Room 754 -Room 755 -Room 756 -Room 757 -Room 758 -Room 759 -Room 760 -Room 761 -Room 762 -Room 763 -Room 764 -Room 765 -Room 766 -Room 767 -Room 768 -Room 769 -Room 770 -Room 771 -Room 772 -Room 773 -Room 774 -Room 775 -Room 776 -Room 777 -Room 778 -Room 779 -Room 780 -Room 781 -Room 782 -Room 783 -Room 784 -Room 785 -Room 786 -Room 787 -Room 788 -Room 789 -Room 790 -Room 791 -Room 792 -Room 793 -Room 794 -Room 795 -Room 796 -Room 797 -Room 798 -Room 799 -Room 800 -Room 801 -Room 802 -Room 803 -Room 804 -Room 805 -Room 806 -Room 807 -Room 808 -Room 809 -Room 810 -Room 811 -Room 812 -Room 813 -Room 814 -Room 815 -Room 816 -Room 817 -Room 818 -Room 819 -Room 820 -Room 821 -Room 822 -Room 823 -Room 824 -Room 825 -Room 826 -Room 827 -Room 828 -Room 829 -Room 830 -Room 831 -Room 832 -Room 833 -Room 834 -Room 835 -Room 836 -Room 837 -Room 838 -Room 839 -Room 840 -Room 841 -Room 842 -Room 843 -Room 844 -Room 845 -Room 846 -Room 847 -Room 848 -Room 849 -Room 850 -Room 851 -Room 852 -Room 853 -Room 854 -Room 855 -Room 856 -Room 857 -Room 858 -Room 859 -Room 860 -Room 861 -Room 862 -Room 863 -Room 864 -Room 865 -Room 866 -Room 867 -Room 868 -Room 869 -Room 870 -Room 871 -Room 872 -Room 873 -Room 874 -Room 875 -Room 876 -Room 877 -Room 878 -Room 879 -Room 880 -Room 881 -Room 882 -Room 883 -Room 884 -Room 885 -Room 886 -Room 887 -Room 888 -Room 889 -Room 890 -Room 891 -Room 892 -Room 893 -Room 894 -Room 895 -Room 896 -Room 897 -Room 898 -Room 899 -Room 900 -Room 901 -Room 902 -Room 903 -Room 904 -Room 905 -Room 906 -Room 907 -Room 908 -Room 909 -Room 910 -Room 911 -Room 912 -Room 913 -Room 914 -Room 915 -Room 916 -Room 917 -Room 918 -Room 919 -Room 920 -Room 921 -Room 922 -Room 923 -Room 924 -Room 925 -Room 926 -Room 927 -Room 928 -Room 929 -Room 930 -Room 931 -Room 932 -Room 933 -Room 934 -Room 935 -Room 936 -Room 937 -Room 938 -Room 939 -Room 940 -Room 941 -Room 942 -Room 943 -Room 944 -Room 945 -Room 946 -Room 947 -Room 948 -Room 949 -Room 950 -Room 951 -Room 952 -Room 953 -Room 954 -Room 955 -Room 956 -Room 957 -Room 958 -Room 959 -Room 960 -Room 961 -Room 962 -Room 963 -Room 964 -Room 965 -Room 966 -Room 967 -Room 968 -Room 969 -Room 970 -Room 971 -Room 972 -Room 973 -Room 974 -Room 975 -Room 976 -Room 977 -Room 978 -Room 979 -Room 980 -Room 981 -Room 982 -Room 983 -Room 984 -Room 985 -Room 986 -Room 987 -Room 988 -Room 989 -Room 990 -Room 991 -Room 992 -Room 993 -Room 994 -Room 995 -Room 996 -Room 997 -Room 998 -Room 999 -Room 1000</p>	<p>Completed. UNT added smoke detectors.</p>	NA	1/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RRO15098	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	<p>McCormell Hall McCormell Hall is a three-story structure classified as a mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire extinguishers, fire sprinkler system, fire extinguishers and illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.</p>	N/A	<p>Finding 2 Unsealed or improperly sealed penetrations are present in the following locations: -Room AC7 Unsealed and unapproved yellow spray foam used -Room AC8 Unapproved yellow spray foam used -Room AC9 Unapproved yellow spray foam used -Room AC5 has an 18"x18" hole in wall covered with plywood and unapproved yellow spray foam used NFPA 1.1 Fire Code, Chapter 12.7.5.1</p>	<p>UNT will seal penetrations.</p>	NA	3/17/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RRO15098	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	<p>McCormell Hall McCormell Hall is a three-story structure classified as a mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire extinguishers, fire sprinkler system, fire extinguishers and illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.</p>	N/A	<p>Finding 3 Unable to verify building is equipped with the required emergency lighting. NFPA 1.1 Fire Code, Chapter 14.3.1.1(1); and NFPA 101, Life Safety Code, Chapter 29.2.9.1</p>	<p>Completed. UNT added stickers to future exiting emergency light.</p>	NA	1/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RRO15098	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	<p>McCormell Hall McCormell Hall is a three-story structure classified as a mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire extinguishers, fire sprinkler system, fire extinguishers and illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.</p>	N/A	<p>Finding 4 The MAC room lacks emergency lighting. NFPA 1.1 Fire Code, Chapter 14.3.1.1(1); and NFPA 101, Life Safety Code, Chapter 29.2.9.1</p>	<p>Completed. UNT added emergency lighting.</p>	NA	1/23/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	RRO15029B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	McCormell Hall is a three-story structure classified as a mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.	N/A	Finding 5 The first floor corridor fire doors have an electronic locking device that is UL listed for use on fire doors. NFPA 1.1 Fire Code, Chapter 14.5.2.6(6)	Completed. UNT advised rating.	NA	12/29/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RRO15029B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	McCormell Hall is a three-story structure classified as a mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.	N/A	Finding 6 The stage lighting wires have a section where the plug has been pulled away from the outlet protective shield exposing the wiring. NFPA 1.1 Fire Code, Chapter 11.1.1.2	UNT will replace wiring.	NA	2/17/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RRO15029B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	McCormell Hall is a three-story structure classified as a mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.	N/A	Finding 7 The stand-pipe system lacks an annual inspection tag. NFPA 1.1 Fire Code, Chapter 13.2.3.3	UNT will inspect stand-pipe system.	NA	3/17/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-413 DAL	Governance and Regulatory Compliance	Community Counseling Clinic Audit	UNT Dallas	1. Protected Health Information During our review of the Clinic, we noted that the patient health information (PHI) is not protected sufficiently to ensure compliance with the Health Information Privacy Act (Texas House Bill 3507/ Texas Health & Safety Code § 191). Specifically, we noted the following: a. Graduate students were asked to purchase their own flash drive to store their session notes. The students were not informed of the Clinic's policies, to purchase encrypted flash drive, nor authorized Clinic personnel (i.e. facility staff) verified what type of flash drive the students were using. The students kept their own flash drive after the completion of the course and the Clinic did not have a protocol or procedure to ensure that the information on the students' flash drive to permanently delete patient PHI. b. We were informed by the Interim Director that graduate students documented their session notes on their personal computers/laptops at home. The Clinic did not have a protocol or procedure for ensuring that the information on their personal computers/laptops was encrypted when the Clinic's recording equipment were not operating. This practice stopped at the beginning of Spring 2017 semester. c. We were informed by the Interim Director and the Administrative Director that the Clinic's recording equipment were stored in a room that was not locked. d. Recorded sessions on the Clinic's recording equipment were stored on a hard drive in a room that was not locked.	High	1.1.c. Work with the Office of General Counsel to determine appropriate action in regards to reappropriate safeguarding of PHI in compliance with the Texas Medical Records Privacy Act. 1.1.d. We will develop procedure to certify the appropriate safeguarding of PHI. The Counseling Program Coordinator and the Dean of Human Services need to work with General Counsel to determine appropriate actions needed to safeguard PHI in accordance with Texas Medical Records Privacy Act.	Betsy Stewart, Provost/ Executive Vice President of Academic Affairs	6/31/2019	Open	
External	State Fire Marshal's Office	Fiscal Year 2017	RRO15029B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	McCormell Hall is a three-story structure classified as a mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.	N/A	Finding 9 Room ALADA is being used as a wood shop. Sawdust was observed on work benches and the floor. The room is located directly off an assembly space and lacks the required two hour rated construction separation between industrial occupancy and shop or other individual type occupancy. NFPA 1.1 Fire Code, Chapter 6.1.14.4.1	AHJ will need to determine outcome.	NA	2/17/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RRO15029B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	McCormell Hall is a three-story structure classified as a mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.	N/A	Finding 10 In room ACS permanent wiring has been abandoned in place, it is undetermined if the wiring is live or terminated. NFPA 1.1 Fire Code, Chapter 11.1.1.4	UNT will remove wiring.	NA	2/17/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Reviewed	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	RR015098	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	<p>McCormell Hall is a three-story structure classified as a mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, standpipe and portable fire extinguishers. The building is equipped with a generator for back-up power in the event of emergencies involving power loss.</p> <p>1. Protected Health Information During our review of the Clinic, we noted that the patient health information (PHI) is not protected sufficiently to ensure compliance with the Texas Medical Records Privacy Act (Texas House Bill 3300/ Texas Health & Safety Code § 131). A. Graduate students were asked to purchase their own flash drive to store Clinic's PHI. Although graduate students were instructed in the course syllabus, to purchase an encrypted flash drive, no authorized Clinic personnel (i.e. faculty, staff) verified what type of flash drive students were using. The student kept their own flash drive drive.</p>	N/A	<p>Finding 11 In McCormell Clinic the designated exit is marked with signage that states "DO NOT GO THROUGH THIS DOOR". NFPA 1, Fire Code, Chapter 4.5.6.1.</p>	Signage to read "Emergency Access Only"	NA	3/17/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-413 DAL	Governance and Regulatory Compliance	Community Counseling Clinic Audit	UNT Dallas	<p>1. Protected Health Information During our review of the Clinic, we noted that the patient health information (PHI) is not protected sufficiently to ensure compliance with the Texas Medical Records Privacy Act (Texas House Bill 3300/ Texas Health & Safety Code § 131). A. Graduate students were asked to purchase their own flash drive to store Clinic's PHI. Although graduate students were instructed in the course syllabus, to purchase an encrypted flash drive, no authorized Clinic personnel (i.e. faculty, staff) verified what type of flash drive students were using. The student kept their own flash drive drive.</p>	High	<p>Recommendations for the Provost: 1.1. Require Clinic personnel (i.e. faculty, staff) and students to lock the doors when no authorized personnel are present at the Clinic to prevent any unauthorized access to PHI.</p>	1. To ensure security we changed the locks on the entrance and exit doors in the Clinic to the Director's office. The Administrator's password is restricted to the Director's office. We have been provided access to the Clinic's database. We will need to get their identification cards activated with the campus police to gain access to the clinic, entrance and backdoor.	Betsy Stewart, Provost/ Academic Vice President of Academic Affairs	8/31/2019	Open
Internal	UNT System Internal Audit	Fiscal Year 2017	17-413 DAL	Governance and Regulatory Compliance	Community Counseling Clinic Audit	UNT Dallas	<p>2. Protected Health Information During our review of the Clinic, we noted that the patient health information (PHI) is not protected sufficiently to ensure compliance with the Texas Medical Records Privacy Act (Texas House Bill 3300/ Texas Health & Safety Code § 131). Specifically, we noted the following: A. Graduate students were asked to purchase their own flash drive to store Clinic's PHI. Although graduate students were instructed in the course syllabus, to purchase an encrypted flash drive, no authorized Clinic personnel (i.e. faculty, staff) verified what type of flash drive the students were using. The student kept their own flash drive after the completion of the course and the Clinic did not have a protocol or procedure to sanitize sensitive information on the students' flash drives.</p>	High	<p>Recommendations for the Provost: 1.1. Store graduate student workroom and PHI filing cabinet keys in a locked drawer which is only accessible to the Administrative Specialist and Clinic Director.</p>	1. To ensure security by faculty staff, students, no longer have access to the administrative assistants' office where keys to all locked file cabinets in the clinic are stored in a locked drawer. PHI is now stored in the back graduate student workroom in locked file cabinets that remain locked at all times. PHI files are only accessible to the Administrative Specialist and Clinic Director. The door to the graduate student workroom remains locked at all times.	Betsy Stewart, Provost/ Academic Vice President of Academic Affairs	8/31/2019	Open
External	State Fire Marshal's Office	Fiscal Year 2017	RR015098	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	<p>Bruce Hall is a four-story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.</p>	N/A	<p>Finding 2 Corridor smoke or fire doors in the following locations are held in the open position by electric hold open devices but lack the required smoke detectors located within five feet of the doors to activate door release in the event of a fire. 1. Corridor smoke door third floor by room A25 2. Corridor fire door by room A201 3. Corridor fire door by room B205 4. Corridor fire door by room B222</p>	Completed. Added smoke detectors.	NA	1/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR015098	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	<p>Bruce Hall is a four-story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.</p>	N/A	<p>Finding 3 Fire door assemblies in the following areas lack UL listed fire rating labels or labels from another recognized testing lab. - Fire door and frame fourth floor - Fire door frame second floor - Fire door frame third floor - Fire door frame fourth floor NFPA 1, Fire Code, Chapter 12.7.3.2.2 and 12.7.3.1.</p>	UNT will label doors.	NA	8/31/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Reviewed	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	N/A	Finding 8 Fire and smoke doors in the following areas do not close properly. - Corridor smoke door by room A325 - Fourth floor stairwell fire door "D" wing - Near A201 - Near A202 - Near A201 NPA 1.1 Fire Code, Chapter 12.9.1.1, 12.4.6.9.1, and Finding 9 The fire alarm control panel is displaying system troubles. NPA 1.1 Fire Code, Chapter 4.5.8.1.	UNT will adjust doors.	NA	2/1/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	N/A	Finding 10 The kitchen UL 300 wet chemical fire suppression system for the Comb oven and grill is red tagged since December of 2015, the tag states "no electric shutdown". NPA 1.1 Fire Code, Chapter 36.4.6.1	Completed. UNT cleared panel trouble codes.	NA	11/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	N/A	Finding 11 The kitchen fryer unit is on wheels and lacks an approved fire suppression system. NPA 1.1 Fire Code, Chapter 50.6.1.2.3.1.	Shut lift added. Contacting Fire Systems for red tag	NA	2/1/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	N/A	Finding 12 Caterina fire doors in the following locations are missing vertical bottom rods and floor latching points or fire pins. - North east emergency exit - South East Emergency exit - Near A201 - Near A202 NPA 1.1 Fire Code, Chapter 4.6.3.1	Seal Tech will add stops to designate position of equipment.	NA	3/1/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	N/A	Finding 13 The portable fire extinguisher located by the dishwasher in the kitchen area is not in its proper design location. NPA 1.1 Fire Code, Chapter 4.5.8.1	UNT will install vertical bottom rods and add floor latching points.	NA	4/7/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	N/A	Finding 14 The basement stairwell from the kitchen area lacks a rated enclosure. The stairs are open at the top and bottom. Currently only means of egress from the basement area (see FINDING 1) NPA 1.1 Fire Code, Chapter 14.6.1.1, and 14.3.1	Completed. UNT replaced pin.	NA	11/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	N/A	Finding 15 TWA 7204-music basement egress was part of this project-completed last year. Just received final proposal for Kitchen Basement Egress from contractor and are in process of briefing statement and requesting PO	TWA 7204-music basement egress was part of this project-completed last year. Just received final proposal for Kitchen Basement Egress from contractor and are in process of briefing statement and requesting PO	NA	5/1/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	RR01509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	N/A	Finding 15 In the Jon Collins room there is a battery operated smoke alarm that is not working and does not appear to be tested. NFPA 1, Fire Code, Chapter 14.6.1.1	UNT will repair or replace smoke detector.	NA	2/1/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR01509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	N/A	Finding 16 The Jon Collins room exterior double exit doors have the right side leaf locked with dead bolts and the right side door leaf only opens inward. The door opening shall not be less than 28 inches clear width. NFPA 1, Fire Code, Chapter 14.8.3.4.1.2	Completed.	NA	12/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR01509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	N/A	Finding 17 The Jon Collins room locks an illuminated exit sign over the door leading to the egress corridor. NFPA 1, Fire Code, Chapter 14.1.4.1.2.1	UNT will install exit sign over door.	NA	2/1/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR01509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	N/A	Finding 18 At starwell 1.1 on the first floor of "X" wing, the double fire doors are missing the center mullion ending the doors unable to close. NFPA 1, Fire Code, Chapter 12.4.6.9.1 and 12.4.6.9.2(4)	Completed.	NA	11/23/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR01509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	N/A	Finding 19 An extension cord is used as a replacement for permanent wiring on the second floor in the "X" wing IT closet server rack. NFPA 1, Fire Code, Chapter 11.1.1.6	UNT will develop a permanent solution.	NA	3/1/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR01509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	N/A	Finding 20 Electrical splice box are missing covers in the following: - B wing janitorial closet - Storage closet near A211 NFPA 1, Fire Code, Chapter 11.1.1.10	UNT will replace missing covers.	NA	2/1/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR01509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Bruce Hall is a four story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	N/A	Finding 21 A vent has been installed in the bottom of fire rated door of the laundry room. NFPA 1, Fire Code, Chapter 12.4.6.9.1 and 12.4.6.9.2(10)	UNT will replace door.	NA	5/1/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Complaint Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	US Department of Justice	Fiscal Year 2017	NA	Governance and Regulatory Compliance	National Institute of Justice (NIJ) Capacity Enhancement and Backlog Reduction Program Desk Review	UNTS/DC	None	NA	None	NA	NA	NA	N/A
External	State Fire Marshal's Office	Fiscal Year 2017	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 10 Room 135A has a sprinkler head loaded with dust. NFPA 1, Fire Code, Chapter 4.5.8.1	Facilities will remove dust.	NA	9/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 11 Stairwell B on the fourth floor is missing the stairwell fire alarm control panel. NFPA 1, Fire Code, Chapter 10.12.3.1	UNT will add the missing identification sign.	NA	9/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 12 The fire alarm control panel indicates a trouble on the system. NFPA 1, Fire Code, Chapter 4.5.8.1	UNT will evaluate the best course of action for completion.	NA	8/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 13 The corridor illuminated exit sign by room 360A is not operational. NFPA 1, Fire Code, Chapter 4.5.8.1	Facilities will repair exit sign.	NA	9/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 14 The corridor sprinkler head by room 238A is missing the escutcheon. NFPA 1, Fire Code, Chapter 4.5.8.1	UNT will replace escutcheon.	NA	8/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 15 The cafeteria has a posted occupant load of 203 people. The main entrance doors have keyer deadbolts with thumb latches. The doors are not secured with deadbolts or more shall be supplied with panic hardware or fire exit hardware only. NFPA 1, Fire Code, Chapter 14.5.3.4.2	Facilities will remove deadbolts and add either panic hardware or fire exit hardware.	NA	12/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 16 The following rooms have multi outlet adapters installed. # Room 225A # Room 237A # Room 238A NFPA 1, Fire Code, Chapter 11.1.5.2	Completed.	NA	NA	Closed

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly, features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 1.7 Room 302A has a ceiling fire missing the cover plate exposing electrical wiring. NFPA 1, Fire Code, Chapter 111.1.10	Facilities will replace the cover plate.	NA	8/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly, features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 1.8 Documentation was not available at the time of the inspection that the carpet installed on the walls in room 302A has been tested in accordance with the requirements of NFPA 1, Fire Code, Chapter 111.1.10. The manufacturer's documentation shall be supplied indicating the carpet has been tested in accordance with NFPA 1, approved methods for testing as per the code standard. NFPA 1, Fire Code, Chapter 111.1.10	UNT will evaluate the best course of action for completion.	NA	9/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly, features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 1.9 The fire extinguisher in the building has inspection tags that are not punched for month and year. (18 fire extinguishers) NFPA 1, Fire Code, Chapter 13.6.9.3.3; and Texas Administrative Code 28 Chapter 34.520D	Extinguisher was inspected and tag was added.	NA	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly, features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 2 The fire extinguisher in the building has inspection tags that are not punched for month and year. (18 fire extinguishers) NFPA 1, Fire Code, Chapter 13.6.9.3.3; and Texas Administrative Code 28 Chapter 34.520D	All extinguishers have been inspected and tagged.	NA	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly, features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 2.0 The fire extinguisher in the building has inspection tags that are not punched for month and year. (18 fire extinguishers) NFPA 1, Fire Code, Chapter 50.6.1.2.3.1	UNT will install wheel locating device.	NA	12/2/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly, features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 2.1 The fire extinguisher in the building has inspection tags that are not punched for month and year. (18 fire extinguishers) NFPA 1, Fire Code, Chapter 50.6.1.2.3.1	UNT will evaluate the best course of action for completion.	NA	8/7/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly, features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 2.2 The fire extinguisher in the building has inspection tags that are not punched for month and year. (18 fire extinguishers) NFPA 1, Fire Code, Chapter 60.2.1.1	UNT will evaluate the best course of action for completion.	NA	8/7/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly, features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 2.3 The Combustion unit has a flexible extension cord wired to the building. NFPA 1, Fire Code, Chapter 111.2	Facilities will replace extension cord with a permanent solution.	NA	9/7/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 2.4 The portable fire extinguisher located in the kitchen grill area lacks a current inspection tag. The last inspection was conducted in April 2014. NFPA 1, Fire Code, Chapter 4.5.8.1	Facilities inspected fire extinguisher and added tag.	NA	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 3.5 Access to the electrical panels in the dry storage room is blocked by boxes. NFPA 1, Fire Code, Chapter 11.1.2	UNT will remove boxes.	NA	8/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 3.6 The following locations have a hasp and pad lock installed on the exterior side of the doors. 1 Walk in cooler #1 (protein cooler) in the kitchen area. 2 Outside entrance to the boiler room by loading dock. NFPA 1, Fire Code, Chapter 14.3.2.1 and 14.3.2.3	UNT will remove locks from exterior.	NA	10/2/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 3.7 Boiler room located next to the boiler room off the building is not protected by the building fire sprinkler system. NFPA 1, Fire Code, Chapter 13.3.1.2 and 13.3.2.36.2	Facilities will install sprinkler head.	NA	12/2/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 3.8 The atridge system is blocked by carts. NFPA 1, Fire Code, Chapter 13.3.4	UNT will remove carts.	NA	8/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 3.9 The kitchen hydro-calculation plate is unsealable. NFPA 1, Fire Code, Chapter 13.3.2	Facilities will create a new plate.	NA	12/1/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 3 Laudry room 665A has a sprinkler head banded with duct and NFPA 1, Fire Code, Chapter 4.5.8.1	Facilities will remove duct and lint.	NA	9/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 3D Documentation was not available at the time of the inspection for the kitchen hydro-calculation plate. Documentation for NFPA 72A meet class C flame spread and smoke development requirements, is tested for vertical installation and is in accordance with the testing requirements of NFPA 1, Fire Code. Manufacturers documentation shall be submitted indicating the testing methods and meets or exceeds the code standard. NFPA 1, Fire Code 12.5.5.3	Facilities will provide documentation.	NA	9/7/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Reported	Fiscal Year Reported Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	Fiscal Year 2017	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 1 Room 621A has an electrical office box missing a cover. NFPA 1, Fire Code, Chapter 11.1.10	UNT will replace cover.	NA	8/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	Fiscal Year 2017	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 5 Room 621A has spring hinges that do not close the door. NFPA 1, Fire Code, Chapter 4.5.8.1	Facilities will adjust doors.	NA	9/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	Fiscal Year 2017	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 6 Exit door on the sixth floor has a door sweep installed that is missing the door frame/dish. NFPA 1, Fire Code, Chapter 12.4.6.9.2 (6)	Facilities will repair door sweep.	NA	8/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	Fiscal Year 2017	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 7 Egress corridors on floors two, three, four, five, six and seven have small holes in the ceiling due to the removal of IT wireless points. NFPA 1, Fire Code, Chapter 12.7.5.1	Facilities will properly fill holes.	NA	9/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	Fiscal Year 2017	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 8 Room 621A has an extension cord used as a replacement for a fire alarm system in the following locations: Room 431A Room 431A Room 431A NFPA 1, Fire Code, Chapter 20.8.2.4.1	UNT removed extension cord.	NA	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	Fiscal Year 2017	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	FINDING 9 The emergency egress floor plans are missing from the back of the room in the following locations: Room 431A Room 431A Room 431A NFPA 1, Fire Code, Chapter 20.8.2.4.1	Floor plans will be created and added to the back of the room doors.	NA	9/7/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-A is an eight-story high-rise, classified as a mixed occupancy of existing dormitory and existing business. Features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	<p>FINDING 1</p> <ul style="list-style-type: none"> Unsealed or improperly sealed penetrations are present in the following locations: <ul style="list-style-type: none"> Room 4743 Several unsealed penetrations Room 4763A Several unsealed penetrations Mechanical room 634A Several unsealed penetrations Room 634B Several unsealed penetrations Electrical room next to 641A floor conduit, sealed with non-fire rated yellow spray foam used Room 631A Floor penetrations Mechanical room 555A non-fire rated yellow spray foam used Room 555B non-fire rated yellow spray foam used Room 511A non-fire rated yellow spray foam used Room 511A Several unsealed penetrations Mechanical room 505A non-fire rated yellow spray foam used Room 4A floor conduit unsealed Room 4B floor conduit unsealed Mechanical room 443A non-fire rated yellow spray foam used Mechanical room 443A non-fire rated yellow spray foam used Electrical room next to 41A non-fire rated yellow spray foam used Room 362A non-fire rated yellow spray foam used Room 363B non-fire rated yellow spray foam used and sprinkler pipe not sealed Electrical room next to 313A non-fire rated yellow spray foam used Room 341A non-fire rated yellow spray foam used 	UNT will seal penetrations.	NA	5/1/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-B is an eight-story high-rise, classified as a mixed occupancy of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	<p>FINDING 1</p> <ul style="list-style-type: none"> Sprinkler heads are missing the escutcheons in the following locations: <ul style="list-style-type: none"> Room 801B Room 719B two heads Room 719B one head <p>NFPA 1, Fire Code, Chapter 4.5.8.1</p>	Facilities will replace missing escutcheons.	NA	9/1/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-B is an eight-story high-rise, classified as a mixed occupancy of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	<p>FINDING 10</p> <ul style="list-style-type: none"> Room 801B, discharge into the building interior, on the first floor. Not less than fifty percent of the egress shall discharge directly to the exterior of the building. <p>NFPA 1, Fire Code, Chapter 14.1.2(1)</p>	UNT will evaluate the best course of action for completion.	NA	8/1/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-B is an eight-story high-rise, classified as a mixed occupancy of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	<p>FINDING 2</p> <ul style="list-style-type: none"> The sprinkler heads in the following locations are loaded with lint: <ul style="list-style-type: none"> Laundry room 513B Laundry room 513B Laundry room 513B <p>NFPA 1, Fire Code, Chapter 4.5.8.1</p>	Facilities will remove the lint.	NA	9/1/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-B is an eight-story high-rise, classified as a mixed occupancy of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	<p>FINDING 3</p> <ul style="list-style-type: none"> Unsealed or improperly sealed penetrations are present in the following locations: <ul style="list-style-type: none"> Mechanical room 522B non-fire rated yellow spray foam used Mechanical room 522B non-fire rated yellow spray foam used Storage room 301B hole in ceiling Storage room 301B hole in ceiling <p>NFPA 1, Fire Code, Chapter 12.7.5.1</p>	Facilities will properly seal all penetrations.	NA	9/1/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RK015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building-B is an eight-story high-rise, classified as a mixed occupancy of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	<p>FINDING 4</p> <ul style="list-style-type: none"> The eighth floor corridor by stairwell E has a painted sprinkler head. <p>NFPA 1, Fire Code, Chapter 13.3.5.1.8</p>	UNT will remove paint from the sprinkler head.	NA	9/1/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal / External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2019	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas at Denton Residential	UNT	Kerr Hall Building B is an eight-story high-rise, classified as a mixed occupancy of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	<ul style="list-style-type: none"> Findings 5: The following locations have holes in the fire doors or are missing parts: <ul style="list-style-type: none"> Stairwell D sixth floor holes in door Stairwell E third floor hole in door Stairwell E third floor hole in door and late plate missing Stairwell D first floor hole in door and late plate missing NFPA 1. Fire Code, Chapters 12.7.4.6.9.1 and 12.4.6.9.2(11.4) 	Facilities will repair doors and replace parts.	NA	10/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas at Denton Residential	UNT	Kerr Hall Building B is an eight-story high-rise, classified as a mixed occupancy of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	<ul style="list-style-type: none"> Findings 6: Stairwell E on the fourth floor is missing the stairwell door. NFPA 1. Fire Code, Chapter 10.12.3.1 	Facilities will replace sign.	NA	9/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas at Denton Residential	UNT	Kerr Hall Building B is an eight-story high-rise, classified as a mixed occupancy of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	<ul style="list-style-type: none"> Findings 7: The glass double doors on the first floor separating the residential corridor from the main lobby area lack a 90 minute fire rating. Provide documentation that these doors are not required to have a fire rating. NFPA 1. Fire Code, Chapters 12.7.4.1.1 and 12.7.4.2 	UNT will provide documentation.	NA	12/7/2016	Closed
External	State Fire Marshal's Office	Fiscal Year 2019	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas at Denton Residential	UNT	Kerr Hall Building B is an eight-story high-rise, classified as a mixed occupancy of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	<ul style="list-style-type: none"> Findings 8: Room 2138 has a power strip plugged into a multi outlet adapter. NFPA 1. Fire Code, Chapter 11.1.1.6.2 	Power strip was removed from the multi outlet adapter.	NA	NA	Closed
External	State Fire Marshal's Office	Fiscal Year 2019	RR015029A	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas at Denton Residential	UNT	Kerr Hall Building B is an eight-story high-rise, classified as a mixed occupancy of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	NA	<ul style="list-style-type: none"> Findings 9: Fire Extinguisher cabinet fire extinguisher lacks a current inspection tag. The tamper seal is dated 2014. NFPA 1. Fire Code, Chapter 4.5.6.1 	Fire Extinguisher was inspected and tag was added.	NA	NA	Closed
External	State Auditor's Office	Fiscal Year 2017	17-314	Governance and Regulatory Compliance	State of Texas Federal Portion of the Statewide Single Audit Report for the fiscal year ended August 31, 2016	UNT	For 47 percent of 61 students tested, the University of North Texas (University) did not accurately verify certain required items on the students' FASAs, and it did not always update its records and request updated SIRS as required.	NA	<ul style="list-style-type: none"> Management and adequately verify all required FASAs information for students selected for verification and request updated SIRS when required. 	Management acknowledges and agrees with the findings and recommendations. Through analysis of the exceptions identified in the audit, the University will work to develop and implement the corrective action plan.	Deva Guman-Torres and Lucy Thompson	6/7/2016	Closed
External	State Auditor's Office	Fiscal Year 2019	17-314	Governance and Regulatory Compliance	State of Texas Federal Portion of the Statewide Single Audit Report for the fiscal year ended August 31, 2016	UNT	For 47 percent of 61 students tested, the University of North Texas (University) did not accurately verify certain required items on the students' FASAs, and it did not always update its records and request updated SIRS as required.	NA	<ul style="list-style-type: none"> Management acknowledges and agrees with the findings and recommendations. Through analysis of the exceptions identified in the audit, the University will work to develop and implement the corrective action plan. Management reviewed manual errors with the employees and made changes to improve its verification entry, review, and monitoring process of completed verifications. 	Management acknowledges and agrees with the findings and recommendations. Through analysis of the exceptions identified in the audit, the University will work to develop and implement the corrective action plan.	Deva Guman-Torres and Lucy Thompson	6/7/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Auditor's Office	Fiscal Year 2017	17-314	Governance and Regulatory Compliance	State of Texas Federal Portion of the Statewide Single-Audit Report for the Fiscal Year Ended August 31, 2016	UNT	The University of North Texas (University) did not correctly determine the 60 percent completion point for the Spring 2016 term.	NA	Accurately determine the number of days in scheduled breaks, and calculate returns of Title IV funds correctly based on the period of enrollment excluding scheduled breaks.	Management acknowledges and agrees with the findings and recommendations. Through analysis of the exceptions identified in the audit, the University will work to develop and implement the corrective action to further improve the process. The Office of the Registrar and the Office of Financial Aid updated its procedures to verify the accuracy of the number of days in scheduled breaks to ensure calculations for the Return of Title IV funds are accurate. The Office of Financial Aid updated its procedures to ensure Title IV funds are returned within the required time frames.	Bryan Heard, Melissa Boyer, and Lacey Thompson	7/1/2016	Closed
External	State Auditor's Office	Fiscal Year 2017	17-314	Governance and Regulatory Compliance	State of Texas Federal Portion of the Statewide Single-Audit Report for the Fiscal Year Ended August 31, 2016	UNT	The University of North Texas (University) did not correctly determine the 60 percent completion point for the Spring 2016 term.	NA	Return Title IV funds within required time frames.	Management acknowledges and agrees with the findings and recommendations. Through analysis of the exceptions identified in the audit, the University will work to develop and implement the corrective action to further improve the process. The Office of the Registrar and the Office of Financial Aid updated its procedures to verify the accuracy of the number of days in scheduled breaks to ensure calculations for the Return of Title IV funds are accurate. The Office of Financial Aid updated its procedures to ensure Title IV funds are returned within the required time frames.	Bryan Heard, Melissa Boyer, and Lacey Thompson	7/1/2016	Closed
External	State Auditor's Office	Fiscal Year 2017	17-314	Governance and Regulatory Compliance	State of Texas Federal Portion of the Statewide Single-Audit Report for the Fiscal Year Ended August 31, 2016	UNT	For 43 percent of 61 students tested who had a status change, the University did not report the status change to INSUDS in a timely manner.	NA	The University should report accurate status changes and effective dates to INSUDS in a timely manner.	Management is attentive to the U.S. Department of Education requirements associated with Student Status Changes. Management has implemented the following to ensure accurate reporting and timely reporting to the National Student Clearinghouse and the National Student Loan Data System for all students who have status changes: -New business procedures addressing the reporting of decreased enrollment The Office of the Registrar has implemented the following to ensure the timely and accurate reporting of enrollment: -New business procedures addressing the reporting of decreased enrollment On July 19, 2016, the facility submitted adequate analytical results for the Synthetic Instruction Learning Procedure (SILP) analysis that demonstrate the facility's compliance with the reporting requirements for the affected state. As the results are below the PCLs for all constituents of concern, the release is not subject to TRIP, and in concurrence with the TCEQ Remediation Division, no additional remedial activities are required. Therefore, the alleged violation is resolved.	Bryan Heard	12/7/2016	Closed
External	Texas Commission on Environmental Quality	Fiscal Year 2017	13B3302	Governance and Regulatory Compliance	Notice of Violation	UNT	Failure to prevent the unauthorized release of laboratory wastewater under the Science Research Building.	NA	The facility is required to determine the full extent of contamination and complete remedial actions, pursuant to the TCEQ Remediation Division's order. The facility is required to request to submit documentation that these actions have been completed, for review and approval, to the TCEQ RW Region Office.	Management is attentive to the U.S. Department of Education requirements associated with Student Status Changes. Management has implemented the following to ensure accurate reporting and timely reporting to the National Student Clearinghouse and the National Student Loan Data System for all students who have status changes: -New business procedures addressing the reporting of decreased enrollment The Office of the Registrar has implemented the following to ensure the timely and accurate reporting of enrollment: -New business procedures addressing the reporting of decreased enrollment On July 19, 2016, the facility submitted adequate analytical results for the Synthetic Instruction Learning Procedure (SILP) analysis that demonstrate the facility's compliance with the reporting requirements for the affected state. As the results are below the PCLs for all constituents of concern, the release is not subject to TRIP, and in concurrence with the TCEQ Remediation Division, no additional remedial activities are required. Therefore, the alleged violation is resolved.	Bryan Heard	NA	Closed
External	Texas Department of State Health Services	Fiscal Year 2017	2016005729	Governance and Regulatory Compliance	Incident Inspection	UNT	This notice is to acknowledge that the Texas Department of State Health Services (DSHS) conducted an inspection of or visited your facility on the date listed above. The information that has been gathered is subject to further department review, and you may receive additional correspondence as a result.	NA	No recommendations/issues.	Management is attentive to the U.S. Department of Education requirements associated with Student Status Changes. Management has implemented the following to ensure accurate reporting and timely reporting to the National Student Clearinghouse and the National Student Loan Data System for all students who have status changes: -New business procedures addressing the reporting of decreased enrollment The Office of the Registrar has implemented the following to ensure the timely and accurate reporting of enrollment: -New business procedures addressing the reporting of decreased enrollment On July 19, 2016, the facility submitted adequate analytical results for the Synthetic Instruction Learning Procedure (SILP) analysis that demonstrate the facility's compliance with the reporting requirements for the affected state. As the results are below the PCLs for all constituents of concern, the release is not subject to TRIP, and in concurrence with the TCEQ Remediation Division, no additional remedial activities are required. Therefore, the alleged violation is resolved.	NA	NA	N/A
External	CPRT	Fiscal Year 2017	NA	Research	Cancer Prevention and Control Program (CPRT) Specific Audit Report for year ended August 31, 2016	UNTHSC	In our opinion, the University of North Texas System complied, in all material aspects, with the requirements of the CPRT program and made no material effect on its CPRT program for the year ended August 31, 2016. This audit was outsourced to BDO, LLP.	NA	None	Management is attentive to the U.S. Department of Education requirements associated with Student Status Changes. Management has implemented the following to ensure accurate reporting and timely reporting to the National Student Clearinghouse and the National Student Loan Data System for all students who have status changes: -New business procedures addressing the reporting of decreased enrollment The Office of the Registrar has implemented the following to ensure the timely and accurate reporting of enrollment: -New business procedures addressing the reporting of decreased enrollment On July 19, 2016, the facility submitted adequate analytical results for the Synthetic Instruction Learning Procedure (SILP) analysis that demonstrate the facility's compliance with the reporting requirements for the affected state. As the results are below the PCLs for all constituents of concern, the release is not subject to TRIP, and in concurrence with the TCEQ Remediation Division, no additional remedial activities are required. Therefore, the alleged violation is resolved.	NA	NA	N/A
External	Accreditation Council for Pharmacy Education	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Review for Pharmacy Education Accreditation	UNTHSC	Accreditation Council for Pharmacy Education	NA	None	Management is attentive to the U.S. Department of Education requirements associated with Student Status Changes. Management has implemented the following to ensure accurate reporting and timely reporting to the National Student Clearinghouse and the National Student Loan Data System for all students who have status changes: -New business procedures addressing the reporting of decreased enrollment The Office of the Registrar has implemented the following to ensure the timely and accurate reporting of enrollment: -New business procedures addressing the reporting of decreased enrollment On July 19, 2016, the facility submitted adequate analytical results for the Synthetic Instruction Learning Procedure (SILP) analysis that demonstrate the facility's compliance with the reporting requirements for the affected state. As the results are below the PCLs for all constituents of concern, the release is not subject to TRIP, and in concurrence with the TCEQ Remediation Division, no additional remedial activities are required. Therefore, the alleged violation is resolved.	NA	NA	N/A
External	Texas Department of Licensing	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Boiler Inspections	UNTHSC	Boiler Inspections	NA	None	Management is attentive to the U.S. Department of Education requirements associated with Student Status Changes. Management has implemented the following to ensure accurate reporting and timely reporting to the National Student Clearinghouse and the National Student Loan Data System for all students who have status changes: -New business procedures addressing the reporting of decreased enrollment The Office of the Registrar has implemented the following to ensure the timely and accurate reporting of enrollment: -New business procedures addressing the reporting of decreased enrollment On July 19, 2016, the facility submitted adequate analytical results for the Synthetic Instruction Learning Procedure (SILP) analysis that demonstrate the facility's compliance with the reporting requirements for the affected state. As the results are below the PCLs for all constituents of concern, the release is not subject to TRIP, and in concurrence with the TCEQ Remediation Division, no additional remedial activities are required. Therefore, the alleged violation is resolved.	NA	NA	N/A

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status	
External	Communication Concepts	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Alarm and Emergency Communication System Inspection	UNTBSC	Fire Alarm and Emergency Communication System Inspection	NA	NA	NA	NA	NA	N/A	
External	State Office of Risk Management, AG	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Property All Risk Survey	UNT	<p>16-11-01 Electrical Preventative Maintenance - Conduct the following tests on liquid filled transformers according to NFPA 70:</p> <ol style="list-style-type: none"> Annual oil gas analysis Insulation resistance every 3 to 5 years Turn ratio test every 3 to 5 years Turn ratio test every 2 to 5 years 	NA	Thorough testing can detect deteriorating conditions before a failure occurs, allowing for corrective action to be taken to ensure the transformer functions properly.	Will consider options.	NA	NA	NA	Closed
External	State Office of Risk Management, AG	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Property All Risk Survey	UNT	<p>16-11-02 Roof Inspections - Develop an in-house roof inspection protocol that includes roof coverings, gutters, drains, ventilation and other roof-mounted equipment. Any foreign items such as bolts, tools, trash, etc. should be removed from the roof. The inspections should initially focus on identifying water ponding and cleaning drains.</p>	NA	The inspections should initially focus on identifying water ponding and cleaning drains. Several ponding areas were observed at the Performing Arts Center. It was noted that the reason for the ponding was due to blocked drains from lack of cleaning. The inspection program should extend to all roofs on the campus, focusing on the ones with blocked drain issues.	Will consider.	NA	NA	Closed	
External	State Office of Risk Management, AG	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Property All Risk Survey	UNT	<p>16-11-03 Flammable Liquids Cabinet (Radio TV film and performing arts building) - Inspect for leaks, spills, and other items etc. located in the stage work shop of the Radio, TV, Film, and Performing Arts building in flammable/combustible liquids storage cabinets meeting the requirements of NFPA 30.</p>	NA	Flammable and combustible liquids present a significant fire hazard. Large areas overhanging sprinker systems and resulting in significant property damage and interruption to business operations. Leaking the liquids in a storage cabinet lessens the effectiveness of the fire and protection systems. High voltage electrical equipment located in proximity to fire in the equipment, the agent inside the ABC extinguisher will immediately damage all of the equipment.	Will complete.	NA	NA	Closed	
External	State Office of Risk Management, AG	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Property All Risk Survey	UNT	<p>16-11-04 Clean Agent Extinguishers (Radio TV film and performing arts building) - Provide clean agent type extinguishers inside the control rooms and the server rooms of the TV and Film area according to NFPA 10 - Standard for Portable Fire Extinguishers.</p>	NA	High voltage electrical equipment located in proximity to fire in the equipment, the agent inside the ABC extinguisher will immediately damage all of the equipment.	Will consider.	NA	NA	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2017	17-413 DAL	Governance and Regulatory Compliance	Community Counseling Clinic Audit	UNT Dallas	<p>1. Protected Health Information</p> <p>During our review of the Clinic, we noted that the patient health information (PHI) is not protected sufficiently to ensure compliance with the Health Information Privacy Act (Texas House Bill 3507/ Texas Health & Safety Code § 181). Specifically, we noted the following:</p> <ol style="list-style-type: none"> Graduate students were asked to purchase their own flash drive to store Clinic's PHI. Although graduate students were instructed in the Clinic's PHI policy, the students were not given a protocol for the completion of the course and the Clinic did not have a protocol or procedure to ensure that the PHI is properly stored on the students' flash drives to accurately delete patient PHI. We were informed by the Interim Director that graduates students documented their session notes on their personal computers/laptops at home. The Clinic did not have a protocol or procedure for ensuring that the session notes were encrypted or properly stored after the semester ended. We were informed by the Interim Director and the Administrative Specialist that graduate students were asked to record counseling sessions on their personal computers/laptops at home. The practice stopped at the beginning of Spring 2017 semester. Recorded sessions on the Clinic's recording equipment were stored 	High	<p>Recommendations for the Provost:</p> <ol style="list-style-type: none"> Require all Clinic personnel (i.e. faculty, staff) and students working in the clinic to sign a written or electronic statement attesting to their understanding of the Clinic's PHI policy and their compliance in accordance with the Texas Medical Records Privacy Act. 	Th. Verifying compliance and training for counseling personnel, faculty, and students working in the clinic will be the responsibility of the Clinic Director and the Counseling Program Coordinator working with the Administrative Specialist. The administrative specialists will remain responsible for the completion of the training. We need to develop a procedure for administering confidentiality training and develop a process for attesting completion of training.	Betsy Stewart, Provost/ Executive Vice President of Academic Affairs	8/31/2019	Open	

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-413 DAL	Governance and Regulatory Compliance	Community Counseling Clinic Audit	UNT Dallas	<p>1. Protected Health Information</p> <p>During our review of the Clinic, we noted that the patient health information (PHI) is not protected sufficiently to ensure compliance with the Texas Medical Records Privacy Act (Texas House Bill 300/ Texas Health & Safety Code § 134).</p> <p>Specifically, we noted the following:</p> <p>a. Graduate students were asked to purchase their own flash drive to store Clinic's PHI. Although graduate students were instructed in the Clinic's PHI, staff verified what type of flash drive the students were using. The students kept their own flash drive after the completion of the course and the Clinic did not have a protocol or procedure to sanitize sensitive information on the students' flash drives.</p> <p>b. We were informed by the Interim Director that graduate students documented their session notes on their personal computers/laptops at home. The Clinic did not have a protocol or procedure for ensuring that personal computers/laptops were encrypted or properly sanitized after the semester ended.</p> <p>c. We were informed by the Interim Director and the Administrative Specialist that graduate students were asked to record counseling sessions on their personal iPads and/or laptops since January 2014 when the Clinic's recording equipment were not operating. This practice stopped at the beginning of Spring 2017 semester.</p> <p>d. Recorded sessions on the Clinic's recording equipment were stored in the Clinic's server.</p>	High	<p>Recommendations for the Provost:</p> <p>1.1.1. Develop a University policy regarding PHI privacy regulations and submit to the Office of General Counsel for review and approval.</p>	<p>1. Counseling faculty will work to develop policies and procedures regarding PHI privacy regulations. Once the documents are created we will submit them to the office of General Counsel for review and approval.</p>	Beth Stewart, Provost/ Executive Vice President of Academic Affairs	8/31/2019	Open
Internal	UNT System Internal Audit	Fiscal Year 2017	17-413 DAL	Governance and Regulatory Compliance	Community Counseling Clinic Audit	UNT Dallas	<p>1. Protected Health Information</p> <p>During our review of the Clinic, we noted that the patient health information (PHI) is not protected sufficiently to ensure compliance with the Texas Medical Records Privacy Act (Texas House Bill 300/ Texas Health & Safety Code § 134).</p> <p>Specifically, we noted the following:</p> <p>a. Graduate students were asked to purchase their own flash drive to store Clinic's PHI. Although graduate students were instructed in the Clinic's PHI, staff verified what type of flash drive the students were using. The students kept their own flash drive after the completion of the course and the Clinic did not have a protocol or procedure to sanitize sensitive information on the students' flash drives.</p> <p>b. We were informed by the Interim Director that graduate students documented their session notes on their personal computers/laptops at home. The Clinic did not have a protocol or procedure for ensuring that personal computers/laptops were encrypted or properly sanitized after the semester ended.</p> <p>c. We were informed by the Interim Director and the Administrative Specialist that graduate students were asked to record counseling sessions on their personal iPads and/or laptops since January 2014 when the Clinic's recording equipment were not operating. This practice stopped at the beginning of Spring 2017 semester.</p> <p>d. Recorded sessions on the Clinic's recording equipment were stored in the Clinic's server.</p>	High	<p>Recommendations for the Chief Financial Officer and the Director of Office of Information Technology:</p> <p>1.2.a. Sanitize and re-image all computer workstations and servers.</p>	<p>2a. Hard drives were pulled from the counseling clinic lab computers on September 25, 2017. OIT completed sanitizing according to current vendor's secure standard (DOD 2160.02) hard drive on October 4, 2017.</p>	Jim Main, Chief Financial Officer John Koon, Director of Information Technology (OIT)	8/31/2019	Open

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-413 DAL	Governance and Regulatory Compliance	Community Counseling Clinic Audit	UNT Dallas	<p>1. Protected Health Information</p> <p>During our review of the Clinic, we noted that the patient health information (PHI) is not protected sufficiently to ensure compliance with the Texas Medical Records Privacy Act (Texas House Bill 300/ Texas Health & Safety Code § 134).</p> <p>Specifically, we noted the following:</p> <p>a. Graduate students were asked to purchase their own flash drive to store Clinic's PHI. Although graduate students were instructed in the Clinic's PHI policy, staff did not verify what type of flash drive the students were using. This staff verified what type of flash drive the students were using. The students kept their own flash drive after the completion of the course and the Clinic did not have a protocol or procedure to sanitize sensitive information on the students' flash drives.</p> <p>b. We were informed by the Interim Director that graduate students documented their session notes on their personal computers/laptops at home. The Clinic did not have a protocol or procedure for ensuring that the students' personal computers/laptops were properly sanitized after the semester ended.</p> <p>c. We were informed by the Interim Director and the Administrative Specialist that graduate students were asked to record counseling sessions on their personal iPads and/or laptops since January 2014 when the Clinic's recording equipment were not operating. This practice stopped at the beginning of Spring 2017 semester.</p> <p>d. Recorded sessions on the Clinic's recording equipment were stored on the Clinic's servers.</p>	High	<p>Recommendations for the Chief Financial Officer and the Director of Office of Information Technology:</p> <p>1.2.a. Ensure default passwords are changed immediately upon acquisition.</p>	<p>2b. The former recording system, Sabert's hard drives was removed. On October 3, 2017 and were destroyed on October 6, 2017 to ensure security.</p>	Jim Main, Chief Financial Officer and Kevin Kocha, Director of Office of Information Technology (OIT)	8/31/2019	Open
Internal	UNT System Internal Audit	Fiscal Year 2017	17-413 DAL	Governance and Regulatory Compliance	Community Counseling Clinic Audit	UNT Dallas	<p>1. Protected Health Information</p> <p>During our review of the Clinic, we noted that the patient health information (PHI) is not protected sufficiently to ensure compliance with the Texas Medical Records Privacy Act (Texas House Bill 300/ Texas Health & Safety Code § 134).</p> <p>Specifically, we noted the following:</p> <p>a. Graduate students were asked to purchase their own flash drive to store Clinic's PHI. Although graduate students were instructed in the Clinic's PHI policy, staff did not verify what type of flash drive the students were using. This staff verified what type of flash drive the students were using. The students kept their own flash drive after the completion of the course and the Clinic did not have a protocol or procedure to sanitize sensitive information on the students' flash drives.</p> <p>b. We were informed by the Interim Director that graduate students documented their session notes on their personal computers/laptops at home. The Clinic did not have a protocol or procedure for ensuring that the students' personal computers/laptops were properly sanitized after the semester ended.</p> <p>c. We were informed by the Interim Director and the Administrative Specialist that graduate students were asked to record counseling sessions on their personal iPads and/or laptops since January 2014 when the Clinic's recording equipment were not operating. This practice stopped at the beginning of Spring 2017 semester.</p> <p>d. Recorded sessions on the Clinic's recording equipment were stored on the Clinic's servers.</p>	High	<p>Recommendations for the Chief Financial Officer and the Director of Office of Information Technology:</p> <p>1.2.c. All servers containing sensitive and confidential information should be set up on a secure network.</p>	<p>2c. To ensure security all computers will authenticate students at sign-in so that students use their university-issued computer account ID. All servers containing sensitive and confidential information should be set up on a secure network.</p>	Jim Main, Chief Financial Officer and Kevin Kocha, Director of Office of Information Technology (OIT)	8/31/2019	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-413 DAL	Governance and Regulatory Compliance	Community Counseling Clinic Audit	UNT Dallas	<p>1. Protected Health Information</p> <p>During our review of the Clinic, we noted that the patient health information (PHI) is not protected sufficiently to ensure compliance with the Texas Medical Records Privacy Act (Texas House Bill 3007 Texas Health & Safety Code § 134).</p> <p>2. Confidentiality</p> <p>Confidentiality was not being maintained. We noted that the Clinic had purchased their own flash drive to store Clinic's PHI. Although graduate students were instructed in the course syllabus to purchase an encrypted flash drive, no authorized Clinic personnel (i.e., faculty, staff) verified what type of flash drive was purchased. The Clinic did not have a protocol or procedure to sanitize sensitive information on the students' flash drive to permanently delete patient PHI.</p> <p>3. We were informed by the Interim Director that graduate students at home. The Clinic did not have a protocol or procedure for ensuring that the patient health records on students' personal computers/laptops were encrypted or properly sanitized after the device was returned to the Clinic.</p> <p>4. We were informed by the Interim Director and the Administrative Specialist that graduate students were asked to record counseling sessions on their personal iPad and/or laptops since January 2014 when the Clinic's recording equipment were not operating. This information was not included in the Clinic's records.</p> <p>5. Recorded sessions on the Clinic's recording equipment were stored on the production environment.</p> <p>6. No evidence was produced to show that segregation of duties existed during change management between the development and production environment.</p>	High	<p>Recommendation for the Chief Financial Officer, Dean for School of Human Services, and Director of Office of Information Technology to coordinate with UNT System Chief Information Security Officer to:</p> <p>1.3.a. Develop a written security plan to protect the data and technology used in Counseling Clinic. The plan should at a minimum include the following:</p> <ul style="list-style-type: none"> Relocate the server to the UNT Data Center utilizing secure communication protocols to access the data. Software to remove data from all computer workstations on a regular basis. Obtain all University issued devices from the Clinic and sanitize sensitive data at the end of every semester. Deactivate the Clinic's shared computer accounts and require all users to use their own personal accounts when logging into University issued computer account or unique ID while using the Clinic's workstations. Secure back-up and disaster recovery capabilities. 	<p>3a. We will collaborate with Charlotte Russell to ensure security standards and procedures are clearly documented. To ensure security, we will coordinate with the UNT System Chief Information Security Officer. We are working with the OIT department to ensure that all computer stations have "sleep freeze" software installed so that every time the machine starts it is wiped clean, and sanitized after each use. To ensure confidentiality, all files and devices used in the Clinic are issued to a secure workstation. We will work with OIT to ensure back-up and disaster recovery capabilities.</p>	Jim Main, Chief Financial Officer, Constance Lutz, Dean of School of Human Services, Kevin Roach, Director of Office of Information Technology in collaboration with Charlotte Russell, UNT System Chief Information Security Officer	8/31/2019	Open
Internal	UNT System Internal Audit	Fiscal Year 2017	16-109 HSC	Governance and Regulatory Compliance	UNTHSCIT Change Management	UNTHSC	<p>1. Segregation of Duties: Segregation of duties did not exist between the development of new code to bring the code into the production environment.</p> <p>No evidence was produced to show that segregation of duties existed during change management between the development and production environment.</p>	High	<p>Recommendations for Chief Information Officer (CISO):</p> <p>1.1. Strengthen controls around moving code changes into production by implementing a configuration management system, or if that is not feasible:</p> <ul style="list-style-type: none"> Designating more resources for development changes over critical applications. 	<p>We are adding resources/reassigning duties to expand the development pipeline to include Quality Assurance (QA). QA will review code before it is moved into Staging and Production. The addition of QA into the production pipeline for segregation of duties will occur in the second quarter of 2017.</p>	Anthony Tisserot, Director of Product Development and Engineering, Information Technology Services	6/30/2017 Rev. 08/31/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-412 UNT	Governance and Regulatory Compliance	College of Music Transition Audit	UNT	<p>1. The box offices in the College of Music are in non-compliance with Payment Card Industry Data Security Standard (PCI DSS).</p> <p>Comptisguard conducted a PCI DSS compliance review of UNT in May 2016. The report identified several areas of non-compliance with PCI DSS. The Music Performance Arts Center (MPAC), the Comptisguard PCI DSS compliance review report identified various instances of non-compliance with PCI DSS, including:</p> <ol style="list-style-type: none"> General use workstations being used for payment processing. Workstations not being updated to a monitoring program for point of interaction devices. Cardholder data being stored on the production environment. A need to verify that there is an annual check of compliance for their party service providers with whom cardholder data is shared. Improper communication with the Associate Dean for Operations. Improper communication with the Associate Dean for Operations. <p>The MPAC Business Manager said that he was not aware of any corrective action to address the issues identified during the review. In addition to the box office in the MPAC, the College of Music maintains a box office in Voertman Concert Hall. The Voertman Concert Hall box office was not included in the May 2016 Comptisguard PCI DSS review. Internal Audit observed the box office in the Voertman Concert Hall. Internal Audit determined that its configuration is similar to that of the box office in the MPAC.</p>	High	<p>Recommendations for C. Aaron Lamby, Associate Vice Chancellor and System Controller:</p> <p>1.1.a. Coordinate with the College of Music to correct the non-compliance with PCI DSS. The College of Music should conduct a PCI DSS compliance review during the Comptisguard PCI DSS compliance review.</p>	<p>1a. Management concurs with this finding and will coordinate with the Voertman Concert Hall box office to create a segregated payment system on the point of sale stations in the Marchion box office. Estimated completion date of September 29, 2017.</p> <p>1b. Management concurs with this finding and will coordinate with the Voertman Concert Hall box office to create a segregated payment system on the point of sale stations in the Marchion box office. Estimated completion date of September 29, 2017.</p>	C. Aaron Lamby, Associate Vice Chancellor for Finance and System Controller	12/31/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-112 UNT	Governance and Regulatory Compliance	College of Music Transition Audit	UNT	<p>1. The box offices in the College of Music are in non-compliance with Payment Card Industry Data Security Standard (PCI DSS). CompensGuard conducted a PCI DSS compliance review of UNT in May 2016. The review covered various areas, including the box office in the Music-Hon Perfoming Arts Center (MPAC). The CompensGuard PCI DSS compliance review report identified various instances of non-compliance with PCI DSS, including:</p> <ul style="list-style-type: none"> ii. No procedures in place for payment processing; iii. No procedures related to a monitoring program for point of interaction devices; and iv. A need to verify that there is an annual check of compliance for the MPAC. <p>Based on communication with the Associate Dean for Operations, MPAC Business Manager, and Network Manager, the College of Music did not receive the CompensGuard PCI DSS compliance review report. The MPAC Business Manager said that he was not aware of any PCI DSS issues identified during the CompensGuard PCI DSS review.</p> <p>In addition to the box office in the MPAC, the College of Music maintains a box office in Voerman Concert Hall. The Voerman Concert Hall was not audited by CompensGuard. The Network Manager at the Voerman Concert Hall and noted that its configuration is similar to that of the box office in the MPAC.</p>	High	<p>Recommendations for C. Aaron LeMay, Associate Vice Chancellor and System Controller:</p> <ul style="list-style-type: none"> i. Review PCI DSS compliance in the Voerman Concert Hall box office and coordinate with the College of Music to correct any issues identified. 	<p>i. Management agrees with this finding and will: ii. Create a segregated payment system on the point of sale stations in the Voerman box office. Estimated completion date of September 29, 2017. iii. Review PCI compliance in the College of Music Voerman Concert Hall. Estimated completion date of December 31, 2017. iv. Develop comprehensive controls to strengthen PCI compliance at the Voerman. This will be part of a campus wide effort. Estimated completion date of December 31, 2017.</p>	C. Aaron LeMay, Associate Vice Chancellor for Finance and System Controller	12/31/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	16-108 S15	Governance and Regulatory Compliance	Student Data Access Audit	UNT	<p>1. Unauthorized Users with Access</p> <p>75 unauthorized users had access to personal student data including cell phone numbers on February 3, 2017.</p> <p>Non-Employees with No Authorization (42)</p> <p>Internal Audit requested the authorization form for the access granted to non-employees. The authorization form is called the FERPA Training Completion and Request for SIS Access to View Basic Student Records Form (FERPA form).</p> <p>"Non-employees" as used here is defined as users that have no record in the HR database and no vendor authorization form with TSS.</p> <p>Internal Audit reviewed the authorization forms for the FERPA form. There were 42 instances where an authorization form could not be located.</p> <p>Former Employee Access: None Reviewed (28)</p> <p>Internal Audit worked with TSS to determine the employment status of all users with access and identified 29 users that had been former employees. The reason for the inappropriate access was the failure of the automated tool, as well as one case, oversight of a manual process.</p> <p>TSS will be responsible for the manual process of reviewing authorization forms upon a change of employment status in 2018. During the audit, it was discovered that the automated tool occasionally failed to</p>	High	<p>Recommendations for UNT Senior Director, Registrar:</p> <ul style="list-style-type: none"> 1.1. Separate the certification of completed FERPA training from the form to obtain access to student data, so that all users trained do not automatically receive access. 	<p>15. We agrees. The registry of offices will be updated current procedures and we will separate the certification of completed FERPA training from the form to obtain access to student data, so that all users trained do not automatically receive access.</p>	Lynn McGeeary, Registrar, UNT	Exp. Impl. Date: 12/15/2017 Revised Impl. Date: 3/1/2018	Closed
External	Texas Higher Education Coordinating Board	Fiscal Year 2017	NA	Research	Teacher Quality Award Desk Review	UNT	<p>1. CIDA #B43167, Award #L23124289, Teacher Quality, Category 2; Participant Costs: Supporting Documentation</p> <p>In accordance with OMB Circular A-21 Appendix A-C, "The accounting practices of individual colleges and universities must support the accumulation of costs as required by the principles, and must provide for adequate documentation to support costs charged to sponsored programs. The documentation must be sufficient to allow for the reimbursement. Reimbursement request was submitted for a total of \$98,54 however, \$99,35 was reimbursed.</p>	NA	<p>It is recommended that the University of the North Texas reimburse the THESB \$0.81 and tighten controls to ensure adequate documentation with future allowable Teacher Quality Grant expenses.</p>	NA	NA	Closed	

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	Texas Department of Family and Protective Services	Fiscal Year 2017	N/A	Research	Fiscal Year 2017 Fiscal Monitoring Report HIPPY contract #530-17-0016-00001	UNT	Programmatic Finding P03 (low an observation): Quality of Technical Assistance Stations in the Spring of 2017, DPFS PEL sought feedback from PEI-funded HIPPY sites regarding the quality of technical assistance from (9) sites implementing the HIPPY model, three sites (33%) indicated that they did not receive any technical assistance from UNT. Feedback reported by these sites included the following: "Local Profiling report. No findings." "None."	NA	Recommendation: UNT should submit a plan that details how sites will be trained in a timely manner in all areas necessary for program implementation. The plan should include the proposed training and ongoing support to the DPFS PEI. The plan should include specific protocols for response times, which will be negotiated with DPFS PEL. The plan should reference how any training/technical assistance that cannot occur will be provided to the sites. The plan should include how UNT will communicate to sites a plan to address the findings.	Carla Mowell, Director Texas HIPPY, and Keshia Bruno, Assistant Director TMHIPPY.	May 31, 2017 through September 1, 2017	N/A	
External	Texas Commission on Law Enforcement	Fiscal Year 2017	7103	Governance and Regulatory Compliance	Texas Commission on Law Enforcement Fiscal Profiling Report	UNT Dallas	No findings/deficiencies.	NA	None.	NA	NA	NA	N/A
External	Myers & Stauffer, LLC	Fiscal Year 2017	N/A	Governance and Regulatory Compliance	1115 Waiver - Telemonitoring Project Demonstration Year 4	UNT/ISC	No findings/deficiencies.	N/A	N/A	N/A	N/A	N/A	N/A
External	Myers & Stauffer, LLC	Fiscal Year 2017	N/A	Governance and Regulatory Compliance	1115 Waiver - Telemonitoring Project Demonstration Year 5	UNT/ISC	No findings/deficiencies.	N/A	N/A	N/A	N/A	N/A	N/A
External	Communication Concepts	Fiscal Year 2017	N/A	Governance and Regulatory Compliance	Fire Alarm and Emergency Communication System Inspection	UNT/ISC	UNT/ISC strobe on fifth floor do not work. Also, some of the strobes on the first floor do not work. Batteries that need to be replaced are: -Parking garage next to panel 4th. -3rd floor both sets 4th. Fire Alarm representative needs to troubleshoot the system in the evening after service hours.	N/A	Battery Replacement	Battery condition was changed at time of test by Terry Rogers	Terry Rogers Building Manager	6/29/2017	Closed
External	Communication Concepts	Fiscal Year 2017	N/A	Governance and Regulatory Compliance	Fire Alarm and Emergency Communication System Inspection	UNT/ISC	UNT/ISC strobe on fifth floor do not work. Also, some of the strobes on the first floor do not work. Batteries that need to be replaced are: -Parking garage next to panel 4th. -3rd floor both sets 4th. Fire Alarm representative needs to troubleshoot the system in the evening after service hours.	N/A	Complete testing on all alarm signals.	Testing Complete by UNT PD and Terry Rogers Building Manager 2/28/17 at 3:00 PM.	Terry Rogers Building Manager	2/28/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	Communication Concepts	Fiscal Year 2017	N/A	Governance and Regulatory Compliance	Fire Alarm and Communication System Inspection	UNITSC	No findings/deficiencies on UNT May Street & Center for Sleep Medicine building.	N/A	N/A	N/A	N/A	N/A	N/A
Internal	UNT System Internal Audit	Fiscal Year 2017	17-007 UNT	Governance and Regulatory Compliance	Joint Admission Medical Program Audit	UNT	None	NA	NA	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2017	17-003 SYS	Governance and Regulatory Compliance	Chancellor's Expenditure Review	UNT System	None	NA	NA	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2017	17-003 HSC	Governance and Regulatory Compliance	President's Expenditure Review	UNITSC	<p>1. Personally identifiable information- During our review of travel, business and entertainment reimbursement support documentation in Enterprise Information System and/or iMagallow, we noted personally identifiable information was not redacted prior to upload in the system. In detail the following was noted:</p> <ul style="list-style-type: none"> • 15 out of 30 (50%) invoices reviewed had personal checks with checking account numbers not redacted. • 3 out of 30 (10%) invoices reviewed had credit card statements with credit card numbers not redacted. 	Moderate	<p>1. Recommendations for the University:</p> <p>a. Mask credit card and bank account information that is uploaded and retained in Enterprise Information System and/or iMagallow, to help ensure sensitive information is not compromised.</p>	1a and 1b - Implement a "Business Expense Reimbursement Checklist" to help reinforce important steps in processing, including masking bank account and credit card information. The checklist will be used by all President Office staff members responsible for preparing reimbursement requests for the president's business expenses and travel expenditures.	Susan Ross, Executive Director, Office of the President	10/27/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-003 HSC	Governance and Regulatory Compliance	President's Expenditure Review	UNITSC	<p>1. Personally identifiable information- During our review of travel, business and entertainment reimbursement support documentation in Enterprise Information System and/or iMagallow, we noted personally identifiable information was not redacted prior to upload in the system. In detail the following was noted:</p> <ul style="list-style-type: none"> • 15 out of 30 (50%) invoices reviewed had personal checks with checking account numbers not redacted. • 3 out of 30 (10%) invoices reviewed had credit card statements with credit card numbers not redacted. 	Moderate	<p>1. Recommendations for the University:</p> <p>a. Develop a travel/entertainment support checklist to minimize any oversight during preparation of documentation support to enhance completeness and accuracy.</p>	1a and 1b - Implement a "Business Expense Reimbursement Checklist" to help reinforce important steps in processing, including masking bank account and credit card information. The checklist will be used by all President Office staff members responsible for preparing reimbursement requests for the president's business expenses and travel expenditures.	Susan Ross, Executive Director, Office of the President	10/27/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-003 BSC	Governance and Regulatory Compliance	President's Expenditure Review	UNT System	<p>1. Personally identifiable information- During our review of travel, business and entertainment reimbursement support documentation in Enterprise Information System and/or iMagnum, we noted personally identifiable information was not redacted prior to upload in the system. In detail the following was noted:</p> <ul style="list-style-type: none"> • 15 out of 30 (50%) invoices reviewed had personal checks with personally identifiable information (PII) on supporting documents • 3 out of 30 (10%) invoices reviewed had credit card statements with credit card numbers not redacted. 	Moderate	<p>2. Recommendation for the UNT System:</p> <ol style="list-style-type: none"> Provide training to individuals processing reimbursement to ensure all support documentation reviewed/processed does not contain personally identifiable information (PII). Additionally, importance of protecting and redacting personal credit card and bank account information should be emphasized to the submitter. Training will also be provided to Accounts Payable staff to identify any personally identifiable information (PII) on supporting documents submitted and if any PII is received without redaction, documents will be returned back to the submitter with explanation requiring required PII redaction prior to final processing. 	<p>2.a- Accounts Payable, UNTS Controller operations will take the following actions:</p> <ul style="list-style-type: none"> Communicate to all employees and strongly emphasize in Travel process training provided across each component institution, the importance of protecting and redacting personal credit card and bank account information. Training will also be provided to Accounts Payable staff to identify any personally identifiable information (PII) on supporting documents submitted and if any PII is received without redaction, documents will be returned back to the submitter with explanation requiring required PII redaction prior to final processing. 	Abdul M. Mohammad, Sr. Director of Operations, UNT Systems, Office of the Controller	4/30/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-002 UNT	Governance and Regulatory Compliance	President's Expenditure Review	UNT	None	NA	NA	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2017	17-004 DAL	Governance and Regulatory Compliance	President's Expenditure Review	UNT Dallas	<p>1. Personally identifiable information- During our review of travel, business and entertainment reimbursement support documentation in Enterprise Information System and/or iMagnum, we noted personally identifiable information was not redacted prior to upload in the system. Specifically, the bank account number on two personal checks was not redacted.</p>	Moderate	<p>1. Recommendation for the University:</p> <ol style="list-style-type: none"> Make credit card and bank account information that is uploaded and retained in the Enterprise Information System and/or iMagnum, ensure sensitive information is not compromised. 	<p>1.a and b- Effective October 27, 2016, the Office of the President staff will mask all credit card and bank account information to help ensure sensitive information is not compromised. The Office of the President staff will also attend "process reimbursement" training (when available) to ensure we are following the recommended guidelines appropriately.</p>	The Office of the President	10/27/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-004 DAL	Governance and Regulatory Compliance	President's Expenditure Review	UNT Dallas	<p>1. Personally identifiable information- During our review of travel, business and entertainment reimbursement support documentation in Enterprise Information System and/or iMagnum, we noted personally identifiable information was not redacted prior to upload in the system. Specifically, the bank account number on two personal checks was not redacted.</p>	Moderate	<p>1. Recommendation for the University:</p> <ol style="list-style-type: none"> Provide in-house self-statement support (checklist, for instance) any oversight during preparation of documentation support to enhance completeness and accuracy. 	<p>1.a and b- Effective October 27, 2016, the Office of the President staff will mask all credit card and bank account information to help ensure sensitive information is not compromised. The Office of the President staff will also attend "process reimbursement" training (when available) to ensure we are following the recommended guidelines appropriately.</p>	The Office of the President	10/27/2016	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-004 DAL	Governance and Regulatory Compliance	President's Expenditure Review	UNT System	1. Personally identifiable information. During our review of travel business and entertainment reimbursement support documentation in Enterprise Information System and/or iMagflow, we noted personally identifiable information was not redacted prior to upload to iMagflow. Specifically, the bank account number on two personal checks was not redacted.	Moderate	2. Recommendation for the UNT System: a. Provide training to individuals processing reimbursement to ensure all support documentation reviewed/processed does not contain personally identifiable information. b. Review support documentation containing PII is received, we recommend returning the documentation back to the submitter with explanation for the PII to be redacted. Personally identifiable information (PII) on supporting documents will be returned back to the submitter with explanation requiring required PII redaction prior to final processing.	1. a. Accounts Payable, UNTS Controller operations will take the following actions: Communicate to all employees and strongly emphasize in travel reimbursement training the importance of protecting personal credit card and bank information on supporting documents submitted through the system. Training will also be provided to Accounts Payable staff to identify any personally identifiable information (PII) on supporting documents and return them to the submitter with explanation requiring required PII redaction prior to final processing.	Jacida A. Mohammed, Sr. Director of Operations, UNT System, Office of the Controller	4/29/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-008 ISC	Governance and Regulatory Compliance	Family Medicine Residency Program	UNTHSC	No findings/deficiencies.	NA	None	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2017	17-408 UNT	Governance and Regulatory Compliance	College of Visual Arts and Design Transitional Audit	UNT	1. Cash handling: UNT cash handling policies were not consistently followed in the College of Visual Arts and Design. Written cash handling procedures in the College of Visual Arts and Design were either nonexistent or incomplete and did not comply with UNT cash handling policies. Additionally, individuals who receive cash in the College of Visual Arts and Design either do not maintain a cash receipt in a log or do not maintain a cash receipts log at all.	Moderate	1. Develop written cash handling procedures as required by UNT Policy 10.006. 2. Develop written cash handling procedures as required by UNT Policy 10.006.	1. a. Mary Braden (Budget Officer) will develop a draft procedure document for the college to be approved by the College Executive Council. Once approved, the College Executive Council will approve the use of a cash handling template that is available for use. Once approved each individual who handles cash will be expected to adhere to these procedures.	Mary Braden, Administrative Coordinator IV Peter Hyland, Director of Financial Services Institute for Education, Susan Sanders, CMAA Development Director	3/7/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-408 UNT	Governance and Regulatory Compliance	College of Visual Arts and Design Transitional Audit	UNT	<p>1. Cash handling, UNT cash handling policies were not consistently followed in the College of Visual Arts and Design.</p> <p>Written cash handling procedures in the College of Visual Arts and Design were not consistently followed with UNT cash handling policies. Additionally, individuals who receive cash in the College of Visual Arts and Design either do not consistently record cash receipts in a log or do not maintain a cash receipts log at all.</p>	Moderate	<p>1. BA. Ensure that those individuals who receive cash and checks record the receipt of funds in a log.</p>	<p>1a. The three individuals named will maintain either paper or electronic logs to record their cash handling.</p>	Mary Bladen, Administrative Coordinator IV Peter Ryan, Director of the Onboard Institute for Education, Susan Hays, CMO Development Director	3/7/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-408 UNT	Governance and Regulatory Compliance	College of Visual Arts and Design Transitional Audit	UNT	<p>2. Personally identifiable information: Credit card information was not redacted prior to upload in ImageNow.</p> <p>During our review of travel reimbursement support documentation in ImageNow (Perceptive Content), we noted 3 of 21 travel vouchers (14.3%) where credit card numbers were not redacted prior to upload in ImageNow. Additionally, account numbers were not redacted on credit cards. The other attribute for account numbers for a personal credit card.</p>	Moderate	<p>2. 1a. Mask credit card and bank account information to help ensure sensitive information is not compromised.</p>	<p>1.a. We will immediately begin masking all credit card and bank information. We will send a reminder to all appropriate staff about the recent e-mail that outlined this policy.</p>	Jerry Aul, Administrative Coordinator I	4/30/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-408 UNT	Governance and Regulatory Compliance	College of Visual Arts and Design Transitional Audit	UNT	<p>3. Personnel identified information. Credit card information was not redacted prior to upload in ImageNow.</p> <p>During our review of travel reimbursement support documentation in ImageNow (PeopleSoft Content), we noted 3 of 21 travel vouchers (1A, 1B, 1C) were not properly entered into the system. Two unredacted account numbers were for corporate credit cards. The other unredacted account number was for a personal credit card.</p>	Moderate	<p>1. 1A. Develop a travel support checklist to minimize the oversight during preparation of documentation support to enhance completeness and accuracy.</p>	1A. We will ensure a checklist is created and implemented.	Jerri Aul, Administrative Coordinator I	4/30/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-408 UNT	Governance and Regulatory Compliance	College of Visual Arts and Design Transitional Audit	UNT	<p>3. Budget Tracking: Personnel in the College of Visual Arts and Design (CVD) indicated during interviews that they were experiencing difficulties with budget tracking, using Peoplesoft 9.2, and the new chart of accounts.</p> <p>It was mentioned that the Peoplesoft 9.2 upgrade and implementation of the new chart of accounts has added complexity to budget tracking.</p>	Moderate	<p>Recommendation for Dean: 3. 1A. Ensure individuals with budgeting responsibilities have received training related to Peoplesoft 9.2 and the new chart of accounts. Continue to work with the UNT Budget Office to improve and resolve challenges CVD is experiencing.</p>	1A. We will check to ensure that staff have indeed participated and if not we will make sure that they seek and participate in appropriate training. We will also ensure that we have a plan in place to encourage staff to take advantage of these opportunities.	Ging WIEL, Dean of the College of Visual Arts and Design	3/31/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-408 UNT	Governance and Regulatory Compliance	College of Visual Arts and Design Transitional Audit	UNT	<p>3. Budget Tracking: Personnel in the College of Visual Arts and Design (CVD) indicated during interviews that they were experiencing difficulties with budget tracking, using Peoplesoft 9.2, and the new chart of accounts.</p> <p>It was mentioned that the Peoplesoft 9.2 upgrade and implementation of the new chart of accounts has added complexity to budget tracking.</p>	Moderate	<p>Recommendation for UNT Budget Office: 3. 2A. Develop a task force or user group as a mechanism to improve transparency and communication with the campus. This task force should include representatives from the UNT Budget Office, Data Analytics & Institutional Research and also for UNT's areas of Office of Budget, and Financial Reporting and also for UNT's areas of Office of Data Analytics & Institutional Research and Grants Accounting, all of which are needed for correct information for budget to actual financial data. In addition, support of the Budget Office Analysts positions are needed to ensure the information is being entered into the system. Learning as the daily application of the implementation is occurring and new business processes are developed and trained in the department by the UNT Budget Director and the two Budget Financial Analysts. Highlights of implemented new and enhanced resources include: [1] Training: Two new training courses provided by the budget office added with a subject matter expert from the reporting area in the department to ensure that staff are up to date on the latest information on correct data formats to be able to make specific questions and receive an answer. [2] Training: Two new training courses provided by the budget office added with a subject matter expert from the reporting area in the department to ensure that staff are up to date on the latest information on correct data formats to be able to make specific questions and receive an answer.</p>	2A. Since the audit field work was completed for the CVD Transitional Audit, many additional reporting and training resources have been developed and implemented by the UNT Budget Office for the UNT campus. Reporting and training requires coordinated efforts between the UNT Budget Office, Data Analytics & Institutional Research, and Office of Budget, and Financial Reporting and also for UNT's areas of Office of Data Analytics & Institutional Research and Grants Accounting, all of which are needed for correct information for budget to actual financial data. In addition, support of the Budget Office Analysts positions are needed to ensure the information is being entered into the system. Learning as the daily application of the implementation is occurring and new business processes are developed and trained in the department by the UNT Budget Director and the two Budget Financial Analysts. Highlights of implemented new and enhanced resources include: [1] Training: Two new training courses provided by the budget office added with a subject matter expert from the reporting area in the department to ensure that staff are up to date on the latest information on correct data formats to be able to make specific questions and receive an answer. [2] Training: Two new training courses provided by the budget office added with a subject matter expert from the reporting area in the department to ensure that staff are up to date on the latest information on correct data formats to be able to make specific questions and receive an answer.	Beverly Cotton, Associate Vice President for Budget and Analytics	4/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-408 UNT	Governance and Regulatory Compliance	College of Visual Arts and Design Transitional Audit	UNT	<p>4. Scholarships: Student Financial Aid and Scholarships' Best Practices for Scholarships and Awards are not consistently followed within the College of Visual Arts and Design.</p> <p>Internal Audit noted the following in CVD: - There are no working departmental scholarship policies. - Scholarship criteria are not consistently followed. - Scholarship criteria listed in the CVD scholarship database did not match all the criteria in the corresponding donor agreements and other support documentation. - Scholarship criteria listed in the CVD scholarship database did not match all the criteria in the corresponding donor agreements and other support documentation.</p>	Moderate	<p>4. 1A. Create a departmental policy for awarding scholarships.</p>	1A. Seek guidance from the Scholarship Office on what is an acceptable documentation of a departmental scholarship process.	Jerri Aul, Administrative Coordinator I	4/30/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-408 UNT	Governance and Regulatory Compliance	College of Visual Arts and Design Transitional Audit	UNT	<p>Internal Audit noted the following in CVD: - There are no working departmental scholarship policies. - Scholarship criteria are not consistently followed. - Scholarship criteria listed in the CVD scholarship database did not match all the criteria in the corresponding donor agreements and other support documentation.</p>	Moderate	<p>4. 1B. Document Scholarship Committee meeting minutes.</p>	1B. Maintain scholarship minutes.	Jerri Aul, Administrative Coordinator I	4/30/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-028 UNT	Governance and Regulatory Compliance	College of Visual Arts and Design Transition Audit	UNT	<p>4. Scholarships: Student Financial Aid and Scholarships: Best Practices for Scholarships and Awards are not consistently followed within the College of Visual Arts and Design.</p> <p>Internal Audit noted the following in CVAD:</p> <ul style="list-style-type: none"> - There are no working departmental scholarship policies. - There are no working departmental scholarship procedures. - Scholarship criteria listed in the CVAD scholarship database did not match all the criteria in the corresponding donor agreements and other support documentation. 	Moderate	4. L. Ensure that criteria in the CVAD scholarship database correspond with donor agreements and other support documentation.	L: Review scholarship database to ensure criteria correspond with donor agreements and other support documentation.	Jerry Aul, Administrative Coordinator 1	4/30/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	16-108 SIS	Governance and Regulatory Compliance	Student Data Access Audit	UNT	<p>1. Unauthorized Users with Access</p> <p>ITS unauthorized users had access to personal student data including cell phone numbers on February 3, 2017.</p> <p>Non-Employees with No Authorization (2)</p> <p>Authorization form for the access granted to non-employees. The authorization form is called the FERPA Training Completion and Request for EIS Access to View Basic Student Records Form (FERPA Form).</p> <p>"Non-employees" as used here is defined as users that have no record in the HR database and no vendor authorization form with ITSS.</p> <p>Information Owners and departmental Access Control Executives (ACEs) all email notifications with Internal Audit to locate the FERPA process and documentation requirements were not being followed.</p> <p>ITS needs a combination of software to communicate internally and externally. The current software does not allow for the creation of an audit trail. A back-out plan could not be produced to prove that the business impact was maintained, or peer review was conducted.</p> <p>HIMM and ITS implement changes to the NextGen application. When a high impact change requires the approval of the NextGen Task Force Committee. Representatives from each clinic attend, and a vote is taken on whether or not to implement the proposed change. However, the result of the vote is not documented.</p>	High	<p>Recommendations for UNT Senior Director, Registrar:</p> <ol style="list-style-type: none"> 1. L. Change the access authorization form to include the user's job and employment status. <p>Recommendations for Chief Information Officer, ITS:</p> <ol style="list-style-type: none"> 2. L. Establish a consistent practice that specifically addresses the following: <ul style="list-style-type: none"> • Review the authorization process to determine the level of risk and impact of the change. • Requirement for all changes to be documented and kept in one central location. • Document the justification for the change and the impact to the organization, including the information security impact of the change. • Require formal approval of all high risk or high impact changes and retain evidence of approvals. • Document who will be responsible for creating, testing, and implementing the change. • Document fallback procedures for aborting and recovering from the change. 	L: We agree. The registrar's office will redesign the access authorization form to include the users job and employment status.	Lynn McCoskey, Registrar, UNT	Exp. Impl. Date: 12/15/2017 Revised Impl. Date: 3/1/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	16-109 ISC	Governance and Regulatory Compliance	UNTHSCIT Change Management	UNTHSC	<p>2. Inconsistent Process and Documentation: The change management process and documentation requirements were not being followed.</p> <p>ITS needs a combination of software to communicate internally and externally. The current software does not allow for the creation of an audit trail. A back-out plan could not be produced to prove that the business impact was maintained, or peer review was conducted.</p> <p>HIMM and ITS implement changes to the NextGen application. When a high impact change requires the approval of the NextGen Task Force Committee. Representatives from each clinic attend, and a vote is taken on whether or not to implement the proposed change. However, the result of the vote is not documented.</p>	Moderate	<p>Recommendations for Chief Information Officer, UNTHSC:</p> <ol style="list-style-type: none"> 2. L. Follow UNTHSC Policy 14-650 UNTHSC Health IT Change Management: <ul style="list-style-type: none"> • Document all changes in one central location regardless of classification. • Create a back-out plan as required for changes classified as major or high impact. • Document who will be responsible for creating, testing, and implementing the change as part of the implementation plan on major changes. • Require a test plan for standard and major changes; and • Obtain evidence of approvals from the appropriate department. 3. L. Require a test plan for standard and major changes; and 4. L. Document all changes in one central location regardless of classification. 	We will transition change management approval and documentation to a centralized location (probably Jira) and educate ITS staff on entering and documenting changes.	Nathan Rubin, Director, Helpdesk and Client Services, Information Technology Services	3/31/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	16-109 ISC	Governance and Regulatory Compliance	UNTHSCIT Change Management	UNTHSC	<p>3. Administrative Input on Risk Assessment: The treatment of mission critical applications and services has not been reviewed by UNTHSC Administration in over a year.</p> <p>After meeting with the Chief Information Officer, it was noted that ITS has not had the opportunity to conduct a risk assessment and services are most critical with administrators of UNTHSC. The Chief Information Officer formulated a risk assessment of UNTHSC applications and services based on their expertise, however it would be more accurate if the risk assessment was conducted by the staff to whom the CIO report was given by the Business Continuity Lead over a year ago, but that no longer exists.</p>	Moderate	<p>Recommendations for Chief Information Officer, ITS:</p> <ol style="list-style-type: none"> 3. L. Perform a risk assessment with UNTHSC Administration on to risk-rank applications and services and formally identify those critical to the institution. 	I agree with the all recommendations listed and expect to have the following items implemented by March 31, 2017: <ul style="list-style-type: none"> • Create a back-out plan as required for changes classified as major; and • Implement the change as part of the implementation plan on major changes; • Require a test plan for standard and major changes; and • Obtain evidence of approvals from the appropriate department. 	Cynthia Loza, HIM Template Editor, Central Business Services	9/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	16-109 ISC	Governance and Regulatory Compliance	UNTHSCIT Change Management	UNTHSC	<p>3. Administrative Input on Risk Assessment: The treatment of mission critical applications and services has not been reviewed by UNTHSC Administration in over a year.</p> <p>After meeting with the Chief Information Officer, it was noted that ITS has not had the opportunity to conduct a risk assessment and services are most critical with administrators of UNTHSC. The Chief Information Officer formulated a risk assessment of UNTHSC applications and services based on their expertise, however it would be more accurate if the risk assessment was conducted by the staff to whom the CIO report was given by the Business Continuity Lead over a year ago, but that no longer exists.</p>	Moderate	<p>Recommendations for Chief Information Officer, ITS:</p> <ol style="list-style-type: none"> 3. L. Perform a risk assessment with UNTHSC Administration on to risk-rank applications and services and formally identify those critical to the institution. 	The information security and privacy committee will be assessing and assigning risk for applications and services beginning in the first quarter of 2017.	Information Security and Privacy Committee (Co-Chair: Chief Compliance Officer and Chief Information Officer)	3/31/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-005 SYS, UNT, HSC, DAL	Governance and Regulatory Compliance	Investments Audit	UNT System	<p>1. Conflict of Interest: SYS/UNT/DAL/HSC: Testing identified that all of System Investment Advisory Committee members and component Investment Officers did not complete Conflict of Interest disclosure forms for FY 2016 indicating any personal business relations with a business organization offering to engage in an investment transaction with UNT System, UNT, UNT Dallas and UNTHSC.</p> <p>This finding was also identified on last year's Internal Audit Report 16-004 UNT System, UNT, UNT Dallas and 16-009 UNTHSC, FY 2015.</p> <p>2. Conflict of Interest: SYS/UNT/DAL/HSC: Testing identified that all of Investment Officers did not complete Conflict of Interest disclosure forms for FY 2016 indicating any personal business relations with a business organization offering to engage in an investment transaction with UNT System, UNT, UNT Dallas and UNTHSC.</p> <p>3. Conflict of Interest: SYS/UNT/DAL/HSC: Testing identified that all of Investment Officers did not complete Conflict of Interest disclosure forms for FY 2016 indicating any personal business relations with a business organization offering to engage in an investment transaction with UNT System, UNT, UNT Dallas and UNTHSC.</p> <p>This finding was also identified on last year's Internal Audit Report 16-004 UNT System, UNT, UNT Dallas and 16-009 UNTHSC, FY 2015 Investment Compliance Audit in two separate observations.</p> <p>UNTS System Management concurred with Internal Audit's recommendations, but in order to establish a more comprehensive solution with the Office of General Counsel (OGC) and UNT System Human Resources, they were not able to fully implement a Conflict of Interest Disclosure process by the initial implementation date of August 31, 2016.</p> <p>Furthermore, UNTHSC, Management concurred with Internal Audit's recommendations and implemented a process, however due to employee turnover, the implemented monitoring process was not sustained.</p>	High	<p>Recommendations for the Associate Vice Chancellor for Treasury:</p> <p>1. 2a. Work with the UNTHSC Institutional & Clinical Compliance Office to implement a monitoring process to ensure applicable staff complete an annual conflict of interest disclosure form.</p> <p>2. Ensure the following recommendations made in Internal Audit Report #16-004 UNT System, UNT, UNT Dallas are implemented:</p> <p>1. 1a. Management to work with Office of General Counsel and Human Resources to establish a mechanism, which includes a Conflict of Interest disclosure form, through which investment recommendations for the Associate Vice Chancellor for Treasury:</p> <p>1. 2a. Work with the UNTHSC Institutional & Clinical Compliance Office to implement a monitoring process to ensure applicable staff complete an annual conflict of interest disclosure form.</p>	<p>Currently, we have the approved form for investment officers to sign certifying that there are no COIs, which will be sent out to each Investment officer by the end of January 2017.</p> <p>We are developing (drafted) for Human Resources to incorporate into Friday, January 27, 2017 at the latest. Human Resources will then incorporate this aspect into their "compliance day" training.</p>	James Maudin, Associate Vice Chancellor for Treasury and Gay Finney, Director of Human Resources	6/7/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-005 SYS, UNT, HSC, DAL	Governance and Regulatory Compliance	Investments Audit	UNT System	<p>1. Conflict of Interest: SYS/UNT/DAL/HSC: Testing identified that all of Investment Officers did not complete Conflict of Interest disclosure forms for FY 2016 indicating any personal business relations with a business organization offering to engage in an investment transaction with UNT System, UNT, UNT Dallas and UNTHSC.</p> <p>This finding was also identified on last year's Internal Audit Report 16-004 UNT System, UNT, UNT Dallas and 16-009 UNTHSC, FY 2015 Investment Compliance Audit in two separate observations.</p> <p>UNTS System Management concurred with Internal Audit's recommendations, but in order to establish a more comprehensive solution with the Office of General Counsel (OGC) and UNT System Human Resources, they were not able to fully implement a Conflict of Interest Disclosure process by the initial implementation date of August 31, 2016.</p> <p>Furthermore, UNTHSC, Management concurred with Internal Audit's recommendations and implemented a process, however due to employee turnover, the implemented monitoring process was not sustained.</p>	High	<p>Recommendations for the Associate Vice Chancellor for Treasury:</p> <p>1. 2a. Work with the UNTHSC Institutional & Clinical Compliance Office to implement a monitoring process to ensure applicable staff complete an annual conflict of interest disclosure form.</p> <p>2. Ensure the following recommendations made in Internal Audit Report #16-004 UNT System, UNT, UNT Dallas are implemented:</p> <p>1. 1a. Management to work with Office of General Counsel and Human Resources to establish a mechanism, which includes a Conflict of Interest disclosure form, through which investment recommendations for the Associate Vice Chancellor for Treasury:</p> <p>1. 2a. Work with the UNTHSC Institutional & Clinical Compliance Office to implement a monitoring process to ensure applicable staff complete an annual conflict of interest disclosure form.</p>	<p>We are developing (drafted) for Human Resources to incorporate into Friday, January 27, 2017 at the latest. Human Resources will then incorporate this aspect into their "compliance day" training.</p> <p>The Compliance Office will ensure 100% of the forms are completed by the due date (January 31st for FY 2017) will be followed up by the Compliance office shortly after January 31st, with prompt escalation to supervisors and senior management, if needed. Any person not completing an annual conflict of interest disclosure form will be subject to disciplinary action up to and including termination.</p>	James Maudin, Associate Vice Chancellor for Treasury and Gay Finney, Director of Human Resources	6/7/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-005 SYS, UNT, HSC, DAL	Governance and Regulatory Compliance	Investments Audit	UNTHSC	<p>1. Conflict of Interest: SYS/UNT/DAL/HSC: Testing identified that all of Investment Officers did not complete Conflict of Interest disclosure forms for FY 2016 indicating any personal business relations with a business organization offering to engage in an investment transaction with UNT System, UNT, UNT Dallas and UNTHSC.</p> <p>This finding was also identified on last year's Internal Audit Report 16-004 UNT System, UNT, UNT Dallas and 16-009 UNTHSC, FY 2015 Investment Compliance Audit in two separate observations.</p> <p>UNTS System Management concurred with Internal Audit's recommendations, but in order to establish a more comprehensive solution with the Office of General Counsel (OGC) and UNT System Human Resources, they were not able to fully implement a Conflict of Interest Disclosure process by the initial implementation date of August 31, 2016.</p> <p>Furthermore, UNTHSC, Management concurred with Internal Audit's recommendations and implemented a process, however due to employee turnover, the implemented monitoring process was not sustained.</p>	High	<p>Recommendation for the UNTHSC Chief Financial Officer:</p> <p>1. 2a. Work with the UNTHSC Institutional & Clinical Compliance Office to implement a monitoring process to ensure applicable staff complete an annual conflict of interest disclosure form.</p>	<p>We are developing (drafted) for Human Resources to incorporate into Friday, January 27, 2017 at the latest. Human Resources will then incorporate this aspect into their "compliance day" training.</p> <p>The Compliance Office will ensure 100% of the forms are completed by the due date (January 31st for FY 2017) will be followed up by the Compliance office shortly after January 31st, with prompt escalation to supervisors and senior management, if needed. Any person not completing an annual conflict of interest disclosure form will be subject to disciplinary action up to and including termination.</p>	James Maudin, Associate Vice Chancellor for Treasury and Gay Finney, Director of Human Resources	9/31/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-005 SYS, UNT, HSC, DAL	Governance and Regulatory Compliance	Investments Audit	UNT System	<p>1. Conflict of Interest: SYS/UNT/DAL/HSC: Testing identified that all of Investment Officers did not complete Conflict of Interest disclosure forms for FY 2016 indicating any personal business relations with a business organization offering to engage in an investment transaction with UNT System, UNT, UNT Dallas and UNTHSC.</p> <p>This finding was also identified on last year's Internal Audit Report 16-004 UNT System, UNT, UNT Dallas and 16-009 UNTHSC, FY 2015 Investment Compliance Audit in two separate observations.</p> <p>UNTS System Management concurred with Internal Audit's recommendations, but in order to establish a more comprehensive solution with the Office of General Counsel (OGC) and UNT System Human Resources, they were not able to fully implement a Conflict of Interest Disclosure process by the initial implementation date of August 31, 2016.</p> <p>Furthermore, UNTHSC, Management concurred with Internal Audit's recommendations and implemented a process, however due to employee turnover, the implemented monitoring process was not sustained.</p>	High	<p>Recommendation for the Associate Vice Chancellor for Treasury:</p> <p>1. 2a. Implement a monitoring process to ensure confirmation of investment disclosure forms were completed by all investment officers and designees.</p>	<p>Going forward, annually a process will be in place to request confirmation from all institutions that annual conflict of interest disclosure forms were completed by all investment officers and designees.</p>	James Maudin, Associate Vice Chancellor for Treasury	3/31/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-005 315, UNT, HSC, DAL	Governance and Regulatory Compliance	Investments Audit	UNT System	3. Board of Regents Public Funds Investment Act requires public funds investments be audited (PFA) twice the frequency of the appointed Regent's and not have PFA training completed within six months after taking office or assuming duties. Based on our detail testing, trainings were completed by the Board of Regent members eight and ten months after taking office.	Moderate	Recommendation to the Secretary to the UNTS Board of Regents: 2. Develop follow-up procedures to help ensure that Board of Regents complete PFA required training session within six months after taking office or assuming duties in accordance with the statute.	The Office of the Board's Secretary will send a tracking system that will be used to ensure the completion of the required training for new Regents. The tracking system will include the training required, required completion date, when reminder emails are sent, and when training was completed.	Dr. Barbara Haggard, Secretary to the UNTS Board of Regents	6/30/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-005 315, UNT, HSC, DAL	Governance and Regulatory Compliance	Investments Audit	UNT System	3. Annual Review and Adoption of Financial Institutions and Broker/Dealers: The Board of Regents has not reviewed and adopted a list of financial institutions and broker/dealers qualified and approved to engage in investment transactions with the UNTS System. This finding was also identified on last year's Internal Audit Report 16-004 UNT System, UNT, UNT Dallas and 16-009 JANTHSC FY 2015 Internal Audit. The Board of Regents has not implemented the recommendations, but they were unable to implement the corrective actions by the initial implementation date of November 30, 2016 because a consulting firm was obtained to review treasury procedures. The consulting firm's report will be implemented and recommendations provided by the consulting firm and Internal Audit.	Moderate	Recommendation for the Associate Vice Chancellor for Treasury: 2. Establish procedures to state compliance with System Regulation 2000, Section 2405, and the UNT System Regulation to see if requirement is applicable as is and make revisions as necessary.	The investment policy will be revised to reflect that only the list of broker/dealers will be provided to the Board of Regents for review and approval at the May 2017 Board of Regents meeting.	James Mauldin, Associate Vice Chancellor for Treasury	6/30/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	16-003 315	Governance and Regulatory Compliance	IT Change Management	UNT System	1. Lack of Permanent Standards: Standard being used for ServiceNow changes not detailed, current or approved. CM processes used by Image Now, Office 365, and Blackboard Learn are not documented in the "Standard Operating Procedures". They were put in place over 3 years ago and are not updated, current or approved.	Moderate	Recommendation for IT Shared Services: 1. Update and finalize a detailed policy and associated standards for use during changes to vendor supplied applications, as recorded in ServiceNow.	ITS will update and finalize a policy and associated standards for use during changes to vendor supplied applications, as recorded in ServiceNow.	Cherise Russell, Chief Information Security Officer	7/31/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	16-003 315	Governance and Regulatory Compliance	IT Change Management	UNT System	2. Lack of Script Standards: There are no standards for Script type changes in PHP. EA Development Standards do not indicate or specify requirements for the Script CR type.	Moderate	Recommendation for IT Shared Services: 2. Add requirements to the EA Development Standards specifying controls required during changes to the CR Script type.	The CR type will now have a PHP provides description of CR type (SD) and an audit trail for monitoring these types of changes. ITSS will review and update the standards document to include documentation necessary to specify additional controls required during changes to the CR Script type.	Donna Fries, Executive Director of Enterprise Applications	7/31/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	16-03-315	Governance and Regulatory Compliance	IT Change Management	UNT System	3. Lack of Segregation Duties: The same person assigned to and completing the change in the development environment moved it to the production environment. The ServiceNow tool does not actually move changes from one environment to another, including into production. For the change record, the same person assigned to and performing the change also completed the change into production, resulting in a lack of Segregation of Duties (SOD).	Moderate	Recommendation for IT Shared Services: 3a. Stakeholders to be aware of and include changes to production for production ServiceNow by defining more resources over critical applications or cross-training existing resources.	ITS will revise standards to comply with Separation of Duties based on Texas Administrative Code Chapter 202.76 "Security Controls Standards Catalog"; Section A.05 Separation of Duties and ISO 27002, Standard 6.1.2. ITS IT Service Management will follow the ITILv3 framework for change management and identify all aspects of the service design and production environment. There are changes to the environments that our outside project work and reside in operational work, these changes will also follow the ITILv3 change management framework.	Kendra Ketchum, Chief Technology Officer	7/31/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	16-03-315	Governance and Regulatory Compliance	IT Change Management	UNT System	4. Backout Plans and Post-Implementation reviews are not required for changes made in Phire, and no records tested contained these items. In ServiceNow, three of seven (43%) changes tested did not indicate a post-implementation review was conducted, as required by ITIL. In Phire, Backout Plans and Post-Implementation reviews are not required, and none of the records tested contained these items. Post-implementation reviews are indicated in ServiceNow by a task, called "Post-Implementation Review", which is not required for all changes. Yes if the State indicated "Closed Complete". Three of seven (43%) changes tested did not contain this indication.	Moderate	Recommendation for IT Shared Services: 4a. Include requirements for backout plans and post-implementation reviews for changes recorded in Phire in the CM Standards.	ITS will revise standards to include backout plans and post-implementation reviews for changes recorded in Phire in the CM Standards, and will include post-implementation reviews that are conducted during Change Management meetings are documented in ServiceNow. To clarify, ITILv3 has continuous improvement as the last implementation on reviews as part of the Service Lifecycle, as many of the services are already in production. ISO 27002, Section 12.1.2 Change Management, Texas Administrative Code Chapter 202.76 "Security Controls Standards Catalog"; Section C.04 Configuration Management, and ITIL v3 Framework will be utilized to state this observation.	Charles Bassell, Chief Information Security Officer	7/31/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	16-03-315	Governance and Regulatory Compliance	IT Change Management	UNT System	4. Backout plans and post-implementation review not required or recorded. Backout Plans and Post-Implementation reviews are not required for changes made in Phire, and no records tested contained these items. In ServiceNow, three of seven (43%) changes tested did not indicate a post-implementation review was conducted, as required by ITIL. In Phire, Backout Plans and Post-Implementation reviews are not required, and none of the records tested contained these items. Post-implementation reviews are indicated in ServiceNow by a task, called "Post-Implementation Review", which is not required for all changes. Yes if the State indicated "Closed Complete". Three of seven (43%) changes tested did not contain this indication.	Moderate	Recommendation for IT Shared Services: 4b. Ensure post-implementation reviews conducted during weekly Change Management meetings are documented in ServiceNow.	ITS will revise standards to include backout plans and post-implementation reviews for changes recorded in Phire in the CM Standards, and will include post-implementation reviews that are conducted during Change Management meetings are documented in ServiceNow. To clarify, ITILv3 has continuous improvement as the last development cycle and we will use that to identify our post-implementation reviews as part of the Service Lifecycle, as many of the services are already in production. ISO 27002, Section 12.1.2 Change Management, Texas Administrative Code Chapter 202.76 "Security Controls Standards Catalog"; Section C.04 Configuration Management, and ITIL v3 Framework will be utilized to address this observation.	Charles Bassell, Chief Information Security Officer	7/31/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	16-03-315	Governance and Regulatory Compliance	IT Change Management	UNT System	5. Stakeholders and Communication Plan not included in change requests. Stakeholders and Communication Plan not included in change requests as required by standards. The ServiceNow records tested did not have a field or indicate in the record who were the Stakeholders of the change. Two of six (33%) changes tested did not contain a Communication Plan. ITIS provides the email communication for the ServiceNow record may serve as a communication of the change taking place, there was not a specific plan indicated.	Moderate	Recommendation for Chief Technology Officer: 5a. Identify a location in the ServiceNow change request to identify stakeholders of the change.	ITS will use the ITILv3 Framework to identify all necessary requirements in the service design process, this includes developing a communication plan. We will ensure that the stakeholders are identified and included in the communication plan and we will attach the plan to the ServiceNow ticket for the change.	Kendra Ketchum, Chief Technology Officer	7/31/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	16-03-315	Governance and Regulatory Compliance	IT Change Management	UNT System	5. Stakeholders and Communication Plan not included in change requests as required by standards. The ServiceNow records tested did not have a field or indicate in the record who were the Stakeholders of the change. Two of six (33%) changes tested did not contain a Communication Plan. ITIS provides the email communication for the ServiceNow record may serve as a communication of the change taking place, there was not a specific plan indicated.	Moderate	Recommendation for Chief Technology Officer: 5b. Include a Communication Plan and communication of the change to interested parties in the ServiceNow change request.	ITS will use the ITILv3 Framework to identify all necessary requirements in the service design process, this includes developing a communication plan. We will ensure that the stakeholders are identified and included in the communication plan and we will attach the plan to the ServiceNow ticket for the change.	Kendra Ketchum, Chief Technology Officer	7/31/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	16-103-015	Governance and Regulatory Compliance	IT Change Management	UNT System	6. Specifications and Notes not included in change requests. Specifications and Notes were not included in change requests as required by standards. The EA Development Standards require Specifications and Notes to be included in all Change Requests. 48 of 50 (96%) of records did not include Specifications 45 of 50 (90%) of records did not include notes	Moderate	Recommendation for IT Shared Services: 6a. Either enforce the standard requiring specifications and notes in a change request, or eliminate this requirement from the standards.	ITS will review and update the standards document, as needed, to indicate the purpose of specifications and notes within PHIRE CR's. The Software Development Lifecycle (SDLC) process currently utilized for coding changes captures requirements and other specifications that document the change.	Dorothy Fines, Executive Director of Enterprise Applications	7/31/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-111 UNT	Governance and Regulatory Compliance	Behavioral Analysis Request Review, Management Advisory Service Report	UNT	This was a management advisory service.	NA	NA	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2017	17-409 UNT	Governance and Regulatory Compliance	International Sponsored Students Process Review	UNT	1. Personally identifiable information Internal Audit noted personally identifiable information (PII) (i.e. passports, social security numbers, bank account numbers) on UNT International (UNT) support documentation was being transmitted insecurely via email. Additionally, copies of checks containing PI were located in the UNT-I Main Office and not properly secured.	High	Recommendations for Intern Vice Provost for International Affairs: 1.1. a. Develop procedures to help ensure that all personally identifiable information (PII) is appropriately protected.	1.a. Management agrees and took the following actions in November, 2016. UNT-I staff who oversee data management met with representatives from AITS, ITSS and Internal Audit on 11/29/16, to discuss the current process for handling sensitive information. AITS changed settings on all UNT-I printers so that scanned documents are received using "secure" channels. The VP sent a message to all UNT-I staff on 11/27/16, communicating expectations regarding the handling of sensitive information. The VP also communicated that any personally identifiable information (PII) for more secure representation. All UNT-I staff were advised to utilize "secure", when emailing PII; the email included a link to a video resource on secure messaging. UNT-I completed a Sensitive/Confidential Information Assessment of all units, as requested and submitted it to UNT System Internal Audit on 12/15/2016. UNT-I has not received further guidance from AITS regarding secure print or drive storage of PII.	Amy Sheenberger, Interim Vice Provost for International Affairs	11/22/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-409 UNT	Governance and Regulatory Compliance	International Sponsored Students Process Review	UNT	3. Personally identifiable information Internal Audit noted personally identifiable information (PII) (i.e. passports, social security numbers, bank account numbers) on UNT International (UNT) support documentation was being transmitted insecurely via email. Additionally, copies of checks containing PI were located in the UNT-I Main Office and not properly secured.	High	Recommendations for Intern Vice Provost for International Affairs: 1.1. b. Ensure all employees receive training related to the protection of PII.	1.b. Management agrees. UNT-I has completed fully with ongoing training requirements from AITS, including the annual Security Awareness Training. The VP expects further guidance in this area as part of standard security training for all UNT faculty and staff who handle sensitive/confidential information. Expected Implementation Date: 11/22/16 (email on procedural changes); ongoing compliance with training requirements per guidance from AITS/ITSS, fully implemented.	Amy Sheenberger, Interim Vice Provost for International Affairs	11/22/2016	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	16-108-015	Governance and Regulatory Compliance	Student Data Access Audit	UNT	75 unauthorized users had access to personal student data including cell phone numbers on February 3, 2017. Non-Employees with No Authorization (42) Internal Audit requested the authorization form for the access to the Student Data Access Audit. The form was not returned. FERPA Training Completion and Request for EIS Access to View Basic Student Records Form (FERPA Form). "Non-employee" as used here is defined as users that have no record of employment with UNT. This includes former employees, former information Owners and departmental Access Control Executives.	High	Recommendations for UNT Senior Director, Registrar: 1.1. d. Before granting access, verify the job and employment status are accurate and reasonable to justify access to student data.	1.d. We agree. The registrar's office will request view access to job records from Human Resources in HRPD and upon receiving that access, will verify that job and employment status of the individual is reasonable to justify access to student data.	Lynn McCreary, Registrar, UNT	11/25/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-409 UNT	Governance and Regulatory Compliance	International Sponsored Students Process Review	UNT	10. Query Reliability UNT International (UNT-I) Sponsored Students and Special Programs schedules and generate invoices. Based on discussions with UNT-I Sponsored Students and Special Programs Center employees, this query failed to pull students' classes and charges for waived, online courses. The query also failed to pull students' classes and charges for special programs. UNT-I Sponsored Students and Special Programs Center employees were having to manually review student schedules to verify if all courses and charges were accurately reflected on the invoice.	Moderate	Recommendation for Director of Sponsored Student Programs and Director of Financial Services, Student Finance: 10.1.a. Coordinate to determine what information needs to be included in the query used to invoice sponsors and develop an updated, accurate query.	1.a. Management agrees with the recommendation. The Director of Sponsored Student Programs and Student Finance will work with the Registrar to correct current queries being used for invoicing. Management will provide reports, identifying the appropriate state personnel to validate the data.	Aleka Myrc, Director of Sponsored Student Programs and Jeanne Olson, Director of Student Services, Student Finance	6/30/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-409 UNT	Governance and Regulatory Compliance	International Sponsored Students Process Review	UNT	6. UNT-I Sponsored Students Procedure Manual UNT International (UNT-I) Sponsored Students and Special Programs Center procedure manual was outdated and did not reflect actual information, preparing and sending invoices, and required payment terms for sponsors and students.	Moderate	Recommendations for Director of Sponsored Student Programs: 6.1.a. Update procedure manual to reflect current program processes.	1.a. Management agrees with the recommendation and will complete the following action. The Sponsored Students procedure manual will be updated to reflect actual processes by July 30, 2017.	Aleka Myrc, Director of Sponsored Students	7/30/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-409 UNT	Governance and Regulatory Compliance	International Sponsored Students Process Review	UNT	6. UNT-I Sponsored Students Procedure Manual UNT International (UNT-I) Sponsored Students and Special Programs Center procedure manual was outdated and did not reflect actual processes, including guidelines for inputting financial guarantee information, preparing and sending invoices, and required payment terms for sponsors and students.	Moderate	Recommendations for Director of Sponsored Student Programs: 6.1.b. Establish a specific periodic review process to ensure that the Sponsored Student and Special Programs Center procedure manual is up-to-date and adequately addresses relevant issues. The procedures should indicate the last time it was reviewed.	1.b. Management agrees with the recommendation. The director will coordinate with the Registrar to update the manual. Management will ensure that it is updated, accurate, and aligns with university procedures. Each version of the manual will reference the last time it was reviewed and record the date of any revisions. Review dates will occur during the second weeks of November and April of each year.	Aleka Myrc, Director of Sponsored Students	7/30/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-412 UNT	Governance and Regulatory Compliance	College of Music Transition Audit	UNT	10. Scholarship Policy The College of Music scholarship policy does not contain all the information needed for the College of Music to award and administer Prizes for Scholarships and Awards. The process for the selection of scholarship committee members and the length of appointment for committee members are not included in the College of Music Scholarship Policy. Additionally, there is no process for appeals in the policy.	Moderate	Recommendation for John Richmond, Dean of the College of Music: 10.1.a. Coordinate with Student Financial Aid and Scholarships to evaluate and update, where applicable, the current College of Music Scholarship Policy.	1.a. The Assistant Dean will be responsible for: i. Coordinating with Student Financial Aid and Scholarships to evaluate and update, where applicable, the current College of Music Scholarship procedures. Each version of the manual will reference the last time it was reviewed and record the date of any revisions. Review dates will occur during the second weeks of November and April of each year. ii. Review policy recommendations with the Dean of the College for feedback and further recommendations. iii. Present revised policy to the Council of Division chairs for approval. iv. Implement all policy revisions on behalf of the College.	Raymond Powell, Asst. Dean for Enrollment Management and External Affairs, John Richmond, Asst. Dean for External Affairs, and the Council of Division Chairs; UNT Student Financial Aid and Scholarships	1/31/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Review was based	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-409 UNT	Governance and Regulatory Compliance	International Sponsored Students Process Review	UNT	<p>11. Sponsor Forms</p> <p>UNT International (UNT-I) Sponsored Students and Special Programs Center Office of General Counsel (OGC) approved forms were not applied consistently to all sponsors. The forms were only being incorporated with new sponsors.</p> <p>Additionally, the UNT-I Sponsored Students and Special Programs Center has recently added a Parent's Program; however, the form for the Parent's Program has been reviewed by OGC but has not received official OGC approval.</p>	Moderate	<p>11.1.a. Ensure all sponsors sign the Office of General Counsel (OGC) approved Sponsor Agreement forms.</p>	<p>1.a. Management agrees with the recommendation. The Director of Sponsored Student Programs will meet with Larry Worthington, Special Assistant to the CFO, to determine if the current process of collecting financial guarantees from the sponsor for each student is permissible.</p>	Aleka Myre, Director of Sponsored Student Programs	6/30/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-409 UNT	Governance and Regulatory Compliance	International Sponsored Students Process Review	UNT	<p>8. Communication with Students</p> <p>There is no process in place to formally communicate to students that payment has not been received from a sponsor and charges will be placed on the student's account. The students only receive notice when charges are placed onto their account with no advance notice. Additionally, during interviews it was noted a staff member was using a personal cell phone to contact students concerning their accounts.</p>	Moderate	<p>8.2.a. Establish a deadline to provide advance notification to students when payment has not been received from their sponsor and charges will be placed onto their account. Document in procedure manual.</p>	<p>2.a. Management agrees with the recommendation. The Director of Sponsored Student Programs has established a deadline/procedure for providing advance notice to students when payment has not been received from their sponsor and that charges will be placed on the student's account. The deadline for providing advance notice is reflected on the student accounts. In addition, they will determine guidelines for exceptions based on extenuating circumstances in the student's home country impacting a sponsor's ability to reasonably meet the payment deadline. Procedure will be updated in the manual by July 26, 2017.</p>	Aleka Myre, Director of Sponsored Student Programs	7/20/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-409 UNT	Governance and Regulatory Compliance	International Sponsored Students Process Review	UNT	<p>8. Communication with Students</p> <p>There is no process in place to formally communicate to students that payment has not been received from a sponsor and charges will be placed on the student's account. The students only receive notice when charges are placed onto their account with no advance notice. Additionally, during interviews it was noted a staff member was using a personal cell phone to contact students concerning their accounts.</p>	Moderate	<p>8.2.a. Develop and utilize a template to provide advance notification to students when payment has not been received from their sponsor and charges will be placed onto their account. Document in procedure manual.</p>	<p>2.b. Management agrees with the recommendation. The Director of Sponsored Student Programs has developed a template, currently in use, to notify students about non-payment of tuition by their sponsor, alerting them 15 business days to correspond with their sponsor and correct the situation. The template will be added to the financials procedure manual by July 26, 2017.</p>	Aleka Myre, Director of Sponsored Student Programs	7/20/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-409 UNT	Governance and Regulatory Compliance	International Sponsored Students Process Review	UNT	<p>8. Communication with Students</p> <p>There is no process in place to formally communicate to students that payment has not been received from a sponsor and charges will be placed on the student's account. The students only receive notice when charges are placed onto their account with no advance notice. Additionally, during interviews it was noted a staff member was using a personal cell phone to contact students concerning their accounts.</p>	Moderate	<p>8.2.a. Ensure employees with access to cell phones are communicating with students concerning their accounts.</p>	<p>2.c. Management agrees with the recommendation. Following internal meeting with internal audit concerning this issue, all employees were notified of the recommendation and the UNT-I Director of Global Partnerships and Research Engagement will communicate with students concerning their account. This was documented on the General Office Procedures manual.</p>	Aleka Myre, Director of Sponsored Student Programs	7/20/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-409 UNT	Governance and Regulatory Compliance	International Sponsored Students Process Review	UNT	<p>11. Sponsor Forms</p> <p>UNT International (UNT-I) Sponsored Students and Special Programs Center Office of General Counsel (OGC) approved forms were not incorporated with new sponsors.</p> <p>Additionally, the UNT-I Sponsored Students and Special Programs Center has recently added a Parent's Program; however, the form for the Parent's Program has been reviewed by OGC but has not received official OGC approval.</p>	Moderate	<p>11.1.b. Ensure the Parent's Program for Sponsored Students form obtains OGC approval for multiple uses.</p>	<p>3b. Management agrees with the recommendation. The Director of Sponsored Student Programs and the UNT-I Director of Global Partnerships and Research Engagement will consult with OGC to ensure that all documents used are approved for multiple uses.</p>	Aleka Myre, Director of Sponsored Student Programs	6/30/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-407 515	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>1. Logical Access and Change Controls</p> <p>Inappropriate logical user access to benefit plan tables exists and a rate change review process is not in place.</p> <p>During our review of user logical access and change controls as they relate to retirement contributions tables and payroll adjustments within Enterprise Information System (EIS) Peoplesoft, we noted the following:</p> <ul style="list-style-type: none"> Access rights to certain users who were part of the beta testing inappropriate logical user access to benefit plan tables exists and a rate change review process is not in place. <p>During our review of user logical access and change controls as they relate to retirement contributions tables and payroll adjustments within Enterprise Information System (EIS) Peoplesoft, we noted the following:</p> <ul style="list-style-type: none"> Access rights to certain users who were part of the beta testing inappropriate logical user access to benefit plan tables exists and a rate change review process is not in place. 	High	<p>Recommendations for the Assistant Vice Chancellor of Total Rewards:</p> <p>1.1.b. Develop and implement a review and approve process when updates are made to the OIP contribution percentage table.</p>	<p>1b. In the future, table entries required by legal limit will be reviewed by a Senior Benefits Consultant and verified by the Benefits Manager. The Benefits Manager will retain a signed screen shot verifying this step occurred.</p>	Christopher DeClerk, Assistant Vice Chancellor of Total Rewards	7/28/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-407 515	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>1. Logical Access and Change Controls</p> <p>Inappropriate logical user access to benefit plan tables exists and a rate change review process is not in place.</p> <p>During our review of user logical access and change controls as they relate to retirement contributions tables and payroll adjustments within Enterprise Information System (EIS) Peoplesoft, we noted the following:</p> <ul style="list-style-type: none"> Access rights to certain users who were part of the beta testing inappropriate logical user access to benefit plan tables exists and a rate change review process is not in place. 	High	<p>Recommendations for the Assistant Vice Chancellor of Total Rewards:</p> <p>1.1.c. On an annual basis, perform a review of user access rights based on job functions.</p>	<p>1c. The HRIS team has added annual access review to the operating calendar.</p>	Christopher DeClerk, Assistant Vice Chancellor of Total Rewards	7/28/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-407 515	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>1. Logical Access and Change Controls</p> <p>Inappropriate logical user access to benefit plan tables exists and a rate change review process is not in place.</p> <p>During our review of user logical access and change controls as they relate to retirement contributions tables and payroll adjustments within Enterprise Information System (EIS) Peoplesoft, we noted the following:</p> <ul style="list-style-type: none"> Access rights to certain users who were part of the beta testing inappropriate logical user access to benefit plan tables exists and a rate change review process is not in place. 	High	<p>Recommendations for the Assistant Vice Chancellor of Total Rewards and Senior Director of Controller Operations:</p> <p>1.2.a. Evaluate and remove any super user's access to this functionality when it is not essential to their job function.</p>	<p>2a. We evaluated and due to the system limitations, found we cannot remove super user's access to update retirement tables as indicated in the audit report. In our EIS configuration, super users such as the Benefits Manager and Associate Director of Controller Operations have access to all tables and functions. Super users have access to all of these tables.</p>	Abdul Mohammad, Sr. Director of Operations and Christopher DeClerk, Assistant Vice Chancellor of Total Rewards	8/31/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-407 515	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>1. Logical Access and Change Controls</p> <p>Inappropriate logical user access to benefit plan tables exists and a rate change review process is not in place.</p> <p>During our review of user logical access and change controls as they relate to retirement contributions tables and payroll adjustments within Enterprise Information System (EIS) Peoplesoft, we noted the following:</p> <ul style="list-style-type: none"> Access rights to certain users who were part of the beta testing inappropriate logical user access to benefit plan tables exists and a rate change review process is not in place. 	High	<p>Recommendations for the Assistant Vice Chancellor of Total Rewards and Senior Director of Controller Operations:</p> <p>1.2.b. Develop a tool to monitor the activities of super users on a monthly basis.</p>	<p>2b. Because technology does not allow to remove super users' access as indicated in point 2a payroll is working with ISS to develop a tool to monitor the activities of the super users who have access to Retirement Tables.</p>	Abdul Mohammad, Sr. Director of Operations and Christopher DeClerk, Assistant Vice Chancellor of Total Rewards	8/31/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-407315	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>2. Contribution Percentages for ORP Medium - For five employees did not receive the correct employer contribution amounts due to an incorrect contribution rate set in EIS. The contribution rate for the ORP Medium classification was set at 6.58% and should have been 6.6%. ORP employees are classified in three groups in EIS:</p> <ul style="list-style-type: none"> •ORP High - Employees who participated in the ORP retirement system prior to September 1, 1995 and are not subject to the IRS maximum salary amount. The employer contribution rate for this group is 6.5% as of FY1980. •ORP Medium - Employees who participated in the ORP retirement system prior to September 1, 1995 and are not subject to the IRS maximum salary amount. The employer contribution rate for this group is 6.6% as of FY2014. •ORP Low - Employees who participated in the ORP retirement system after September 1, 1995 and are subject to the IRS maximum salary amount. The employer contribution rate for this group is 6.6% as of FY2014. <p>The employer ORP contribution rates as set in the General Appropriations Act were:</p> <ul style="list-style-type: none"> •6.58% for FY2008/2009; 	High	<p>Recommendations for the Assistant Vice Chancellor of Total Rewards:</p> <p>2.1.a. Work with the Controller Operations team to review and correct the contribution rates for ORP Medium classification through FY2010 through FY2013 was accurate in accordance to the Texas Administrative Code and the General Appropriations Act.</p>	<p>1.a. Manually audited the tabs history and paycheck level data within Peoplesoft EIS to identify years with errors in the ORP Medium rate from 2003 through 2017 resulting in these findings: See chart in final report.</p>	8/31/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-407315	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>2. Contribution Percentages for ORP Medium - For five employees did not receive the correct employer contribution amounts due to an incorrect contribution rate set in EIS. The contribution rate for the ORP Medium classification was set at 6.58% and should have been 6.6%. ORP employees are classified in three groups in EIS:</p> <ul style="list-style-type: none"> •ORP High - Employees who participated in the ORP retirement system prior to September 1, 1995 and are not subject to the IRS maximum salary amount. The employer contribution rate for this group is 6.5% as of FY1980. •ORP Medium - Employees who participated in the ORP retirement system between September 1, 1995 and August 31, 1996 and are not subject to the IRS maximum salary amount. The employer contribution rate for this group is 6.6% as of FY2014. •ORP Low - Employees who participated in the ORP retirement system after September 1, 1996 and are subject to the IRS maximum salary amount. The employer contribution rate for this group is 6.6% as of FY2014. <p>The employer ORP contribution rates as set in the General Appropriations Act were:</p> <ul style="list-style-type: none"> •6.58% for FY2008/2009; 	High	<p>Recommendations for the Assistant Vice Chancellor of Total Rewards:</p> <p>2.1.b. For FY2010 through FY2015, adjust the contribution amounts to reflect the proper rate for each fiscal year. This may be an additional contribution to the employee if the rate is higher than the employer require refund by the employee if the rate is lower than 6.6%.</p>	<p>1b. Manually audited individual employee contributions during erroneous contribution years and determined the following: See chart in final report.</p>	8/31/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-407315	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>2. Contribution Percentages for ORP Medium - For five employees did not receive the correct employer contribution amounts due to an incorrect contribution rate set in EIS. The contribution rate for the ORP Medium classification was set at 6.58% and should have been 6.6%. ORP employees are classified in three groups in EIS:</p> <ul style="list-style-type: none"> •ORP High - Employees who participated in the ORP retirement system prior to September 1, 1995 and are not subject to the IRS maximum salary amount. The employer contribution rate for this group is 8.3% as of FY1980. •ORP Medium - Employees who participated in the ORP retirement system prior to September 1, 1995 and are not subject to the IRS maximum salary amount. The employer contribution rate for this group is 6.6% as of FY2014. •ORP Low - Employees who participated in the ORP retirement system after September 1, 1995 and are subject to the IRS maximum salary amount. The employer contribution rate for this group is 6.6% as of FY2014. <p>The employer ORP contribution rates as set in the General Appropriations Act were:</p> <ul style="list-style-type: none"> •6.58% for FY2008/2009; 	High	<p>Recommendations for the Vice Chancellor for Finance:</p> <p>2.2.a. Determine if any adjustments should be reported to the IRS.</p>	<p>2a. Payroll will work with Office of General Counsel and HR Benefits to determine if any adjustments should be reported to the IRS.</p>	Janet Waldron, Vice Chancellor for Finance	9/30/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-407315	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>2. Contribution Percentages for ORP Medium - For five employees did not receive the correct employer contribution amounts due to an incorrect contribution rate set in EIS. The contribution rate for the ORP Medium classification was set at 6.58% and should have been 6.6%. ORP employees are classified in three groups in EIS:</p> <ul style="list-style-type: none"> •ORP High - Employees who participated in the ORP retirement system prior to September 1, 1995 and are not subject to the IRS maximum salary amount. The employer contribution rate for this group is 8.3% as of FY1980. •ORP Medium - Employees who participated in the ORP retirement system between September 1, 1995 and August 31, 1996 and are not subject to the IRS maximum salary amount. The employer contribution rate for this group is 6.6% as of FY2014. •ORP Low - Employees who participated in the ORP retirement system after September 1, 1996 and are subject to the IRS maximum salary amount. The employer contribution rate for this group is 6.6% as of FY2014. <p>The employer ORP contribution rates as set in the General Appropriations Act were:</p> <ul style="list-style-type: none"> •6.58% for FY2008/2009; 	High	<p>Recommendations for the Vice Chancellor for Finance:</p> <p>2.2.b. Ensure internal payroll records are corrected.</p>	<p>2b. Payroll will make necessary corrections to the employee payroll records if 2a results in processing adjustment amount to the employee.</p>	Janet Waldron, Vice Chancellor for Finance	9/30/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-415 UNT	Governance and Regulatory Compliance	Faculty and Staff International Travel Audit	UNT	<p>2. Communication</p> <p>Communication is insufficient to ensure that all individuals traveling internationally on UNT System, UNT, UNTHSC, and/or UNT Dallas have registered with UNT Risk Management prior to departure. UNT Risk Management currently cannot ensure that all faculty, staff and individuals are registering. Therefore, it appears there is the need to improve communication to inform the UNT System, UNT, UNTHSC, UNT Dallas, and UNT Dallas of the requirement to register for international travel. This will ensure international business travelers are conscious of registering prior to departure.</p> <p>Per UNT Risk Management, there has been an increase in the number of individuals registering their international travel. They indicated this increase is due to the requirement to register for international travel registration in the BSS web travel action.</p>	Moderate	<p>Recommendation for Doug Welch, Executive Director Risk Management Services:</p> <p>2.1. Increase and improve awareness/communication thru the UNT System, UNT, UNTHSC, and UNT Dallas. These communications should include the requirement to register international travel prior to departure and noting the benefits of international travel registering which include:</p> <ul style="list-style-type: none"> • Medical requirements. • Travel warning information and • Evacuation/evacuation assistance if necessary. 	<p>1a. UNT Risk Management Services will establish point of contacts in UNT System, UNT, UNTHSC, UNT Dallas to help further communication about international health and safety in regards to university related foreign travel.</p> <p>1b. Management Services will work with the established point of contacts to develop a communication plan unique to each institution. The communication plan will ensure all appropriate protocols, forms, i. Requirement to register international travel ii. Medical requirements iii. Additional resources available to travelers</p>	Doug Welch, Executive Director Risk Management Services	4/22/2018	Closed
Internal (Co-Sourced)	PWC	Fiscal Year 2017	17-303 UNT	Governance and Regulatory Compliance	Student Managed Investment Fund (SMIF)	UNT	<p>2. Documented policies and procedures</p> <p>Formally documented policies and procedures providing guidance on day to day operations should be executed by the SIG do not exist. Although the SIG performs their day-to-day investment procedures through good practice, there is no documented procedure manual to provide guidance to SIG members on executing day-to-day transactions. Due to the nature of the SIG and the regular turnover experienced by members continuously changing, it would be beneficial for the day-to-day procedures to be formally documented in order to provide guidance to new members and ensure responses to current members when executing procedures, including executing transactions, preparing or reviewing the annual report, ensuring member transparency, and other good practices. Examples of areas that may benefit from documented procedures in addition to the comments listed above include:</p> <ul style="list-style-type: none"> o The policies and procedures may help facilitate the preparation and execution of the annual financial statements, including ensuring that the following 	Low	<p>2.1. The SIG should document their day to day controls and procedures in a manual that is accessible to members or serve as reference to ensure actions are appropriately documented. This manual should be available to members from inception to finalization. Procedures followed during meetings, documenting meeting minutes, and reviewing the investment bookers as well as preparing/reviewing the annual report.</p>	<p>1a. SIG shall formalize and adopt checklists and/or flow charts to document the day-to-day activities for day-to-day activities including meeting related procedures, trade approvals and evaluation of the SIG member relationship.</p>	SG Board of Directors	<p>Exp. Impl. Date: 12/31/2017</p> <p>Revised Impl. Date: 03/31/2018</p>	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-001 ISC	Governance and Regulatory Compliance	Graduate School of Biomedical Sciences Review	UNTHSC	<p>2. Inaccurate Recording of Leave of Absences in EIS</p> <p>Inaccurate recording of leave of absences from the HRM-64 Leave Request forms to Enterprise Information System (EIS) Peoplesoft. Request forms were not accurately recorded in EIS. Internal Audit identified 49 employees with accrued balances for these employees from September 1, 2015 through August 31, 2016. Additionally, we noted that each department within GSBS had different procedures of Leave Request form usage including departments where they either did not keep records of HRM-64 Leave Request forms or they did not use the HRM-64 Leave Request forms. As a result, Internal Audit was unable to validate whether leave was recorded accurately in EIS for 25 of 59 employees who had leave in EIS. Specifically,</p> <ul style="list-style-type: none"> • For 3 employees of the former department of Cell Biology & Immunology, vacation and sick leave time taken on HRM-64 forms were not recorded in EIS. • 1 employee of the former department of Molecular and Medical Genetics notified Internal Audit that 40 hours of vacation leave taken were not recorded in EIS. • 25 employees who had leave of the former department of Molecular and Medical Genetics entered their leave directly in EIS and communicated leave either verbally or by e-mail to their supervisor. As result, Internal Audit was unable to validate whether leave taken 	High	<p>Recommendations for the Dean of GSBS and Senior Director of Controller Operations:</p> <p>2.1.a. Use and retain appropriate approved support documents for HRM-64 Leave Request forms as required by UNTHSC policies and institutional procedures.</p> <p>2.1.b. Review all current and terminated employees within GSBS Leave forms are accurately entered into EIS.</p>	<p>1.a. The Graduate School of Biomedical Sciences (GSBS) will establish a committee consisting of key administrative staff (with prior experience with processing of HRM-64 Leave forms and faculty leaders (e.g., former Chairs and Associate Chairs) to recommend a standard operating procedure to be collected and archived, to be consistent with UNTHSC policies and procedures. These recommendations will be considered by the Dean of the GSBS, and in consultation with the Provost, adopted and implemented. The committee will communicate with all former staff whose responsibility GSBS will maintainance of HRM-64 forms to cross check that the information within the leave forms were accurately entered into EIS.</p>	Johnny He, Interim Dean of GSBS and Abdul Mohammad, Senior Director of Controller Operations	9/1/2017 Rev. 12/31/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-001 ISC	Governance and Regulatory Compliance	Graduate School of Biomedical Sciences Review	UNTHSC	<p>2. Inaccurate Recording of Leave of Absences in EIS</p> <p>Inaccurate recording of leave of absences from the HRM-64 Leave Request forms to Enterprise Information System (EIS) Peoplesoft. Request forms were not accurately recorded in EIS. Internal Audit identified 49 employees with accrued balances for these employees from September 1, 2015 through August 31, 2016. Additionally, we noted that each department within GSBS had different procedures of Leave Request form usage including departments where they either did not keep records of HRM-64 Leave Request forms or they did not use the HRM-64 Leave Request forms. As a result, Internal Audit was unable to validate whether leave was recorded accurately in EIS for 25 of 59 employees who had leave in EIS. Specifically,</p> <ul style="list-style-type: none"> • For 3 employees of the former department of Cell Biology & Immunology, vacation and sick leave time taken on HRM-64 forms were not recorded in EIS. • 1 employee of the former department of Molecular and Medical Genetics notified Internal Audit that 40 hours of vacation leave taken were not recorded in EIS. • 25 employees who had leave of the former department of Molecular and Medical Genetics entered their leave directly in EIS and communicated leave either verbally or by e-mail to their supervisor. As result, Internal Audit was unable to validate whether leave taken 	High	<p>Recommendations for the Dean of GSBS and Senior Director of Controller Operations:</p> <p>2.1.a. Use and retain appropriate approved support documents for HRM-64 Leave Request forms as required by UNTHSC policies and institutional procedures.</p> <p>2.1.b. Review all current and terminated employees within GSBS Leave forms are accurately entered into EIS.</p>	<p>1.b. The Dean of the GSBS will identify key staff members to review all current and terminated employees within the GSBS between September 1, 2015 - August 2016 to ensure leave forms are accurately entered into EIS.</p>	Johnny He, Interim Dean of GSBS and Abdul Mohammad, Senior Director of Controller Operations	9/1/2017 Rev. 12/31/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-001 ISC	Governance and Regulatory Compliance	Graduate School of Biomedical Sciences Review	UNTHSC	<p>2. Inaccurate Recording of Leave of Absences in EIS</p> <p>Inaccurate recording of leave of absences from the HRM-64 Leave Request forms to Enterprise Information System (EIS) Peoplesoft. Request forms for these employees from September 1, 2015 through August 31, 2016. Additionally, we noted that each department within GSBS had different procedures of Leave Request form usage including departments where they either did not keep records of leave request forms, or request forms were not used. As a result, Internal Audit was unable to validate whether leave was recorded accurately in EIS for 25 of 59 employees who had leave in EIS. Specifically,</p> <ul style="list-style-type: none"> • For 3 employees of the former department of Cell Biology & Immunology, vacation and sick leave time taken on HRM-64 forms were not recorded in EIS. • 1 employee of the former department of Molecular and Medical Genetics notified Internal Audit that 40 hours of vacation leave taken were not recorded in EIS. • 25 employees who had leave of the former department of Molecular and Medical Genetics entered their leave directly in EIS and communicated leave either verbally or by e-mail to their supervisor. As result, Internal Audit was unable to validate whether leave taken 	High	<p>Recommendations for the Dean of GSBS and Senior Director of Controller Operations:</p> <p>2.1.c. Collaborate with UNT System Controller Operations to ensure that employees' leave of absences in EIS reflect the correct leave balances.</p>	<p>1.c. Payroll/UNT System Controller Operations will take necessary actions to help GSBS to update and effect correct employees leave of absences in EIS. GSBS will work with the Office of the CFO and the UNT Director of Controller Operations to coordinate any efforts to recover funds, should be corrected in instances are identified.</p>	Meharvan Singh, Dean of GSBS and Abdul Mohammad, Senior Director of Controller Operations	1/31/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-001 ISC	Governance and Regulatory Compliance	Graduate School of Biomedical Sciences Review	UNTHSC	<p>2. Inaccurate Recording of Leave of Absences in EIS</p> <p>Inaccurate recording of leave of absences from the HRM-64 Leave Request forms to Enterprise Information System (EIS) Peoplesoft. Request forms for these employees from September 1, 2015 through August 31, 2016. Additionally, we noted that each department within GSBS had different procedures of Leave Request form usage including departments where they either did not keep records of leave request forms, or request forms were not used. As a result, Internal Audit was unable to validate whether leave was recorded accurately in EIS for 25 of 59 employees who had leave in EIS. Specifically,</p> <ul style="list-style-type: none"> • For 3 employees of the former department of Cell Biology & Immunology, vacation and sick leave time taken on HRM-64 forms were not recorded in EIS. • 1 employee of the former department of Molecular and Medical Genetics notified Internal Audit that 40 hours of vacation leave taken were not recorded in EIS. • 25 employees who had leave of the former department of Molecular and Medical Genetics entered their leave directly in EIS and communicated leave either verbally or by e-mail to their supervisor. As result, Internal Audit was unable to validate whether leave taken 	High	<p>Recommendations for the Dean of GSBS and Senior Director of Controller Operations:</p> <p>2.1.d. For those employees identified with overpayments, collaborate with UNT System Controller Operations department to recover funds.</p>	<p>1.d. Payroll/General Accounting/UNT System Controller Operations will follow a standardized procedure in recovering overpayments from employee's resulting due to the correcting actions taken in EIS.</p>	Meharvan Singh, Dean of GSBS and Abdul Mohammad, Senior Director of Controller Operations	1/31/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-401 ISC	Governance and Regulatory Compliance	Graduate School of Biomedical Sciences Review	UNTSBC	<p>2. Inaccurate Recording of Leave of Absences in EIS</p> <p>Request forms to Enterprise Information System (EIS) PeopleSoft were not consistently reviewed for accuracy. Internal Audit noted that some employees had accrued balances for leave employees from September 1, 2015 through August 31, 2016. Additionally, we noted that each department within GBSB had different procedures of Leave Request form usage including departments where they either did not keep records of leave requests or where they did not use the HRM-64 Policy on HRM-64 Leave Request forms were not used. As a result, Internal Audit was unable to validate whether leave was recorded accurately in EIS for 25 of 59 employees who had leave in EIS. Specifically,</p> <ul style="list-style-type: none"> • For 3 employees of the former department of Cell Biology & Immunology, vacation and sick leave time taken on HRM-64 forms were not recorded in EIS. • 1 employee of the former department of Molecular and Medical Genetics notified Internal Audit that 40 hours of vacation leave taken were not recorded in EIS. • 25 employees who had leave of the former department of Molecular and Medical Genetics entered their leave directly in EIS and communicated leave either verbally or by e-mail to their supervisor. As result, Internal Audit was unable to validate whether leave taken 	High	<p>Recommendations for the Dean of GBSB and Senior Director of Controller Operations:</p> <p>2.1.a. Ensure internal payroll records are corrected.</p>	<p>1.a. Payroll/UNT System Controller Operations will ensure that the correcting entries are entered into EIS in a timely manner and coordinate any efforts to recover funds, should overpayment of pay occur. Internal payroll records will be corrected as appropriate once the overpayments are identified.</p>	Maharwan Sogh, Dean of GBSB and Abdul Mohammad, Senior Director of Controller Operations	1/17/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-409 UNT	Governance and Regulatory Compliance	International Sponsored Students Process Review	UNT	<p>2. Inconsistently Working Part Due Amounts</p> <p>UNT International (UNTI) Sponsored Student and Special Programs Center was not consistently reviewing past due tuition and fee charges owed by sponsors and was not placing the charges back on the students' accounts. As of the spring 2017 semester, approximately \$1,000 in part due tuition and fee charges had not yet been paid back on the students' accounts to date payment. Additionally, Internal Audit noted UNTI Sponsored Students and Special Program Center employees were not using a system that allows students receivable report to follow up on part due tuition and fee charges.</p>	High	<p>Recommendations for Director of Sponsored Student Programs and Director of Financial Services, Student Finance:</p> <p>2.1.a. Review past due tuition and fee charges and coordinate with the Office of General Counsel to determine whether it is allowable to place the charges back on the students' accounts.</p>	<p>1.a. Management agrees with the recommendations and are taking the following actions:</p> <p>1.a.1. Student Finance will review past due tuition and fee charges and consult with the Office of General Counsel to determine if placing charges back on students' accounts is in compliance with current University and State policies.</p>	Alka Myra, Director of Sponsored Student Programs and Director of Financial Services, Director of Financial Services, Student Finance	6/30/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-409 UNT	Governance and Regulatory Compliance	International Sponsored Students Process Review	UNT	<p>2. Inconsistently Working Past Due Amounts</p> <p>UNT International (UNTI) Sponsored Student and Special Programs Center was not consistently reviewing past due tuition and fee charges back on the students' accounts. As of the spring 2017 semester, approximately \$234,000 of past due tuition and fee charges had not yet been placed back on the students' accounts to obtain payment. Additionally, Internal Audit noted, UNTI, Sponsored Students and Special Programs Center employees were not using a system-generated accounts receivable report to follow-up on past due tuition and fee charges.</p>	High	<p>Recommendations for Director of Sponsored Student Programs and Director of Financial Services, Student Finance:</p> <p>2.1.a. Coordinate to obtain an accounts receivable query for use in UNTI International.</p>	<p>1b. SPOD will have current manually maintained report with Student Finance for evaluation. They will work together to determine how to develop a system-generated accounts receivable query that provides the required information within the limitations of current technology. Student Finance</p>	Akela Nye, Director of Sponsored Student Programs (SPOD), and Jeanne Olson, Director of Financial Services, Student Finance	6/27/2018	Closed
Internal (Co-Sourced)	PWC	Fiscal Year 2017	17-310 DAL	Governance and Regulatory Compliance	Scholarship Review	UNT Dallas	<p>2. Management of Endowments</p> <p>UNT Dallas' process for creating/managing endowments and related gift agreements is not always consistent or in alignment with donor intent. Management has the primary responsibility for soliciting funds from donors and managing the ensuing relationships and endowments. When a donor agrees to provide funds for the University, Advancement and the donor first agree on what the funds will be used for. If the funds are unrestricted, they will be put into the appropriate bank account to be used at the University's discretion, which is typically on stipends. If the funds are restricted, Advancement develops an MOU or other gift agreement, and the funds are awarded to students as donor scholarships.</p> <p>Note: Management was aware of concerns around MOU Retention, Endowment Corpus Amounts, and Unused Endowment Funds and requested that the review specifically address these areas. See below for details on the observations, management of endowments, and MOU Retention.</p>	Moderate	<p>2.1.a. UNT Dallas should utilize the recommended general process to perform a review of all existing and future endowments to ensure that appropriate scholarship criteria is retained and reflects the current state of the agreement.</p>	<p>1a. Management will develop procedures necessary for the review of all existing MOUs, and retention instructions. Final recommendations were submitted to AIGT regarding programming. The report was accepted by AIGT on 10/27/2017. The CTO approved funding transfers necessary to correct the corpus balances in the two endowment funds. Management will work with the donor for Fund# 240003 to make sure that accurate information is placed to reflect the current endowment balance. Unused endowment funds will be disbursed in accordance with the MOU.</p>	Dr. Monica Williams, VP for University Advancement	11/21/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-407315	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>6. IRS Dollar Limitations Based on 403(b) Contributions</p> <p>A manual process breakdown in updating the year-to-date contribution amount in Peoplesoft caused two employees' ORP contribution amounts to be over contributed by both the institution and employee. This occurred when employee benefit changes were not entered into Peoplesoft, since the process is manual rather than a system configuration which automatically calculates contribution amounts.</p> <p>In detail, testing identified 2 out of 64 employees (3%) exceeded the annual IRS dollar compensation limitations based on 403(b) Contributions for Calendar Year 2015. These two employees elected a different financial service company in October 2015; however, in order to manually update the year-to-date contribution amount in Peoplesoft, therefore, Peoplesoft calculated their maximum contribution inaccurately.</p>	High	<p>Recommendations for the Assistant Vice Chancellor of Total Rewards:</p> <p>6.2.a. Work with the IRS to determine how excess contributions should be reported for these two employees.</p>	2a. We will work with appropriate parties, both internally and externally, to determine and execute any needed reporting.	Janet Waldron, Vice Chancellor of Finance	12/21/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-407315	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>6. IRS Dollar Limitations Based on 403(b) Contributions</p> <p>A manual process breakdown in updating the year-to-date contribution amount in Peoplesoft caused two employees' ORP accounts to be over contributed by both the institution and employee. This occurred when employee benefit changes were not entered into Peoplesoft, since the process is manual rather than a system configuration which automatically calculates contribution amounts.</p> <p>In detail, testing identified 2 out of 64 employees (3%) exceeded the annual IRS dollar compensation limitations based on 403(b) Contributions for Calendar Year 2015. These two employees elected a different financial service company in October 2015; however, in order to manually update the year-to-date contribution amount in Peoplesoft, therefore, Peoplesoft calculated their maximum contribution inaccurately.</p>	High	<p>Recommendations for the Assistant Vice Chancellor of Total Rewards:</p> <p>6.2.a. Work with the Office of General Counsel to determine if corrected W-2 statements should be issued to employees and ensure internal payroll records are corrected.</p>	2b. We will work with appropriate parties to determine and execute any needed W-2 reporting or records updates.	Janet Waldron, Vice Chancellor of Finance	12/21/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal (Co-Sourced)	PWC	Fiscal Year 2017	17-310 DAL	Governance and Regulatory Compliance	Scholarship Review	UNT Dallas	<p>2. Management of Endowments</p> <p>UNT Dallas' process for creating/managing endowments and related gift agreements is not always consistent or in alignment with donor intent. Advancement has the primary responsibility for soliciting funds from donors and managing the ensuing relationships and endowments. When a donor agrees to provide funds for the University, Advancement and the donor first agree on whether the funds will be unrestricted or restricted. If the funds are unrestricted, they will be put into the appropriate bank account to be used at the University's discretion, which is typically for institutional scholarships. If the funds are restricted, Advancement develops an MOU or other gift agreement, and the funds are awarded to students as donor scholarships.</p> <p>Note: Management was aware of concerns around MOU Retention, Reporting, Corpus Amounts, and Unused Endowment Funds and requested that the observations be included in the management of endowments MOU Retention.</p>	Moderate	<p>2.2.a. UNT Dallas should utilize the recommended general approach to perform continuous monitoring of endowment account financial activity through the review detailed in the above recommendation.</p>	<p>2a. Management will develop procedures necessary for MOUs, and retention instructions. Final expenditure report was submitted to the Board of Regents on 10/27/2017. The CFO approved funding transfers necessary to correct the corpus balances in the two MOUs. Management will work with the donor for Fund# 240003 to make sure that accurate documentation is in place to ensure that accurate endowment balance. Unused endowment funds will be disbursed in accordance with the MOU.</p>	Dr. Monica Williams, VP for University Advancement	12/31/2018	Open
Internal (Co-Sourced)	PWC	Fiscal Year 2017	17-310 DAL	Governance and Regulatory Compliance	Scholarship Review	UNT Dallas	<p>2. Management of Endowments</p> <p>UNT Dallas' process for creating/managing endowments and related gift agreements is not always consistent or in alignment with donor intent. Advancement has the primary responsibility for soliciting funds from donors and managing the ensuing relationships and endowments. When a donor agrees to provide funds for the University, Advancement and the donor first agree on whether the funds will be unrestricted or restricted. If the funds are unrestricted, they will be put into the appropriate bank account to be used at the University's discretion, which is typically for institutional scholarships. If the funds are restricted, Advancement develops an MOU or other gift agreement, and the funds are awarded to students as donor scholarships.</p> <p>Note: Management was aware of concerns around MOU Retention, Reporting, Corpus Amounts, and Unused Endowment Funds and requested that the observations be included in the management of endowments MOU Retention.</p>	Moderate	<p>2.3.a. UNT Dallas Financial Reporting should transfer funds from the University or the spendable portion of the endowment to increase the endowment's corpus amounts to the appropriate amounts as defined in the MOU. Additionally, UNT Dallas should ensure that the donor for Fund# 240003 to ensure that the remaining pledged amount of \$400,000 is received, and any portion of the amount not received is being donated funds, including amounts and use of funds. Management will work with the donor to ensure the collaboration of the recommended scholarship committee.</p>	<p>3a. Management will develop procedures necessary for improved accountability that includes templates for instructions. Final expenditure report was submitted to A18T regarding Barry College high school on 10/27/2017. The CFO approved funding transfers necessary to correct the corpus balances in the two MOUs. Management will work with the donor for Fund# 240003 to make sure that accurate documentation is in place to ensure that accurate endowment balance. Unused endowment funds will be disbursed in accordance with the MOU.</p>	Dr. Monica Williams, VP for University Advancement	12/31/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2017	17-407 SYS	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>6. Insufficient Documentation</p> <p>Sufficient documentation was not maintained for 1 out of a sample population of 71 employee's tested for the purpose of determining the participant's proper contribution rate as required by the Texas Administrative Code.</p> <p>During our review of HR records, we were unable to validate the employee's contribution rate was set in accordance with the statute. Specifically, although the employee has prior Texas state experience dating back to 1992 which makes the employee eligible for the 8.5% contribution rate, the employee was given the non-grandfather rate of 16.6%.</p> <p>Additionally, we noted the Prior State Service Verification and Release Information form was not updated to reflect the current ORP rate. Management was not able to provide the request for authorization of prior year service from other Texas state agencies.</p>	Moderate	<p>Recommendations for the Assistant Vice Chancellor of Total Rewards:</p> <p>8.1. Validate with prior state institutions of the ORP participant's grandfather status and adjust the ORP rate going forward, if needed. If grandfather status is confirmed, contribute additional funds starting from the employee's hire date.</p>	<p>1a. This recommendation applies to individuals who have prior state service who has to be verified by the original employer(s). In this case, the two former institutions validate prior state service but neither indicated any participation in the ORP program. Without any validation the individual qualified for the grandfathered ORP program and higher employer contribution rate. The individual was enrolled in the current ORP program.</p> <p>Based on the potential error in this audit finding, the Benefits and Records teams requested information from the two former institutions to determine if the employee participated in the grandfathered ORP plan. Consequently, records were updated and the under-payment employer contributions were calculated and credited to the individual's retirement account during April payroll processing.</p>	Christopher DeClerk, Assistant Vice Chancellor of Total Rewards	4/30/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2012	17-207315	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>8. Insufficient Documentation</p> <p>Sufficient documentation was not maintained for 1 out of a sample population of 71 employees tested for the purpose of determining the participant's proper contribution rate as required by the Texas Administrative Code.</p> <p>During our review of HR records, we were unable to validate the employee's contribution rate was set in accordance with the statute. Specifically, the employee was prior to the effective date of the statute, 1982, which makes the employee eligible for 8.5% grandfathers rate, the employee was given the non-grandfather rate of 6.6%.</p> <p>Additionally, we noted the "Prior State Services Verification and Release Information" form was not updated to reflect the current ORP non-grandfather rate. This form is provided to the employee to request authorization of prior year service from other Texas state agencies.</p>	Moderate	<p>Recommendations for the Assistant Vice Chancellor of Total Rewards:</p> <p>8.1.b. Ensure sufficient documentation is maintained on file.</p>	<p>1.b. There is not a standard database for ORP retirement information. As a result, state institutions rely on one another to provide accurate information. The records maintained accurately reflected the original information provided from the prior institutions. After the other state institutions sent revised information, UNTS records were updated.</p>	Christopher DeGruk, Assistant Vice Chancellor of Total Rewards	4/29/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2012	17-207315	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>8. Insufficient Documentation</p> <p>Sufficient documentation was not maintained for 1 out of a sample population of 71 employees tested for the purpose of determining the participant's proper contribution rate as required by the Texas Administrative Code.</p> <p>During our review of HR records, we were unable to validate the employee's contribution rate was set in accordance with the statute. Specifically, the employee was prior to the effective date of the statute, 1982, which makes the employee eligible for 8.5% grandfathers rate, the employee was given the non-grandfather rate of 6.6%.</p> <p>Additionally, we noted the "Prior State Services Verification and Release Information" form was not updated to reflect the current ORP non-grandfather rate. This form is provided to the employee to request authorization of prior year service from other Texas state agencies.</p>	Moderate	<p>Recommendations for the Assistant Vice Chancellor of Total Rewards:</p> <p>8.1.c. Update the "Prior State Services Verification and Release of Information" form to reflect the current ORP non-grandfather rate. This should be reviewed every January and updated accordingly.</p>	<p>1.c. The prior state services form had been updated, but will be revised as appropriate when state contributions change as a result of a legislative session. Prior state service is part of the formal onboarding process. Additionally, the Total Rewards Records Team initiated a project to ask employees to review their service records and report inaccuracies with former state employers' reported time.</p>	Christopher DeGruk, Assistant Vice Chancellor of Total Rewards	4/29/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2012	17-207315	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>9. Untimely Deposits of Refund Contribution Checks</p> <p>Refund contribution checks received from financial services companies are held by the institution for an extended period of time and not deposited on a timely basis.</p> <p>During our review of ORP contributions, we noted both Total Rewards and Controller Operations teams receive a low volume of refund contribution checks. Specifically, we reviewed checks for the period of 6/1/2012 to 6/30/2012. We noted that 20% of the 2012 checks were sent to the institution as a result of adjustments to ORP participant accounts including but not limited to improper account set up, over contribution and/or salary overpayment.</p>	Moderate	<p>Recommendation for the Senior Director of Controller Operations and Assistant Vice Chancellor of Total Rewards:</p> <p>9.1.a. Develop internal procedures on how to process retirement refund and secure checks.</p>	<p>1a. Payroll has already implemented the practice to deposit any retirement refund checks within three business days from the date of receipt. The checks are deposited in organizations' payroll clearing account pending response from HR Benefits to take the appropriate action.</p> <p>When these situations arise, HR Benefits researches the situation with the retirement vendor and determines the reason for the returned check. HR Benefits then coordinates appropriate corrective action with the payroll team. These procedures are already in place.</p>	Abdul Mohammad, Senior Director of Controller Operations, and Christopher DeGruk, Assistant Vice Chancellor of Total Rewards	1/2/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-207-015	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>10. OIP Reports Submitted to Texas Higher Education Coordinating Board (THECB)</p> <p>Inaccurate information documented on the OIP report was submitted to the THECB.</p> <p>Reconciliation testing of UNT System FY2016 OIP Report submitted to the THECB identified total OIP contributions by the employer were \$1,000,000 less than the amount reported on the OIP report. The amount of the amount submitted on the FY2016 OIP Report to the actual OIP payroll deductions submitted for the financial services companies.</p>	Moderate	<p>Recommendation for the Senior Director of Controller Operations and Assistant Vice Chancellor of Total Rewards:</p> <p>10.1.a. Develop a collaborative process to accurately record OIP payments for the UNT System, UNT Dallas and UNTSC OIP reports.</p>	<p>1.a. Develop a collaborative process to HR and Payroll are each providing and checking information pertinent to their areas to ensure report accuracy. The next annual OIP report is due October 1, 2017. This plan will be implemented for the next reporting cycle, completed by the due date.</p>	Abdul Mohammad, Senior Director of Controller Operations and Christopher DeClerk, Assistant Vice Chancellor of Total Rewards	10/1/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	16-108-015	Governance and Regulatory Compliance	Student Data Access Audit	UNT	<p>1. Unauthorized Users with Access</p> <p>75 unauthorized users had access to personal student data including cell phone numbers on February 3, 2017.</p> <p>Non-Employees with No Authorization (42)</p> <p>Internal Audit requested the authorization form for the access to the UNT System Student Records System (SRS) for the following FERPA Training Completion and Request for EIS Access to View Basic Student Records Form (FERPA Form).</p> <p>"Non-employee" as used here is defined as users that have no record in the UNT System HR system. These users are not listed in the information Owners and departmental Access Control Executives (ACE) at each entity worked with Internal Audit to locate the FERPA Form. There were 42 instances where an authorization form could not be located.</p> <p>Former Employees Access Never Revoked (29)</p> <p>Internal Audit worked with ISS to determine the employment status of 29 former employees.</p>	High	<p>Recommendations for UNT Senior Director, Registrar:</p> <p>11.a. Revoke access on the provided list of 75 users that fall under your authority.</p>	<p>1.a. We agree and this has been completed.</p>	Lynn McCreary, Registrar, UNT	11/25/2017	Closed
Internal (Co-Source)	PwC	Fiscal Year 2017	17-210-DAL	Governance and Regulatory Compliance	Scholarship Review	UNT Dallas	<p>1. Management of Endowments</p> <p>UNT Dallas' process for creating/managing endowments and related agreements is not always consistent or in alignment with donor intent.</p> <p>Advancement has the primary responsibility for soliciting funds from donors and managing the ensuing relationships and endowments. When a donor agrees to provide funds for the University, Advancement and the donor first agree on whether the funds will be restricted. If the funds are unrestricted, they will be put into the appropriate bank account to be used at the University's discretion, which is typically on institutional basis.</p> <p>Advancement manages the relationships, if the funds are restricted, Advancement oversees the management of the funds and the funds are awarded to students as donor scholarships.</p> <p>Note: Management was aware of concerns around MDU Retention, Reporting, Co-pay Awards, and Unused Endowment Funds and requested that the review specifically address these areas. See below for details on the observations related to the management of endowments.</p> <p>2. MDU Retention</p>	Moderate	<p>2.a. UNT Dallas should create and utilize gift agreement templates for MDUs as well as guidelines establishing authority for updating and/or changing terms to make gift agreement and consistent across all newly established endowments. Additionally, Advancement should consider working with UNT Dallas to create a guideline for gift agreements.</p>	<p>4.a. Management will develop procedures necessary for improved accountability that include the following: MDUs, and retention instructions. Final expenditure report was submitted to the Board of Early College High School programming. The report was accepted by ATE&I on June 1, 2017. On 6/1/2017, the Board approved funding transfers necessary to correct the corpus balances in the two impacted endowment funds. The Board also approved the donor for Fund 240003 to make sure that accurate documentation is in place to ensure the endowment balance. Unused endowment funds will be disbursed in accordance with the MDU.</p>	Dr. Monica Williams, VP for University Advancement	12/31/2018	Open

UNTS Enterprise Audit Report Inventory

Internal / External (Source)	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal (Sourced)	PWC	Fiscal Year 2017	17-210 DAL	Governance and Regulatory Compliance	Scholarship Review	UNT Dallas	<p>2. Management of Endowments</p> <p>UNT Dallas' process for creating/managing endowments and related gift agreements is not always consistent or in alignment with donor intent. Advancement has the primary responsibility for soliciting funds from donors and managing the ensuing relationships and endowments. When a donor provides funds for the University, Advancement and the donor first agree on whether the funds will be unrestricted or restricted. If the funds are unrestricted, they will be put into the unrestricted account to be used at the University's discretion, which is typical for institutional scholarships. If the funds are restricted, Advancement develops an MOU or other gift agreement, and the funds are awarded to students as donor scholarships.</p> <p>The management was aware of concerns around MOU retention, reporting, Endowment Corpus Amounts, and Unused Endowment Funds and requested that the management specifically address these areas. See below for details on the observations related to the management of endowments.</p> <p>1. MOU Retention</p> <p>2. No Background Check for Non-Employee Spouse Living in Residence Hall</p> <p>There is no background check performed for either a non-employee spouse or a non-employee acquaintance of a UNT employee when both are living in a UNT residence hall.</p> <p>This includes hall Directors, Assistant Hall Directors, and Faculty-in-Residence. The current practice is to perform background checks of employees.</p>	Moderate	<p>1.5.3. UNT Dallas should begin awarding scholarships to students from these two endowments with the assistance from the recommended general scholarship committee includes members from Finance & Early College High School who are responsible for the management of scholarship funds as described by A188 on June 1, 2017. On 10/27/2017, the CFO approved funding transfers from the donor to the impacted endowment funds. Management will work with the donor for Funds 20003 and 20004 to ensure the documentation is in place to reflect the current endowment balance. Unused endowment funds will be disbursed in accordance with the MOU.</p>	Dr. Monica Williams, VP for University Advancement	12/31/2018	Open	
Internal	UNT System Internal Audit	Fiscal Year 2017	17-021 UNT	Governance and Regulatory Compliance	Residence Hall - Student Safety Practices	UNT	<p>2. Personally Identifiable Information</p> <p>During our walk-through of the Clinic file, we identified personally identifiable information (PII) (i.e. copies of checks that contains name, address, and bank account information) related to patient payments. The PII was stored in a file cabinet located in the Director's office in binders located on a shelf and in envelopes located in the filing cabinet, which may be accessible to non-authorized personnel when the Director is not present. PII information should be kept secured and protected against unauthorized access and use in compliance with applicable laws and regulations.</p>	High	<p>Recommendation for Gma Vanacore, Director of Housing and Residence Life:</p> <p>2.1.a. Coordinate with UNT System Human Resources to ensure that a background check for either the spouse or the non-employee acquaintance of a UNT employee living in a residence hall be performed.</p>	Gma M. Vanacore, Director of Housing and Residence Life	Exp. Impl. Date: 12/31/2017 Revised Impl. Date: 07/31/2018	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2017	17-143 DAL	Governance and Regulatory Compliance	Community Counseling Clinic Audit	UNT Dallas	<p>2. Personally Identifiable Information</p> <p>During our walk-through of the Clinic file, we identified personally identifiable information (PII) (i.e. copies of checks that contains name, address, and bank account information) related to patient payments. The PII was stored in a file cabinet located in the Director's office in binders located on a shelf and in envelopes located in the filing cabinet, which may be accessible to non-authorized personnel when the Director is not present. PII information should be kept secured and protected against unauthorized access and use in compliance with applicable laws and regulations.</p>	High	<p>Recommendations for the Provost:</p> <p>2.1.a. Develop procedures to help ensure that all PII is appropriately protected against inappropriate access and use in compliance with applicable laws and regulations.</p>	Both Sherryl Prewitt, Executive Vice President of Academic Affairs	8/31/2019	Open	

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	16-08-915	Governance and Regulatory Compliance	Student Data Access Audit	UNTHSC	<p>75 unauthorized users had access to personal student data including cell phone numbers on February 3, 2017.</p> <p>Non-Employees with No Authorization (42) Internal Audit requested the authorization form for the access granted to non-employees. The authorization form is called the FERPA Training Completion and Request for EIS Access to View Basic Student Records Form (FERPA Form).</p> <p>Non-employees* as used here is defined as users that have no record in the HR database and no vendor authorization form with ITSS. Information Owners and departmental Access Control Executives (ACEs) at each entity worked with Internal Audit to locate the FERPA Form. There were 42 instances where an authorization form could not be located.</p> <p>Former Employees Access Never Revoked (29) Internal Audit worked with ITSS to determine the employment status of all users with access and identified 29 users that had been former employees.</p>	High	<p>Recommendations for UNTHSC, Executive Director, Enrollment Services:</p> <p>1.2.a. Revoke access on the provided list of 75 users that fall under your authority.</p>	<p>2a. We agree. All roles for the users that fall under my authority (ISC, A. J. Randolph, Registrar, UNTHSC) will be revoked. To my knowledge, this has already been completed.</p>	A. J. Randolph, Registrar, UNTHSC	9/17/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	16-08-915	Governance and Regulatory Compliance	Student Data Access Audit	UNTHSC	<p>75 unauthorized users had access to personal student data including cell phone numbers on February 3, 2017.</p> <p>Non-Employees with No Authorization (42) Internal Audit requested the authorization form for the access granted to non-employees. The authorization form is called the FERPA Training Completion and Request for EIS Access to View Basic Student Records Form (FERPA Form).</p> <p>Non-employees* as used here is defined as users that have no record in the HR database and no vendor authorization form with ITSS. Information Owners and departmental Access Control Executives (ACEs) at each entity worked with Internal Audit to locate the FERPA Form. There were 42 instances where an authorization form could not be located.</p>	High	<p>Recommendations for UNTHSC, Executive Director, Enrollment Services:</p> <p>1.2.a. Separates the verification of completed FERPA training from the form to obtain access to student data, so that all users trained do not automatically receive access.</p>	<p>2b. We agree. The responsible individual will separate the access authorization form from the FERPA training. Both will be required for users to obtain access.</p>	A. J. Randolph, Registrar, UNTHSC	9/17/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	16-08-915	Governance and Regulatory Compliance	Student Data Access Audit	UNTHSC	<p>75 unauthorized users had access to personal student data including cell phone numbers on February 3, 2017.</p> <p>Non-Employees with No Authorization (42) Internal Audit requested the authorization form for the access granted to non-employees. The authorization form is called the FERPA Training Completion and Request for EIS Access to View Basic Student Records Form (FERPA Form).</p> <p>Non-employees* as used here is defined as users that have no record in the HR database and no vendor authorization form with ITSS. Information Owners and departmental Access Control Executives (ACEs) at each entity worked with Internal Audit to locate the FERPA Form. There were 42 instances where an authorization form could not be located.</p>	High	<p>Recommendations for UNTHSC, Executive Director, Enrollment Services:</p> <p>1.2.c. Change the access authorization form to include the user's job and employment status.</p>	<p>2c. We agree. The responsible individual will update the access authorization form to include both the user's job and employment status.</p>	A. J. Randolph, Registrar, UNTHSC	9/17/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	16-108-915	Governance and Regulatory Compliance	Student Data Access Audit	UNTHSC	<p>1. Unauthorized Users with Access</p> <p>75 unauthorized users had access to personal student data including cell phone numbers on February 3, 2017.</p> <p>Non-Employees with No Authorization (42)</p> <p>Internal Audit requested the authorization form for the access granted to non-employees. The authorization form is called the FERPA Training Completion and Request for EIS Access to View Basic Student Records Form (FERPA Form).</p> <p>"Non-employees" as used here is defined as users that have no record in the HR database and no vendor authorization form with ITSS. Internal Audit worked with ITSS to determine the employment status of all users with access and identified 29 users that had been former employees. The reason for the inappropriate access was the failure of ITSS to create a PeopleSoft bolt-on to deprovision access accounts immediately upon a change of employment status in 2006. During the audit, it was discovered that the automated tool occasionally failed to</p>	High	<p>Recommendations for UNTHSC Executive Director, Enrollment Services:</p> <p>1.2.d. Before granting access, verify the job and employment status of users are accurate and reasonable to justify access to student data.</p>	<p>2d. We agree. Responsible individual will work with HR to obtain access to HR data that will allow ACE to verify job and employment status.</p>	A. J. Randolph, Registrar, UNTHSC	9/1/2017 Rev. 11/15/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	16-108-915	Governance and Regulatory Compliance	Student Data Access Audit	UNTHSC	<p>1. Unauthorized Users with Access</p> <p>75 unauthorized users had access to personal student data including cell phone numbers on February 3, 2017.</p> <p>Non-Employees with No Authorization (42)</p> <p>Internal Audit requested the authorization form for the access granted to non-employees. The authorization form is called the FERPA Training Completion and Request for EIS Access to View Basic Student Records Form (FERPA Form).</p> <p>"Non-employees" as used here is defined as users that have no record in the HR database and no vendor authorization form with ITSS. Information Owners and Departmental Access Control Executive (ACE) at each entity worked with Internal Audit to locate the FERPA Form. There were 42 instances where an authorization form could not be located.</p> <p>Former Employees Access Never Revoked (29)</p> <p>Internal Audit worked with ITSS to determine the employment status of all users with access and identified 29 users that had been former employees. The reason for the inappropriate access was the failure of ITSS to create a PeopleSoft bolt-on to deprovision access accounts immediately upon a change of employment status in 2006. During the audit, it was discovered that the automated tool occasionally failed to</p>	High	<p>Recommendations for UNTHSC Executive Director, Enrollment Services:</p> <p>1.2.e. Annually review access list based on documented risk management decisions.</p>	<p>2e. We agree. Responsible individual will work develop process to annually review user access to determine if access remains appropriate according to documented risk management decisions.</p>	A. J. Randolph, Registrar, UNTHSC	9/1/2017 Rev. 11/15/2017	Closed

UNTS Enterprise Audit Report Inventory

Reporting Agency Internal/ External	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	Fiscal Year 2017	16-108-915	Governance and Regulatory Compliance	Student Data Access Audit	UNT Dallas	<p>1. Unauthorized Users with Access</p> <p>75 unauthorized users had access to personal student data including cell phone numbers on February 3, 2017.</p> <p>Non-Employees with No Authorization (42)</p> <p>Internal Audit requested the authorization form for the access granted to non-employees. The authorization form is called the FERPA Training Completion and Request for EIS Access to View Basic Student Records Form (FERPA Form).</p> <p>"Non-employees" as used here is defined as users that have no record in the HR database and no vendor authorization form with ITSS. Internal Audit requested the authorization form to locate the FERPA (ACEE) at each entity worked with Internal Audit to locate the FERPA Form. There were 42 instances where an authorization form could not be located.</p> <p>Former Employees Access: Never Revoked (29)</p> <p>Internal Audit worked with ITSS to determine the employment status of all users with access and identified 29 users that had been former employees. The reason for the inappropriate access was the failure of ITSS to create a PeopleSoft bolt-on to deprovision access accounts immediately upon a change of employment status in 2006. During the audit, it was discovered that the automated tool occasionally failed to</p>	High	<p>Recommendations for UNT Dallas, Registrar:</p> <p>1.3 a. Revoke access on the provided list of 75 users that fall under your authority.</p>	<p>2a. We agree and will immediately revoke access to all those affiliated with UNT Dallas.</p>	Karen Barrett, Registrar, UNT Dallas	9/7/2017	Closed
Internal	Fiscal Year 2017	16-108-915	Governance and Regulatory Compliance	Student Data Access Audit	UNT Dallas	<p>1. Unauthorized Users with Access</p> <p>75 unauthorized users had access to personal student data including cell phone numbers on February 3, 2017.</p> <p>Non-Employees with No Authorization (42)</p> <p>Internal Audit requested the authorization form for the access granted to non-employees. The authorization form is called the FERPA Training Completion and Request for EIS Access to View Basic Student Records Form (FERPA Form).</p> <p>"Non-employees" as used here is defined as users that have no record in the HR database and no vendor authorization form with ITSS. Information Owners and Departmental Access Control Executive (ACEE) at each entity worked with Internal Audit to locate the FERPA Form. There were 42 instances where an authorization form could not be located.</p> <p>Former Employees Access: Never Revoked (29)</p> <p>Internal Audit worked with ITSS to determine the employment status of all users with access and identified 29 users that had been former employees. The reason for the inappropriate access was the failure of ITSS to create a PeopleSoft bolt-on to deprovision access accounts immediately upon a change of employment status in 2006. During the audit, it was discovered that the automated tool occasionally failed to</p>	High	<p>Recommendations for UNT Dallas, Registrar:</p> <p>1.3 a. Separate the certification of completed FERPA training from the form to obtain access to student data, so that all users trained do not automatically receive access.</p>	<p>3b. We agree. We will continue to use our normal FERPA training module for all UNT Dallas faculty, staff and administration. We will create a separate FERPA training module for the 1000+ based security form approved by the Vice President providing oversight that specifically delineates the access needed by the specific staff person based on the job they are assigned. Where there may exist a need for a user to have access to student data, we will ensure that the job address the need. There will be an annual review of all staff with EIS security to ensure access is appropriate and any risk mitigated.</p>	Karen Barrett, Registrar, UNT Dallas	9/7/2017	Closed

UNTS Enterprise Audit Report Inventory

Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal/ External	UNT System Internal Audit	16-108-915	Governance and Regulatory Compliance	Student Data Access Audit	UNT Dallas	<p>1. Unauthorized Users with Access</p> <p>75 unauthorized users had access to personal student data including cell phone numbers on February 3, 2017.</p> <p>Non-Employees with No Authorization (2)</p> <p>Internal Audit requested the authorization form for the access granted to non-employees. The authorization form is called the FERPA Training Completion and Request for EIS Access to View Basic Student Records Form (FERPA Form).</p> <p>"Non-employees" as used here is defined as users that have no record in the HR database and no vendor authorization form with ITSS. Internal Audit requested the authorization form for the access granted to non-employees. The authorization form is called the FERPA Training Completion and Request for EIS Access to View Basic Student Records Form (FERPA Form). There were 42 instances where an authorization form could not be located.</p> <p>Former Employees Access Never Revoked (29)</p> <p>Internal Audit worked with ITSS to determine the employment status of all users with access and identified 29 users that had been former employees. The reason for the inappropriate access was the failure of ITSS to create a PeopleSoft bolt-on to deprovision access accounts immediately upon a change of employment status in 2006. During the audit, it was discovered that the automated tool occasionally failed to</p>	High	<p>Recommendations for UNT Dallas, Registrar:</p> <p>1.3.c. Change the access authorization form to include the user's job and employment status.</p>	<p>3c. We agree. Once FERPA Training is completed, we will utilize a role-based security form approved by the Vice President providing oversight that specifically delineates the access needed by the specific staff person based on the user's job they are assigned and the user's employment status. We will also ensure that the role-based access for a specified person, we will document the role and access assignment. There will be an annual review of all staff with EIS security to ensure access is appropriate and any risk mitigated.</p>	Karen Jarrell, Registrar, UNT Dallas	9/7/2017	Closed
Internal	UNT System Internal Audit	16-108-915	Governance and Regulatory Compliance	Student Data Access Audit	UNT Dallas	<p>1. Unauthorized Users with Access</p> <p>75 unauthorized users had access to personal student data including cell phone numbers on February 3, 2017.</p> <p>Non-Employees with No Authorization (2)</p> <p>Internal Audit requested the authorization form for the access granted to non-employees. The authorization form is called the FERPA Training Completion and Request for EIS Access to View Basic Student Records Form (FERPA Form).</p> <p>"Non-employees" as used here is defined as users that have no record in the HR database and no vendor authorization form with ITSS. Information Owners and Departmental Access Control Executive (ACE) at each entity worked with Internal Audit to locate the FERPA Training Completion and Request for EIS Access to View Basic Student Records Form (FERPA Form). There were 42 instances where an authorization form could not be located.</p> <p>Former Employees Access Never Revoked (29)</p> <p>Internal Audit worked with ITSS to determine the employment status of all users with access and identified 29 users that had been former employees. The reason for the inappropriate access was the failure of ITSS to create a PeopleSoft bolt-on to deprovision access accounts immediately upon a change of employment status in 2006. During the audit, it was discovered that the automated tool occasionally failed to</p>	High	<p>Recommendations for UNT Dallas, Registrar:</p> <p>1.3.d. Before granting access, verify the job and employment status are accurate and reasonable to justify access to student data.</p>	<p>3c. We agree. Prior to granting access, the user's job and employment status will be weighed against the request for access to data to ensure the user is appropriate for the access. We will ensure the completion of the position's job task.</p>	Karen Jarrell, Registrar, UNT Dallas	9/7/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-413 DAL	Governance and Regulatory Compliance	Community Counseling Clinic Audit	UNT Dallas	2. Personally identifiable information During our walk-through of the Clinic site, we identified personally identifiable information (PII) (i.e. copies of checks that contains name, address, phone numbers, and other identifying information) which dates back to 2010. Specifically, copies of checks are kept in the Director's office in binders located on a shelf and in envelopes located in the filing cabinet, which may be accessible to non-authorized personnel when the Director is not present. PII information is not adequately protected and may be subject to inappropriate access and use in compliance with applicable laws and regulations.	High	Recommendations for the Provost: 2.1.b. Collaborate with the Office of General Counsel to determine whether these documents are needed in evaluation of information for PHI notification.	1.b. We will submit drafts of all newly developed procedures to General Counsel for review. Additionally, we need to work with Executive Vice President of Academic Affairs to determine what documents are needed in the evaluation of information for PHI notification.	Becky Stewart, Provost/ Executive Vice President of Academic Affairs	8/17/2019	Open
Internal	UNT System Internal Audit	Fiscal Year 2017	16-108 SYS	Governance and Regulatory Compliance	Student Data Access Audit	UNT System	1. Unauthorized Users with Access 75 unauthorized users had access to personal student data including cell phone numbers on February 3, 2017. 2. Non-Employees with No Authorization (2) Internal Audit requested the authorization form for the access granted to non-employees. The authorization form is called the FERPA Training Completion and Request for EIS Access to View Basic Student Records Form (FERPA Form). 3. "Non-employees" as used here is defined as users that have no record in the HR database and no vendor authorization form with ITSS. Information Owners and Departmental Access Control Executives (ACEs) at each entity worked with Internal Audit to locate the FERPA Form for 64 instances where an authorization form could not be located. 4. Former Employees Access Never Revoked (2) Internal Audit requested the authorization form for the access granted to former employees and located 29 users that had been former employees. The reason for the inappropriate access was the failure of an automated tool, and in one case, oversight of a manual process. ITSS created a PeopleSoft tool on to deprovision access accounts. ITSS was unable to locate the authorization form for 29 of the 29 former employees. It was discovered that the automated tool occasionally failed to	High	Recommendations for Chief Information Security Officer, ITSS: 1.4.a. Revoke access on the provided list of 75 users that fall under your authority, specifically expired vendor and Oracle access users. 4a. We agree. Corrective action has been taken in regard to this finding. 47 non-employees were granted access by parties external to UNT. We will submit drafts of all newly developed procedures to General Counsel for review. Additionally, we need to work with Executive Vice President of Academic Affairs to determine what documents are needed in the evaluation of information for PHI notification.	4a. We agree. Corrective action has been taken in regard to this finding. 47 non-employees were granted access by parties external to UNT. We will submit drafts of all newly developed procedures to General Counsel for review. Additionally, we need to work with Executive Vice President of Academic Affairs to determine what documents are needed in the evaluation of information for PHI notification.	Charlotte Russell, Chief Information Security Officer, ITSS	6/30/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal / External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	16-108-515	Governance and Regulatory Compliance	Student Data Access Audit	UNT System	<p>1. Unauthorized Users with Access</p> <p>75 unauthorized users had access to personal student data including cell phone numbers on February 3, 2017.</p> <p>Non-Employees with No Authorization (42)</p> <p>Internal Audit requested the authorization form for the access granted to non-employees. The authorization form is called the FERPA Training Completion and Request for EIS Access to View Basic Student Records Form (FERPA Form).</p> <p>"Non-employees" as used here is defined as users that have no record in the HR database and no vendor authorization form with ITSS.</p> <p>Internal Audit worked with ITSS to determine the employment status of all users with access and identified 29 users that had been former employees. The reason for the inappropriate access was the failure of an automated tool, in one case, oversight of a manual process.</p> <p>ITSS created a Peoplesoft tool to create the FERPA Form. There were 42 instances where an authorization form could not be located.</p> <p>Former Employees Access Never Revoked (29)</p> <p>Internal Audit worked with ITSS to determine the employment status of all users with access and identified 29 users that had been former employees. The reason for the inappropriate access was the failure of an automated tool, in one case, oversight of a manual process.</p> <p>ITSS created a Peoplesoft tool to create the FERPA Form. There were 42 instances where an authorization form could not be located.</p>	High	<p>Recommendations for Chief Information Security Officer, ITSS:</p> <p>1. a. b. For the internal review process for removing access for vendors with expired authorization forms and the removal of Oracle access.</p>	<p>16. We agree. Contractive action has been taken to begin to begin. The internal review process has been modified to increase the frequency of access reviews and timeliness of access removal. In addition, modifications to individuals that have responsibilities for removing access has been broadened to include those that are external to ITSS.</p>	Christina Rowan, Chief Information Security Officer, ITSS	6/30/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	16-108-515	Governance and Regulatory Compliance	Student Data Access Audit	UNT System	<p>2. Unauthorized Users with Access</p> <p>75 unauthorized users had access to personal student data including cell phone numbers on February 3, 2017.</p> <p>Non-Employees with No Authorization (42)</p> <p>Internal Audit worked with ITSS to determine the employment status of all users with access and identified 29 users that had been former employees. The reason for the inappropriate access was the failure of an automated tool, in one case, oversight of a manual process.</p> <p>ITSS created a Peoplesoft tool to create the FERPA Form. There were 42 instances where an authorization form could not be located.</p>	High	<p>Recommendation for Executive Director of Enterprise Applications, ITSS:</p> <p>1. a. Correct the identified coding issue with the automated provisioning tool on "Role Removal" and validate it is effectively removing access on terminated employees.</p>	<p>15. We agree. Efforts are currently underway to correct programming code in the "Role Removal" process, to ensure that all appropriate user access is removed from the production environment and in production within the next six months.</p>	Dorothy Flores, Executive Director of Enterprise Applications, ITSS	12/15/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	16-108-515	Governance and Regulatory Compliance	Student Data Access Audit	UNT System	<p>3. Lack of Review of Access Controls for Non-Employees</p> <p>20 non-employee had access to personal student data including cell phone numbers and their need for access had not been verified in over a year.</p> <p>See final report for table.</p> <p>Internal Audit requested any documentation to support the review of access controls for non-employees. The most recent information owners provided 20 authorization forms which were completed over a year ago. These authorization forms did not have an authorization expiration date and the majority of them were over five years old. See the chart above for a breakdown of their age.</p>	High	<p>Recommendations for UNT Senior Director, Registrar:</p> <p>2.1. a. Verify the 20 non-employee users have a legitimate business need for access.</p>	<p>13. We agree. The registrar, office will verify the 20 non-employee users have a legitimate business need for access.</p>	Lynn McCaskey, Registrar, UNT	9/17/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	16-108-315	Governance and Regulatory Compliance	Student Data Access Audit	UNT	<p>2. Lack of Review of Access Controls for Non-Employees</p> <p>20 non-employee had access to personal student data including cell phone numbers and their need for access had not been verified in over a year.</p> <p>See final report for table.</p> <p>Internal Audit requested any documentation to support the review of access controls for non-employees. Student data information owners provided 20 authorization forms which were completed over a year ago. These authorization forms did not have an authorization expiration date and the majority of them were over five years old, see the chart above for a breakdown of their age.</p>	High	<p>Recommendations for UNT Senior Director, Registrar:</p> <p>2.1.b. Require an access expiration date for all users that are not active employees and create a process to revoke the access as it expires.</p>	<p>1.b. We agree. The registrar's office will implement procedures to ensure that we require an access expiration date for all users that are not active employees and create a process to revoke the access as it expires.</p>	Lynn McCaughy, Registrar, UNT	9/7/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	16-108-315	Governance and Regulatory Compliance	Student Data Access Audit	UNTHSC	<p>2. Lack of Review of Access Controls for Non-Employees</p> <p>30 non-employee had access to personal student data including cell phone numbers and their need for access had not been verified in over a year.</p> <p>See final report for table.</p> <p>Internal Audit requested any documentation to support the authorization for the non-employees on the access list. Student data information owners provided 20 authorization forms which were completed over a year ago. These authorization forms did not have an authorization expiration date and the majority of them were over five years old, see the chart above for a breakdown of their age.</p>	High	<p>Recommendation for UNTHSC Executive Director, Enrollment Services:</p> <p>2.2.a. Require an access expiration date for all users that are not active employees and create a process to revoke the access as it expires.</p>	<p>2.a. We agree. Responsible individuals will create a documented process that will grant access based on a finite period of time. At the end of that period, the access will be automatically revoked. We will be implementing this process by the end of the fiscal year. We will be working with the registrar's office to ensure that we require an access expiration date for all users that are not active employees and create a process to revoke the access as it expires (e.g. consultants, etc.).</p>	A. J. Randolph, Registrar, UNTHSC	9/7/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	16-108-315	Governance and Regulatory Compliance	Student Data Access Audit	UNT Dallas	<p>2. Lack of Review of Access Controls for Non-Employees</p> <p>20 non-employee had access to personal student data including cell phone numbers and their need for access had not been verified in over a year.</p> <p>See final report for table.</p> <p>Internal Audit requested any documentation to support the review of access controls for non-employees. The most recent data information owners provided 20 authorization forms which were completed over a year ago. These authorization forms did not have an authorization expiration date and the majority of them were over five years old, see the chart above for a breakdown of their age.</p>	High	<p>Recommendation for: UNT Dallas, Registrar:</p> <p>2.3 a. Require an access expiration date for all users that are not active employees and create a process to revoke the access as it expires.</p>	<p>2.a. We agree. Prior to awarding access to any ES data, access for non-employees on contract work will have an expiration date set based on the dates of the contract. This date will be communicated with the institutional supervisor and the contract employee. Should the contract be renewed, the expiration date will be updated. A new contract will be provided with specified dates of termination. There will be a review ES security to ensure access is revoked and any risk mitigated.</p>	Kevin Barret, Registrar, UNT Dallas	9/7/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-413 DAL	Governance and Regulatory Compliance	Community Counseling Clinic Audit	UNT Dallas	<p>2. Personally Identifiable Information</p> <p>During our walk-through of the Clinic file, we identified personally identifiable information (PII) (i.e. copies of checks that contains name, address, and bank account information) related to patient payments which dates back to 2010. Specifically, copies of checks are kept in the Clinic file and are not scanned into the electronic records located in the file cabinet, which may be accessible to unauthorized personnel when the Director is not present. PII information should be kept secured and protected against inappropriate access and use in compliance with applicable laws and regulations.</p>	High	<p>Recommendations for the Provost:</p> <p>2.1.c. Once appropriate action is determined, work with the Director of Compliance to properly dispose records in accordance with state retention requirements.</p>	<p>1.c. The Clinic Director or Counseling Program Coordinator will work with the Administrative Specialist to coordinate the proper disposal of records not being collaboratively with the Director of Compliance.</p>	Betsy Stewart, Provost/ Executive Vice President of Academic Affairs	8/31/2019	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-015 UNT	Governance and Regulatory Compliance	Minor Capital Projects	UNT	<p>2. Project Tracking & Reporting</p> <p>There is no consistent reconciliation of project financial information. Additionally, there is no efficient way for management to obtain and review project financials. UNT Facilities has a software application called TMA (The Maintenance Authority) that was purchased to track project expenses and progress. Based on interviews with Project Managers, the primary method of tracking project expenses and progress is via a spreadsheet. Project Managers do not consistently update the spreadsheet level. Project Managers stated that they do not reconcile the information on the spreadsheets to TMA on a regular basis. Expenses are recorded in Peoplesoft, the University's financial system. Project Managers do not consistently update the information being performed between TMA and Peoplesoft, and the two systems do not interact. Therefore, project information in Peoplesoft is unreliable. University management and UNT System management do not consistently update the project information. In addition, UNT Facilities does not provide a project tracking report to either the UNT Vice President for Finance and Administration, UNT System OPRC, or the Board of Regents.</p>	High	<p>Recommendations for David Reynolds, Associate Vice President for Finance and Administration.</p> <p>2.1.c. Provide quarterly project tracking reports to the UNT Vice President for Finance and Administration.</p>	<p>The UNT Facilities will provide quarterly tracking reports to the UNT Vice President for Finance and Administration.</p>	<p>Primary - Hilary Lyons, Director of Facilities Business Support and Services; Secondary responsible party - David Reynolds, Associate Vice President for Finance and Administration</p>	6/15/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-414 UNT	Governance and Regulatory Compliance	Classroom Support Services	UNT	<p>2. Unique authentication not required in classrooms</p> <p>Unique authentication is not required to use classroom computers. A user is not required to log in or authenticate to use classroom computers. Just hitting a key on the keyboard or jostling the mouse will activate the computer, and the user then has unlimited access to the network via wireless routers and switches. The current registration process for all of the printers is available and published on the CSS website.</p>	High	<p>Recommendation for Classroom Support Services Director:</p> <p>2.1.a. Based on conclusions determined by the Senior level committee from Observation #11, CSS should implement the necessary security measures to comply with the direction provided by the committee.</p>	<p>1.a. We agree. The information from the committee will help to establish boundaries of information security to be considered by CSS. We will ensure that if a security protocol is aligned with the Computer Use Policy.</p>	<p>Dr. Allen Clark, Associate Vice President for Information Systems and Transportation, UNT</p>	<p>Exp. Impl. Date: 3/17/2018</p> <p>Revised Impl. Date: 12/21/2018</p>	Open

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-414 UNT	Governance and Regulatory Compliance	Classroom Support Services	UNT	<p>2. Unique authentication not required in classrooms</p> <p>Unique authentication is not required to use classroom computers. A user is not required to log in or authenticate to use classroom computers. The user is not required to enter a password to access the internet via several browsers. Even if a login was required, a generic user id and password is available and published on the CSS website.</p>	High	<p>Recommendation for Classroom Support Services Director:</p> <p>2.1. b. CSS should work with UNT's Chief Information Security Officer (CISO) to ensure compliance with all applicable laws and regulations.</p>	<p>1. The Web Sites, CSS will work with the CISO to ensure that classroom use computers are utilized in a manner that does not violate any known laws, policies and procedures.</p>	Dr. Alan Clark, Associate Vice President for Information Services and Transportation, UNT	Exp. Impl. Date: 3/1/2018 Revised Impl. Date: 12/01/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-412 UNT	Governance and Regulatory Compliance	College of Music Transition Audit	UNT	<p>3. Camps and Workshops</p> <p>Requirements relating to criminal background checks, sexual abuse and child molestation awareness training, medical insurance, and hold harmless and indemnification agreements for external camps were not fulfilled. Specifically, camp workers had contact with minors in the past 12 months. Background checks for all camp workers were not completed and 14 of 146 camps and workshops involving minors for fiscal year 2016. The following issues were noted through testing, review of documentation, and interviews:</p> <ul style="list-style-type: none"> 3.1. All camp workers (100%) had criminal background checks completed either on the day the camp started or after the camp started. 3.2. 34 of 251 camp workers (13.5%) completed sexual abuse awareness training on the day the camp started or after the camp started. 3.3. There was no process, and there is currently no process for verifying that all camp participants have medical insurance. Camps may purchase medical insurance for camp participants through Risk Management Services. Camps are responsible for ensuring that those who do not have medical insurance through RMS. 3.4. The Camp Director for Choir camps indicated to Internal Audit that the camps had purchased health insurance coverage through RMS. Based on support documentation obtained from RMS, and discussion with the Camp Director, the camps had purchased health insurance through RMS for Choir camps. 	High	<p>Recommendations for John Richmond, Dean of the College of Music:</p> <p>3.1. a. Designates a single point of contact for camps and workshops in the College of Music. This individual should coordinate with Risk Management Services regarding requirements relating to criminal background checks, sexual abuse and child molestation awareness training, and medical insurance.</p>	<p>1a. The Summer Camps Coordinator will be the single point of contact with Risk Management regarding requirements relating to criminal background checks, sexual abuse and child molestation awareness training, and medical insurance beginning September 1, 2017.</p>	Aimee Ordeen, Summer Camps Coordinator and Assistant to the Dean	1/31/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-412 UNT	Governance and Regulatory Compliance	College of Music Transition Audit	UNT	<p>3. Camps and Workshops</p> <p>Requirements relating to criminal background checks, sexual abuse and child molestation awareness training, medical insurance, and health insurance were not fulfilled. Specifically, camp workers had contact with minors prior to having had criminal background checks performed.</p> <p>Internal Audit identified and reviewed 16 music camps and workshops involving minors for fiscal year 2016. The following issues were noted through review of documentation, and interviews:</p> <ul style="list-style-type: none"> 31. 25 of 251 camp workers (10.0%) had criminal background checks completed either on the day the camp started or after the camp started. 32. 251 camp workers (13.5%) completed sexual abuse awareness training on the day the camp started or after the camp started. 33. There was no process, and there is currently no process for verifying that all camp participants have medical insurance. Camps may purchase medical insurance for camp participants through Risk Management Services (RMS). However, RMS does not follow up with those camps who do not purchase medical insurance through RMS. 34. The Camp Director for Choir camps indicated to Internal Audit that the camps had purchased health insurance coverage through RMS. Based on support documentation obtained from RMS and discussion with College of Music staff, there was no evidence that the Camp Director purchased medical insurance through RMS for Choir camps. <p>3. Camps and Workshops</p> <p>Requirements relating to criminal background checks, sexual abuse and child molestation awareness training, medical insurance, and health insurance were not fulfilled. Specifically, camp workers had contact with minors prior to having had criminal background checks performed. Internal Audit identified and reviewed 16 music camps and workshops involving minors for fiscal year 2016. The following issues were noted through review of documentation, and interviews:</p> <ul style="list-style-type: none"> 31. 25 of 251 camp workers (10.0%) had criminal background checks completed either on the day the camp started or after the camp started. 32. 251 camp workers (13.5%) completed sexual abuse awareness training on the day the camp started or after the camp started. 33. There was no process, and there is currently no process for verifying that all camp participants have medical insurance. Camps may purchase medical insurance for camp participants through Risk Management Services (RMS). However, RMS does not follow up with those camps who do not purchase medical insurance through RMS. 34. The Camp Director for Choir camps indicated to Internal Audit that the camps had purchased health insurance coverage through RMS. Based on support documentation obtained from RMS and discussion with College of Music staff, there was no evidence that the Camp Director purchased medical insurance through RMS for Choir camps. 	High	<p>Recommendations for John Richmond, Dean of the College of Music:</p> <p>31.b. Establish procedures to ensure that Risk Management Services (RMS) is contacted to verify that all camp workers have had criminal background checks performed for all music camp workers prior to the start of the music camp.</p>	<p>1b. The Summer Camps Coordinator, with support from the Dean of the College of Music, will ask that all criminal background checks that RMS through the Coordinator's office and to be certain that RMS is contacted to verify that all camp workers have had criminal background checks performed for all music camp workers prior to the start of the music camp, beginning January 2018. Risk Management can confirm that submission of background checks was nearly 100% in 2017, as contrasted with the 2016 data as reported here.)</p>	Aime Ordeen, Summer Camps Coordinator and Assistant to the Dean	Exp. Impl. Date: 01/21/2018 Rev. Impl. Date: 07/4/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-412 UNT	Governance and Regulatory Compliance	College of Music Transition Audit	UNT	<p>3. Camps and Workshops</p> <p>Requirements relating to criminal background checks, sexual abuse and child molestation awareness training, medical insurance, and health insurance were not fulfilled. Specifically, camp workers had contact with minors prior to having had criminal background checks performed. Internal Audit identified and reviewed 16 music camps and workshops involving minors for fiscal year 2016. The following issues were noted through review of documentation, and interviews:</p> <ul style="list-style-type: none"> 31. 25 of 251 camp workers (10.0%) had criminal background checks completed either on the day the camp started or after the camp started. 32. 251 camp workers (13.5%) completed sexual abuse awareness training on the day the camp started or after the camp started. 33. There was no process, and there is currently no process for verifying that all camp participants have medical insurance. Camps may purchase medical insurance for camp participants through Risk Management Services (RMS). However, RMS does not follow up with those camps who do not purchase medical insurance through RMS. 34. The Camp Director for Choir camps indicated to Internal Audit that the camps had purchased health insurance coverage through RMS. Based on support documentation obtained from RMS and discussion with College of Music staff, there was no evidence that the Camp Director purchased medical insurance through RMS for Choir camps. <p>3. Camps and Workshops</p> <p>Requirements relating to criminal background checks, sexual abuse and child molestation awareness training, medical insurance, and health insurance were not fulfilled. Specifically, camp workers had contact with minors prior to having had criminal background checks performed. Internal Audit identified and reviewed 16 music camps and workshops involving minors for fiscal year 2016. The following issues were noted through review of documentation, and interviews:</p> <ul style="list-style-type: none"> 31. 25 of 251 camp workers (10.0%) had criminal background checks completed either on the day the camp started or after the camp started. 32. 251 camp workers (13.5%) completed sexual abuse awareness training on the day the camp started or after the camp started. 33. There was no process, and there is currently no process for verifying that all camp participants have medical insurance. Camps may purchase medical insurance for camp participants through Risk Management Services (RMS). However, RMS does not follow up with those camps who do not purchase medical insurance through RMS. 34. The Camp Director for Choir camps indicated to Internal Audit that the camps had purchased health insurance coverage through RMS. Based on support documentation obtained from RMS and discussion with College of Music staff, there was no evidence that the Camp Director purchased medical insurance through RMS for Choir camps. 	High	<p>Recommendations for John Richmond, Dean of the College of Music:</p> <p>31.c. Establish procedures to ensure that all music camp workers complete the required sexual abuse and child molestation awareness training prior to the start of the music camp.</p>	<p>1c. Summer Camps Coordinator, with support from the Dean of the College of Music, will work with the Summer Camp Directors to be certain that all music camp workers complete the required sexual abuse and child molestation awareness training prior to the start of the music camp, beginning January 2018.</p>	Aime Ordeen, Summer Camps Coordinator and Assistant to the Dean	Exp. Impl. Date: 01/21/2018 Rev. Impl. Date: 07/4/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-412 UNT	Governance and Regulatory Compliance	College of Music Transition Audit	UNT	<p>3. Camps and Workshops</p> <p>Requirements relating to criminal background checks, sexual abuse and child molestation awareness training, medical insurance, and background checks were not fulfilled. Specifically, camp workers had contact with minors prior to having had criminal background checks performed.</p> <p>Internal Audit identified and reviewed 16 music camps and workshops involving minors for fiscal year 2016. The following issues were noted through review of documentation, and interviews:</p> <ul style="list-style-type: none"> 1) 25 of 251 camp workers (10.0%) had criminal background checks completed either on the day the camp started or after the camp started. 2) 351 camp workers (13.5%) completed sexual abuse awareness training on the day the camp started or after the camp started. 3) There was no process, and there is currently no process for verifying that all camp participants have medical insurance. Camps may purchase medical insurance for camp participants through Risk Management Services (RMS). However, RMS does not follow up with those camps who do not purchase medical insurance through RMS. 4) The Camp Director for Choir camps indicated to Internal Audit that the camps had purchased health insurance coverage through RMS. Based on support documentation obtained from RMS and discussion with College of Music staff, there was no evidence that the Camp Director purchased medical insurance through RMS for Choir camps. <p>3. Camps and Workshops</p> <p>Requirements relating to criminal background checks, sexual abuse and child molestation awareness training, medical insurance, and background checks were not fulfilled. Specifically, camp workers had contact with minors prior to having had criminal background checks performed.</p> <p>Internal Audit identified and reviewed 16 music camps and workshops involving minors for fiscal year 2016. The following issues were noted through review of documentation, and interviews:</p> <ul style="list-style-type: none"> 1) 25 of 251 camp workers (10.0%) had criminal background checks completed either on the day the camp started or after the camp started. 2) 34 of 251 camp workers (13.5%) completed sexual abuse awareness training on the day the camp started or after the camp started. 3) There was no process, and there is currently no process for verifying that all camp participants have medical insurance. Camps may purchase medical insurance for camp participants through Risk Management Services (RMS). However, RMS does not follow up with those camps who do not purchase medical insurance through RMS. 4) The Camp Director for Choir camps indicated to Internal Audit that the camps had purchased health insurance coverage through RMS. Based on support documentation obtained from RMS and discussion with College of Music staff, there was no evidence that the Camp Director purchased medical insurance through RMS for Choir camps. 	High	<p>Recommendations for John Richmond, Dean of the College of Music:</p> <p>3.1.d. Establish procedures to ensure that all music camp workers have had criminal background checks performed or properly report known or suspected abuse or neglect of a minor.</p>	<p>1.e. Attendance at Risk Management workshops will be mandatory in 2018 and the Summer Camps Coordinator will ensure that all directors and assistants know how to properly report known or suspected abuse or neglect of a minor.</p>	Aimee Orndien, Summer Camps Coordinator and Assistant to the Dean	Exp. Impl. Date: 01/21/2018 Rev. Impl. Date: 03/21/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-412 UNT	Governance and Regulatory Compliance	College of Music Transition Audit	UNT	<p>3. Camps and Workshops</p> <p>Requirements relating to criminal background checks, sexual abuse and child molestation awareness training, medical insurance, and background checks were not fulfilled. Specifically, camp workers had contact with minors prior to having had criminal background checks performed.</p> <p>Internal Audit identified and reviewed 16 music camps and workshops involving minors for fiscal year 2016. The following issues were noted through review of documentation, and interviews:</p> <ul style="list-style-type: none"> 1) 25 of 251 camp workers (10.0%) had criminal background checks completed either on the day the camp started or after the camp started. 2) 34 of 251 camp workers (13.5%) completed sexual abuse awareness training on the day the camp started or after the camp started. 3) There was no process, and there is currently no process for verifying that all camp participants have medical insurance. Camps may purchase medical insurance for camp participants through Risk Management Services (RMS). However, RMS does not follow up with those camps who do not purchase medical insurance through RMS. 4) The Camp Director for Choir camps indicated to Internal Audit that the camps had purchased health insurance coverage through RMS. Based on support documentation obtained from RMS and discussion with College of Music staff, there was no evidence that the Camp Director purchased medical insurance through RMS for Choir camps. <p>3. Camps and Workshops</p> <p>Requirements relating to criminal background checks, sexual abuse and child molestation awareness training, medical insurance, and background checks were not fulfilled. Specifically, camp workers had contact with minors prior to having had criminal background checks performed.</p> <p>Internal Audit identified and reviewed 16 music camps and workshops involving minors for fiscal year 2016. The following issues were noted through review of documentation, and interviews:</p> <ul style="list-style-type: none"> 1) 25 of 251 camp workers (10.0%) had criminal background checks completed either on the day the camp started or after the camp started. 2) 34 of 251 camp workers (13.5%) completed sexual abuse awareness training on the day the camp started or after the camp started. 3) There was no process, and there is currently no process for verifying that all camp participants have medical insurance. Camps may purchase medical insurance for camp participants through Risk Management Services (RMS). However, RMS does not follow up with those camps who do not purchase medical insurance through RMS. 4) The Camp Director for Choir camps indicated to Internal Audit that the camps had purchased health insurance coverage through RMS. Based on support documentation obtained from RMS and discussion with College of Music staff, there was no evidence that the Camp Director purchased medical insurance through RMS for Choir camps. 	High	<p>Recommendations for John Richmond, Dean of the College of Music:</p> <p>3.1.e. Purchase medical insurance through Risk Management Services for all minor music camp participants.</p>	<p>1.e. The Summer Camps Coordinator will oversee and ensure that all camps with uninsured minors purchase medical insurance through Risk Management services, beginning January, 2018.</p>	Aimee Orndien, Summer Camps Coordinator and Assistant to the Dean	1/21/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-412 UNT	Governance and Regulatory Compliance	College of Music Transition Audit	UNT	<p>3. Camps and Workshops</p> <p>Requirements relating to criminal background checks, sexual abuse and child molestation awareness training, medical insurance, and other safety requirements were not fully met. Specifically, camp workers had contact with minors prior to having had criminal background checks performed. Internal Audit identified and reviewed 16 music camps and workshops involving minors for fiscal year 2016. The following issues were identified through a review of documentation, and interviews:</p> <p>1) 25 of 251 camp workers (10.0%) had criminal background checks completed either on the day the camp started or after the camp started.</p> <p>2) 351 camp worker (13.5%) completed sexual abuse awareness training on the day the camp started or after the camp started.</p> <p>3) There was no process, and there is currently no process for criminal background checks for camp participants through Risk Management Services (RMS). However, RMS does not follow up with those camps who do not purchase medical insurance through RMS.</p> <p>4) The Camp Director for Choir camps indicated to Internal Audit that the camps do not have documentation obtained from RMS and discussion with College of Music staff, there was no evidence that the Camp Director purchased medical insurance through RMS for choir camps.</p> <p>5. Classroom usage schedule not complete</p> <p>Multiple faculty use scheduling applications in use at UNT. UNT currently uses 7 to 10 different scheduling systems for various activities around campus. CSS uses the scheduler utilized by the Registrar, Ad Astra, in their RMS system to determine if a class is taking place in a room. RMS software used for scheduling is used by the Registrar, Ad Astra, in their RMS system to determine if a class is taking place in a room. Some rooms are used by some areas post a piece of paper outside the classroom for scheduling.</p> <p>A task force being led by the Associate VP Student Affairs is underway to determine if consolidating and calendaring activity at UNT into one campus wide system.</p>	High	<p>Recommendations for John Richmond, Dean of the College of Music:</p> <p>3.1.1. Develop and implement facility use agreement for external camps and other external events.</p>	<p>i. The Assistant Dean for Event Management and External Affairs and Associate Dean for Operation will be responsible for consulting with the Office of General Counsel (OGC) and the Office of Learning and Professional Development (LPD) to receive their approval for the use of campus facilities for external events already approved by the university for summer camps hosted elsewhere on the UNT campus that are administered by external entities.</p> <p>ii. Working with the College of Music Facilities Manager and Murchison to develop a facility use agreement for use by the university for use in College of Music facilities for other types of events and rentals.</p> <p>iii. Merge the documents to ensure that all information specific to the college and all information required by OGC and LPD for camps in appropriate agreements to external camp administrators for the appropriate signatures.</p>	Raymond Powell, Asst. Dean for Enrollment Management and External Affairs, Jon Nelson, Associate Dean for Operations, and John Murchison, Facilities Manager The Leadership People, LLC - System Blue	1/7/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-414 UNT	Governance and Regulatory Compliance	Classroom Support Services	UNT	<p>3.1.a. A task force is in place to consolidate all scheduling and calendaring activity at UNT into one campus wide system. Work should be completed on this project resulting in one unified calendaring and scheduling system.</p>	Moderate	<p>Recommendation for Associate VP of Student Affairs:</p> <p>3.1.a. A task force is in place to consolidate all scheduling and calendaring activity at UNT into one campus wide system. Work should be completed on this project resulting in one unified calendaring and scheduling system.</p>	Daniel Armitage, Associate Vice President Student Affairs	1/7/2018	Closed	

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-414 UNT	Governance and Regulatory Compliance	Classroom Support Services	UNT	<p>3. Classroom usage schedule not complete</p> <p>Multiple faculty use scheduling applications in use at UNT. UNT currently uses 7 to 10 different scheduling systems for various departments. The Registrar's Office is currently using Registra, ADAstra, and their RMS system to determine if a class is taking place in the classroom. For example, OGSync is used by student organizations, EMS Software is used by community groups, and some areas post a piece of paper outside the classroom for the Registrar's Office. A task force being led by the Associate VP Student Affairs is underway to consolidate all scheduling and calendaring activity at UNT into one campus wide system.</p>	Moderate	<p>Recommendation for Classroom Support Services Director:</p> <p>3.2. a. CBS should use the campus wide calendar developed by the task force to monitor classroom activity.</p>	<p>2.1. We Agree. Classroom Support will utilize the calendar scheduling system resources made available by the task force in determining the occupation of each classroom.</p>	Jakoby Chene, Director Classroom Support Services	Exp. Impl. Date: 3/1/2018 Revised Impl. Date: 5/31/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-001 BSC	Governance and Regulatory Compliance	Graduate School of Biomedical Sciences Review	UNT/BSU	<p>3. Course Fees</p> <p>The current course fee account set-up promotes commingling of course fee revenue and expenditures. Furthermore, there is no reconciliation process to ensure course fees collected are spent for course specific related cost. In addition, there is no course fee cost accounting system in place to ensure that course fees are charged to students responsibly reflect the actual cost to the University. Moreover, one course fee rate did not have all necessary approvals.</p> <p>In detail, the following were noted:</p> <ul style="list-style-type: none"> • Course fee revenues and expenditures are commingled in one charting. Although GSB5 maintains a spreadsheet by academic semester with budgeted revenues/expenditures amount; per course fee, there is no fee reconciliation process in place to help ensure that what is budgeted is what is actually collected within the time period the fees were collected (e.g. semester). • Therefore, GSB5 is unable to ensure that rates set for each course fee are in accordance with the cost recovery nature of incidental fees required by Texas Education Code Section 54.506. • GSB5 does not have a process in place to utilize information from the spreadsheets in evaluating unexpended balances and fee rates per course. As a result, Internal Audit was unable to determine account numbers for unexpended balances and fees which had a total accumulated unexpended balance of \$145,293. 	High	<p>Recommendations for the Dean of GSB5:</p> <p>3.1. a. Utilize course fee information tracked per semester and develop procedures to periodically conduct fee cost assessments to ensure that fees are set in accordance with the cost recovery nature of the fee.</p>	<p>1. a. The Dean of the GSB5 will work with Mr. Craig Lee Johnson, the Director of Student Success, who currently maintains a spreadsheet of course fees, to ensure that course fees are properly tracked and reconcile anticipated "revenue" (i.e. that which was budgeted) with "actuals", such differences will drive decisions to modify existing course fees, as needed and as supported by the data.</p>	Mehran Singh, Dean of GSB5	Exp. Impl. Date: 02/28/2018 Rev. Impl. Date: 04/13/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-001.BSC	Governance and Regulatory Compliance	Graduate School of Biomedical Sciences Review	UNTBSC	<p>3. Course Fees</p> <p>The current course fee account set-up promotes commingling of course fee revenues and expenditures. Furthermore, there is no reconciliation process in place to ensure that course fees are accounted for course specific related cost. In addition, there is no course fee cost assessment process in place to review whether existing course fees charged to students reasonably reflect the actual cost to the University. Moreover, one course fee rate did not have all necessary approvals.</p> <p>In detail, the following were noted:</p> <ul style="list-style-type: none"> Course fee revenues and expenditures are commingled in one charting. Although GSBS maintains a spreadsheet by academic semester, there is no reconciliation process in place to ensure that each specific course fee is expensed in proportion to fees collected within the time period the fees were collected (e.g., semester). The current course fee account set-up does not ensure that course fees are in accordance with the cost recovery nature of incidental fees required by Texas Education Code Section 54.504. GSBS does not have a process in place to utilize information from the current course fee account set-up to determine unexpended balances on each course fee collected which had a total accumulated unexpended balance of \$145,291. 	High	<p>Recommendations for the Dean of GSBS:</p> <p>3.1.b. Develop reconciliation procedures for fees bundled into one account to help ensure that documentation is available to demonstrate the cost recovery nature of such fee collected.</p>	<p>1.b. A manual process already exists by which course fee revenue which is bundled into one account, is tracked. However, based on the feedback from this audit, additional procedures will be developed to reconcile the fee collected with actual expenditures. An important step will be to ensure that the course fee revenue is tracked in the Office of the CFO. The need to build a reserve to support the repair and/or replacement of equipment/resource used in support of course delivery/instruction.</p>	Meharvan Singh, Dean of GSBS	Exp. Impl. Date: 02/28/2018 Rev. Impl. Date: 04/13/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-001.BSC	Governance and Regulatory Compliance	Graduate School of Biomedical Sciences Review	UNTBSC	<p>3. Course Fees</p> <p>The current course fee account set-up promotes commingling of course fee revenues and expenditures. Furthermore, there is no reconciliation process to ensure course fees collected are spent for course specific related cost. In addition, there is no course fee cost assessment process in place to review whether existing course fees charged to students reasonably reflect the actual cost to the University. Moreover, one course fee rate did not have all necessary approvals.</p> <p>In detail, the following were noted:</p> <ul style="list-style-type: none"> Course fee revenues and expenditures are commingled in one semester with budgeted revenues/expenditures amount; per course fees, there is no reconciliation process in place to help ensure that course fees are accounted for course specific related cost within the time period the fees were collected (e.g., semester). Therefore, GSBS is unable to ensure that rates set for each course fee are in accordance with the cost recovery nature of incidental fees required by Texas Education Code Section 54.504. GSBS does not have a process in place to utilize information from the spreadsheets in evaluating unexpended balances and fee rates per course. As a result, Internal Audit was unable to determine account unexpended balances which had a total accumulated unexpended balance of \$145,291. 	High	<p>Recommendations for the Dean of GSBS:</p> <p>3.1.c. Review course fee accumulated unexpended balances at least annually to ensure course fees are set in accordance with applicable laws and policies.</p>	<p>1.c. The Dean of the GSBS will develop a common understanding and procedure with the Office of the CFO by which the GSBS communicates and justifies the need to carryover of unexpended balances.</p>	Meharvan Singh, Dean of GSBS	Exp. Impl. Date: 02/28/2018 Rev. Impl. Date: 04/13/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-401 ISC	Governance and Regulatory Compliance	Graduate School of Biomedical Sciences Review	UNTBSC	<p>3. Course Fees</p> <p>The current course fee account set-up promotes commingling of course fee revenues and expenditures. Furthermore, there is no course fee reconciliation process in place to ensure that course specific related cost. In addition, there is no course fee cost assessment process in place to review whether existing course fees charged to students reasonably reflect the actual cost to the University. Moreover, one course fee rate does not have all necessary approvals.</p> <p>In detail, the following were noted:</p> <ul style="list-style-type: none"> Course fee revenues and expenditures are commingled in one charting. Although OSB maintains a spreadsheet by student, there is no reconciliation process in place to help ensure that each specific course fee is expensed in proportion to fees collected within the time period the fees were collected (e.g., semester). The current course fee account set-up does not ensure that fees are in accordance with the cost recovery nature of incidental fees required by Texas Education Code Section 54.504. OSB does not have a process in place to utilize information from internal audits to determine whether there are unreported account balances on each course fee collected which had a total accumulated unexpended balance of \$145,291. 	High	<p>Recommendation for the Vice President of Finance & Planning:</p> <p>3.2. a. Establish an annual requirement for account holders to provide a formal justification or action plan for accumulated unexpended course fee balances over an established threshold.</p>	<p>2.1. During the annual budget process, the Budget Office of the Health Science Center will provide to each School or College that charges course fees a Course Fee Packet, containing the current available balance for each fee, the fee's estimated threshold amount, and a justification of the current balance. The fee's estimated threshold or action plan to be implemented if the course fee balance exceeds the established threshold amount, will be required to be submitted to the Budget Office as part of the Budget Review process.</p>	Jeff Scovell, Vice President of Finance and Planning	6/7/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-413 DAL	Governance and Regulatory Compliance	Community Counseling Clinic Audit	UNT Dallas	<p>3. Family Educational Rights and Privacy Act</p> <p>During our walk-through of the Clinic file, we noted that student education records related to the graduate Counseling Program offered by the Department of Counseling (i.e. graduate applications with social security numbers, transcripts, recommendation letters, and other appropriate electronic records) are kept with other student records (e.g. photos, student numbers) which may be accessed by students, faculty, staff and patients. Additionally, we were informed by the Interim Director, due to the location of the student education records in the Clinic other Counseling faculty not involved in the program are able to access the records. Student records should be kept secured and protected against inappropriate access and use in compliance with applicable laws and regulations.</p>	High	<p>Recommendation for the Provost:</p> <p>3.1. a. Revoke the student education records out of the Clinic, and ensure they are adequately protected against inappropriate access and use in compliance with applicable laws and regulations.</p>	<p>1.a. To ensure security of students' records files are relocated to a locked file cabinet in the Clinic Director's office. The logs on the Clinic Director's computer and the Clinic Director and Administrative Specialist have access to student files.</p>	Betsy Stewart, Provost/ Executive Vice President of Academic Affairs	8/31/2019	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-0318C	Governance and Regulatory Compliance	Texas College of Osteopathic Medicine Financial Review	UNTBSC	<p>3. Inaccurate Recording of Leave of Absences in ES</p> <p>Inaccurate recording of leave of absences from the HRM-64 Leave Request form to Enterprise Information System (EIS) PeopleSoft were identified. An internal audit tested a sample of 60 overpayments of terminated employees and incorrect leave accrual balances for active employees. Internal audit tested a sample of 60 out of 307 (20%) benefits eligible employees from September 1, 2015 through August 31, 2016.</p> <p>TCOM utilizes departmental timekeepers to enter employees' leave from HRM-64 Leave Request form to EIS. During our review, we noted that for 10 employees leave was either entered incorrectly or not entered at all in EIS.</p> <p>Specifically,</p> <ul style="list-style-type: none"> For 6 terminated employees with approved leave request forms indicating that vacation time had been taken, vacation time was not recorded in EIS. Furthermore, the HRM-64 leave request form was not accurate due to overstatement of vacation leave accrual to billing \$8,918 in overpayment. For 3 active employees, vacation leave and compensation time taken on HRM-64 forms were not recorded in EIS. Furthermore, for 10 employees, vacation leave and compensation time were requested; however it was recorded as 'vacation taken' in EIS. For 1 active employee, 8 hours of compensation time earned reported on the HRM-64 form was recorded as 5 hours in EIS. 	High	<p>Recommendations for the Dean of TCOM and Senior Director of Controller Operations:</p> <p>3.1.a. Review all current and terminated employees within TCOM and ensure the HRM-64 leave forms are accurately entered into EIS.</p>	<p>1.a. TCOM has assigned L.O.T.E. administrative assistant to continue the audit full-time. All records for current and former TCOM and UNT Health employees are being reviewed to determine compliance with recording policies and accuracy of recording.</p> <p>Payroll, UNT System Controller Operations will coordinate and help TCOM staff with their employees' time keeping review process and facilitate measures to address the shortcomings.</p>	Don Peck, Dean of TCOM and Abdul Mohammad, Senior Director of Controller Operations	3/7/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-0318C	Governance and Regulatory Compliance	Texas College of Osteopathic Medicine Financial Review	UNTBSC	<p>3. Inaccurate Recording of Leave of Absences in ES</p> <p>Inaccurate recording of leave of absences from the HRM-64 Leave Request form to Enterprise Information System (EIS) PeopleSoft were identified in 7 out of 13 departments within TCOM resulting in overpayments of terminated employees and incorrect leave accrual balances for active employees. Internal audit tested a sample of 60 out of 307 (20%) benefits eligible employees from September 1, 2015 through August 31, 2016.</p> <p>TCOM utilizes departmental timekeepers to enter employees' leave from HRM-64 Leave Request form to EIS. During our review, we noted that for 10 employees leave was either entered incorrectly or not entered at all in EIS.</p> <p>Specifically,</p> <ul style="list-style-type: none"> For 6 terminated employees with approved leave request forms indicating that vacation time had been taken, vacation time was not recorded in EIS. As a result, the final vacation lump sum payout was not accurate due to overstatement of vacation leave accrual to billing \$8,918 in overpayment. For 3 active employees, vacation leave and compensation time taken on HRM-64 forms were not recorded in EIS. Furthermore, for one of the three employees 1.6 hours of 'floating holiday' was requested; however it was recorded as 'vacation taken' in EIS. For 1 active employee, 8 hours of compensation time earned reported on the HRM-64 form was recorded as 5 hours in EIS. 	High	<p>Recommendations for the Dean of TCOM and Senior Director of Controller Operations:</p> <p>3.1.a. Collaborate with UNT System Controller Operations to update employee's leave of absences in EIS to reflect the correct leave balances.</p>	<p>1.b. A list of all needed corrections is being compiled following, which the online recording system will be reopened to allow entry of and saving of corrected data.</p> <p>Payroll, UNT System Controller Operations will take necessary actions to update and reflect correct employees leave of absences in EIS</p>	Frank Filippetto, Interim Dean of TCOM and Abdul Mohammad, Senior Director of Controller Operations	Exp: 3/7/2018 Rev: 6/01/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-0318C	Governance and Regulatory Compliance	Texas College of Osteopathic Medicine Financial Review	UNTBSC	<p>3. Inaccurate Recording of Leave of Absences in ES</p> <p>Inaccurate recording of leave of absences from the HRM-64 Leave Request form to Enterprise Information System (EIS) PeopleSoft were identified for 10 employees. The HRM-64 Leave Request form was not completed for terminated employees and incorrect leave accrual balances for active employees. Internal audit tested a sample of 60 out of 307 (20%) benefits eligible employees from September 1, 2015 through August 31, 2016.</p> <p>TCOM utilizes departmental timekeepers to enter employees' leave from HRM-64 Leave Request form to EIS. During our review, we noted that for 10 employees leave was either entered incorrectly or not entered at all in EIS.</p> <p>Specifically,</p> <ul style="list-style-type: none"> For 6 terminated employees with approved leave request forms indicating that vacation time had been taken, vacation time was not recorded in EIS. The HRM-64 Leave Request form was not completed due to overstatement of vacation leave accrual to billing \$8,918 in overpayment. For 3 active employees, vacation leave and compensation time taken on HRM-64 forms were not recorded in EIS. Furthermore, for 10 employees, vacation leave and compensation time were not requested; however it was recorded as 'vacation taken' in EIS. For 1 active employee, 8 hours of compensation time earned reported on the HRM-64 form was recorded as 5 hours in EIS. 	High	<p>Recommendations for the Dean of TCOM and Senior Director of Controller Operations:</p> <p>3.1.4. For those employees identified with overpayments, the Office of General Counsel to determine if recoupment of funds is feasible and determine a plan for such recovery.</p> <p>Payroll (General Accounting, UNT System Controller Operations) will follow a standardized procedure in recovering overpayments from employees resulted due to the correcting actions taken in EIS.</p>	<p>Frank Filippetto, Interim Dean of TCOM and Abdul Mohammad, Senior Director of Controller Operations</p>	<p>Exp: 3/1/2018 Rev: 6/01/2018</p>	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2017	17-0318C	Governance and Regulatory Compliance	Texas College of Osteopathic Medicine Financial Review	UNTBSC	<p>3. Inaccurate Recording of Leave of Absences in ES</p> <p>Inaccurate recording of leave of absences from the HRM-64 Leave Request form to Enterprise Information System (EIS) PeopleSoft were identified in 7 out of 13 departments within TCOM resulting in overpayments of terminated employees and incorrect leave accrual balances for active employees. Internal audit tested a sample of 60 out of 307 (20%) benefits eligible employees from September 1, 2015 through August 31, 2016.</p> <p>TCOM utilizes departmental timekeepers to enter employees' leave from HRM-64 Leave Request form to EIS. During our review, we noted that for 10 employees leave was either entered incorrectly or not entered at all in EIS.</p> <p>Specifically,</p> <ul style="list-style-type: none"> For 6 terminated employees with approved leave request forms indicating that vacation time had been taken, vacation time was not recorded in EIS. As a result, the final vacation lump sum payout was not accurate due to overstatement of vacation leave accrual to billing \$8,918 in overpayment. For 3 active employees, vacation leave and compensation time taken on HRM-64 forms were not recorded in EIS. Furthermore, for one of the three employees 1.6 hours of 'floating holiday' was requested; however it was recorded as 'vacation taken' in EIS. For 1 active employee, 8 hours of compensation time earned reported on the HRM-64 form was recorded as 5 hours in EIS. 	High	<p>Recommendations for the Dean of TCOM and Senior Director of Controller Operations:</p> <p>3.1.4. Ensure internal payroll records are corrected.</p>	<p>Frank Filippetto, Interim Dean of TCOM and Abdul Mohammad, Senior Director of Controller Operations</p>	<p>Exp: 3/1/2018 Rev: 6/01/2018</p>	Closed	

UNTS Enterprise Audit Report Inventory

Internal/ External (Co- Sourced)	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal (Co- Sourced)	PwC	Fiscal Year 2017	17-302 HSC	Governance and Regulatory Compliance	Financial Review of UNTSC Reserves	UNTSC	<p>3. Interdepartmental Communication and Policy</p> <p>There are communication and information gaps between Finance & Controller's Office, and the schools/colleges/departments, and there is not a clear delineation of responsibilities and authority for the management of revenue-generating activities and related accounts.</p> <p>1. Sharing of information Finance & Planning is not always updated by individual schools, colleges, and departments on the receipt of funds coming from external revenue streams or agreements that are entered into directly between the school/college/departments and the university. As a result, Finance & Planning does not currently have complete awareness of revenue-generating activities as well as balances of excess revenues within schools, colleges, and departments.</p> <p>2. Balances not currently clear to all parties within HSC as to which account balances roll forward or how excess revenues can be utilized. This confusion is partially</p>	Moderate	<p>1.1. Finance & Planning should work with each school/college/departments as well as HSC management to develop a communication on a periodic basis (i.e. annually in conjunction with budget meetings) in which schools, colleges, and departments report account information and balances from revenue generating activities to Finance & Planning and receive agreement from Finance & Planning on all departmental accounts. Additionally, HSC Office of Finance should work with each school/college/departments to implement a formal review and approval process for establishing revenue-generating activities and how excess revenues will be determined for departmental</p>	<p>1.1. HSC Finance and Planning will work with Contract Administrators to develop procedures to ensure revenue are forwarded to HSC Finance and Planning to ensure these activities are properly established within departments providing guidance to departments on the proper use of revenues generated from the activities. Finance and Planning has initiated a process to work with all areas of the institution to account for these activities accurately and ensure the revenue is used in accordance with their intended purposes.</p>	Geoffrey Scarpelli, Vice President for Finance and Planning	8/31/2018	Open
Internal (Co- Sourced)	PwC	Fiscal Year 2017	17-302 HSC	Governance and Regulatory Compliance	Financial Review of UNTSC Reserves	UNTSC	<p>3. Interdepartmental Communication and Policy</p> <p>There are communication and information gaps between Finance & Controller's Office, and the schools/colleges/departments, and there is not a clear delineation of responsibilities and authority for the management of revenue-generating activities and related accounts.</p> <p>1. Sharing of information Finance & Planning is not always updated by individual schools, colleges, and departments on the receipt of funds coming from external revenue streams or agreements that are entered into directly between the school/college/departments and the outside party. As a result, Finance & Planning does not currently have complete awareness of revenue-generating activities as well as balances of excess revenues within schools, colleges, and departments.</p> <p>Additionally, it is not currently clear to all parties within HSC as to which account balances roll forward or how excess revenues can be utilized. This confusion is partially</p>	Moderate	<p>2.1. Finance & Planning should work with each school/college/departments as well as HSC management to develop a communication on a periodic basis (i.e. annually in conjunction with budget meetings) in which schools, colleges, and departments report account information and balances from revenue generating activities to Finance & Planning and receive agreement from Finance & Planning on all departmental accounts. Additionally, HSC Office of Finance should work with each school/college/departments to implement a formal review and approval process for establishing revenue-generating activities and how excess revenues will be determined for departmental</p>	<p>2.1. HSC Finance and Planning will develop the availability and use of carry forward balances generated by UNTSC departments and report to the HSC Finance and Planning Office to ensure any use of revenues are reported and utilized in accordance with the HSC guidelines.</p>	Geoffrey Scarpelli, Vice President for Finance and Planning	8/31/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-015 UNT	Governance and Regulatory Compliance	Minor Capital Projects	UNT	<p>3. Project Documentation</p> <p>Documentation for projects is either missing or incomplete. Project documentation for minor capital projects is currently maintained in a filing system in the Planning, Design & Construction group. There is a filing system in place for organizing and maintaining project documentation. However, the centralized filing system is not consistently applied across UNT Facilities. The filing system is inconsistently followed by the Planning, Design & Construction group. Internal Audit performed walkthroughs of five projects and noted that documents were missing from several projects. For one project internal Audit noted that numerous documents were missing which included:</p> <ul style="list-style-type: none"> 1. Project Budget Form; 2. Justification for project delivery method; 3. Expense tracking spreadsheet; and 4. Contract Completion Form. <p>However, project managers maintained in their completed project files copies of Project Initiation Worksheet (PIW) forms. However, the forms did not contain the required signatory approval from the Office of Space Management & Planning (OSMP). UNT Facilities was able to later provide copies of the PIW forms with the required OSMP signatory approval. Internal Audit noted that during the final version of the PIW forms in their completed project files. During the course of this audit, we noted that documentation was not stored in one central location. During a project walkthrough.</p>	High	<p>Recommendations for David Reynolds, Associate Vice President of facilities:</p> <p>3.1.a. Develop retention procedures that comply with the Texas State Records Retention Schedule and UNT Records Retention Schedule.</p> <p>3.1.b. Develop training for all personnel responsible for the documentation of construction activities and decisions to be knowledgeable about retention policies and procedures.</p>	<p>1a. UNT Facilities will ensure compliance of building records per stated record retention regulations. Current procedures require complete construction project record files to be digitally archived and retained for the life of the building in a central Facilities database.</p>	Heen Bailey, Director, Facilities Planning, Design and Construction	6/12/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-015 UNT	Governance and Regulatory Compliance	Minor Capital Projects	UNT	<p>3. Project Documentation</p> <p>Documentation for projects is either missing or incomplete. Project documentation for minor capital projects is currently maintained by Project Managers on the UNT facilities network drive. There is a filing system in place for organizing and maintaining project documentation across UNT Facilities. The filing system is inconsistently followed by the Planning, Design & Construction group and not followed by the Maintenance group. Internal Audit performed walkthroughs of five projects and noted that numerous documents were missing which included:</p> <ul style="list-style-type: none"> 1. Project Budget Form; 2. Justification for project delivery method; 3. Expense tracking spreadsheet; and 4. Contract Completion Form. <p>Additionally, Project Managers maintained in their completed project files copies of Project Initiation Worksheet (PIW) forms. However, the forms did not contain the required signatory approval from the Office of Space Management & Planning (OSMP). UNT Facilities was able to later provide copies of the PIW forms with the required OSMP signatory approval. Project Managers were not maintaining the final version of the PIW forms in their completed project files. During a project walkthrough.</p>	High	<p>Recommendations for David Reynolds, Associate Vice President of facilities:</p> <p>3.1.a. Develop training for all personnel responsible for the documentation of construction activities and decisions to be knowledgeable about retention policies and procedures.</p> <p>3.1.b. Develop training for all personnel responsible for the documentation of construction activities and decisions to be knowledgeable about retention policies and procedures.</p>	<p>1b. UNT Facilities conducts construction project records management training during personnel onboarding for select staff. Facilities team will create a central location for project records management. Construction project documentation and will create informational reference material that personnel will be able to access as needed, to more clearly instruct and guide their practices regarding project records management. Workshops for all applicable staff will be scheduled to ensure our needs of statutory requirements and the methods to comply.</p>	Heen Bailey, Director, Facilities Planning, Design and Construction	6/12/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-015 UNT	Governance and Regulatory Compliance	Minor Capital Projects	UNT	<p>3. Project Documentation</p> <p>Documentation for projects is either missing or incomplete. Project documentation for minor capital projects is currently maintained in a filing system in the Planning, Design & Construction group. There is a filing system in place for organizing and maintaining project documentation. However, the centralized filing system is not consistently applied across UNT Facilities. The filing system is inconsistently followed by the Planning, Design & Construction group. Internal Audit performed walkthroughs of five projects and noted that documents were missing from several projects. For one project internal Audit noted that numerous documents were missing which included:</p> <ul style="list-style-type: none"> 1. Project Budget Form; 2. Justification for project delivery method; 3. Expense tracking spreadsheet; and 4. Contract Completion Form. <p>However, Project Managers maintained in their completed project files copies of Project Initiation Worksheet (PIW) forms. However, the forms did not contain the required signatory approval from the Office of Space Management & Planning (OSMP). UNT Facilities was able to later provide copies of the PIW forms with the required OSMP signatory approval. During the course of this audit, we noted that documentation was not stored in one central location. During a project walkthrough,</p>	High	<p>Recommendations for David Reynolds, Associate Vice President of Facilities:</p> <p>3.1.c. Develop a process to ensure that all Project Managers utilize the centralized UNT Facilities project filing system.</p>	<p>1c. UNT Facilities will conduct random self-audits annually to measure compliance with facilities construction project records retention regulations, filing system procedures and project documentation.</p>	Heleen Bailey, Director, Facilities Planning, Design and Construction	6/12/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-015 UNT	Governance and Regulatory Compliance	Minor Capital Projects	UNT	<p>3. Project Documentation</p> <p>Documentation for projects is either missing or incomplete. Project documentation for minor capital projects is currently maintained by Project Managers on the UNT facilities network drive. There is a filing system in place for organizing and maintaining project documentation across UNT Facilities. The filing system is inconsistently followed by the Planning, Design & Construction group and not followed by the Maintenance group. Internal Audit performed walkthroughs of five projects and noted that numerous documents were missing which included:</p> <ul style="list-style-type: none"> 1. Project Budget Form; 2. Justification for project delivery method; 3. Expense tracking spreadsheet; and 4. Contract Completion Form. <p>Additionally, Project Managers maintained in their completed project files copies of Project Initiation Worksheet (PIW) forms. However, the forms did not contain the required signatory approval from the Office of Space Management & Planning (OSMP). UNT Facilities was able to later provide copies of the PIW forms with the required OSMP approval signatures. Project Managers were not maintaining the final version of the PIW forms in their completed project files. Internal Audit noted that numerous documents were not stored in one central location. During a project walkthrough,</p>	High	<p>Recommendations for David Reynolds, Associate Vice President of Facilities:</p> <p>3.1.d. Develop a process to ensure that Project Managers maintain the final version of project documentation in their completed project files.</p>	<p>1c. UNT Facilities has procedures in place for project close out. Current procedure and project management practices will be assessed and management staff will institute continuing education/training for all project management staff on construction project documentation standard procedure and will create informational reference material that pertains to the process to ensure project documentation. Walkthroughs will be conducted to ensure project documentation. Walkthroughs with all applicable staff will be scheduled to ensure awareness. Facilities will annually conduct self-audits to ensure project documentation completeness.</p>	Heleen Bailey, Director, Facilities Planning, Design and Construction	6/12/2018	Closed

UNTS Enterprise Audit Report Inventory

Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status	
Internal/ External	UNTS System Internal Audit	Fiscal Year 2017	17-417 UNT	Governance and Regulatory Compliance	LUPD Business Process Audit	UNT	3. Refunds Lifelong Learning and Professional Development (LUPD) processed refunds totaling approximately \$10,400 during fiscal year 2017. The majority of these refunds were primarily processed for conference registration number errors.	High	Recommended to Stephanie Burke, Director of Lifelong Learning and Professional Development: 3.1.a. Develop procedures to ensure all refunds are handled by Lifelong Learning and Professional Development Services in accordance with UNT Policy 10.029 Refunds.	1.a. Management concurs with the intent of the finding and recommendation and proposes alternative corrective action. Through coordination with the Director of Asset Protection we learned a sales refund policy will be implemented. While the cited policy does require that the policy wording, the policy applies only to hard refunds and does not adequately address sales transaction refunds. Additionally, refunding transactions originally paid via credit card but returned via check violates the merchant agreement. The Director of Asset Protection will be working with the Director of Lifelong Learning and Professional Development to adjust our procedures according.	Stephanie Burke, Director of Lifelong Learning and Professional Development	4/27/2018	Closed
Internal (Co-Sourced)	PWC	Fiscal Year 2017	17-303 UNT	Governance and Regulatory Compliance	Student Managed Investment Fund (SMIF)	UNT	3. SMIF fund designation The SMIF designation was not followed within all official SG documents as required by the MOU. References to the SMIF within the Annual report and Oligyne (the official Student Managed Investment Fund website) designated the SMIF as "The Cloud Fund" instead of "The Student Managed Investment Fund" as required by section 2 of the MOU. Risky Impact: Donors may demand the return of their donated funds if the fund designation is not used appropriately on official communications.	Low	3.1.a. The SG supported by faculty should implement procedures to ensure all SMIF documents are in official SG documents. This should also be considered as part of the review of the SG designation prior to finalization.	1.a. The SG Board of Directors will ensure as part of their review of all SG documents of the SG will refer to the full official name of the fund. This will also be included in the committee procedures referred to in Comment 1a above.	SG Board of Directors	Exp. Impl. Date: 12/31/2017 Revised Impl. Date: 03/31/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/External (Source)	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal (Co-Sourced)	PwC	Fiscal Year 2017	17-310 DAL	Governance and Regulatory Compliance	Scholarship Review	UNT Dallas	<p>3. UNT Dallas Foundation Processes</p> <p>There are opportunities for the UNT Dallas Foundation to enhance current processes to help manage endowment funds in alignment with guidelines, including processes and policies over the monitoring of donations and compliance with established requirements. The UNT Dallas Foundation should be put into the respective bank account until the funds are awarded to a selected recipient. As the university does not have 501(c)(3) status, the majority of the funds should be deposited into the UNT Dallas Foundation's Comerica bank account and distributed to UNT Dallas on a per-locus basis. As the VP of Advancement is also the President of the UNT Dallas Foundation, the responsibilities related to endowment and scholarship processes are shared and unclear. This structure is more common in smaller institutions, and the responsibilities of the parties involved are outlined in the agreements established.</p>	Moderate	<p>3.1.a. Advancement and the UNT Dallas Foundation should implement a system of reconciling amounts donated in order to help monitor the bank account as well as the CFT. Additionally, Advancement should consider personnel to assist with the tracking of donations and the management of Raiser's Edge.</p>	<p>1.a. Funding has been allocated to hire an accountant focused on Scholarships, Financial Aid, and gift funds. They will be responsible for regular reconciliations of funds received by the UNT Dallas Office of University Advancement. Additionally, Advancement should be contacted to ensure that the endowments will be reviewed for compliance and office procedures will be developed as needed.</p>	Dr. Monica Williams, VP for University Advancement	9/7/2018	Open
Internal (Co-Sourced)	PwC	Fiscal Year 2017	17-310 DAL	Governance and Regulatory Compliance	Scholarship Review	UNT Dallas	<p>3. UNT Dallas Foundation Processes</p> <p>There are opportunities for the UNT Dallas Foundation to enhance current processes to help manage endowment funds in alignment with guidelines, including processes and policies over the monitoring of donations and compliance with established requirements. Donations are made to either UNT Dallas or The UNT Dallas Foundation and are put into the respective bank account until the funds are awarded to a selected recipient. As the university does not have 501(c)(3) status, the majority of donations are made out to the UNT Dallas Foundation's Comerica bank account and distributed to UNT Dallas on a per-locus basis. As the VP of Advancement is also the President of the UNT Dallas Foundation, the responsibilities related to endowment and scholarship processes are shared and unclear. This structure is more common in smaller institutions, and the responsibilities of the parties involved are outlined in the agreements established.</p>	Moderate	<p>3.2.a. The UNT Dallas Foundation should develop and formally document the current distribution procedures and work with UNT Dallas management to review/update policies and procedures on an annual basis. Additionally, the UNT Dallas Foundation should review UNT Dallas' Affiliated Entity policy and ensure that it aligns with all required responsibilities.</p>	<p>2.a. Funding has been allocated to hire an accountant focused on Scholarships, Financial Aid, and gift funds. They will be responsible for regular reconciliations of funds received by the UNT Dallas Office of University Advancement. Additionally, Advancement should review existing policies related to scholarships and endowments to ensure they are reviewed for compliance and office procedures will be developed for new processes as needed.</p>	Dr. Monica Williams, VP for University Advancement	9/7/2018	Open

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-407315	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>3. UNT System Issues</p> <p>There is a systemic process breakdown regarding ORP contributions for 100% of all 21 pay periods tested from January 2015 – September 2016 among issues 3 through 5.</p> <p>Under the Texas Government Code and the Texas Administrative Code, an ORP employer has 3 business days to deposit ORP contributions into an employee's account. Under UNT System's Retirement Manager Agreement with its third party administrator (lead record keeper), VRSCO, UNT System must submit ORP contributions and data by 10:00 am to ensure the contributions and data are forwarded to the ORP financial companies the same business day. The Texas Government Code and Texas Administrative Code require an ORP financial company, that receives contributions and good data before the close of business, deposit the contributions the same business day.</p> <p>ORP contributions are deposited into the ORP participants' accounts after a collaborative effort between the UNT System HR - Total Rewards (Benefits), Controller Operations (Payroll), Treasury and Controller for UNTHSC.</p> <p>ORP contributions are a percentage of the employee's monthly salary. Salaries are driven by the timely submission of time and Electronic Payroll Action Requests (ePAR) submitted at the departmental level. Additionally, the Benefits department updates</p>	High	<p>Recommendations for the Vice Chancellor of Finance:</p> <p>3.1.a. Create a task force with representatives from UNT System Human Resources, System Controller Operations, UNT System Treasury and UNTHSC Controller for the following:</p> <ul style="list-style-type: none"> Discuss the current Retirement Manager Agreement with its third party administrator to determine appropriate cut off time for when common remittance file and electronic fund transfer will be submitted to the third party administrator. This cut off time should be consistent across all institutions. Determine a more efficient and effective process to solve the delays that were caused because the payroll process did not provide complete data resulting in errors in the remittance file. For example, send a separate paycheck run for corrections only. Task force should meet at a minimum, on a quarterly basis, to determine if processes across all institutions are consistently deposited in the participant's accounts within 3 business days. If not, identify the inefficiency, document the change in meeting minutes, communicate the recommendations. 	<p>1.a. Work has already begun to improve internal processes to deliver faster turnaround on internal processes. While this already mitigates risk of late processing, the automated solution will be part of the Retirement Update Project.</p> <p>Getting to a fully automated solution requires updates to our four record keepers and especially our lead record keeper, which has responsibility to act as:</p> <ul style="list-style-type: none"> Lead record keeper Third party administrator Third party administrator <p>When a new lead record keeper is selected, file feeds and processes will need to be updated. This will necessitate significant troubleshooting, solution determinations, and internal and external vendor programming. Due to the complexity, this project is anticipated to continue during the next fiscal year.</p> <p>Simultaneously to the lead record keeper and record keeper work, the Benefits, Payroll, HRIS, and ITSS teams have already been finding solutions to the issues. The teams are working together in a task force model. As possible, solutions will continue to be developed and implemented incrementally during the project.</p>	Janet Waldron, Vice Chancellor of Finance	8/31/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2017	17-407315	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>3. UNT System Issues</p> <p>There is a systemic process breakdown regarding ORP contributions for 100% of all 21 pay periods tested from January 2015 – September 2016 among issues 3 through 5.</p> <p>Under the Texas Government Code and the Texas Administrative Code, an ORP employer has 3 business days to deposit ORP contributions into an employee's account. Under UNT System's Retirement Manager Agreement with its third party administrator (lead record keeper), VRSCO, UNT System must submit ORP contributions and data by 10:00 am to ensure the contributions and data are forwarded to the ORP financial companies the same business day. The Texas Government Code and Texas Administrative Code require an ORP financial company, that receives contributions and good data before the close of business, deposit the contributions the same business day.</p> <p>ORP contributions are deposited into the ORP participants' accounts after a collaborative effort between the UNT System HR - Total Rewards (Benefits), Controller Operations (Payroll), Treasury and Controller for UNTHSC.</p> <p>ORP contributions are a percentage of the employee's monthly salary. Salaries are driven by the timely submission of time and Electronic Payroll Action Requests (ePAR) submitted at the departmental level. Additionally, the Benefits department updates</p>	High	<p>Recommendations for the Vice Chancellor of Finance:</p> <p>3.1.b. Conduct process engineering by the UNT System Business Quality Initiatives team to help ensure that ORP contributions are performed efficiently and effectively between the Benefits/Human Resources Department, Controller Operations team and Treasury Department.</p> <ul style="list-style-type: none"> Develop PeopleSoft reports to enable the departments across the institutions to verify accuracy of employee count and employee pay which will promote timely submission of PAR. 	<p>1b. Business Process Improvement (BPI) will map the current state of the process to determine opportunities for improvement and working on a separate, and related project regarding ORP. This project could lead to remedial findings in this report.</p>	Janet Waldron, Vice Chancellor of Finance	8/31/2018	Open

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-415 UNT	Governance and Regulatory Compliance	Health and Staff International Travel Audit	UNT System	<p>3. UNT System Travel Training</p> <p>The Travel Budget Authorization (TBA) form used in the Business Support Services (BSS) online Travel Training presentation is not the most current TBA form. The BSS training presentation did not have the check box acknowledgment statement for international travel with web link reference: https://emergency.unt.edu/international-travel-registration.</p>	Moderate	<p>Recommendation for Abdul Mohammed, Senior Associate Controller for Operations:</p> <p>3.1.a. Ensure the most current TBA form is included in the online UNT System Travel Training presentation.</p>	<p>1.a. Account Payable Travel AP team will coordinate not work with BSS training team to update online LPE (User Productivity Kit) training for Travel. AP will make sure that the most current TBA form is included in the online travel training.</p>	Abdul Mohammed, Sr. Associate Controller of Operations	10/02/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-409 UNT	Governance and Regulatory Compliance	International Sponsored Students Process Review	UNT	<p>3 Checks Not Deposited Timely</p> <p>UNT International (UNI) Main Office that received payments from sponsors had failed to deposit over 300 checks received from sponsors within the required timeframe. Internal Audit was unable to identify when the checks were received because a cash receipt log was not maintained. Internal Audit was told the checks were deposited in November 2016 and were not deposited until January and February 2017.</p> <p>As checks were deposited, credit amounts were created due to the sponsor's account numbers were manually applied to past due debt on other sponsored student accounts. The employee was advised to contact the sponsors for guidance on what to do with unapplied credit amounts and to not apply the credit to past due student balances, as the sponsor's account numbers had not been updated and the employee received out to the sponsors.</p> <p>Additionally, 28 checks totaling \$75,400, and corrected invoices were identified that were not processed for payment due to the checks being applied to the wrong account number. The sponsor had provided updated payment to the University.</p>	High	<p>Recommendation for Interim Vice Provost for International Affairs and UNT Controller:</p> <p>3.1.a. Coordinate to correct the refund amounts incorrectly applied to sponsor of student's past due amounts.</p>	<p>1.a. Management agrees will take the following action: UNT will work with the UNT Controller's Office to develop a process for determining an amount to refund amount applied to sponsor of student's past due amounts.</p>	Pa Wood, Vice Provost for International Affairs and Interim Controller	6/30/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-015 UNT	Governance and Regulatory Compliance	Minor Capital Projects	UNT	<p>A. Construction Project Policies</p> <p>A) UNT System Administration Policy 06.200 is contradictory, outdated, and potentially confusing and should be replaced with an updated version. Policy 11.009 is outdated and contains an inaccurate reference to UNT System Administration Policy 06.200 – Construction Project Policy.</p> <p>B) UNT System Administration Policy 06.200 – Construction Project Policy states the following:</p> <p>A. The UNT System, Office of Facilities Planning and Construction Management, shall manage the construction process, including contract documents, as well as manage the construction administration for all larger projects at each institution. Larger projects are defined as any which exceed \$1,000,000 in overall budget for new construction or \$2,000,000 for renovations.</p> <p>B. The UNT System, Office of Facilities Planning and Construction Management, shall direct the preparation of plans, specifications, and contract documents, as well as manage the construction administration for all projects located on the Denton campus regardless of size. (emphasis added)</p> <p>Section 2(B) appears to contradict section 2(A). This policy is inconsistent regarding OPFC's role for projects on the Denton campus. UNT System Administration policy applies to System Administration functions only and not to component institutions. This policy should be updated to address System Administration only and reduce any potential confusion.</p> <p>B) UNT Policy 11.009 – Construction Projects states the following: Every project must be processed through the Office of Facilities</p>	High	<p>Recommendation for Brandt Burton, UNT Assistant Vice President for Organizational Behavior:</p> <p>4.2.a. Coordinate with the Office of Facilities Planning and Construction, James Maguire, UNT will develop a revised Construction Projects Policy that will align with the new UNT System regulation and/or policy.</p>	<p>2a. In collaboration with the UNT System and the Vice Chancellor of Facilities, Planning & Construction, James Maguire, UNT will develop a revised Construction Projects Policy that will align with the new UNT System regulation and/or policy.</p>	Stephanie McDonald, UNT Policy Manager	8/17/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2017	17-019 DAL	Governance and Regulatory Compliance	Registrar's Office Business Process Review	UNT Dallas	N/A	N/A	N/A	N/A	N/A	N/A	N/A

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-031 BC	Governance and Regulatory Compliance	Texas College of Osteopathic Medicine Financial Review	UNTHSC	<p>4. Course Fees</p> <p>The current course fee structure and account set-up promotes comingling of course fee revenues and expenditures. Furthermore, the current course fee structure does not clearly delineate the fee cost assessment process in place to review whether existing course fees charged to students reasonably reflect the actual cost to the University. Moreover, course fee rates for four primary care simulation courses were not submitted for approval and students were charged for the primary care partnership fee after the courses discontinued.</p> <p>In detail, TCOM has the following four course fee group accounts:</p> <ul style="list-style-type: none"> • Course Fee-TCOM - this group encompasses fees associated with four specific course fee names (i.e. MEDF 7510, MEDF 7615, MEDF 7620, MEDF 8400) where the rate ranges from \$50 to \$250 depending on the academic year. The purpose of these fees are to cover simulation lab and technology materials, supplies and services related to TCOM's simulation patient program. • Course Fee-TCOM - this group encompasses fees associated with four specific course fee names (i.e. MEDF 7510, MEDF 7615, MEDF 7620, MEDF 8400) where the rate ranges from \$50 to \$250 depending on the academic year. The purpose of these fees are to cover simulation lab materials, supplies and services associated with these courses. <p>• Course Fee - this group includes fees associated with eleven specific simulation patient program.</p>	High	<p>Recommendations for the Dean of TCOM:</p> <p>A.1.a. Develop procedures to periodically conduct fee cost assessments to ensure that fees are set in accordance with the cost/recovery nature of the fee.</p>	<p>1a. The Dean of TCOM will meet with the Executive Director of Enrollment Services and the Senior Associate Dean for Academic Affairs in April of each year after finalization of the curriculum for the succeeding academic year. Determination of a final fee schedule will be made at that time.</p>	Frank Filappo, Interim Dean of TCOM	7/1/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-031 BC	Governance and Regulatory Compliance	Texas College of Osteopathic Medicine Financial Review	UNTHSC	<p>4. Course Fees</p> <p>The current course fee structure and account set-up promotes comingling of course fee revenues and expenditures. Furthermore, there is no reconciliation process to ensure course fees collected are spent for course specific related cost. In addition, there is no course fee cost assessment process in place to review whether existing course fees charged to students reasonably reflect the actual cost to the University. Moreover, course fee rates for four primary care simulation courses were not submitted for approval and students were charged for the primary care partnership fee after the courses discontinued.</p> <p>In detail, TCOM has the following four course fee group accounts:</p> <ul style="list-style-type: none"> • General Course Fee - this includes an annual fee for all four academic years that ranges from \$100 to \$500 depending on the simulation patient program. • Course Fee-TCOM - this group encompasses fees associated with four specific course fee names (i.e. MEDF 7510, MEDF 7615, MEDF 7620, MEDF 8400) where the rate ranges from \$50 to \$250 depending on the academic year. The purpose of these fees are to cover materials, supplies and services associated with these courses. 	High	<p>Recommendations for the Dean of TCOM:</p> <p>A.1.b. Work with the UNTMSE, Enrollment Services, and Provost to simplify the current course fee structure of TCOM. Consult with Office of General Counsel whether creating fees under TEC Section 55.15 will provide more flexibility and help eliminate the large number of course specific fees.</p>	<p>1b. TCOM will seek to adopt a consolidated fee schedule that is more appropriate for a cohort program.</p>	Frank Filappo, Interim Dean of TCOM	7/1/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal (Co-Sourced)	PwC	Fiscal Year 2017	17-302 ISC	Governance and Regulatory Compliance	Financial Review of UNTSC Reserves	UNTSC	<p>1. Peoplesoft Upgrade</p> <p>Several IT system-related issues have resulted from the recent upgrade and subsequent chart of account conversion, causing HSC schools, colleges, and departments to inefficiently monitor their accounts. As part of the Peoplesoft system upgrade that went live on March 1, 2017, the chart of accounts to accommodate new system functionality. The upgrade project experienced delays prior to going live, and the new chart of accounts was not fully implemented in all schools, colleges, and departments with very little time to provide feedback and testing. Consequently, there was insufficient time to verify that all accounts were appropriate by department or to perform proper testing and the upgrade went live with a significant amount of errors (as described below), creating confusion among the majority of users. For example, one concern was regarding delays in the reception of purchasing card transaction data. Since the upgrade went live, departments, schools, and colleges sometimes did</p>	Moderate	<p>1.1. The OGC should work with Student Accounting to identify all tuition/fees and stipend expenses that were impacted by the Peoplesoft upgrade and perform adjusting entries as needed.</p>	<p>2. The OGC has worked with the coding correct on journals for the 12 months of the Peoplesoft upgrade. In addition, 98 miscoded accounts were discovered on other Projibs. Those correction journals to be completed.</p>	LeAnn Forberg, Assistant Vice President for Research Administration (OGCM)	10/25/2017	Closed
Internal (Co-Sourced)	PwC	Fiscal Year 2017	17-302 ISC	Governance and Regulatory Compliance	Financial Review of UNTSC Reserves	UNTSC	<p>2. Contract Setup and Monitoring</p> <p>There are insufficient, detective controls in place for monitoring the revenue recognized as well as the expenses incurred in HSC, IT systems and other departments. The contract terms, conditions, and other terms, contracts and grants resulting from externally-sponsored projects at HSC are managed by the Office of Grant and Contract Management (OGCM) in Peoplesoft. The OGCM uploads the terms from the respective agreement into Peoplesoft, and the applicable files are provided to the Principal Investigator (PI). The PI is provided with the specific terms and discount terms during the Project Initiation Meetings as they are expected to have a good understanding of the allowable expenses and revenue to be received. Furthermore, there are fixed fee contracts with cost reimbursement agreements, for which payments are received from the sponsor as expenses are incurred. Unless otherwise stated, a standard 60% fixed fee cost ("F&A") allocation is used, which is part of the contract terms.</p>	Moderate	<p>2.1. The OGC should review the agreement for the project that is the F&A rate, identify the correct amount to be applied as F&A, and perform a manual correction to the F&A cost. Additionally, the OGC should establish a system of reviewing projects set up in Peoplesoft through one time manual entries at the end of each conversion. The award was changed to have an 8% rate and set up for automated capture each month. OGCM should ensure that conversion occurred during conversion and manually captured the final year of F&A.</p>	<p>1. The award documents for each year did not have an F&A rate. The OGC should calculate F&A. Only a flat dollar amount, which was different each year, was applied as F&A. The OGCM should ensure that unusual F&A process through one time manual entries at the end of each conversion. The award was changed to have an 8% rate and set up for automated capture each month. OGCM should ensure that conversion occurred during conversion and manually captured the final year of F&A.</p>	LeAnn Forberg, Assistant Vice President for Research Administration (OGCM)	10/25/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-031 BC	Governance and Regulatory Compliance	Texas College of Osteopathic Medicine Financial Review	UNTHSC	<p>4. Course Fees</p> <p>The current course fee structure and account set-up promotes comingling of course fee revenues and expenditures. Furthermore, there are no reconciliation procedures in place to ensure course fees are spent for course specific related cost. In addition, there is no course fee cost assessment process in place to review whether existing course fees charged to students reasonably reflect the actual cost to the University. Moreover, course fee rates for four primary care simulation patient program courses were charged for the primary care partnership fee after the courses discontinued.</p> <p>In detail, TCOM has the following four course fee group accounts:</p> <ul style="list-style-type: none"> • Course Fee-TCOM - this group encompasses fees associated with four specific course fee names (i.e. MEDF 7510, MEDF 7615, MEDF 7620, MEDF 8400) where the rate ranges from \$50 to \$250 depending on the academic year. The purpose of these fees are to cover simulation lab and technology materials, supplies and services related to TCOM's simulation patient program. • Course Fee-TCOM - this group encompasses fees associated with four specific course fee names (i.e. MEDF 7510, MEDF 7615, MEDF 7620, MEDF 8400) where the rate ranges from \$50 to \$250 depending on the academic year. The purpose of these fees are to cover simulation lab and technology materials, supplies and services associated with these courses. <p>• Course Fee - this group includes fees associated with eleven specific simulation patient program.</p>	High	<p>Recommendations for the Dean of TCOM:</p> <p>A1.1. Develop reconciliation procedures for fees bundled in groups to help ensure that documentation is available to demonstrate the cost recovery nature of each fee collected.</p>	<p>1. The adoption of a single consolidated fee will eliminate the issue of fee bundling.</p>	Frank Filappeto, Interim Dean of TCOM	7/1/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-031 BC	Governance and Regulatory Compliance	Texas College of Osteopathic Medicine Financial Review	UNTHSC	<p>4. Course Fees</p> <p>The current course fee structure and account set-up promotes comingling of course fee revenues and expenditures. Furthermore, there is no reconciliation process to ensure course fees collected are spent for course specific related cost. In addition, there is no course fee cost assessment process in place to review whether existing course fees charged to students reasonably reflect the actual cost to the University. Moreover, course fee rates for four primary care partnership courses were never submitted for approval and students were charged for the primary care partnership fee after the courses discontinued.</p> <p>In detail, TCOM has the following four course fee group accounts:</p> <ul style="list-style-type: none"> • General Course Fee - this includes an annual fee for all four academic years that ranges from \$100 to \$500 depending on the simulation patient program. • Course Fee-TCOM - this group encompasses fees associated with four specific course fee names (i.e. MEDF 7510, MEDF 7615, MEDF 7620, MEDF 8400) where the rate ranges from \$50 to \$250 depending on the course. The purpose of these fees are to cover materials, supplies and services associated with these courses. <p>• Course Fee - this group includes fees associated with eleven specific simulation patient program.</p>	High	<p>Recommendations for the Dean of TCOM:</p> <p>A1.4. Ensure that Enrollment Services and UNT System Student Accounting are notified of any changes in curriculum prior to student enrollment for the academic year in order to ensure timely update of the University's Student Accounting System to avoid student overpayment.</p>	<p>1.6. See 1a, then the Executive Director of Enrollment Services will communicate to UNT System Student Accounting of any changes to the curriculum that will require modification to the student fee schedule.</p>	Frank Filappeto, Interim Dean of TCOM	7/1/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-415 UNT	Governance and Regulatory Compliance	Faculty and Staff International Travel Audit	UNT	<p>4. Faculty and Staff Restricted Travel</p> <p>There is no process or procedure restricting faculty and staff from traveling internationally to countries or areas deemed unsafe. The current process for approving international travel is that the faculty or staff must call travel to an unsafe country or area with only supervisor approval. Additionally, these may be countries and areas where the University's insurance may not provide coverage. The report raises a concern for a faculty or staff to sign off on international travel to an unsafe area without acknowledging that they are traveling on their own accord to areas deemed unsafe and not on behalf of the University.</p>	Moderate	<p>Recommendations for Doug Walsh, Executive Director Risk Management Services:</p> <p>4.1.b. Coordinate with the Office of General Counsel to identify other liability transfer methods to ensure the University is best protected when employees travel against the advice of the University.</p>	<p>1.b. Risk Management Services will coordinate with the Office of General Counsel to determine the feasibility of utilizing waivers and/or other liability transfer methods to ensure the University is best protected when employees travel against the advice of the University.</p>	Doug Walsh, Executive Director Risk Management Services	4/22/2018	Closed
Internal (Co-Sourced)	PWC	Fiscal Year 2017	17-303 UNT	Governance and Regulatory Compliance	Student Managed Investment Fund (SMIF)	UNT	<p>4. Financial reporting and timeliness</p> <p>The SIG annual report was not finalized within the 6 week timeframe as required by the SIG Bylaws.</p> <p>The SIG Accounting Committee did not finalize the 2016 SIG annual report until 6 weeks after December 31, 2016 as required by Article IX, section B(c) of the SIG By-Laws. The annual report was finalized on February 16, 2016 which was after the required due date.</p> <p>This constitutes an improvement of approximately 6 weeks compared to the prior year; however, further improvement is required by the SIG Accounting Committee to ensure that they achieve compliance with the SIG By-Laws. The Chair of the Department of Finance, Insurance, Real Estate and Law consistently provided the SIG regarding due dates for the quarterly reports and annual report.</p> <p>Risk/Impact: The SIG Accounting Committee is not compliant with article IX, section B(c) of the SIG bylaws.</p>	Low	<p>4.1.a. The SIG should document and implement procedures to define reporting deadlines. This should also be communicated to the SIG Accounting Committee as part of their ongoing and regular reporting process so that the report is finalized and reviewed in a timely manner, including consideration for timely review.</p>	<p>1.a. The SIG Faculty Advisor and Chair of RIEI will monitor reporting deadlines and provide reminders to the SIG President to ensure that submission of the annual report is finalized on a timely basis. In addition, the procedure to be documented as referred to in comment 2b will include timelines for submission of the SIG annual report.</p>	SIG Accounting Committee and SIG Board of Directors	5/31/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-015 UNT	Governance and Regulatory Compliance	Minor Capital Projects	UNT	<p>A. Construction Project Policies</p> <p>UNT System Administration Policy 06.200 is contradictory, outdated, and potentially confusing and UNT Policy 11.009 is outdated and contains an inaccurate reference.</p> <p>A) Section 2 of UNT System Administration Policy 06.200 – Construction Projects states the following:</p> <p>A. The UNT System, Office of Facilities Planning and Construction, shall manage the construction projects and contract documents, as well as manage the construction administration for all larger projects at each institution. Larger projects are defined as any which exceed \$1,000,000 in overall budget for new construction or \$2,000,000 for renovations.</p> <p>B. The UNT System, Office of Facilities Planning and Construction, shall direct the preparation of plans, specifications, and contract documents, as well as manage the construction administration for all projects located on the Denton campus regardless of size. (emphasis added)</p> <p>Section 2(B) appears to contradict section 2(A). This policy is inconsistent regarding OPFC's role for projects on the Denton campus. UNT System Administration policy applies to System Administration functions only and not to component institutions. This policy is outdated and needs to be updated to address System Administration only and reduce any potential confusion.</p> <p>B) UNT Policy 11.009 – Construction Projects states the following:</p> <p>Every project must be processed through the Office of Facilities</p>	High	<p>Recommendations for James Main, Vice Chancellor for Facilities Planning and Construction and Chief Architect, and Rachel Burdge, UNT System Policy Manager:</p> <p>A.1. a. Review and revise UNT System Administration Policy 06.200.</p>	<p>A. Review and clarify System Administration Policy 06.200 has been submitted for policy review.</p>	James Main, Vice Chancellor for Facilities Planning and Construction and Chief Architect	9/27/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-413 DAL	Governance and Regulatory Compliance	Community Counseling Clinic Audit	UNT Dallas	<p>4. Lack of Cash Controls</p> <p>Reconciling measures of payments received are not adequate during the collection, receipting, depositing and reconciliation processes.</p> <p>The Clinic charges a fee of \$10 to the community for providing services and the audit report indicates that Clinics a documented the audit run basis services to insured client based on the client's financial need. The Clinic accepts cash, check or money order.</p> <p>Specifically, the following were noted:</p> <p>a. The spreadsheet is responsible for scheduling patient appointments, collecting money, updating the patients' Excel spreadsheet which details services rendered and amount collected, as well as preparing deposits.</p> <p>b. Prior to January 2017, there was no patient audit/ collection spreadsheet. The spreadsheet is currently used to track collections. Although an Excel spreadsheet is currently used to track collections, the spreadsheet can easily be altered by the Administrative Specialist. Additionally, the spreadsheet only includes the patient's first name and last name. The spreadsheet is currently used to help ensure information collected is accurate and complete.</p> <p>c. Information recorded on the Excel spreadsheet is not independently reconciled between the appointment schedule and the prepared deposits to help ensure that all funds collected for services rendered are properly entered into the spreadsheet, and all funds collected were deposited.</p>	High	<p>Recommendations for the Chief Financial Officer and Provost in collaboration with the UNT System Associate Vice Chancellor & Controller:</p> <p>A.1. b. Evaluate the need of an electronic Patient Management System with a billing and payment module.</p>	<p>1b. Ongoing research to determine the viability of using a Patient Management System in the clinic will take place with the support of the Chief Financial Officer and Provost in collaboration with the Chief Academic Affairs in order to ensure that can accommodate the academic clinical need of the clinic system. We need to ensure that all software meets the requirements for HIPAA and Texas Medical Records Privacy Act. An electronic Patient Management System will be implemented to ensure that all patient and professional transactions to record and allow reconciliation reports for up-to-date information on clinic practice for future use.</p>	Jim Main, Chief Financial Officer and Betty Stewart, Provost and Associate Vice President of Academic Affairs in collaboration with Aaron LeMay, UNT System Associate Vice Chancellor & Controller	8/31/2019	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-413 DAL	Governance and Regulatory Compliance	Community Counseling Clinic Audit	UNT Dallas	<p>A. Lack of Cash Controls</p> <p>Subsequent measures of payments received are not adequate during the collection, receipting, depositing and reconciliation of cash. The Clinic charges a fee of \$10 to the community for providing counseling and mental health services. Additionally, the Clinic offers a discounted fee and/or pro bono services to limited clients based on the client's financial need. The Clinic accepts cash, check or money orders. Specifically, the following were noted:</p> <p>a. There is no segregation of duties, one person is responsible for scheduling patient appointments, collecting money, updating the patients' case spreadsheet which details services rendered and amount collected.</p> <p>b. Prior to January 2017, there was no patient and/or collection database identifying services rendered and amount collected. Although an Excel spreadsheet is currently used to track collections, the database is not updated and does not include patient's name and no medical record is cross-referenced to help ensure information collected is accurate and complete.</p> <p>c. Information recorded on the Excel spreadsheet is not reconciled to the cash receipts and deposits. Cash receipts and the proper deposits to help ensure that all funds collected for services rendered were entered into the spreadsheet, and all funds collected were deposited.</p>	High	<p>Recommendations for the Chief Financial Officer and Provost in collaboration with the UNT System Associate Vice Chancellor & Controller:</p> <p>1.1. e. If it is determined that an electronic Facilities Management System is not needed, enhance the Excel spreadsheet to include the following fields:</p> <ul style="list-style-type: none"> • Date of Service • Patient's Full Name • Provider • Second Number • Services Rendered • Amount Paid • Receipt Number • Balance Due. 	<p>In the process of enhancing the current Excel spreadsheet to include the required fields indicated in the recommendation.</p>	<p>Jim Mills, Chief Financial Officer and Betty Stewart, Provost of Academic Affairs in Dallas</p> <p>Heleen Bailey, UNT System Associate Vice Chancellor & Controller</p>	8/17/2019	Open
Internal	UNT System Internal Audit	Fiscal Year 2017	17-015 UNT	Governance and Regulatory Compliance	Minor Capital Projects	UNT	<p>6. Notice to Proceed</p> <p>The Notice to Proceed (NTP) has been sent to the contractor to initiate work before the purchase order is complete and received by the contractor.</p> <p>Our review of one of the project files found the NTP was dated within a day of the date the purchase order was received by the contractor. Project Managers, it is Internal Audit's understanding that UNT Facilities uses the P.O. at the contract. Therefore, work should not start before the purchase order has been completed and received by the contractor.</p> <p>Additionally, based on conversation with the UNT System Senior Director of Procurement Services, the current practice is that the purchase order serve as sufficient documentation when UNT Facilities uses a contractor on an approved cooperative. This is not the current practice for the UNT System. Internal Audit was informed that Procurement Services is in the process of changing this practice. According to the UNT System Senior Director of Procurement Services, UNT Facilities is currently using a contractor on an approved purchase order awarded by UNT System and the contract when there has not yet been a decision regarding a specific dollar threshold for this requirement.</p>	Moderate	<p>Recommendation for David Reynolds, Associate Vice President of facilities</p> <p>6.1.a. Establish a process to ensure that the Notice to Proceed is always submitted after the contractor has received the completed P.O.</p>	<p>In Facilities project managers will inform all outside contractors and vendors that the delivery of the purchase order is equal to the NTP. In the event that a contractor is awarded a contract and the purchase order of the PO, it will be the responsibility of the Facilities personnel managing the PO to instruct their contractor or vendor not to proceed until further notice.</p>	<p>Heleen Bailey, Director, Facilities Planning, Design and Construction</p>	10/7/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-413 DAL	Governance and Regulatory Compliance	Community Counseling Clinic Audit	UNT Dallas	<p>4. Lack of Cash Controls</p> <p>Subsequent measures of payments received are not adequate during the collection, receipting, depositing and reconciliation processes. The Clinic charges a fee of \$10 to the community for providing counseling and mental health services. Additionally, the Clinic offers a discounted fee and/or pro bono services to limited clients based on the client's financial need. The Clinic accepts cash, check or money order.</p> <p>Specifically, the following were noted:</p> <p>a. There is no segregation of duties, one person is responsible for scheduling patient appointments, collecting money, updating the patients' Excel spreadsheet which details services rendered and amount collected.</p> <p>b. Prior to January 2017, there was no patient and/or collection database identifying services rendered and amount collected. Although an Excel spreadsheet is currently used to track collections, the spreadsheet only includes the patient's first name and no medical record is cross-referenced to help ensure information collected is accurate and complete.</p> <p>c. Information recorded on the Excel spreadsheet is not reconciled to the clinic's financial records, and the prepared deposits to help ensure that all funds collected for services rendered were entered into the spreadsheet, and all funds collected were deposited.</p>	High	<p>Recommendations for the Chief Financial Officer and Provost in collaboration with the UNT System Associate Vice Chancellor & Controller:</p> <p>4.1.d. Develop responsible procedures to help ensure that an independent personnel, other than the Administrative Specialist, is reconciling the appointment schedule to the Excel spreadsheet and the prepared deposits.</p>	<p>4. To ensure security for future use, we will develop reconciliation procedures for fee collection in the clinic. The Clinic Director or the Program Coordinator will work with the Administrative Specialist and the Controller's office to develop reconciliation procedures. The Controller's office will develop reconciliation procedures, including appointments separately, and ensure a balanced report is generated at the end of a recording period.</p>	Jim Main, Chief Financial Officer and Betty Stewart, Provost/ Executive Vice President of Academic Affairs in collaboration with Aaron McKay, UNT System Associate Vice Chancellor & Controller	8/31/2019	Open
Internal	UNT System Internal Audit	Fiscal Year 2017	17-413 DAL	Governance and Regulatory Compliance	Community Counseling Clinic Audit	UNT Dallas	<p>4. Lack of Cash Controls</p> <p>Subsequent measures of payments received are not adequate during the collection, receipting, depositing and reconciliation processes. The Clinic charges a fee of \$10 to the community for providing counseling and mental health services. Additionally, the Clinic offers a discounted fee and/or pro bono services to limited clients based on the client's financial need. The Clinic accepts cash, check or money order.</p> <p>Specifically, the following were noted:</p> <p>a. There is no segregation of duties, one person is responsible for scheduling patient appointments, collecting money, updating the patients' Excel spreadsheet which details services rendered and amount collected, as well as preparing deposits.</p> <p>b. Prior to January 2017, there was no patient and/or collection database identifying services rendered and amount collected. Although an Excel spreadsheet is currently used to track collections, the spreadsheet only includes the patient's first name and no medical record is cross-referenced to help ensure information collected is accurate and complete.</p> <p>c. Information recorded on the Excel spreadsheet is not reconciled to the clinic's financial records, and the prepared deposits to help ensure that all funds collected for services rendered were entered into the spreadsheet, and all funds collected were deposited.</p>	High	<p>Recommendations for the Chief Financial Officer and Provost in collaboration with the UNT System Associate Vice Chancellor & Controller:</p> <p>4.1.e. Develop reconciling procedures to help ensure that deposits turned into the Clearing Office are posted to the Clinic's University account.</p>	<p>4. To ensure security for future use, we will collaborate with the UNT System Controller to guarantee that clients receive a University issued receipt.</p> <p>4.1.e. Develop reconciling procedures to help ensure that deposits turned into the Clearing Office are posted to the Clinic's University account.</p>	Jim Main, Chief Financial Officer and Betty Stewart, Provost/ Executive Vice President of Academic Affairs in collaboration with Aaron McKay, UNT System Associate Vice Chancellor & Controller	8/31/2019	Open

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-413 DAL	Governance and Regulatory Compliance	Community Counseling Clinic Audit	UNT Dallas	<p>4. Lack of Cash Controls</p> <p>Subsequent measures of payments received are not adequate during the collection, receipting, depositing and reconciliation processes. The Clinic charges a fee of \$10 to the community for providing counseling and mental health services. Additionally, the Clinic offers a discounted fee and/or pro bono services to limited clients based on the client's financial need. The Clinic accepts cash, check or money orders. Specifically, the following were noted:</p> <p>a. There is no segregation of duties, one person is responsible for scheduling patient appointments, collecting money, updating the patients' Excel spreadsheet which details services rendered and amount collected.</p> <p>b. Prior to January 2017, there was no patient and/or collection database identifying services rendered and amount collected. Although an Excel spreadsheet is currently used to track collections, the spreadsheet only includes the patient's first name and no medical record is cross-referenced to help ensure information collected is accurate and complete.</p> <p>c. Information recorded on the Excel spreadsheet is not reconciled to the patient's medical record, and the prepared deposits to help ensure that all funds collected for services rendered were entered into the spreadsheet, and all funds collected were deposited.</p>	High	<p>Recommendations for the Chief Financial Officer and Provost in collaboration with the UNT System Associate Vice Chancellor & Controller:</p> <p>4.1. Provide a checklist based receipt to all patients. Additionally record adequate information on the receipt which should always include the patient's full name, date of service and amount.</p>	<p>1. The Administrative Specialist will conduct research to identify a viable fireproof safe to present to the administrative leadership for future consideration.</p>	<p>Jim Main, Chief Financial Officer and Betty Stewart, Provost Executive Vice President of Academic Affairs in collaboration with Aaron McKay, UNT System Associate Vice Chancellor & Controller</p>	8/31/2019	Open
Internal	UNT System Internal Audit	Fiscal Year 2017	17-413 DAL	Governance and Regulatory Compliance	Community Counseling Clinic Audit	UNT Dallas	<p>4. Lack of Cash Controls</p> <p>Subsequent measures of payments received are not adequate during the collection, receipting, depositing and reconciliation processes. The Clinic charges a fee of \$10 to the community for providing counseling and mental health services. Additionally, the Clinic offers a discounted fee and/or pro bono services to limited clients based on the client's financial need. The Clinic accepts cash, check or money orders. Specifically, the following were noted:</p> <p>a. There is no segregation of duties, one person is responsible for scheduling patient appointments, collecting money, updating the patients' Excel spreadsheet which details services rendered and amount collected, as well as preparing deposits.</p> <p>b. Prior to January 2017, there was no patient and/or collection database identifying services rendered and amount collected. Although an Excel spreadsheet is currently used to track collections, the spreadsheet only includes the patient's first name and no medical record is cross-referenced to help ensure information collected is accurate and complete.</p> <p>c. Information recorded on the Excel spreadsheet is not reconciled to the patient's medical record, and the prepared deposits to help ensure that all funds collected for services rendered were entered into the spreadsheet, and all funds collected were deposited.</p>	High	<p>Recommendations for the Chief Financial Officer and Provost in collaboration with the UNT System Associate Vice Chancellor & Controller:</p> <p>4.1. Obtain a fireproof safe to properly safeguard money.</p>	<p>1. The Clinic Director, the Program Coordinator and the Administrative Specialist will work with UNT System University to ensure that deposits are turned in to the Cashiering office and posted to the Clinic's University Account.</p>	<p>Jim Main, Chief Financial Officer and Betty Stewart, Provost Executive Vice President of Academic Affairs in collaboration with Aaron McKay, UNT System Associate Vice Chancellor & Controller</p>	8/31/2019	Open

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-413 DAL	Governance and Regulatory Compliance	Community Counseling Clinic Audit	UNT Dallas	<p>4. Lack of Cash Controls</p> <p>Subsequent measures of payments received are not adequate during the collection, receipting, depositing and reconciliation processes. The Clinic charges a fee of \$10 to the community for providing counseling and mental health services. Additionally, the Clinic offers a discounted fee and/or pro bono services to limited clients based on the client's financial need. The Clinic accepts cash, check or money orders.</p> <p>Specifically, the following were noted:</p> <p>a. There is no segregation of duties, one person is responsible for scheduling patient appointments, collecting money, updating the patients' Excel spreadsheet which details services rendered and amount collected.</p> <p>b. Prior to January 2017, there was no patient and/or collection database identifying services rendered and amount collected. Although an Excel spreadsheet is currently used to track collections, the spreadsheet only includes the patient's first name and no medical record is cross-referenced to help ensure information collected is accurate and complete.</p> <p>c. Information recorded on the Excel spreadsheet is not independently reconciled between the appointment schedule and the prepared deposits to help ensure that all funds collected for services rendered were entered into the spreadsheet, and all funds collected were deposited.</p>	High	<p>Recommendations for the Chief Financial Officer and Provost in collaboration with the UNT System Associate Vice Chancellor & Controller:</p> <p>4.1. Collaborate with the UNT System University Cashiering Services to provide cash handling training to all personnel handling money.</p>	<p>1. We will identify appropriate training for the administrative specialists, and all staff responsible for cash handling, to participate in cash handling training. We received preliminary information from Mr. John Tannert, Manager of UNT Student Cashiering Services, through the UNT Cash Control Training and the UNT System Associate Vice Chancellor & Controller Manual for the Dallas Campus.</p>	Jim Main, Chief Financial Officer and Betty Stewart, Provost/ Executive Vice President of Academic Affairs in collaboration with Aaron McKay, UNT System Associate Vice Chancellor & Controller	8/31/2019	Open
Internal	UNT System Internal Audit	Fiscal Year 2017	17-413 DAL	Governance and Regulatory Compliance	Community Counseling Clinic Audit	UNT Dallas	<p>4. Lack of Cash Controls</p> <p>Subsequent measures of payments received are not adequate during the collection, receipting, depositing and reconciliation processes. The Clinic charges a fee of \$10 to the community for providing counseling and mental health services. Additionally, the Clinic offers a discounted fee and/or pro bono services to limited clients based on the client's financial need. The Clinic accepts cash, check or money orders.</p> <p>Specifically, the following were noted:</p> <p>a. There is no segregation of duties, one person is responsible for scheduling patient appointments, collecting money, updating the patients' Excel spreadsheet which details services rendered and amount collected, as well as preparing deposits.</p> <p>b. Prior to January 2017, there was no patient and/or collection database identifying services rendered and amount collected. Although an Excel spreadsheet is currently used to track collections, the spreadsheet only includes the patient's first name and no medical record is cross-referenced to help ensure information collected is accurate and complete.</p> <p>c. Information recorded on the Excel spreadsheet is not independently reconciled between the appointment schedule and the prepared deposits to help ensure that all funds collected for services rendered were entered into the spreadsheet, and all funds collected were deposited.</p>	High	<p>Recommendations for the Chief Financial Officer and Provost in collaboration with the UNT System Associate Vice Chancellor & Controller:</p> <p>4.1.1. Seek guidance from the UNT System University Cashiering Services to develop written cash control procedures in accordance with the UNT Cash Control and Departmental Budget Handbook.</p>	<p>1. The Clinic Director, the Program Coordinator and the Administrative Specialists will work with UNT System Controller's office to develop procedures managing cash control for the counseling clinic.</p>	Jim Main, Chief Financial Officer and Betty Stewart, Provost/ Executive Vice President of Academic Affairs in collaboration with Aaron McKay, UNT System Associate Vice Chancellor & Controller	8/31/2019	Open

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-413 DAL	Governance and Regulatory Compliance	Community Counseling Clinic Audit	UNT Dallas	<p>4. Lack of Cash Controls</p> <p>Subsequent measures of payments received are not adequate during the collection, receipting, depositing and reconciliation process. The Clinic charges a fee of \$10 to the community for providing counseling and mental health services. Additionally, the Clinic offers a discounted fee and/or pro bono services to limited clients based on the client's financial need. The Clinic accepts cash, check or money orders. Specifically, the following were noted:</p> <p>a. There is no segregation of duties, one person is responsible for scheduling patient appointments, collecting money, updating the patients' case spreadsheet which details services rendered and amount collected.</p> <p>b. Prior to January 2017, there was no patient and/or collection database identifying services rendered and amount collected. Although an Excel spreadsheet is currently used to track collections, the spreadsheet is not updated on a regular basis. Additionally, the spreadsheet only includes the patient's first name and no medical record is cross-referenced to help ensure information collected is accurate and complete.</p> <p>c. Information recorded on the Excel spreadsheet is not reconciled with the clinic's financial records and the proper deposits to help ensure that all funds collected for services rendered were entered into the spreadsheet, and all funds collected were deposited.</p>	High	<p>Recommendations for the Chief Financial Officer and Provost in collaboration with the UNT System Associate Vice Chancellor & Controller:</p> <p>4.1.1. Review appointment schedule for reconciliation purposes in accordance with the state retention guidelines.</p>	<p>1. UNT Dallas Patient Management System is in place. The Administrative Specialist will create and maintain an appointment schedule log in a binder for reconciliation purposes. This process will be implemented until a systematic solution is developed.</p>	<p>Jim Mills, Chief Financial Officer and Betty Stewart, Provost Executive Vice President of Academic Affairs in Dallas County Community College System, UNT System Associate Vice Chancellor & Controller</p>	8/17/2019	Open
Internal	UNT System Internal Audit	Fiscal Year 2017	17-414 UNT	Governance and Regulatory Compliance	Classroom Support Services	UNT	<p>4. Lack of training documentation for CSS systems.</p> <p>There is no training documentation for the Room Monitor system used by CSS. The Room Monitor (RM) system was written in-house and no physical documentation exists to train its users. Developers include comments in the code but no formal training documentation exists. There are no Blackboard video courses to train their employees in using the RM system.</p>	Moderate	<p>Recommendations for Classroom Support Services Director:</p> <p>4.1.1. Complete development of Blackboard courses and implement their use in training CSS personnel.</p>	<p>1a. We agree and will continue to develop and customize training to fit the application. Since the review of the Classroom Support training application (a web based training service) which allows for an index of training options and retains documentation of each employee's training progression.</p>	<p>Ashley Osberg, Director Classroom Support Services</p>	11/20/2018	Open

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-414 UNT	Governance and Regulatory Compliance	Classroom Support Services	UNT	<p>A. Lack of training documentation for CSS systems. There is no training documentation for the Room Monitor system used by CSS. The Room Monitor (RM) system was written in-house and no physical documentation exists to train its users. Developers include comments in their code and maintain a change log, both of which serve as system documentation. CSS is in the process of developing Blackboard video courses to train their employees in using the RM system.</p>	Moderate	<p>Recommendations for Classroom Support Services Director: A.1. b. Create a punch list, outline, or talking points to cover during training to ensure consistency.</p>	<p>1a. We agree. Given that each employee has different responsibilities and training requirements, training models for lynda.com will be indexed for each employee.</p>	Jakoby Chene, Director Classroom Support Services	11/22/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2017	17-001 HSC	Governance and Regulatory Compliance	Graduate School of Biomedical Sciences Review	UNTHSC	<p>4. Service Teaching Assessments There was neither an agreement nor documentation in place that provided a basis for the state used for Service Teaching Assessment (STA). This issue was reported in the Texas College of Osteopathic Medicine Financial Review, Audit No. 17-403 HSC report as issue #6. STA has been implemented in the Graduate School of Biomedical Sciences for the School of Biomedical Sciences (GSBS) and the School of Health Professions (SHP). The GSBS has its roots in TCOM where basic science courses were taught by TCOM faculty. The STA began in 2000 when the past President and Deans of TCOM and GSBS agreed to move the faculty who taught basic science courses, out of TCOM into the GSBS. This was done to create a research environment to basic science faculty by GSBS. The faculty in the basic science departments continued to contribute to the teaching of the pre-clinical part of TCOM's medical curriculum. However, the faculty who were primarily responsible for the pre-clinical courses for TCOM students were on TCOM committees. Similarly, another collaboration began where TCOM and GSBS faculty teach courses to School of Health Professions (SHP) students. The purpose of this collaborative initiative was to promote economies of scale and to provide a more efficient and effective use of resources. Application of teaching efforts/ courses among schools. The financial</p>	High	<p>Recommendations for the UNTHSC Executive Vice President for Finance & Chief Financial Officer and Interim Provost: A.1.a. Review and assess options of administering Service Teaching Assessments and adopt a funding mechanism (e.g. based on determining cost of instruction) that best serves the University needs.</p>	<p>1a. An analysis of current reimbursement models for teaching across schools and colleges was conducted in the spring of 2017. Options for alternative reimbursement models were discussed with the deans of the five schools and colleges.</p>	Clare Peck, Interim Provost	5/7/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-412 UNT	Governance and Regulatory Compliance	College of Music Transition Audit	UNT	<p>2. Personally identifiable information</p> <p>Copies of checks containing personally identifiable information (PII), including name, address, and bank account information, are not properly secured. Internal Audit observed two instances where copies of checks were not properly secured. Copies of checks in one office were stored in a lockable cabinet, but the individual did not have a key to the cabinet. Additionally, Internal Audit observed another office in which checks were stored in an unlocked closet. The closet was capable of being locked via a padlock.</p>	High	<p>Recommendation for John Richmond, Dean of the College of Music:</p> <p>2.1. Identify areas in the College of Music where copies of PII checks are stored and ensure that those areas are properly secured.</p>	<p>1.a. The Assistant Dean for Business and Finance will be responsible for maintaining an accurate list of all faculty and staff that handle cash (checks) and will send reminders regarding appropriate handling of personally identifiable information at the start of each long semester.</p>	John Wilson, Associate Dean for Operations (and Assistant Dean for Business and Finance is hired)	9/22/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-401 HSC	Governance and Regulatory Compliance	Graduate School of Biomedical Sciences Review	UNTHSC	<p>4. Service Teaching Assessments</p> <p>There was neither an agreement nor documentation in place that provided a basis for the state used for Service Teaching Assessment (STA). This issue was reported in the Texas College of Osteopathic Medicine Financial Review, Audit No. 17-403 HSC report as issue #6. STA is a collaborative effort between the Graduate School of Biomedical Sciences (GSBS), the Graduate School of Osteopathic Medicine (TCOM), Graduate School of Biomedical Sciences (GSBS) and School of Health Professions (SHP).</p> <p>The GSBS has its roots in TCOM where basic science courses were taught by TCOM faculty. The STA began in 2000 when the past President, and Deans of TCOM and GSBS agreed to move the faculty who taught basic science courses, out of TCOM into the GSBS. This was done to create a more research-oriented environment for professional/research environment to basic science faculty by GSBS. The faculty in the basic science departments continued to contribute to the teaching of the pre-clinical part of TCOM's medical curriculum. However, the basic science departments were not properly represented on the committees for TCOM students and the TCOM committees. Similarly, another collaboration began where TCOM and GSBS faculty teach courses to School of Health Professions (SHP) students. The purpose of this collaborative initiative was to promote economies of scale and to provide a more integrated approach to the financial application of teaching efforts/ courses among schools. The financial</p>	High	<p>Recommendations for the UNTHSC Executive Vice President for Finance & Chief Financial Officer and Interim Provost:</p> <p>4.1.a. Develop policies and procedures to guide the administration of fund redistribution for Service Teaching Assessments within the institution.</p>	<p>1b. Policies and procedures will be developed during FY2018 to guide reimbursement across schools and colleges for teaching services. The plan will be implemented for FY2019.</p>	Clare Peck, Interim Provost	5/7/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-412 UNT	Governance and Regulatory Compliance	College of Music Transition Audit	UNT	<p>4. String Project</p> <p>The String Project was in no compliance with UNT Policy 15.003. Criminal background checks were not performed on 2 String Project student employees. Additionally, String Project student employees did not complete the required sexual abuse and child molestation awareness training.</p> <p>The String Project is a teacher training program for UNT undergraduate string education majors. The program offers lessons in violin, viola, cello, and double bass to approximately 150 public school age students each year. These students range in age from 8 to 17. The String Project runs concurrent with the UNT academic calendar.</p> <p>Internal Audit noted the following regarding the String Project for the 2016-17 academic year:</p> <ul style="list-style-type: none"> ▫ The required background checks were not performed for 2 of the 16 String Project student employees. ▫ No String Project student employees completed sexual abuse awareness and child molestation awareness training. ▫ An apparent Risk Management Services (RMS) was generally unaware of the String Project. ▫ The medical insurance requirements for the String Project were unclear. Internal Audit spoke with RMS regarding medical insurance requirements for String Project participants. RMS indicated that it was unclear if the String Project had any medical insurance requirements for String Project student employees. ▫ Medical insurance requirements for the program. ▫ String Project student employees are hired through the UNT Career Center, but background checks are administered through RMS. 	High	<p>Recommendations for John Richmond, Dean of the College of Music:</p> <p>A1.b. Indicate in the ePAR that the String Project workers to be hired through the UNT Career Center. Criminal background checks should be administered through Risk Management Services.</p>	<p>1b. The Music Education administrative assistant will indicate in the ePAR that a criminal history check is required.</p>	Elizabeth Chappell, Lecturer, Music Education	9/7/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-412 UNT	Governance and Regulatory Compliance	College of Music Transition Audit	UNT	<p>4. String Project</p> <p>The String Project was in no compliance with UNT Policy 15.003. Criminal background checks were not performed on 2 String Project student employees. Additionally, String Project student employees did not complete the required sexual abuse and child molestation awareness training.</p> <p>The String Project is a teacher training program for UNT undergraduate string education majors. The program offers lessons in violin, viola, cello, and double bass to approximately 150 public school age students each year. These students range in age from 8 to 17. The String Project runs concurrent with the UNT academic calendar.</p> <p>Internal Audit noted the following regarding the String Project for the 2016-17 academic year:</p> <ul style="list-style-type: none"> ▫ The required background checks were not performed for 2 of the 16 String Project student employees. ▫ No String Project student employees completed sexual abuse awareness and child molestation awareness training. ▫ An apparent Risk Management Services (RMS) was generally unaware of the String Project. ▫ The medical insurance requirements for the String Project were unclear. Internal Audit spoke with RMS regarding medical insurance requirements for String Project participants. RMS indicated that it was unclear if the String Project had any medical insurance requirements for String Project student employees. ▫ Medical insurance requirements for the program. ▫ String Project student employees are hired through the UNT Career Center, but background checks are administered through RMS. 	High	<p>Recommendations for John Richmond, Dean of the College of Music:</p> <p>A1.c. Establish processes and procedures to ensure that documentation of the criminal background check administered through Risk Management Services is always attached to the ePAR when hiring String Project workers..</p>	<p>1c. Documentation of the criminal history check will be attached to all ePARs.</p>	Elizabeth Chappell, Lecturer, Music Education	9/7/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-412 UNT	Governance and Regulatory Compliance	College of Music Transition Audit	UNT	<p>4. String Project</p> <p>The String Project was in no compliance with UNT Policy 15.003. Criminal background checks were not performed on 2 String Project student employees. Additionally, String Project student employees did not complete the required sexual abuse and child molestation awareness training.</p> <p>The String Project is a teacher training program for UNT undergraduate string education majors. The program offers lessons in violin, viola, cello, and double bass to approximately 150 public school age students each year. These students range in age from 8 to 17. The String Project runs concurrent with the UNT academic calendar.</p> <p>Internal Audit noted the following regarding the String Project for the 2016-17 academic year:</p> <ul style="list-style-type: none"> 1) The required background checks were not performed for 2 of the 16 (12.5%) String Project student employees. 2) No String Project student employees completed sexual abuse awareness and child molestation awareness training. 3) All String Project student employees (RMS) was generally unaware of the String Project. 4) The medical insurance requirements for the String Project were unclear. Internal Audit spoke with RMS regarding medical insurance requirements for String Project participants. RMS indicated that it was unclear if the String Project was required to determine the medical insurance requirements for the program. 5) String Project student employees are hired through the UNT Career Center, but background checks are administered through RMS. 	High	<p>Recommendations for John Richmond, Dean of the College of Music:</p> <p>A1.d. Establish processes and procedures to ensure that all String Project student employees complete the required sexual abuse and child molestation awareness training.</p>	<p>1d. During the hiring process, the administrative assistant will provide the appropriate links to the student workers to complete sexual abuse and child molestation awareness training. The administrative assistant will confirm that the training has been completed, 1 (one) month prior to start date of String Project.</p>	Elizabeth Chappell, Lecturer, Music Education	9/7/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-412 UNT	Governance and Regulatory Compliance	College of Music Transition Audit	UNT	<p>4. String Project</p> <p>The String Project was in no compliance with UNT Policy 15.003. Criminal background checks were not performed on 2 String Project student employees. Additionally, String Project student employees did not complete the required sexual abuse and child molestation awareness training.</p> <p>The String Project is a teacher training program for UNT undergraduate string education majors. The program offers lessons in violin, viola, cello, and double bass to approximately 150 public school age students each year. These students range in age from 8 to 17. The String Project runs concurrent with the UNT academic calendar.</p> <p>Internal Audit noted the following regarding the String Project for the 2016-17 academic year:</p> <ul style="list-style-type: none"> 1) The required background checks were not performed for 2 of the 16 (12.5%) String Project student employees. 2) No String Project student employees completed sexual abuse awareness and child molestation awareness training. 3) All String Project student employees (RMS) was generally unaware of the String Project. 4) The medical insurance requirements for the String Project were unclear. Internal Audit spoke with RMS regarding medical insurance requirements for String Project participants. RMS indicated that it was unclear if the String Project was required to determine the medical insurance requirements for the program. 5) String Project student employees are hired through the UNT Career Center, but background checks are administered through RMS. 	High	<p>Recommendations for John Richmond, Dean of the College of Music:</p> <p>A1.e. Coordinate with Risk Management Services to determine and fulfill the medical insurance requirements for String Project minor participants.</p>	<p>1e. The String Project will comply with medical insurance requirements. All recommendations will be in place by 9/1/17.</p>	Elizabeth Chappell, Lecturer, Music Education	9/7/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-407315	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>4. Third Party Administrator Issues</p> <p>The validation process to reconcile data and funds received is not consistent between VRSICO (lead record keeper) and the DRP financial service companies. The University is responsible for the timely supply of all required data and funds to VRSICO as stipulated by the contract. VRSICO determines that contributions are in good order, they release data and funds to the financial service companies. VRSICO determines that contributions are in good order, they release data and funds to the financial service companies.</p> <p>The third party administrator, VRSICO, is the University's intermediary party and in charge of the distribution of funds to the four financial service companies. The University is responsible for the timely supply of all required data and funds to VRSICO as stipulated by the contract. VRSICO determines that contributions are in good order, they release data and funds to the financial service companies. VRSICO determines that contributions are in good order, they release data and funds to the financial service companies.</p> <p>VRSICO deemed data and funds to be in good order; however, the financial service companies identified errors. Refer to Rowchart 2 for graphic demonstration, this continues from Rowchart 1: See flow chart 2.</p>	High	<p>Recommendations for the Vice Chancellor of Finance in consultation with the Office of General Counsel:</p> <p>4.1.a. Work with the third party DRP administrator and the University's intermediary party to ensure that the data and/or documentation needed by both parties to consider the DRP contributions in good order for depositing.</p>	<p>1.a. In partnership with our Retirement Consultant, cross-campus and cross-functional Retirement Committee, and internal departments, we will update contracts, processes, file fees, and documentation. Due to the complexity of making vendor, process, and programming changes, anticipated full implementation is within the coming fiscal year.</p>	Janet Waldron, Vice Chancellor of Finance	8/31/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2017	17-407315	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>4. Third Party Administrator Issues</p> <p>The validation process to reconcile data and funds received is not consistent between VRSICO (lead record keeper) and the DRP financial service companies. This creates unnecessary delays in the depositing of DRP contributions to the participants' accounts and non-compliance with the 3 business day rule required by the Texas Government Code and Texas Administrative Code as referenced in issue in number 3.</p> <p>The third party administrator, VRSICO, is the University's intermediary party and in charge of the distribution of funds to the four financial service companies. The University is responsible for the timely supply of all required data and funds to VRSICO as stipulated by the contract. VRSICO determines that contributions are in good order, they release data and funds to the financial service companies. VRSICO determines that contributions are in good order, they release data and funds to the financial service companies.</p> <p>VRSICO deemed data and funds to be in good order; however, the financial service companies identified errors. Refer to Rowchart 2 for graphic demonstration, this continues from Rowchart 1: See flow chart 2.</p>	High	<p>Recommendations for the Vice Chancellor of Finance in consultation with the Office of General Counsel:</p> <p>4.1.b. Request the validation processing requirements followed by the third party administrator is consistent with the financial service companies.</p>	<p>1b. Financial service companies' performance will be addressed through the project.</p>	Janet Waldron, Vice Chancellor of Finance	8/31/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-417 UNT	Governance and Regulatory Compliance	LUPI Business Process Audit	UNT	<p>4. Travel Expenses</p> <p>Internal Audit noted a Lifelong Learning and Professional Development (LUPD) employee attended two international trips during fiscal year 2017 with no lodging or airfare costs reflected on a travel budget authorization (TBA) or travel voucher. Specifically:</p> <ul style="list-style-type: none"> TBA and travel voucher for the trip during January/February 2017 totaled \$268.90 only including meals and taxis, and TBA and travel voucher for the trip during May/June 2017 totaled \$430.97 only including meals and taxis. <p>Internal Audit was told by the employee that lodging and airfare costs for the international trips were paid out-of-pocket. During the course of the audit, internal Audit identified unusual transactions within the LUPD chart string and requested support documentation. Travel invoices totaling \$16,118.60 and May/June 2017 totaling \$17,414.14, were provided by Business Support Services (BSS). It was determined the invoices were submitted as requisitions, approved by BSS and self-approved by the employee. Internal Audit noted that the requisition for airfare and lodging did not receive supervisory approval which resulted in the employee approving their own travel since the traveler was also the account holder.</p>	High	<p>Recommendations for Michael Abernethy, Senior Director of Procurement Services:</p> <p>4.2.a. Coordinate with Business Support Services (BSS) Travel to ensure that all international travel is properly documented on a travel budget authorization (TBA) or travel voucher. Specifically:</p> <ul style="list-style-type: none"> TBA and travel voucher for the trip during January/February 2017 totaled \$268.90 only including meals and taxis, and TBA and travel voucher for the trip during May/June 2017 totaled \$430.97 only including meals and taxis. <p>Internal Audit was told by the employee that lodging and airfare costs for the international trips were paid out-of-pocket. During the course of the audit, internal Audit identified unusual transactions within the LUPD chart string and requested support documentation. Travel invoices totaling \$16,118.60 and May/June 2017 totaling \$17,414.14, were provided by Business Support Services (BSS). It was determined the invoices were submitted as requisitions, approved by BSS and self-approved by the employee. Internal Audit noted that the requisition for airfare and lodging did not receive supervisory approval which resulted in the employee approving their own travel since the traveler was also the account holder.</p>	<p>4.2.b. The management plan will be that Procurement Services and Accounts Payable will review our procurement guidance regarding these situations and make adjustment by January 1, 2018 to clearly delineate those situations where either the procurement card or the purchase order process may be used to facilitate payment for group travel included in this guidance will be language that enhances the procurement (TBA) be included with any requisitions and/or Authorization (TBA) be included with any requisitions and/or procurement card exception requests. Furthermore, we will ensure seeking reimbursement for any expenses already facilitated through the purchase order or procurement card process.</p>	Michael Abernethy, Senior Director of Procurement Services	1/1/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-417 UNT	Governance and Regulatory Compliance	LUPI Business Process Audit	UNT	<p>4. Travel Expenses</p> <p>Internal Audit noted a Lifelong Learning and Professional Development (LUPD) employee attended two international trips during fiscal year 2017 with no lodging or airfare costs reflected on a travel budget authorization (TBA) or travel voucher. Specifically:</p> <ul style="list-style-type: none"> TBA and travel voucher for the trip during January/February 2017 totaled \$268.90 only including meals and taxis, and TBA and travel voucher for the trip during May/June 2017 totaled \$430.97 only including meals and taxis. <p>Internal Audit was told by the employee that lodging and airfare costs for the international trips were paid out-of-pocket. During the course of the audit, internal Audit identified unusual transactions within the LUPD chart string and requested support documentation. Travel invoices totaling \$16,118.60 and May/June 2017 totaling \$17,414.14, were provided by Business Support Services (BSS). It was determined the invoices were submitted as requisitions, approved by BSS and self-approved by the employee. Internal Audit noted that the requisition for airfare and lodging did not receive supervisory approval which resulted in the employee approving their own travel since the traveler was also the account holder.</p>	High	<p>Recommendations for Michael Abernethy, Senior Director of Procurement Services:</p> <p>4.2.a. Coordinate with Business Support Services (BSS) Travel to ensure that all international travel is properly documented on a travel budget authorization (TBA) or travel voucher. Specifically:</p> <ul style="list-style-type: none"> TBA and travel voucher for the trip during January/February 2017 totaled \$268.90 only including meals and taxis, and TBA and travel voucher for the trip during May/June 2017 totaled \$430.97 only including meals and taxis. <p>Internal Audit was told by the employee that lodging and airfare costs for the international trips were paid out-of-pocket. During the course of the audit, internal Audit identified unusual transactions within the LUPD chart string and requested support documentation. Travel invoices totaling \$16,118.60 and May/June 2017 totaling \$17,414.14, were provided by Business Support Services (BSS). It was determined the invoices were submitted as requisitions, approved by BSS and self-approved by the employee. Internal Audit noted that the requisition for airfare and lodging did not receive supervisory approval which resulted in the employee approving their own travel since the traveler was also the account holder.</p>	<p>4.2.b. The management plan will be that Procurement Services and Accounts Payable will review our procurement guidance regarding these situations and make adjustment by January 1, 2018 to clearly delineate those situations where either the procurement card or the purchase order process may be used to facilitate payment for group travel included in this guidance will be language that enhances the procurement (TBA) be included with any requisitions and/or Authorization (TBA) be included with any requisitions and/or procurement card exception requests. Furthermore, we will ensure seeking reimbursement for any expenses already facilitated through the purchase order or procurement card process.</p>	Michael Abernethy, Senior Director of Procurement Services	1/1/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-412 UNT	Governance and Regulatory Compliance	College of Music Transition Audit	UNT	<p>5. Cash handling</p> <p>UNT cash handling policies were not consistently followed in the College of Music.</p> <p>There were numerous issues related to cash handling, including the following:</p> <ul style="list-style-type: none"> Internal Audit reviewed cash handling training records in the University's Enterprise Information System. Internal Audit identified six individuals who have handled cash without having completed cash handling training. Internal Audit identified two additional individuals who handle cash but have not completed cash handling training within the last 12 months. Also, Internal Audit was informed during an interview that individuals delivered deposits to Student Accounting and University Cashiering Services prior to having completed cash handling training. Internal Audit identified two unofficial petty cash funds. The funds were not properly secured. Internal Audit was informed during interviews of two additional unofficial petty cash funds that were closed shortly prior to the start of the audit. Funds were not properly secured. The following examples were identified during the audit: <ul style="list-style-type: none"> o Funds stored in an unlocked desk drawer; o Funds not transported in a lockable bank bag; o Unmounted sales; o Unmounted sales; o Unmounted sales. Internal Audit observed instances of deposits not made within three business days of receipt. Additionally, several individuals said during 	High	<p>Recommendations for John Richmond, Dean of the College of Music:</p> <ul style="list-style-type: none"> 5.1. a. Identify individuals in the College of Music who handle cash and determine whether those individuals should perform cash handling duties. 	<p>1a. The Assistant Dean for Business and Finance will be responsible for maintaining an accurate listing of all college employees that handle cash. The Assistant Dean for Business and Finance will also review the personnel who handle cash at the beginning of each long semester to ensure that it's appropriate for them to have cash handling responsibilities.</p>	Jon Nelson, Associate Dean for Operations (and Assistant Dean for Business and Finance has been hired)	1/31/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-412 UNT	Governance and Regulatory Compliance	College of Music Transition Audit	UNT	<p>5. Cash handling</p> <p>UNT cash handling policies were not consistently followed in the College of Music.</p> <p>There were numerous issues related to cash handling, including the following:</p> <ul style="list-style-type: none"> Internal Audit reviewed cash handling training records in the University's Enterprise Information System. Internal Audit identified six individuals who have handled cash without having completed cash handling training. Internal Audit identified two additional individuals who handle cash but have not completed cash handling training within the last 12 months. Also, Internal Audit was informed during an interview that individuals delivered deposits to Student Accounting and University Cashiering Services prior to having completed cash handling training. Internal Audit identified two unofficial petty cash funds. The funds were not properly secured. Internal Audit was informed during interviews of two additional unofficial petty cash funds that were closed shortly prior to the start of the audit. Funds were not properly secured. The following examples were identified during the audit: <ul style="list-style-type: none"> o Funds stored in an unlocked desk drawer; o Funds not transported in a lockable bank bag; o Unmounted sales; o Unmounted sales. Internal Audit observed instances of deposits not made within three business days of receipt. Additionally, several individuals said during 	High	<p>Recommendations for John Richmond, Dean of the College of Music:</p> <ul style="list-style-type: none"> 5.1. b. Ensure all individuals with cash handling responsibilities receive training on University cash handling policies and departmental cash handling written procedures. 	<p>1b. The Assistant Dean for Business and Finance will distribute the college cash handling policy to all personnel who are authorized to handle cash. The Assistant Dean for Business and Finance will also review the personnel who handle cash at the beginning of each long semester to ensure that it's appropriate for them to have cash handling responsibilities. On-site training will be made available within the college on an annual basis.</p>	Jon Nelson, Associate Dean for Operations (and Assistant Dean for Business and Finance has been hired)	1/31/2018	Closed

UNTS Enterprise Audit Report Inventory

Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status	
Internal/ External	UNTS System Internal Audit	Fiscal Year 2017	17-015 UNT	Governance and Regulatory Compliance	College of Music Transition Audit	UNT System	<p>5. An Additional Observation Regarding Major Capital Projects</p> <p>Not all UNT major capital projects in Peoplesoft contain budget information. The Capital Projects Managed by UNT System Office of Facilities Planning & Construction (CPM) and UNT System Office of Facilities Planning & Construction (FCP) are not entered into Peoplesoft. While conducting fieldwork in minor capital projects, we noted several UNT major capital projects that did not have budget information entered into Peoplesoft, including the following:</p> <ul style="list-style-type: none"> 1. Central Park Extension at Clark Park; 2. College of Visual Arts & Design Building; and 3. Track & Field Stadium & Sports Fields. <p>While actual expenses were recorded, budgets were not entered into Peoplesoft. The CPM and FCP are not entered into the UNT System Office of Facilities Planning & Construction during our review. Based on discussion with personnel in the UNT System Office of Facilities Planning & Construction, the flow of budget information for UNT major capital projects generally is as follows:</p> <ul style="list-style-type: none"> 1. UNT System Office of Facilities Planning & Construction submits a project ID request along with project budget information to UNT System Asset Accounting. 2. UNT System Asset Accounting assigns a project ID, creates the project in Peoplesoft, and sends the project set up file to the UNT Budget Office. 	High	<p>Recommendations for Paige Smith, Associate Vice Chancellor for Budget and Planning:</p> <p>5.1.a. In coordination with UNT System Asset Accounting, UNT System Office of Facilities Planning & Construction, UNT Facilities and UNT System Treasury develop a process to ensure that budget information is entered into Peoplesoft for UNT major capital projects.</p>	<p>14. Management concurs with the findings and recommendations above. We are currently coordinating with the parties noted to solely and put into place a process that will meet the expectations and requirements delineated in this observation. Phase 1 includes identifying all major capital projects, including those with disabilities, and formal communication lines for project ID set up, establishment of budgets in Peoplesoft, and reconciliation and on-going monitoring of project budgets. Phase 2 will include an evaluation of Phase 1 to determine if the set-up is working as expected - including identifying any gaps in communication, clarity, and survey of management and end-user satisfaction.</p> <p>Phase 1 - May 2018; Phase 2 - May 2019</p>	Paige Smith, Associate Vice Chancellor for Budget and Planning	5/31/2019	Open
Internal	UNTS System Internal Audit	Fiscal Year 2017	17-412 UNT	Governance and Regulatory Compliance	College of Music Transition Audit	UNT	<p>5. Cash handling</p> <p>UNT cash handling policies were not consistently followed in the College of Music. There were numerous issues related to cash handling, including the following:</p> <ul style="list-style-type: none"> 1. Internal Audit reviewed cash handling practices in the University's Enterprise Information System. Internal Audit identified six individuals who have handled cash without having completed cash handling training. 2. Internal Audit identified two additional individuals who handle cash in the College of Music. 3. Internal Audit was informed during an interview that individuals delivered deposits to Student Accounting and University Cashiering Services prior to having completed cash handling training. 4. Internal Audit identified two unofficial petty cash funds. The funds were not properly secured and were not properly reconciled. 5. Funds were not properly secured. The following examples were noted: <ul style="list-style-type: none"> a. Funds stored in an unlocked desk drawer; b. Funds not transported in a lockable bank bag; c. Safe left open during office hours; and d. Unmounted sales. 6. Unrecorded sales. 7. Inadequate inventory of deposits sent inside within three business days of receipt. Additionally, several individuals said during 	High	<p>Recommendations for John Richmond, Dean of the College of Music:</p> <p>5.1.d. Address the inadequate segregation of duties related to the sale of CDs at Jazz performances.</p>	<p>16. The Assistant Dean for Business and Finance will work with the Chair of the Division of Jazz Studies to ensure that adequate separation of duties is implemented for the sale of any jazz merchandise at jazz performances.</p>	Jon Nelson, Associate Dean for Operations (Unit Assistant Dean for Business and Finance has been hired)	1/31/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-417 UNT	Governance and Regulatory Compliance	LLPD Business Process Audit	UNT	<p>5. Cash Handling</p> <p>Internal Audit reviewed a sample of deposits from September 1, 2016 through December 5, 2016 and April 7, 2017 through June 12, 2017 and identified 52 out of 107 deposits that were not deposited timely, up to 10 days late. UNT Policy 10.006 Cash Handling Controls was modified during October 2016 to update the maximum amount of business days to deposit cash from 5 to 3 business days. Internal Audit performed testing in accordance with UNT Policy 10.006 Cash Handling Controls for 100% of the sample. Internal Audit also noted Lifelong Learning and Professional Development (LLPD) departmental procedures refer to a petty cash fund.</p> <p>Turnover in August 2017 resulted in an inability to adhere to department procedures and University Cash Handling policies. As a result, not all individuals have received cash handling training and/or a completed Cash Handling Authorization form.</p>	High	<p>Recommendations for Stephanie Benke, Director of Lifelong Learning and Professional Development:</p> <p>5.1.a. Ensure job responsibilities are handled in a way cash is deposited timely.</p>	<p>1.a./1.b./1.c. LLPD will work directly with UNT Policies: 10.017, 10.024, 10.029, 10.006 and 04.007 to develop and implement departmental procedures and separation of duties so that we are within compliance and handling all cash deposited timely.</p>	Stephanie Benke, Director of Lifelong Learning and Professional Development	<p>1/7/2018</p> <p>Revised Impl. Date: 3/30/2018</p>	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-417 UNT	Governance and Regulatory Compliance	LLPD Business Process Audit	UNT	<p>5. Cash Handling</p> <p>Internal Audit reviewed a sample of deposits from September 1, 2016 through December 5, 2016 and April 7, 2017 through June 12, 2017 and identified 52 out of 107 deposits, approximately 49%, that were not deposited timely, up to 10 days late. UNT Policy 10.006 Cash Handling Controls was modified during October 2016 to update the maximum amount of business days to deposit cash from 5 to 3 business days. Internal Audit performed testing in accordance with UNT Policy 10.006 Cash Handling Controls for 100% of the sample. Internal Audit also noted Lifelong Learning and Professional Development (LLPD) departmental procedures refer to a petty cash fund.</p> <p>Turnover in August 2017 resulted in an inability to adhere to department procedures and University Cash Handling policies. As a result, not all individuals have received cash handling training and/or a completed Cash Handling Authorization form.</p>	High	<p>Recommendations for Stephanie Benke, Director of Lifelong Learning and Professional Development:</p> <p>5.1.a. Due to employee turnover, update departmental procedures to reflect changes in personnel job responsibilities.</p>	<p>1.a./1.b./1.c. LLPD will work directly with UNT Policies: 10.017, 10.024, 10.029, 10.006 and 04.007 to develop and implement departmental procedures and separation of duties so that we are within compliance and handling all cash deposited timely.</p>	Stephanie Benke, Director of Lifelong Learning and Professional Development	<p>1/7/2018</p> <p>Revised Impl. Date: 3/30/2018</p>	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-417 UNT	Governance and Regulatory Compliance	LUED Business Process Audit	UNT	<p>5. Cash Handling</p> <p>Internal Audit reviewed a sample of deposits from September 1, 2016 through December 5, 2016 and April 7, 2017 through June 12, 2017. Internal Audit identified 10 instances where cash deposits were not deposited timely, up to 10 days late. UNT Policy 10.006 Cash Handling Control was modified during October 2016 to update the maximum amount of business days to deposit cash from 5 to 3 business days. Internal Audit performed testing in accordance with UNT Policy 10.006 Cash Handling Control. Internal Audit also noted Lifelong Learning and Professional Development (LLPD) departmental procedures refer to a petty cash fund.</p> <p>Turnover in August 2017 resulted in an inability to adhere to UNT Policy 10.006 Cash Handling Control. As a result, not all individuals have received cash handling training and/or a completed Cash Handling Authorization form.</p>	High	<p>Recommendations to Stephanie Burke, Director of Lifelong Learning and Professional Development:</p> <p>5.1.c. Update departmental procedures to reflect actual procedures, including addition of deposit, and removal of petty cash.</p>	<p>1. A 1717/c. LLPD will work directly with UNT Policies: 10.017, 10.024, 10.029, 10.006 and 04.007 to develop and implement department procedure and separation of duties so that we are in compliance and handling all cash deposited timely.</p>	Stephanie Burke, Director of Lifelong Learning and Professional Development	<p>1/7/2018</p> <p>Revised Impl. Date: 3/30/2018</p>	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-412 UNT	Governance and Regulatory Compliance	College of Music Transition Audit	UNT	<p>5. Cash Handling</p> <p>UNT cash handling policies were not consistently followed in the College of Music. There were numerous issues related to cash handling, including the following:</p> <ul style="list-style-type: none"> 1) Internal Audit reviewed cash handling receipts by the University's Enterprise Information System Internal Audit identified six individuals who have handled cash without having completed cash handling training. 2) Internal Audit identified two additional individuals who handle cash in the College of Music. 3) Internal Audit was informed during an interview that individuals delivered deposit to Student Accounting and University Cashiering Services prior to having completed cash handling training. 4) Internal Audit identified two unofficial petty cash funds. The funds were not properly secured and were not properly inventoried. 5) Internal Audit identified two additional unofficial petty cash funds that were closed shortly prior to the start of the audit. 6) Funds were not properly secured. The following examples were identified: <ul style="list-style-type: none"> a) Funds stored in an unlocked desk drawer; b) Funds not transported in a lockable bank bag; c) Funds left open during office hours; and d) Unmonitored sales. <p>As a result of the above, instances of deposits not made within three business days of receipt. Additionally, several individuals said during</p>	High	<p>Recommendations for John Richmond, Dean of the College of Music:</p> <p>5.1.c. Close all unofficial petty cash funds.</p>	<p>1.c. The Assistant Dean for Business and Finance will actively work to identify and close all unauthorized petty cash funds by the close of 2017.</p>	John Nelson, Associate Dean for Operations (Unit Assistant Dean for Business and Finance has been hired)	<p>1/31/2018</p>	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External (Source)	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal (Co-Source)	PwC	Fiscal Year 2017	17-203 UNT	Governance and Regulatory Compliance	Student Managed Investment Fund (SMIF)	UNT	<p>5. Meeting attendance</p> <p>Meeting attendance is taken using manual attendance forms that are distributed during the meeting, giving students the opportunity to add or remove themselves from the list. The student member at random at the meeting use of manual attendance forms. On an annual basis, this information is used to determine if students attending SIG meetings, based on their number of meetings attended and relevant enrolled courses.</p> <p>Impact: Manual attendance forms gives students the opportunity to sign in on behalf of other students who did not attend the meeting, which may result in students receiving unearned course credits.</p>	Low	<p>5.1. The SIG in coordination with the FIREL chair should evaluate and, if viable, implement measures whereby meeting attendance can be taken electronically, such as scanning student IDs or manually verifying student IDs written on attendance forms.</p>	<p>1. A FIREL department chair will work with the SIG Board of Directors to enable the use of the current card swiping technology for taking attendance at SIG meetings and will also assist in training SIG officers on its use.</p>	FIREL department chair in coordination with the SIG Board of Directors	Exp. Impl. Date: 11/21/2017 Revised Impl. Date: 03/31/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-407 SIS	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>5. ORP Financial Companies Issues</p> <p>ORP contributions were not always deposited within the 3 business day requirement described in issue number 3 by certain financial service companies for 21 pay periods reviewed from January 2015 - September 2016.</p> <p>The audit only has 1,458 ORP participants out of which 739 (51%) elected to receive 488 (33%) elected TASC REF, 21 (5%) elected VALC and 130 (9%) elected VOYA. The financial companies receive contribution data and funds through VISCO. The financial service companies validate the information provided and notifies either VISCO or the participant of any errors. The financial service companies are assessed by Benefits and Payroll, the financial service companies deposit contributions to the participant's account by batch processing. Refer to flowchart 3 for graphic demonstration.</p> <p>See final report for flow chart 3.</p> <p>In detail the following were noted:</p> <p>Financial credits to participants are required to deposit funds into the participant's account within the same business day received from VISCO by close of business or the next business day. The Texas Government Code and Texas Administrative Code contemplate that financial service companies will deposit or credit ORP contributions to the participant's account by batch processing. If contributions are received so long as the funds are received before the close of</p>	High	<p>Recommendations for the Assistant Vice Chancellor of Total Rewards in consultation with the Office of General Counsel and the Director of Controller Operations:</p> <p>5.1. A Work with the third party ORP administrator and the financial service companies to ensure contribution amounts are credited to the participant's account within 3 days of regular payroll and monitor until no deposit delays are noted.</p>	<p>1. An evaluation of the process is underway to determine potential quick fixes for immediate implementation while longer term corrections are being addressed.</p> <p>As a stage of the Retirement Update Project, we will be asking our existing vendors to submit proposals to select a lead record keeper and provide information reports to the current program. The lead record keeper selection and contracting are likely to be completed by February 2018, so we can partner with the lead record keeper to complete the programming process, and any required plan design changes. The current program will be decommissioned as soon as possible, and due to the complex and coordinated effort necessary, full automation is estimated to complete by the end of fiscal year 2018.</p>	<p>Christopher DeClerk, Assistant Vice Chancellor of Total Rewards and Director of Controller Operations in collaboration with the Office of General Counsel</p>	8/31/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-407-215	Governance and Regulatory Compliance	Refund Contributions	UNT System	<p>5. ORP financial companies issues</p> <p>ORP contributions were not always deposited within the 3 business day requirement described in issue number 3, by certain financial companies for 21 day period reviewed from January 2015 - September 2016.</p> <p>The institution currently has 1,488 ORP participants out of which 739 (53%) elected Fidelity, 488 (33%) elected TIAA-CREF, 71 (5%) elected VALC and 130 (9%) elected VOYA. The financial companies receive information from the participant and the participant's company. The company validates the information provided and notifies either VESCO, Benefits and/or Payroll of any errors identified. After errors are addressed by Benefits and Payroll, the financial service companies deposit contributions to the participant's account by batch processing. Refer to the report 3 for graphic demonstration.</p> <p>See flow chart 3.</p> <p>In detail the following were noted:</p> <ul style="list-style-type: none"> Financial service companies are required to deposit contributions in the participant's account within the same business day if received from VESCO by close of business or the next business day. The financial service companies will deposit or credit ORP contributions to each participant's account the same business day the contributions are received so long as the funds are received before the close of business. <p>5. Segregation of Duties</p> <p>Internal Audit noted an inappropriate segregation of duties within the UNT International (UNT) Sponsored Students and Special Programs Center. Specifically, one employee had access to perform the following:</p> <ul style="list-style-type: none"> Put students on sponsorships (Third Party Contracts); Terminate sponsorships; Generate, prepare, and send invoices to sponsors; Work the accounts receivable report to obtain past due tuition and fees; Place past due tuition and fees charges back on students' accounts. <p>Additionally, during the course of this review, it was noted an employee in the UNT Sponsored Students and Special Programs Center was not properly trained and was not following the policy to void paying 10 percent of their tuition and fees until their UNT Faculty/Staff Scholarship posted to their account. Once the scholarship posted, the employee terminated the sponsorship and the account balance was paid. This employee has been terminated from the University.</p>	High	<p>Recommendations for the Assistant Vice Chancellor of Total Rewards in consultation with the Office of General Counsel and the Sr. Director of Controller Operations:</p> <p>5.1. b. Work with the Office of General Counsel to update agreement(s) to include but not be limited to the following:</p> <ul style="list-style-type: none"> Timeliness of notification of discrepancies from the ORP departments. Timeliness of notification of discrepancies from the ORP System Controller Operations and Human Resources departments. <p>7. Post all ORP participant contributions in good order in without contributions for each individual ORP participant for whom contributions submitted were not in good order until resolved.</p>	<p>1a. Contract and service level agreements will be addressed in item 1a in coordination with the Office of General Counsel.</p>	Christopher DeGree, Assistant Vice Chancellor of Total Rewards and the Sr. Director of Controller Operations in coordination with the Office of General Counsel	8/31/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2017	17-409-UNT	Governance and Regulatory Compliance	International Sponsored Students Process Review	UNT	<p>5. Segregation of Duties</p> <p>Internal Audit noted an inappropriate segregation of duties within the UNT International (UNT) Sponsored Students and Special Programs Center. Specifically, one employee had access to perform the following:</p> <ul style="list-style-type: none"> Put students on sponsorships (Third Party Contracts); Terminate sponsorships; Generate, prepare, and send invoices to sponsors; Work the accounts receivable report to obtain past due tuition and fees; Place past due tuition and fees charges back on students' accounts. <p>Additionally, during the course of this review, it was noted an employee in the UNT Sponsored Students and Special Programs Center was not properly trained and was not following the policy to void paying 10 percent of their tuition and fees until their UNT Faculty/Staff Scholarship posted to their account. Once the scholarship posted, the employee terminated the sponsorship and the account balance was paid. This employee has been terminated from the University.</p>	High	<p>Recommendation for Director of Sponsored Student Programs and Director of Financial Services, Student Finance:</p> <p>5.1. a. Coordinate to ensure appropriate segregation of duties within the sponsorship process.</p>	<p>1a. Management agrees with the recommendation. Sponsored Student Programs and Student Finance will investigate how to mitigate the risk associated with the current segregation of duties within the limited staffing.</p>	Aleka Myers, Director of Sponsored Student Programs, Director of Financial Services, Student Finance	6/30/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-003 ISC	Governance and Regulatory Compliance	Texas College of Osteopathic Medicine Financial Review	UNTHSC	<p>5. Service Teaching Assessments</p> <p>There was neither an agreement nor documentation in place that provides a basis for the rate used for Service Teaching Assessment (STA).</p> <p>STA is the redistribution of General Appropriation Act (GAA) funds to support collaborative teaching initiative of instructional services between Texas College of Osteopathic Medicine (TCOM), Graduate School of Health Sciences (GSB) and School of Health Professions (GHP).</p> <p>The GSB has its roots in TCOM where basic science courses were taught by TCOM faculty. TCOM STA began in 2000 when the part-time faculty at TCOM began to teach basic science courses. This collaborative initiative aimed to provide a better professional/research environment to basic science faculty by GSB. The GSB has a strong research focus and provides an excellent environment for the teaching of the pre-clinical part of TCOM's medical curriculum. Interview prospective medical students, provide research opportunities for TCOM students and serve on TCOM's Committees. Similarly, another collaboration began where TCOM and GSB faculty worked together to create a new program of study. The purpose of this collaborative initiative was to promote expansion of scale and an efficient use of faculty resources by eliminating duplication of teaching efforts/ courses among schools. The financial 5. Standardized Budget Reporting Application</p>	High	<p>Recommendations for the UNTHSC Executive Vice President for Finance & Chief Financial Officer and Interim Provost:</p> <p>5.1.c. Communicate newly developed policies and procedures to the relevant parties.</p>	<p>1.c. The policies and procedures will be communicated to the Budget Office, Deans and other relevant parties in the spring of 2018.</p>	Clare West, Interim Provost	5/7/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-001 ISC	Governance and Regulatory Compliance	Graduate School of Biomedical Sciences Review	UNTHSC	<p>5. Standardized Budget Reporting Application</p> <p>There is no standardized budget reporting application utilized by the different departments within the institution. Specifically, it was identified some departments use eThority while others use Cognos to review their budget balances. The Office of Financial Planning and Budget grants access to eThority upon request and administers training; however, every department has access to Cognos.</p>	Moderate	<p>Recommendations for the UNTHSC Executive Vice President for Finance & Chief Financial Officer:</p> <p>5.1.a. Assess the reporting needs of different users across the institution.</p>	<p>1.a. Reporting needs will be assessed across the ISC.</p>	Gregory R. Anderson, Executive Vice President for Finance & Chief Financial Officer, UNTHSC	5/7/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-001 ISC	Governance and Regulatory Compliance	Graduate School of Biomedical Sciences Review	UNTHSC	5. Standardized Budget Reporting Application There is no standardized budget reporting application utilized by the different departments within the institution. Specifically, it was identified that the Office of Financial Planning and Budget grants access to ePriority upon request and administers training, however every department has access to Cognos.	Moderate	Recommendations for the UNTHSC Executive Vice President for Finance & Chief Financial Officer: 5.1.b. Determine which application will best deliver the right information to users, on time and at the right cost.	1.b. Based on the needs identified, a cost effective application will be chosen that will best deliver timely and current information.	Gregory R. Anderson, Executive Vice President for Finance & Chief Financial Officer, UNTHSC	5/7/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-001 ISC	Governance and Regulatory Compliance	Graduate School of Biomedical Sciences Review	UNTHSC	5. Standardized Budget Reporting Application There is no standardized budget reporting application utilized by the different departments within the institution. Specifically, it was identified some departments within the institution use ePriority while others use Cognos to review their budget balances. The Office of Financial Planning and Budget grants access to ePriority upon request and administers training, however every department has access to Cognos.	Moderate	Recommendations for the UNTHSC Executive Vice President for Finance & Chief Financial Officer: 5.1.c. Provide access and thorough training to the users of the application.	1.c. Access and training will be provided to users to provide a thorough understanding of the application.	Gregory R. Anderson, Executive Vice President for Finance & Chief Financial Officer, UNTHSC	5/7/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-021 UNT	Governance and Regulatory Compliance	Residence Hall- Student Safety Practices	UNT	<p>5. Swimming Pool at College Inn</p> <p>Swimming pool at College Inn does not comply with Chapter 757, Section 757.004 of the Texas Health and Safety Code, which requires a self-latching mechanism.</p> <p>During pool hours, the swimming pool gate is unlocked at College Inn, and the entry gate to the pool does not have a self-latching mechanism. Additionally, there is no prominent signage at the gate indicating that the gate is unlocked for UNT Housing residents and their guests or pool safety requirements.</p>	High	<p>Recommendations for Gina Vinacore, Director of Housing and Residence Life:</p> <p>5.1.a. Compliance with Chapter 757 Section 757.004 of the Texas Health and Safety Code pertaining to pool gate enclosure requirements.</p>	<p>1.a. Housing and Residence Life staff are aware of the requirements regarding pool safety. Director Vinacore will inform colleagues in Facilities about the code and compliance and submit all applicable work orders.</p>	Gina M. Vinacore, Director of Housing and Residence Life	12/21/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-415 UNT	Governance and Regulatory Compliance	Faculty and Staff International Travel Audit	UNT System	<p>1. International Travel Registration Control Process</p> <p>An internal control process is not established to ensure that all individuals traveling internationally on either the UNT System, UNT, UNTHSC, or UNT Dallas business have registered with UNT Risk Management prior to departure. Thus, UNT Risk Management does not have the total number and location of individuals traveling internationally. Additionally, there are no travel policies that address international travel registration at the UNT System, UNT, UNTHSC, and UNT Dallas. Currently, the international traveler acknowledges they will register with UNT Risk Management prior to departure. However, there is no certification that the international traveler has registered prior to departure.</p>	High	<p>Recommendation for Abdul Mohammad, Senior Associate Controller for Operations:</p> <p>1.1.a. Develop a procedure to forward Travel Budget Authorization (TBA) forms received for international trips to UNT Risk Management.</p>	<p>1.a. On a daily basis, if Travel Budget Authorization forms are received from travelers/departments by Accounts Payable Travel (AP) team, UNT Risk Management team, AP will reach out to UNT Risk Management to get contact details of the person to whom forms should be forwarded. UNT System currently under a contract to implement automated travel and expense system, including a risk rating application for international travelers, which will eliminate the above stated manual process.</p>	Abdul Mohammad, Sr. Associate Controller of Operations	10/20/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-021 UNT	Governance and Regulatory Compliance	Residence Hall - Student Safety Practices	UNT	<p>5. Swimming Pool at College Inn</p> <p>Swimming pool at College Inn does not comply with Chapter 757, section 757.004 of the Texas Health and Safety Code, which requires a self-latching mechanism.</p> <p>During pool hours, the swimming pool gate is unlocked at College Inn, and the entry gate to the pool does not have a self-latching mechanism. Additionally, there is no prominent signage at the gate entrance indicating that the pool is only for UNT Housing residents and their guests or pool safety requirements.</p>	High	<p>Recommendations for Gina Vnacore, Director of Housing and Residence Life:</p> <p>5.1.b. Place signage at pool gate entrance area indicating the pool is for UNT Housing residents and their guests.</p> <p>5.1.c. Post appropriate prominent signage near the entry gate location to the pool detailing the College Inn pool safety requirement for those residents and their guests using the pool.</p>	1b. Director Vnacore will create a work order for appropriate signage.	Gina M. Vnacore, Director of Housing and Residence Life	12/21/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-021 UNT	Governance and Regulatory Compliance	Residence Hall - Student Safety Practices	UNT	<p>5. Swimming Pool at College Inn</p> <p>Swimming pool at College Inn does not comply with Chapter 757, section 757.004 of the Texas Health and Safety Code, which requires a self-latching mechanism.</p> <p>During pool hours, the swimming pool gate is unlocked at College Inn, and the entry gate to the pool does not have a self-latching mechanism. Additionally, there is no prominent signage at the gate entrance indicating that the pool is only for UNT Housing residents and their guests or pool safety requirements.</p>	High	<p>Recommendations for Gina Vnacore, Director of Housing and Residence Life:</p> <p>5.1.c. Post appropriate prominent signage near the entry gate location to the pool detailing the College Inn pool safety requirement for those residents and their guests using the pool.</p>	1c. Director Vnacore will create a work order for appropriate signage.	Gina M. Vnacore, Director of Housing and Residence Life	12/21/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-407315	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>6. IRS Dollar Limitations Based on 403(b) Contributions</p> <p>A manual process breakdown in updating the year-to-date contribution amount in Peoplesoft caused two employees' ORP contribution amounts to be over contributed by both the institution and Peoplesoft. This occurred when employee benefit changes were not entered into Peoplesoft, since the process is manual rather than a system configuration which automatically calculates contribution amounts.</p> <p>In detail, testing identified 2 out of 64 employees (3%) exceeded the annual IRS dollar compensation limitations based on 403(b) Contributions for Calendar Year 2015. These two employees elected a different financial service company in October 2015; however, in order to manually update the year-to-date contribution amount in Peoplesoft, therefore, Peoplesoft calculated their maximum contribution inaccurately.</p>	High	<p>Recommendations for the Assistant Vice Chancellor of Total Rewards:</p> <p>6.1.a. For the two employees, estimate the total amount of over contribution and the amount of contribution limitation set by the IRS, starting from the employees' hire dates.</p>	<p>1.a. Performed a manual audit of these two individuals' retirement accounts to determine the following: Employees should have only been able to contribute a portion of the first \$265,000 earnings in 2015. As a result of transferring vendors, and exceeding contribution limits, the two employees exceeded \$265,000 in earnings. As a result, the first employee over contributed \$2,326.13 and the employer overpaid \$2,298.71. The second employee over contributed \$1,084.27 and the employer overpaid \$1,056.26.</p>	Christopher DeClerk, Assistant Vice Chancellor of Total Rewards	8/31/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-407315	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>6. IRS Dollar Limitations Based on 403(b) Contributions</p> <p>A manual process breakdown in updating the year-to-date contribution amount in Peoplesoft caused two employees' ORP contribution amounts to be over contributed by both the institution and Peoplesoft. This occurred when employee benefit changes were not entered into Peoplesoft, since the process is manual rather than a system configuration which automatically calculates contribution amounts.</p> <p>In detail, testing identified 2 out of 64 employees (3%) exceeded the annual IRS dollar compensation limitations based on 403(b) Contributions for Calendar Year 2015. These two employees elected a different financial service company in October 2015; however, in order to manually update the year-to-date contribution amount in Peoplesoft, therefore, Peoplesoft calculated their maximum contribution inaccurately.</p>	High	<p>Recommendations for the Assistant Vice Chancellor of Total Rewards:</p> <p>6.1.b. Develop a report of all employees who changed financial service companies during the year that may have exceeded the IRS contribution limit.</p>	<p>1.b. In 2016 a report was developed and a manual process was created to account for this situation. Benefits reviewed periods prior to 2016 were not included in the report. For this error to occur, one would need to be compensated over IRS contribution limits and change record keepers mid-year. Only a small number of, if any, individuals could be in this situation in any given calendar year.</p>	Christopher DeClerk, Assistant Vice Chancellor of Total Rewards	8/31/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-407315	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>6. IRS Dollar Limitations Based on 403(b) Contributions</p> <p>A manual process breakdown in updating the year-to-date contribution amount in Peoplesoft caused two employees' ORP amounts to be over contributed when employee benefit changes were not entered into Peoplesoft, since the process is manual rather than a system configuration which automatically calculates contribution amounts.</p> <p>In detail, testing identified 2 out of 64 employees (3%) exceeded the annual IRS dollar compensation limitations based on 403(b) Contributions for Calendar Year 2015. These two employees elected a different financial service company in October 2015; however, in order to manually update the year-to-date contribution amount in Peoplesoft, therefore, Peoplesoft calculated their maximum contribution inaccurately.</p>	High	<p>Recommendations for the Assistant Vice Chancellor of Total Rewards:</p> <p>6.1. For those employees identified with exceeding the IRS annual compensation limitations, the Controller Operations team and Finance to determine the appropriate action regarding the excess contributions.</p>	<p>1. Controller Operations team will work with OGC to take appropriate action for any excess contributions.</p>	Christopher DeClerk, Assistant Vice Chancellor of Total Rewards	8/31/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2017	17-407315	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>6. IRS Dollar Limitations Based on 403(b) Contributions</p> <p>A manual process breakdown in updating the year-to-date contribution amount in Peoplesoft caused two employees' ORP accounts to be over contributed by both the institution and employee. This occurred when employee benefit changes were not entered into Peoplesoft, since the process is manual rather than a system configuration which automatically calculates contribution amounts.</p> <p>In detail, testing identified 2 out of 64 employees (3%) exceeded the annual IRS dollar compensation limitations based on 403(b) Contributions for Calendar Year 2015. These two employees elected a different financial service company in October 2015; however, in order to manually update the year-to-date contribution amount in Peoplesoft, therefore, Peoplesoft calculated their maximum contribution inaccurately.</p>	High	<p>Recommendations for the Assistant Vice Chancellor of Total Rewards:</p> <p>6.1.4. Work with Information Technology Shared Services (ITSS) and the Controller Operations team to configure an automatic calculation in Peoplesoft for the year-to-date contribution amount when an employee elects a different financial service company for the year. This will eliminate the need for a manual process.</p>	<p>1. As part of the Retirement Update Project, we are working to ensure all deduction codes are functioning correctly and develop a reporting mechanism to verify they are working correctly.</p>	Christopher DeClerk, Assistant Vice Chancellor of Total Rewards	8/31/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-412 UNT	Governance and Regulatory Compliance	College of Music Transition Audit	UNT	<p>6. Unauthorized Bank Account</p> <p>A bank account is being maintained on behalf of UNT. The Percussion Club is a student organization in the College of Music. The Club is not a student organization and should not have a bank account. Internal Audit's understanding that access to this bank account is limited to two Percussion faculty members. Internal Audit reviewed monthly statements from August 2015 through August 2016. During a discussion with the Associate Vice Chancellor for Treasury, he confirmed that this account was not on the inventory list of authorized accounts.</p>	High	<p>Recommendation for John Richmond, Dean of the College of Music, to coordinate with Larry Worthy, Special Assistant to the CFO/Vice President for Finance & Administration, to:</p> <p>6.1. Register the Percussion Club with the Student Activities Center, obtain a bank account authorized by UNT System Treasury, deposit club funds in the authorized account, and close the unauthorized account.</p>	<p>1.7. The Audit Report has been reviewed with Professor Ford, who will register the Percussion Club with the Student Activities Center. The unauthorized bank account will be closed and a new UNT account will be established.</p>	John Ford, Chair, Division of Instrumental Studies, in consultation with Mark Ford, Professor & Coordinator of Percussion	<p>Exp. Impl. Date: 10/31/2017</p> <p>Revised Impl. Date: 3/1/2018</p>	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-409 UNT	Governance and Regulatory Compliance	International Sponsored Students Process Review	UNT	<p>7. Cash Handling</p> <p>UNT cash handling policy 10,000 Cash Handling Controls and best practices were not consistently followed in the UNT International (UNT-I) Main Office. Specifically, the following were noted:</p> <ul style="list-style-type: none"> • Student workers handling cash, without receiving appropriate training and without necessary documentation • UNT-I's Main Office Cash Handling Procedure Manual was not up-to-date with current University policies; • Cash was not being logged upon receipt; and • Receipts were not being properly processed through University Cashiering Services (SAUCS) by employees were not concealed in transit. 	Moderate	<p>Recommendation for Interim Vice Provost for International Affairs and Director of Financial Services, Student Finance:</p> <p>7.1. Coordinate to ensure all UNT International cash handling functions are transferred to Student Accounting and University Cashiering Services.</p>	<p>1.1. Management agrees. Following notification, UNT-I addressed cash handling training and documentation issues and updated the Main Office Cash Handling Policy. UNT-I implemented a check log (initial check logged on 1/9/2017) and began concealing the locked bank bag inside a generic bag when transporting deposits to SAUCS.</p> <p>UNT-I will coordinate with the Director of Financial Services, Student Finance, to explore the feasibility of transferring cash handling functions to Student Accounting and University Cashiering Services. In order to transfer this function, it will be necessary to address the current manual, update the manual, complete and accurate accounts receivable reports per Observation 2.</p> <p>If this function can be transferred, the Sponsored Students will immediately instruct all new sponsors to direct deposits to Student Accounting and University Cashiering Services. UNT-I will ensure existing sponsors to follow the same procedure with the expectation that there may be some delay in effectively communicating this. If check payment are still directed to UNT-I, staff will follow university policy on cash handling.</p>	<p>Pat Wood, Vice Provost for International Affairs, and Jeanne Wood, Director of Financial Services, Student Finance.</p>	<p>Exp. Impl. Date: 6/30/2018</p> <p>Rev. Impl. Date: 05/31/2019</p>	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-417 UNT	Governance and Regulatory Compliance	LUPD Business Process Audit	UNT	<p>1. Committed funds</p> <p>When the new chart of accounts went into implementation, Lifelong Learning and Professional Development (LUPD) donations, University Learning Institute (ULI) grant funds, and other restricted grant funds were not properly tracked. The ULI grant funds were commingled into the same chart listing totaling approximately \$620,000 as of August 31, 2017. Upon approval of the Other Lifelong Learning Institute (OLLI) program at UNT, \$100,000 of OLLI grant funds were also commingled in the ULI grant fund account. The ULI grant funds were also commingled in the Development (LUPD) staff were keeping shadow spreadsheets to account for all of the separate items and their correlating funds. During the course of this audit, LUPD camps and conferences were transferred to UNT's One Stop Shop, which handles event planning and scheduling services.</p>	High	<p>Recommendations for Stephanie Burke, Director of Lifelong Learning and Professional Development (LUPD):</p> <p>1.1.a. Coordinate with UNT Controller to ensure Other Lifelong Learning Institute (OLLI) grant funds are moved into a restricted gift account.</p>	<p>1.a. In working with UNT Controller Jennifer Stevenson, a new dedicated restricted gift charting is now in place for (OLLI).</p>	Stephanie Burke, Director of Lifelong Learning and Professional Development	2/22/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-407 SYS	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>7. Contract Oversight</p> <p>Open service provider agreements were not in compliance with institution policies and procedures. Specifically, existing identified the following:</p> <ul style="list-style-type: none"> All agreements with VRSICO, Elicity, VALIC, USTA, and TIAA-CREF have not been reviewed since the execution date of 2009 and/or 2010. Two agreement renewals with VRSICO were not executed before the agreement expiration date; therefore, there was a lapse from 2010, 2013 – March 05, 2014 and March 15, 2015 – March 31, 2016. Both agreement renewals with VRSICO were not signed by the Chancellor or an employee with a written sub-delegation of authority. These agreement renewals were signed by the Benefits Manager. The agreements with fidelity were not updated in mid-2010 to the November 2010 agreement. The agreement was updated in November 2016 under the prior agreement with the University of North Texas Health Science Center at Fort Worth and the University of North Texas as the contracting parties (UNT System and UNT Dallas were included under the UNT agreement umbrella). The agreements with VOTYA and VALIC did not have an audit clause. 	High	<p>Recommendations for the Vice Chancellor for Finance:</p> <p>7.1.a. Work with the Office of General Counsel to review retirement plan contract agreements to help ensure they are renewed, updated and signed as appropriate and in accordance with UNT System Board Regent Rules.</p>	<p>1.a. A Retirement Plan Committee was put in place to frame the project, select a vendor, and oversee the Retirement Plan Update process. The committee consists of the Vice Chancellor for Finance, CAPRUST Financial Advisors, and the Office of General Counsel to review retirement plan contract agreements to help ensure they are renewed, updated and signed as appropriate and in accordance with UNT System Board Regent Rules. The committee will coordinate with internal teams, four record keepers, and potentially a new Lead Record keeper; this update will be complex and is expected to finalize within the next fiscal year.</p>	Janet Waldron, Vice Chancellor of Finance	8/31/2018	Open

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-417 UNT	Governance and Regulatory Compliance	LUPD Business Process Audit	UNT	<p>1. Committed funds</p> <p>When the new chart of accounts went into implementation, Lifelong Learning and Professional Development (LUPD) donations, University Learning and Professional Development (ULPD) grants, and other conference measure and expenses were commingled into the same chart starting approximately 5/20/2000 as of August 31, 2017. Upon approval of the Other Lifelong Learning Institute (OLI) program at UNT, \$100,000 of OLI grant funds were also commingled in the LUPD account. LUPD staff were keeping shadow spreadsheets to account for all of the separate items and their correlating funds. During the course of this audit, LUPD camps and conferences were transferred to UNT's One Stop Shop, which handles event planning and scheduling services.</p>	High	<p>Recommendations for Stephanie Burke, Director of Lifelong Learning and Professional Development (LUPD):</p> <p>1.1.c. Coordinate with UNT Controller to ensure all appropriate LUPD revenue and expenses are moved in the restricted gift account.</p>	10.c. Our office is still working with the budget and financial reporting offices to reconcile and verify that all funds (expenses and revenue) are in the correct and appropriate charting as it pertains to (OLI).	Stephanie Burke, Director of Lifelong Learning and Professional Development	2/22/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-407 SYS	Governance and Regulatory Compliance	Retirement Contributions	UNT System	<p>7. Contract Oversight</p> <p>Open service provider agreements were not in compliance with institution policies and procedures. Specifically, testing identified the following:</p> <ul style="list-style-type: none"> All agreements (VRSICO, Fidelity, VALIC, VOTVA and Fidelity) have not been reviewed since the execution date of 2009 and/or 2010. Two agreement renewals with VRSICO were not executed before the agreement expiration date; therefore, there was a lapse from 10/20/10, 2013 – March 05, 2014 and March 15, 2015 – March 31, 2016. Both agreement renewals with VRSICO were not signed by the Chancellor or an employee with a written sub-delegation of authority. These agreement renewals were signed by the Benefits Manager. The agreements with fidelity were not updated in mid-2010 to the current agreement. The current agreement was signed in November 2016 under the prior agreement with the University of North Texas Health Science Center at Fort Worth and the University of North Texas as the contracting parties (UNT System and UNT Dallas were included under the UNT agreement umbrella). The agreements with VOTVA and VALIC did not have an audit clause. 	High	<p>Recommendations for the Vice Chancellor for Finance:</p> <p>7.1. Establish a Retirement Plan Committee to test annually with guidance, review, and oversight of the retirement contracts, financial service company, performance and investments option for the UNT System retirement plans. This work ensure proper monitoring of contract performance and compliance with terms and conditions.</p>	1b. A Retirement Plan Committee has already been established as a component of the Retirement Plan Update project. When the project is complete, the Retirement Plan Committee will be signing Retirement Plan Committee with governance responsibilities.	Janet Waldron, Vice Chancellor of Finance	8/31/2018	Open

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-417 UNT	Governance and Regulatory Compliance	LUPD Business Process Audit	UNT	<p>2. Donor Gifts</p> <p>Donor gifts, including online donations received through June 2017 were processed and deposited by Lifelong Learning and Professional Development as required by UNT Policy 00.002 Fundraising and Private Support. These funds were deposited into the same chart string as items mentioned in observation 1.</p>	High	<p>Recommendation for Stephanie Burke, Director of Lifelong Learning and Professional Development:</p> <p>2.1.a. Ensure donor gifts, including online donations, are properly processed and deposited into the appropriate account in accordance with UNT Policy 00.002 Fundraising and Private Support.</p>	<p>1.a. We agree with the findings and have already coordinated with the Development Office to set up a new Metro community website (owned and managed by Advancements) for online donations. As well as restricting all future donations of cash received by the LUPD Office, to the Development Office. The Administration office is processing to be in compliance with UNT policy.</p>	Stephanie Burke, Director of Lifelong Learning and Professional Development	10/27/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-021 UNT	Governance and Regulatory Compliance	Residence Hall - Student Safety Practices	UNT	<p>7. Fire Pull Stations</p> <p>Not all outdoor fire pull stations at College Inn are appropriately protected to prevent malfunction. Water and condensation have caused the fire alarms to activate when there was no fire or emergency. Auditors observed several outdoor fire pull stations covered with plastic bag type material.</p> <p>See final report for picture.</p>	High	<p>Recommendation for Gna Vanacore, Director of Housing and Residence Life:</p> <p>7.1.a. Submit a work order to install appropriate covers to properly protect fire pull stations from the outdoor elements.</p>	<p>1.a. Director Vanacore will submit work orders to install appropriate covers to properly protect the pull stations from the outdoor elements.</p>	Gna M. Vanacore, Director of Housing and Residence Life	11/21/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-417 UNT	Governance and Regulatory Compliance	LUPD Business Process Audit	UNT	<p>A. Travel Expenses</p> <p>Internal Audit noted a Lifelong Learning and Professional Development (LUPD) employee attended two international trips during the fiscal year 2017. Internal Audit identified a travel budget authorization (TBA) or travel voucher. Specifically:</p> <ul style="list-style-type: none"> • TBA and travel voucher for the trip during January/February 2017 totaled \$268.90 only including meals and taxis, and • TBA and travel voucher for the trip during May/June 2017 totaled \$1,186.60 only including lodging and airfare costs for the international trips were paid out-of-pocket. During the course of the audit, Internal Audit identified unusual transactions within the LUPD chart string and requested support documentation. Travel invoices totaling \$1,186.60 and May/June 2017 totaling \$17,414.14, were provided by Business Support Services (BSS). It was determined the invoices were submitted as requisitions, approved by BSS, and self-approved by the LUPD employee. Internal Audit did not receive approval for airfare and lodging did not receive approval since the traveler was also the account holder. 	High	<p>Recommendations for Stephanie Burke, Director of Lifelong Learning and Professional Development:</p> <p>4.1.a. Effective immediately all travel reimbursements will be reviewed by the requesting staff member's supervisor in accordance with UNT policy. All travel requests and reimbursements will be submitted for approval by the requesting staff member's supervisor in accordance with UNT policy.</p>	<p>1.a. Effective immediately all travel reimbursements will be managed and/or prepared by Sara Martin, (now LUPD Budget Officer) who has received updated BSC training on travel policies. All travel requests and reimbursements will be submitted for approval by the requesting staff member's supervisor in accordance with UNT policy.</p>	Stephanie Burke, Director of Lifelong Learning and Professional Development	10/21/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-412 UNT	Governance and Regulatory Compliance	College of Music Transition Audit	UNT	<p>7. Instructional Fee</p> <p>Salaries for staff who perform activities contributed to classroom instruction were expensed to the instructional fee. Instrument repair technicians in the College of Music perform musical instrument repairs for students. Additionally, instrument technicians also perform repairs for Music Business staff. Internal Audit estimated that approximately 80% of instrument repairs are for internal customers, while 20% are for external customers. Internal Audit identified two instrument repair technicians who perform repairs and whose salaries are funded 100% from the instructional fee.</p> <p>Internal Audit reviewed the College's annual instructional fee proposal worksheets that were submitted to Academic Resources for fiscal years 2016, 2017, and 2018. The proposals each included the salaries for the two instrument repair technicians who perform external repairs. The proposals indicated that the College of Music instructional fee funds 100% of the salaries for these two individuals.</p>	High	<p>Recommendations for John Richmond, Dean of the College of Music:</p> <p>7.1.a. Thoroughly review staff salaries to be charged against the instructional fee prior to submitting the annual instructional fee proposal to Academic Resources.</p>	<p>1.a. The Assistant Dean for Business and Finance will review all staff salaries charged against the college instructional fee by October 31, 2018. The Assistant Dean for Business and Finance will ensure that as possible and staff workload will be adjusted immediately to comply with policy. The final implementation plan will be completed by November 15, 2018. The Assistant Dean for Business and Finance will incorporate into our FY18 fee and college budget requests. Given that the solution to remedy this situation will depend on fee and budget determinations for FY19, the complete resolution will likely not be fully implemented until September, 2018. The Assistant Dean for Business and Finance will present a more accurate system for tracking time to assist in this endeavor.</p>	John Nelson, Associate Dean for Operations (until Assistant Dean for Business and Finance has been hired)	12/21/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-412 UNT	Governance and Regulatory Compliance	College of Music Transition Audit	UNT	<p>7. Instructional fee</p> <p>Salaries for staff who perform activities unrelated to classroom instruction were expensed to the instructional fee. The College of Music also performs musical instrument repairs for students. Additionally, instrument repair technicians also perform repairs for external customers in the local community as part of their job duties. Music Repair Shop staff estimated that approximately 80% of instrument repairs are for external customers. The College of Music identified two instrument repair technicians who perform external repairs and whose salaries are funded 100% from the instructional fee.</p> <p>Internal Audit reviewed the college's annual instructional fee proposal for fiscal years 2016, 2017, and 2018. The proposals each included the salaries for the two instrument repair technicians noted above who perform external repairs. The proposals indicated that the College of Music instructional fee funds 100% of the salaries for these two individuals.</p>	High	<p>Recommendations for John Richmond, Dean of the College of Music:</p> <p>7.1.a. Coordinate with the UNT Budget Office on transferring the salaries for the two instrument repair technicians from the instructional fee back to the instructional fee chart string.</p>	<p>1.b. The Assistant Dean for Business and Finance will work with the UNT Budget Office to transfer salary expenses erroneously charged to the fee account for the two instrument repair technicians.</p>	Jon Nelson, Associate Dean for Operations (and Assistant Dean for Business and Finance has been hired)	12/21/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-417 UNT	Governance and Regulatory Compliance	LUPD Business Process Audit	UNT	<p>7. Personally identifiable information</p> <p>Internal Audit noted two instances of personally identifiable information (PII), checking account information, on support documentation submitted on requisitions for expense reimbursement via Enterprise Information System (EIS) dating back to May 2016. Additionally, during the course of the audit, an existing checking account information was sent via email, without being redacted.</p>	High	<p>Recommendations for Stephanie Renke, Director of Lifelong Learning and Professional Development:</p> <p>7.1.a. Redact personally identifiable information (PII) prior to submitting documentation for reimbursement, and to submitting via email.</p>	<p>1.a. Effective immediately, all PII will be redacted appropriately in accordance with UNT policy prior to documenting and/or transmitting via email.</p>	Stephanie Renke, Director of Lifelong Learning and Professional Development	12/21/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-417 UNT	Governance and Regulatory Compliance	LUPI Business Process Audit	UNT	7. Personally identifiable information Internal Audit noted two instances of personally identifiable information (PII), checking account information, on support documentation submitted on requisitions for expense reimbursement via Enterprise Information System (EIS) dating back to May 2016. Additionally, during the course of the audit, PII including checking account information was sent via email without being redacted.	High	Recommendations for Stephanie Renke, Director of Lifelong Learning and Professional Development: 7.1.b. Develop procedures to help ensure that all PII is appropriately protected.	1.b.c. As of 10/05/2017, all LUPI employees have successfully completed Cash Handling Training, with special attention to UNT Policy 10.006. The office will work directly with Larry Worthy to create and implement a new procedure.	Stephanie Renke, Director of Lifelong Learning and Professional Development	12/21/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-417 UNT	Governance and Regulatory Compliance	LUPI Business Process Audit	UNT	7. Personally identifiable information Internal Audit noted two instances of personally identifiable information (PII), checking account information, on support documentation submitted on requisitions for expense reimbursement via Enterprise Information System (EIS) dating back to May 2016. Additionally, during the course of the audit, PII including checking account information was sent via email without being redacted.	High	Recommendations for Stephanie Renke, Director of Lifelong Learning and Professional Development: 7.1.c. Ensure all employees receive training related to the protection of PII	1.b.c. As of 10/05/2017, all LUPI employees have successfully completed Cash Handling Training, with special attention to UNT Policy 10.006. The office will work directly with Larry Worthy to create and implement a new procedure.	Stephanie Renke, Director of Lifelong Learning and Professional Development	12/21/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-417 UNT	Governance and Regulatory Compliance	LEPD Business Process Audit	UNT	<p>5. Cash Handling</p> <p>Internal Audit reviewed a sample of deposits from September 1, 2016 through December 5, 2016 and April 7, 2017 through June 12, 2017 for cash handling procedures. The audit found that cash handling procedures were not deposited timely up to 10 days late. UNT Policy 10.096 Cash Handling Controls was modified during October 2016 to update the maximum amount of business days to deposit cash from 5 to 3 business days. Internal Audit performed testing in accordance with UNT Policy 10.096 Cash Handling Controls. Internal Audit also noted Lifelong Learning and Professional Development (LLPD) departmental procedures refer to a petty cash fund.</p> <p>Turnover in August 2017 resulted in an inability to adhere to the cash handling procedures. As a result, not all individuals have received cash handling training and/or a completed Cash Handling Authorization form.</p>	High	<p>Recommendations to Stephanie Burke, Director of Lifelong Learning and Professional Development:</p> <p>5.1.d. Ensure all employees handling cash receive training related to cash handling.</p>	<p>1.d. As of 10/15/2017, all LEPD employees have successfully completed Cash Handling Training.</p>	Stephanie Burke, Director of Lifelong Learning and Professional Development	1/7/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-015 UNT	Governance and Regulatory Compliance	Minor Capital Projects	UNT	<p>7. Procedures Manual</p> <p>The UNT Facilities Construction Project Procedures Manual is outdated. Project Managers stated during interviews that the manual contained outdated information. The manual has not been updated since June 2014. The manual contains errors and omissions. The manual has one revised building cost in excess of \$3,500. The Project Initiation Worksheet also defines a project as involving multiple trades, but it establishes that a project has a cost in excess of \$5,000. Also, the manual references individuals who are no longer active in the organization. There is a standard project file checklist from which the Planning, Design, & Construction group works; however, the Maintenance group does not use this checklist when managing minor capital projects.</p>	Moderate	<p>Recommendations for David Reynolds, Associate Vice President of facilities:</p> <p>7.1.a. Evaluate and update, where necessary, the UNT Facilities Construction Project Procedures Manual.</p>	<p>1.a. Beginning February 2017, Facilities Planning Design and Construction began holding regularly scheduled meetings to update the manual. The manual will be continuously maintained and updated as procedures and methods get affected by new business practices related to our upgrade of ITMA and business process improvements. Additionally, over the next fiscal year, the CPIM will be reviewed and updated to address the various effort categories of projects managed by various groups.</p>	Heleen Bailey, Director, Facilities Planning, Design and Construction	8/31/2018	Open

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-015 UNT	Governance and Regulatory Compliance	Minor Capital Projects	UNT	<p>7. Procedures Manual</p> <p>The UNT Facilities Construction Project Procedures Manual is outdated. Project Managers stated during interviews that the manual contained outdated information. The manual has not been updated since June 2015. For example, the manual defines a project as involving more than one trade and having a cost in excess of \$3,500. The current Project Initiation Worksheet also defines a project as involving multiple trades, but it establishes that a project has a cost in excess of \$5,000. Also, the manual references individuals who are no longer employed at UNT.</p> <p>There is a standard project file checklist from which the Planning, Design, & Construction group works; however, the Maintenance group does not use this checklist when managing minor capital projects.</p>	Moderate	<p>7.1. b. Ensure that the appropriate staff receives training on the updated UNT Facilities Construction Project Procedures Manual.</p>	<p>1b. Facilities will create a regularly scheduled training program to reach all personnel that are involved in the lifecycle of managing construction projects.</p>	Heleen Bailey, Director, Facilities Planning, Design and Construction	8/31/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2017	17-015 UNT	Governance and Regulatory Compliance	Minor Capital Projects	UNT	<p>7. Procedures Manual</p> <p>The UNT Facilities Construction Project Procedures Manual is outdated. Project Managers stated during interviews that the manual contained outdated information. The manual has not been updated since June 2015. For example, the manual defines a project as involving more than one trade and having a cost in excess of \$3,500. The current Project Initiation Worksheet also defines a project as involving multiple trades, but it establishes that a project has a cost in excess of \$5,000. Also, the manual references individuals who are no longer employed at UNT.</p> <p>There is a standard project file checklist from which the Planning, Design, & Construction group works; however, the Maintenance group does not use this checklist when managing minor capital projects.</p>	Moderate	<p>7.1. c. Ensure that the various groups that manage projects follow consistent processes and procedures.</p>	<p>1c. Facilities will refine and improve standard project process and procedures across the organization's project managers.</p>	Heleen Bailey, Director, Facilities Planning, Design and Construction	8/31/2018	Open

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-403 HSC	Governance and Regulatory Compliance	Texas College of Osteopathic Medicine Financial Review	UNT HSC	7. Standardized Budget Reporting Application There is no standardized budget reporting application utilized by the different departments within the institution. Specifically, it was identified that some departments use eTheory, while others use Cognos to review their budget balances. Departments contact the Office of Financial Planning and Budget (Budget Office) which grants access to eTheory upon request and administers training; however, every department has access to Cognos.	Moderate	Recommendations for the UNT HSC Executive Vice President for Finance & Chief Financial Officer: 7.1.a. Assess the reporting needs of different users across the institution. 7.1.b. Determine which application will best deliver the right information to users, on time and at the right cost.	1.a. Reporting needs will be assessed across the HSC.	Gregory R. Anderson, Executive Vice President for Finance & Chief Financial Officer, UNT HSC	5/7/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-403 HSC	Governance and Regulatory Compliance	Texas College of Osteopathic Medicine Financial Review	UNT HSC	7. Standardized Budget Reporting Application There is no standardized budget reporting application utilized by the different departments within the institution. Specifically, it was identified that some departments use eTheory, while others use Cognos to review their budget balances. Departments contact the Office of Financial Planning and Budget (Budget Office) which grants access to eTheory upon request and administers training; however, every department has access to Cognos.	Moderate	Recommendations for the UNT HSC Executive Vice President for Finance & Chief Financial Officer: 7.1.a. Assess the reporting needs of different users across the institution. 7.1.b. Determine which application will best deliver the right information to users, on time and at the right cost.	1.b. Based on the needs identified, a cost effective application will be chosen that will best deliver timely and current information.	Gregory R. Anderson, Executive Vice President for Finance & Chief Financial Officer, UNT HSC	5/7/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-403 ISC	Governance and Regulatory Compliance	Texas College of Osteopathic Medicine Financial Review	UNTHSC	7. Standardized Budget Reporting Application There is no standardized budget reporting application utilized by the different departments within the institution. Specifically, it was noted that the Department of Radiology uses Cognos to review their budget balances. Department contacts the Office of Financial Planning and Budget (Budget Office) which grants access to e-Theory upon request and administers training; however, every department has access to Cognos.	Moderate	Recommendations for the UNTHSC Executive Vice President for Finance & Chief Financial Officer: 7.1. Provide access and thorough training to the users of the application.	1. Access and training will be provided to users to provide a thorough understanding of the application.	Erin B. Anderson, Executive Vice President for Finance & Chief Financial Officer, UNTHSC	5/7/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-409 UNT	Governance and Regulatory Compliance	International Sponsored Students Process Review	UNT	8. Communication with Students There is no process in place to formally communicate to students that payment has not been received from a sponsor and charges will be placed on the student's account. The students only receive notice when charges are placed onto their account with no advance notice. Additionally, during interview it was noted a staff member was using a personal cell phone to contact students concerning their accounts.	Moderate	Recommendation for Director of Sponsored Student Programs and Director of Financial Services, Student Finance: 8.1.a. Coordinate to establish sponsor payment deadlines.	1.a. Management agrees with the recommendation. The Director of Financial Services and the Director of Sponsored Student Programs will coordinate with the CFO, to establish appropriate sponsor payment deadlines. Upon receiving guidance from Larry Worthy outstanding sponsor invoices will be updated to reflect the established due date for payment.	Alka Myra, Director of Sponsored Student Programs and Director of Financial Services, Student Finance.	6/30/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-417 UNT	Governance and Regulatory Compliance	LUED Business Process Audit	UNT	<p>8. Philanthropic Grants</p> <p>During the course of the audit, the Other Lifelong Learning Institute (OLLI) philanthropic grant in the amount of \$100,000 was tracked and reviewed for compliance with the terms of the grant. The grant was indeed a UNT Division of Advancement as required by UNT Policy 09.002 Fundraising and Private Support. Although there is a process for post gift management of philanthropic grants, internal audit identified an opportunity to document and monitor the process for grant management, including processes related to donor intent and deliverables.</p>	Moderate	<p>Recommendation for Susan Holmes, Executive Director for Development, Foundation Relations:</p> <p>8.1.a. Coordinate with Donor Relations to document processes for grant management. Grant projects related to donor intent and processes and strengthen projects related to donor intent and deliverables.</p>	<p>1.a. As the one responsible for the action, I, Susan Holmes, will coordinate with Stan Walker, Kim Gollinworth and Rachel Kemball in Advancement to draft clear procedures for post gift management and define clearly who is responsible for each portion of the required processes. I will coordinate with the appropriate individual faculty member, department, college and advancement. We will then publish these processes on the UNT Advancement website and share at an upcoming Dean's Council meeting, and refer to the processes during all RR faculty workshops throughout the year. I will coordinate with the appropriate individual faculty member to strengthen our stewardship model.</p>	<p>Kim Gollinworth, Assistant Vice President of Donor Relations and Advancement Services, and Stan Walker, Assistant Vice President for Advancement</p>	<p>Exp. Impl. Date: 01/21/2018 Rev. Impl. Date: 07/1/2018</p>	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-021 UNT	Governance and Regulatory Compliance	Residence Hall - Student Safety Practices	UNT	<p>3. Holiday Break Payroll Process</p> <p>Resident Assistants are not always paid in the appropriate pay period. Student Resident Assistants (RA) are paid an hourly rate; however, during holiday breaks, RAs "on call" are paid a flat shift rate. If the RA accumulates more than 40 hours per week, the excess time over 40 hours is not paid in the following week(s) until accumulated hours are exhausted.</p>	High	<p>Recommendation for Gna Vasore, Director of Housing and Residence Life:</p> <p>3.1.a. Coordinate with UNT System Human Resources department to discuss and evaluate the appropriate payroll process and controls in order to determine the appropriate action or actions to be taken to ensure students are paid appropriately.</p>	<p>1.a. Staff are currently in full compliance with University policy, state and federal laws regarding student staff payroll processes. Language regarding the document Holiday Break RAOC (Pay, RAOC - Resident Assistant on Call) All staff who supervise student staff will be trained on payroll process during annual training programs. The next program is scheduled for July 26, 2017.</p>	<p>Gna M. Vasore, Director of Housing and Residence Life</p>	8/7/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNTS System Internal Audit	Fiscal Year 2017	17-411 UNT	Governance and Regulatory Compliance	College of Music Transition Audit	UNT	<p>B. Unsecured Assets</p> <p>Musical instruments and equipment are not always properly secured. Internal Audit observed the following instances of unsecured musical instruments and equipment:</p> <ul style="list-style-type: none"> 1. The door to the Instrument Storage room in the Marchion Performing Arts Center (MPAC) was left open. 2. Roll up doors were left open in the up position in the Instrument Storage room in the MPAC. These doors may be locked with a padlock. 3. A cabinet in the Instrument Storage room in the MPAC was left open. The cabinet may be locked with a padlock. 4. A metal cage in Stan Keriton Hall containing musical instruments and equipment and boxes of CD inventory was left open. 5. An audio receiver and speakers were left out in the Music Annex. Additionally, based on discussion with College of Music staff, the College replaces approximately 50 to 100 music stands each year. While some music stands are replaced each year due to age and wear, it appears that a significant number of music stands are replaced due to theft. 	Moderate	<p>Recommendation for John Richmond, Dean of the College of Music:</p> <p>81.A. Educate employees on the importance of properly storing and securing musical instruments and equipment when not in use.</p>	<p>1.A. The Assistant Dean for Business and Finance will send information to all employees at the start of each long semester to remind them of the importance of carefully securing all university-owned property. In addition, we will work to develop a set of best practices for those spaces that are difficult to store university-owned property.</p>	Jon Nelson, Associate Dean for Operations (and Assistant Dean for Business and Finance has been hired)	1/31/2018	Closed
Internal	UNTS System Internal Audit	Fiscal Year 2017	17-412 UNT	Governance and Regulatory Compliance	College of Music Transition Audit	UNT	<p>B. Unsecured Assets</p> <p>Musical instruments and equipment are not always properly secured. Internal Audit observed the following instances of unsecured musical instruments and equipment:</p> <ul style="list-style-type: none"> 1. The door to the Instrument Storage room in the Marchion Performing Arts Center (MPAC) was left open. 2. Roll up doors were left open in the up position in the Instrument Storage room in the MPAC. These doors may be locked with a padlock. 3. A cabinet in the Instrument Storage room in the MPAC was left open. The cabinet may be locked with a padlock. 4. A metal cage in Stan Keriton Hall containing musical instruments and equipment and boxes of CD inventory was left open. 5. An audio receiver and speakers were left out in the Music Annex. Additionally, based on discussion with College of Music staff, the College replaces approximately 50 to 100 music stands each year. While some music stands are replaced each year due to age and wear, it appears that a significant number of music stands are replaced due to theft. 	Moderate	<p>Recommendation for John Richmond, Dean of the College of Music:</p> <p>81.B. Develop processes and procedures to secure or maintain music stands from the risk of theft.</p>	<p>1.B. We are currently reviewing how best to address the concern regarding the ongoing theft of music stands, a problem that is shared with other departments. We will determine how best to proceed in conjunction with our ensemble directors and other music-stand users throughout the College and modify our practices accordingly.</p>	Jon Nelson, Associate Dean for Operations (and Assistant Dean for Business and Finance has been hired)	<p>Exp. Impl. Date: 1/31/2018</p> <p>Revised Impl. Date: 9/1/2018</p>	Closed
Internal	UNTS System Internal Audit	Fiscal Year 2017	17-021 UNT	Governance and Regulatory Compliance	Residence Hall - Student Safety Practices	UNT	<p>B. Victory Hall Stairwell Tower</p> <p>Inadequate gate and barrier access to observation deck in Victory Hall.</p> <p>Currently, the gate is kept locked, but the observation deck can easily be accessed. Internal Audit noted evidence of people having been in the tower.</p> <p>See final report for pictures.</p>	High	<p>Recommendation for Gina Vanacore, Director of Housing and Residence Life:</p> <p>81.A. Take appropriate action to properly prevent unauthorized access to observation level of the southwest tower in Victory Hall location.</p>	<p>1.A. Director Vanacore will have a meeting with the UNT Police Department, Risk Management, Facilities, and housing and residence life staff regarding how to best secure and manage this area as it relates to code.</p>	Gina M. Vanacore, Director of Housing and Residence Life	<p>Exp. Impl. Date: 11/31/2017</p> <p>Revised Impl. Date: 07/31/2018</p>	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-021 UNT	Governance and Regulatory Compliance	Residence Hall - Student Safety Practices	UNT	<p>5. Bruce Hall Access Floor door access to residence rooms do not have swipe card equipment to allow only residents to enter. Residence hall access is not controlled by residents because of the dining hall cafeteria. Once in the residence hall an individual has the ability to access floors with residents' rooms. In addition, once inside residence hall one has the ability to exit building thru some of the emergency exit doors that do not have surveillance cameras.</p>	High	<p>Recommendation for Gina Vanzore, Director of Housing and Residence Life: 5.1. a. Ensure a site evaluation is performed at Bruce Hall to determine the best alternatives to secure access to resident rooms in Bruce Hall.</p>	<p>1. a. Director Vanzore will conduct a meeting with the UNT Police Department, Risk Management, Facilities, and housing and residence life staff to determine the best alternatives to secure access to resident rooms in Bruce Hall as it relates to Code.</p>	Gina M. Vanzore, Director of Housing and Residence Life	Exp. Impl. Date: 12/31/2017 Revised Impl. Date: 07/31/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-021 UNT	Governance and Regulatory Compliance	Residence Hall - Student Safety Practices	UNT	<p>6. Unsecured Personal Information Unsecured medical insurance information and social security numbers was maintained in an unsecured file cabinet located behind the front desk area. Residents are high school students in the TAMS (Texas Academy of Mathematics and Science) program.</p>	High	<p>Recommendations for Gilmarco de Oliveira, Dean of TAMS: 6.1. a. Ensure personal medical information and any applicable social security information is always kept secured.</p>	<p>1. a. All records with personal information have been secured in compliant cabinets or safes, in a secure area.</p>	Russ Shaker, Assistant Dean for Student Life	5/31/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-021 UNT	Governance and Regulatory Compliance	Residence Hall - Student Safety Practices	UNT	<p>6. Unsecured Personal Information Unsecured medical insurance information and social security numbers was maintained in McConnell Hall. This information was maintained in an unsecured file cabinet located behind the front desk area. Residents are high school students in the TAMS (Texas Academy of Mathematics and Science) program.</p>	High	<p>Recommendations for Gilmarco de Oliveira, Dean of TAMS: 6.1. a. Review FERPA, UNT FERPA policy 07.018, and UNT System Information Handbook chapter 9.2.8</p>	<p>1. b. TAMS leadership (the Dean of TAMS and Assistant Dean for Student Life) have reviewed policy and handbook.</p>	Russ Shaker, Assistant Dean for Student Life	6/30/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-021 UNT	Governance and Regulatory Compliance	Residence Hall - Student Safety Practices	UNT	<p>6. Unsecured Personal Information Unsecured medical insurance information and social security numbers was maintained in McConnell Hall. This information was maintained in an unsecured file cabinet located behind the front desk area. Residents are high school students in the TAMS (Texas Academy of Mathematics and Science) program.</p>	High	<p>Recommendations for Gilmarco de Oliveira, Dean of TAMS: 6.1. c. Ensure staff at McConnell Hall receive FERPA training, including familiarizing them with UNT FERPA policy 07.018 and the UNT System Information Security Handbook.</p>	<p>1. c. i) Director for Finance and Operations, Ben Preston, verified that all permanent staff in McConnell Hall received FERPA training by July 10, 2017; overseen by Russ Shaker and signed off by Dean. 1. c. ii) All permanent staff in McConnell Hall received FERPA training by July 10, 2017; overseen by Russ Shaker and signed off by Dean. 1. c. iii) All RA's and any part-time staff in McConnell who access student information (even if internal to TAMS; non-ES) will receive FERPA training by October 15, 2017. (to be overseen by Russ Shaker).</p>	Russ Shaker, Assistant Dean for Student Life	10/15/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-412 UNT	Governance and Regulatory Compliance	College of Music Transition Audit	UNT	<p>9. Instrument Repair and Rental Transactions</p> <p>The current process for tracking instrument repair and rental activity is ineffective. Sponsored students issued bills to the sponsoring organization, and tracking of instrument repair and rental transactions, including:</p> <ul style="list-style-type: none"> 1) Website registration was not available for external instrument repair customers. 2) Invoices were not consistently documented. 3) The system was not able to automatically generate invoices. 4) Invoices are manually created. 5) There was no effective method of tracking accounts receivable. 6) There was no effective method of tracking transactions from internal rental customers. 7) Musical instrument repairs and rental are performed in the Music Repair Shop located in the Music Annex. The primary source of revenue is from the Music Annex. <p>9. Student Acknowledgment of Charges</p> <p>All students, including sponsored students, are required to sign the UNT Financial Obligation Agreement form each semester prior to registering for courses. This form does not specify acknowledgment of student responsibility for charges incurred on their behalf for which third party payments are not received (i.e. when a sponsor fails to provide payment for the sponsored student's charges; the charges are placed on the student's account).</p> <p>Additionally, Internal Audit noted Intensive English Language Institute (IELI) students are being manually registered by IELI staff and blocks are being placed on their accounts. The Peoplesoft Enterprise Information System (EIS) EIU module does not perform all necessary functions to maintain current processes. IELI students also need to have the UNT Financial Obligation Agreement form.</p>	Moderate	<p>Recommendation for John Richmond, Dean of the College of Music:</p> <p>9.1. a. Evaluate upgrading the functionality of the Music Repair Shop website to include website registration software program that is compatible with Peoplesoft.</p>	<p>1a. The College has invested in the development of a new instrument repair-shop database. The new database addresses the majority of the concerns but requires more testing and the addition of other features that will enhance functionality.</p>	Jon Nelson, Associate Dean for Operations (Unit Assistant Dean for Business and Finance has been hired)	Exp. Impl. Date: 4/31/2018 Revised Impl. Date: 9/1/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2017	17-409 UNT	Governance and Regulatory Compliance	International Sponsored Students Process Review	UNT	<p>9. Student Acknowledgment of Charges</p> <p>All students, including sponsored students, are required to sign the UNT Financial Obligation Agreement form each semester prior to registering for courses. This form does not specify acknowledgment of student responsibility for charges incurred on their behalf for which third party payments are not received (i.e. when a sponsor fails to provide payment for the sponsored student's charges; the charges are placed on the student's account).</p> <p>Additionally, Internal Audit noted Intensive English Language Institute (IELI) students are being manually registered by IELI staff and blocks are being placed on their accounts. The Peoplesoft Enterprise Information System (EIS) EIU module does not perform all necessary functions to maintain current processes. IELI students also need to have the UNT Financial Obligation Agreement form.</p> <p>9. Student Acknowledgment of Charges</p> <p>All students, including sponsored students, are required to sign the UNT Financial Obligation Agreement form each semester prior to registering for courses. This form does not specify acknowledgment of student responsibility for charges incurred on their behalf for which third party payments are not received (i.e. when a sponsor fails to provide payment for the sponsored student's charges; the charges are placed on the student's account).</p> <p>Additionally, Internal Audit noted Intensive English Language Institute (IELI) students are being manually registered by IELI staff, and blocks are being placed on their accounts. Based on discussions with IELI staff, students must be manually registered because the Peoplesoft Enterprise Information System (EIS) EIU module does not perform all necessary functions to maintain current processes. IELI students also need to have the UNT Financial Obligation Agreement form.</p>	Moderate	<p>Recommendations for UNT System Controller:</p> <p>9.1. a. Review the current document and determine if it is effective. If not, update the document to ensure that financial obligations are their responsibility if a third party fails to pay.</p>	1a. Management agrees with the recommendation and will work with IELI Student Finance, and OSC to review the current document and determine where improvements are needed and then implement those improvements.	Aaron LaMay, UNT System Controller	6/30/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-409 UNT	Governance and Regulatory Compliance	International Sponsored Students Process Review	UNT System	<p>9. Student Acknowledgment of Charges</p> <p>All students, including sponsored students, are required to sign the UNT Financial Obligation Agreement form each semester prior to registering for courses. This form does not specify acknowledgment of student responsibility for charges incurred on their behalf for which third party payments are not received (i.e. when a sponsor fails to provide payment for the sponsored student's charges; the charges are placed on the student's account).</p> <p>Additionally, Internal Audit noted Intensive English Language Institute (IELI) students are being manually registered by IELI staff, and blocks are being placed on their accounts. Based on discussions with IELI staff, students must be manually registered because the Peoplesoft Enterprise Information System (EIS) EIU module does not perform all necessary functions to maintain current processes. IELI students also need to have the UNT Financial Obligation Agreement form.</p>	Moderate	<p>Recommendations for UNT System Controller:</p> <p>9.1. b. Ensure IELI students are registering using Peoplesoft Enterprise Information System.</p>	1b. Management agrees with the recommendation and will work with IELI Student Finance, Registrar, and other offices as needed to ensure students are registering appropriately.	Aaron LaMay, UNT System Controller	6/30/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-021 UNT	Governance and Regulatory Compliance	Residents Hall - Student Safety Practices	UNT	<p>10. Room Key Cabinets Not Locked</p> <p>Lockable cabinets that have extra keys for resident rooms in five halls were not always locked.</p> <p>One of three residence halls had unlocked death boxes - cabinets where the extra room keys are stored. The key cabinets for Traditions Hall and Santa Fe Square are located in Traditions Hall. These cabinets are too full with keys to close, and one of two lock mechanisms was broken.</p>	Moderate	<p>Recommendations for Gina Vanacore, Director of Housing and Residence Life:</p> <p>10.1. a. Ensure key cabinets with duplicate resident room keys are locked except when a staff member is accessing a key for a resident.</p>	1a. Director Vanacore will ensure that key cabinets with duplicate resident room keys are locked except when a staff member is accessing a key for a resident. This will be reiterated in all staff training.	Gina M. Vanacore, Director of Housing and Residence Life	8/31/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Complaint Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-021 UNT	Governance and Regulatory Compliance	Residence Hall - Student Safety Practices	UNT	<p>10. Room Key Cabinets Not Locked</p> <p>Lockable cabinets that have extra keys to resident rooms in five halls were not always locked.</p> <p>Five of fifteen residence halls had unlocked dumb boxes—cabinets where the extra room keys are stored. The key cabinets for Traditions Hall and Santa Fe Square are located in Traditions Hall. These cabinets are too full with keys to close, and one of two lock mechanisms was broken.</p>	Moderate	<p>Recommendations for Gina Vanacore, Director of Housing and Residence Life:</p> <p>10.L.b. For Traditions Hall and Santa Fe Square, obtain key cabinets big enough to contain all the duplicate room keys.</p>	<p>11. Director Vanacore will obtain key cabinets large enough to contain all the duplicate room keys for Traditions Hall and Santa Fe Square.</p>	Gina M. Vanacore, Director of Housing and Residence Life	8/17/2017 Rev. 12/31/17	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-021 UNT	Governance and Regulatory Compliance	Residence Hall - Student Safety Practices	UNT	<p>11. Step Drop</p> <p>Steps at the southwest door entrance to Traditions Hall from parking lot 13 is unmovable.</p> <p>There is a significant 5.25' drop on sidewalk area from parking lot to the entrance sidewalk to the hall. The top edge is not painted to bring attention to residents and visitors that there is a drop. Additionally, there are no handrails or other safety features for the residents leaving the hall to the parking area that there is a step up.</p> <p>See final report for pictures.</p>	Moderate	<p>Recommendation for Gina Vanacore, Director of Housing and Residence Life:</p> <p>11.L.a. Remove a walk order to have the top and the front of the step painted at the parking lot entrance of the southwest door entrance to Traditions Hall.</p>	<p>11. Director Vanacore will submit a work order request to have the top and the front of the step (identifiable, as it relates to code, at the parking lot entrance of the southwest door entrance to Traditions Hall.</p>	Gina M. Vanacore, Director of Housing and Residence Life	12/31/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-021 UNT	Governance and Regulatory Compliance	Residence Hall - Student Safety Practices	UNT	<p>12. Surveillance Camera Feed – No Designated Monitor (WRH Feed On McConnell Hall is the only residence hall of the fifteen residence halls that did not have a designated monitor showing continuous surveillance camera feeds.</p> <p>This hall, for resident students in the TAMS (Texas Academy of Mathematics and Science) program which are high-achieving students attending UNT.</p>	Moderate	<p>Recommendation for Glenisena de Oliveira the Dean of TAMS:</p> <p>12.L.a. Obtain a monitor so there is a designated monitor for surveillance camera recordings to ensure residents' safety.</p>	<p>11. TAMS IT Director, Roy Zumwalt, assessed the existing cameras and available streaming from those cameras. Russ Shaker, Assistant Dean for Student Life, advised that the cameras are not working as below; they are expected to be completed by October 15, 2017.</p> <p>i) A screen at the front desk will be dedicated to the cameras in McConnell Hall.</p> <p>ii) TAMS will schedule one or more walkthroughs with UNT Police, in order to assess the possible need for more camera as – several cameras are already connected.</p> <p>iii) Should more cameras be recommended, TAMS will request Housing or other appropriate departments to install extra cameras.</p>	Russ Shaker, Assistant Dean for Student Life	10/15/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-021 UNT	Governance and Regulatory Compliance	Residence Hall - Student Safety Practices	UNT	<p>13. Comfort Animals</p> <p>There is no process in place to ensure that a residence hall comfort animal has received appropriate vaccinations.</p> <p>Vaccination status is not verified. ODA (Office of Disability Accommodation) vet the comfort animals for overall general health by the animal's veterinarian for the first initial year. For returning comfort animals there is no process to ensure either the overall general health or vaccination status.</p>	Moderate	<p>Recommendations for Dan Nagel, Senior Director, Career and Leadership Services:</p> <p>13.L.a. Develop a process to ensure that residence hall comfort animals are properly vetted each year regarding status of vaccinations and overall health of the comfort animal.</p>	<p>11. ODA will develop a new process and associated form that will ensure that the animal is vaccinated and that the animal is vetted from the veterinary and vaccination report on said animal. This new process will be completed by the student (housing resident) and the animal's comfort animal will be connected to the vaccination/animal health form. As part of the process, the Housing Director will share with the ODA Director a list of all potential returning residents that had a comfort animal. The ODA Director will then contact the housing director to determine which is the appropriate office to handle the animal vaccination/health report requirement in the future, as this should not be directly connected with the accommodation.</p>	Dan Nagel, Executive Director, Career and Leadership Development	12/31/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-021 UNT	Governance and Regulatory Compliance	Residence Hall - Student Safety Practices	UNT	<p>13. Comfort Animals There is no process in place to ensure that a residence hall comfort animal has received appropriate vaccinations.</p> <p>Vaccination status is not verified. ODA (Office of Disability Accommodation) vets the comfort animals for overall general health by the animal's veterinarian for the first visit year. For returning visits, ODA is responsible for ensuring the animal's overall general health or vaccination status.</p>	Moderate	Recommendations for Dan Nagelski, Senior Director, Career and Leadership Services: 13.1.b. Obtain and retain appropriate documentation for each year a comfort animal lives in the residence hall.	13. ODA will work on procedures that address storage and distribution of these animal vaccination/health reports within their office. As part of the conversation with Housing, it will be determined which office is the most appropriate for this record storage.	Dan Nagelski, Executive Director, Career & Leadership Development	12/01/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-021 UNT	Governance and Regulatory Compliance	Residence Hall - Student Safety Practices	UNT	<p>13. Comfort Animals There is no process in place to ensure that a residence hall comfort animal has received appropriate vaccinations.</p> <p>Vaccination status is not verified. ODA (Office of Disability Accommodation) vets the comfort animals for overall general health by the animal's veterinarian for the first visit year. For returning visits, ODA is responsible for ensuring the animal's overall general health or vaccination status.</p>	Moderate	Recommendations for Dan Nagelski, Senior Director, Career and Leadership Services: 13.1.c. Ensure Housing Director receives a copy of overall health and applicable vaccination documentation of the comfort animal.	1c. ODA will share with Housing Office (Director), at the beginning of each academic year, a copy of the animal vaccination/health forms received for each housing resident that has requested a comfort animal. Housing will determine if the records should be maintained in Housing. It will be determined if the needs to continue, or Housing should collect these records on their own.	Dan Nagelski, Executive Director, Career & Leadership Development	12/01/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND1509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of Northern Iowa Residential	UNT	<p>Bruce Hall Bruce Hall is a four-story structure classified as a mixed occupancy consisting of existing dormitory and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with unannounced exit signs, and a generator for backup power in the event of an emergency (through private 6th).</p>	N/A	Fireing 1 The basement area located under the kitchen has only one means of egress and was formally considered a normally unoccupied space that was used for storage only. Two offices and a large dishwashing unit have been installed in the area. The changeover are used to the normally unoccupied space means of egress is now required. (2013 violation) NFPA 1, Fire Code, Chapter 14.9.1.1	In progress, just received final proposal for kitchen basement egress from the contractor and are in process of briefing statement and preparing PO. WIP - Exit Being constructed	NA	NA	Open
Internal	UNT System Internal Audit	Fiscal Year 2017	17-021 UNT	Governance and Regulatory Compliance	Residence Hall - Student Safety Practices	UNT	<p>15. Custodian and Mechanical Room Doors Custodian maintenance and mechanical room doors are not always locked. (e.g., Victory Hall, Santa Fe Square, and West Hall) While performing a walk through of Victory Hall, Santa Fe Square, and West Hall, it was noted that some custodian maintenance and mechanical room doors were unlocked.</p>	Moderate	Recommendation for David Reynolds, Associate Vice President of Facilities: 15.1.a. Instruct/Train Facilities maintenance personnel to keep the residence hall's mechanical room doors closed and locked.	1a. UNT Facilities will instruct all facility services maintenance personnel to keep mechanical room doors closed and locked when they leave the area. Management will make periodic checks.	Monica Thomas, Manager, Facility Services Maintenance	7/15/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-021 UNT	Governance and Regulatory Compliance	Residence Hall - Student Safety Practices	UNT	15. Custodian and Mechanical Room Doors Custodian maintenance and mechanical room doors are not always locked. (e.g., Victory Hall, Santa Fe Square, and West Hall). It was noted that some custodian maintenance and mechanical room doors were unlocked.	Moderate	Recommendation for Gina Vascore, Director of Housing and Residence Life: 15.2.a. Instruct residence hall personnel to keep custodian maintenance room doors closed and locked.	2a. Director Vascore will instruct residence hall personnel to keep custodian maintenance room doors closed and locked within reasonable operations of job.	Gina M. Vascore, Director of Housing and Residence Life	7/31/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RR015098	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Downtown Residential	UNT	Bruce Hall Bruce Hall is a four-story structure classified as a mixed occupancy building. The building's fire protection includes a fire alarm system with smoke detection, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	N/A	Finding 6 The emergency egress floor plans are missing or incorrect and do not match the actual floor plan. Inspection Number RR015098 Revised 12/2014 Page 22 of 24 NFPA 1, Fire Code, Chapter 20.8.2.4.1	UNT will review for accuracy and develop plans. Work in Progress - Currently out for bidding process - TMA Project # 13639	NA	NA	Open
External	State Fire Marshal's Office	Fiscal Year 2017	RR015098	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Downtown Residential	UNT	Clark Hall Clark Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	N/A	Finding 5 The emergency egress floor plans are incorrect and need to be redone for all rooms. NFPA 1, Fire Code, Chapter 20.8.2.4.1	UNT will review for accuracy and develop plans. Work in Progress - Currently out for bidding process - TMA Project # 13639	NA	NA	Open
Internal	UNT System Internal Audit	Fiscal Year 2017	17-009 SJS	Governance and Regulatory Compliance	Conflict of Interest Assessment	UNT System	Based on the results of our work performed within the scope of the assessment, the University has adequate rules, policies and forms in place to manage conflicts of interest in compliance with laws and regulations.	NA	NA	NA	NA	NA	N/A

UNTS Enterprise Audit Report Inventory

Internal / External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status	
Internal	UNT System Internal Audit	Fiscal Year 2017	17-003 IAS	Governance and Regulatory Compliance	Sabbath Rest, Senate Bill 20.66 of July 21, 2016	UNT System	<p>Based on the results of our work performed, the majority of processes are in place to help ensure compliance was achieved with the SB 20.66 Regulation. The areas that are outstanding and will be completed in FY 2018 include the following:</p> <ul style="list-style-type: none"> Update Report Rule 03.300, 03.900 and 05.700 and have them approved by the Board of Regents; Update the Institutional ethics policy in accordance with Regent Rule 05.700; Develop Institutional Compliance and UNTHSC Compliance training in accordance with Regent Rule 05.700; and Develop a compliance program that meets the requirements of SB20. <p>In FY 2018, Internal Audit will perform an audit which includes 1. Budgeting Model</p>	NA	NA	NA	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2017	17-003 HSC	Governance and Regulatory Compliance	Texas College of Osteopathic Medicine Financial Review	UNTHSC	<p>Currently, UNTHSC utilizes an incremental budget model, in which budget allocations are based upon the funding levels of the previous year. However, the model is not sufficient to ensure allocated amounts are adequate based on business needs and to achieve institutional goals and initiatives.</p> <p>In addition, although UNTHSC has operating budget guidelines, there are no formalized principles. Budget principles help create overarching values for prioritization and resource allocation which management adheres to as the budget is developed. Furthermore, policies and procedures are not sufficiently developed to clarify and crystallize the intent behind how the University will manage its financial resources.</p> <p>This issue was also identified in School of Public Health (Unit Specific - 1. Budgeting Model)</p>	High	<p>Recommendations to the UNTHSC President and Executive Vice President for Finance & Chief Financial Officer:</p> <p>1.1. Review and assess alternative budget models and adopt a model that align with institutional goals and initiatives.</p>	1a. The Health Science Center (HSC) will establish a budget advisory committee to review and assess various ways to budget and to provide recommendations regarding the underlying principles and procedures to the President's cabinet. The President's cabinet will discuss and provide input on the recommendations. The budgeting model for the FY 2019 budget process. This budgeting model will be completed by September 30, 2017.	Gregory R. Anderson, Executive Vice President for Finance & Chief Financial Officer, UNTHSC	9/30/2017	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2017	17-003 HSC	Governance and Regulatory Compliance	Texas College of Osteopathic Medicine Financial Review	UNTHSC	<p>This issue was also identified in School of Public Health (Unit Specific - 1. Budgeting Model)</p> <p>Currently, UNTHSC utilizes an incremental budget model, in which budget allocations are based upon the funding levels of the previous year. However, the model is not sufficient to ensure allocated amounts are adequate based on business needs and to achieve institutional goals and initiatives.</p> <p>In addition, although UNTHSC has operating budget guidelines, there are no formalized principles. Budget principles help create overarching values for prioritization and resource allocation which management adheres to as the budget is developed. Furthermore, policies and procedures are not sufficiently developed to clarify and crystallize the intent behind how the University will manage its financial resources.</p> <p>This issue was also identified in School of Public Health (Unit Specific - 1. Budgeting Model)</p>	High	<p>Recommendations to the UNTHSC President and Executive Vice President for Finance & Chief Financial Officer:</p> <p>1.1. b. Develop institutional principles, policies and procedures.</p>	1b. Based on the determination by the President's cabinet, budget the HSC's budgeting model to align with the HSC's objectives and initiatives consistent with the strategic plan. The HSC's budgeting model will be submitted to the proposed budget policy will be submitted to the Office of General Counsel (OGC) by October 5, 2017.	Gregory R. Anderson, Executive Vice President for Finance & Chief Financial Officer, UNTHSC	10/2/2017	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2017	17-003 HSC	Governance and Regulatory Compliance	Texas College of Osteopathic Medicine Financial Review	UNTHSC	<p>This issue was also identified in School of Public Health (Unit Specific - 1. Budgeting Model)</p> <p>Currently, UNTHSC utilizes an incremental budget model, in which budget allocations are based upon the funding levels of the previous year. However, the model is not sufficient to ensure allocated amounts are adequate based on business needs and to achieve institutional goals and initiatives.</p> <p>In addition, although UNTHSC has operating budget guidelines, there are no formalized principles. Budget principles help create overarching values for prioritization and resource allocation which management adheres to as the budget is developed. Furthermore, policies and procedures are not sufficiently developed to clarify and crystallize the intent behind how the University will manage its financial resources.</p> <p>This issue was also identified in School of Public Health (Unit Specific - 1. Budgeting Model)</p>	High	<p>Recommendations to the UNTHSC President and Executive Vice President for Finance & Chief Financial Officer:</p> <p>1.1. c. Communicate newly developed principles, policies and procedures to pertinent employees. Management should consider posting these documents on the UNTHSC website.</p>	1c. Once developed, the proposed budget policy will be submitted to OGC for approval by October 5, 2017 and once OGC approves, then the budget policy and procedures will be communicated to the employees and posted on the UNTHSC website.	Gregory R. Anderson, Executive Vice President for Finance & Chief Financial Officer, UNTHSC	10/2/2017	Closed	

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-033 ISC	Governance and Regulatory Compliance	Texas College of Osteopathic Medicine Financial Review	UNTISC	<p>2. Standardized Patients Payments</p> <p>Inadequate controls were identified surrounding the Standardized Patient payment process.</p> <p>TCOM Academic Affairs and Rural Medicine departments use standardized patients, individuals who receive cash payments for learning scripts and acting as patients, to train students from July 20, 2016 to April 4, 2017. Academic Affairs had 92 sessions and Rural Medicine had 13 sessions, in which each session paid in cash \$25 - \$200 per standardized patient.</p> <p>TCOM Academic Affairs currently has a database of 30 standardized patients and Rural Medicine has a database of 13 patients whom they invite several times within the year for simulation sessions.</p> <p>3. Standardized Patients Payments</p> <p>Inadequate controls were identified surrounding the Standardized Patient payment process.</p> <p>TCOM Academic Affairs and Rural Medicine departments use standardized patients, individuals who receive cash payments for learning scripts and acting as patients, to train students from July 20, 2016 to April 4, 2017. Academic Affairs had 92 sessions and Rural Medicine had 13 sessions, in which each session paid in cash \$25 - \$200 per standardized patient.</p> <p>TCOM Academic Affairs currently has a database of 30 standardized patients and Rural Medicine has a database of 13 patients whom they invite several times within the year for simulation sessions.</p>	High	<p>Recommendations for the UNTISC Executive Vice President for Finance & Chief Financial Officer:</p> <p>2.1. Assess the contractual status of standardized patients and determine if they should be part-time employees or independent contractors.</p> <p>2.1.a. Based on assessment above, work with Human Resources for BSS to establish standardized patient employment relationship and compensation payments with the University. This will eliminate the use of cash as form of compensation and ensure IRS compliance.</p>	<p>1.a. Starting in July, standardized patients will be informed that they are independent contractors.</p>	Gregory R. Anderson, Executive Vice President for Finance & Chief Financial Officer, UNTISC	8/7/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-033 ISC	Governance and Regulatory Compliance	Texas College of Osteopathic Medicine Financial Review	UNTISC	<p>2. Standardized Patients Payments</p> <p>Inadequate controls were identified surrounding the Standardized Patient payment process.</p> <p>TCOM Academic Affairs and Rural Medicine departments use standardized patients, individuals who receive cash payments for learning scripts and acting as patients, to train students from July 20, 2016 to April 4, 2017. Academic Affairs had 92 sessions and Rural Medicine had 13 sessions, in which each session paid in cash \$25 - \$200 per standardized patient.</p> <p>TCOM Academic Affairs currently has a database of 30 standardized patients and Rural Medicine has a database of 13 patients whom they invite several times within the year for simulation sessions.</p>	High	<p>Recommendations for the UNTISC Executive Vice President for Finance & Chief Financial Officer:</p> <p>2.1.b. Based on assessment above, work with Human Resources for BSS to establish standardized patient employment relationship and compensation payments with the University. This will eliminate the use of cash as form of compensation and ensure IRS compliance.</p>	<p>1b. A new contract system is being set up, which will eliminate the use of cash and will ensure IRS compliance.</p>	Gregory R. Anderson, Executive Vice President for Finance & Chief Financial Officer, UNTISC	8/7/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-033 ISC	Governance and Regulatory Compliance	Texas College of Osteopathic Medicine Financial Review	UNTISC	<p>2. Standardized Patients Payments</p> <p>Inadequate controls were identified surrounding the Standardized Patient payment process.</p> <p>TCOM Academic Affairs and Rural Medicine departments use standardized patients, individuals who receive cash payments for learning scripts and acting as patients, to train students from July 20, 2016 to April 4, 2017. Academic Affairs had 92 sessions and Rural Medicine had 13 sessions, in which each session paid in cash \$25 - \$200 per standardized patient.</p> <p>TCOM Academic Affairs currently has a database of 30 standardized patients and Rural Medicine has a database of 13 patients whom they invite several times within the year for simulation sessions.</p>	High	<p>Recommendation for the UNT System Associate Vice Chancellor for Finance & Administration:</p> <p>2.2. a. Update the Simulated Patients' section in the UNT System Procurement Guide based on UNTISC Chief Financial Officer's assessment.</p>	<p>2a. We have drafted the attached change to the Procurement Guide to address in response to the recommendation. We will publish this once it is confirmed that this fulfills the recommendation.</p> <p>Payments to simulated patients may only be made by submitting a requisition in the e-pro system. The patient shall be established in the e-pro system as an independent contractor and the requisition must include the patient's name, address, phone number, email address, agreement, which includes the patient's name, script to be performed by patient, date of service, amount to be paid, as well as signature by patient and appropriate TCOM personnel. Payment may be made once the patient has been established in the e-pro system. All patients must participate in accordance with the standardized agreement.</p>	Donna Abar, Associate Vice Chancellor Finance & Administration	8/7/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-031 ISC	Governance and Regulatory Compliance	Texas College of Osteopathic Medicine Financial Review	UNTHSC	<p>2. Standardized Patients Payments</p> <p>Inadequate controls were identified surrounding the Standardized Patient payment process.</p> <p>TCOM Academic Affairs and Rural Medicine departments use standardized patients, individuals who receive cash payments for learning scripts and acting as patients, to simulate sessions. From July 2016 to April 4, 2017, Academic Affairs had 92 sessions and Rural Medicine had 13 sessions, in which each session paid in cash \$25 - \$200 per standardized patient.</p> <p>TCOM Academic Affairs has a database of 30 standardized patients and Rural Medicine has a database of 13 patients whom they invite several times within the year for simulation sessions. From July 2016 to April 4, 2017, Academic Affairs has requested \$63,325 and Rural Medicine \$3,225 to pay standardized patients. Specifically, the following were noted:</p> <ul style="list-style-type: none"> Standardized patients are recruited by word of mouth (i.e. previous patients, friends, family, current employees or ex-employees). There is no contractual agreement between the University and the Clay Mixing Room - The clay mixing room contains three large mixers for each mixing of clay. Clay powder and water are poured into the mixers and mixed together. The mixers are not enclosed and dust and mixing processes, particulates are released. Particulates should be captured at the source to prevent dust from entering the user's respiratory system. <p>Currently, each mixer is serviced by a local exhaust vent located along the wall next to the mixer. The local exhaust vents are all ducted to a single outlet and exhaust fan on the roof. The vents are filtered using a consumer-type HVAC filter. Air is supplied to the room through two vents located along the wall with the adjacent plaster room to allow air to flow between the rooms for return to the HVAC system. Total flow in the Clay Mixing room was measured at 299 CFM (negative) when the vents are operational. As shown in Table 1, the room is not receiving sufficient supply air and that the industrial ventilation system is starved for air.</p> <p>In addition to the lack of supply air, the local exhaust vents do not provide sufficient capture velocity at the source (Table 2) to capture the particulates. A capture velocity of 500 fpm at the face of the hood and within one duct diameter of the source of dust emissions is required to effectively capture these types of fine dusts. In addition, a capture velocity of 100 fpm is required for the capture of dusts from clay powder and/or powders containing silica. The existing industrial</p>	NA	<p>Recommendation for the Dean of TCOM:</p> <p>2.3.a. Create a standardized patient recruitment application process available to the public to provide equal opportunity to the community to participate.</p>	<p>In The director of the TCOM simulation center has prepared a draft application and text for inclusion on a public Website that is being created by the UNTHSC webmaster. The final documents and application/appointment process will be submitted for final review by the Dean of TCOM and the Dean of Academic Affairs to ensure compliance with UNTHSC and UNT System policies.</p>	Don Peck, Dean of TCOM	1/7/2018	Closed
External	Ramboll Environ US Corp.	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Ventilation System Assessment	UNT	<p>Clay Mixing Room - The clay mixing room contains three large mixers for each mixing of clay. Clay powder and water are poured into the mixers and mixed together. The mixers are not enclosed and dust and mixing processes, particulates are released. Particulates should be captured at the source to prevent dust from entering the user's respiratory system.</p> <p>Currently, each mixer is serviced by a local exhaust vent located along the wall next to the mixer. The local exhaust vents are all ducted to a single outlet and exhaust fan on the roof. The vents are filtered using a consumer-type HVAC filter. Air is supplied to the room through two vents located along the wall with the adjacent plaster room to allow air to flow between the rooms for return to the HVAC system. Total flow in the Clay Mixing room was measured at 299 CFM (negative) when the vents are operational. As shown in Table 1, the room is not receiving sufficient supply air and that the industrial ventilation system is starved for air.</p> <p>In addition to the lack of supply air, the local exhaust vents do not provide sufficient capture velocity at the source (Table 2) to capture the particulates. A capture velocity of 500 fpm at the face of the hood and within one duct diameter of the source of dust emissions is required to effectively capture these types of fine dusts. In addition, a capture velocity of 100 fpm is required for the capture of dusts from clay powder and/or powders containing silica. The existing industrial</p>	NA	<p>Install an elephant trunk ventilation system at each workstation where dust is emitted and maintain a capture velocity of 500 fpm at the face of the hood and within one duct diameter of the source and a transport velocity through the ductwork of 4,000 fpm.</p>	<p>Risk Management is working with Facilities to determine a plan of action given the uncertain future use of Qu33 test hall. In addition, the elephant trunk ventilation system will be installed in all work areas.</p>	NA	NA	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	Ramboll Environ US Corp.	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Ventilation System Assessment	UNT	<p>Clay Mixing Room - The clay mixing room contains three large mixers for batch mixing of clays. Clay powder and water are poured into the mixers to create clay of the correct consistency. During the pouring and mixing processes, particulates are released. Particulates should be captured at the source to prevent dust from entering the user's respiratory system.</p> <p>Currently, each mixer is serviced by a local exhaust vent located along the wall next to the mixer. The local exhaust vents are all ducted to a single outlet and exhaust fan on the roof. The vents are filtered using a consumer-type HVAC filter. Air is supplied to the room through two supply vents located in the wall above the mixers. A pass-through vent is located along the wall with the adjacent plaster room to allow air to flow between the rooms for return to the HVAC system. Total flow in the Clay Mixing room was measured at 299 CFM (negative) when the vents are operational. As shown in Table 1, the room is under negative pressure, indicating that the room does not have sufficient supply air and that the industrial ventilation system is starved for air.</p> <p>In addition to the lack of supply air, the local exhaust vents do not provide sufficient capture velocity at the source (Table 2) to capture the particulates. A capture velocity of 500 fpm at the face of the hood is required to effectively capture these types of fine dusts. In addition, a transport velocity through the ductwork of 4,000 fpm is required for clay powders and for powders containing silica. The existing industrial Clay Mixing Room - The clay mixing room contains three large mixers for batch mixing of clays. Clay powder and water are poured into the mixers to create clay of the correct consistency. During the pouring and mixing processes, particulates are released. Particulates should be captured at the source to prevent dust from entering the user's respiratory system.</p> <p>Currently, each mixer is serviced by a local exhaust vent located along the wall next to the mixer. The local exhaust vents are all ducted to a single outlet and exhaust fan on the roof. The vents are filtered using a consumer-type HVAC filter. Air is supplied to the room through two supply vents located in the wall above the mixers. A pass-through vent is located along the wall with the adjacent plaster room to allow air to flow between the rooms for return to the HVAC system. Total flow in the Clay Mixing room was measured at 299 CFM (negative) when the vents are operational. As shown in Table 1, the room is under negative pressure, indicating that the room does not have sufficient supply air and that the industrial ventilation system is starved for air.</p> <p>In addition to the lack of supply air, the local exhaust vents do not provide sufficient capture velocity at the source (Table 2) to capture the particulates. A capture velocity of 500 fpm at the face of the hood and within one duct diameter of the source of dust emissions is required to effectively capture these types of fine dusts. In addition, a transport velocity through the ductwork of 4,000 fpm is required for clay powders and for powders containing silica. The existing industrial</p>	NA	Provides needed make-up supply air sufficient to balance the industrial ventilation system as described above.	Risk Management is working with Facilities to determine a plan of action given the uncertain future use of OAS Street Hall. In the short term, Risk Management and Art have addressed the issue with housekeeping improvements, engineering controls, PPE and changes in procedures. The exposure levels were found to be below regulatory limits in all areas.	NA	Open	
External	Ramboll Environ US Corp.	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Ventilation System Assessment	UNT	<p>Clay Mixing Room - The clay mixing room contains three large mixers for batch mixing of clays. Clay powder and water are poured into the mixers to create clay of the correct consistency. During the pouring and mixing processes, particulates are released. Particulates should be captured at the source to prevent dust from entering the user's respiratory system.</p> <p>Currently, each mixer is serviced by a local exhaust vent located along the wall next to the mixer. The local exhaust vents are all ducted to a single outlet and exhaust fan on the roof. The vents are filtered using a consumer-type HVAC filter. Air is supplied to the room through two supply vents located in the wall above the mixers. A pass-through vent is located along the wall with the adjacent plaster room to allow air to flow between the rooms for return to the HVAC system. Total flow in the Clay Mixing room was measured at 299 CFM (negative) when the vents are operational. As shown in Table 1, the room is under negative pressure, indicating that the room does not have sufficient supply air and that the industrial ventilation system is starved for air.</p> <p>In addition to the lack of supply air, the local exhaust vents do not provide sufficient capture velocity at the source (Table 2) to capture the particulates. A capture velocity of 500 fpm at the face of the hood and within one duct diameter of the source of dust emissions is required to effectively capture these types of fine dusts. In addition, a transport velocity through the ductwork of 4,000 fpm is required for clay powders and for powders containing silica. The existing industrial</p>	NA	Capture particulates in an industrial-type dust filter prior to being vented outside.	Risk Management is working with Facilities to determine a plan of action given the uncertain future use of OAS Street Hall. In addition, exposure levels were found to be below regulatory limits in all areas.	NA	Open	

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	RND15029 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	College Inn The College Inn consists of four three-story buildings classified as a mixed occupancy of existing apartment buildings, existing dormitory, and existing townhomes. The buildings are connected by a concrete walkway that connects to a breezeway which provides egress from the units. Features of fire protection include a complete fire alarm system and portable extinguishers.	N/A	Finding 1 The South East side of the building exterior walkway has deck joints on the second and third floor in excess of the allowed 20 mils. The deck is in violation of the International Building Code, NFPA 1 Fire Code, Chapter 14.10.3.3 and NFPA 101, Life Safety Code, Chapters 31.2.5.1, 31.2.4.1, 7.3.3.3 and 7.5.1.	UNT will evaluate the best course of action for completion. Work In Progress - Stairwells being designed	NA	8/31/2018	Open
Internal (Co-Sourced)	PWC	Fiscal Year 2017	16-303 UNT	Governance and Regulatory Compliance	UNT Endowments Internal Audit	UNT	Comment #1: Communication and Authority There are communication and information gaps between the UNT Foundation, Advancement, SFAS, and the College/Departments and there is not a clear delineation of responsibilities and authority for the management of university disbursement accounts. UNT has set up a task force to centralize the Scholarship process within the last year. However, during the course of fieldwork, IA noted several issues related to communication and responsibility, which has led to inconsistent disbursement processes across departments. The current information/training available for department personnel. Through interviews with Advancement, SFAS, and the sampled College/Departments, IA identified several areas for improvement, which were discussed with the respective departments to better defined authority and responsibilities in order to facilitate the related processes and help manage disbursement of endowment/scholarship funds appropriately. Refer to the following observations for further details: I. Management of Funds a. There are disbursement accounts that have unusually high or increasing balances; however, they continue to receive distributions	NA	I. UNT should create a formal process for managing remaining balances in disbursement accounts and consider implementing a monthly review process to ensure that the disbursement account's remaining balance. Additionally, UNT management should monitor the balances through the distribution of a university disbursement accounts report, approved to the President or VP, showing all disbursement amount to each of the units, showing all disbursement amount to each on a periodic basis. II. The Division of Advancement has hired an Assistant Director of Donor Relations for Scholarship Stewardship and Compliance who will serve as a member of the university-wide team to create a formal process for managing balances in disbursement accounts.	Collaboration between Mike Mince, UNT Foundation, Advancement, SFAS, Academic Affairs, David Wolf, Vice President for Enrollment, Vice President for Enrollment, and Bob Brown, Vice President for Finance and Administration	Exp. Impl. Date: 12/22/2017 Revised Impl. Date: 1/31/2018	Open	

UNTS Enterprise Audit Report Inventory

Internal/External (Source)	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal (Co-Source)	PWC	Fiscal Year 2017	16-303 UNT	Governance and Regulatory Compliance	UNT Endowments Internal Audit	UNT	<p>Comment #1: Communication and Authority</p> <p>There are communication and information gaps between the UNT Foundation, Advancement, SFAS, and the Colleges/Departments; and the role is not clearly delineated. The role of the Foundation for the management of university disbursement accounts.</p> <p>UNT has set up a taskforce to centralize the Scholarships process within the last year. However, during the course of fieldwork, IA noted several issues related to communication and responsibility, which has led to inconsistent disbursement processes across departments as well as a lack of sufficient information/training available for department personnel.</p> <p>Through interviews with Advancement, SFAS, and the sampled Colleges/Departments, IA identified several areas for improvement, including consistent communication between departments, as well as better defined authority and responsibilities in order to facilitate the better processes and help manage disbursement of endowment/scholarship funds appropriately.</p> <p>Refer to the following observations for further details:</p> <p>I. Sharing of information</p> <ul style="list-style-type: none"> • UNT Foundation provides confidential endowment account information to account-holders and their designated financial and 	NA	<p>II. UNT should ensure that all disbursement account managers in addition to the respective Deans, are included in communications, reporting, and discussions involving related endowments and scholarships.</p>	<p>II. The Division of Advancement, Enrollment, Academic Affairs, Finance and Administration, and the Foundation will work collaboratively with the university-wide team to ensure Deans and disbursement account managers receive appropriate communication regarding endowments and scholarships.</p>	<p>Collaboration between Mike Mincek, UNT Foundation President & CEO, Friley Graves, Provost and Vice President for Finance and Administration, David Wolf, Vice President for Advancement, Shannon Goodman, Vice President for Enrollment, and Bob Brown, Vice President for Finance and Administration</p>	12/22/2017	Closed
Internal (Co-Source)	PWC	Fiscal Year 2017	16-303 UNT	Governance and Regulatory Compliance	UNT Endowments Internal Audit	UNT	<p>Comment #1: Communication and Authority</p> <p>There are communication and information gaps between the UNT Foundation, Advancement, SFAS, and the Colleges/Departments; and there is not a clear delineation of responsibilities and authority for the management of university disbursement accounts.</p> <p>UNT has set up a taskforce to centralize the Scholarships process within the last year. However, during the course of fieldwork, IA noted several issues related to communication and responsibility, which has led to inconsistent disbursement processes across departments as well as a lack of sufficient information/training available for department personnel.</p> <p>Through interviews with Advancement, SFAS, and the sampled Colleges/Departments, IA identified several areas for improvement, including consistent communication between departments, as well as better defined authority and responsibilities in order to facilitate the better processes and help manage disbursement of endowment/scholarship funds appropriately.</p> <p>Refer to the following observations for further details:</p> <p>III. Donor Compliance</p> <ul style="list-style-type: none"> • IA identified one of 14 endowments sampled that was not in compliance with the requirements documented within the respective 	NA	<p>III - V. UNT should create a steering committee responsible for determining and implementing policies, processes, authority, accountability, and communication for the management of endowments, scholarships and endowment awards and disbursement accounts. Specifically, UNT should consider implementation of an annual account-holder MOU-compliance certification letter and process for the steering committee to review and monitor compliance. Measures such as performing continuous monitoring of scholarship selections through review of the Minutes to ensure that MOUs are being followed appropriately and in alignment with donor wishes. The steering committee should be responsible for the development and implementation of existing policies and procedures to personnel responsible for managing endowment funds, 2) creating additional policies and procedures for internal reporting, and time limits/thresholds for accumulated unspent endowment distributions, 3) developing a process for the steering committee to review and monitor compliance, and 4) implementation of formal endowment disbursement account training for all Colleges/Departments.</p> <p>Additionally, UNT should consider the use of new or existing software to assist in recording/monitoring the endowments process. For example, UNT should assess whether PeopleSoft 9.2 can be used to monitor transactions and balances as well as integrate with other established systems (i.e. Raiser's Edge for Advancement).</p>	<p>III. The Division of Enrollment has appointed the Executive Director of Financial Aid and Scholarships and the Director of Scholarships to serve as members on the recommended steering committee.</p> <p>III. - V. The Division of Advancement has hired an Assistant Director of Donor Relations for Scholarship Stewardship and Compliance who will serve as a member on the steering committee, along with the Director of Donor Relations and the Assistant Vice President for Donor Relations and Advancement Services.</p>	<p>Collaboration between Mike Mincek, UNT Foundation President & CEO, Friley Graves, Provost and Vice President for Academic Affairs, David Wolf, Vice President for Advancement, Shannon Goodman, Vice President for Enrollment, and Bob Brown, Vice President for Finance and Administration</p>	<p>Exp. Impl. Date: 12/22/2017</p> <p>Revised Impl. Date: 1/31/2018</p>	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External (Source)	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal (Source)	PWC	Fiscal Year 2017	16-303 UNT	Governance and Regulatory Compliance	UNT Endowments Internal Audit	UNT	<p>Comment #2: Incorrect Gift Agreement</p> <p>One out of the 14 MOUs sampled did not include all of the appropriate criteria in the revised gift agreement updated by the Office of Advancement.</p> <p>Advancement, responsible for donor solicitation as well as donor stewardship, revised a donor gift agreement for one sampled endowment in the College of Information in order to bring the gift agreement into compliance with the updated gift agreement. However, the revisions made to the agreement did not include all of the required donor criteria from the original agreement, including GPA and career path requirements. Furthermore, the personnel responsible for the related disbursement account in the College of Information did not review the revised agreement for compliance with Advancement. As a result, a review or reconciliation of the original and updated donor agreements to ensure that all criteria were appropriately transferred could not be performed.</p>	NA	<p>The Office of Advancement should update the incorrect donor gift agreement for the endowment in the College of Information to include the correct criteria. Also, Advancement should consider formally documenting policies and procedures related to the review and approval of gift agreements, including including a review process to ensure all details of the updated memo are captured appropriately.</p>	<p>The Director of Donor Relations is drafting a memo to address the conflicting documentation for the endowment in question and will formally document the correct spending criteria according to original donor intent. This memo will be distributed to all appropriate parties including the Office of Advancement and the College of Information. Advancement Handbook is currently in draft form written by Donor Relations to outline procedures currently used for writing new gift agreements/ memos and amending existing fund documentation. This handbook will include applicable laws the University must follow in writing gift agreements and the current University policies and procedures that must be complied with in regard to gift acceptance and naming.</p>	<p>Kim Collenweber, Assistant Vice President of Donor Relations</p>	<p>Exp. Impl. Date: 12/22/2017</p> <p>Revised Impl. Date: 8/31/2018</p>	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND1509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Residential	UNT	<p>Cumley Hall</p> <p>Cumley Hall is a three-story mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.</p>	N/A	<p>Finding 7</p> <p>The emergency egress floor plans are incorrect and need to be redone for all rooms.</p> <p>NFPA 1, Fire Code, Chapter 20.8.2.4.1</p>	<p>UNT will review for accuracy and develop plans.</p> <p>Work In Progress - Currently out for bidding process - TWA Project # 13639</p>	NA	NA	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTHSC	Event Building The Event Building is an eight-story structure with a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire extinguishers, fire hose and fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 2 The stairwell doors lack the required two hour fire rating throughout the building. NFPA 1.1, Fire Code, Chapter 12.7.3.1	Doors will be evaluated and labeled properly, or replaced.	NA	3/7/2017 Revised 02/01/2018	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTHSC	Event Building The Event Building is an eight-story structure with a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire extinguishers, fire hose and fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	VIOLATION 13 The interior exit stairwell B lacks the required enclosed rated fire doors. NFPA 1.1, Fire Code, Chapters 14.6.1.1 and 14.6.1.2	Consultation for appropriate corrective action will need to occur.	NA	1/31/2017 Revised 09/15/2018 (Pending Adjustment)	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspections Report	UNTHSC	Event Building The Event Building is an eight-story structure with a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system with smoke detection, fire extinguishers, fire alarm pull stations and fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting.	NA	NOTATION 14 The interior exit stairwell A lacks the required enclosed rated construction. NFPA 1, Fire Code, Chapters 14.6.1.1 and 14.6.1.2	Consultation for appropriate corrective action will need to occur.	NA	1/17/2017 Revised: 09/15/2018 (Pending Assessment)	Open
External	Ramboll EnvironLUS Corp.	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Ventilation System Assessment	UNT	Glaze Room - The Glaze Room is used to mix pigments for glazing and coloring of the clay products. The pigments are made of fine powder and are used in the form of dusts. The dusts are captured by various metal powders. The powder from the pigments should be captured to prevent student and staff exposure to the dusts and to minimize contamination in the room. Currently, the Glaze Room is serviced by three local exhaust vents and a fume hood ducted to a single exhaust system. The room also contains an air supply and return vent. During the assessment, air was found to be flowing into the room through the return instead of out through the exhaust system. The room is under 5 to 5.5 Pa negative pressure in comparison to outside, confirming that the room does not have sufficient treated supply air. The current spray booth in the closet is operating as intended and is suitable for spraying glazes. Spraying glazes should only be conducted with the closet door open. In addition to the lack of supply air, the local exhaust vents do not provide sufficient capture velocity at the source to capture the particulates. The capture velocity of the existing exhaust ventilation system is approximately 65-70 fpm. A capture velocity of 500 fpm at the face of the hood face and within one duct diameter of the hood face is recommended for dry powders, metal powders, and for	NA	Install an elephant trunk ventilation system at each workstation where dust is generated to maintain a capture velocity of 500 fpm at the face of the hood and within one duct diameter of the source and a transport velocity through the ductwork of 4,000 fpm. Risk Management is working with Facilities to determine a plan of action given the uncertain future use of OAK Street Hall. In the short term, the assessment will be repeated to determine if there are any housekeeping improvements, engineering controls, PPE and changes in procedures. In addition, the exposure levels were found to be below regulatory limits in all areas.	NA	NA	Open	

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-031 ISC	Governance and Regulatory Compliance	Texas College of Osteopathic Medicine Financial Review	UNTHSC	6. Prior Year Budget Balance Not Forwarded Error Prior year budget balance from FY2015 did not roll forward to FY2016. The budget balance of \$200,000 at the end of FY2015, which was reported to the Department of Budget and Finance, did not roll forward to FY2016. As a result, the FY2016 Quarterly Budget Report was understated by \$200,000. This is a restricted fund, therefore can only be utilized in accordance to provisions of the budget act. This balance was identified and addressed during this audit.	Moderate	Recommendation for the Vice President of Finance and Planning and UNT System Senior Associate Controller: 6.1. Work with the UNT System Controller's Office to develop procedures to ensure that all restricted fund balances are properly reported to the General Ledger and any discrepancies identified are addressed.	1. The Budget Office of the Health Science Center will work with UNT System Controller's Office to develop procedures to reconcile the procedures will include a mechanism for identifying discrepancies and report them to the appropriate parties to align all forward budget balances with their proper amount.	Clifford Sorrell, Vice President of Finance and Planning and Paula Welch, Senior Associate Controller for UNTHSC	10/01/2017	Closed
External	Ramboll Environ US Corp.	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Ventilation System Assessment	UNT	Glaze Room - The Glaze Room is used to mix pigments for glazing and coloring of the city products. The pigments are made of fine powder and are used in the room. The room is not equipped with a dust collector to prevent student and staff exposure to the dusts and to minimize contamination in the room. Currently, the Glaze Room is serviced by three local exhaust vents and a fume hood ducted to a single exhaust system. The room also contains an air supply and return vent. During the assessment, air was found to be flowing into the room through the return instead of out through the exhaust system. The room is not equipped with a dust collector. The room in the Glaze Room was measured at 464 CFM (negative). The room is under 5 to 5.5 Pa negative pressure in comparison to outside, confirming that the room does not have sufficient treated supply air. The current spray booth in the closet is operating as intended and is suitable for spraying glazes. Spraying glazes should only be conducted with the closet door open. In addition to the lack of supply air, the local exhaust vents do not provide sufficient capture velocity at the source to capture the particulates. The capture velocity of the existing exhaust ventilation system is approximately 65-70 fpm. A capture velocity of 500 fpm at the face of the hood face and within one duct diameter of the hood face is recommended for clay powders, metal powders, and for	NA	Provides treated make-up supply air sufficient to balance the industrial ventilation system as described above.	Risk Management is working with Facilities to determine a plan of action given the uncertain future use of OAK Street Hall. In the short term, the plan is to continue to monitor the room for dust levels and housekeeping improvements, engineering controls, PPE and changes in procedures. In addition, the exposure levels were found to be below regulatory limits in all areas.	NA	NA	Open

UNTS Enterprise Audit Report Inventory

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External	Ramboll Environ US Corp.	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Ventilation System Assessment	UNT	<p>Glaze Room - The Glaze Room is used to mix pigments for coloring of the city products. The pigments are made of fine powder which may also contain toxic air contaminants, including silica and various metal powders. The powder from the pigments should be captured to prevent worker staff exposure to the dusts and to minimize contamination in the room.</p> <p>Currently, the Glaze Room is serviced by three local exhaust vents and a fume hood ducted to a single exhaust system. The room also has a return air duct that is currently not connected to the return of the room towards the HVAC unit, as it should have been. Total flow in the Glaze Room was measured at 464 CFM (negative). The room is under 5 to 5.5 Pa negative pressure in comparison to outside, confirming that the room does not have sufficient treated supply air.</p> <p>The current spray booth in the closet is operating as intended and is suitable for spraying glazes. Spraying glazes should only be conducted with the closet door open.</p> <p>In addition to the lack of supply air, the local exhaust vents do not provide sufficient capture velocity at the source to capture the particulates. The capture velocity of the existing exhaust ventilation system is insufficient to capture the dusts and metal powders from the face of the hood flaps and within one duct diameter of the emission source and a transport velocity through the ductwork of 4,000 fpm is recommended for clay powders, metal powders, and for</p>	NA	<p>Control particulates in an industrial-type dust filter prior to being vented outside.</p>	<p>Risk Management is working with facilities to determine a plan of action given the uncertain future use of OAS Street Hall. In the short term, Risk Management and Art have addressed the issue with housekeeping improvements, engineering controls, PPE and changes in procedures. All of the exposure levels were found to be below regulatory limits in all areas.</p>	NA	Open	
External	State Fire Marshal's Office	Fiscal Year 2017	RND1509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of Northern Iowa Residential	UNT	<p>Honors Hall is a five-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system with smoke detection, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.</p>	N/A	<p>Finding 2 The emergency egress floor plans are missing or incorrect and need to be re-done for all rooms. NFPA 1, Fire Code, Chapter 20.8.2.4.1</p>	<p>UNT will review for accuracy and develop plans. Work in Progress - Currently out for bidding process - TWA Project # 13639</p>	NA	Open	

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2017	17-001 BSC	Governance and Regulatory Compliance	Graduate School of Biomedical Sciences Review	UNTHSC	<p>1. Budgeting Model</p> <p>Currently, UNTHSC utilizes an incremental budget model, in which budget allocations are based upon the funding levels of the previous year. However, the model is not sufficient to ensure allocated amounts are adequate based on business needs and to achieve institutional goals and initiatives.</p> <p>In addition, although UNTHSC has operating budget guidelines, there are no formalized principles. Budget principles help create overarching values for prioritization and resource allocation which management adheres to as the budget is developed. Furthermore, policies and procedures are not sufficiently developed to clarify and crystallize the intent behind how the University will manage its financial resources.</p> <p>We specifically noted that there were significant unspent balances in both FY2015 to FY2016. Specifically, Tobacco funds had beginning unspent balances of \$389,879 and \$391,250 respectively. Similarly, Designated Tuition funds and Designated Fee Funds categories received additional budget allocations in FY2016 and FY2016 despite having significant carryover amounts from prior years.</p> <p>This issue was also identified in School of Public Health (Unit Specific Management Control Review) Audit No. 16-022 BSC and in Texas College of Osteopathic Medicine Financial Review Audit No. 17-403.</p>	High	<p>Recommendations to the UNTHSC President and Executive Vice President for Finance & Chief Financial Officer:</p> <p>1.1.a. Review and assess alternative budget models and adopt a model that aligns with institutional goals and initiatives.</p>	<p>1.a. The Health Science Center (HSC) will establish a budget advisory committee to review and assess various ways to budget and to provide recommendations regarding the underlying principles and procedures to the President's cabinet. The President's cabinet will discuss and implement the revised budget model starting in FY 2018 for the FY 2019 budget process. This budgeting model will be completed by September 30, 2017.</p>	Gregory R. Anderson, Executive Vice President for Finance & Chief Financial Officer, UNTHSC	9/22/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2017	17-001 BSC	Governance and Regulatory Compliance	Graduate School of Biomedical Sciences Review	UNTHSC	<p>1. Budgeting Model</p> <p>Currently, UNTHSC utilizes an incremental budget model, in which budget allocations are based upon the funding levels of the previous year. However, the model is not sufficient to ensure allocated amounts are adequate based on business needs and to achieve institutional goals and initiatives.</p> <p>In addition, although UNTHSC has operating budget guidelines, there are no formalized principles. Budget principles help create overarching values for prioritization and resource allocation which management adheres to as the budget is developed. Furthermore, policies and procedures are not sufficiently developed to clarify and crystallize the intent behind how the University will manage its financial resources.</p> <p>We specifically noted that there were significant unspent balances in both FY2015 to FY2016. Specifically, Tobacco funds had beginning unspent balances of \$88,879 and \$73,750 respectively. Similarly, Designated Tuition funds and Designated Fee Funds categories received additional budget allocations in FY2016 and FY2016 despite having significant carryover amounts from prior years.</p> <p>This issue was also identified in School of Public Health (Unit Specific Management Control Review) Audit No. 16-022 BSC and in Texas College of Osteopathic Medicine Financial Review Audit No. 17-403.</p>	High	<p>Recommendations to the UNTHSC President and Executive Vice President for Finance & Chief Financial Officer:</p> <p>1.1.b. Develop institutional principles, policies and procedures.</p>	<p>1b. Based on the determination by the President's cabinet, budget principles, policy and procedures will be developed which support the strategic plan. The proposed budget policy will be submitted to the Office of General Counsel (OGC) by October 5, 2017.</p>	Gregory R. Anderson, Executive Vice President for Finance & Chief Financial Officer, UNTHSC	10/2/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2017	17-001 ISC	Governance and Regulatory Compliance	Graduate School of Biomedical Sciences Review	UNTHSC	<p>1. Budgeting Model Currently, UNTHSC utilizes an incremental budget model, in which budget allocations are based upon the funding levels of the previous year. This approach does not allow for adjustments in budgeted amounts that are based on business needs and to achieve institutional goals and initiatives.</p> <p>In addition, although UNTHSC has operating budget guidelines, there are no specific guidelines for the allocation of resources. Management adheres to as the budget is developed. Furthermore, policies and procedures are not sufficiently developed to clarify and crystallize the intent behind how the University will manage its financial resources.</p> <p>We specifically noted that there were significant unspent balances in both FY2015 to FY2016. Specifically, Tobacco funds had beginning unspent balances of \$1,000,000 in FY2015 and \$1,000,000 in FY2016. Similarly, Designated Tuition funds and Designated Fee Funds categories received additional budget allocations in FY2016 and FY2016 despite having significant carryover amounts from prior years.</p> <p>This issue was also identified in School of Public Health Unit Specific Management Control Review Audit No. 16-022 HSC and in Texas College of Osteopathic Medicine Financial Review Audit No. 17-403.</p>	High	<p>Recommendations to the UNTHSC President and Executive Vice President for Finance & Chief Financial Officer: 1.1.c. Communicate newly developed principles, policies and procedures to all employees and ensure that all employees consider paying these documents on the UNTHSC website.</p>	<p>1.c. Once developed, the proposed budget policy will be submitted to OGC for approval by October 5, 2017 and once OGC approves, then the budget policy and procedures will be communicated to the employees and posted on the UNTHSC website.</p>	Erin R. Anderson, Executive Vice President for Finance & Chief Financial Officer, UNTHSC	10/2/2017	Closed
External	State Fire Marshal's Office	Fiscal Year 2017	RND1509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Residential	UNT	<p>Kerr Hall Building-A Kerr Hall Building-A seven-story high-rise, classified as a mixed occupancy of existing dormitory and existing assembly. Features of fire protection include a fire alarm system, sprinkler system fire pump, standpipe, fixed suppression for commercial cooking appliances and portable fire extinguisher. The building is equipped with illuminated exit signs and emergency generator power.</p>	N/A	<p>Finding 2 The emergency egress floor plans are missing or incorrect and need to be re-done for all rooms. NFPA 1.7 Fire Code, Chapter 20.8.2.4.1</p>	<p>UNT will review for accuracy and develop plans. Work In Progress - Currently out for bidding process - TWA Project # 13639</p>	NA	Open	

UNTS Enterprise Audit Report Inventory

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External	State Fire Marshal's Office	Fiscal Year 2017	RND1509 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Kerr Hall Building 8 Kerr Hall Building 8 is an eight-story high-rise, classified as a mixed occupancy of existing dormitory and existing business. Features of fire hazard protection include fire alarm system, fire sprinkler system, standpipes and portable fire extinguishers. The building is well equipped with illuminated exit signs and emergency generator power.	N/A	Finding 4 The emergency egress floor plans are missing or incorrect and need to be redone for all rooms. NFPA 1 Fire Code, Chapter 20.02.4.1	UNT will review for accuracy and develop plans. Work In Progress - Currently out for bidding process - TMA Project # 73639	NA	NA	Open
External	Ramboll Environ US Corp.	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Ventilation System Assessment	UNT	Kin Room - The Kin Room contains six electric kilns used for baking clay products. Temperatures of the kilns can reach over 1000°F. Each kiln is a large metal cabinet with a glass viewing window. The clay is baked, organic matter in the clay is oxidized which can release carbon monoxide and other combustion gases. In addition, toxic materials in the glazes can vaporize or release toxic gases.1 Currently, the Kin Room is serviced by a single supply vent and several return openings. The returns are not ducted, and there is an air supply duct located immediately above the kiln room on the roof. Total flow in the Kin Room was measured at 574 CFM (negative flow), indicating that air was flowing into the room.	NA	Modify the current HVAC ventilation to prevent untreated outdoor air from entering the space.	Risk Management is working with facilities to determine a plan of action.	NA	NA	Open

UNTS Enterprise Audit Report Inventory

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External	Ramboll Environ US Corp.	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Ventilation System Assessment	UNT	<p>Kiln Room - The Kiln Room contains six electric kilns used for baking clay products. Temperatures of the kilns can reach over 1,000°F. Each kiln has an individual vent for circulating air through the kiln. When the clay is loaded, organic matter in the clay is oxidized which can produce carbon monoxide and other gases. Carbon monoxide, toxic materials in the gases can accumulate or release toxic gases.</p> <p>Currently, the Kiln Room is serviced by a single supply vent and several return openings. The returns are not ducted, and there is an exhaust fan in the room. The exhaust fan is located in the room. Total air flow in the Kiln Room was measured at 574 CFM (negative flow), indicating that air was flowing into the room.</p>	NA	Provide tested make-up supply air sufficient to balance the exhaust system(s).	Risk Management is working with Facilities to determine a plan of action given the uncertain future use of OAS Street Hall. In the short term, Risk Management and Art have addressed the issue with housekeeping improvements, engineering controls, PPE and changes in procedures. It is uncertain if these measures will ensure the exposure levels will be below regulatory limits in all areas.	NA	NA	Open
External	State Fire Marshal's Office	Fiscal Year 2017	RND1509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of Northern Iowa - Residential	UNT	<p>Legends Hall is a four-story structure classified as existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system, standpipe, and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator for back-up power in the event of emergencies involving power loss.</p>	N/A	<p>Finding 1 The emergency egress floor plans diagrams show are missing or incorrect and need to be redone for all rooms. NFPA 1.1 Fire Code, Chapter 20.8.2.4.1</p>	UNT will review for accuracy and develop plans. Work In Progress - Currently out for bidding process - TWA Project # 13639	NA	NA	Open

UNTS Enterprise Audit Report Inventory

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External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTHSC	Library The Library is a five-story structure with a basement classified as a mixed occupancy consisting of existing assembly and existing business. Features of fire protection include a fire alarm system with smoke detectors, fire extinguishers, fire extinguisher cabinets, fire emergency lighting and a generator.	NA	NOTATION 11 (Based on 2011 Inspection report) There is a lack of the required fire rated separation in the basement area where the building connects to the RES building. NFPA 1, Fire Code, Chapter 10.1.2; and NFPA 101, Life Safety Code, Chapter 62.1.3	A fire separation will be installed. (Note this is on the 1st floor, not the basement).	NA	4/7/2017 Revised 12/01/2018	Open
External	State Fire Marshal's Office	Fiscal Year 2017	RND1509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Residential	UNT	Magie Hall Magie Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	N/A	Finding 7 The emergency egress floor plans are missing or incorrect and need to be redone for all rooms. NFPA 1, Fire Code, Chapter 20.8.2.4.1	UNT will review for accuracy and develop plans. Work in Progress - Currently out for bidding process - TWA Project # 13639	NA	NA	Open

UNTS Enterprise Audit Report Inventory

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External	State Fire Marshal's Office	Fiscal Year 2017	RND1509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	McConnell Hall is a three-story structure classified as a mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	N/A	Finding 8 The emergency egress floor plan diagram signs are missing or incorrect and need to be redone for all rooms. NFPA 1.1 Fire Code, Chapter 20.8.2.4.1	UNT will review for accuracy and develop plans. Work In Progress - Currently out for bidding process - TMA Project # 13639	NA	NA	Open
External	State Fire Marshal's Office	Fiscal Year 2017	RND1509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	McConnell Hall is a three-story structure classified as a mixed occupancy consisting of existing dormitory and existing business. Features of fire protection include a complete fire alarm system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power in the event of emergencies involving power loss.	N/A	Finding 12 The emergency egress floor plans are missing or incorrect and need to be redone for all rooms. NFPA 1.1 Fire Code, Chapter 20.8.2.4.1	UNT will review for accuracy and develop plans. Work In Progress - Currently out for bidding process - TMA Project # 13639	NA	NA	Open

UNTS Enterprise Audit Report Inventory

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External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTHSC	<p>MET Building The MET Building is a five-story structure classified as a mixed occupancy consisting of existing assembly and existing business. Features of fire protection include a fire sprinkler system, fire alarm system, fire extinguishers, fire escape, fire alarm pull station. The building is equipped with illuminated exit signs and emergency lighting.</p>	NA	<p>NOTATION 1 The door going from the exterior balcony to the main building is equipped with a double-cylinder lock. Balcony occupants could be locked out of the building and unable to egress the balcony. The door is not equipped with a fire-rated door. The following criteria are met: - There shall be a readily visible and durable sign in letters not less than 1 inch high on a contrasting background and located on the door. - The sign shall be illuminated and shall read "FIRE EXIT THIS DOOR TO REMAIN UNLOCKED WHEN THE BUILDING IS OCCUPIED." - The locking devices are of a type that is readily distinguishable as locked. - The locking devices shall be immediately available to any occupant inside the building when it is locked. The primary entrance/exit door may be equipped with a thumb lock provided it is the only locking/latching device on the door. NFPA 1, Fire Code, Chapter 14.2.2.1 and 4.4.3.1.2</p>	<p>Door hardware will be replaced to allow egress from the balcony.</p>	NA	Revised 12/01/2018	Open
External	State Fire Marshal's Office	Fiscal Year 2017	RND1509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Residential	UNT	<p>Moore Hall Moore Hall is a three-story existing dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.</p>	N/A	<p>Fining 2 The emergency egress floor plans are missing or incorrect and need to be redone for all rooms. NFPA 1, Fire Code, Chapter 20.8.2.4.1</p>	<p>UNT will review for accuracy and develop plans. Work In Progress - Currently out for bidding process - TWA Project # 13639</p>	NA	NA	Open

UNTS Enterprise Audit Report Inventory

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External	Ramboll Environ US Corp.	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Ventilation System Assessment	UNT	<p>Print Annex - The Print Annex serves as the premaking workshop. Premaking types include printing presses, relief printing, intaglio, mono printing, and lithography. In each of these activities, solvents containing volatile organic compounds (VOCs) are used to clean the printing plates. The professor in the Print Annex reported that several activities, such as spray painting and roller washing, are performed outside or next to the open doors outside to minimize contamination of indoor air.</p> <p>The industrial ventilation system in the Print Annex was apparently intended to serve as a local exhaust ventilation, but actually serves as dilution ventilation. Dilution ventilation is not the preferred method of controlling airborne vapors, as airflow volumes are high as are the dilution volumes outside air volumes sufficient for dilution ventilation.</p> <p>The industrial ventilation system is ducted to above work stations where the air is exhausted to the outdoors. The industrial ventilation system is provided by a vent that opens to the outdoors when the switch for the ventilation system is turned to the "on" position. The industrial ventilation system provides approximately 396 cubic feet per minute (CFM) of airflow out of the building. The pressure of the room was measured to be neutral to the outside.</p> <p>Cooling and heating are provided to the space by two direct</p>	NA	Provide pre-treated make-up supply and ventilation air through modifications to the air conditioning system or installation of a dedicated outdoor air system, such as a Munters silica gel dehumidifier. Munters silica gel dehumidification system due to K's decoupling from the air condition system and independent humidity control.	Risk Management is working with Facilities to determine a plan of action given the uncertain future use of OAS Street Hall. In addition, the exposure levels were found to be below regulatory limits in all areas.	NA	NA	Open
External	Ramboll Environ US Corp.	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Ventilation System Assessment	UNT	<p>Print Annex - The Print Annex serves as the premaking workshop. Premaking types include printing presses, relief printing, intaglio, mono printing, and lithography. In each of these activities, solvents containing volatile organic compounds (VOCs) are used to clean the printing plates. The professor in the Print Annex reported that several activities, such as spray painting and roller washing, are performed outside or next to the open doors outside to minimize contamination of indoor air.</p> <p>The industrial ventilation system in the Print Annex was apparently intended to serve as a local exhaust ventilation, but actually serves as dilution ventilation. Dilution ventilation is not the preferred method of controlling airborne vapors, as airflow volumes are high as are the dilution volumes outside air volumes sufficient for dilution ventilation.</p> <p>The industrial ventilation system is ducted to above work stations where the air is exhausted to the outdoors. The industrial ventilation system is provided by a vent that opens to the outdoors when the switch for the ventilation system is turned to the "on" position. The industrial ventilation system provides approximately 396 cubic feet per minute (CFM) of airflow out of the building. The pressure of the room was measured to be neutral to the outside.</p> <p>Cooling and heating are provided to the space by two direct</p>	NA	Install elephant trunk local exhaust ventilation at work stations with capture velocities no less than 100 fpm and duct transport velocities no less than 1,000 fpm.	Risk Management is working with Facilities to determine a plan of action given the uncertain future use of OAS Street Hall. In addition, exposure levels were found to be below regulatory limits in all areas.	NA	NA	Open

UNTS Enterprise Audit Report Inventory

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External	Ramboll Environ US Corp.	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Ventilation System Assessment	UNT	<p>Print Annex - The Print Annex serves as the premaking workshop. Preparing types include printing presses, relief printing, intaglio, mono printing, and lithography. In each of these activities, solvents containing volatile organic compounds (VOC) are used to clean printing plates. The professor in the Print Annex reported that several activities, such as spray painting and roller washing, are performed outside or next to the open doors outside to minimize contamination of indoor air.</p> <p>The industrial ventilation system in the Print Annex was apparently intended to serve as a local exhaust ventilation, but actually serves as dilution ventilation. Dilution ventilation is not the preferred method of controlling airborne vapors, as airflow volumes are high as are the air flow volumes outside air volumes sufficient for dilution ventilation.</p> <p>The industrial ventilation system is ducted to above work stations and is not connected to the outside air. The industrial ventilation system is provided by a vent that opens to the outdoors when the switch for the ventilation system is turned to the "on" position. The industrial ventilation system provides approximately 396 cubic feet per minute (CFM) of airflow out of the building. The pressure of the room was measured to be neutral to the outside.</p> <p>Cooling and heating are provided to the space by two direct Print Annex - The Print Annex serves as the premaking workshop. Preparing types include printing presses, relief printing, intaglio, mono printing, and lithography. In each of these activities, solvents containing volatile organic compounds (VOC) are used to clean equipment after use. Some acids are also used in lithography to etch the printing plates. The professor in the Print Annex reported that several activities, such as spray painting and roller washing, are performed outside or next to the open doors outside to minimize contamination of indoor air.</p> <p>The industrial ventilation system in the Print Annex was apparently intended to serve as a local exhaust ventilation, but actually serves as dilution ventilation. Dilution ventilation is not the preferred method of controlling airborne vapors, as airflow volumes are high as are the air flow volumes outside air volumes sufficient for dilution ventilation.</p> <p>The industrial ventilation system is ducted to above work stations approximately 10-12 feet above the floor. Make-up air for the industrial ventilation system is provided by a vent that opens to the outdoors when the switch for the ventilation system is turned to the "on" position. The industrial ventilation system provides approximately 396 cubic feet per minute (CFM) of airflow out of the building. The pressure of the room was measured to be neutral to the outside.</p> <p>Cooling and heating are provided to the space by two direct</p>	NA	Install a ventilated paint spray booth designed for spray painting activities of the following size: 6 ft. (width) by 4 ft. (depth).	Risk Management is working with Facilities to determine a plan of action given the uncertain future use of OAS Street Hall. In the short term, Risk Management and Art have addressed the issue with housekeeping improvements, engineering controls, PPE and changes in procedures. In addition, the exposure levels were found to be below regulatory limits in all areas.	NA	NA	Open
External	Ramboll Environ US Corp.	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Ventilation System Assessment	UNT	<p>Print Annex - The Print Annex serves as the premaking workshop. Preparing types include printing presses, relief printing, intaglio, mono printing, and lithography. In each of these activities, solvents containing volatile organic compounds (VOC) are used to clean equipment after use. Some acids are also used in lithography to etch the printing plates. The professor in the Print Annex reported that several activities, such as spray painting and roller washing, are performed outside or next to the open doors outside to minimize contamination of indoor air.</p> <p>The industrial ventilation system in the Print Annex was apparently intended to serve as a local exhaust ventilation, but actually serves as dilution ventilation. Dilution ventilation is not the preferred method of controlling airborne vapors, as airflow volumes are high as are the air flow volumes outside air volumes sufficient for dilution ventilation.</p> <p>The industrial ventilation system is ducted to above work stations approximately 10-12 feet above the floor. Make-up air for the industrial ventilation system is provided by a vent that opens to the outdoors when the switch for the ventilation system is turned to the "on" position. The industrial ventilation system provides approximately 396 cubic feet per minute (CFM) of airflow out of the building. The pressure of the room was measured to be neutral to the outside.</p> <p>Cooling and heating are provided to the space by two direct</p>	NA	Install a ventilated chemical fume hood for roller washing of the following size 6 ft. (width) by 4 ft. (depth).	Risk Management is working with Facilities to determine a plan of action given the uncertain future use of OAS Street Hall. In the short term, Risk Management and Art have addressed the issue with housekeeping improvements, engineering controls, PPE and changes in procedures. In addition, the exposure levels were found to be below regulatory limits in all areas.	NA	NA	Open

UNTS Enterprise Audit Report Inventory

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External	State Fire Marshal's Office	Fiscal Year 2017	RND1509 B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	Rawlings Hall is a four story new dormitory occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system, fire extinguishers, fire escape, fire extinguishers. The building is equipped with illuminated exit signs and emergency generator power.	N/A	<p>Finding 4</p> <p>The emergency egress floor plans are missing or incorrect and need to be redone for all rooms. NFPA 1, Fire Code, Chapter 20.8.2.1.1</p>	UNT will review for accuracy and develop plans. Work In Progress - Currently out for bidding process - TMA Project # 73639	NA	NA	Open
External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNT/NTSC	<p>RES Building</p> <p>The RES building is a three-story structure with a basement classified as assembly. Features of fire protection include a fire alarm system, fire sprinkler system, standpipe and portable fire extinguishers. The building is equipped with illuminated exit signs and a generator.</p>	NA	<p>VIOLATION 12</p> <p>There is a lack of building separation where the RES building meets the fire alarm system. NFPA 1, Fire Code, Chapter 10.1.2, and NFPA 101, Life Safety Code, Chapter 8.2.1.3</p>	Proper separations will be installed.	NA	6/7/2017 Revised 12/01/2018	Open

UNTS Enterprise Audit Report Inventory

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External	State Fire Marshal's Office	Fiscal Year 2017	NA	Governance and Regulatory Compliance	Fire Safety Inspection Report	UNTHSC	<p>RIS Building The RIS building is a five-story structure with a basement classified as a mixed occupancy consisting of existing business and existing assembly. Features of fire protection include a fire alarm system, fire extinguishers, fire escape, and fire extinguishers. The building is equipped with illuminated exit signs and a generator.</p>	NA	<p>NOTATION 23 The exit doors in room 240 are equipped with a magnetic locking device and do not incorporate the required operational features. The device which is provided on the access side is required to detect occupant approaching door leaves that are arranged to unlock in the direction of egress upon detection of an approaching occupant or loss of power to the sensor. [2] Loss of power to the part of the access control system that provides the magnetic locking device shall automatically unlock the door leaves in the direction of egress. [3] Door leaves shall be arranged to unlock in the direction of egress from a manual release device located 40 in. to 48 in. vertically above the floor and within 60 in. of the secured door. [4] The manual release devices shall be readily accessible and clearly identified by a sign that reads as follows: PUSH TO EXIT. [5] When operated, the manual release devices shall result in egress from the secured door. The operation of the access control system shall not be affected and the door leaves shall remain unlocked for not less than 30 seconds. [6] Activation of the building fire-protective signaling system, if provided, shall automatically unlock the door leaves in the direction of egress. [7] The activation of manual fire alarm boxes that activate the building fire-protective signaling system specified in 14.5.3.2(4) and (5) shall not be affected.</p>	<p>Hardware will be installed to deactivate magnetic locks when someone approaches from inside the room.</p>	Analyst	Revised 12/01/2018	Open
External	State Fire Marshal's Office	Fiscal Year 2017	RND150298	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Residential	UNT	<p>Santa Fe Hall is a three-story structure classified as existing apartment occupancy. Features of fire protection include a complete fire alarm system, fire sprinkler system and portable fire extinguishers. The building is equipped with illuminated exit signs, and a generator for back-up power.</p>	N/A	<p>Fireling 8 The emergency egress floor plans are missing or incorrect and need to be redone for all rooms. NFPA 1, Fire Code, Chapter 20.8.2.4.1</p>	<p>UNT will review for accuracy and develop plans. Work in Progress - Currently out for bidding process - TWA Project # 13639</p>	NA	NA	Open

UNTS Enterprise Audit Report Inventory

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External	State Fire Marshal's Office	Fiscal Year 2017	RND1509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is a three-story structure with a total area of 100,000 square feet. It includes a complete fire alarm system, fire speaker system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting units in the event of emergencies involving power loss.	N/A	Finding 6 The emergency egress floor plans are missing or incorrect and need to be redone for all rooms. NFPA 1, Fire Code, Chapter 20.02.4.1	UNT will review for accuracy and develop plans. Work In Progress - Currently out for bidding process - TMA Project # 73639	NA	NA	Open
External	State Fire Marshal's Office	Fiscal Year 2017	RND1509B	Governance and Regulatory Compliance	Fire Safety Inspection Report - University of North Texas Denton Residential	UNT	West Hall West Hall is a three-story structure classified as a mixed occupancy of existing assembly and existing dormitory occupancies. The building is separated into north and south wings. Features of fire protection include a complete fire alarm system, fire speaker system and portable fire extinguishers. The building is equipped with illuminated exit signs and emergency lighting units in the event of emergencies involving power loss.	N/A	Finding 10 The egress emergency exit door threshold is raised approximately four inches above the floor level creating a trip hazard to occupants exiting the building. NFPA 1, Fire Code, Chapter 14.1, and NFPA 101, Life Safety Code, Chapter 7.2.1.3.4	UNT will evaluate the best course of action for completion.	NA	8/31/2018	Open

UNTS Enterprise Audit Report Inventory

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External	Texas Department of State Health Services	N/A	Governance and Regulatory Compliance	Radiation Program Inspection	UNTHSC	Radiation Program Inspection	N/A	1. Violation was found.	Violation was closed on 12/11/2017.	N/A	12/11/2017	Closed
Internal (Co-Sourced)	PWC	17-204 HSC	Governance and Regulatory Compliance	THECB Faculty Development Center Grant Internal Audit	UNTHSC	1. Funding Source Not Accurately Set Up The funding source for the FDC grant was not accurately set up to include fringe benefits for FDC employees in accordance with the FDC State Grant Agreement. Specifically, the chart string field for fringe benefits was inaccurate, resulting in the designation of \$143,377.58 to the incorrect fund.	High	1.1.a. Correctly set up the FDC grant in upcoming appropriation years to ensure that fringe benefits are configured as expenses from the correct funding source (i.e. chart field string) and coordinate with appropriate management from the Office of Finance & Planning as well as the UNT System Controller's office to confirm that the accurate funding source is being utilized.	1.a. OCGM will coordinate with HSC Office of Finance & Planning and HSC System Controller's Office to ensure HSCB appropriations for the FDC grant are set up to include the correct funding source in the chart field string.	LeAnn Forberg, Assistant Vice President of Research Administration	5/19/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal (Co-Sourced)	PwC	Fiscal Year 2017	17-304 HSC	Governance and Regulatory Compliance	THECB Faculty Development Center Grant Internal Audit	UNTHSC	2. Not All Grant Expenses Were Charged Accurately The THECB FDC grant expenditures were not always recorded accurately prior to the FDC grant Annual Financial Report (AFR) being submitted to the THECB. After the submission of the AFR to the THECB, the management of the FDC determined that \$8,364.32 in expenses charged to the grant were unallowable expenses, and \$8,730.55 in expenses charged to local/discretionary accounts were allowable expenses that could be funded by the grant. Internal Audit reviewed both the unallowable and allowable expenses.	High	2.1.a. Include a cost transfer form for \$8,364.32 in unallowable expenses to be removed from the THECB FDC grant as well as a local/discretionary account (DD050) to be included on the THECB FDC grant, and submit the form to the OIGM for review.	The TCOM Office of Educational Programs has initiated the recommended funds transfer in coordination with the OIGM.	Lisa Nash, Senior Associate Dean of Educational Programs (TCOM), and Cynthia Pasmore, Director of Faculty Development Center	NA	Closed
Internal (Co-Sourced)	PwC	Fiscal Year 2017	17-304 HSC	Governance and Regulatory Compliance	THECB Faculty Development Center Grant Internal Audit	UNTHSC	2. Not All Grant Expenses Were Charged Accurately The THECB FDC grant expenditures were not always recorded accurately prior to the FDC grant Annual Financial Report (AFR) being submitted to the THECB. After the submission of the AFR to the THECB, the management of the FDC determined that \$8,364.32 in expenses charged to the grant were unallowable expenses, and \$8,730.55 in expenses charged to local/discretionary accounts were allowable expenses that could be funded by the grant. Internal Audit reviewed both the unallowable and allowable expenses.	High	2.1.b. Work with OIGM to update the workflow approval process to go through the Director of the FDC, who, as head of the program, will be responsible for ensuring that all grant activities performed to be able to sufficiently review and approve expenses for the grant.	The Senior Associate Deans shall retain management oversight of the program and provide final approval of expenditures. Additionally, the Director of the FDC shall ensure that all grant activities performed are under an internal control/manual business process for the FDC Director for review expenses will be implemented.	Lisa Nash, Senior Associate Dean of Educational Programs (TCOM), and Cynthia Pasmore, Director of Faculty Development Center	8/31/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External (Co- Sourced)	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal (Co- Sourced)	PwC	Fiscal Year 2017	17-304 HSC	Governance and Regulatory Compliance	THECB Faculty Development Center Grant Internal Audit	UNTHSC	2. Not All Grant Expenses Were Charged Accurately The THECB IDC grant expenditures were not always recorded accurately prior to the IDC grant Annual Financial Report (AFR) being submitted to the THECB. After the submission of the AFR to the THECB, the management of the IDC determined that \$8,364.32 in expenses charged to the grant were unallowable expenses, and \$8,730.55 in expenses charged to local/disciplinary accounts were allowable expenses that could be funded by the grant. Internal Audit reviewed both the unallowable and allowable expenses.	High	2.2.a. Review the expenses along with supporting documentation for appropriateness and provide approval to the UNT System Controller's office to post the transfer to the General Ledger.	DOCKM has reviewed, approved and forwarded to the Controller's office the necessary cost transfers.	LeAnn Forberg, Assistant Vice President of Research Administration	NA	Closed
Internal (Co- Sourced)	PwC	Fiscal Year 2017	17-304 HSC	Governance and Regulatory Compliance	THECB Faculty Development Center Grant Internal Audit	UNTHSC	2. Not All Grant Expenses Were Charged Accurately The THECB IDC grant expenditures were not always recorded accurately prior to the IDC grant Annual Financial Report (AFR) being submitted to the THECB. After the submission of the AFR to the THECB, the management of the IDC determined that \$8,364.32 in expenses charged to the grant were unallowable expenses, and \$8,730.55 in expenses charged to local/disciplinary accounts were allowable expenses that could be funded by the grant. Internal Audit reviewed both the unallowable and allowable expenses.	High	2.2.b. Update the IDC grant AFR to appropriately reflect expenses charged to the grant and resubmit the AFR to the THECB.	DOCKM will complete the revised IDC grant AFR and will forward the revised AFR to the THECB.	LeAnn Forberg, Assistant Vice President of Research Administration	4/28/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal (Co-Sourced)	PwC	Fiscal Year 2017	17-304 HSC	Governance and Regulatory Compliance	THECB Faculty Development Center Grant Internal Audit	UNTHSC	2. Not All Grant Expenses Were Charged Accurately The THECB IDC grant expenditures were not always recorded accurately prior to the IDC grant Annual Financial Report (AFR) being submitted to the THECB. After the submission of the AFR to the THECB, the management of the IDC determined that \$8,364.32 in expenses charged to the grant were unallowable expenses, and \$8,730.55 in expenses charged to local/discretionary accounts were allowable expenses that could be funded by the grant. Internal Audit reviewed both the unallowable and allowable expenses.	High	2.2.a. Implement a follow-up process with the grantees for all grants on a periodic basis to ensure that all expenses are being charged correctly and establish an escalation procedure to notify appropriate personnel if necessary. Expenses, supporting documentation, and the completed AFR.	IDC will implement additional processes specifically for the IDC award and, where needed, additional TCOM awards through quarterly meetings to review award status and expenditures. The meetings and subsequent follow up will include escalation to management, as necessary. The grant manager will be responsible for following standard procedures of all meeting minutes, expenditure review and trainings.	Julian Forberg, Assistant Vice President of Research Administration	5/31/2017	Closed
Internal (Co-Sourced)	PwC	Fiscal Year 2017	17-304 HSC	Governance and Regulatory Compliance	THECB Faculty Development Center Grant Internal Audit	UNTHSC	2. Not All Grant Expenses Were Charged Accurately The THECB IDC grant expenditures were not always recorded accurately prior to the IDC grant Annual Financial Report (AFR) being submitted to the THECB. After the submission of the AFR to the THECB, the management of the IDC determined that \$8,364.32 in expenses charged to the grant were unallowable expenses, and \$8,730.55 in expenses charged to local/discretionary accounts were allowable expenses that could be funded by the grant. Internal Audit reviewed both the unallowable and allowable expenses.	High	2.3.a. Commit additional resources in TCOM and establish a transfer procedure in which personnel creates a journal entry for review and approval. Once it is approved, the DGC will send the documentation to the UNT System Controller's office for posting to the General Ledger through a journal entry.	The Chief Financial Officer and the Dean of TCOM have committed to providing additional resources in TCOM by creating a new position for a person who will be responsible for reviewing and ensuring any financial reports are done correctly and timely. Additionally, a transfer procedure will be established in which personnel creates a journal worksheet with the cost transfer form to be routed to the DGC for review & approval and posted by the Controller's Office.	Gregory Anderson, Chief Financial Officer and Don Heisk, Dean of TCOM	9/30/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal (Co-Sourced)	PwC	Fiscal Year 2017	17-304 HSC	Governance and Regulatory Compliance	THECB Faculty Development Center Grant Internal Audit	UNTHSC	<p>3. Monitoring and Tracking of Grant Expenditures Was Inefficient</p> <p>The preparation of the FDC grant AFR was not performed in adherence with the FDC Staff Grant Agreement. The FDC grant AFR was not always supported by the sufficient level of documentation required to ensure accurate financial reporting, resulting in a delayed and inaccurate submission of the AFR.</p>	High	<p>3.1.a. Establish a formal system (i.e. creating a spreadsheet, retaining invoices and receipts) of tracking and monitoring expenses throughout the appropriation year to be able to provide sufficient supporting documentation for the creation of the FDC grant AFR.</p>	<p>The Director of the Faculty Development Center will establish a formal system to track and monitor expenses as recommended.</p>	Cynthia Paismore, Director of Faculty Development Center	8/31/2017	Closed
Internal (Co-Sourced)	PwC	Fiscal Year 2017	17-304 HSC	Governance and Regulatory Compliance	THECB Faculty Development Center Grant Internal Audit	UNTHSC	<p>3. Monitoring and Tracking of Grant Expenditures Was Inefficient</p> <p>The preparation of the FDC grant AFR was not performed in adherence with the FDC Staff Grant Agreement. The FDC grant AFR was not always supported by the sufficient level of documentation required to ensure accurate financial reporting, resulting in a delayed and inaccurate submission of the AFR.</p>	High	<p>3.1.b. Perform quarterly reviews, at a minimum, of all expenditures on the FDC grant by reconciling all FDC grant expenses to the FDC grant AFR. The FDC grant AFR expenses are appropriately charged to the grant based on the guidelines.</p>	<p>The Director of the Faculty Development Center will perform quarterly reconciliations to ensure FDC expenses are appropriately recorded.</p>	Cynthia Paismore, Director of Faculty Development Center	8/30/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2018	18-005-515	Governance and Regulatory Compliance	Investments Audit	UNT System	<p>1. Unauthorized Sweep Investment Vehicles</p> <p>UNT System, UNT, and UNT Dallas held repurchase agreements with Wells Fargo Bank as sweep investment vehicles during fiscal year 2017. However, this is specifically prohibited in the Master Depository and Banking Services Agreement between UNT System and Wells Fargo Bank. The total balance in the repurchase account at August 31, 2017 was \$7,665,644.</p> <p>During the audit we reviewed repurchase agreements for compliance with requirements of UNT System Regulation 08.2000 Investment of System Funds. We noted all existing repurchase agreements were signed in July 2014, which predated the signing of the Master Depository and Banking Services Agreement of August 2015. Upon review of the Master Depository and Banking Services Agreement, section 4 "Consolidated Account Structure with Sweep Mechanism" stated repurchase agreements were not acceptable as sweep investment vehicles. This contradicted the existing process where UNT System, UNT, and UNT Dallas utilized repurchase agreements as their sweep mechanism.</p> <p>Furthermore, there is an inconsistency between the Master Depository and Banking Services Agreement which prohibits the use of repurchase agreements, and UNT System Regulation 08.2000 which allows investing in fully collateralized repurchase agreements.</p>	High	<p>Recommendations for the Associate Vice Chancellor for Treasury and Reporting:</p> <p>1.1. a. Work with the Office of General Counsel to review the Master Depository and Banking Services Agreement to ensure they are aligned with UNT System Regulation 08.2000 and current practices.</p>	<p>1.a. Management will work with the Office of General Counsel to review the current Master Depository and Banking Services Agreements to ensure they are aligned with UNT System Regulation 08.2000 and current practices.</p>	James Mauldin, Associate Vice Chancellor for Treasury and Reporting	1/31/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-005-515	Governance and Regulatory Compliance	Investments Audit	UNT System	<p>1. Unauthorized Sweep Investment Vehicles</p> <p>UNT System, UNT, and UNT Dallas held repurchase agreements with Wells Fargo Bank as sweep investment vehicles during fiscal year 2017. However, this is specifically prohibited in the Master Depository and Banking Services Agreement between UNT System and Wells Fargo Bank. The total balance in the repurchase account at August 31, 2017 was \$7,665,644.</p> <p>During the audit we reviewed repurchase agreements for compliance with requirements of UNT System Regulation 08.2000 Investment of System Funds. We noted all existing repurchase agreements were signed in July 2014, which predated the signing of the Master Depository and Banking Services Agreement of August 2015. Upon review of the Master Depository and Banking Services Agreement, section 4 "Consolidated Account Structure with Sweep Mechanism" stated repurchase agreements were not acceptable as sweep investment vehicles. This contradicted the existing process where UNT System, UNT, and UNT Dallas utilized repurchase agreements as their sweep mechanism.</p> <p>Furthermore, there is an inconsistency between the Master Depository and Banking Services Agreement which prohibits the use of repurchase agreements, and UNT System Regulation 08.2000 which allows investing in fully collateralized repurchase agreements.</p>	High	<p>Recommendations for the Associate Vice Chancellor for Treasury and Reporting:</p> <p>1.1. b. Based on the review in recommendation "1", resolve and ensure new agreements are fully executed by all the relevant parties.</p>	<p>1.b. Management will resolve and ensure new agreements are fully executed by all the relevant parties.</p>	James Mauldin, Associate Vice Chancellor for Treasury and Reporting	1/31/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-005-515	Governance and Regulatory Compliance	Investments Audit	UNTISC	<p>2. Accrued investment interest income not recorded in the general ledger</p> <p>There were 2 out of 4 instances where accrued investment interest income for UNTISC at August 31, 2017, totaling \$22,683, was not recorded in the general ledger. During the audit we reviewed the accuracy, existence and valuation of the asset balances in the investment reports at August 31, 2017 by vouching the amounts to the investment and bank statements. Furthermore, we traced the balances from the investment financial statements, we traced the balances from the investment report to the general ledger. We identified 2 out of 4 instances, Texas Term - Term CP (maturity 9/15/2017) \$3,222 and Texas Term - CP Proceeds - Term CP (maturity 12/26/2017) \$19,461, where accrued investment interest income was not recorded in the general ledger.</p>	Moderate	<p>Recommendations for the UNTISC Associate Controller:</p> <p>2.1. Identify the journal entries needed to correct the unrecorded amounts of \$22,683, and post them to the general ledger.</p>	<p>2.1. The journal entries needed to correct the unrecorded amounts have been identified and will be posted to the general ledger.</p>	Paula Welch, UNTISC Associate Controller	2/28/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-005-515	Governance and Regulatory Compliance	Investments Audit	UNTISC	<p>2. Accrued investment interest income not recorded in the general ledger</p> <p>There were 2 out of 4 instances where accrued investment interest income for UNTISC at August 31, 2017, totaling \$22,683, was not recorded in the general ledger. During the audit we reviewed the accuracy, existence and valuation of the asset balances in the investment reports at August 31, 2017 by vouching the amounts to the investment and bank statements. Furthermore, we traced the balances from the investment financial statements, we traced the balances from the investment report to the general ledger. We identified 2 out of 4 instances, Texas Term - Term CP (maturity 9/15/2017) \$3,222 and Texas Term - CP Proceeds - Term CP (maturity 12/26/2017) \$19,461, where accrued investment interest income was not recorded in the general ledger.</p>	Moderate	<p>Recommendations for the UNTISC Associate Controller:</p> <p>2.1. Develop a process to ensure that information in the quarterly investment reports from UNT System Treasury is reconciled to the general ledger at the end of each quarter.</p>	<p>2b. The reconciliation process will be reviewed and updated to ensure quarterly investment reports are reconciled to the general ledger at least quarterly.</p>	Paula Welch, UNTISC Associate Controller	2/28/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-008 ISC	Governance and Regulatory Compliance	Family Medicine Residency Program Audit	UNTHSC	<p>1. Unexpended balance from Prior Year CBPF Funds received from the FY2016 operational grant for the amount of \$2,000,000.00. The amount of \$2,000,000.00 was not reported in the AFR section "A. Revenues: 1. Unexpended Balance on CBPF Funds (Received Prior to August 31, 2017)". As a result, the revenue subtotal was not correctly reflected in the AFR. Furthermore, the FY2016 unexpended balance was not transferred at the end of the fiscal year. The amount of \$2,000,000.00 was not reported in the AFR, therefore, it was not available to be spent by the department during FY2017.</p>	High	<p>2. Recommendation for the Associate Vice President of Research and Administration: 2.1.a. Update the AFR to appropriately reflect all revenue on the grant and submit the AFR to the THREB.</p>	2. The Office of Sponsored Programs will update the AFR and resubmit.	Rein Clarke, Associate Vice President of Research Administration	12/22/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-008 ISC	Governance and Regulatory Compliance	Family Medicine Residency Program Audit	UNTHSC	<p>2. Measurement Guidelines for Cost Elements and Income Sources Internal Audit was unable to validate whether the FMPRP cost and income elements were in accordance with the established measures outlined in Section V- Financial Monitoring Procedures (Measurement Guidelines) of the FMPRP Guidelines for Funding due to the following reasons:</p> <ul style="list-style-type: none"> • Amounts reported as Revenues and Expenditures paid with Non-CBPF Funds (Other Funds) were not always calculated based on Actual amounts as required by the THREB instructions for Completing the AFR. Specifically, the amounts reported as "Revenues - D.1. Total Financial Support for the Family Practice Residency Program" and \$536,486.43 reported in "Expenditures - A. Resident Compensation" as support to the program by the Affiliated Hospital did not include actual resident stipends and benefits for FY2017. • The amount reported as "Revenues - D.1. Total Financial Support for the Family Practice Residency Program" was based on the AFR as financial support to the FMPRP in the revenue section "D. Affiliated Hospital(s) Grant." This amount was used to reimburse the Affiliated Hospital for the program and was paid by the hospital. • The amount reported as "Expenditures - A. Resident Compensation" was based on the AFR as financial support to the FMPRP in the revenue section "D. Affiliated Hospital(s) Grant." This amount was used to reimburse the Affiliated Hospital for the program and was paid by the hospital. • The amount reported as "Expenditures - A. Resident Compensation" was based on the AFR as financial support to the FMPRP in the revenue section "D. Affiliated Hospital(s) Grant." This amount was used to reimburse the Affiliated Hospital for the program and was paid by the hospital. <p>Financial support provided by the Medical School in detail: 1. \$299,510.29 in Operating Expenses reported as "Expenditures - D. Operating Expenses" in the Financial Monitoring Procedures. 2. Financial support provided by the Medical School in "Revenues - E.2.</p>	High	<p>Recommendations for the Senior Academic and Business Director, TCOM: 2.1.a. Update the AFR to appropriately reflect revenues and expenses supported with Non-CBPF Funds (Other Funds).</p>	1.a. The FY17 FMPRP AFR will reflect revenues and expenses supported with Non-CBPF Funds (Other Funds) from September 1, 2016 to August 31, 2017.	A. J. Randolph, Senior Academic Director and Business Director, TCOM	12/22/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-008 ISC	Governance and Regulatory Compliance	Family Medicine Residency Program Audit	UNTHSC	<p>2. Measurement Guidelines for Cost Elements and Income Sources</p> <p>Internal Audit was unable to validate whether the FMGR's cost and income elements were in accordance with the established measures (Cost Accounting and Financial Reporting Guidelines) of the FMGR Guidelines for funding due to the following reasons:</p> <ul style="list-style-type: none"> • Amounts reported as Revenues and Expenditures paid with Non-CBPP Funds (Other funds) were not always calculated based on actual revenues and expenditures as required by the THECB Instructions for Completing the AFR. Specifically, <ul style="list-style-type: none"> • \$11,300,300.23 reported as "Revenues - D.1. Total Financial Support for the Family Practice Residency Program" and \$936,486.43 reported in "Expenditures - A. Resident Compensation" in support to the program. These amounts did not include actual incidentals and benefits for FY2017. • The amount of \$410,000 was reported twice on the AFR as financial support to the FMGR in the revenue section "D. Affiliated Hospital(s) Support" and in the expenditure section "A. Resident Compensation". • This amount was used to reimburse the affiliated hospital for the six residents that were paid by the Hospital. • Amounts reported as Revenues and Expenditures paid with Non-CBPP Funds (Other funds) does not include the accurate amount of \$299,510.29 in Operating Expenses reported as "Expenditures - D. Operating Expenses" were not included in the Revenues section as financial support provided by the Medical Shopkin "Revenues - E.2. Faculty and Staff Worker's Compensation <p>Support Personnel's fringe benefits paid with the Coordinating Board Family Practice (CBPP) funds for the amount of \$43,317 related to "Unemployment, Worker's Compensation, and Lump Sum Vacation Pay Upon Termination" was included under Faculty Fringe benefits. In addition, the amount of \$43,317 in Compensation on the AFR was overstated by \$43,317 and categorized as "C. Support Personnel Compensation" was understated.</p>	High	<p>Recommendations for the Senior Academic and Business Director, TCOM:</p> <p>2.1.b. Going forward, complete the AFR to ensure accounting information is accurate and complete. Review and verify that all complete accurate and detail initial amounts in accordance with THECB Instructions for Completing the AFR.</p>	<p>1.b. The AFR for future reporting cycles will be completed according to A. J. Bauckloh, Senior Academic and Business Director, TCOM</p>	A. J. Bauckloh, Senior Academic and Business Director, TCOM	10/7/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	18-008 ISC	Governance and Regulatory Compliance	Family Medicine Residency Program Audit	UNTHSC	<p>3. Faculty and Staff Worker's Compensation</p> <p>Support Personnel's fringe benefits paid with the Coordinating Board Family Practice (CBPP) funds for the amount of \$43,317 related to "Unemployment, Worker's Compensation, and Lump Sum Vacation Pay Upon Termination" was included under Faculty Fringe benefits. In addition, the amount of \$43,317 in Compensation on the AFR was overstated by \$43,317 and categorized as "C. Support Personnel Compensation" was understated.</p>	High	<p>Recommendations for the Associate Vice President of Research Administration:</p> <p>3.1.a. Update the AFR to appropriately reflect expenses charged to the grant and submit the AFR to the THECB.</p>	<p>1.a. The Office of Sponsored Programs will update the AFR and resubmit by December 22, 2017.</p>	Brian Glade, Associate Vice President of Research Administration	11/22/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-008 ISC	Governance and Regulatory Compliance	Family Medicine Residency Program Audit	UNTHSC	3. Faculty and Staff Workers' Compensation Support Personnel's fringe benefits paid with the Coordinating Board Family Practice (CBFP) funds for the amount of \$443.17 related to the University of Texas System. The amount of \$443.17 was reported on the Payroll Termination" was included under faculty's fringe benefits. As a result, category "B, Faculty Compensation" on the AFR was overstated by \$443.17 and category "C, Support Personnel Compensation" was understated.	High	Recommendations for the Associate Vice President of Research Administration: 3.1.b. Going forward, record the appropriate amount for both Support Personnel's fringe benefits and the amount of \$443.17 related to the Senior Academic and Business Director, TCOM in order to accurately complete the AFR.	1.1.b. The Office of Sponsored Programs will coordinate with the Senior Academic Business Director to ensure accurate reporting going forward.	Ben Glabe, Associate Vice President of Research Administration	12/21/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	18-007 ISC	Governance and Regulatory Compliance	THECB Faculty Development Center Grant Audit	UNTHSC	1. Unallowable Cost with THECB Funds Unallowable cost for alcohol, tips, and gratuities in accordance with State and University Guidelines were reported as expenditures paid with the Texas Higher Education Coordinating Board (THECB) funds on the Annual Financial Report (AFR). 2. Unallowable Expenses The amount of \$44.66 for alcoholic beverages and \$271.25 for tips and gratuities were reported on the AFR under the category "C, LC Staff Conference Travel & Lodging". Furthermore, for 1 out of 5 vouchers reviewed, Internal Audit was unable to determine whether the amount of \$44.66 for alcoholic beverages was reported as detailed receipt was not provided as required by University Travel Guidelines. The unallowable expenditure amount of \$54.66 for alcoholic beverages and \$10.00 out of \$271.25 for tips were recorded in the "Unallowable Cost" category. The tips were incorrectly accounted under the meal expenditure.	High	Recommendations for the Senior Academic and Business Director, TCOM 1.1.a. Initiate a cost transfer form for unallowable expenses to be removed from the THECB FDC grant and submit the form to the Office of Research Compliance and Sponsored Programs for review.	1.a. A Non-Payroll Cost Transfer Form to move unallowable alcohol and gratuity expenses from the Faculty Development Center Grant to the Unallowable Cost category and submitted to the Office of Grants and Contract Management.	A. J. Randolph, Senior Academic and Business Director, TCOM	12/22/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-007 ISC	Governance and Regulatory Compliance	THECB Faculty Development Center Grant Audit	UNTHSC	1. Unallowable cost with THECB Funds Unallowable cost for alcohol, tips, and gratuities in accordance with State and University Guidelines were reported as expenditures paid with the Texas Higher Education Coordinating Board (THECB) funds on the Annual Financial Report (AFR). Specifically, Internal Audit determined that unallowable expenditures for the amount of \$54.66 for alcoholic beverages and \$271.25 for tips and gratuities were reported on the AFR under the category "C.L.C. Staff Conference Travel & Lodging". Internal Audit was unable to determine whether alcoholic beverages were reimbursed to the traveler because the detailed receipt was not provided as required by University Travel Guidelines. The unallowable expenditure amount of \$54.66 for alcoholic beverages and \$10.00 out of \$271.25 for tips were recorded in the University General Ledger. The tips were incorrectly accounted under the meal expenditure.	High	Recommendations for the Senior Academic and Business Director, TCOM: 1.1. Develop a follow-up process with all departments involved for the compliance and sponsored programs. Ensure all expenses are being charged correctly, submitted, approved, posted timely to the General Ledger and Uniform Statewide Accounting System (USAS) with appropriate support provided to the Chief Financial Officer on a monthly basis. Furthermore, the AFR should be complete no later than October 1st of every year.	1b. The Sr. Academic and Business Director began holding monthly reconciliation meetings in October 2017. Stakeholders from the Office of Grant and Contract Management, the UNT System Controller's Office, and the TCOM Office of Educational Programs meet monthly with the University's General Ledger and the UNT System Controller's Office to ensure expenditures are reconciled with the University's General Ledger on the General Ledger and Uniform Statewide Accounting System (USAS). A complete reconciliation will be provided to the Chief Financial Officer on a monthly basis.	A. J. Bauckhoff, Senior Academic and Business Director, TCOM	10/7/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	18-007 ISC	Governance and Regulatory Compliance	THECB Faculty Development Center Grant Audit	UNTHSC	1. Unallowable cost with THECB Funds Unallowable cost for alcohol, tips, and gratuities in accordance with State and University Guidelines were reported as expenditures paid with the Texas Higher Education Coordinating Board (THECB) funds on the Annual Financial Report (AFR). Specifically, Internal Audit determined that unallowable expenditures for the amount of \$54.66 for alcoholic beverages and \$271.25 for tips and gratuities were reported on the AFR under the category "C.L.C. Staff Conference Travel & Lodging". Furthermore, for 1 out of 5 vouchers reviewed, Internal Audit was unable to determine whether alcoholic beverages were reimbursed to the traveler because the detailed receipt was not provided as required by University Travel Guidelines. The unallowable expenditure amount of \$54.66 for alcoholic beverages and \$10.00 out of \$271.25 for tips were recorded in the University General Ledger. The tips were incorrectly accounted under the meal expenditure.	High	Recommendations for the Associate Vice President of Research Administration: 1.2.a. Review and remove all unallowable expenditures paid with THECB Funds and provide approval to the UNT System Controller's office to post the transfer to the General Ledger and USAS.	2a. The Office of Sponsored Programs will remove the unallowable expenditures and provide approval to the UNT System Controller's office to post the transfer to the General Ledger and USAS.	jh	11/22/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-007 ISC	Governance and Regulatory Compliance	THECB Faculty Development Center Grant Audit	UNTHSC	<p>1. Unallowable cost with THECB Funds</p> <p>Unallowable cost for alcohol, tips, and gratuities in accordance with State and University Guidelines were reported as expenditures paid through the Operating Board of THECB Funds on the Annual Financial Report (AFR). Specifically, Internal Audit determined that unallowable expenditures for the amount of \$54.66 for alcoholic beverages and \$271.25 for tips and gratuities were reported on the AFR under the category "C.L.C. expenses." Internal Audit was unable to determine whether alcoholic beverages were reimbursed to the traveler because the detailed receipt was not provided as required by University Travel Guidelines. Unallowable expenditure amount of \$54.66 for alcoholic beverages and \$10.00 out of \$271.25 for tips were recorded in the University General Ledger. The tips were incorrectly accounted under the meal expenditure.</p>	High	<p>Recommendations for the Associate Vice President of Research Administration:</p> <p>1.2.b. Update the AFR to appropriately reflect expenses charged to the grant and submit the AFR to the THECB.</p>	<p>1a. The Office of Sponsored Programs will update the AFR and submit to THECB.</p>	Ben Glade, Associate Vice President of Research Administration	12/27/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-007 ISC	Governance and Regulatory Compliance	THECB Faculty Development Center Grant Audit	UNTHSC	<p>2. Personnel Compensation Expenditures</p> <p>Amounts reported for personal compensation (salaries and benefits) on the AFR are not in accordance with the University's General Ledger. Specifically, the following were noted:</p> <ul style="list-style-type: none"> 1. Longevity pay is not a liability on the FDC grant. 2. Sponsored Project Reporting (SPR) is not a liability on the FDC grant. 3. As a result, the total benefits amount of \$5,598.32 reported on the AFR was not proportional to the effort that was certified by the staff. 4. Longevity pay that should have been charged to the FDC grant for May and June 2017, were incorrectly paid with Non-THECB funds in the University's General Ledger. As a result, salary amounts reported on the AFR as paid with the THECB funds are understated by a total of \$132.00 in longevity pay. 5. Longevity pay that should have been charged to the AFR as paid with the Non-THECB funds for all four employees are understated by a total amount of \$12,077.84 and do not reconcile to the amount recorded on the University's General Ledger. 	High	<p>Recommendations for the Associate Vice President of Research Administration:</p> <p>2.1.a. Correctly set up the FDC grant in upcoming appropriation years to ensure that longevity pay and fringe benefits are configured as expenses to be included in the grant total from the University source (i.e. the University's General Ledger) and not from the sponsored project source (i.e. the Office of Finance & Planning) as well as the UNT System Controller's office to confirm that the accurate funding source is being utilized.</p>	<p>1a. The Office of Sponsored Programs (OSP) will maintain open communication and work closely with the Office of Finance & Planning to ensure that accurate funding sources is utilized for all payroll expenditures on the grant.</p>	Ben Glade, Associate Vice President of Research Administration	8/31/2018	Open

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2018	18-007 ISC	Governance and Regulatory Compliance	THECB Faculty Development Center Grant Audit	UNTHSC	<p>2. Personnel Compensation Expenditures</p> <p>Amounts reported for personnel compensation (salaries and benefit) on the AFR are not in accordance with the University's General Ledger. Specifically, the following were noted:</p> <ul style="list-style-type: none"> • Benefits are not charged proportionally to salaries on the FDC grant (Sponsored Project I# RA00004) in the University's General Ledger. As a result, the total benefits amount of \$5,598.32 reported on the AFR was not proportionate to the effort that was certified by the staff. • \$132.00 in longevity pay that should have been charged to the FDC grant for May and June 2017, were incorrectly paid with Non-THECB funds in the University's General Ledger. As a result, salary amounts reported on the AFR are understated by \$132.00. • Salary and benefit amounts reported on the AFR as paid with the Non-THECB funds for all four employees are understated by a total amount of \$12,077.84 and do not reconcile to the amount recorded on the University's General Ledger. 	High	<p>Recommendations for the Associate Vice President of Research Administration:</p> <p>2.1. Update the AFR to appropriately reflect expenses charged to the grant and submit the AFR to the THECB.</p> <p>2.1.b. Update the AFR to appropriately reflect expenses charged to the grant and submit the AFR to the THECB.</p>	<p>1.b. Due to timing, we are unable to initiate a cost transfer form to reallocate the longevity pay to the THECB FDC grant. The AFR cannot be updated as the UNT System Controller's Office is unable to reallocate payroll expenses that occurred in the previous fiscal year. We will continue to monitor the AFR and ensure longevity pay and fringe benefits are configured to the correct funding source.</p>	Ben Clarke, Associate Vice President of Research Administration	8/31/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	18-007 ISC	Governance and Regulatory Compliance	THECB Faculty Development Center Grant Audit	UNTHSC	<p>2. Personnel Compensation Expenditures</p> <p>Amounts reported for personnel compensation (salaries and benefit) on the AFR are not in accordance with the University's General Ledger. Specifically, the following were noted:</p> <ul style="list-style-type: none"> • Benefits are not charged proportionally to salaries on the FDC grant (Sponsored Project I# RA00004) in the University's General Ledger. As a result, the total benefits amount of \$5,598.32 reported on the AFR was not proportionate to the effort that was certified by the staff. • \$132.00 in longevity pay that should have been charged to the FDC grant for May and June 2017, were incorrectly paid with Non-THECB funds in the University's General Ledger. As a result, salary amounts reported on the AFR are understated by \$132.00. • Salary and benefit amounts reported on the AFR as paid with the Non-THECB funds for all four employees are understated by a total amount of \$12,077.84 and do not reconcile to the amount recorded on the University's General Ledger. 	High	<p>Recommendations for the Senior Academic and Business Director, TCOM</p> <p>2.2.a. Initiate a cost transfer form for \$132.00 longevity pay expenses that did not get charged to the THECB FDC grant and submit the form to the Office of Research Compliance and Sponsored Programs for review.</p>	<p>2.a. Due to timing, we are unable to initiate a cost transfer form to reallocate the longevity pay to the THECB FDC grant. The AFR cannot be updated as the UNT System Controller's Office is unable to reallocate payroll expenses that occurred in the previous fiscal year. We will continue to monitor the AFR and ensure longevity pay and fringe benefits are configured to the correct funding source.</p>	A. J. Randolph, Senior Academic and Business Director, TCOM	12/22/2017	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2018	18-007 IBC	Governance and Regulatory Compliance	THECB Faculty Development Center Grant Audit	UNTHSC	<p>2. Personnel Compensation Expenditures</p> <p>Amounts reported for personnel compensation (salaries and benefit(s) on the AFR are not in accordance with the University's General Ledger. Specifically, the following were noted:</p> <ul style="list-style-type: none"> • Benefits are not charged proportionally to salaries on the FDC grant (Sponsored Project I#-R000004) in the University's General Ledger. As a result, the total benefits amount of \$5,598.32 reported on the AFR was not proportional to the effort that was certified by the staff. • \$132 in longevity pay that should have been charged to the FDC grant for May and June 2017, were incorrectly paid with Non-THCB funds in the University's General Ledger. As a result, salary amounts reported on the AFR are understated by a total of \$132.00 in longevity pay. • Salary and benefit amounts reported on the AFR as paid with the Non-THCB funds for all four employees are understated by a total amount of \$12,077.84 and do not reconcile to the amount recorded on the University's General Ledger. 	High	<p>Recommendations for the Senior Academic and Business Director, TCOM:</p> <p>2.2.a. Develop a follow-up process with all departments responsible for reporting salaries and benefits to the Compliance and Sponsored Programs Office of Fiscal to ensure funding source is set up appropriately in order for salaries and benefits to be charged proportionately to the FDC grant. Provide a reconciliation to the Chief Financial Officer on a quarterly basis.</p>	<p>2b. The Sr. Academic and Business Director began holding monthly reconciliation meetings in October 2017. Stakeholders from the Office of Grant and Contract Management, the UNT System Controller's Office, and the TCOM Office of Educational Programs meet monthly to review the AFRs and ensure that the correct funding source is used. Staff members are charged proportionately to the FDC grant. UNT System Controller's staff are present to ensure expenses recorded on the General Ledger are reconciled monthly with the Texas Uniform Accounting System. A reconciliation report will be provided to the Chief Financial Officer on a quarterly basis.</p>	A. J. Randolph, Senior Academic and Business Director, TCOM	10/7/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	18-007 IBC	Governance and Regulatory Compliance	THECB Faculty Development Center Grant Audit	UNTHSC	<p>2. Personnel Compensation Expenditures</p> <p>Amounts reported for personnel compensation (salaries and benefit(s) on the AFR are not in accordance with the University's General Ledger. Specifically, the following were noted:</p> <ul style="list-style-type: none"> • Benefits are not charged proportionally to salaries on the FDC grant (Sponsored Project I#-R000004) in the University's General Ledger. As a result, the total benefits amount of \$5,598.32 reported on the AFR was not proportional to the effort that was certified by the staff. • \$132 in longevity pay that should have been charged to the FDC grant for May and June 2017, were incorrectly paid with Non-THCB funds in the University's General Ledger. As a result, salary amounts reported on the AFR are understated by a total of \$132.00 in longevity pay. • Salary and benefit amounts reported on the AFR as paid with the Non-THCB funds for all four employees are understated by a total amount of \$12,077.84 and do not reconcile to the amount recorded on the University's General Ledger. 	High	<p>Recommendations for the Senior Academic and Business Director, TCOM:</p> <p>2.2.c. Determine the correct percentage for salaries and benefits paid with non-THCB.</p>	<p>2c. The Sr. Academic and Business Director will verify each month with the Principle Investigator that the percentage of each FDC staff member's salary and benefits recorded on the AFR and the THECB funds is correctly reported in monthly reconciliation reports.</p>	A. J. Randolph, Senior Academic and Business Director, TCOM	10/7/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-007 ISC	Governance and Regulatory Compliance	THECB Faculty Development Center Grant Audit	UNTHSC	<p>3. Other General Expenditures</p> <p>Office Supplies was reported twice on the AFR for the amount of \$1,099.89 and did not reconcile to the University's General Ledger or USAS. Specifically, \$1,099.89 out of a total invoice of \$1,595.00 for Office Supplies was reported as paid with Texas Higher Education Coordinating Board (THECB) funds in category "C.2a. Office Supplies and Promotional Items" and also reported as paid with Non-THECB funds in category "B.2c. Participants Materials". Furthermore, this amount did not reconcile to the University's General Ledger or USAS which is recorded as \$1,361.14. There was a cost transfer request of \$1,099.85 initiated by the Texas College of Osteopathic Medicine (TCOM) department and approved by the University's Office of Research Compliance and Sponsored Programs. This amount was recorded as \$1,099.89 on the AFR. However, the Office of Research Compliance and Sponsored Programs provided a higher transfer amount of \$1,361.14 to UNT System Controller's Office to cover the allowable tip expenditure of \$261.25 which was not transferred to the FDC grant.</p>	High	<p>Recommendations for the Associate Vice President of Research Administration:</p> <p>3.1.a. Update the AFR to appropriately reflect expenses charged to the grant and submit the AFR to the THECB.</p>	<p>1.a. The Office of Sponsored Programs will update the AFR and submit to the THECB.</p>	<p>Brian Glade, Associate Vice President of Research Administration</p>	12/22/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-007 ISC	Governance and Regulatory Compliance	THECB Faculty Development Center Grant Audit	UNTHSC	<p>3. Other General Expenditures</p> <p>Office Supplies was reported twice on the AFR for the amount of \$1,099.89 and did not reconcile to the University's General Ledger or USAS. Specifically, \$1,099.89 out of a total invoice of \$1,595.00 for Office Supplies was reported as paid with Texas Higher Education Coordinating Board (THECB) funds in category "C.2a. Office Supplies and Promotional Items" and also reported as paid with Non-THECB funds in category "B.2c. Participants Materials". Furthermore, this amount did not reconcile to the University's General Ledger or USAS which is recorded as \$1,361.14. There was a cost transfer request of \$1,099.85 initiated by the Texas College of Osteopathic Medicine (TCOM) department and approved by the University's Office of Research Compliance and Sponsored Programs. This amount was recorded as \$1,099.89 on the AFR. However, the Office of Research Compliance and Sponsored Programs provided a higher transfer amount of \$1,361.14 to UNT System Controller's Office to cover the allowable tip expenditure of \$261.25 which was not transferred to the FDC grant.</p>	High	<p>Recommendations for the Associate Vice President of Research Administration:</p> <p>3.1.a. Communicate all changes and/or updates with cost transfer back to the department so they are aware of all changes made.</p>	<p>1.b. The Office of Sponsored Programs will communicate the changes and/or updates back to the department.</p>	<p>Brian Glade, Associate Vice President of Research Administration</p>	12/22/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-007 ISC	Governance and Regulatory Compliance	THECB Faculty Development Center Grant Audit	UNTHSC	<p>4. Inaccurate Recording of Expenditures</p> <p>A total of \$811.88 in expenditures recorded on the AFR as paid with Non-THCB funds, under categories "C, Maintenance & Operations", "B, Training Activities & Programs", were not recorded in the University's General Ledger for FY2017. Specifically, the following were noted:</p> <ul style="list-style-type: none"> • \$739.33 out of \$2,256.51 reported as "C, Office Supplies and Promotional Items" in category "C, Maintenance & Operations" was processed and paid in FY2018. • \$36.75 out of \$12,649.25 reported as "B, Travel, Meals, Breaks, Etc." in category "B, Training Activities & Programs" was not processed or paid in the University's General Ledger. • \$35.80 out of \$2,267.33 reported as "B, Travel, Meals, Breaks, Etc." was processed or paid in the University's General Ledger. The difference was due to an incorrect amount recorded in the departmental Excel spreadsheet for a travel reimbursement. 	High	<p>Recommendations for the Senior Academic and Business Director, TCOM:</p> <p>4.1.a. Update the AFR to appropriately reflect expenses paid with the Non-THCB funds.</p>	<p>1.a. UT17 Faculty Development Center Grant AFR has been updated to remove the expenditures not recorded on the University's General Ledger for FY 17.</p>	A. J. Randolph, Senior Academic and Business Director, TCOM	12/27/2017	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-007 ISC	Governance and Regulatory Compliance	THECB Faculty Development Center Grant Audit	UNTHSC	<p>4. Inaccurate Recording of Expenditures</p> <p>A total of \$811.88 in expenditures recorded on the AFR as paid with Non-THCB funds, under categories "C, Maintenance & Operations" and "B, Training Activities & Programs", were not recorded in the University's General Ledger for FY2017. Specifically, the following were noted:</p> <ul style="list-style-type: none"> • \$739.33 out of \$2,256.51 reported as "C, Office Supplies and Promotional Items" in category "C, Maintenance & Operations" was processed and paid in FY2018. • \$36.75 out of \$12,649.25 reported as "B, Travel, Meals, Breaks, Etc." in category "B, Training Activities & Programs" was not processed or paid in the University's General Ledger. • \$35.80 out of \$2,267.33 reported as "B, Travel, Meals, Breaks, Etc." was processed or paid in the University's General Ledger. The difference was due to an incorrect amount recorded in the departmental Excel spreadsheet for a travel reimbursement. 	High	<p>Recommendations for the Senior Academic and Business Director, TCOM:</p> <p>4.1.a. Update the AFR to appropriately reflect expenditures recorded on the Excel spreadsheet to the General Ledger.</p>	<p>1.b. The Sr. Academic and Business Director began holding monthly reconciliation meetings in October 2017. Stakeholders from the Office of the Senior Academic and Business Director, TCOM, the TCOM Office of Educational Programs meet monthly to review all FDC expenditures to ensure expenditures are reconciled with the University's General Ledger.</p> <p>UNT System Controller's staff are present to ensure expenses recorded on the General Ledger are reconciled monthly with the Texas Uniform Statewide Accounting System (USAS). A complete reconciliation will be provided to the Chief Financial Officer on a monthly basis.</p>	A. J. Randolph, Senior Academic and Business Director, TCOM	10/7/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-007 ISC	Governance and Regulatory Compliance	THECB Faculty Development Center Grant Audit	UNTHSC	<p>4. Inaccurate Recording of Expenditures</p> <p>A total of \$811.88 in expenditures recorded on the AFR as paid with Non-THCB funds under categories "C, Maintenance & Operations" were not recorded in the University's General Ledger for FY2017. Specifically, the following were noted:</p> <ul style="list-style-type: none"> • \$739.33 out of \$2,256.51 reported as "C, Office Supplies and Promotional Items" in category "C, Maintenance & Operations" was not recorded in the University's General Ledger. • \$36.75 out of \$12,649.25 reported as "B, Lab, Meek Breaks, Etc." in category "B, Training Activities & Programs" was not processed or paid in the University's General Ledger. • \$35.80 out of \$2,267.33 reported as "B, Lab, Meek Breaks, Etc." in category "B, Training Activities & Programs" was not processed or paid in the University's General Ledger. The difference was due to an incorrect amount recorded in the departmental Excel spreadsheet for a travel reimbursement. 	High	<p>Recommendations for the Senior Academic and Business Director, TCOM:</p> <p>A1.1. Ensure all expenditures recorded on the AFR is based on the date the expense was posted on the General Ledger, not the submission date.</p>	<p>1. All received expenditures on the FY18 ISC Annual Financial Report will be based on the date the expense posted on the University's General Ledger, not the date the expense was submitted. Expenses reported on the AFR will be based on a query from the General Ledger that will ensure expenses reconciled with the department's internal tracking spreadsheet.</p>	A. J. Randolph, Senior Academic and Business Director, TCOM	10/7/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	18-007 ISC	Governance and Regulatory Compliance	THECB Faculty Development Center Grant Audit	UNTHSC	<p>5. Non-Compliance with Purchasing Card (P-Card) Guidelines</p> <p>During our review of ISC expenditures paid with Non-THCB funds, we noted that P-Card transactions reviewed included State of Texas sales tax for the total amount of \$90.53.</p>	Moderate	<p>Recommendation for the Senior Academic and Business Director, TCOM:</p> <p>5.1. Implement a process to internally monitor P-Card expenditures and require P-Card holder to immediately request a tax refund.</p>	<p>1. An internal review process to monitor P-Card expenditures will be implemented to ensure P-Card expenses do not include State of Texas sales tax. P-Card holders will be required to immediately request a refund of the state sales tax. Repeated offenses will result in the suspension of P-Card privileges.</p>	A. J. Randolph, Senior Academic and Business Director, TCOM	3/7/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal (Co- Sourced)	PwC	Fiscal Year 2018	17-308 BAL	Governance and Regulatory Compliance	Enrollment	UNT Dallas	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Internal (Co- Sourced)	PwC	Fiscal Year 2018	17-307 HSC	Governance and Regulatory Compliance	Enrollment	UNTHSC	N/A	N/A	N/A	N/A	N/A	N/A	N/A

UNTS Enterprise Audit Report Inventory

Internal/ External (Source)	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal (Co-Source)	PWC	Fiscal Year 2018	17-206-UNT	Governance and Regulatory Compliance	Enrollment	UNT	<p>Comment #1: Monitoring evidence of audit roll completion not retained. While the PeopleSoft system sends reminder notifications to lecturers who have not completed their assigned audit rolls, a report is also monitored to track for completion of outstanding audit rolls (audit rolls that were not marked as approved by the lecturer). This report is however not retained post audit roll completion so evidence the control was performed. Monitoring did not identify any audit rolls not completed for the audit period; however, without evidence of the monitoring reports, we could not confirm that the secondary monitoring control was performed.</p>	Low	<p>1. A UNT Student Academic Records should retain the monitoring report used to confirm that class audit rolls were completed timely..</p>	<p>The Office of the Registrar will retain an audit roll monitoring report demonstrating that monitoring occurred and all processes were completed the audit roll process.</p>	Ben Heard, Director of Records, Registration and Reports	02/29/18	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-001-SYS	Governance and Regulatory Compliance	Chancellor's Expenditure Review	UNT System	N/A	N/A	N/A	N/A	N/A	N/A	N/A

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-002 UNT	Governance and Regulatory Compliance	President's Expenditure Review	UNT	<p>1. International Travel Registration</p> <p>One international travel trip was not registered as required by UNT System Regulation 08.15000. Travel flight tickets became effective on November 10, 2016. This Regulation requires that all individuals traveling internationally on University business register their travel plans prior to departure.</p> <p>The President completed four international trips after the effective date of the Regulation. The first of the four international trips was not registered.</p>	High	<p>Recommendation for the Office of the President:</p> <p>1.1. a. Develop a process and procedure to ensure that all your University-related international travel is registered prior to departure.</p>	<p>1. a. Of the four international trips taken after the implementation of the System Regulation 08.15000 (Registration of International Travel), one was not registered. Our office has now implemented a process of registering international travels as soon as flights are secured. This process is being implemented in the next few months. It is an important item is not missed. This process has been in place since May 2017, and has been successful in ensuring all international trips have been registered since that time.</p>	Office of the President	1/9/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-002 UNT	Governance and Regulatory Compliance	President's Expenditure Review	UNT	<p>2. Personally Identifiable Information</p> <p>Financial data was not redacted on support documents submitted for travel expense reimbursements. During our review of travel expenses, we noted Personally Identifiable Information (PII) was not redacted from support documents for travel expenses. Specifically, the bank account number, bank and credit card information including card number, security code, and expiration date, on a payment form were not redacted.</p>	High	<p>Recommendations for the Office of the President:</p> <p>2.1. a. Mask credit card and bank account information on support documentation for travel expense reimbursements prior to submission for upload into Perceptive Content.</p>	<p>1. a. Financial data was not redacted on a travel expense reimbursement. Going forward, all travel reimbursements will be redacted. We will ensure that all support documents submitted in support of travel documentation prior to submitting to the BSC. As a last resort fallback, in accordance with the information distributed in the November 2016 BSC Solution source, we will rely on the BSC travel expense reimbursement system to redact PII. We will ensure that the PII for motion and submission are placed into the redaction imaging system. This should not be necessary, as a secondary reviewer will resolve the issue.</p>	Office of the President	1/9/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-002 UNT	Governance and Regulatory Compliance	President's Expenditure Review	UNT	<p>2. Personally identifiable information</p> <p>Financial data was not redacted on support documents submitted for travel expense reimbursements. During our review, we noted Personally identifiable information (PII) was not redacted from support documentation prior to upload in Perceptive Content. Specifically, the bank account number on a check and credit card information, including card number, security code, and expiration date, on a payment form were not redacted.</p>	High	<p>Recommendations for the Office of the President:</p> <p>2.1.b. Develop procedures to help ensure that all PII is appropriately protected.</p>	<p>1.b. Financial data was not redacted on a travel expense reimbursement. Going forward, all travel reimbursements will be reviewed by a second staff member to ensure there is no remaining PII in supporting travel documentation prior to submitting to the BSC. As a result of this review, we noted that the BSC will rely on the BSC travel office to return to the submitter any travel documentation displaying PII for revision and resubmission to ensure there is no PII stored in the imaging system. This should not be necessary, as a secondary reviewer will resolve the issue.</p>	Office of the President	1/9/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-002 UNT	Governance and Regulatory Compliance	President's Expenditure Review	UNT	<p>2. Personally identifiable information</p> <p>Financial data was not redacted on support documents submitted for travel expense reimbursements. During our review of travel expenses, we noted Personally identifiable information (PII) was not redacted from support documentation prior to upload in Perceptive Content. Specifically, the bank account number, security code, and expiration date, on a payment form were not redacted.</p>	High	<p>Recommendations for the Office of the President:</p> <p>2.1.c. Ensure employees in the Office of the President receive training related to the protection of PII.</p>	<p>1.c. Financial data was not redacted on a travel expense reimbursement. Going forward, all travel reimbursements will be reviewed by a second staff member to ensure there is no remaining PII in supporting travel documentation prior to submitting to the BSC. As a result of this review, we noted that the BSC will rely on the BSC travel office to return to the submitter any travel documentation displaying PII for revision and resubmission to ensure there is no PII stored in the imaging system. This should not be necessary, as a secondary reviewer will resolve the issue.</p>	Office of the President	1/9/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-002 UNT	Governance and Regulatory Compliance	President's Expenditure Review	UNT	<p>3. Social Organization Membership Reimbursement</p> <p>UNT System Regulation for calculating social organization membership dues and annual charges were not followed, resulting in inaccurate reimbursement calculations. The President receives business expense reimbursements for social organization membership dues and annual charges in an effort to promote the advancement of education and research and to facilitate favorable community relations. The Controller Operations team is responsible for calculating the proper reimbursement based on information submitted by the Office of the President.</p> <p>During our review of FY17 vouchers, we noted for 3 of 11 (27.3%) months, business expense reimbursement calculations did not follow UNT System Regulation. Specifically, a total of \$574.75 in social organization membership dues were over reimbursed to the President.</p> <p>The President repaid the overpayment amount as soon as this was discovered and Internal Audit confirmed this during this review.</p>	Moderate	<p>Recommendations for Bob Brown, Vice President of Finance and Administration and Interim Vice Chancellor of Finance:</p> <p>3.1.a. In collaboration with the Office of General Counsel, implement the best process regarding Social Organization Memberships.</p> <p>1.a. The Chancellor's Council is actively considering the appropriate method for handling club membership payments. The University of North Texas will adopt the method approved by the Chancellor's Council. I anticipate this will be complete by March 30, 2018.</p>	Bob Brown, Vice President for Finance and Administration	3/29/2018	Closed	
Internal	UNT System Internal Audit	Fiscal Year 2018	18-002 UNT	Governance and Regulatory Compliance	President's Expenditure Review	UNT System	<p>3. Social Organization Membership Reimbursement</p> <p>UNT System Regulation for calculating social organization membership dues and annual charges were not followed, resulting in inaccurate reimbursement calculations. The President receives business expense reimbursements for social organization membership dues and annual charges in an effort to promote the advancement of education and research and to facilitate favorable community relations. The UNT System Controller Operations team is responsible for calculating the proper reimbursement based on information submitted by the Office of the President.</p> <p>During our review of FY17 vouchers, we noted for 3 of 11 (27.3%) months, business expense reimbursement calculations did not follow UNT System Regulation. Specifically, a total of \$774.75 in social organization membership dues were over reimbursed to the President.</p> <p>The President repaid the overpayment amount as soon as this was discovered and Internal Audit confirmed this during this review.</p>	Moderate	<p>Recommendations for Abdul Mohammad, Senior Director of Controller Operations:</p> <p>3.2.a. Determine if any adjustments should be reported to the IRS.</p> <p>2.a. Based on the Controller Operations preliminary assessment, the current Social Club dues reimbursement process satisfies IRS requirements to be reported by the President as taxable income. Since overpayment amount is refunded by the President there may not be any further action needed and report any adjustment to the IRS. But we will make a final determination after further review.</p>	Abdul Mohammad, Senior Director of Controller Operations	3/31/2018	Closed	

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-002 UNT	Governance and Regulatory Compliance	President's Expenditure Review	UNT System	<p>3. Social Organization Membership Reimbursement</p> <p>UNT System Regulation for calculating social organization membership dues and annual charges were not followed, resulting in inaccurate reimbursement calculations. The President receives business expense reimbursements for social organization membership dues and annual charges in an effort to promote the advancement of education and research and to facilitate favorable community relations. The Social Organization Operations team is responsible for calculating the proper reimbursement based on information submitted by the Office of the President.</p> <p>During our review of FY17 vouchers, we noted for 3 of 11 (27.3%) months, business expense reimbursement calculations did not follow UNT System Regulation. Specifically, a total of \$574.75 in social organization membership dues were over reimbursed to the President.</p> <p>The President repaid the overpayment amount as soon as this was discovered and Internal Audit confirmed this during this review.</p>	Moderate	<p>Recommendations for Abdul Mohammad, Senior Director of Controller Operations:</p> <p>3.2.b. Implement a monitoring control to ensure that all social organization membership reimbursements are properly calculated.</p>	<p>2b. As part of the statement and review Controller Operations have already identified controls which will further enhance the current Social Club dues reimbursement process.</p>	Abdul Mohammad, Senior Director of Controller Operations	3/31/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-002 UNT	Governance and Regulatory Compliance	President's Expenditure Review	UNT System	<p>3. Social Organization Membership Reimbursement</p> <p>UNT System Regulation for calculating social organization membership dues and annual charges were not followed, resulting in inaccurate reimbursement calculations. The President receives business expense reimbursements for social organization membership dues and annual charges in an effort to promote the advancement of education and research and to facilitate favorable community relations. The UNT System Controller Operations team is responsible for calculating the proper reimbursement based on information submitted by the Office of the President.</p> <p>During our review of FY17 vouchers, we noted for 3 of 11 (27.3%) months, business expense reimbursement calculations did not follow UNT System Regulation. Specifically, a total of \$774.75 in social organization membership dues were over reimbursed to the President.</p> <p>The President repaid the overpayment amount as soon as this was discovered and Internal Audit confirmed this during this review.</p>	Moderate	<p>Recommendations for Abdul Mohammad, Senior Director of Controller Operations:</p> <p>3.2.c. Educate personnel handling Social Organization Membership on UNT System Regulation 08.3000.</p>	<p>2c. Controller Operations will ensure that personnel who handles Social Club dues reimbursements are educated and trained on the step 1c above and UNT System Regulation section 08.3000.</p>	Abdul Mohammad, Senior Director of Controller Operations	3/31/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-003 ISC	Governance and Regulatory Compliance	President's Expenditure Review	UNT/ISC	<p>1. Social Organization Membership Reimbursement</p> <p>UNT System Regulation for calculating social organization membership dues and annual charges were not followed, resulting in inaccurate reimbursements to the President. The President receives business expense reimbursements for social organization membership dues and annual charges in an effort to promote the advancement of education, research, and to facilitate favorable community relations. The proper reimbursement team is responsible for calculating the proper reimbursement based on information submitted by the Office of the President.</p> <p>During our review of FY 2017 vouchers, we noted for 7 out of 12 (58%) vouchers, business expense reimbursement calculations did not follow UNT System Regulation. Specifically, a total of \$1,571.89 in social organization membership dues and annual charges were over-reimbursed to the President. This amount included a total underpayment of \$104 in allowable athletic club dues and an annual charge of employee holiday fund that were not reimbursed to the President. The President repaid the overpayment amount as soon as this was discovered and confirmed during the review.</p>	Moderate	<p>Recommendation for UNT/ISC Chief Financial Officer:</p> <p>1.1. In collaboration with the Office of General Counsel, review and determine the best process regarding Social Organization Memberships.</p>	<p>1.1. CFO will work with OGC to determine and adopt better process for Club memberships.</p>	Gregory Anderson, UNT/ISC Chief Financial Officer and Nancy Foster, Vice Chancellor of General Counsel	5/31/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-003 ISC	Governance and Regulatory Compliance	President's Expenditure Review	UNT System	<p>1. Social Organization Membership Reimbursement</p> <p>UNT System Regulation for calculating social organization membership dues and annual charges were not followed, resulting in inaccurate reimbursements to the President. The President receives business expense reimbursements for social organization membership dues and annual charges in an effort to promote the advancement of education, research, and to facilitate favorable community relations. The proper reimbursement team is responsible for calculating the proper reimbursement based on information submitted by the Office of the President.</p> <p>During our review of FY 2017 vouchers, we noted for 7 out of 12 (58%) vouchers, business expense reimbursement calculations did not follow UNT System Regulation. Specifically, a total of \$1,571.89 in social organization membership dues and annual charges were over-reimbursed to the President. This amount included a total underpayment of \$104 in allowable athletic club dues and an annual charge of employee holiday fund that were not reimbursed to the President. The President repaid the overpayment amount as soon as this was discovered and confirmed during the review.</p>	Moderate	<p>Recommendations for the Senior Director of Controller Operations:</p> <p>1.2.a. Determine if any adjustments should be reported to the IRS.</p>	<p>2.a. Based on the Controller Operations preliminary assessment, the current Social Club dues reimbursement process satisfies IRS requirements to be reported by the President there may not be any further action needed and report any adjustment to the IRS. But we will make a final determination after further review.</p>	Abdul Mohammad, Senior Director of Controller Operations	3/31/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-003 ISC	Governance and Regulatory Compliance	President's Expenditure Review	UNT System	<p>1. Social Organization Membership Reimbursement</p> <p>UNT System Regulation for calculating social organization membership dues and annual charges were not followed, resulting in inaccurate reimbursement calculations. The President receives business expense reimbursements for social organization membership dues and annual charges in an effort to promote the advancement of education, research, and to facilitate favorable community relations. The proper reimbursement based on information submitted by the Office of the President.</p> <p>During our review of FY 2017 vouchers, we noted for 7 out of 12 (58%) vouchers, business expense reimbursement calculations did not follow UNT System Regulation. Specifically, a total of \$1,571.89 in social organization membership dues and annual charges were over-reimbursed to the President. This amount included a total underpayment of \$104 in allowable athletic club dues and an annual charge of employee holiday fund that were not reimbursed to the President. The President repaid the overpayment amount as soon as this was discovered and confirmed during the review.</p>	Moderate	<p>Recommendations for the Senior Director of Controller Operations:</p> <p>1.2.b. Work with the Office of General Counsel to determine if the current Social Club dues reimbursement process satisfies IRS accountable plan conditions and does not require reimbursements to be reported to IRS as taxable income. Since overpayment amount is reported to IRS as taxable income, we will recommend that the current process be reviewed. But we will make a final determination after further review.</p>	<p>2a. Based on the Controller Operations preliminary assessments, the current Social Club dues reimbursement process satisfies IRS accountable plan conditions and does not require reimbursements to be reported to IRS as taxable income. Since overpayment amount is reported to IRS as taxable income, we will recommend that the current process be reviewed. But we will make a final determination after further review.</p>	Abdul Mohammad, Senior Director of Controller Operations	3/31/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-003 ISC	Governance and Regulatory Compliance	President's Expenditure Review	UNT System	<p>1. Social Organization Membership Reimbursement</p> <p>UNT System Regulation for calculating social organization membership dues and annual charges were not followed, resulting in inaccurate reimbursement calculations. The President receives business expense reimbursements for social organization membership dues and annual charges in an effort to promote the advancement of education, research, and to facilitate favorable community relations. The proper reimbursement based on information submitted by the Office of the President.</p> <p>During our review of FY 2017 vouchers, we noted for 7 out of 12 (58%) vouchers, business expense reimbursement calculations did not follow UNT System Regulation. Specifically, a total of \$1,571.89 in social organization membership dues and annual charges were over-reimbursed to the President. This amount included a total underpayment of \$104 in allowable athletic club dues and an annual charge of employee holiday fund that were not reimbursed to the President. The President repaid the overpayment amount as soon as this was discovered and confirmed during the review.</p>	Moderate	<p>Recommendations for the Senior Director of Controller Operations:</p> <p>1.2.c. Implement a monitoring control to ensure that all Social Organization Membership reimbursements are properly calculated.</p>	<p>2c. As part of the assessment and review Controller Operations have already identified controls which will further enhance the current Social Club dues reimbursement process.</p>	Abdul Mohammad, Senior Director of Controller Operations	3/31/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-003 DAC	Governance and Regulatory Compliance	President's Expenditure Review	UNT System	<p>1. Social Organization Membership Reimbursement</p> <p>UNT System Regulation for calculating social organization membership dues and annual charges were not followed, resulting in the President receiving business expense reimbursements for social organization membership dues and annual charges in an effort to promote the advancement of education, research, and to facilitate favorable community relations.</p> <p>The President's team is responsible for calculating the proper reimbursement based on information submitted by the Office of the President.</p> <p>During our review of FY 2017 vouchers, we noted for 7 out of 12 (58%) vouchers, business expense reimbursement calculations do not follow UNT System Regulation for calculating social organization membership dues and annual charges were over reimbursed to the President. This amount included a total amount of \$104 in allowable athletic club dues and an annual holiday employee holiday fund that were not reimbursed to the President. The President repaid the overpayment amount as soon as this was discovered and confirmed during the review.</p>	Moderate	<p>Recommendations for the Senior Director of Controller Operations:</p> <p>1.2.d. Educate personnel handling social organization membership on the UNT System Regulation Section 08.3000.</p>	<p>1.2.f. Controller Operations will ensure that personnel who handles Social Club dues reimbursements are educated and trained on the step 2c above and UNT System Regulation Section 08.3000.</p>	Amal Mohammad, Senior Director of Controller Operations	3/31/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-004 DAL	Governance and Regulatory Compliance	President's Expenditure Review	UNT Dallas	N/A	N/A	N/A	N/A	N/A	N/A	N/A

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2018	18-013 UNT	Governance and Regulatory Compliance	Provost Transition Audit	UNT	<p>1. Chain Faculty Award Funds</p> <p>Chain Faculty Award Funds were deposited into the incorrect faculty project ID, deposited late, and unused Chain Faculty Award funds were deposited into the incorrect faculty project ID. Annually, Chain Faculty Award funds are administered to faculty based on proposals reviewed by the Provost and Vice President for Academic Affairs. These funds are obtained from UNT Foundation and deposited by the Provost's Office to the applicable faculty's project ID during October 2016; however, these funds were never used. At the end of the project period, unused Chain Faculty Award funds are to be returned to UNT Foundation in order to be administered to the appropriate faculty project ID. However, the Provost's Office did not return the funds to UNT Foundation since the implementation of the new chart of accounts system during March 2016. Four deposits were made within September 1, 2016 through November 30, 2017 totaling \$54,852. One deposit totaling \$23,352 was made during October 2016 and deposited one business day late. The three deposits made afterwards were made within three business days.</p>	High	<p>Recommendations for Jennifer Cowley, Provost and Vice President for Academic Affairs:</p> <p>1.1.a. Develop procedures to ensure deposits made for Chain Faculty Award funds are reconciled and deposited into the correct faculty project ID.</p>	<p>1.a. I agree with the recommendation. Office of the Provost cash handling procedures will be updated to provide additional safeguards. All chart field entries, including project IDs, will require a secondary reviewer. Furthermore, the procedures will require reconciling against the general ledger to ensure that deposits are properly recorded. This will be observed at least one time where a data entry error was made.</p>	Robert Walling, Vice Provost for Academic Resources	2/28/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-013 UNT	Governance and Regulatory Compliance	Provost Transition Audit	UNT	<p>1. Chain Faculty Award Funds</p> <p>Chain Faculty Award Funds were deposited into the incorrect faculty project ID, deposited late, and unused Chain Faculty Award funds have not been returned to UNT Foundation since March 2016. Annually, Chain Faculty Award funds are administered to faculty based on proposals reviewed by the Provost and Vice President for Academic Affairs. These funds are obtained from UNT Foundation and deposited by the Provost's Office to the applicable faculty's project ID. Internal Audit noted one Chain Faculty Award check totaling \$23,352 was deposited into the incorrect faculty project ID during November 30, 2017. At the end of the project period, unused Chain Faculty Award funds are to be returned to UNT Foundation in order to be administered again per internal procedures. Provost Office staff stated funds had not been returned since the implementation of the new chart of accounts system during March 2016. Four deposits were made within September 1, 2016 through November 30, 2017 totaling \$54,852. One deposit totaling \$23,352 was made during October 2016 and deposited one business day late. The three deposits made afterwards were made within three business days.</p>	High	<p>Recommendations for Jennifer Cowley, Provost and Vice President for Academic Affairs:</p> <p>1.1.b. Develop procedures and coordinate with UNT Foundation to ensure all unused Chain Faculty Award funds are returned to UNT Foundation at the end of the project period.</p>	<p>1.b. I agree with the recommendation. Internal business procedures will be updated to ensure unused Chain awards are returned to the UNT Foundation at the end of the project period.</p>	Robert Walling, Vice Provost for Academic Resources	2/28/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2018	18-0186 UNT	Governance and Regulatory Compliance	IT Business Continuity Planning - College of Education	UNT	1. Business Continuity Plan not created A Business Continuity Plan has not been created and tested. COE does not have a Business Continuity Plan (BCP) in place. Paul Jones is leading the effort to create a BCP and has started contacting the departments and areas in the College of Education to get their feedback on what apps/resources are important to them.	High	Recommendation for Dean of the College of Education: 1.1. a. COE should develop a BCP for critical IT services in the event of a disruption to IT services.	1. A first draft of a BCP has been developed, college will refine and test it.	Paul Jones, Director, Office of Technology	5/12/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-0186 UNT	Governance and Regulatory Compliance	IT Business Continuity Planning - College of Education	UNT	1. Business Continuity Plan not created A Business Continuity Plan has not been created and tested. COE does not have a Business Continuity Plan (BCP) in place. Paul Jones is leading the effort to create a BCP and has started contacting the departments and areas in the College of Education to get their feedback on what apps/resources are important to them.	High	Recommendation for Dean of the College of Education: 1.1. b. COE should test their BCP once it has been developed.	N/A	N/A	5/12/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2018	18-0186 UNT	Governance and Regulatory Compliance	IT Business Continuity Planning - College of Education	UNT	<p>2. Inventory not performed</p> <p>An inventory of IT services has not been created. The College of Education (COE) had not created an inventory of all IT services and applications used by their faculty, staff, and students. Paul Hons is leading the BCP effort, and has started contacting the departments and areas in the College of Education to get their feedback on what apps/resources are important to them.</p>	High	<p>Recommendation for Dean of the College of Education:</p> <p>2.1 a. COE should develop an inventory of all IT applications and services used by faculty, staff and students for use in performing a BIA.</p>	<p>1.a. An inventory has been created, refinement will continue.</p>	Paul Hons, Director, Office of Technology	5/12/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-0186 UNT	Governance and Regulatory Compliance	IT Business Continuity Planning - College of Education	UNT	<p>3. Business Impact Analysis not performed</p> <p>A Business Impact Analysis has not been performed. The College of Education (COE) had not evaluated their application/service inventory, identified their mission critical IT applications/services, and risk ranked them for priority. Paul Hons is leading the BCP effort, and has started contacting the departments and areas in the College of Education to get their feedback on what apps/resources are important to them.</p>	High	<p>Recommendation for Dean of the College of Education:</p> <p>3.1 a. COE should perform a BIA to determine critical applications requiring a BCP.</p>	<p>1.a. Preliminary BIA has been adopted. Testing will continue until final version.</p>	Paul Hons, Director, Office of Technology	5/12/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2018	18-0184 UNT	Governance and Regulatory Compliance	IT Business Continuity Planning - College of Education	UNT	<p>A. Individual not assigned to lead Business Continuity Plan effort.</p> <p>An individual has not been assigned to lead the Business Continuity Plan effort.</p> <p>As noted during the Finance Conference, the College of Education (COE) had not assigned a person or persons the responsibility for developing, maintaining and testing a Business Continuity Plan (BCP) for the college.</p>	Moderate	<p>Recommendation for Dean of the College of Education:</p> <p>A.1. a. COE should assign a person or person to lead the development, maintenance, and testing of the college's BCP.</p>	<p>1. a. Devin Bonner, tasked Paul Hoos, Director, College of Education Technologies (COETech), with leading the BCP effort.</p>	Devin Bonner, Dean of the College of Education.	2/29/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-0184 UNT	Governance and Regulatory Compliance	IT Business Continuity Planning - College of Business	UNT	<p>1. Business Continuity Plan not created</p> <p>A Business Continuity Plan has not been created and tested. The College of Business (CoB) does not have a Business Continuity Plan (BCP) in place. Terry Polheim and Daniel Duncan are leading the effort to create a BCP and have started contacting the departments and areas in the College of Business to get their feedback on what apparatuses are important to them.</p>	High	<p>Recommendation for Dean of the College of Business:</p> <p>1.1. a. CoB should develop a BCP for critical IT services in the event of a disruption to IT services.</p>	<p>1. a. and 1b. A final version of a BCP has been developed. College will obtain approvals and test it.</p>	Terry Polheim, Academic Associate Dean CoB	2/29/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2018	18-0184 UNT	Governance and Regulatory Compliance	IT Business Continuity Planning - College of Business	UNT	<p>1. Business Continuity Plan not created</p> <p>A Business Continuity Plan has not been created and tested. The College of Business (CoB) does not have a Business Continuity Plan. The College of Business has not conducted a risk assessment and has not started conducting the departments and areas in the College of Business to get their feedback on what apps/resources are important to them.</p>	High	<p>Recommendation for Dean of the College of Business:</p> <p>1.1. CoB should test their BCP once it has been developed.</p> <p>1.1. b. CoB should test their BCP once it has been developed.</p>	<p>1. a. and 1. b. A final version of a BCP has been developed. College will obtain approvals and test it.</p>	Terry Pohlen, Academic Associate Dean CoB	2/22/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-0184 UNT	Governance and Regulatory Compliance	IT Business Continuity Planning - College of Business	UNT	<p>2. Inventory not performed</p> <p>An inventory of IT services has not been created. The College of Business (CoB) has not created an inventory, identifying all IT services and applications used by their faculty, staff, and students. The College of Business has not conducted a risk assessment and areas in the College of Business to get their feedback on what apps/resources are important to them.</p>	High	<p>Recommendation for Dean of the College of Business:</p> <p>2.1. a. CoB should develop an inventory of all IT applications and services used by faculty, staff and students for use in performing a BIA.</p>	<p>1. a. An inventory has been created, refinement will continue.</p>	Terry Pohlen, Academic Associate Dean CoB	2/22/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2018	18-0184/UNT	Governance and Regulatory Compliance	IT Business Continuity Planning - College of Business	UNT	<p>3. Business Impact Analysis not performed. The College of Business (CoB) had not evaluated their business impact analysis. The College of Business IT applications, servers, and files needed them for support. Terry Pohlen and David Duncan are leading the BCP effort, and have started work on a Business Impact Analysis (BIA), by contacting the departments and areas in the College of Business to get their feedback on what applications/resources are important to them.</p>	High	Recommendation for Dean of the College of Business: 3.1. a. CoB should perform a BIA to determine critical applications requiring a BCP.	1. a. Preliminary BIA has been adopted. College will review and obtain approvals.	Terry Pohlen, Academic Associate Dean CoB	2/22/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-0184/UNT	Governance and Regulatory Compliance	IT Business Continuity Planning - College of Business	UNT	<p>4. Individual not assigned to lead Business Continuity Plan effort. An individual has not been assigned to lead the Business Continuity Plan effort. As determined during the Entrance Conference, the College of Business (CoB) had not assigned a person or persons the responsibility for developing, maintaining and testing a Business Continuity Plan (BCP) for the college.</p>	Moderate	Recommendation for Dean of the College of Business: A1. a. CoB should assign a person or persons to lead the development, maintenance, and testing of the college's BCP.	1. a. Dean Wiley tasked Terry Pohlen, Academic Associate Dean, and David Duncan, Senior IT Support Manager, with leading the BCP effort.	Marilyn Wiley, Dean of the College of Business.	2/22/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2018	17-418 ISC	Governance and Regulatory Compliance	Graduate Medical Education	UNTHSC	<p>1. Billing for Services Provided</p> <p>During our review of accounts receivable related to TCOM and financial monitoring the following were identified:</p> <ul style="list-style-type: none"> Multiple individuals in the Office of Finance & Planning have security access rights to approve and post journal entries to the General Ledger (GL). Delays in recording and depositing of payments have resulted from checks being sent to other departments across UNTHSC. There are no departmental accounts receivable policies and procedures to identify the roles and responsibilities. There are no departmental accounts receivable policies and procedures to identify the roles and responsibilities. There are no departmental accounts receivable policies and procedures to identify the roles and responsibilities. System Controller's Office to be appropriately recorded in the General Ledger. 	High	<p>Recommendations for the UNTHSC Chief Financial Officer, Interim Dean of TCOM and Senior Academic and Business Director, TCOM:</p> <p>1.1.a. Work with UNT System Controller at TSC to ensure the accounts receivable balances listed on the master billing spreadsheet have not been received and possibly posted to the incorrect General Ledger account.</p>	<p>1.a. VP for Finance and Planning & Senior Academic & Business Director, VP Finance & Administration UNT Health, will coordinate with UNT System Controller to see if any balances have been received and posted incorrectly.</p>	Gregory R. Anderson, Executive Vice President for Finance & Planning, UNT Health, Dr. Frank Filpato, Interim Dean of TCOM and A.J. Randolph, Senior Academic and Business Director, TCOM	10/21/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	17-418 ISC	Governance and Regulatory Compliance	Graduate Medical Education	UNTHSC	<p>1. Billing for Services Provided</p> <p>During our review of accounts receivable related to TCOM and financial monitoring the following were identified:</p> <ul style="list-style-type: none"> Multiple individuals in the Office of Finance & Planning have security access rights to approve and post journal entries to the General Ledger (GL). Delays in recording and depositing of payments have resulted from checks being sent to other departments across UNTHSC. There are no departmental accounts receivable policies and procedures to identify the roles and responsibilities. There are no departmental accounts receivable policies and procedures to identify the roles and responsibilities. There are no departmental accounts receivable policies and procedures to identify the roles and responsibilities. System Controller's Office to be appropriately recorded in the General Ledger. 	High	<p>Recommendations for the UNTHSC Chief Financial Officer, Interim Dean of TCOM and Senior Academic and Business Director, TCOM:</p> <p>1.1.a. Once validation has been performed either: 1) Work with Associate Vice Chancellor & Controller to identify the correct General Ledger account. 2) Identify any other individuals with accounts receivables in the General Ledger prior to the 2018 issuance of the Consolidated Annual Financial Report. 3) Work with Associate Vice Chancellor & Controller to ensure that the correct General Ledger account is used for the Financial Report due to the material unrecorded account receivable amount. Determine if there is a potential misstatement or footnote required to the Consolidated Annual Financial Report.</p>	<p>1b. All reclassifications will be made after verified and recorded to AIR in 2018 CAFR in coordination with UNT System Controller</p>	Gregory R. Anderson, Executive Vice President for Finance & Planning, UNT Health, Dr. Frank Filpato, Interim Dean of TCOM and A.J. Randolph, Senior Academic and Business Director, TCOM	10/21/2018	Open

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2018	17-418 ISC	Governance and Regulatory Compliance	Graduate Medical Education	UNTHSC	<p>1. Billing for Services Provided</p> <p>During our review of accounts receivable related to TCOM and financial monitoring the following were identified:</p> <ul style="list-style-type: none"> Multiple individuals in the Office of Finance & Planning have security access rights to approve and post journal entries to the General Ledger (GL). Delays in recording and depositing of payments have resulted from checks being sent to other departments across UNTHSC. There are no departmental accounts receivable policies and procedures to identify the roles and responsibilities. There are no departmental accounts receivable policies and procedures to identify the roles and responsibilities. System Controller's Office to be appropriately recorded in the General Ledger. 	High	<p>Recommendations for the UNTHSC Chief Financial Officer, Interim Dean of TCOM and Senior Academic and Business Director, TCOM:</p> <p>1.1.c. Review and amend agreements with affiliated facilities to require electronic deposit of funds due to the institution, if electronic depositing is not feasible, utilize the lockbox at UNTHSC.</p>	<p>1.c. Any TCOM agreements will be reviewed by Interim Dean and Senior Academic & Business Director, VP, Finance & Administration UNT Health, and ET will be set up.</p>	Gregory R. Anderson, Executive Vice President for Finance & Chief Financial Officer, UNTHSC, Dr. Frank Filpato, Interim Dean of TCOM and Senior Academic and Business Director, TCOM	10/21/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	17-418 ISC	Governance and Regulatory Compliance	Graduate Medical Education	UNTHSC	<p>1. Billing for Services Provided</p> <p>During our review of accounts receivable related to TCOM and financial monitoring the following were identified:</p> <ul style="list-style-type: none"> Multiple individuals in the Office of Finance & Planning have security access rights to approve and post journal entries to the General Ledger (GL). Delays in recording and depositing of payments have resulted from checks being sent to other departments across UNTHSC. There have been instances where checks received did not have sufficient information therefore requiring further research to determine whether funds were GME related. There are no departmental accounts receivable policies and procedures to identify the roles and responsibilities. There are no departmental accounts receivable policies and procedures to identify the roles and responsibilities. System Controller's Office to be appropriately recorded in the General Ledger. 	High	<p>Recommendations for the UNTHSC Chief Financial Officer, Interim Dean of TCOM and Senior Academic and Business Director, TCOM:</p> <p>1.1.d. Immediately start recovery efforts for the uncollectible accounts receivable funds, if needed or write-off uncollectible balances.</p>	<p>1.d. For any verified receivables, recovery efforts will be employed and if write off needed, the VP for Finance and Planning & Senior Academic and Business Director will work with the UNTHSC Controller to determine the amount of funds to write-off.</p>	Gregory R. Anderson, Executive Vice President for Finance & Chief Financial Officer, UNTHSC, Dr. Frank Filpato, Interim Dean of TCOM and A.J. Randolph, Senior Academic and Business Director, TCOM	10/21/2018	Open

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2018	17-418 ISC	Governance and Regulatory Compliance	Graduate Medical Education	UNTHSC	<p>1. Billing for Services Provided</p> <p>During our review of accounts receivable related to TCOW and financial monitoring the following were identified:</p> <ul style="list-style-type: none"> Multiple individuals in the Office of Finance & Planning have security access rights to approve and post journal entries to the General Ledger (GL). Delays in recording and depositing of payments have resulted from checks being sent to other departments across UNTHSC. There are no departmental accounts receivable policies and procedures in place to identify the roles and responsibilities. There are no departmental accounts receivable policies and procedures to identify the roles and responsibilities. There are no departmental accounts receivable policies and procedures to identify the roles and responsibilities. System Controller's Office to be appropriately recorded in the General Ledger. 	High	<p>Recommendations for the UNTHSC Chief Financial Officer:</p> <p>1.2.a. Work with the Associate Vice Chancellor & Controller to remove access rights from users which are not commensurate with their job function.</p>	<p>1.a. As provided to Audit on Feb. 26, 2018, all access was removed from users which were not commensurate with their job functions on December 12, 2017.</p>	Gregory R. Anderson, Executive Vice President for Finance & Chief Financial Officer, UNTHSC	10/21/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	17-418 ISC	Governance and Regulatory Compliance	Graduate Medical Education	UNTHSC	<p>1. Billing for Services Provided</p> <p>During our review of accounts receivable related to TCOW and financial monitoring the following were identified:</p> <ul style="list-style-type: none"> Multiple individuals in the Office of Finance & Planning have security access rights to approve and post journal entries to the General Ledger (GL). Delays in recording and depositing of payments have resulted from checks being sent to other departments across UNTHSC. There are no departmental accounts receivable policies and procedures in place to identify the roles and responsibilities. There are no departmental accounts receivable policies and procedures to identify the roles and responsibilities. System Controller's Office to be appropriately recorded in the General Ledger. 	High	<p>Recommendations for the UNTHSC Chief Financial Officer:</p> <p>1.2.b. Work with schools/colleges to ensure they have established and implemented policies and procedures for billing, accounting, collection, and monitoring of all accounts receivable and provide a copy to the UNT System Controller's Office for recording and control purposes.</p>	<p>2.b. The CFO will oversee work with the schools/colleges to ensure procedures are established for billing, recording, collection and monitoring of all accounts receivable and provide a copy to the UNT System Controller's office.</p>	Gregory R. Anderson, Executive Vice President for Finance & Chief Financial Officer, UNTHSC	10/21/2018	Open

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2018	17-418 ISC	Governance and Regulatory Compliance	Graduate Medical Education	UNTHSC	<p>1. Billing for Services Provided</p> <p>During our review of accounts receivable related to TCOW and financial monitoring the following were identified:</p> <ul style="list-style-type: none"> Multiple individuals in the Office of Finance & Planning have security access rights to approve and post journal entries to the General Ledger (GL). Delays in recording and depositing of payments have resulted from checks being sent to other departments across UNTHSC. There are no departmental accounts receivable policies and procedures to identify the roles and responsibilities. There are no departmental accounts receivable policies and procedures to identify the roles and responsibilities. There are no departmental accounts receivable policies and procedures to identify the roles and responsibilities. System Controller's Office to be appropriately recorded in the General Ledger. 	High	<p>Recommendations for the UNTHSC Chief Financial Officer:</p> <p>1.2.z. Identify all departments that produce invoices for services rendered to patients and ensure that the General Ledger has appropriate security access rights to approve and post journal entries to the General Ledger (GL).</p> <p>1.2.d. Require all departments that generate invoices to maintain an aging schedule for all Accounts Receivable to help with all collection activity.</p>	<p>1z. The CFO will identify department that invoice and will direct the departments on invoicing and will work with the UNT System Controller that all receivables are accurately reflected in the general ledger.</p>	Gregory R. Anderson, Executive Vice President for Finance & Chief Financial Officer, UNTHSC	10/31/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	17-418 ISC	Governance and Regulatory Compliance	Graduate Medical Education	UNTHSC	<p>1. Billing for Services Provided</p> <p>During our review of accounts receivable related to TCOW and financial monitoring the following were identified:</p> <ul style="list-style-type: none"> Multiple individuals in the Office of Finance & Planning have security access rights to approve and post journal entries to the General Ledger (GL). Delays in recording and depositing of payments have resulted from checks being sent to other departments across UNTHSC. There are no departmental accounts receivable policies and procedures to identify the roles and responsibilities. There are no departmental accounts receivable policies and procedures to identify the roles and responsibilities. System Controller's Office to be appropriately recorded in the General Ledger. 	High	<p>Recommendations for the UNTHSC Chief Financial Officer:</p> <p>1.2.d. Require all departments that generate invoices to maintain an aging schedule for all Accounts Receivable to help with all collection activity.</p>	<p>1d. The CFO will require that all invoices regardless of department be maintained on an aging schedule.</p>	Gregory R. Anderson, Executive Vice President for Finance & Chief Financial Officer, UNTHSC	10/31/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	17-418 ISC	Governance and Regulatory Compliance	Graduate Medical Education	UNTHSC	<p>2. Contract Oversight</p> <p>GME contract agreements were not in compliance with institutional policies and procedures. Specifically, the following were identified:</p> <ul style="list-style-type: none"> • 27 out of 63 (43%) agreements were signed by either parties on September 27, 2017. • 27 out of 63 (43%) agreements were signed by both UNTHSC and the contracting party after the contract effective start date. • 8 out of 63 (13%) agreements were signed by UNTHSC after the contract effective start date. • 31 agreements did not have an audit clause allowing the institution the right to inspect and audit records maintained by the affiliated hospitals. • Internal Audit was informed of existing verbal agreements between UNTHSC and contract parties. 	High	<p>Recommendations for the Executive Vice President of Clinical Affairs:</p> <p>2.1.a. Collaborate with Interim Dean of TCOM to modify and update the current GME contract process to ensure the following:</p> <ul style="list-style-type: none"> • All contracts are routed to the Office of General Counsel, Contract Administration, and any other pertinent parties prior to providing services. • All contracts are signed and dated prior to commencement for any duties or actions. • Ensure all individuals are held accountable in accordance with UNTHSC policy. 	<p>1.a. The Executive Vice President, Clinical Affairs will implement a rigorous management program with a standardized, logical and documented workflow for a contract management system for UNTHSC. Specific attention will be directed to Graduate Medical Education. Management processes shown as discovered efforts will be made to improve these processes as well. Success will be defined as successful implementation of a robust contract management system that is efficient, timely, compliant and responsive to both internal and external stakeholders. A campus-wide notification will be issued that all contract concerning Graduate Medical Education or student clinical or administrative experiential learning activities be noted on receipt or upon signatory internally to the Office of Contract Administration.</p>	Dr. Michael Hicks, Executive Vice President, Clinical Affairs	10/21/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	17-418 ISC	Governance and Regulatory Compliance	Graduate Medical Education	UNTHSC	<p>2. Contract Oversight</p> <p>GME contract agreements were not in compliance with institutional policies and procedures. Specifically, the following were identified:</p> <ul style="list-style-type: none"> • Contract Number 2017-0388 between Weathersford Regional Medical Center and UNTHSC was not signed by either parties. • However, Exhibit B of the agreement which details the commencement was signed by the CEO of the contracting party prior to the effective but not by UNTHSC management. After request of the institution, TCOM obtained signatures from both parties on September 27, 2017. • 8 out of 63 (13%) agreements were signed by both UNTHSC and the contracting party after the contract effective start date. • 31 agreements did not have an audit clause allowing the institution the right to inspect and audit records maintained by the affiliated hospitals. • Internal Audit was informed of existing verbal agreements between UNTHSC and contract parties. 	High	<p>Recommendations for the Executive Vice President of Clinical Affairs:</p> <p>2.1.b. Evaluate the contracting process for other UNTHSC institutional programs and determine if processes requires modification.</p>	<p>1.b. The Executive Vice President, Clinical Affairs will convene a task force with broad representation from across the campus to identify and assess contractual relationships pertaining to clinical training. The task force will:</p> <ul style="list-style-type: none"> • Identify, review and categorize existing contractual relationships • Complete a gap analysis of current and future needs compared to industry best practices • Standardize language as allowed by law, regulation and accreditation requirements • Obtain necessary authorizations to validate the contractual relationships with force of law 	Dr. Michael Hicks, Executive Vice President, Clinical Affairs	10/21/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	17-418 ISC	Governance and Regulatory Compliance	Graduate Medical Education	UNTHSC	<p>2. Contract Oversight</p> <p>GME contract agreements were not in compliance with institutional policies and procedures. Specifically, the following were identified:</p> <ul style="list-style-type: none"> • 27 out of 63 (43%) agreements were signed by both UNTHSC and the contracting party after the contract effective start date. • 8 out of 63 (13%) agreements were signed by UNTHSC after the contract effective start date. • 31 agreements did not have an audit clause allowing the institution the right to inspect and audit records maintained by the affiliated hospitals. • Internal Audit was informed of existing verbal agreements between UNTHSC and contract parties. 	High	<p>Recommendations for the Director of Contract Administration:</p> <p>2.2.a. Review all contracts for sufficiency and completeness (e.g. signed and dated prior to commencement for any duties or actions).</p>	<p>2a. All contracts received by the Office of Contract Administration (OCA) showing a start date prior to full execution of the contract are not processed further. OCA will consult with the initiating department and/or the second contracting party to adjust the start date as appropriate. OCA will ensure that established policies and procedures for processing business contracts are followed by their respective areas so that OCA can review and process for execution all UNTHSC business contracts. OCA will work with UNTHSC leadership in making sure all contracts go through OCA.</p>	Carolyn Cross, Director of Contract Administration	8/31/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	17-418 ISC	Governance and Regulatory Compliance	Graduate Medical Education	UNTHSC	<p>2. Contract Oversight</p> <p>GME contract agreements were not in compliance with institutional policies and procedures. Specifically, the following were identified:</p> <ul style="list-style-type: none"> • Contract Number 2017-0388 between Weatherford Regional Medical Center and UNTHSC was not signed by either parties. However, this is a verbal agreement between the two parties to the effective but not by UNTHSC management. After request of the contracting party after the contract effective start date. • 8 out of 63 (13%) agreements were signed by both UNTHSC and the contracting party after the contract effective start date. • 31 agreements did not have an audit clause allowing the institution the right to inspect and audit records maintained by the affiliated hospitals. • Internal Audit was informed of existing verbal agreements between UNTHSC and contract parties. 	High	<p>Recommendations for the Director of Contract Administration:</p> <p>2.2.b. Once all contracts have been reviewed by all parties, retain executed contract in the contract repository database.</p>	<p>2b. The Office of Contract Administration will maintain electronic records of UNTHSC business contracts in Total Contract Management and repository administered by OCA. UNTHSC executive leadership shall ensure that established policies and procedures for processing business contracts are followed by their respective areas so that OCA can review and process for execution all UNTHSC business contracts. OCA will work with UNTHSC leadership in making sure all contracts go through OCA.</p>	Carolyn Cross, Director of Contract Administration	8/31/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	17-418 ISC	Governance and Regulatory Compliance	Graduate Medical Education	UNTSC	3. Lack of Comprehensive Graduate Medical Education Policies and Procedures Although, there are Texas Osteopathic Postdoctoral Training Institutions (OPTI) policies and procedures written, which are the academic sponsor for Graduate Medical Education (GME), they were not comprehensive to support and govern the deployment of GME activities.	High	Recommendations for the Executive Vice President of Clinical Affairs: 3.1.a. Determine whether other institutional programs in place are sufficient to provide students comprehensive policies and procedures to govern activities. 3.1.b. Once identified, confer with peer institutions and develop institutional policies and procedures to assist in the deployment of all identified programs within UNTSC.	1.a. The Executive Vice President, Clinical Affairs commit to performing a comprehensive internal review of UNTSC policies relative to GME and other clinically oriented experiential learning and then evaluate their completeness and effectiveness compared to peer institutions	Dr. Michael Hicks, Executive Vice President, Clinical Affairs	10/31/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	17-418 ISC	Governance and Regulatory Compliance	Graduate Medical Education	UNTSC	3. Lack of Comprehensive Graduate Medical Education Policies and Procedures Although, there are Texas Osteopathic Postdoctoral Training Institutions (OPTI) policies and procedures written, which are the academic sponsor for Graduate Medical Education (GME), they were not comprehensive to support and govern the deployment of GME activities.	High	Recommendations for the Executive Vice President of Clinical Affairs: 3.1.a. Determine whether other institutional programs in place are sufficient to provide students comprehensive policies and procedures to govern activities. 3.1.b. Once identified, confer with peer institutions and develop institutional policies and procedures to assist in the deployment of all identified programs within UNTSC.	1.b. Develop institutional policies and procedures to assist in the deployment of all identified programs within UNTSC.	Dr. Michael Hicks, Executive Vice President, Clinical Affairs	10/31/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	17-418 ISC	Governance and Regulatory Compliance	Graduate Medical Education	UNTISC	<p>3. Lack of Comprehensive Graduate Medical Education Policies and Procedures</p> <p>Although, there are Texas Osteopathic Postdoctoral Training Institutions (OPTI) policies and procedures written, which are the academic sponsor for Graduate Medical Education (GME), they were not comprehensive to support and govern the deployment of GME activities.</p>	High	<p>Recommendations for the Executive Vice President of Clinical Affairs:</p> <p>3.1.c. Follow the UNTISC approval protocol for policy development.</p>	<p>1.c. Follow the UNTISC approval protocol for policy development.</p>	Dr. Michael Hicks, Executive Vice President, Clinical Affairs	10/27/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	17-418 ISC	Governance and Regulatory Compliance	Graduate Medical Education	UNTISC	<p>3. Lack of Comprehensive Graduate Medical Education Policies and Procedures</p> <p>Although, there are Texas Osteopathic Postdoctoral Training Institutions (OPTI) policies and procedures written, which are the academic sponsor for Graduate Medical Education (GME), they were not comprehensive to support and govern the deployment of GME activities.</p>	High	<p>Recommendations for the Executive Vice President of Clinical Affairs:</p> <p>3.1.d. Communicate policies and procedures to all stakeholders.</p>	<p>1.d. Communicate policies and procedures to all stakeholders.</p>	Dr. Michael Hicks, Executive Vice President, Clinical Affairs	10/20/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Expected Implementation Date	Responsible for Implementation	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-0124 UNT	Governance and Regulatory Compliance	Counseling and Testing Services Audit	UNT	<p>1. Protected Health Information Training</p> <p>UNT Counseling Center provided general information regarding Protected Health Information (PHI) during employee orientation, but the training was not robust and did not require an employee attestation. Based on Internal Audit's interviews and discussions, management believed their PHI training was sufficient for their operations. However, due to the sensitive nature of client information, a more comprehensive training program is required to comply with the Texas Medical Records Privacy Act (Texas House Bill 3007/ Texas Health & Safety Code § 181) and UNT Policy 07.010 Protected Health Information Privacy.</p>	Moderate	<p>Recommendations for Dr. Tamara Knapp-Groz, Senior Director of Counseling and Testing Services:</p> <p>1.1. a. Coordinate with Institutional Compliance to develop a written or electronic statement attesting to the completion of the training and retain documentation in accordance with Texas Medical Records Privacy Act, and UNT Policy 07.010 Protected Health Information Privacy.</p>	<p>1. a. UNT Counseling Center obtained the HIPAA training materials used by the UNT Department of Psychology, which covered PHI training and completed the training for all staff on 2/20/2018.</p>	2/20/2018	Tamara Knapp-Groz, Senior Director of Counseling and Testing Services	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-0124 UNT	Governance and Regulatory Compliance	Counseling and Testing Services Audit	UNT	<p>1. Protected Health Information Training</p> <p>UNT Counseling Center provided general information regarding Protected Health Information (PHI) during employee orientation, but the training was not robust and did not require an employee attestation. Based on Internal Audit's interviews and discussions, management believed their PHI training was sufficient for their operations. However, due to the sensitive nature of client information, a more comprehensive training program is required to comply with the Texas Medical Records Privacy Act (Texas House Bill 3007/ Texas Health & Safety Code § 181) and UNT Policy 07.010 Protected Health Information Privacy.</p>	Moderate	<p>Recommendations for Dr. Tamara Knapp-Groz, Senior Director of Counseling and Testing Services:</p> <p>1.1. b. Require all Counseling Center employees and students to complete a written or electronic statement attesting to the completion of the training and retain documentation in accordance with Texas Medical Records Privacy Act, and UNT Policy 07.010 Protected Health Information Privacy.</p>	<p>1. b. Completed 2/20/18. Annual renewal in 2019 is already scheduled. Also, New Employee Orientation and Training Orientation checklists have added this as a requirement.</p>	2/20/2018	Tamara Knapp-Groz, Senior Director of Counseling and Testing Services	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-0124 UNT	Governance and Regulatory Compliance	Counseling and Testing Services Audit	UNT	<p>2. Purchasing Card Expenditures</p> <p>UNT Counseling and Testing Services did not follow UNT System Purchasing Guide requirements regarding approver, reconciler, and signature verification for vendor status documentation verification for purchases \$500 and over.</p> <p>Internal Audit reviewed all card statements for the scope of September 1, 2016 through December 31, 2017 and tested 226 card transactions totaling \$29,363.43 for Counseling and Testing Services.</p> <ul style="list-style-type: none"> • 30 of 30 (100%) card statements did not have an approver's signature. • 6 of 30 (20%) card statements did not have a reconciler's signature. • 12 of 30 (6.67%) card statements did not have a cardholder's signature and • 13 of 13 (100%) card purchases \$500 or greater did not have vendor status check verification. 	Moderate	<p>Recommendations for Dr. Tamara Knapp-Groz, Senior Director of Counseling and Testing Services:</p> <p>2.1.a. Develop procedures to ensure all card statements are reviewed and signed by cardholder, reconciler, and approver. Review and update the UNT System Purchasing Card Guide, 2.1.8 in accordance with UNT System Purchasing Card Guide, 2.1.8 Reporting.</p>	<p>1.a. A hyperlink was added to the Counseling and Testing Services Office Manager Manual directing to the UNT System Purchasing Card Guide with all procedures, including the process that all card statements are reviewed and signed by cardholder, reconciler, and approver. The updated manual was posted to the UNT System Purchasing Card Guide, 2.1.8 in accordance with UNT System Purchasing Card Guide, 2.1.8 Reporting.</p>	Tamara Knapp-Groz, Senior Director of Counseling and Testing Services	5/27/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-0124 UNT	Governance and Regulatory Compliance	Counseling and Testing Services Audit	UNT	<p>2. Purchasing Card Expenditures</p> <p>UNT Counseling and Testing Services did not follow UNT System Purchasing Guide requirements regarding approver, reconciler, and cardholder signature, and vendor status documentation verification for purchases \$500 and over.</p> <p>Internal Audit reviewed all card statements for the scope of September 1, 2016 through December 31, 2017 and tested 226 card transactions totaling \$29,363.43 for Counseling and Testing Services. The following issues were noted:</p> <ul style="list-style-type: none"> • 30 of 30 (100%) card statements did not have an approver's signature. • 6 of 30 (20%) card statements did not have a reconciler's signature. • 2 of 30 (6.67%) card statements did not have a cardholder's signature and • 13 of 13 (100%) card purchases \$500 or greater did not have vendor status check verification. 	Moderate	<p>Recommendations for Dr. Tamara Knapp-Groz, Senior Director of Counseling and Testing Services:</p> <p>2.1.b. Ensure all cardholders, reconcilers, and approvers receive card refresher training annually in accordance with UNT System Purchasing Card Guide, 1.4 Training.</p>	<p>1.b. Per the Card Manager, new annual training is currently being developed so the annual refresher training is no active, however, approvers completed card training on 4/16/18. Refresher training will be scheduled every spring.</p>	Tamara Knapp-Groz, Senior Director of Counseling and Testing Services	4/16/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-0124 UNT	Governance and Regulatory Compliance	Counseling and Testing Services Audit	UNT	<p>2. Purchasing Card Expenditures</p> <p>UNT Counseling and Testing Services did not follow UNT System Purchasing Guide requirements regarding approver, reconciler, and signature verification for vendor status documentation verification for purchases \$500 and over.</p> <p>Internal Audit reviewed all card statements for the scope of September 1, 2016 through December 31, 2017 and tested 226 card transactions totaling \$29,383.43 for Counseling and Testing Services.</p> <ul style="list-style-type: none"> • 30 of 30 (100%) card statements did not have an approver's signature. • 6 of 30 (20%) card statements did not have a reconciler's signature. • 12 of 30 (40%) card statements did not have a cardholder's signature and • 13 of 13 (100%) card purchases \$500 or greater did not have vendor status check verification. 	Moderate	<p>Recommendations for Dr. Tamara Knapp-Groes, Senior Director of Counseling and Testing Services:</p> <p>2.1. Ensure all card holders, reconcilers, and approvers review the UNT System Purchasing Card Guide annually.</p>	<p>1. As part of card training, card holders and reconcilers reviewed the UNT System Purchasing Card Guide on 4/7/18. Guide will be reviewed on an ongoing basis as needed but at a minimum annually.</p>	Tamara Knapp-Groes, Senior Director of Counseling and Testing Services	4/7/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-014 HSC	Governance and Regulatory Compliance	School of Health Professions	UNTHSC	<p>1. Inaccurate Recording of Leave of Absence in EIS</p> <p>Inaccurate recording of leave of absence from the HRM-64 leave Request form were identified resulting in incorrect leave accrual balances for 11 active employees and an overpayment to one terminated employee. Additionally, we noted two departments (Human Resources and the School of Health Professions) did not submit UPO-23 forms from November 2016 to May 2017 as required for University Policies. As a result, Internal Audit was unable to validate whether all leave taken and hours worked were accurately recorded in EIS.</p> <p>Internal Audit tested a sample of 20 employees out of a population of 64 (31%) that consisted of SPP faculty and staff during the period starting September 1, 2016, to August 31, 2017.</p> <p>Specifically, the following were noted:</p> <ul style="list-style-type: none"> • For 11 active employees and 1 terminated employee, vacation and sick leave balances were not recorded in EIS or recorded incorrectly by the timekeeper. • For 15 employees, HRM-64 and UPO-23 forms were not available for review for certain months from November 2016 through May 2017. Employees were unable to provide the forms to Internal Audit. As a result, Internal Audit was unable to validate whether leave taken and hours worked were accurately recorded in EIS. <p>Internal Audit did not identify any exceptions for leave processed after the leave implementation on June 1, 2017.</p>	High	<p>Recommendations for the Interim Dean of School of Health Professions and the Interim Human Resource Director at UNTHSC:</p> <p>1.1. a. Review all current and terminated employees within SPP from September 1, 2015 – May 31, 2017 to ensure the HRM-64 leave forms are accurately entered into EIS.</p>	<p>1. a. We will establish a three-person task force to review all current and terminated employees within the School of Health Professions from September 1, 2015 to May 31, 2017 to ensure HRM-64 leave forms are accurately entered in EIS.</p>	Dr. Nicoleta Bugnariu, SPP Interim Dean and Jane Gony, Interim Human Resource Director –HSC	1/31/2019	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-014 HSC	Governance and Regulatory Compliance	School of Health Professions	UNTHSC	<p>1. Inaccurate Recording of Leave of Absences in ES</p> <p>Inaccurate recording of leave of absences from the HRM-64 Leave Request form were identified resulting in incorrect leave accrual balances for 11 active employees and an overpayment to one terminated employee. Additionally, we noted two departmental UPO-23 forms from November 2016 to May 2017 as required by University Policies. As a result, Internal Audit was unable to validate whether all leave taken and hours worked were accurately recorded in ES.</p> <p>Internal Audit tested a sample of 30 employees out of a population of 54 (56%) that consisted of SHP faculty and staff during the period starting September 1, 2016, to August 31, 2017.</p> <p>For 11 active employees and 1 terminated employee, vacation and sick leave taken on HRM-64 forms were either not recorded in ES or recorded incorrectly by the timekeeper.</p> <p>For 15 employees, HRM-64 forms were not available for review for certain months from November 2016 through May 2017. Employees entered their leave directly in ES and communicated leave either verbally or by e-mail to their supervisor. As a result, Internal Audit was unable to validate whether leave taken was accurately recorded in ES.</p> <p>Internal Audit did not identify any exceptions for leave processed after the leave implementation on June 1, 2017.</p>	High	<p>Recommendations for the Interim Dean of School of Health Professions and the Interim Human Resource Director at UNTHSC:</p> <p>1.1. Collaborate with the Interim Human Resources Director at UNTHSC to update employee's leave of absences in ES to reflect the correct leave balances.</p>	<p>1.3. SHP will collaborate with the Interim Human Resource Director at UNTHSC to update employee's leave of absences in ES to reflect correct leave balances.</p>	Dr. Nicoleta Bugnaru, SHP Interim Dean and Jane Gray, Interim Human Resource Director -HSC	1/31/2019	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	18-014 HSC	Governance and Regulatory Compliance	School of Health Professions	UNTHSC	<p>1. Inaccurate Recording of Leave of Absences in ES</p> <p>Inaccurate recording of leave of absences from the HRM-64 Leave Request form were identified resulting in incorrect leave accrual balances for 11 active employees and an overpayment to one terminated employee. Additionally, we noted two departmental UPO-23 forms from November 2016 to May 2017 as required by University Policies. As a result, Internal Audit was unable to validate whether all leave taken and hours worked were accurately recorded in ES.</p> <p>Internal Audit tested a sample of 30 employees out of a population of 54 (56%) that consisted of SHP faculty and staff during the period starting September 1, 2016, to August 31, 2017.</p> <p>For 11 active employees and 1 terminated employee, vacation and sick leave taken on HRM-64 forms were either not recorded in ES or recorded incorrectly by the timekeeper.</p> <p>For 15 employees, HRM-64 and UPO-23 forms were not available for review for certain months from November 2016 through May 2017. Employees entered their leave directly in ES and communicated leave either verbally or by e-mail to their supervisor. As a result, Internal Audit was unable to validate whether leave taken was accurately recorded in ES.</p> <p>Internal Audit did not identify any exceptions for leave processed after the leave implementation on June 1, 2017.</p>	High	<p>Recommendations for the Interim Dean of School of Health Professions and the Interim Human Resource Director at UNTHSC:</p> <p>1.1. Collaborate with the Interim Human Resources Director at UNTHSC to update employee's leave of absences in ES to reflect the correct leave balances.</p> <p>1.1.c. For those employees identified with overpayments, collaborate with UNT System Controller Operations department to recover funds.</p>	<p>1.c. SHP will collaborate with UNTHSC budget office and UNT System Controller Operations department to address overpayments and overpayments due to inaccurate leave balances information.</p>	Dr. Nicoleta Bugnaru, SHP Interim Dean and Jane Gray, Interim Human Resource Director -HSC	1/31/2019	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-014 HSC	Governance and Regulatory Compliance	School of Health Professions	UNTHSC	<p>1. Inaccurate Recording of Leave of Absences in ES Request form were identified resulting in incorrect leave accrual for certain employees. Additionally, we noted two department within SHIP did not consistently utilize Leave Request and Time Card (LUPQ-23) forms from November 2016 to May 2017 as required by University Policies. As a result, Internal Audit was unable to validate that all leave taken and hours worked were accurately recorded in ES.</p> <p>Internal Audit tested a sample of 30 employees out of a population of 54 (56%) that consisted of SHIP faculty and staff during the period starting September 1, 2016, to August 31, 2017.</p> <ul style="list-style-type: none"> For 11 active employees and 1 terminated employee, vacation and sick leave taken on HRM-64 forms were either not recorded in ES or recorded incorrectly by the timekeeper. For 19 employees, LUPQ-23 forms were not available for review for certain months from November 2016 through May 2017. Employees entered their leave directly in ES and communicated leave either verbally or by e-mail to their supervisor. As a result, Internal Audit was unable to validate whether leave taken was accurately recorded in ES. Internal Audit did not identify any exceptions for leave processed after the leave implementation on June 1, 2017. 	High	<p>Recommendations for the Interim Dean of School of Health Professions and the Interim Human Resource Director at UNTHSC:</p> <p>1.1.d. Ensure internal payroll records are corrected.</p>	1.d. SHIP will collaborate with Human Resource Office to ensure internal payroll records are corrected.	Dr. Nicholas Buzalis, SHIP Interim Dean and Jane Gray, Director-HSC	1/17/2019	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	18-014 HSC	Governance and Regulatory Compliance	School of Health Professions	UNT System	<p>2. Research Participant Inadequate controls were identified surrounding the Research Participant payment process.</p> <p>School of Health Professions (SHIP) utilizes research participants who receive cash payments for participating in research studies. University policy requires that research participant payments be processed through the UNT System. SHIP requested a total of \$20,425 in cash and gift cards for research participants. During our review of cash controls and disbursement logs the following were noted:</p> <ul style="list-style-type: none"> Payments were not processed through the Payroll Office and subjected to IRS tax regulations. The University does not have specific instructions for Principal Investigators (PI) on how employees should be paid for a research study through the payroll process during a calendar year. Internal Audit was unable to determine how the PI's determine on how to monitor participants that receive an accumulative payment amount over \$600 in research studies. 	High	<p>Recommendation for the UNT System Senior Director of Controller Operations:</p> <p>2.1.a. Collaborate with Institutional Chief Financial Officers to modify research participant payment instructions to include specific guidelines for payments to University and Non-University employees in research studies. The guidelines will be provided to the UNT System. The Director of Procurement Services for the Procurement Guide to be updated.</p>	1.a. The current research participant payments instructions listed in the procurement guide will be reviewed and will provide specific IRS instructions to research participants. The guidelines once updated will be provided to the UNT System. The Director of Procurement.	Abdul Mohammad, UNT System Senior Director of Controller Operations	6/29/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-014 ISC	Governance and Regulatory Compliance	School of Health Professions	UNT System	<p>2. Research Participant</p> <p>Inadequate controls were identified surrounding the Research Participant payment process. (a) All research participants who receive cash payments for participating in research studies. University and non-University employees are recruited as research participants via flyers, word of mouth and through the UNTHSC Daily News. For FY2017, SHP requested a total of \$20,425 in cash and gift cards for research studies. The following were noted:</p> <ul style="list-style-type: none"> • Employees who received cash payments were not processed through the Payroll office and subjected to IRS tax regulations. The University does not have specific instructions for Principal Investigators (PI) on how employees should be paid for a research study through the payroll process during a calendar year. • For non-University employees, there is not a process in place on how to monitor participants that receive an accumulative payment amount over \$600 in research studies. 	High	<p>2.2.a. Update the Research Participants' section in the UNT System Procurement Guide based upon procedures developed in Recommendation 1a and send to all Institutional Provoosts.</p>	<p>2a. The Senior Director of Procurement Services will update the UNT System Procurement Guide based upon procedures developed in Recommendation 1a by the Senior Director of Procurement Services and will communicate new procedures to all Institutional Provoosts.</p>	Michael Ahernovich, UNT System Senior Director for Procurement Services	9/7/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	18-014 ISC	Governance and Regulatory Compliance	School of Health Professions	UNTHSC	<p>2. Research Participant</p> <p>Inadequate controls were identified surrounding the Research Participant payment process. School of Health Professions (SHP) utilizes research participants who receive cash payments for participating in research studies. University and non-University employees are recruited as research participants via flyers, word of mouth and through the UNTHSC Daily News. For FY2017, SHP requested a total of \$20,425 in cash and gift cards for research participants. During our review of cash controls and disbursement logs the following were noted:</p> <ul style="list-style-type: none"> • Employees who received cash payments were not processed through the Payroll office and subjected to IRS tax regulations. The University does not have specific instructions for Principal Investigators (PI) on how employees should be paid for a research study through the payroll process during a calendar year. • For non-University employees, there is not a process in place on how to monitor participants that receive an accumulative payment amount over \$600 in research studies. 	High	<p>2.2.a. Communicate the updated instructions to Principal Investigators.</p>	<p>3a. The research participant payment instructions for both University and Non-University employee participants will be distributed to the principal investigators and communicate the updated instructions to principal investigators.</p>	Dr. Charles Taylor, Provost and Executive Vice President for Academic Affairs	12/7/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-014 HSC	Governance and Regulatory Compliance	School of Health Professions	UNTHSC	<p>3. Course Fees</p> <p>Course fee revenue were not always spent in accordance with applicable laws. Six of 38 (16%) expenditures tested were paid with unallowable expenditures. The following items were identified and awards not directly related to the fees collected. Specifically Internal Audit identified a total of \$5,445.38 in FY 2017 as unallowable expenditures for the following categories:</p> <ul style="list-style-type: none"> Travel \$5,208.45 Membership Fees \$3,950.00 Awards 286.93 <p>The Schools are currently utilizing outdated Fund Group Guidelines dated April 2011 which are not comprehensive and correct.</p>	Moderate	<p>Recommendations for the UNTHSC Vice President of Finance & Planning:</p> <p>3.1.a. Utilize the University of North Texas guidebook for budgeting and fee guidelines to provide to Colleges, Schools and departments. Collaborate with University of North Texas Vice Provost for Academic Resources to ensure UNTHSC guidelines are accurate and complete. Once developed, provide guidelines to the Provost for review and feedback.</p>	<p>1.a. The Budget Office of UNTHSC will develop guidelines related to instructional fees, utilizing all available resources, as necessary, including the Vice Provost for Academic Resources at UNT as well as resources located within UNTHSC. Additionally, the Budget Office will provide the guidelines to the Vice Provost for Academic Resources for their review to ensure the guidelines meet the needs of UNTHSC.</p>	Jeff Scarpelli, UNTHSC Vice President Finance & Planning	11/22/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	18-014 HSC	Governance and Regulatory Compliance	School of Health Professions	UNTHSC	<p>3. Course Fees</p> <p>Course fee revenue were not always spent in accordance with applicable laws. Six of 38 (16%) expenditures tested were paid with unallowable expenditures for items such as faculty travel, membership fees and awards not directly related to the fees collected. Specifically, Internal Audit identified a total of \$5,445.38 in FY 2017 as unallowable expenditures for the following categories:</p> <ul style="list-style-type: none"> Travel \$5,208.45 Membership Fees \$3,950.00 Awards 286.93 <p>The Schools are currently utilizing outdated Fund Group Guidelines dated April 2011 which are not comprehensive and correct.</p>	Moderate	<p>Recommendations for the UNTHSC Vice President of Finance & Planning:</p> <p>3.1.b. Communicate new guidelines to all Colleges, Schools, and departments.</p>	<p>1b. Once developed, the guidelines will be distributed to all relevant parties including all Colleges, Schools and departments and posted on the UNTHSC website.</p>	Jeff Scarpelli, UNTHSC Vice President Finance & Planning	11/29/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-017 DAL	Governance and Regulatory Compliance	IT Inventory Controls and Data Protection Audit	UNT Dallas	<p>1. Central Receiving</p> <p>The University of North Texas at Dallas lacks a Central Receiving function to count and examine received merchandise to match to the University of North Texas at Dallas purchase order. The goods are received at the UNT Dallas loading bay, referred to as the mailroom. Facilities Specialist signs for the goods if the number of boxes equals the delivery courier's receipt. The Facilities Specialist does not have access to the central ordering system in ES to verify the goods are received in the mailroom. If the box indicates it is from Apple or Dell, a call is placed for a resource from the Office of IT (OIT) to pick up the box. If the vendor is not Apple or Dell, the department indicated on the address label is contacted for pickup. When an invoice arrives to the ordering department, the Facilities Specialist is notified and the ordering department is notified if the goods were received and with instruction on how to use Desktop Receiving to mark the goods as received in ES.</p>	High	<p>1. Recommendation for Chief Financial Officer:</p> <p>1.1.a. Create a dedicated, independent Central Receiving unit or a single Property Management resource to verify goods received in the mailroom and compare the receipt to the purchase order and immediately document receipt of goods in the central system.</p>	<p>1.a. UNT Dallas will reorganize the current mailroom into a central receiving unit. One full-time position (Property Manager) will be dedicated to oversee the central receiving area and verify goods received in the mailroom. The Property Manager will be responsible to segregate the dates from facilities.</p>	Jim Main, Executive VP for Finance and Administration & CFO	9/7/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	18-017 DAL	Governance and Regulatory Compliance	IT Inventory Controls and Data Protection Audit	UNT Dallas	<p>2. Asset Management</p> <p>The record of assets in the centralized ES Asset Management database was not reliable. As of December 1, 2017, there were 146 assets in ES without a university-generated asset tag number or a vendor-provided tag number. The record of assets in the ES database was not reliable. The record of assets in the ES database was not reliable. The record of assets in the ES database was not reliable. Additionally, UNT Dallas has a five-year refresh cycle whereby all IT devices are scheduled to be replaced every five years. However, IA found 53 IT assets in the system older than five years. Some dating back to 2010. The refresh cycle was not being updated. The refresh cycle may no longer be with the institution, but the database has not been updated. Also to note, the custodian listed in ES was an active employee on only 42 of the 11,341 devices or 4%.</p>	High	<p>2.1.a. Create a process to require that assets are entered with detail into the centralized system and updated as the device relocates.</p>	<p>1.a. UNT Dallas will create a process that requires assets are entered with detail into the centralized system and updated as the device relocates.</p>	Jim Main, Executive VP for Finance and Administration & CFO	11/7/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-017 DAL	Governance and Regulatory Compliance	IT Inventory Controls and Data Protection Audit	UNT Dallas	<p>2. Asset Management</p> <p>The record of assets in the centralized ES Asset Management database was not reliable. As of December 1, 2017, there were 146 assets in ES without a university-generated asset tag number or a vendor-provided service/serial ID. Without an identifying tag number of any kind in the system, locating the device would not be possible. Additionally, UNT Dallas has a five-year refresh cycle whereby all IT devices are scheduled to be replaced every five years. Some dating back to a purchase date of 2004. This indicates that many items may no longer be with the institution, but the database has not been updated. Also to note, the custodian listed in ES was an active employee on only 42 of the 1,134 devices or 4%.</p>	High	<p>Recommendations for Chief Financial Officer:</p> <p>2.1. b. Establish control and check points to verify the accuracy of the assets in the ES database.</p>	<p>1b. UNT Dallas will establish controls and check points to verify the accuracy of the assets in the ES database.</p>	Jim Main, Executive VP for Finance and Administration & CFO	11/7/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	18-017 DAL	Governance and Regulatory Compliance	IT Inventory Controls and Data Protection Audit	UNT Dallas	<p>2. Asset Management</p> <p>The record of assets in the centralized ES Asset Management database was not reliable. As of December 1, 2017, there were 146 assets in ES without a university-generated asset tag number or a vendor-provided service/serial ID. Without an identifying tag number of any kind in the system, locating the device would not be possible. Additionally, UNT Dallas has a five-year refresh cycle whereby all IT devices are scheduled to be replaced every five years. However, IA found 531 IT assets in the system older than five years. Some dating back to a purchase date of 2004. This indicates that many items may no longer be with the institution, but the database has not been updated. Also to note, the custodian listed in ES was an active employee on only 42 of the 1,134 devices or 4%.</p>	High	<p>Recommendations for Chief Financial Officer:</p> <p>2.1. c. Assign a resource the responsibility of validating all data in the ES IT Asset Management Center for UNT Dallas assets.</p>	<p>1c. UNT Dallas will dedicate 1 FTE (Property Manager) to validate all data in the ES IT Asset Management Center for UNT Dallas assets.</p>	Jim Main, Executive VP for Finance and Administration & CFO	12/31/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-017 DAL	Governance and Regulatory Compliance	IT Inventory Controls and Data Protection Audit	UNT Dallas	<p>3. Data Destruction</p> <p>UNT Dallas was not destroying data on their devices before the chain of custody exchange to the UNT Property Management Surplus Warehouse in Denton due to a historical arrangement between the parties.</p> <p>UNT Dallas employs a five-year life cycle on IT devices. When a device becomes of age, it is ready for replacement and preparation for the device to be disposed, sold, donated, or reused. UNT Dallas has a Surplus Pickup Form to be completed and the UNT Property Management department collects the devices in a university-owned vehicle. The pickup form indicates that the devices should be wiped before the transfer, however it was the verbally agreed upon procedure to transfer devices to the UNT Property Management Surplus Warehouse. UNT Property Management department will take care of the data destruction process. According to UNT Property Management, all UNT Dallas device hard drives have been successfully destroyed at the surplus warehouse in Denton.</p>	Moderate	<p>Recommendations for the Office of IT Director:</p> <p>3.1.a. Adhere to the certification statement on the Request for Surplus Pickup chain of custody form to erase hard drives, passwords, and reset security features to factory defaults.</p>	<p>1.a. UNT Dallas will create a policy and submit it for approval addressing all of the aforementioned concerns. Once policy is approved, UNT Dallas will conduct training for UNT Dallas IT staff to ensure compliance with policy. While policy is being crafted and implemented, UNT Dallas will create a document articulating and certifying necessary steps have been taken to ensure devices are wiped before transfer to UNT Property Management for destruction.</p>	Kevin Rocha, Director of Office of Information Technology	12/7/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	18-017 DAL	Governance and Regulatory Compliance	IT Inventory Controls and Data Protection Audit	UNT Dallas	<p>3. Data Destruction</p> <p>UNT Dallas was not destroying data on their devices before the chain of custody exchange to the UNT Property Management Surplus Warehouse in Denton due to a historical arrangement between the parties.</p> <p>UNT Dallas employs a five-year life cycle on IT devices. When a device becomes of age, it is ready for replacement and preparation for the device to be disposed, sold, donated, or reused. UNT Dallas has a Surplus Pickup Form to be completed and the UNT Property Management department collects the devices in a university-owned vehicle. The pickup form indicates that the devices should be wiped before the transfer, however it was the verbally agreed upon procedure to transfer devices to the UNT Property Management Surplus Warehouse. UNT Property Management department will take care of the data destruction process. According to UNT Property Management, all UNT Dallas device hard drives have been successfully destroyed at the surplus warehouse in Denton.</p>	Moderate	<p>Recommendations for the Office of IT Director:</p> <p>3.1.b. In accordance with the UNT System Information Security Handbook, create a UNT Dallas policy specifically addressing the secure destruction of any data commensurate with the value and sensitivity of the information.</p> <p>3.1.c. Update the UNT Dallas Information Security Handbook requirements in section 10.7 Media Handling: 11 of 13.</p> <p>• That the UNT Dallas Office of IT will be responsible for the destruction of data prior to the surplus or disposal of an IT asset; and</p> <p>• That required forms and accepted certifications between the Office of IT and the UNT Dallas Property Manager to keep central asset records accurate.</p>	<p>1.b. UNT Dallas will create a policy and submit it for approval addressing all of the aforementioned concerns. Once policy is approved, UNT Dallas will conduct training for UNT Dallas IT staff to ensure compliance with policy. While policy is being crafted and implemented, UNT Dallas will create a document articulating and certifying necessary steps have been taken to ensure devices are wiped before transfer to UNT Property Management for destruction.</p>	Kevin Rocha, Director of Office of Information Technology	12/7/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-017 DAL	Governance and Regulatory Compliance	IT Inventory Controls and Data Protection Audit	UNT Dallas	<p>4. Outdated Policy</p> <p>UNT Dallas Policy 11.005 Physical Asset Management has not been updated since it was written in 2010. The policy contained outdated information and was beyond the scope of what a policy should contain.</p> <p>For example, it stated that:</p> <p>"The Purchasing Director is the designated Property Manager for the University."</p> <p>"This inventory will be conducted by each department assigned personal property. The Property Manager shall provide the most recent listing and inventory instructions to each department."</p> <p>"The condition of the property and all discrepancies found in the listing while conducting this inventory will be reported in a fashion that is consistent with the procedures set forth in the policy."</p> <p>The detailed procedures and roles were not an accurate reflection of what was in place. Whether the annual physical inventory is conducted by the individual departments or by the Office of IT and/or Property Management, the procedures and roles should be more appropriate for the policy to state that an annual physical inventory will be conducted and what level of verification requirements are set by the State. Therefore a change in the procedure and roles in the process would not require a policy revision, rather they would be reflected in the documented procedures.</p>	Moderate	<p>Recommendation for the Chief Financial Officer:</p> <p>A.1. UNT Dallas will update UNT Dallas Policy 11.005 Physical Asset Management to set the basic requirements needed for asset management to meet the State requirements.</p>	<p>1a. UNT Dallas will review UNT Dallas Policy 11.005 Physical Asset Management and make revisions as necessary to meet the basic State requirements around asset management.</p>	Jim Main, Executive VP for Finance and Administration & CFO	11/7/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	18-017 DAL	Governance and Regulatory Compliance	IT Inventory Controls and Data Protection Audit	UNT Dallas	<p>4. Outdated Policy</p> <p>UNT Dallas Policy 11.005 Physical Asset Management has not been updated since it was written in 2010. The policy contained outdated information and was beyond the scope of what a policy should contain.</p> <p>For example, it stated that:</p> <p>"The Purchasing Director is the designated Property Manager for the University."</p> <p>"This inventory will be conducted by each department assigned personal property. The Property Manager shall provide the most recent listing and inventory instructions to each department."</p> <p>"The condition of the property and all discrepancies found in the listing while conducting this inventory will be reported in a fashion that is consistent with the procedures set forth in the policy."</p> <p>The detailed procedures and roles were not an accurate reflection of what was in place. Whether the annual physical inventory is conducted by the individual departments or by the Office of IT and/or Property Management, the procedures and roles should be more appropriate for the policy to state that an annual physical inventory will be conducted and what level of verification requirements are set by the State. Therefore a change in the procedure and roles in the process would not require a policy revision, rather they would be reflected in the documented procedures.</p>	Moderate	<p>Recommendation for the Chief Financial Officer:</p> <p>A.1. b. To support the success of the new policy, develop written departmental procedures for the Property Manager to carry out asset management responsibilities.</p>	<p>1b. Departmental procedures will be developed for the Property Manager that align and support UNT Dallas Policy 11.005, Physical Asset Management.</p>	Jim Main, Executive VP for Finance and Administration & CFO	12/7/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018a UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Science	UNT	<p>1. Business Continuity Plan not created</p> <p>A Business Continuity Plan has not been created and tested. The College of Science (COS) does not have a BCP in place. Tim Christians, COS Senior Assistant Dean, is working with the Computing Committee, consisting of faculty and staff representatives from CLASS, COS, and Mayborn.</p>	High	<p>Recommendation for Dean of the College of Science:</p> <p>1.1. a. COS should develop a BCP for critical IT services in the event of a disruption to IT services.</p>	<p>1.a. Create a Business Continuity Plan by December 15th, 2018 (1/16/18 Audit Exit Conference decision). As of March 30th, 2018, 77% of plan items have been drafted. Currently well ahead of schedule.</p>	Tim Christians, COS Senior Assistant Dean, Computing for Arts and Sciences IT	5/12/2019	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018a UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Science	UNT	<p>1. Business Continuity Plan not created</p> <p>A Business Continuity Plan has not been created and tested. The College of Science (COS) does not have a BCP in place. Tim Christians is leading the effort to create a BCP and has started working with the Computing Committee, consisting of faculty and staff representatives from CLASS, COS, and Mayborn.</p>	High	<p>Recommendation for Dean of the College of Science:</p> <p>1.1. b. COS should test their BCP once it has been developed.</p> <p>1.1. b. COS should test their BCP once it has been developed.</p>	<p>1.b. Test the Business Continuity Plan by May 15th, 2019 (1/16/18 Audit Exit Conference decision). Pending plan revision (see above).</p>	Tim Christians, COS Senior Assistant Dean, Computing for Arts and Sciences IT	5/12/2019	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018a UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Science	UNT	<p>2. Business Impact Analysis not performed</p> <p>A Business Impact Analysis has not been performed. The College of Science (COS) had not evaluated their applications, licenses, and/or needed them for support. Tim Christian is leading the Business Continuity Plan (BCP) effort, and has started work on a Business Impact Analysis (BIA), working with the Computing Committee, consisting of representatives from the College of Science (COS), the College of Arts and Sciences (CAS), COS, and the Wayborn School of Journalism (Wayborn).</p>	High	<p>Recommendation for Dean of the College of Science:</p> <p>2.1 a. COS should perform a BIA to determine critical applications requiring a BCP.</p>	<p>1.a. We agree with the finding and plan to create a Business Impact Analysis (BIA) by May 6th, 2018 (1/16/18 Audit Exit Conference As of February 24th, 2018, the BIA has been drafted and approved. We are currently working on the BIA. We also mentioned official date. Expected Implementation Date: Complete</p>	Tim Christian, COS Senior Assistant Deans, Computing for Arts and Sciences IT	5/12/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018a UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Science	UNT	<p>3. Individual not assigned to lead Business Continuity Plan</p> <p>An individual has not been assigned to lead the Business Continuity Plan effort. As determined during the Entrance Conference, the College of Science (COS) had not assigned a person or persons the responsibility for developing, maintaining, and testing a Business Continuity Plan (BCP) for the college.</p>	Moderate	<p>Recommendation for Dean of the College of Science:</p> <p>3.1 a. COS should assign a person or persons to lead the development, maintenance, and testing of the college's BCP.</p>	<p>1.a. Dr. Gao tasked Tim Christian, COS Senior Assistant Dean for CAS IT, with leading the BCP effort.</p>	Dr. Su Gao, Dean of the College of Science	5/22/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018B-UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College Liberal Arts and Social Sciences	UNT	1. Business Continuity Plan not created A Business Continuity Plan has not been created and tested. CLAS does not have a BCP in place. Tim Christian is leading the effort to create a BCP and has started working with the Computing Committee, consisting of faculty and staff representatives from CLAS, CoS, and Mayborn.	High	Recommendation for Dean of the College of Liberal Arts and Social Sciences: 1.1 a. CLAS should develop a BCP for critical IT services in the event of a disruption to IT services.	1.a. Create a Business Continuity Plan by December 15th, 2018 (1/16/18 Audit Exit Conference decision). As of March 30th, 2018, 77% of plan items have been drafted. Currently well ahead of schedule.	Tim Christian, CoS Senior Assistant Dean, Computing for Arts and Sciences IT	5/12/2019	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018B-UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College Liberal Arts and Social Sciences	UNT	1. Business Continuity Plan not created A Business Continuity Plan has not been created and tested. CLAS does not have a BCP in place. Tim Christian is leading the effort to create a BCP and has started working with the Computing Committee, consisting of faculty and staff representatives from CLAS, CoS, and Mayborn.	High	Recommendation for Dean of the College of Liberal Arts and Social Sciences: 1.1.b. CLAS should test their BCP once it has been developed.	1.b. Test the Business Continuity Plan by May 15th, 2019 (1/16/18 Audit Exit Conference decision). Pending plan revision (see above).	Tim Christian, CoS Senior Assistant Dean, Computing for Arts and Sciences IT	5/12/2019	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018B-UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College Liberal Arts and Social Sciences	UNT	<p>2. Business Impact Analysis not performed</p> <p>A Business Impact Analysis has not been performed. The College of Liberal Arts and Social Sciences (CLASS) had not performed a Business Impact Analysis (BIA) to determine critical IT capabilities/services, and risk ranked them for priority. Tim Christian is leading the Business Continuity Plan (BCP) effort, and has started work on a Business Impact Analysis (BIA), working with the Computing Committee, consisting of representatives from CLASS, College of Science (COS), and The Wayborn School of Journalism (Wayborn).</p>	High	<p>Recommendation for Dean of the College of Liberal Arts and Social Sciences:</p> <p>2.1.a. CLASS should perform a BIA to determine critical applications requiring a BCP.</p>	<p>1.a. We agree with the finding and plan to create a Business Impact Analysis (BIA) by May 26th, 2018 (1/16/18 Audit Exit Conference As of February 24th, 2018, the BIA has been drafted and approved—three times later than the aforementioned official date.</p>	Tim Christian, COS Senior Assistant Dean, Computing for Arts and Sciences IT	5/27/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018B-UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College Liberal Arts and Social Sciences	UNT	<p>3. Individual not assigned to lead Business Continuity Plan</p> <p>An individual has not been assigned to lead the Business Continuity Plan effort.</p> <p>As determined during the Entrance Conference, the College of Liberal Arts and Social Sciences (CLASS) had not assigned a person or persons the responsibility for ongoing maintaining, and testing a Business Continuity Plan (BCP) for the college.</p>	Moderate	<p>Recommendation for Dean of the College of Liberal Arts and Social Sciences:</p> <p>3.1.a. CLASS should assign a person or persons to lead the development, maintenance, and testing of the college's BCP.</p>	<p>1.a. Dean Holdeman tasked Tim Christian, COS Senior Assistant Dean for CASTI, with leading the BCP effort.</p>	David Holdeman, Dean of the College of Liberal Arts and Social Sciences	5/27/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018: UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - Mayborn School of Journalism	UNT	1. Business Continuity Plan not created A Business Continuity Plan has not been created and tested. Mayborn does not have a BCP in place. Tim Christian is leading the effort to create a BCP and has started working with the Computing Committee, consisting of faculty and staff representatives from CLASS, CoS, and Mayborn.	High	Recommendation for Dean of the Mayborn School of Journal: 1.1 a. Mayborn should develop a BCP for critical IT services in the event of a disruption to IT services.	1.a. Create a Business Continuity Plan by December 15th, 2018 (1/16/18 Audit Exit Conference decision). As of March 30th, 2018, 77% of plan items have been drafted. Currently well ahead of schedule.	Tim Christian, CoS Senior Assistant Deans, Computing for Arts and Sciences IT	5/12/2019	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018: UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - Mayborn School of Journalism	UNT	1. Business Continuity Plan not created A Business Continuity Plan has not been created and tested. Mayborn does not have a BCP in place. Tim Christian is leading the effort to create a BCP and has started working with the Computing Committee, consisting of faculty and staff representatives from CLASS, CoS, and Mayborn.	High	Recommendation for Dean of the Mayborn School of Journal: 1.1 b. Mayborn should test their BCP once it has been developed.	1.b. Test the Business Continuity Plan by May 15th, 2019 (1/16/18 Audit Exit Conference decision). Pending plan revision (see above).	Tim Christian, CoS Senior Assistant Deans, Computing for Arts and Sciences IT	5/12/2019	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018c-UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - Mayborn School of Journalism	UNT	<p>2. Business Impact Analysis not performed</p> <p>A Business Impact Analysis has not been performed. The Mayborn School of Journal (Mayborn) had not evaluated their business impact analysis. The Business Impact Analysis (BIA) was not completed. Tim Christian is leading the Business Continuity Plan (BCP) effort, and has started work on a Business Impact Analysis (BIA), working with the Computing Committee, consisting of representatives from the College of Arts and Sciences (CAS), the College of Science (COS), and Mayborn.</p>	High	<p>Recommendation for Dean of the Mayborn School of Journal:</p> <p>2.1.a. Mayborn should perform a BIA to determine critical applications requiring a BCP.</p>	<p>1.a. We agree with the finding and plan to create a Business Impact Analysis (BIA) by May 6th, 2018 (1/16/18 Audit Exit Conference As of February 24th, 2018, the BIA has been drafted and approved—three times faster than the aforementioned official date.</p>	Tim Christian, COS Senior Assistant Deans, Computing for Arts and Sciences IT	5/27/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018c-UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - Mayborn School of Journalism	UNT	<p>3. Individual not assigned to lead Business Continuity Plan</p> <p>An individual has not been assigned to lead the Business Continuity Plan effort.</p> <p>As determined during the Entrance Conference, the Mayborn School of Journalism (Mayborn) had not assigned a person or persons the responsibility for developing, maintaining, and testing a Business Continuity Plan (BCP) for the college.</p>	Moderate	<p>Recommendation for Dean of the Mayborn School of Journalism:</p> <p>3.1.a. Mayborn should assign a person or persons to lead the development, maintenance, and testing of the college's BCP.</p>	<p>1.a. Dorothy Bland tasked Tim Christian, COS Senior Assistant Dean for CAS IT and Douglas Lewis, Computer Lab Manager, Mayborn School of Journalism, with leading the BCP effort.</p>	Dorothy Bland, Dean, Mayborn School of Journalism	5/27/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-0181 UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - Toulouse Graduate School	UNT	<p>1. Business Continuity Plan not created</p> <p>A Business Continuity Plan has not been created and tested. The Toulouse Graduate School does not have a Business Continuity Plan in place. Natalie Garcia-McIntire is leading the effort to create a BCP and has started contacting the departments and areas in Toulouse to get their feedback on what applications and resources are important to them.</p>	High	<p>Recommendation for Dean of the Toulouse Graduate School:</p> <p>1.1.a. Toulouse should develop a BCP for critical IT services in the event of a disruption to IT services.</p>	<p>1.a. The BCP for Toulouse Graduate School has been drafted and is currently under review.</p>	Victor Fryback, Dean, Toulouse Graduate School	7/1/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-0181 UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - Toulouse Graduate School	UNT	<p>1. Business Continuity Plan not created</p> <p>A Business Continuity Plan has not been created and tested. The Toulouse Graduate School does not have a Business Continuity Plan (BCP) in place. Natalie Garcia-McIntire is leading the effort to create a BCP and has started contacting the departments and areas in Toulouse to get their feedback on what applications and resources are important to them.</p>	High	<p>Recommendation for Dean of the Toulouse Graduate School:</p> <p>1.1.a. Toulouse should test their BCP once it has been developed.</p>	<p>1.b. The BCP will be tested once the review is complete (May 18 slated for testing).</p>	Victor Fryback, Dean, Toulouse Graduate School	7/1/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2018	18-0181 UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - Toulouse Graduate School	UNT	<p>2. Inventory not performed</p> <p>An inventory of IT services has not been created. The Toulouse Graduate School had not created an inventory of all IT services and applications used by their faculty, staff, and students. Nat'ale Garcia-Achire is leading the BCP effort, and has started evaluating software used by the Toulouse Graduate School to establish which are important to them.</p>	High	<p>Recommendation for Dean of the Toulouse Graduate School:</p> <p>2.1.a. Toulouse should develop an inventory of all IT applications and services used by faculty, staff and students for use in performing a BIA.</p>	<p>1.a. The inventory of all IT applications has been drafted and is currently under review.</p>	Victor Fryback, Dean, Toulouse Graduate School	5/17/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-0181 UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - Toulouse Graduate School	UNT	<p>3. Business Impact Analysis not performed.</p> <p>A Business Impact Analysis has not been performed. The Toulouse Graduate School had not evaluated their application/service inventory, identified all IT applications/services, and risk ranked them for priority. The work has not started on a Business Continuity Plan (BCP) effort, and has started work on a Business Impact Analysis (BIA).</p>	High	<p>Recommendation for Dean of the Toulouse Graduate School:</p> <p>3.1.a. Toulouse should perform a BIA to determine critical applications requiring a BCP.</p>	<p>1.a. The BIA for Toulouse Graduate School has been drafted and is currently under review.</p>	Victor Fryback, Dean, Toulouse Graduate School	5/17/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2018	18-0181 UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - Toulouse Graduate School	UNT	<p>4. Individual not assigned to lead Business Continuity Plan effort.</p> <p>An individual has not been assigned to lead the Business Continuity Plan effort. During the Finance Conference, the Toulouse Graduate School had not assigned a person or person the responsibility for developing, maintaining, and testing a Business Continuity Plan (BCP) for the college.</p>	Moderate	<p>Recommendation for Dean of the Toulouse Graduate School:</p> <p>4.1.a. Toulouse should assign a person or persons to lead the development, maintenance, and testing of the college's BCP.</p>	<p>1.a. Devin Proffick has assigned Marty Neuma and Natalie Garcia to lead the BCP effort for Toulouse.</p>	Vicior Friboude, Dean, Toulouse Graduate School	5/27/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018g UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - TAMU and Honors	UNT	<p>1. Business Continuity Plan not created</p> <p>A Business Continuity Plan has not been created and tested. TAMU and Honors College do not have Business Continuity Plans (BCPs) in place. Roy Zumwalt is leading the BCP effort and has started work on developing a Business Impact Analysis (BIA), working with faculty and staff and other stakeholders within the colleges.</p>	High	<p>Recommendation for Dean of TAMU:</p> <p>1.1.a. TAMU and Honors College should develop BCPs for critical IT services in the event of a disruption to IT services.</p>	<p>1.a. The BCP has been created. It is currently under review of the Dean of TAMU/Honors. We will plan a meeting to review the document and determine the appropriate actions and an assessment of the appropriate roles for stakeholders in the department.</p>	Roy Zumwalt, Senior IT Support Manager	5/22/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018g UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - TAMS and Honors	UNT	<p>1. Business Continuity Plan not created</p> <p>A Business Continuity Plan has not been created and tested. TAMS and Honors College do not have Business Continuity Plans. The IT division has not conducted a Business Impact Analysis (BIA) and has not worked on developing a Business Impact Analysis (BIA) working with faculty and staff and other stakeholders within the colleges.</p>	High	<p>Recommendation for Dean of TAMS: 1.1. TAMS and Honors College should test their BCPs once they have been developed.</p>	<p>1.a. The BCP has been created. It is currently under review of the Dean of TAMS/Honors. We will plan a meeting to review the document and develop a plan for testing. This will include a round table discussion of appropriate actions and an assessment of the appropriate roles for stakeholders in the department.</p>	Roy Zimwail, Senior IT Support Manager	5/22/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018g UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - TAMS and Honors	UNT	<p>2. Inventory not performed</p> <p>An inventory of IT services has not been created. TAMS and Honors College had not evaluated their application/service inventory, identified their mission-critical IT applications/services, and risk ranked them for priority. Roy Zimwail is leading the BCP effort and has been working on creating a complete list of application/services used within TAMS and Honors College.</p>	High	<p>Recommendation for Dean of TAMS: 2.1.a. TAMS and Honors College should develop an inventory of all IT applications and services used by faculty, staff and students for use in performing a BIA.</p>	<p>1.a. The application/service inventory has been completed. While updates/changes may occur over time, the current inventory is complete. The inventory includes servers housed in TAMS, Honors College, Office for Nationally Competitive Scholarships, Terry Foundation, McNair Scholars Program.</p>	Roy Zimwail, Senior IT Support Manager	5/22/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018g UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - TAMS and Honors	UNT	<p>3. Business Impact Analysis not performed</p> <p>A Business Impact Analysis has not been performed. The TAMS and Honors College has not evaluated their business impact analysis. The Business Impact Analysis (BIA) was not completed. IT application owners and risk owners have not been identified. Roy Zumwalt is leading the BCP effort and has started work on a Business Impact Analysis (BIA), working with faculty and staff and other stakeholders within the colleges.</p>	High	<p>Recommendation for Dean of TAMS:</p> <p>3.1. a. TAMS and Honors College should perform BIA to determine critical applications requiring a BCP.</p>	<p>1. a. The BIA has been performed for TAMS/Honors. The BIA has been incorporated into the BCP and includes the scope, prioritization, relevance and course of action for listed services and applications. Step by step guidance is provided for each application/service based on the criticality of the application/service. The BIA and IT Shared Services are listed as well as the potential for continued success of the TAMS/Honors programs.</p>	Roy Zumwalt, Senior IT Support Manager	5/22/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018g UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - TAMS and Honors	UNT	<p>4. Individual not assigned to lead Business Continuity Plan effort.</p> <p>An individual has not been assigned to lead the Business Continuity Plan effort. As determined during the Entrance Conference, TAMS and Honors College had not assigned a person or persons the responsibility for developing, maintaining, and testing BCPs for the colleges.</p>	Moderate	<p>Recommendation for Dean of TAMS:</p> <p>4.1. a. TAMS and Honors College should assign a person or persons to lead the development, maintenance, and testing of the BCPs.</p>	<p>1. a. Dr. Gleisson tasked Roy Zumwalt, Senior IT Support Manager, TAMS, with leading the BCP effort.</p>	Dr. Gleisson de Oliveira, Dean of TAMS	5/22/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2018	18-018-UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - Libraries	UNT	<p>1. Business Continuity Plan not created</p> <p>A Business Continuity Plan has not been created and tested. The UNT Libraries Business Continuity Plan (BCP) does not address a strategy for the continuation of business in the event of disruption of IT services. The library does have a Disaster Recovery Plan, but not specific steps to continue business in the event of an IT outage.</p>	High	<p>Recommendation for Dean of the UNT Libraries:</p> <p>1.1. a. UNT Libraries should develop a BCP for critical IT services in the event of a disruption to IT services.</p>	<p>1.a. We will provide a completed and tested BCP for the UNT Libraries to UNT System Internal Audit representatives. See Page and Mecke Title, based on your comment to us at our meeting on February 13, 2018.</p>	<p>Scott Jackson, Assistant Dean for Facilities and Systems, UNT Libraries (also involved - Jeffrey Guenther, Senior Systems Administrator, Cathy Hartman, Interim Dean of Libraries)</p>	5/22/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018-UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - Libraries	UNT	<p>1. Business Continuity Plan not created</p> <p>A Business Continuity Plan has not been created and tested. The UNT Libraries Business Continuity Plan (BCP) does not address a strategy for the continuation of business in the event of disruption of IT services. The library does have a Disaster Recovery Plan, but not specific steps to continue business in the event of an IT outage.</p>	High	<p>Recommendation for Dean of the UNT Libraries:</p> <p>1.1. b. UNT Libraries should test their BCP once it has been developed.</p>	<p>1.b. We will provide a completed and tested BCP for the UNT Libraries to UNT System Internal Audit representatives. See Page and Mecke Title, based on your comment to us at our meeting on February 13, 2018.</p>	<p>Scott Jackson, Assistant Dean for Facilities and Systems, UNT Libraries (also involved - Jeffrey Guenther, Senior Systems Administrator, Cathy Hartman, Interim Dean of Libraries)</p>	5/22/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018-UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - Libraries	UNT	<p>2. Business Impact Analysis not performed. The Business Impact Analysis performed does not address critical IT applications/software essential to the mission of UNT Libraries. The Business Impact Analysis performed is an assessment of critical IT application essential to its mission in the event of an IT outage. The BIA analysis in place only addresses an assessment of business units.</p>	High	<p>Recommendation for Dean of the UNT Libraries: 2.1.a. UNT Libraries should perform a BIA to determine critical applications requiring a BCP.</p>	<p>1.a. We will complete a BIA for the UNT Libraries to the UNT System Internal Audit representatives. See Page and Mike's Title based on your comments to us at our meeting on February 13, 2018.</p>	Scott Jackson, Assistant Dean for Facilities and Systems, UNT Libraries (also involved - Jeffrey Gutwano, Senior Systems Administrator, Jeffery Harman, Interim Dean of Libraries)	5/27/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018-UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Engineering	UNT	<p>1. Business Continuity Plan not created. A Business Continuity Plan has not been created and tested. CENG does not have a Business Continuity Plan (BCP) in place. Jim Byford is leading the effort to create a BCP and has made a draft from which the College will work from to finalize a BCP.</p>	High	<p>Recommendation for Dean of the College of Engineering: 1.1.a. CENG should develop a BCP for critical IT services in the event of a disruption to IT services.</p>	<p>1.a. CENG created a BCP. CENG created a list of critical applications used within the college. This includes applications provided and used by CENG, as well as applications used by other departments. This is shown in their own BCP. Only broad mention of impact and action managed/hosted within the college of engineering. The BCP includes information on critical applications, critical customers, impact, severity, response time, and remedial actions. After creating a list of applications hosted within the college, informal discussions with various faculty/staff were conducted to assist with determining impact of software list included in BCP. This assisted in identifying critical applications. Informal discussions with various faculty/staff were conducted to assist with determining impact of software list included in BCP. This assisted in identifying critical applications. Informal discussions were posed regarding alternative plans (applications) were unavailable which also assisted with assessing criticality and response times for bringing systems back online.</p>	Jim Byford, IT Support Manager	5/27/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2018	18-018 UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Engineering	UNT	<p>1. Business Continuity Plan not created</p> <p>A Business Continuity Plan has not been created and tested. CENG does not have a Business Continuity Plan (BCP) in place. Jim Byford, CENG Director, has made a draft from which the College will work from to finalize a BCP.</p>	High	<p>Recommendation for Dean of the College of Engineering:</p> <p>1.1. b. CENG should test their BCP once it has been developed.</p>	<p>1.1. CENG created a BCP. CENG created a list of critical applications used within the college. This includes applications provided and supported by IT Shared Services. IT Shared service applications are listed in the BCP. Only broad mention of impact and action items are provided for each application. The BCP includes information for each application: affected customers, impact, severity, response time, target and responsibility.</p> <p>After creating a list of applications housed within the college, informal discussions were held with the college to determine the impact of determining if initial assessment needed adjusting. In addition, questions were posed regarding alternative plans if applications were unavailable which also assisted with assessing criticality and response times for emerging systems data center.</p>	Jim Byford, IT Support Manager	5/22/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018 UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Engineering	UNT	<p>2. Inventory not performed</p> <p>An inventory of IT resources has not been created. The College of Engineering (CENG) had not created an inventory, identifying all IT services and applications used by their faculty, staff, and students. Jim Byford, CENG Director, had his tasked with identifying all IT services and applications used by the College of Engineering to establish which are important to them.</p>	High	<p>Recommendation for Dean of the College of Engineering:</p> <p>2.1. a. CENG should develop an inventory of all IT applications and services used by faculty, staff and students for use in performing a BIA.</p>	<p>1.1. A thorough review of priority was conducted to assess and prioritize impact on the college in different levels (i.e. college-wide, departmental, and individual). The review identified applications used by the entire college have more impact. Other applications at the departmental level are categorized based on volume of use. Research based applications are assessed on computational use. A summary is provided to explain tables and application data levels.</p>	Jim Byford, IT Support Manager	5/22/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2018	18-018 UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Engineering	UNT	<p>3. Business Impact Analysis not performed. A Business Impact Analysis has not been performed. The College of Engineering (CENG) had not evaluated their Business Impact Analysis (BIA) and had not assigned IT applications, servers, and data needed them for support. Jim Byford is leading the BCP effort, and has started work on a Business Impact Analysis (BIA).</p>	High	<p>Recommendation for Dean of the College of Engineering: 3.1 a. CEENG should perform a BIA to determine critical applications requiring a BCP.</p>	<p>1. A BIA was conducted to determine a list of applications that should be included in the BCP. The initial list was generated by Jim Byford (IT Manager) with additional feedback from Costas Tsakoulis (Dean of the College of Engineering).</p>	Costas Tsakoulis (Dean) and Jim Byford (IT Manager)	5/22/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018 UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Engineering	UNT	<p>4. Individual not assigned to lead Business Continuity Plan effort. An individual has not been assigned to lead the Business Continuity Plan effort. As determined during the Entrance Conference, the College of Engineering (CENG) had not assigned a person or persons the responsibility for developing, maintaining, and testing a Business Continuity Plan (BCP) for the college.</p>	Moderate	<p>Recommendation for Dean of the College of Engineering: 4.1 a. CEENG should assign a person or persons to lead the development, maintenance, and testing of the college's BCP.</p>	<p>1. Dean Tsakoulis tasked Jim Byford, Senior IT Support Director, College of Engineering, with leading the BCP effort.</p>	Costas Tsakoulis, Dean of the College of Engineering	5/22/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2018	18-018) UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Health and Public Service	UNT	1. Business Continuity Plan not created A Business Continuity Plan has not been created and tested. HPS does not have a Business Continuity Plan (BCP) in place. Jackie Thames is leading the effort to create a BCP and has started contacting the departments and areas in the College of Health and Public Service (HPS) to get their feedback on what applications and resources are important to them.	High	Recommendation for Dean of the College of Health and Public Service: 1.1.a. HPS should develop a BCP for critical IT services in the event of a disruption to IT services.	1.a. Draft of the HPS BCP is complete. Review by department representatives and tabletop exercise testing are planned for April 2018, with final BCP completed May 2018.	Linda Holloway, Dean, College of Health and Public Service	5/31/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018) UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Health and Public Service	UNT	1. Business Continuity Plan not created A Business Continuity Plan has not been created and tested. HPS does not have a Business Continuity Plan (BCP) in place. Jackie Thames is leading the effort to create a BCP and has started contacting the departments and areas in the College of Health and Public Service (HPS) to get their feedback on what applications and resources are important to them.	High	Recommendation for Dean of the College of Health and Public Service: 1.1.b. HPS should test their BCP once it has been developed.	1.b. Draft of the HPS BCP is complete. Review by department representatives and tabletop exercise testing are planned for April 2018, with final BCP completed May 2018.	Linda Holloway, Dean, College of Health and Public Service	5/31/2018	Closed

UNTS Enterprise Audit Report Inventory

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Internal	UNT System Internal Audit	Fiscal Year 2018	18-018) UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Health and Public Service	UNT	<p>2. Business Impact Analysis not performed.</p> <p>A Business Impact Analysis has not been performed. The College of Health and Public Service (HPS) had not evaluated their business processes to determine critical applications, services, and risk ranked them for priority.</p> <p>Jackie Thames, Senior IT Support Manager is leading the Business Continuity Plan (BCP) effort, and has started work on a Business Impact Analysis (BIA), by creating a committee made up of staff from various departments to determine what applications and services are important to them.</p>	High	<p>Recommendation for Dean of the College of Health and Public Service:</p> <p>2.1.a. HPS should perform a BIA to determine critical applications requiring a BCP.</p>	<p>1.a. Draft of the HPS BIA is complete. Review by department representatives and tabletop exercise testing are planned for April 2018, with final BIA completed with the BCP in May 2018.</p>	Linda Holloway, Dean, College of Health and Public Service	5/31/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018) UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Health and Public Service	UNT	<p>3. Individual not assigned to lead Business Continuity Plan effort.</p> <p>An individual has not been assigned to lead the Business Continuity Plan effort.</p> <p>As determined during the Entrance Conference, the College of Health and Public Service (HPS) had not assigned a person or person the responsibility for developing, maintaining, and testing a Business Continuity Plan (BCP) for the college.</p>	Moderate	<p>Recommendation for Dean of the College of Health and Public Service:</p> <p>3.1.a. HPS should assign a person or persons to lead the development, maintenance, and testing of the college's BCP.</p>	<p>1.a. Dean Holloway tasked Jackie Thames, Senior IT Support Manager with leading the BCP effort.</p>	Linda Holloway, Dean, College of Health and Public Service	5/22/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018K-UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Merchandising, Hospitality & Tourism	UNT	1. Business Continuity Plan not created A Business Continuity Plan has not been created and tested. The College of Merchandising, Hospitality & Tourism (CMHT) does not have a BCP and has not started working on a team consisting of representatives from faculty and administration.	High	Recommendation for Dean of College of Merchandising, Hospitality & Tourism: 1.1.a. CMHT should develop a BCP for critical IT services in the event of a disruption to IT services.	1.a. BCP created on March 19th and revised on March 29th. Tested BCP by working with faculty and staff to make sure the process set in place will work.	Sampath Pamdimukab, Senior IT Support Manager	5/22/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018K-UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Merchandising, Hospitality & Tourism	UNT	1. Business Continuity Plan not created A Business Continuity Plan has not been created and tested. The College of Merchandising, Hospitality & Tourism (CMHT) does not have a BCP in place. Sampath Pamdimukab is leading the effort to create a BCP and has started working on a team consisting of representatives from faculty and administration.	High	Recommendation for Dean of College of Merchandising, Hospitality & Tourism: 1.1.b. CMHT should test its BCP once it has been developed.	1.b. BCP created on March 19th and revised on March 29th. Tested BCP by working with faculty and staff to make sure the process set in place will work.	Sampath Pamdimukab, Senior IT Support Manager	5/22/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018K UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Merchandising, Hospitality & Tourism	UNT	<p>2. Inventory not performed</p> <p>An inventory of IT services has not been created. The College of Merchandising, Hospitality & Tourism (CMHT) had not performed an inventory of IT services used by their faculty, staff and students for use in performing a BIA. SamPATH Pradimukabala is leading the BCP effort and has started work creating a complete list of applications/services used within CMHT.</p>	High	<p>Recommendation for Dean of College of Merchandising, Hospitality & Tourism:</p> <p>2.1.a. CMHT should develop an inventory of all IT applications used by faculty, staff and students for use in performing a BIA.</p>	<p>1.a. Inventory of IT services has been conducted starting in February 2018 and completed on March 19, 2018.</p>	SamPATH Pradimukabala, Senior IT Support Manager	5/22/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018K UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Merchandising, Hospitality & Tourism	UNT	<p>3. Business Impact Analysis not performed</p> <p>A Business Impact Analysis has not been performed. The College of Merchandising, Hospitality & Tourism (CMHT) had not evaluated their application/service inventory, identified their mission-critical IT applications/services, and risk ranked them for priority. SamPATH Pradimukabala is leading the BCP effort. He has started work on a Business Impact Analysis (BIA), with a team consisting of representatives from faculty and administration, and other stakeholders within the University.</p>	High	<p>Recommendation for Dean of College of Merchandising, Hospitality & Tourism:</p> <p>3.1.a. CMHT should perform a BIA to determine critical applications requiring a BCP.</p>	<p>1.a. Business Impact Analysis is complete. Created BIA during February and March of 2018, by working with the faculty and staff of CMHT.</p>	SamPATH Pradimukabala, Senior IT Support Manager	5/22/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018-UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Merchandising, Hospitality & Tourism	UNT	<p>4. Individual not assigned to lead Business Continuity Plan effort.</p> <p>An individual has not been assigned to lead the Business Continuity Plan effort. Starting the process for the College of Merchandising, Hospitality & Tourism (CMHT) has not assigned a person or persons the responsibility for developing, maintaining, and testing a Business Continuity Plan (BCP) for the college.</p>	Moderate	<p>Recommendation for Dean of College of Merchandising, Hospitality & Tourism:</p> <p>4.1.a. CMHT should assign a person or persons to lead the development, maintenance, and testing of the college's BCP.</p>	<p>1.a. Dr. Evelyn Patrick Sampath Bandinukala, CMHT Senior IT Support manager, with leading the BCP effort.</p>	Dr. Justin Forney, Dean of College of Merchandising, Hospitality & Tourism.	5/27/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018-UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Information	UNT	<p>1. Business Continuity Plan not created</p> <p>A Business Continuity Plan has not been created and tested. The College of Information (COI) does not have a Business Continuity Plan (BCP) in place. Gary Matthews is creating a BCP and has started contacting the departments and areas within the College of Information to get their feedback on what applications and resources are important to them.</p>	High	<p>Recommendation for Dean of the College of Information:</p> <p>1.1.a. COI will create and test a new BCP.</p>	<p>1.a. COI will create and test a new BCP.</p>	Kingshuk, Dean, College of Information	<p>Exp. Impl. Date: 6/30/2018</p> <p>Rev. Impl. Date: 10/20/18</p>	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-0181 UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Information	UNT	<p>1. Business Continuity Plan not created</p> <p>A Business Continuity Plan has not been created and tested. The College of Information (COI) does not have a Business Continuity Plan. The COI should create a Business Continuity Plan and contact the departments and areas within the College of Information to get their feedback on what applications and resources are important to them.</p>	High	<p>Recommendation for Dean of the College of Information:</p> <p>1.1. b. COI should test their BCP once it has been developed.</p>	1.1. COI will create and test a new BCP.	Kinchul, Dean, College of Information	Exp. Impl. Date: 6/30/2018 Rev. Impl. Date: 10/20/18	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	18-0181 UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Information	UNT	<p>2. Inventory not performed</p> <p>An inventory of IT services has not been created. The College of Information (COI) had not created an inventory, identifying all IT services and applications used by their faculty, staff, and students. The COI should create an inventory of all IT services and applications used by their faculty, staff, and students. The COI should also create a list of all IT services and applications used by the College of Information to establish which are important to them.</p>	High	<p>Recommendation for Dean of the College of Information:</p> <p>2.1. a. COI should develop an inventory of all IT applications and services used by faculty, staff and students for use in performing a BIA.</p>	1.1. COI will complete an updated inventory of all IT assets, applications and services.	Kinchul, Dean, College of Information	4/30/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018 UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Information	UNT	3. Business Impact Analysis not performed. A Business Impact Analysis has not been performed. The College of Information (COI) had not evaluated their applications to determine if all IT applications, services, and risk needed been for performance. Gary Matthews is managing the Business Continuity Plan (BCP) effort and has started work on a Business Impact Analysis (BIA).	High	Recommendation for Dean of the College of Information: 3.1. a. COI should perform a BIA to determine critical applications requiring a BCP.	1.a. COI will complete a BIA to identify critical IT assets, applications and services to include in the BCP.	Kinchuk, Dean, College of Information	Exp. Impl. Date: 5/30/2018 Rev. Impl. Date: 09/25/18	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018 UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Information	UNT	4. Individual not assigned to lead Business Continuity Plan effort. An individual has not been assigned to lead the Business Continuity Plan effort. As determined during the Entrance Conference, the College of Information (COI) had not assigned a person or persons the responsibility for developing, maintaining, and testing a Business Continuity Plan (BCP) for the college.	Moderate	Recommendation for Dean of the College of Information: 4.1. a. COI should assign a person or persons to lead the development, maintenance, and testing of the college's BCP.	1.a. Dean Kinchuk took on the task of leading the BCP effort, tasking Gary Matthews with creating the plan.	Kinchuk, Dean, College of Information	5/22/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018m UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - CAVD	UNT	<p>1. Business Continuity Plan not created</p> <p>A Business Continuity Plan has not been created and tested. The College of Visual Arts and Design (CVD) does not have a Business Continuity Plan. Eric Ligon and Michael Baggett are leading the effort to create a BCP and have started conducting the departments and areas in the College of Visual Arts and Design to get their feedback on what applications and resources are important to them.</p>	High	<p>Recommendation for Dean of the College of Visual Arts and Design:</p> <p>1.1.a. CAVD should develop a BCP for critical IT services in the event of a disruption to IT services.</p>	<p>1.a. The College of Visual Arts and Design does not have a formal Business Continuity Plan in place. However, we do have continuity plans regarding IT, our academic mission and our business practice. As the college is currently undergoing a major renovation/construction project, we are currently in the process of creating a Business Continuity Plan. The plan will be finalized by the end of summer 2018 and the second semester 2018 break. It will be difficult for us to create a final, formal business continuity plan until we are fully at home in our new facilities. Therefore, it is our intention to work on our plan in three phases. 1. Short term: at the beginning of summer 2018, we will have plans in place to accommodate our business enterprise and classes as we vacate the current Art Building and move into temporary spaces. 2. Mid-term: fall 2018, we will revise our plans to accommodate the business and educational enterprises of the college while the majority of the staff in the college will be housed in temporary offices, faculty will be without offices on campus, and many programs and classrooms will be in temporary locations. 3. Long term: in January 2019, we will all move into our final locations and offices. We believe that there will need to be adjustments to our Business Continuity Plan at each stage to accommodate the unforeseen and unforeseen complications as part of the move.</p>	Eric Werts, Dean, College of Visual Arts and Design	3/27/2019	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018m UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - CAVD	UNT	<p>1. Business Continuity Plan not created</p> <p>A Business Continuity Plan has not been created and tested. The College of Visual Arts and Design (CVD) does not have a Business Continuity Plan (BCP) in place. Eric Ligon and Michael Baggett are leading the effort to create a BCP and have started conducting the departments and areas in the College of Visual Arts and Design to get their feedback on what applications and resources are important to them.</p>	High	<p>Recommendation for Dean of the College of Visual Arts and Design:</p> <p>1.1.b. CAVD should test their BCP once it has been developed.</p>	<p>1.a. The College of Visual Arts and Design does not have a formal Business Continuity Plan in place. However, we do have continuity plans regarding IT, our academic mission and our business practice. As the college is currently undergoing a major renovation/construction project and will be undergoing two major moves (the first over the summer, and the second over winter 2018 break), it will be difficult for us to create a final, formal business continuity plan until we are fully at home in our new facilities. Therefore, it is our intention to work on our plan in three phases. 1. Short term: at the beginning of summer 2018, we will have plans in place to accommodate our business enterprise and classes as we vacate the current Art Building and move into temporary spaces. 2. Mid-term: fall 2018, we will revise our plans to accommodate the business and educational enterprises of the college while the majority of the staff in the college will be housed in temporary offices, faculty will be without offices on campus, and many programs and classrooms will be in temporary locations. 3. Long term: in January 2019, we will all move into our final locations and offices. We believe that there will need to be adjustments to our Business Continuity Plan at each stage to accommodate the unforeseen and unforeseen complications as part of the move.</p>	Eric Werts, Dean, College of Visual Arts and Design	3/27/2019	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018m UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - CVD	UNT	<p>2. Business Impact Analysis not performed.</p> <p>A Business Impact Analysis has not been performed. The College of Visual Arts and Design (CVD) had not evaluated their business critical applications, services, and risk needed to be performed. Eric Ligon and Michael Baggett are leading the Business Continuity Plan (BCP) effort, and have started work on a Business Impact Analysis (BIA).</p>	High	<p>Recommendation for Dean of the College of Visual Arts and Design:</p> <p>2.1.a. CVD should perform a BIA to determine critical applications requiring a BCP.</p>	<p>1.a. As stated above, the Business Impact Analysis will be a missing target for the college as we proceed through each phase of our upcoming moves until we are in our final locations in January 2019. It is our plan to develop a BIA to determine critical applications within the college as early as possible within a 4-6 weeks of each of the respective moves.</p> <p>Expected Implementation Date: Short-term: 4th week in July, 2018; Mid-term: early October, 2018; Long-term: early February, 2019.</p>	Eric Werts, Dean, College of Visual Arts and Design	2/7/2019	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018m UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - CVD	UNT	<p>3. Individual not assigned to lead Business Continuity Plan effort.</p> <p>An individual has not been assigned to lead the Business Continuity Plan effort. As determined during the Entrance Conference, the College of Visual Arts and Design (CVD) had not assigned a person or persons the responsibility for developing, maintaining, and testing a Business Continuity Plan (BCP) for the college.</p>	Moderate	<p>Recommendation for Dean of the College of Visual Arts and Design:</p> <p>3.1.a. CVD should assign a person or persons to lead the development, maintenance, and testing of the college's BCP.</p>	<p>1.a. Management has taken appropriate action, assigning Eric Ligon and Michael Baggett to lead the BCP effort for the college.</p>	Greg Werts, Dean, College of Visual Arts and Design	5/22/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018n-UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Music	UNT	1. Business Continuity Plan not created A Business Continuity Plan has not been created and tested. The College of Music (COM) does not have a Business Continuity Plan (BCP) in place. Jon Nelson is leading the effort to create a BCP and has made a staff from which the College will work from to finalize a BCP.	High	Recommendation for Dean of the College of Music: 1.1. a. COM should develop a BCP for critical IT services in the event of a disruption to IT services.	1.a. The draft of the College of Music Business Continuity Plan (BCP) was completed on March 28, 2018. BCP review will be completed by May 1, 2018 and BCP testing will commence. Testing will be completed by August 31, 2018.	Jon Nelson, Associate Dean for Operations	8/31/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018n-UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Music	UNT	1. Business Continuity Plan not created A Business Continuity Plan has not been created and tested. The College of Music (COM) does not have a Business Continuity Plan (BCP) in place. Jon Nelson is leading the effort to create a BCP and has made a staff from which the College will work from to finalize a BCP.	High	Recommendation for Dean of the College of Music: 1.1. b. COM should test their BCP once it has been developed.	1.b. The draft of the College of Music Business Continuity Plan (BCP) was completed on March 28, 2018. BCP review will be completed by May 1, 2018 and BCP testing will commence. Testing will be completed by August 31, 2018.	Jon Nelson, Associate Dean for Operations	8/31/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018n-UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Music	UNT	<p>2. Inventory not performed</p> <p>An inventory of IT services has not been created. CDM had not created an inventory, identifying all IT services and applications used by the College of Music. Jon Nelson is leading the BC effort, and has started evaluating software used by the College of Music, to establish which are important to them.</p>	High	Recommendation for Dean of the College of Music: 2.1. a. CDM should develop an inventory of all IT applications and services used by faculty, staff and students for use in performing a BIA.	1.a. The inventory of College of Music IT services and applications was completed on March 28, 2018.	Jon Nelson, Associate Dean for Operations	5/22/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-018n-UNT	Governance and Regulatory Compliance	IT Business Continuity Plan - College of Music	UNT	<p>3. Business Impact Analysis not performed</p> <p>A Business Impact Analysis has not been performed. The College of Music (COM) had not evaluated their application/services inventory, identified their mission critical IT application/services, and risk ranked them for priority. Jon Nelson is leading the BC effort, and has started work on a Business Impact Analysis (BIA).</p>	High	Recommendation for Dean of the College of Music: 3.1. a. CDM should perform a BIA to determine critical applications requiring a BCP.	1.a. The College of Music Business Impact Analysis (BIA) was completed on March 28, 2018.	Jon Nelson, Associate Dean for Operations	5/22/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-005 ISC	Governance and Regulatory Compliance	Provoct Transition Audit	UNTHSC	<p>1. Cash Handling</p> <p>Cash handling procedures in the Facility Affairs Department are not adequate during the billing, collection, receipting, depositing, and reconciliation of room rental fees. Facility Affairs is responsible for the scheduling of facility room reservations throughout campus utilizing the Event Management System. Rental fees are billed and collected for private events according to established guidelines.</p> <ul style="list-style-type: none"> There is limited segregation of duties for the collecting, recording and depositing of cash collections. Specifically, the Room Scheduling Coordinator records all transactions and charges to the Event Management System, performs all collection activities, physically prepares all deposits. A Cash Receipt Log is not maintained. All collections are recorded to the Event Management System as received, and the updated Event Management System receipt is the only record of specific room reservations. However, a summary of all payments posted is not generated from the system. There is not a reconciliation of system events and payments recorded to the system to actual total deposits (i.e. no confirmation of deposits). The billing statement sent to external parties does not instruct the payer to make check payments to UNTHSC. Checks are not restrictively endorsed immediately upon receipt. 	High	<p>Recommendations for the UNTHSC Vice President for Finance & Planning and the UNTS Associate Controller at UNTHSC:</p> <p>1.2.a. Utilize the UNT System 04.302 Cash-Handling Control as a template to design Cash Handling Control policies and procedures for UNTHSC.</p>	<p>2a. Cash handling Control policies and procedures will be developed using the UNT System 04.302 Cash Handling Control policy as a guide.</p>	<p>Geoffrey Sorrell, Vice President Finance & Planning and Paula Wink, UNT System Associate Controller at UNTHSC</p>	12/21/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	18-005 ISC	Governance and Regulatory Compliance	Provoct Transition Audit	UNTHSC	<p>1. Cash Handling</p> <p>Cash handling procedures in the Facility Affairs Department are not adequate during the billing, collection, receipting, depositing, and reconciliation of room rental fees. Facility Affairs is responsible for the scheduling of facility room reservations throughout campus utilizing the Event Management System. Rental fees are billed and collected for private events according to established guidelines.</p> <p>Specifically, the following were noted:</p> <ul style="list-style-type: none"> There is limited segregation of duties for the collecting, recording and depositing of cash collections. Specifically, the Room Scheduling Coordinator records all transactions and charges to the Event Management System, performs all collection activities, physically prepares all deposits. A Cash Receipt Log is not maintained. All collections are recorded to the Event Management System as received, and the updated Event Management System receipt is the only record of specific room reservations. However, a summary of all payments posted is not generated from the system. There is not a reconciliation of system events and payments recorded to the system to actual total deposits (i.e. no confirmation of deposits). The billing statement sent to external parties does not instruct the payer to make check payments to UNTHSC. Checks are not restrictively endorsed immediately upon receipt. 	High	<p>Recommendations for the UNTHSC Vice President for Finance & Planning and the UNTS Associate Controller at UNTHSC:</p> <p>1.2.a. Utilize the UNT System 04.302 Cash-Handling Control as a template to design Cash Handling Control policies and procedures for UNTHSC.</p> <p>1.2.b. Communicate to all employees handling cash in order to assist them with the updated policies and procedures to assist them in fulfilling their cash handling responsibilities.</p>	<p>2b. The final Cash Handling Control policies and procedures will be provided to all employees handling cash in order to assist them with their cash handling responsibilities.</p>	<p>Geoffrey Sorrell, Vice President Finance & Planning and Paula Wink, UNT System Associate Controller at UNTHSC</p>	12/21/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-405 IBC	Governance and Regulatory Compliance	Process Transition Audit	UNTHSC	<p>1. Cash Handling</p> <p>Cash handling procedures in the Facility Affairs Department are not adequate during the billing, collection, receipt, depositing, and reconciliation process. The Facility Affairs Department is responsible for the scheduling of facility room reservations throughout campus utilizing the Event Management System. Rental fees are billed and collected for private events according to established guidelines.</p> <ul style="list-style-type: none"> There is limited segregation of duties for the collecting, recording, and depositing of cash collections. Specifically, the Room Scheduling Coordinator records all transactions and charges to the Event Management System, performs all collection activities, physically prepares all deposits. A Cash Receipt Log is not maintained. All collections are recorded to the Event Management System as received, and the updated Event Management System records are used to reconcile specific room reservations. However, a summary of all payments posted is not generated from the system. There is not a reconciliation of system events and payments recorded to the system to actual toml deposits (i.e. no confirmation of payments). The billing statement sent to external parties does not instruct the payer to make check payments to UNTHSC. Checks are not restrictively endorsed immediately upon receipt. <p>No observations. This was a management advisory service (MAS).</p>	High	Recommendations for the UNTHSC Vice President for Finance & Planning and the UNTS Associate Controller at UNTHSC: 1.2.c. Develop an annual mandatory cash handling training for all employees handling cash.	2.c. Training will be developed based on the final Cash Handling Control policy and procedures and mandatory training will be required, at least annually, for all employees handling cash.	Coeffrey, Sarahell, Vice President Finance & Planning and Paula Welch, UNT System Associate Controller at UNTHSC	12/27/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	18-404 DAL	Governance and Regulatory Compliance	Data Security for Network Multifunction Printer (MFPs)	UNT Dallas		NA	NA	NA	NA	NA	N/A

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	N/A	Governance and Regulatory Compliance	UNT Dallas Monitoring Printer Usage	UNT Dallas	No observations. This was a management advisory service (MAS).	NA	NA	NA	NA	NA	N/A
Internal	UNT System Internal Audit	Fiscal Year 2018	N/A	Governance and Regulatory Compliance	University - Owned Cell Phone Billing Process (MAS)	UNT Dallas	No observations. This was a management advisory service (MAS).	NA	NA	NA	NA	NA	N/A

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-020 UNT	Governance and Regulatory Compliance	Student Awareness and Training - Lab Safety Audit	UNT	<p>1. Lab Safety</p> <p>There are no fire sprinkler and full-coverage fire detection systems in Oak Street Hall and Oak Street Annex.</p> <p>The fire safety inspection was conducted on March 1st and 2nd, 2018. The fire safety inspection was conducted on Oak Street Hall and Oak Street Annex. The project is titled UNT Oak Street Hall and Oak Street Annex - Review for Major Life Safety Issues. The purpose of the inspection was to address critical life-safety deficiencies in the building, but not limited to the following:</p> <ul style="list-style-type: none"> 1. Lack of automatic fire sprinkler systems 2. Lack of full-coverage fire detection system (currently, there is partial detection system coverage) 3. Inadequate barriers/protection and warning signs for outdoor kilns 4. Gas pipes positioned over outdoor kilns, and 5. Inadequate barriers/protection and warning signs for outdoor kilns. <p>According to the report, the fire safety deficiencies identified in the report were corrected and some remain unaddressed.</p>	High	<p>Recommendations for Jennifer Cowley, Provost and Vice President for Academic Affairs:</p> <p>1.1.a. Collaborate with the UNT Vice President for Finance and Administration to develop a plan to correct the life-safety deficiencies related to fire sprinkler and detection systems.</p>	<p>1.a. Actions have been taken to address as many of the life and safety issues as possible, including for example, moving a gas line. The College of Visual Arts and Design, in partnership with UNT Facilities and Academic Affairs is evaluating alternatives for a new facility to allow for the upgrading of the existing facility.</p>	Jennifer Cowley, Provost and Vice President for Academic Affairs	8/31/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	18-020 UNT	Governance and Regulatory Compliance	Student Awareness and Training - Lab Safety Audit	UNT	<p>2. Chemical Inventory</p> <p>A consolidated chemical inventory for all University labs is not maintained.</p> <p>Currently, RMS uses a spreadsheet program to track the chemical inventory.</p> <p>Based on the internal audit's observations with the Director of Environmental Risk, academic departments have historically had issues maintaining a chemical inventory and submitting the inventory results to Risk Management Services (RMS). While Chemistry and Physics have addressed their chemical inventory issues, other departments have not. The audit identified the following compliance process and procedures to achieve compliance:</p> <p>Internal Audit noted that RMS does not currently have a standard operating procedure that specifically addresses chemical inventories in labs. According to the Director of Environmental Risk, tracking of chemical inventories is currently done through spreadsheets. The current process for tracking chemical inventory is manual.</p>	High	<p>Recommendations for Scott Dunkle, Director of Environmental Risk:</p> <p>2.1.a. Require that all academic departments submit a chemical inventory to RMS.</p>	<p>1.a. As of October 2017, RMS has been working with academic departments to obtain complete chemical inventories with an emphasis on Chemistry, Physics, and portions of the Biological Sciences, with efforts at Discovery Park now beginning. Previous inventories had been maintained through purchase requests.</p>	Scott Dunkle, Director of Environmental Risk, Shih-Huang Chen, Chemical Hygiene Officer	10/7/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-020 UNT	Governance and Regulatory Compliance	Student Awareness and Training - Lab Safety Audit	UNT	<p>2. Chemical Inventory</p> <p>A consolidated chemical inventory for all University labs is not maintained. Currently, RMS uses a spreadsheet program to track the chemical inventory. Based on Internal Audit's conversation with the Director of Environmental Risk, academic departments have historically had issues maintaining a chemical inventory and submitting the inventory to Risk Management Services (RMS). While Chemistry and Physics have addressed their chemical inventory issues, other academic departments are in the process of developing inventory processes and procedures to achieve compliance. Internal Audit noted that RMS does not currently have a standard operating procedure that specifically addresses chemical inventories in labs. According to the Director of Environmental Risk, tracking of chemical inventory is in the infancy stage. Additionally, the current process for tracking chemical inventory is manual.</p>	High	<p>Recommendations for Scott Dunkle, Director of Environmental Risk:</p> <p>2.1.b. Develop a standard operating procedure that addresses chemical inventory in labs.</p>	<p>2.1.a. Standard operating procedure will be drafted that addresses chemical inventories in labs.</p>	Scott Dunkle, Director, Environmental Risk, Shi-Huang Huang, Chemical Hygiene Officer	10/7/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	18-020 UNT	Governance and Regulatory Compliance	Student Awareness and Training - Lab Safety Audit	UNT	<p>2. Chemical Inventory</p> <p>A consolidated chemical inventory for all University labs is not maintained. Currently, RMS uses a spreadsheet program to track the chemical inventory. Based on Internal Audit's conversation with the Director of Environmental Risk, academic departments have historically had issues maintaining a chemical inventory and submitting the inventory to Risk Management Services (RMS). While Chemistry and Physics have addressed their chemical inventory issues, other academic departments are in the process of developing inventory processes and procedures to achieve compliance. Internal Audit noted that RMS does not currently have a standard operating procedure that specifically addresses chemical inventories in labs. According to the Director of Environmental Risk, tracking of chemical inventory is in the infancy stage. Additionally, the current process for tracking chemical inventory is manual.</p>	High	<p>Recommendations for Scott Dunkle, Director of Environmental Risk:</p> <p>2.1.c. Acquire a software program to track chemical inventory University-wide.</p>	<p>2.1.c. A software program has already been acquired within RMS that will be utilized to track chemical inventories.</p>	Scott Dunkle, Director, Environmental Risk, Shi-Huang Huang, Chemical Hygiene Officer	10/7/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	14-020 UNT	Governance and Regulatory Compliance	Student Awareness and Training - Lab Safety Audit	UNT	<p>3. Emergency Contact Lists</p> <p>Emergency contact lists on lab doors were missing or contained outdated information. In addition, Risk Management Services does not have a comprehensive listing of lab managers.</p> <p>Emergency contact lists generally contain phone numbers for UNT Police Department, Denton Police Department, Denton Fire Department, Risk Management Services (RMS), and Poison Control among others.</p> <p>Internal Audit observed the following:</p> <ul style="list-style-type: none"> Multiple labs did not have an emergency contact list posted either on the outside or inside lab entrance door or wall. Emergency contact lists contained outdated names and contact information. Emergency contact lists were missing or contained outdated information. Emergency contact lists generally contain phone numbers for UNT Police Department, Denton Police Department, Denton Fire Department, Risk Management Services (RMS), and Poison Control among others. <p>Based on a discussion with the Discovery Park RMS Lab Safety Officer, there is not a listing of lab managers for labs at Discovery Park. The current listing of lab managers for labs at Discovery Park is a listing of lab managers for Chemistry, Physics, and Studio Art labs.</p>	High	<p>Recommendations for Scott Dunkle, Director of Environmental Risk:</p> <p>3.1.a. Ensure that accurate and up-to-date emergency contact lists are posted on outside lab doors.</p>	<p>1.a. As of January 2018, RMS initiated a project to develop consistent laboratory door signage that includes the name of the principal investigator (PI) or lab manager, emergency contact information, as well as the potential hazards that lie within the given lab. The majority of labs at Discovery Park have been updated with this signage. Only managers with priorities and the remaining departments/PI/lab managers to complete the project. PIs and lab managers are expected to update the signage when personnel change at least annually. RMS will inspect signage during regular laboratory audits.</p>	Scott Dunkle, Director, Environmental Risk; Rhima Adeyemo, Radiation Safety Officer	8/7/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	18-020 UNT	Governance and Regulatory Compliance	Student Awareness and Training - Lab Safety Audit	UNT	<p>3. Emergency Contact Lists</p> <p>Emergency contact lists on lab doors were missing or contained outdated information. In addition, Risk Management Services does not have a comprehensive listing of lab managers.</p> <p>Emergency contact lists generally contain phone numbers for UNT Police Department, Denton Police Department, Denton Fire Department, Risk Management Services (RMS), and Poison Control among others.</p> <p>During walkthrough of Chemistry, Engineering, and Studio Art labs, Internal Audit observed the following:</p> <ul style="list-style-type: none"> Multiple labs did not have an emergency contact list posted either on the outside or inside lab entrance door or wall. Emergency contact lists contained outdated names and contact information. Emergency contact lists were missing or contained outdated information. <p>For example, the RMS contact on several emergency contact lists was an individual who is no longer employed at UNT. The current listing of lab managers for labs at Discovery Park is a listing of lab managers for Chemistry, Physics, and Studio Art labs.</p>	High	<p>Recommendations for Scott Dunkle, Director of Environmental Risk:</p> <p>3.1.b. Develop and maintain a comprehensive listing of current lab managers for science and art labs.</p>	<p>1.b. RMS has historically maintained a listing of current lab managers, update annually, and will update for 2018 and continue to maintain this list moving forward.</p>	Scott Dunkle, Director, Environmental Risk; Rhima Adeyemo, Radiation Safety Officer	8/7/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individuals Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-020 UNT	Governance and Regulatory Compliance	Student Awareness and Training - Lab Safety Audit	UNT System	<p>6. IT Review of Third Party Cloud Service from Administrative Information Technology Services (ATS). Risk Management Services (RMS) purchased a subscription service that does not provide safety data sheets (SDS) for chemicals. Previously, the University used paper copies of MSDS.</p> <p>Once fully implemented, will be relied on to provide continuous MSDS information to the University. The Occupational Safety and Health Administration (OSHA) requires that MSDS be readily available to those individuals who may be exposed to hazardous chemicals. The Contract Group in Business Support Services determined that review or approval from IT Compliance was not necessary based on the University's current subscription. Additionally, there appears to be a gap in the current process that does not require local IT (campus level) to review all software purchases.</p> <p>The Factor Director of ATS was not aware that the service had been purchased. Therefore, ATS was not able to perform a review prior to purchase.</p>	High	<p>Recommendations for Michael Abernethy, Senior Director of Procurement Services:</p> <p>6.1.a. Coordinate with the Associate Vice President of University Information Technology Services to ensure that an IT review takes place prior to purchase for all requests for software services.</p>	<p>1.a. Ashley Orling, Michael Abernethy and the associated team members will coordinate to determine the appropriate adjustments to the procurement and contracting processes to ensure that an IT review takes place prior to purchase for all requests for software services.</p>	Michael Abernethy, Senior Director for Procurement Services; Ashley Orling, Director, UNT Systems Integration, Classroom Support	8/7/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	18-020 UNT	Governance and Regulatory Compliance	Student Awareness and Training - Lab Safety Audit	UNT	<p>7. Eyewash Fountain Inspections</p> <p>There was no documentation of weekly eyewash fountain inspections.</p> <p>During walkthroughs of Chemistry, Engineering, and Studio Art labs, Internal Audit observed that required weekly inspections of eyewash fountains were not being performed. The signs located above the eyewash fountains, however, the off sheets located either not being updated or were sporadically prepared. Several sign off sheets observed the last entry date noted was in 2014.</p>	Moderate	<p>Recommendations for Scott Dunkle, Director of Environmental Risk:</p> <p>7.1.a. Ensure that lab inspections report non-compliance of eyewash fountains not being inspected and documented on a weekly basis.</p>	<p>1.a. Check for eyewash inspections is included in the RMS lab inspection criteria and inspection personnel will document non-compliance with eyewash standards.</p>	Scott Dunkle, Director, Environmental Risk; Shi-Huang Officer; Anthony Roman, Lab Safety Officer	8/7/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-020 UNT	Governance and Regulatory Compliance	Student Awareness and Training - Lab Safety Audit	UNT	<p>7. Eyewash Fountain Inspections There was no documentation of weekly eyewash fountain inspections. The weekly logs of Chemistry, Engineering, and Geology labs, Internal Audit observed that requires weekly inspections of eyewash fountains were not documented. There were sign off sheets located next to each eyewash fountain. However, the sign off sheets were either not being updated or were sporadically prepared. Several sign off sheets observed the last entry date noted was in 2014.</p>	Moderate	<p>Recommendations for Scott Dunkle, Director of Environmental Risk: 7.1. b. Either instruct or provide training to those who are responsible to conduct and document weekly eyewash fountain inspections.</p>	<p>1. As of February 2018, RMS lead a student worker to visit with weekly eyewash activations and inspections. Laboratories found out of compliance with weekly activation criteria will be instructed regarding their activation obligations.</p>	Scott Dunkle, Director of Environmental Risk, Shih-Huang Huang, Chemical Hygiene Officer, Anthony Roman, Lab Safety Officer	8/7/2018	Open
Internal	UNT System Internal Audit	Fiscal Year 2018	18-020 UNT	Governance and Regulatory Compliance	Student Awareness and Training - Lab Safety Audit	UNT	<p>8. Training Verification & Lab Access Verification of completed training is not submitted when lab access for a student is requested. Per Risk Management Services (RMS) personnel, students participating in labs are required to complete online training through the Risk Management Services website. In addition, students may also have to complete training from Principal Investigator (PI), teaching faculty, lab manager, or designated individual. Based on discussions with RMS personnel, completion of in-person training is not consistently documented. Lab PIs and submitted to RMS. A PI or faculty member may request lab access for a student. Internal Audit discussed this process with UNT Access Control and the College of Engineering IT. UNT Access Control provides swipe card and key access to labs at Discovery Park. The College of Engineering IT provides swipe card access to labs at Discovery Park. Internal Audit noted that support documentation confirming completion of training is not provided to either UNT Access Control or the College of Engineering IT when lab access is requested.</p>	Moderate	<p>Recommendation for Scott Dunkle, Director of Environmental Risk: 8.1.a. Develop a process and procedure to require lab training verification be submitted to UNT Access Control or the College of Engineering IT where applicable when lab access is requested.</p>	<p>1.a. RMS, in conjunction with UNT Access Control and College of Engineering IT, will evaluate options for supplying training verification to a procedure to improve upon current lab access protocols.</p>	Scott Dunkle, Director of Environmental Risk, Jonathan Roman, Lab Safety Officer, Analysts: Felicia Adaperino, Radiation Safety Officer	12/31/2018	Open

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-020 UNT	Governance and Regulatory Compliance	Student Awareness and Training - Lab Safety Audit	UNT	<p>9. New Lab Identification</p> <p>Lab inspectors are not utilizing the most current listing of science and art labs to complete their lab inspections. The OSMPJ administrator should annually review the OSMPJ database and maintain an accurate record of space and the utilization of the space. Examples, include: classrooms, teaching labs, research labs, and storage space. The OSMPJ database, includes: science and art labs. Based on discussion with the Director of OSMPJ, the database is reviewed and updated throughout the academic year.</p> <p>Risk Management Services (RMS) maintains its own lab listing for inspection purposes. Based on discussion with RMS personnel, this lab listing is updated via download from the OSMPJ database and is not reviewed for accuracy. Based on discussion with RMS personnel, however, lab inspectors identify inconsistencies in the field from time to time.</p> <p>Because of the above processes, the lab listings between OSMPJ and RMS do not always correspond. RMS personnel perform lab inspections twice a year.</p>	Moderate	<p>Recommendation for Scott Dunkle, Director of Environmental Risk:</p> <p>9.1.a. Download lab information from OSMPJ database before each semi-annual lab inspection.</p>	<p>1.a. The new Risk Management Information System, contains an inspection portal which is being used for lab inspections moving forward. This system is directly tied to the OSMPJ database so that the information RMS uses will mirror that of the OSMPJ.</p>	Scott Dunkle, Director, Environmental Risk; Shi-Huang Huang, Chemical Hygiene Officer; Anthony Roman, Lab Safety Officer	4/10/2018	Closed
Internal	UNT System Internal Audit	Fiscal Year 2018	18-020 UNT	Governance and Regulatory Compliance	Student Awareness and Training - Lab Safety Audit	UNT	<p>9. New Lab Identification</p> <p>Lab inspectors are not utilizing the most current listing of science and art labs to complete their lab inspections. The Office of Space Management and Planning (OSMPJ) administrator should annually survey to update its database and maintain an accurate record of science and art labs, teaching labs, and storage space. The OSMPJ database, includes: science and art labs. Based on discussion with the Director of OSMPJ, the database is reviewed and updated throughout the academic year.</p> <p>Risk Management Services (RMS) maintains its own lab listing for inspection purposes. Based on discussion with RMS personnel, this lab listing is updated via download from the OSMPJ database and is not reviewed for accuracy. Based on discussion with RMS personnel, however, lab inspectors identify inconsistencies in the field from time to time.</p> <p>Because of the above processes, the lab listings between OSMPJ and RMS do not always correspond. RMS personnel perform lab inspections twice a year.</p>	Moderate	<p>Recommendation for Scott Dunkle, Director of Environmental Risk:</p> <p>9.1.b. Update the RMS lab information with the new OSMPJ lab information.</p>	<p>1.b. While RMS will be linked and continually updated through the OSMPJ database as mentioned above, it is important to realize that departments campus-wide that would not require inspections such as the University, Deans, and Engineering can be made for some labs in the OSMPJ database. The OSMPJ database, includes: space type code 250 corresponding to Research/Non-Class Laboratories. To compound the issue, there are many different types of laboratory classifications within the OSMPJ system, such as Class Class Laboratory Service, Research/Non-Class Laboratory, and Research/Non-Class Laboratory Service. That being said, periodic consultation of the OSMPJ database is a useful endeavor and will continue to be utilized, require regular inspection. RMS will also explore the possibility of lab verification within regular Environmental Oversight and Risk Review Committee (EORRC) meetings.</p>	Scott Dunkle, Director, Environmental Risk; Shi-Huang Huang, Chemical Hygiene Officer; Anthony Roman, Lab Safety Officer	4/10/2018	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
Internal	UNT System Internal Audit	Fiscal Year 2018	18-020 UNT	Governance and Regulatory Compliance	Student Awareness and Training - Lab Safety Audit	UNT	10. Liability Release Form The College of Visual Arts and Design uses a Liability Release form that contains significant legal deficiencies. The Office of General Counsel (OGC) reviewed the Liability Release form and concluded the Liability Release form as written is significantly deficient. Additionally, the Liability Release form was not vetted, reviewed, or prepared by OGC.	Moderate	Recommendation for Jennifer Cowley, President and Vice President for Academic Affairs: 10.1.a. Discontinue the use of liability releases for students participating in science and art labs.	1.a. CVAD has discontinued the use of the liability release form in science and art labs.	Gregory Watts, Dean of CVAD	4/5/2018	Closed
External	State Auditor's Office	Fiscal Year 2018	18-314	Financial	State of Texas Federal Portion of the Statewide Financial Report For the Fiscal Year Ended August 31, 2017	UNT	Verification of Applications: For 5 (8 percent) of 61 students listed, the University of North Texas (University) did not accurately verify certain required items on the student's FAFSA or made unsupported changes to FAFSA items.	NA	The University should: - Accurately verify required FAFSA information for applicants selected for verification and make changes based only on the supporting documentation that students provide.	Management acknowledges the findings and recommendations. The University will work to develop and implement the corrective action plan. Management reviewed the recommendations and updated its verification procedures.	Dora Guzman-Torres, Assistant Director Financial Aid and Scholarships, Director Financial Aid	8/7/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Auditor's Office	Fiscal Year 2018	18-314	Financial	State of Texas Federal Portion of the Statewide Single Audit Report For the Fiscal Year Ended August 31, 2017	UNT	<p>General Controls:</p> <p>The University did not appropriately restrict access to its financial assistance information system. The University did not have adequate logical access controls for its financial assistance information system.</p>	NA	<p>The University should:</p> <ul style="list-style-type: none"> Limit administrative access to its financial assistance information system to only individuals with a specific business need for that access. 	<p>The University acknowledges the findings. Through analysis of the exceptions identified in the audit, the University will work to develop and implement corrective actions.</p> <p>The University acknowledges that there were more than one individual who had access at the time of this audit.</p> <p>Since notification by the auditors of their concerns regarding this item, the following actions have been taken:</p> <ul style="list-style-type: none"> Reduced the number of individuals within the information system that have access. Increased restrictions to financial assistance program. Additional remediation efforts are in progress to support a more restricted environment. 	Donorly Foyes, Executive Director for Enterprise Applications	12/7/2017	Closed
External	State Auditor's Office	Fiscal Year 2018	18-314	Financial	State of Texas Federal Portion of the Statewide Single Audit Report For the Fiscal Year Ended August 31, 2017	UNT	<p>Return of Title IV Calculations:</p> <p>The University of North Texas (University) did not perform return calculations or return Title IV funds for 213 percent of 70 students tested because it did not consider students who withdrew from modular programs to be withdrawn.</p> <p>In addition, the University did not return the correct amount of funds for 111 percent of 70 students tested.</p>	NA	<p>The University should:</p> <ul style="list-style-type: none"> Develop, document, and implement a process to identify students who withdrew from modular programs and perform Title IV return calculations for those students. 	<p>Management acknowledges and agrees with the findings and recommendations. Through analysis of the exceptions identified in the audit, the University will develop and implement corrective action to further improve the processes.</p> <p>Management updated its procedures to identify students who withdrew from modular programs and ensure students who withdrew from modular programs are included in the Title IV fund performance. Management identified the initial errors with employees and made changes to improve its review, calculating and monitoring process of Return of Title IV funds.</p>	Missy Boyer, Assistant Director Financial Aid and Scholarships, Director Financial Aid	8/7/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report Was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Auditor's Office	Fiscal Year 2018	18-314	Financial	State of Texas Federal Portion of the Statewide Single Audit Report for the Fiscal Year Ended August 31, 2017	UNT	Return of Title IV Calculations: The University of North Texas (University) did not perform return calculations or return Title IV funds for 2.13 percent of 70 students who withdrew from the University of North Texas (UNT) in the fall semester. In addition, the University did not return the correct amount of funds for 1.11 percent of 70 students tested.	NA	The University should: - Return accurate amounts of Title IV funds.	Management acknowledges and agrees with the findings and recommendations. Through analysis of the exceptions identified in the audit, the University will work to develop and implement corrective action to further improve the processes. Management updated its procedures to identify students who withdraw from modular programs and ensure calculations for Return of Title IV funds are performed. Management reviewed the manual errors with employees and made changes to improve its review, calculating and monitoring process of Return of Title IV funds.	Melissa Boyer, Assistant Director Financial Aid, and Lacey Thompson, Director Financial Aid	8/7/2017	Closed
External	State Auditor's Office	Fiscal Year 2018	18-314	Financial	State of Texas Federal Portion of the Statewide Single Audit Report For the Fiscal Year Ended August 31, 2017	UNT	General Controls: The University did not appropriately restrict access to its financial assistance information system. The University also did not have adequate logical access controls for its financial assistance information system.	NA	The University should: - Limit administrative access to its financial assistance information system to only individuals with a specific business need for that access.	The University acknowledges the findings. Through analysis of the exceptions identified in the audit, the University will work to develop and implement corrective actions. The University acknowledged that there was more than one individual who had access at the time of this audit. Since notification by the auditors of their concerns regarding this item, the following actions have been taken: - Reduced the number of individuals within the information system that have administrative access to the financial assistance program. - Increased restrictions to financial assistance program. - Additional remediation efforts are in progress to support a more restricted environment.	Dorothy Flores, Executive Director for Enterprise Applications	12/1/2017	Closed

UNTS Enterprise Audit Report Inventory

Internal/ External	Reporting Agency	Fiscal Year Report was Issued	Audit Number	Audit Category	Report Name	Component Institution	Key Observations	Risk Level	Recommendation Details	Management Response	Individual Responsible for Implementation	Expected Implementation Date	Recommendation Status
External	State Auditor's Office	Fiscal Year 2018	18-555	Financial	Statewide Single Audit Report for the Year Ended August 31, 2017	UNT	The University of North Texas (UNT) (1) incorrectly excluded from its fiscal year 2017 SEFA 53516 in expenditures for 1 Student Financial Assistance CFDA program and (2) incorrectly included on its fiscal year 2017 disbursement activity. As a result, UNT (1) overstated revenue by \$412,240 in Note 2 to its SEFA. The University of North Texas (UNT) incorrectly excluded from its fiscal year 2017 SEFA 53516 in expenditures for 1 Student Financial Assistance CFDA program and (2) incorrectly included on its fiscal year 2017 disbursement activity. As a result, UNT (1) overstated revenue by \$412,240 in Note 2 to its SEFA. These errors occurred because UNT incorrectly included on its SEFA adjustments that were not associated with fiscal year 2017 disbursement activity. As a result, UNT (1) overstated revenue by \$412,240 in Note 2 to its SEFA.	NA	UNT should strengthen its SEFA preparation and review process to help ensure that it prepares its SEFA correctly, including ensuring that it reports expenditures in the appropriate fiscal year.	The University of North Texas (UNT) acknowledges and agrees with the findings. During the audit, UNT determined there was an error in including fiscal year 2017 expenditures and revenues reported on the overall statement of expenditures and revenues in SEFA by \$412,240. UNT updated processes to ensure future reporting reports these balances in the appropriate fiscal year.	Associate Controller	12/18/2017	Closed

Background Report



Committee: Audit

Date Filed: June 29, 2018

Title: UNT System Consolidated Quarterly Compliance Report March 2018 through May 2018

Background:

This report represents the quarterly compliance actions for the University of North Texas System, University of North Texas, University of North Texas Health Science Center and the University of North Texas at Dallas from March 1, 2018 through May 31, 2018. Regular reporting of compliance actions to the UNT System Board of Regents is required by the United States Sentencing Commission's Federal Guidelines §8B2.1(b)(2)(A).

This quarterly report has been consolidated to reflect the compliance actions for all UNT System components. This report reflects the actions that management and each compliance function has taken to manage their highest compliance risks.

Financial Analysis/History:

This is a report item only.

Gary Rahlfs
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DN: cn=Gary Rahlfs, o=UNT System,
ou=Vice Chancellor for Finance,
email=gary.rahlfs@untsystem.edu, c=US
Date: 2018.07.31 15:28:56 -05'00'

Vice Chancellor for Finance

Legal Review:

This item has been reviewed by General Counsel.

Nancy S. Footer
Digitally signed by Nancy S. Footer
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Texas System, ou=Office of General Counsel,
email=nancy.footer@untsystem.edu, c=US
Date: 2018.08.01 11:45:39 -05'00'

Vice Chancellor/General Counsel

Schedule: N/A

No action required. Information only. Submitted by:

Steven A. Hill I
UNT System Compliance Officer

Tracy C.
Grunig

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Chief Audit Executive

Lesa B. Roe

Digitally signed by Lesa B. Roe
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Date: 2018.08.01 16:53:47 -0500

Chancellor

Attachments Filed Electronically:

- UNT System Consolidated Quarterly Compliance Report: Mar.2018 – May.2018

UNT System Consolidated Quarterly Compliance Report March 2018 through May 2018



Section I. Organizational Actions

The System Executive Compliance Committee (the most senior UNT System-wide Compliance Committee) is in place, providing system-wide leadership, oversight, and direction for the Compliance and Integrity Program (C&IP). The Institutional Executive Compliance Committee for UNT System Administration is in place as well, providing Institutional-level leadership, oversight, and direction for the System Administration C&IP.

Section II. Compliance Risks

High-Risk #1: Electronic Information Mis-Handling (Information Technology Shared Services - ITSS)

Action Taken by Management:

- The ITSS Information Security Office submits security reports each month to the Texas Department of Information Resources (DIR) in fulfillment of Texas Administrative Code (TAC) 202.73(b)(2). Reports include instances of security violations involving University resources. Three required monthly reports were submitted to DIR this quarter.
- Texas Administrative Code 202.74(b)(2) requires institutions of higher education to introduce information security awareness and inform new employees of information security policies and procedures during the onboarding process. This material is presented to new employees as part of the online onboarding process facilitated by campus Human Resources. In addition, an on-going security awareness training program is in place for current employees. Security awareness training was provided to thirty-five (35) new and current employees.
- IT support is provided to UNT System through Information Technology Shared Services (ITSS).

Action Taken by System and/or Institutional Compliance:

- System and Institutional Compliance continue to partner with ITSS to identify opportunities to enhance the processes and procedures associated with information security and Electronic Information Mis-Handling.

High-Risk #2: Records Management and Retention (Office of Institutional Compliance)

Action Taken by Management, Records Management and/or Institutional Compliance

- The UNT Compliance Officer (and Chief Records Management Officer), the Director of Institutional Records Management, and the Chief Records Management Representative continue to provide on-demand in-person records management training to records management personnel at UNT System Administration, UNT, and UNT Dallas. The last

training took place on March 29, and May 15, 2018, and was geared towards System Administration and UNT records management personnel.

- The Records Management team is finalizing online records management training that is designed to be completed by all applicable Records Management Representatives (RMRs) for UNT System Administration, UNT, and UNT Dallas. The online training will be accessed from the Institutional Records Management website, with the exam and tracking being administered through Qualtrics, and training completion information being separately reported into the PeopleSoft Learning Management System.
- The Records Management team continues to provide technical advice and guidance to UNT System Administration, UNT, and UNT Dallas management pertaining to complicated records management and retention questions and situations.

High-Risk #3: Required Compliance Related Training (Office of Institutional Compliance)

Action Taken by Management and/or System/Institutional Compliance

- System/Institutional Compliance (S/IC) in collaboration with the Business Operations training team within Administrative Services (of the UNT Finance and Administration Division) and System Human Resources (HR) have developed the first of the required compliance related web-based training modules, which is "Compliance Awareness Training (CAT)" that is hosted by the new PeopleSoft Learning Management System.
- S/IC is coordinating with HR to register UNT System Administration Cabinet members and other key leaders to access and complete the CAT, to access and complete the exam, to access, complete, and print their completion certifications, and provide some valuable feedback pertaining to their CAT experience. S/IC intends to coordinate with HR to use this feedback to enhance the training experience of the UNT System Administration employees the training will be provided to next quarter.

High-Risk #4: I-9 Compliance (UNT System Talent Acquisition)

Action Taken by Management and/or System/Institutional Compliance:

- There is a steering committee that is working on I-9 related issues which includes the accuracy of employee information both pre-PeopleSoft launch and current information.
- System and Institutional Compliance continue to partner with UNT System Talent Acquisition to enhance current I-9 processing so that both processes (I-9 and E-Verify) are completed within the required time-frame.
- System/Institutional Compliance, the Institutional Records Management Team, and Human Resources met to discuss I-9 related retention issues including I-9 information residing in the Image-Now system.

Section III. Compliance Training

- S/IC is coordinating with HR to register UNT System Administration Cabinet members and other key leaders to access and complete the CAT, to access and complete the exam, to access, complete, and print their completion certifications, and provide some valuable feedback pertaining to their CAT experience. S/IC intends to coordinate with HR to use this feedback to enhance the training experience of the UNT System Administration employees the training will be provided to next quarter.

- S/IC is continuing to work with the Office of General Counsel to develop a web-based version of their lecture based Ethics training, which will be designed for UNT System Administration, UNT, and UNT Dallas employees to complete.

Section IV. Confidential and Other Complaint Reporting for UNT System

- UNT System Administration maintains a web-based Compliance Hotline that allows anonymous or confidential reporting as required by the U.S. Federal Sentencing Guidelines.
- There was *one (1) hotline report* received without any allegation provided. This report was closed.



Section I. Organizational Actions

The System Executive Compliance Committee (the most senior UNT System-wide Compliance Committee) is in place, providing system-wide leadership, oversight, and direction for the Compliance and Integrity Program (C&IP). The Institutional Executive Compliance Committee for UNT (IECC-UNT) is in place as well. Institutional Compliance has met with each IECC-UNT member separately as part of the annual risk assessment process and is in the process of coordinating a meeting with the IECC-UNT to follow-up on discussions that took place during the risk assessment interviews. The IECC-UNT is providing campus-level leadership, oversight, and direction for the UNT C&IP.

Section II. Compliance Risks

High-Risk #1: Laboratory Inspections and Follow-up (Risk Management Services - RMS)

Action Taken by Management:

- RMS continues transferring the documentation and operational segments of its lab inspection program to the newly acquired Risk Management Information System (RMIS).
- The inspection module has been developed within the RMIS and beta testing continues to work through system debugging.
- A new Biosafety Officer has been hired, this individual comes to us from the Centers for Disease Control and Prevention (CDC) and starts next quarter and will oversee all aspects of the biosafety program.
- New hazard communication software (Material Safety Data Sheets MSDS-Online) is available to faculty, staff, and students through the RMS website. Efforts to continually improve the Safety Data Sheets (SDS) repository remain.
- Project undertaken to improve emergency contact and hazard information is nearly complete. Most laboratories (labs) have been outfitted with professional/consistent signage to inform personnel of hazards and personal protective equipment (PPE) that lie within.

Action Taken by Institutional Compliance:

- Institutional Compliance continues to attend regular meetings between Risk Management Services and other applicable UNT System and UNT risk partners to assist in resolving as quickly as possible any findings and/or impairments identified so that lab safety is continuously improved for students and faculty working in that environment.

High-Risk #2: Emergency Planning & Preparedness (Risk Management Services - RMS)

Action Taken by Management:

Emergency Response and Preparedness

- The Emergency Operations Center (EOC) initiated thirteen (13) activations this quarter, (four (4) Mean Green Basketball events, four (4) High School graduations, Two National Drill/Dance competitions, two (2) Spring Commencements, a Spring Commencement block party, and a Protest via the National Association for the Advancement of Colored People (NAACP) and local chapters, which resulted in appropriate issuance of notices and crowd monitoring, maintaining situational awareness, social media monitoring (as applicable), along with appropriate campus camera, radio communications, and weather monitoring.
- There were thirty-five training sessions conducted this quarter, consisting of fourteen (14) Emergency Readiness, six (6) EOC Tours/classes, four (4) Stop the Bleed Training, three (3) Automated External Defibrillator (AED/Hands Only) Training, three (3) Safety Coordinator, three (3) Fire Extinguisher/Safety, and two (2) Cardiopulmonary Resuscitation (CPR) Trainings were conducted by the Emergency Management Team.
- There were five (5) Table-Top Exercises conducted this quarter, consisting of three (3) Severe Weather, one (1) Kidnapping, and one (1) Home Preparedness.

International Incidents Managed

- There were two hundred and one (201) International Travelers Registered and thirty-seven (37) Risk Assessments by Destination completed this quarter.

Action Taken by Institutional Compliance:

- Institutional Compliance continues to attend regular meetings between Risk Management Services and other applicable UNT System and UNT risk partners to assist in identifying opportunities to enhance Emergency Planning & Preparedness processes and procedures.

High-Risk #3: Business Continuity (Risk Management Services - RMS)

Action Taken by Management:

- There were eleven (11) Formal Departmental Plan Consultations completed this quarter at UNT New College at Frisco, UNT Police Department, University Relations, Communications and Marketing, Office of Research and Innovation, Facilities, Student Financial Aid and Scholarships, Registrar's Office, Auxiliary Services (Department of Housing), Academics, College of Health and Public Service, and the UNT Kristen Farmer Autism Center.
- There were two (2) Table-Top Exercises conducted this quarter, consisting of one (1) Fire and one (1) Flood.

Action Taken by Institutional Compliance:

- Institutional Compliance continues to attend regular meetings between Risk Management Services and other applicable UNT System and UNT risk partners to assist in identifying opportunities to enhance Continuity of Operations Plans (COOP) processes and procedures.

High-Risk #4: Hazardous Waste Management (Risk Management Services - RMS)

Action Taken by Management:

- The reorganization of Discovery Park's central accumulation area is now complete. Additional equipment and supplies for the safe management of hazardous waste has also been obtained.

- Monthly inventorying and tracking of hazardous materials continues. The Hazardous Materials Officer position was lost due to a reduction in force. Environmental Risk staff are currently maintaining the program.
- RMS is in the midst of hiring an Environmental Program Manager to replace the Hazardous Materials Officer position, with professional experience in handling hazardous waste to take control of the program and make necessary improvements.

Action Taken by Institutional Compliance:

- Institutional Compliance regularly meets with RMS and other applicable UNT System and UNT risk partners and the City of Denton (as applicable) in the prevention of exceeding any applicable hazardous waste thresholds.

High-Risk #5: Waste Water Management (Risk Management Services - RMS)

Action Taken by Management:

- Increased sampling at specific UNT permitted outfalls by UNT staff continues. All sampling is analyzed using a third-party Environmental Protection Agency (EPA) accredited laboratory. No findings or abnormal results were obtained for Resource Conservation and Recovery Act (RCRA) metals or other permitted pollutants.
- Facilities has outlined a partial maintenance plan for the mercury scrubber portion of the pretreatment system at the Chemistry Building.

Action Taken by Institutional Compliance:

- Institutional Compliance regularly meets with RMS and other applicable UNT System and UNT risk partners and the City of Denton (as applicable) in the prevention of exceeding any applicable waste water management thresholds.

High-Risk #6: Radiation Safety (Risk Management Services - RMS)

Action Taken by Management and Institutional Compliance:

- Quarterly radiation safety meetings are held to discuss the 2017 annual program review and approval of authorization for possession and use of applicable items for Principal Investigators.
- Quarterly laboratory surveys are conducted to ensure the absence of radioactive contamination and proper radioactive materials management.
- The registration of a new x-ray crystallography unit acquired by the Chemistry Department was completed and cleared by the State Radiation Control Group.
- Institutional Compliance regularly meets with Risk Management Services and other applicable UNT System and UNT risk partners to ensure the program is in compliance with state radiation safety regulations.

High-Risk #7: Having policies, procedures, and/or practices in place that may not provide protection of minors participating in UNT related activities (Risk Management Services - RMS)

Action Taken by Management and Institutional Compliance:

- UNT Risk Management Services (RMS) continues to make 3rd party web based Sexual Abuse Child Molestation Awareness Training available to UNT employees and other applicable individuals requiring this training.
- Institutional Compliance is going to work with the Division of Student Affairs to ensure that no individual has access to a minor at a UNT event without having a criminal history background check and sexual abuse and child molestation awareness training completed first.

High-Risk #8: Research Conflict of Interest - COI (Office of Research Integrity & Compliance)

Action Taken by Management and Institutional Compliance:

- The Office of Research Integrity & Compliance (ORI&C) continues to monitor and manage the Research Conflict of Interest Program. ORI&C is currently reviewing the option of automating this process by implementing HCCS' s COI-Smart, a comprehensive system for tracking and managing the COI process.
- The automated process would enable the program to assign disclosure reviews to members of the Research Conflict of Interest Committee, automate the development of management plans, and provide extensive reporting capabilities. This is necessary as we continue to see emerging research from UNT faculty.
- Institutional Compliance is working with ORI&C, division management, and other UNT System and campus risk partners to identify opportunities that will enhance the effectiveness of research conflict of interest processes, practices, and procedures.

High-Risk #9: Time and Effort Reporting (Office of Grants & Contracts Administration)

Action Taken by Management and Institutional Compliance:

- The Office of Grants & Contracts Administration (OGCA) reports no activity in regards to effort reporting as the Fall cycle was reported on the previous report and Spring cycle reporting will not begin until June 30, 2018.
- System/Institutional Compliance is working with the Office of Grants & Contracts Administration, division management, and other UNT System and campus risk partners to identify opportunities that will enhance the effectiveness of time and effort processes, practices, procedures, and reporting.

High-Risk #10: Grants Management (Office of Grants & Contract Administration – OGCA)

Action Taken by Management and Institutional Compliance:

- The Office of Research and Innovation is working to fill the Assistant Vice President for Grants and Contract Administration. This position will work with faculty across campus to ensure that contracts and grants are processed smoothly from the grant application process to award administration to close-out and financial reporting.
- System/Institutional Compliance is working with the Office of Grants & Contracts Administration, division management, and other UNT System and campus risk partners to identify opportunities that will enhance the effectiveness of grants management processes, practices, procedures, and reporting.

High-Risk #11: Electronic Information Mis-Handling (University Information Technology and Information Technology Shared Services - ITSS)

Action Taken by Management:

- The ITSS Information Security Office submits security reports each month to the Texas Department of Information Resources (DIR) in fulfillment of Texas Administrative Code (TAC) 202.73(b)(2). Reports include instances of security violations involving University resources. Three required monthly reports were submitted to DIR this quarter.
- Texas Administrative Code 202.74(b)(2) requires institutions of higher education to introduce information security awareness and inform new employees of information security policies and procedures during the onboarding process. This material is presented to new employees as part of the online onboarding process facilitated by campus Human Resources. In addition, an on-going security awareness training program is in place for current employees. Security awareness training was provided to five hundred seventy-eight (578) new and current employees.
- IT support is provided to UNT through System and campus IT assets.

Action Taken by System and/or Institutional Compliance:

- System and Institutional Compliance continue to partner with System and campus IT assets to identify opportunities to enhance the processes and procedures associated with information security and Electronic Information Mis-Handling.

High-Risk #12: Health Insurance Portability and Accountability Act (HIPAA) Compliance (Office of Institutional Compliance)

Action Taken by Management and Institutional Compliance:

- Institutional Compliance continues to research and evaluate the data provided by UNT System Administration, UNT, and UNT Dallas units via surveys designed to ensure that all applicable units are designated as health care components and other applicable units that touch personally identifiable health information are in compliance with other privacy protections, such as the Health Information Technology for Economic and Clinical Health (HITECH) Act requirements.
- Institutional Compliance continues to work with UNT System Administration, UNT, and UNT Dallas units to ensure that each System-wide unit has a HIPAA Security and Privacy Officer.

High-Risk #13: Records Management and Retention (Office of Institutional Compliance)

Action Taken by Management, Records Management, and/or Institutional Compliance:

- The UNT Compliance Officer (and Chief Records Management Officer), the Director of Institutional Records Management, and the Chief Records Management Representative continue to provide on-demand in-person records management training to records management personnel at UNT System Administration, UNT, and UNT Dallas. The last training took place on March 29, and May 15, 2018, and was geared towards System Administration and UNT records management personnel.
- The Records Management team is finalizing online records management training that is designed to be completed by all applicable Records Management Representatives (RMRs) for UNT System Administration, UNT, and UNT Dallas. The online training will be accessed from the Institutional Records Management website, with the exam and tracking being administered through Qualtrics, and training completion information being separately reported into the PeopleSoft Learning Management System.

- The Records Management team continues to provide technical advice and guidance to UNT System Administration, UNT, and UNT Dallas management pertaining to complicated records management and retention questions and situations.

High-Risk #14: Required Compliance Related Training (Office of Institutional Compliance)

Action Taken by Management and/or System/Institutional Compliance

- System/Institutional Compliance (S/IC) in collaboration with the Business Operations training team within Administrative Services (of the UNT Finance and Administration Division) and System Human Resources (HR) have developed the first of the required compliance related web-based training modules, which is "Compliance Awareness Training (CAT)" that is hosted by the new PeopleSoft Learning Management System.
- This training is designed for UNT System Administration, UNT, and UNT Dallas employees to complete. An additional UNT IT marketing resource was used to ensure that this training is in compliance with the Americans with Disability Act (ADA).
- This training was rolled-out this quarter for UNT employees to access and complete the Compliance Awareness Training (CAT), access and complete the exam, and access, complete, and print their completion certifications.
- S/IC is working with HR to resolve reliability issues with the completion data for the Compliance Awareness Training. S/IC believes the reliability issues have improved enough to coordinate with division areas to identify employees not completing the training and coordinate for them to complete the training as soon as possible.
- S/IC is continuing to work with the Office of General Counsel to develop a web-based version of their lecture based Ethics training, which will be designed for UNT System Administration, UNT, and UNT Dallas employees to complete.

High-Risk #15: I-9 Compliance (UNT System Talent Acquisition & Campus Human Resources (HR) Director)

Action Taken by Management and/or System/Institutional Compliance:

- There is a steering committee that is working on I-9 related issues which includes the accuracy of employee information both pre-PeopleSoft launch and current information.
- System and Institutional Compliance continue to partner with UNT System Talent Acquisition to enhance current I-9 processing so that both processes (I-9 and E-Verify) are completed within the required time-frame.
- System/Institutional Compliance, the Institutional Records Management Team, and Human Resources met to discuss I-9 related retention issues including I-9 information residing in the Image-Now system.

High-Risk #16: Individual Conflict of Interest (Institutional Compliance)

Action Taken by Management and/or System/Institutional Compliance

- System/Institutional Compliance is in the process of communicating with a peer institution to discuss, review, and evaluate its general Conflict of Interest program to obtain some program ideas that maybe effectively used to evaluate and manage individual conflict of interest opportunities at UNT.

Section III. Compliance Training

- System/Institutional Compliance (S/IC) in collaboration with the Business Operations training team within Administrative Services (of the UNT Finance and Administration Division) and System Human Resources (HR) have developed the first of the required compliance related web-based training modules, which is “Compliance Awareness Training (CAT)” that is hosted by the new PeopleSoft Learning Management System.
- This training is designed for UNT System Administration, UNT, and UNT Dallas employees to complete. An additional UNT IT marketing resource was used to ensure that this training is in compliance with the Americans with Disability Act (ADA).
- This training was rolled-out this quarter for UNT employees to access and complete the Compliance Awareness Training (CAT), access and complete the exam, and access, complete, and print their completion certifications.
- S/IC is working with HR to resolve reliability issues with the completion data for the Compliance Awareness Training. S/IC believes the reliability issues have improved enough to coordinate with division areas to identify employees not completing the training and coordinate for them to complete the training as soon as possible.

Section IV. Confidential and Other Complaint Reporting for UNT

UNT maintains a web-based Compliance Hotline that allows anonymous or confidential reporting as required by the U.S. Federal Sentencing Guidelines.

There were a total of *five (5) reports* received for this quarter (*one hotline*) and *four reports from other sources*. An analysis of these reports revealed the following breakdown of complaints:

- There was **one (1) hotline report** received alleging an **inappropriate selection process for a position**. IC requested additional information using the hotline’s website and will follow-up with HR on this report.
- There was **one (1) report** received by an Internal Audit Contact Us Form via UNT System. The report alleged an **inappropriate practice of appointing retired deans at UNT to post-retirement positions in their home colleges**. The Fraud Response Team was activated and OGC and Institutional Compliance (IC) addressed this report. OGC and IC were unable to substantiate the allegations and review reports were issued.
- There was **one (1) report** received via the OGC’s office **alleging a situation involving unethical and bullying misconduct in an academic area**. The Fraud Response Team was activated and HR and Institutional Compliance (IC) addressed this report. HR and IC were unable to substantiate the allegations and review reports were issued.
- There was **one (1) report** received and reported to Institutional Compliance and Institutional Records Management by Internal Audit **alleging a possible records management policy violation**. Internal Audit reported they found an unlocked filing cabinet in the hallway of an academic building that appeared to contain various documents with social security numbers on them, dating back to the 1980s. Internal Audit informed management in that building and the cabinet was secured. Institutional Compliance and Records Management followed-up with management to address and resolve this substantiated allegation.
- There was **one (1) report** received via campus mail **alleging several issues such as an inappropriate request for sick leave, inappropriate travel request, inappropriate internal**

department voting issue, and a couple of inappropriate management practice allegations involving employees. Executive management for this area was already aware of all allegations and working towards taking action on these issues except the inappropriate travel request issue and they indicated that they will handle that issue as well.



Office of Institutional Compliance and Integrity

Quarterly Report to the Audit Committee

Board of Regents of the University of North Texas System

August 9-10, 2018

Submitted by:

Desiree K. Ramirez, CCEP, CHC
Chief Compliance and Integrity Officer

Introduction

The Office of Institutional Compliance and Integrity continues to make progress in awareness throughout the organization. We have seen an increase in solicitation for support and services regarding policies, guidance on compliance concerns and privacy issues.

We are in the process of recruiting a Deputy Compliance Officer and Compliance Specialist- HIPAA and Privacy. The Deputy Compliance Officer will assist the Chief Compliance and Integrity Officer in ensuring that the institution establishes and maintains an effective and “best practice” compliance and integrity program, prevent and detect violations of law and other misconduct, and promote ethical practices and a commitment to compliance with the law.

The Chief Compliance Officer serves as the Privacy Officer for the institution, nevertheless, given the increased scrutiny of the Office of Civil Rights regarding privacy breaches and recent penalties at MD Anderson Cancer Center, we are committing resources to conduct audits, investigations and monitoring of activities as it relates to the elements of the Health Insurance Portability and Accountability Act (HIPAA).

The Trust Line (formerly known as the Reporting Line) was launched in April. The campus was notified via newsletter as well as posters created by our Branding Team. Permanent posters regarding the Trust Line were placed throughout the campus in both English and Spanish and contain a Quick Response or QR code for immediate access to the secured website. Wallet cards were also created that contain the QR code. Additionally, *Patient Experience* posters were placed in the Health Pavilion to assist patients in triaging their concerns to the appropriate party.

Policies and Procedures- PolicyTech Policy Management System

A new policy system, PolicyTech, launched this summer to simplify the search, navigation and organization of policies, procedures, and forms.

The benefits of this user-friendly system will allow employees, students and public users to search for policies through keywords, is accessible via mobile access and contains links to related materials, regulations and training videos. The system also allows for communication capability for recommendations, comments or asking questions regarding policies.

PolicyTech will also help manage policy creation and maintenance in a “one-stop shop” by standardizing and centralizing the process to automate work flows and approval. This will make it significantly easier to perform policy audits in order to reduce, merge and simplify policies.

The Institutional Compliance & Integrity team will be providing workshops on effective policy writing and policy management. The workshops are for policy writers, reviewers, approvers and/or anyone in

charge of writing and managing effective policies and to gain clarity on the four stages of the policy management life cycle as well as receive insight on navigating PolicyTech.

Education and Training

In September, UNTHSC will be moving to an adaptive, online learning experience using Compliance Interactive ©. This innovative education system reduces the complexity of modular learning. Additionally, UNTHSC will adopt the Learning Management System (LMS) of Compliance Interactive © which will allow us to add additional training from other outside resources. Compliance Interactive© is collaborating with UNTHSC to develop other modules into their delivery method as it relates to compliance education for higher education and clinical compliance. Until all education component are adopted into Compliance Interactive, certain modules will be hosted on the LMS so that students and employees can complete their compliance education requirements in one single sign-on setting.

Minors on Campus

This year, the Office of Institutional Compliance in tandem with Human Resources has launched a revised and more stringent process for participation with Minors on Campus. Previously, programs were able to receive background checks from Human Resources and would then be notified of the training and other requirements needed to participate in and/or host the program. This year and going forward, Human Resources will not run background checks until the program completes the compliance requirements. Human Resources will only run background checks with the approval of the Office of Compliance and Integrity thus ensuring all training, documentation and consent is provided prior to hosting the program. Background check results are reviewed by Human Resources and the Office of Institutional Compliance and Integrity to determine participation.

Compliance Program Assessment and Effectiveness Metrics

The purpose of the Compliance Program Assessment is to assess the design and operation performance of the compliance infrastructure, function and processes. Additionally, it establishes a baseline for assisting organizational leaders with ongoing compliance monitoring and continuous improvement as well as identify opportunities for improvement within the compliance framework.

The Office of Institutional Compliance and Integrity performed a Compliance Program Self-Assessment to assist in determining how it would measure compliance program effectiveness in the upcoming year. Utilizing the HHS Office of the Inspector General (OIG) and Health Care Compliance Association (HCCA) Resource Guide on measuring compliance program effectiveness, the Compliance Program Effectiveness Scorecard will be utilized in tandem with the assessment questionnaire to gauge compliance program awareness within the institution.

Compliance Risk Assessment

A comprehensive and repeatable compliance risk assessment remains the foundation to a strong compliance program. (Compliance Week, 2015)

UNTHSC Office of Institutional Compliance and Integrity has revised the approach to its annual compliance risk assessment. The Office of Compliance has modified a compliance risk assessment tool to provide a collaborative method to assess the risk throughout the organization. Key stakeholders were

provided with the tool that included definitions and descriptions of Likelihood, Consequence and Control Assessment; this was shared with the stakeholders to determine Inherent and Residual risk for Low, Medium, High and Extreme risk acceptance. They were then asked to self-assess the risk in their areas. This information was then compiled and reviewed with all the contributors to discuss the assessment and refine where needed. As stated in *UNT Regulation 2.1000 Compliance and Integrity Program*, the Compliance Risk Assessment was reviewed by the Institutional Compliance Executive Team and further discussed with the President to determine what would be reviewed for the FY19 Compliance Work Plan.

Conclusion

The Office of Institutional Compliance and Integrity is excited about the direction of compliance at UNTHSC. We are gaining momentum and recognition on the campus with the launch of the Trust Line as well as engagement and partnership with various departments throughout the campus. We are looking forward to the development of our Compliance Education and Awareness Center in our department reception area where we will welcome employees and students to learn more about the Compliance department, how they can collaborate with us and join us in creating a compliance of culture on our campus. Additionally, the Compliance Program is moving forward with a mechanism to measure effectiveness of the compliance program through metrics as recommended by the Department of Health and Human Services Office of Inspector General (OIG) and the Department of Justice (DOJ).

We want to thank the employees and students at UNTHSC for their continued support as our Compliance is everyone's responsibility and the Office of Institutional Compliance and Integrity staff is here to support, provide guidance and foster an environment of continued integrity and compliance.

Section I. Organizational Actions

The System Executive Compliance Committee (the most senior UNT System-wide Compliance Committee) is in place, providing system-wide leadership, oversight, and direction for the Compliance and Integrity Program (C&IP). The Institutional Executive Compliance Committee for UNT Dallas is in place as well, providing campus-level leadership, oversight, and direction for the C&IP.

Section II. Compliance Risks

High-Risk #1: Emergency Planning & Preparedness and Business Continuity (UNT Dallas Police Chief, UNT Dallas Risk Manager, and UNT Risk Management Services, as applicable)

Action Taken by Management and System/Institutional Compliance:

- The UNT Dallas (UNTD) Chief of Police conducted Campus Emergency Response Training (CERT), which includes the appropriate response to emergency situations; active shooter; evacuation procedures; shelter-in-place procedures; hazardous materials management; Automated External Defibrillators (AED) training; Cardiopulmonary Resuscitation (CPR) training; fire extinguisher training; first-aid training; bull horn communication training; emergency kit training; and, two-way radio operations.
- The UNTD Chief of Police, UNT RMS, and UNTD's Risk Manager conducted a full-scale Active Shooter table-top exercise, which included the President's Cabinet and members from the Executive Council (Facilities and IT) during this quarter.
- The Active Shooter table-top exercise was designed to evaluate UNTD's current plan of actions and identify strengths and any possible weaknesses, with the result aimed at enhancing UNTD's effectiveness and efficiency during crisis situations.
- The UNTD Chief of Police and the UNTD Risk Manager coordinated actions to ensure emergency communications are in place for the new Student Learning & Success Center (SLSC) building.
- System Compliance continues to meet with the UNTD Chief of Police, the UNTD Risk Manager, and UNT Risk Management Services as applicable, to identify opportunities to enhance emergency planning & preparedness and business continuity processes and procedures at UNT Dallas.

High-Risk #2: Electronic Information Mis-Handling (Information Technology Shared Services - ITSS)

Action Taken by Management:

- The ITSS Information Security Office submits security reports each month to the Texas Department of Information Resources (DIR) in fulfillment of Texas Administrative Code (TAC) 202.73(b)(2). Reports include instances of security violations involving University resources. Three required monthly reports were submitted to DIR this quarter.
- Texas Administrative Code 202.74(b)(2) requires institutions of higher education to introduce information security awareness and inform new employees of information

security policies and procedures during the onboarding process. This material is presented to new employees as part of the online onboarding process facilitated by campus Human Resources. In addition, an on-going security awareness training program is in place for current employees. Security awareness training was provided to twenty-seven (27) new and current employees.

- IT support is provided to UNT Dallas through the Office of Information Technology.

Action Taken by System and/or Institutional Compliance:

- System and Institutional Compliance continue to partner with the Office of Information Technology and ITSS to identify opportunities to enhance the processes and procedures associated with information security and Electronic Information Mis-Handling.

High-Risk #3: Grants Management (UNT Dallas Office of Sponsored Projects and UNT's Office of Grants & Contract Administration, as applicable)

Action Taken by Management and System/Institutional Compliance:

- The Sponsored Research Committee (SRC) continues to meet, facilitate, and oversee the transition of responsibilities for sponsored research from UNT to UNT Dallas.
- The Executive Director for the Office of Sponsored Projects and the Director for Sponsored Projects Accounting, who are part of the SRC have developed policies and procedures for pre- and post-award administration, which includes overseeing and managing all areas of sponsored research.
- Institutional Compliance continues to meet with UNT Dallas division management, UNT's Office of Grants & Contracts Administration (as applicable), and other UNT System and campus risk partners to identify opportunities that will enhance the effectiveness of grants management processes, practices, and procedures.

High-Risk #4: Having policies, procedures, and/or practices in place that may not provide protection of minors participating in UNT Dallas related activities (UNT Dallas Police Chief, UNT Dallas Risk Manager, UNT Risk Management Services, and System/Institutional Compliance)

Action Taken by Management and System/Institutional Compliance:

- UNT Risk Management Services (RMS) continues to make 3rd party web based Sexual Abuse Child Molestation Awareness Training available to UNT Dallas employees and other applicable individuals requiring this training.
- UNT RMS, UNT Dallas Risk Management, UNTD executive management, and Institutional Compliance are working to ensure all personnel working any camp, program, and activity involving minors have completed both the Sexual Abuse Child Molestation Awareness Training and required criminal history background check prior to the event starting.
- The UNT Dallas Risk Manager worked with UNT RMS to obtain certification to provide Sexual Abuse Child Molestation Awareness Training to all applicable UNT Dallas stakeholders (including Advancement and Student Affairs personnel).

High-Risk #5: Records Management and Retention (Office of Institutional Compliance)

Action Taken by Management and Records Management and/or Institutional Compliance

- The UNT Compliance Officer (and Chief Records Management Officer), the Director of Institutional Records Management, and the Chief Records Management Representative continue to provide on-demand in-person records management training to records management personnel at UNT System Administration, UNT, and UNT Dallas. The last training took place on March 29, and May 15, 2018, and was geared towards System Administration and UNT records management personnel.
- The Records Management team is in the process of coordinating records management training for UNT Dallas personnel during the next quarter.
- The Records Management team is finalizing online records management training that is designed to be completed by all applicable Records Management Representatives (RMRs) for UNT System Administration, UNT, and UNT Dallas. The online training will be accessed from the Institutional Records Management website, with the exam and tracking being administered through Qualtrics, and training completion information being separately reported into the PeopleSoft Learning Management System.
- The Records Management team continues to provide technical advice and guidance to UNT System Administration, UNT, and UNT Dallas management pertaining to complicated records management and retention questions and situations.

High-Risk #6: Required Compliance Related Training (Office of Institutional Compliance)

Action Taken by Management and/or System/Institutional Compliance

- System/Institutional Compliance (S/IC) in collaboration with the Business Operations training team within Administrative Services (of the UNT Finance and Administration Division) and System Human Resources (HR) have developed the first of the required compliance related web-based training modules, which is "Compliance Awareness Training (CAT)" that is hosted by the new PeopleSoft Learning Management System.
- S/IC is coordinating with HR to register UNT Dallas Cabinet members and other key leaders to access and complete the CAT, to access and complete the exam, to access, complete, and print their completion certification, and provide some valuable feedback pertaining to their CAT experience. S/IC intends to coordinate with HR to use this feedback to enhance the training experience of the UNT Dallas employees the training will be provided to next quarter.

Section III. Compliance Training

- S/IC is coordinating with HR to register UNT Dallas Cabinet members and other key leaders to access and complete the CAT, to access and complete the exam, to access, complete, and print their completion certification, and provide some valuable feedback pertaining to their CAT experience. S/IC intends to coordinate with HR to use this feedback to enhance the training experience of the UNT Dallas employees the training will be provided to next quarter.
- S/IC is continuing to work with the Office of General Counsel to develop a web-based version of their lecture based Ethics training, which will be designed for UNT System Administration, UNT, and UNT Dallas employees to complete.

Section IV. Confidential and Other Complaint Reporting for UNT Dallas

- UNT Dallas maintains a web-based Compliance Hotline that allows anonymous or confidential reporting as required by the U.S. Federal Sentencing Guidelines.
- There was *one (1) hotline report* received alleging supervisor misconduct, harassment, and possible discrimination at UNT Dallas. IC is working with UNTD HR/EO to address this report.