

### East Carolina University | Board of Trustees Meeting Audit Committee Meeting | April 23, 2015 Agenda

Ι.	Approva	l of February 19, 2015 Minutes	Action
11.	Dr. Jack	g and Governing Information Security - McCoy (IT Security Officer) and Sweet (Chief Information Officer)	Information
111.	Enterpris	se Risk Management Report - Mr. Tim Wiseman	
	Α.	ERM Update - Information Paper	Information
	Β.	Review of FY 12 - 13 Risk Trends	Information
	C.	Review of FY 14 - 15 Risk Survey Results	Information
IV.	Internal	Audit Report – Ms. Stacie Tronto	
	Α.	Dashboard	Information
	Β.	Annual Audit Plan Revision	Action

- V. Other Business
- VI. Closed Session

Session	Audit
Responsible Person	Mark Copeland, Chair
Agenda Item	۱.
Item Description	Approval of February 19, 2015 Minutes
Comments	
Action Requested	Approval
Disposition	
Notes	

#### Minutes from ECU BOT Audit Committee February 19, 2015 Mendenhall Great Room #3

The Audit Committee of the ECU Board of Trustees met in regular session on February 19, 2015 at 8:30am in Mendenhall Student Center on the campus of East Carolina University. Committee members present included Mark Copeland (Chair), Carol Mabe, and Terry Yeargan. Committee members absent were Robert Brinkley and Danny Scott.

Other board members present included Bob Plybon, Jake Srednicki, and Debra Davis

Others present included Chancellor Steve Ballard, Rick Niswander, Phyllis Horns, Ron Mitchelson, Donna Payne, Chris Locklear, Tim Wiseman, Ken DeVille, Norma Epley, Hiromi Sanders, Dan Sweat, Brian Jowers, Mike Van Scott, Amanda Danielson, Stacie Tronto, Wayne Poole

Mark Copeland, Chair of the Audit Committee, convened the meeting at 8:30AM. Mr. Copeland read the conflict of interest provisions as required by the State Government Ethics Act. Mr. Copeland asked if anyone would like to declare or report an actual or perceived conflict of interest. Hearing none, he asked for the approval of the minutes of the November 20, 2014 audit committee meeting.

Action Item: The minutes of the November 20, 2014 audit committee meeting were approved with no changes.

#### Mr. Tim Wiseman provided the Enterprise Risk Management (ERM) update.

Mr. Wiseman updated the committee on the University Youth Programs Task Force that he is co-chairing. The Task Force has completed its work and will be recommending to Executive Council on how to move forward with implementing recommendations from Internal Audit.

Mr. Wiseman commented on the Athletics Summer Camps. This summer was the first time Athletics utilized the new model for Athletic camps. Per Mr. Wiseman the after action review has been positive and need to make a few tweaks but overall the new model is working well.

Mr. Wiseman stated that the ERM Risk Survey and "Top Risk" review has started, and he will update the committee with the results hopefully at the April committee meeting.

Mr. Wiseman noted that he has seen an increased interest in ERM and gave two examples. He has provided an ERM packet to a couple of the UNC Board of Governor members, and other universities are showing an interest in our program.

The S&P Higher Education Outlook was included in the board materials, and Mr. Wiseman highlighted some of the information included in the handout, which included the importance of risk management.

As requested by the audit committee, Mr. Wiseman provided an ERM "Five Year Anniversary" progress review. A number of items were presented such as ECU's approach to ERM; the Road Map utilized to implement ERM; Milestones; ERM's allies, partners, advocates, and resources; and ERM Successes. The most notable takeaway from this five-year progress report is that ERM is very successful at ECU, and there has been a tremendous positive cultural change across the University related to ERM and we are now in our sustainability phase.

#### Dr. Nick Benson and Dr. Ken DeVille provided the Health Sciences Compliance update

Dr. Ken DeVille provided information to the committee on the audit instrument that the Office of Civil Rights (OCR) uses to review an entity's compliance with the HIPAA privacy regulations. OCR plans to randomly audit 350 covered entities from October 2014 to June 2015. The Health Sciences Office of Institutional Integrity used this instrument to see how the University would fare if audited by OCR. Except for three minor areas, the review determined that the University is in compliance with the HIPAA privacy regulations. Dr. Deville stated this review would be conducted by his office every five years.

#### Minutes from ECU BOT Audit Committee February 19, 2015 Mendenhall Great Room #3

Mr. Copeland asked that we invite ITCS to provide an update at the next committee meeting on HIPAA security compliance and the risk of a data breach.

#### Ms. Stacie Tronto provided the Internal Audit update.

Ms. Tronto updated the committee on the key performance indicators that are tracked by Internal Audit to manage the activities of Internal Audit. The goal is to complete 80% of the audit plan each year. Currently, 36% of the plan has been completed, and 33% is in progress. Ms. Tronto stated that it is expected by fiscal year-end that Internal Audit will meet this goal. Regarding staff utilization, the goal is to spend at least 75% of available time on direct audit matters, and currently that percentage is at 67%. Ms. Tronto stated there has been a high number of absences due to maternity leave, a death in the family, etc. Ms. Tronto advised that management's implementation of corrective actions so far this FY is 77% with the goal being 95%. The outstanding items are related one grant program in Health Sciences, and management is actively engaged in addressing these items, and they should be resolved by year-end.

Mr. Tronto informed the committee that the UNC BOG Audit Committee is currently pursuing the possibility of utilizing a third party vendor to manage hotline reporting for the universities. More information will be forthcoming on this matter.

**Other Business** – Mr. Copeland asked if anyone had other business for the committee. No other business was brought forward by anyone in attendance.

**Closed Session** – At 9:30AM, Ms. Mabe made a motion that the committee go into closed session in order to discuss items that are protected according to state statutes governing personnel information, criminal investigations, internal audit working papers, sensitive security information, and/or otherwise not considered a public record within the meaning of Chapter 132 of the North Carolina General Statutes. The motion was seconded by Mr. Yeargan and unanimously approved.

The Committee returned to open session and continued work on the agenda at 10:05 AM.

There being no further business, the Audit Committee meeting was adjourned at 10:05 AM.

Respectfully submitted, Stacie Tronto ECU Office of Internal Audit and Management Advisory Services

Session	Audit
Responsible Person	Dr. Jack McCoy, IT Security Officer Mr. Don Sweet, Chief Information Officer
Agenda Item	11.
Item Description	Managing and Governing Infromation
Comments	
Action Requested	Information
Disposition	
Notes	



East Carolina University. Tomorrow starts here.

# Managing and Governing Information Security

A Report to the Board of Trustees Audit Committee April 23, 2015

> Jack McCoy, EdD Chief Information Security Officer

Jack McCoy, Chief Information Security Officer





- I. Information Security Defined
- II. State of Affairs in the Industry
- **III. ECU Information Security Management**
- IV. ECU HIPAA Security Compliance
- V. Final Thoughts





- A business<sup>1</sup> and governance function<sup>2</sup> that protects *information* from unauthorized use and disclosure
  - All forms: electronic, spoken, written, etc.
- A means to many ends:
  - IT service stability, data quality,
  - -business continuity, institutional innovation,
  - compliance and privacy





# The State of Affairs

- Number of data breaches continue to increase<sup>3</sup>
  - -783 US data breaches in 2014, up 27%
  - exposed more than 81 million records
- Healthcare entities (42%) and businesses (33%) are now the primary targets<sup>3</sup>
- Organizations with tremendous resources (Sony, Target, Anthem) fall victim with alarming regularity





# Why Is This so Difficult?

- Dependence on a dynamic technology landscape: social media, wireless, cloud, *personal devices* 
  - a huge, growing attack surface with countless opportunities for hackers to get at our data
- The challenge is exacerbated when organizations take an incomplete view of security
  - overlook risks to the organization/stakeholders



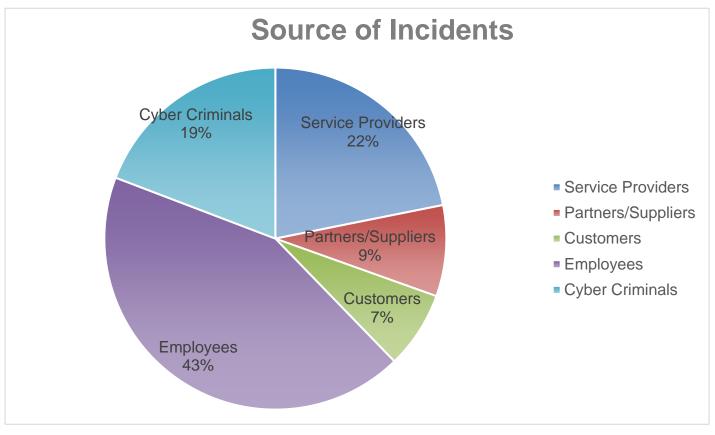


# An Common, But Flawed View

- A narrow focus on *preventing* computer incidents: "How can we ensure our computers will *NOT* be hacked?"
- Organizations are not likely to know *when* they are hacked.
  - -71% of incidents are detected by another entity <sup>4</sup>
  - and not for 3 to 8 months on average  $^{\rm 5}$
- Unfortunately, most data thefts occur weeks/months after the initial incident, *can be prevented through detection*



### A Broader View of Information Risk



From *Managing cyber risks in an interconnected world:* <u>http://www.pwc.com/gx/en/consulting-services/information-security-survey/download.jhtml</u>

Jack McCoy, Chief Information Security Officer



# Managing Information Security

- Identify and prioritize risks for treatment
  - apply limited resources to areas of greatest need
- Provides stakeholder assurances that information security risks are managed effectively
- Establishes reasonable expectations

East Carolina University.





## What Are We Doing at ECU?

Developing an Information Security Regulation<sup>\*</sup> that defines:

- Employee responsibility for protecting information in their care
- Management responsibility for ensuring employees are aware of and have the resources to fulfill their responsibilities
- Management accountability for protecting the information and IT Systems in the care of their departments

<sup>\*</sup> The *Information Security Regulation* is under initial legal review as part of the PRR (Policy, Rules and Regulation) development and approval process.

Jack McCoy, Chief Information Security Officer





## **ECU Information Security Practices**

- ECU Information Security Standards
  - based on ISO 27002, internationally-recognized framework
- Employee Education and Awareness Program
  - regular awareness content and reminders
- Annual Enterprise IT Risk Assessments
  - identifies significant threats to information and IT systems





- Data Loss Prevention locates sensitive data in outgoing email (Cisco DLP), workstations / servers (Identity Finder)
- Vulnerability management (Qualys) to keep IT systems updated with current security patches
- Network firewalls (Cisco) to detect and block network attacks
- Mobile Device Management (Airwatch) to protect data on personal devices
- Activity monitoring to detect security breaches quickly





# HIPAA Security at ECU

- 20 ECU Health Care Components (Providers, Business Associates, Health Plans)
- 137 HIPAA Systems, 97 System Administrators
- CISO (Chief Information Security Officer) serves as the designated HIPAA Security Officer
- ITCS Information Security Office manages the HIPAA Security Compliance Program





## 2013 HIPAA Security System Audit

Internal Audit Recommendations:

- Define PHI<sup>\*</sup> data owner and risk owner
- Allocate additional resources to provide optimal oversight of departmental HIPAA Systems
- Improve HIPAA System activity monitoring
- Establish Business Associate Agreements for all vendors handling PHI

\*PHI - Protected Health Information





## 2014 HIPAA Security Program Review

CISO recommendations:

- Move compliance management responsibilities into the Division of Health Sciences
- Expand compliance activities to address all HIPAA Security Rule specifications
- Establish formal risk management processes to assess and manage the risks to all ePHI





## HIPAA Program Improvement Plan

Establish a HIPAA Security Compliance team within Health Sciences:

- HIPAA Security Officer to expand and manage the HIPAA Security Compliance Program:
  - policy/standards, employee training and support
  - risk identification, prioritization and treatment
  - compliance assessments, solutions, and reporting
- HIPAA Coordinators to assist ECU Health Care Components with fulfilling their compliance responsibilities

#### East Carolina University. Tomorrow starts here.



# **Final Thoughts**

- Despite working continuously on preventative measures, an attacker will occasionally find a way in. It's inevitable.
- Information Security is about *managing* the risks to our information.
- Consequently, a broad view of risk is essential to our success in information security, compliance and privacy
- The biggest risks:
  - our employees
  - increasingly limited resources

#### East Carolina University. Tomorrow starts here.

### References

<sup>1</sup> Information Security Management: Defining Guidance for Executives and Managers. ISACA. <u>http://www.isaca.org/Knowledge-Center/Research/Documents/Defining-Information-Security-Manager-Position-Requirements\_res\_Eng\_1108.pdf</u>

<sup>2</sup> Information Security Governance: Guidance for Boards of Directors and Executive Management. IT Governance Institute. <u>http://www.isaca.org/Knowledge-Center/Research/Documents/Information-</u> <u>Security-Govenance-for-Board-of-Directors-and-Executive-Management\_res\_Eng\_0510.pdf</u>

<sup>3</sup> Identity Theft Resource Center: <u>http://www.idtheftcenter.org/ITRC-Surveys-</u> <u>Studies/2014databreaches.html</u>

<sup>4</sup> Trustwave Global Security Report 2014: <u>http://www.trustwave.com</u>

<sup>5</sup> Mandian (FireEye) 2014 Threat Report: <u>https://dl.mandiant.com/EE/library/WP\_M-</u> <u>Trends2014\_140409.pdf</u>

<sup>6</sup> Managing cyber risks in an interconnected world: <u>http://www.pwc.com/gx/en/consulting-</u> services/information-security-survey/download.jhtml

Jack McCoy, Chief Information Security Officer

Session	Audit
Responsible Person	Tim Wiseman, Enterprise Risk Management
Agenda Item	III. A.
Item Description	ERM Update – Information Paper
Comments	
Action Requested	Information
Disposition	
Notes	

SUBJECT: Enterprise Risk Management (ERM) Update for the BOT-A Committee April 2015 Meeting

1. Purpose. To advise BOT-A committee members of significant ERM and Chief Risk Officer (CRO) activities from the past two months and those planned or anticipated for the next two months.

2. Action Recapitulation:

a. Significant ERM/CRO Activities from the Past Two Months:

- Quarterly Enterprise Risk Management Committee Meeting and Actions (Feb)
- Evaluation of Risk Survey Results and Prioritization Exercise with ERM Committee
- University Youth Programs Task Force ERM Co-Chair Ongoing
- Re-Admissions Risk Case Reviews and University Behavioral Concerns Team Actions
- One-on-One Risk Interviews with Senior Leaders, Risk Committee Members, Deans and Directors
- Risk Presentation University Research Council
- Risk Workshop/Discussion Inter Generational Community Center Staff
- Conducted ISO 31000 Risk Management Standard/ERM Higher Ed Workshop (Baltimore, MD)
- '14-'15 ERM Top Risks Survey Results and Analysis Presentations to Executive Council and BOT-A
- ERM Consultations and Inquiries Various Departments

b. Significant ERM/CRO Activities Next Two Months:

- Creation/Update of '14-'15 Top Risks Management Plans
- University Youth Programs Task Force ERM Co-Chair Ongoing
- Instructing ISO 31000 Risk Management Standard/ERM Implementation Workshop (Baltimore, MD)
- Presenting on ECU's ERM Program at the Risk Mgmt and Insurance Association (RIMS) Conference (April)
- Quarterly Enterprise Risk Management Committee Meeting and Actions (May)
- ERM Consultations/Research/Inquiries Various Departments
- 3. Other:



ACTION OFFICER: Tim Wiseman Assistant Vice Chancellor for ERM/Chief Risk Officer 252-737-2803 Spilman Bldg, Room 214

ERMC	Date	Guest Speaker/Lead	Theme
1 <sup>st</sup> Qtr	Feb 25	Risk Prioritization Exercise	Operational/ Strategic
2d Qtr	May 20	Guest Speaker: To be Determined & Risk Management Plans Update	Strategic
3 <sup>rd</sup> Qtr	Jul 29	EH&S Topics/Panel	Operational
4 <sup>th</sup> Qtr	Oct 21	Communications	Reputational

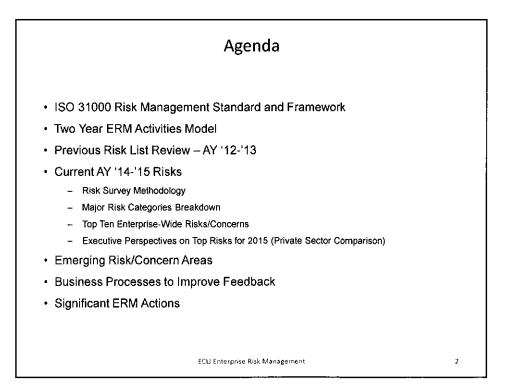
### Enterprise Risk Management Committee Meeting Themes

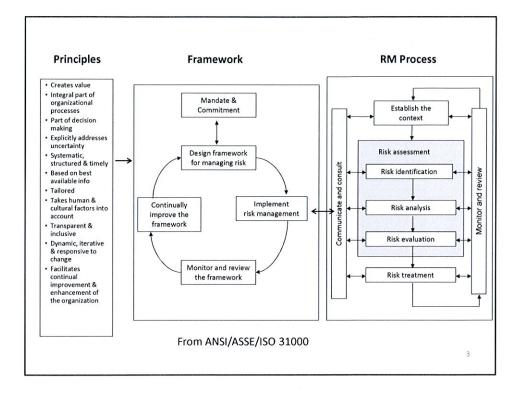
Session	Audit
Responsible Person	Tim Wiseman, Enterprise Risk Management
Agenda Item	III. B.
Item Description	Review of FY 12 – 13 Risk Trends
Comments	
Action Requested	Information
Disposition	
Notes	

Session	Audit
Responsible Person	Tim Wiseman, Enterprise Risk Management
Agenda Item	III.C.
Item Description	Review of FT 14 – 15 Risk Survey Results
Comments	
Action Requested	Information
Disposition	
Notes	

### Enterprise Risk Management AY 2014-15 Top Risks Review

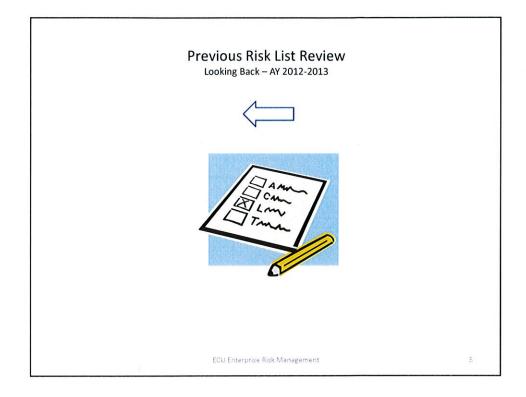
### Board of Trustees Audit Committee Presentation April 23, 2015



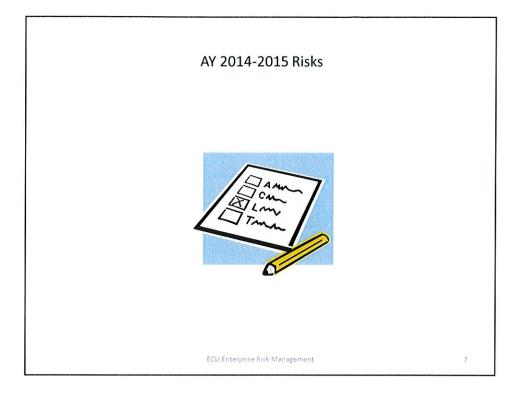


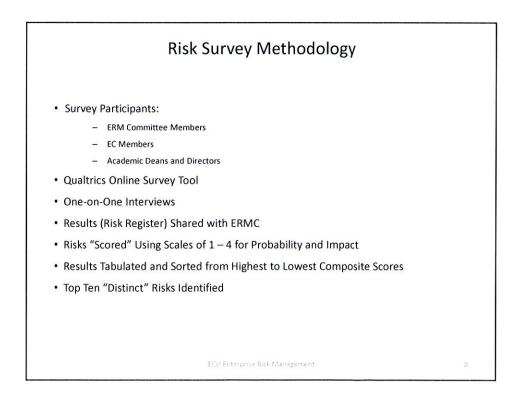
Year	Primary Activities	Focus
Even "On" Year (example: '14-'15)	<ul> <li>Full ERM Risk Survey</li> <li>Full Risk Prioritization Exercise</li> <li>Reset</li> <li>BOT &amp; EC Presentations and Involvement</li> <li>Risk Management Plans Creation (or Updates)</li> </ul>	<ul> <li>Engaging Key Sensors</li> <li>Assessment Process (Rigor and Detail)</li> <li>Risk Register Update</li> <li>Fresh Look at Current and Anticipated Risk Environment</li> </ul>
Odd "Off" Year (example: '13-'14)	<ul> <li>Smaller Scale Re-Prioritization/Re- Validation Exercise</li> <li>Departmental Workshops</li> <li>Interviews and Sensing Sessions</li> <li>Presentations to Other Key Committees/Groups</li> </ul>	<ul> <li>Risk Management Plans Update/Adjustment</li> <li>"By Exception" Reviews</li> <li>Select Risk Management Project Work</li> <li>ERM "Maturity" Assessment(s)</li> <li>Education</li> </ul>

2



Risk	Trend Over Past 18-24 Months (Worse/Same/Better?)
1. Negative Impact of State's Budget Problems	WORSE
2. Loss of Quality Faculty and Employees, Faculty and Staff	WORSE
3. Risk of Non-Compliance with HIPAA and Related Federal Regulations	BETTER
4. Potential for an Internal Controls Breakdown in Athletics and/or NCAA Violations	BETTER
5. Inadequate Succession Planning, Knowledge Transfer and Talent Management	SAME
6. Key Areas Understaffed Given the Demands and Complexity of the Institution	SAME
7. Information Security and Privacy Risk	SAME
8. Uncertainty About Legislative Direction Related to Higher Ed	SAME/WORSE
9. Potential for Data Security Breach and Cloud Computing Security Risk	SAME
10. Downtown Safety (Off-Campus Incidents/Town & Gown Relations Having Adverse Impact on ECU)	SAME/BETTER





9

<b>Risk Category</b>	2010-2011	2011-2012	2014-2015*	Trend
Strategic	13.8	1.7	4.0	₽⇔
Financial	17.2	28.1	44.0	បំបំ
Operational	10.3	35.1	16.0	00
Compliance	37.9	31.6	32.0	⇔
Reputational	20.8	3.5	4.0	₽⇔

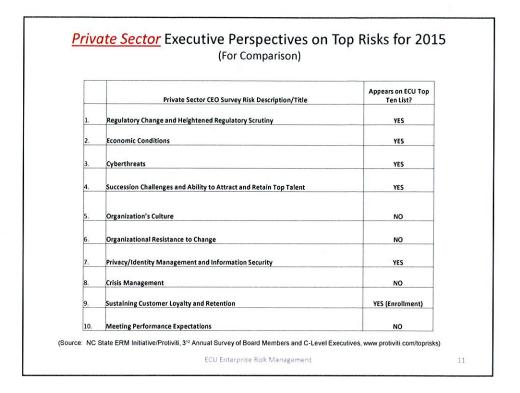
\* No ERM top risk survey was conducted during the period of 2012 and 2014 as the institution transitioned to a two-year full survey cycle.

ECU Enterprise Risk Management

#### East Carolina University AY 2014-2015

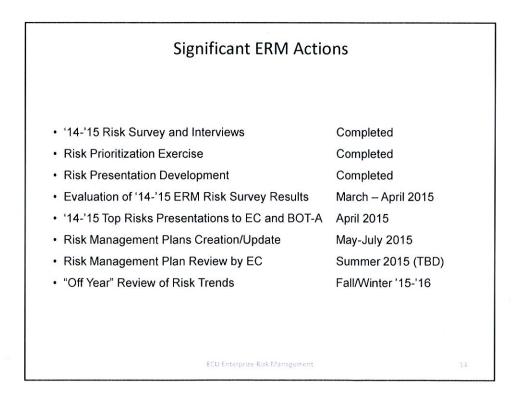
Top Ten Enterprise-Wide Risks/Concerns (Prioritized Based Upon Consideration of Both Probability of Occurrence and Impact/Severity of Potential Negative Consequences)

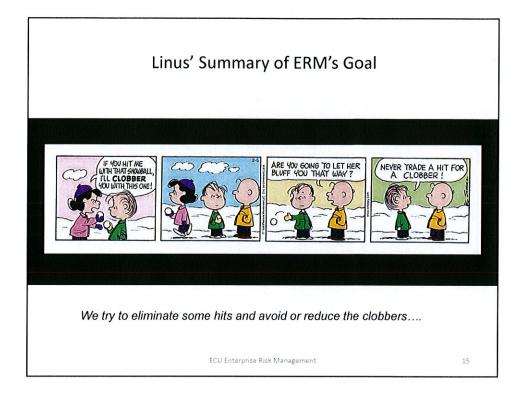
	Risk Description/Title	Major Risk Category	Previous Top Ten List?
1.	Facilities Obsolescence and Deferred Maintenance	Operational	NO
2.	Additional State Budget Cuts	Financial	YES
3.	No or Insufficient Salary Raises Over Multiple Years and Corresponding Effect on Faculty-Employee Morale	Financial	NO
4.	Potential For Losing a Significant Number of Subject Matter Experts and Senior Administrators Due to Retirement Eligibility – Succession Planning (Continuity)	Operational	YES
5.	Financial Challenges of BSOM (Statutory Restrictions on Clinical Revenues & Effect of Academic/Research Expenses)	Financial	NO
6.	Data and Information Security – Vulnerability to Cyber Attacks and Potential Loss or Compromise of Sensitive Data/Information	Operational	YES
7.	Increasing Federal Requirements and Compliance Expectations During a Time of Significant Budget Cuts	Compliance	YES
8.	Continued Decline in Graduate Program Enroliment	Operational	NO
9.	Reputational Risk Associated with Media-Accelerated/Induced Negativity Related to Non-Compliance	Compliance / Reputational	NO
10.	Personnel Strain Related to Oversight and Management of Ever-Growing Spread of Projects, Activities, and Opportunities	Operational	YES

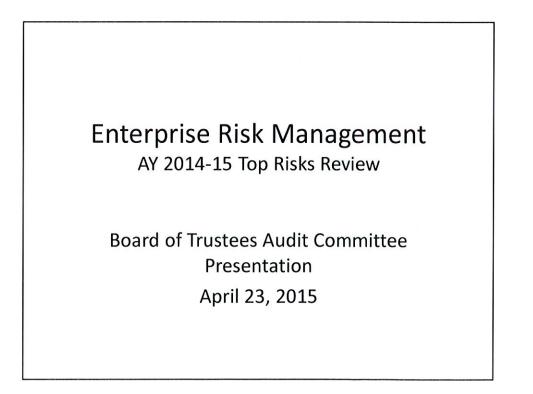


(Selected items	- Watch List)
	Not Prioritize
Risk Description/Title	Risk Description/Title
> Patient Care Compensation for Health Sciences Division	Inadequate Staffing & Employee Burnout/Turnover
<ul> <li>Decline in Program Enrollment Effect on ITCS and ECU (Long- Term Sustainment)</li> </ul>	Competition from Non-ECU Online Programs and Expanding Community College Programs
» NCAA Litigation and Legislation – 2 <sup>nd</sup> and 3 <sup>rd</sup> Order Effects	Proliferation of Personally Owned Mobile Computing Device Carrying On University Business
> UNC GA Projects Requiring ECU Resources to Implement	> Export Control Compliance
Sponsored Research Regulation Compliance	Accepting More Students than Institution's Internal Capacity can Support
Public-Private Partnerships and Shared Business Strategies – Compliance for "Associated Entities"	Potential Use of External Vendors for Data Storage and Clou Services
> Support Services Infrastructure Adequacy	> Joint Ventures and/or Partnerships – Millennial Campus
Accelerated Loss of High Quality Faculty	Federal Support of Faculty Salaries Related to Federally Funded Research Programs
Ineffective Communication of the Value of Higher Education Compared to the Cost	Changes to Traditional Four-Year Educational Model and Effect on ECU's Academic Programming and Future









Session	Audit
Responsible Person	Stacie Tronto, Chief Audit Officer
Agenda Item	IV. A.
Item Description	Internal Audit Dashboard
Comments	
Action Requested	Information
Disposition	
Notes	

	Internal A	Audit Dashboard			
Comp	letion of Audit Pla	n: Completed vs. Plar	nned Audits		
	Number	Percent of			
Status of Audit Plan	of Audits	Total Plan	Goal = 80%		
Completed	29	58% 🧹			
In Process	16	32%			
Pending	5	10%	_		
Total	50	100%	_		
			-		
	Staff Utilization:	Direct vs. Indirect Ho	ours		
Direct Hours Indirect Hours	<b>70%</b> 30%	Goal = 75%			
	Co Number	nsultations % of Audit Plan			
Consultations	111	13%			
	Managemen	t's Corrective Actions			
			%	%	
Observations by Division:	Completed	Outstanding	Complete	Outstanding	Pendir
Academic Affairs	1	0	100%	0%	
Administration and Finance	1	0	100%	0%	
Athletics	NA	NA	NA	NA	
Chancellor	NA	NA	NA	NA	
Health Sciences	8	3	63%	37%	
Research and Graduate Studies	NA	NA	NA	NA	
Student Life	3	0	100%	0%	
University Advancement	NA	NA	NA	NA	
Total Observations	13	3			
Total Percentages	<b>81%</b>	19%			

Goal = 95%

Session	Audit
Responsible Person	Stacie Tronto, Chief Audit Officer
Agenda Item	IV. B.
Item Description	Annual Audit Plan Revision
Comments	
Action Requested	Approval of Annual Audit Plan Revision
Disposition	
Notes	

#### East Carolina University Office of Internal Audit Annual Engagement Plan By Type FY 2014-2015

	Budget	Budgeted	%age	Risk
Description	Status	Hours	of Total	
Operational Audits:				
Human Resources	WIP	300	2%	High
Purchasing Port	WIP	150	1%	High
Pharmacy Services (Integrated)	WIP	1000	6%	High
Payroll/Kronos Implementation (Integrated)	BF	1000	6%	High
Construction Projects	BF	800	5%	High
Athletic Camps (New Model)	CYP	400	2%	High
Aramark Contract	CYP	400	2%	High
Parking and Transportation	CYP	400	2%	Med
Physical Therapy (Allied Health)	CYP	400	2%	Med
Total Operational Audit Hours		4850	29%	
Compliance Audits:				
NCAA Financial Aid	CYP	400	2%	High
Cash Counts	CYP	200		Med
Total Compliance Audit Hours		600	4%	
Information Technology Audits:				
IT and Data Goverence	CYP	400	2%	High
2014 IT Disaster Recovery/Business Continuity Planning	CYP	240	1%	High
Review of Progress on PCI Gap Analysis	CYP	140		High
Total Information Technology Audit Hours	_	780	5%	
Special Reviews:				
Special Reviews - Pending	CYP	1660		NA
Special Reviews in Progress	WIP	350	2%	NA
Total Special Review Audit Hours		2010	12%	
Follow-Up Reviews:				
University Policy Manual (L08031)	CYP	20	0%	0
2nd Follow-Up HIPAA Security (A12035)	CYP	80		0
2nd Follow-Up Clinical Trials (A12029)	CYP	40		0
ITCS Firewall Controls (A14001)	CYP	140		•
Airwatch and ISE Projects (A14045)	CYP	40		•
Ryan White Grant (A13037)	CYP	120		0
School of Dental Medicine CSLC	CYP	200	1%	High
University Sponsored Youth Programs (A13033)	СҮР	200		<b>U</b>
Athletics Operational (A13039)	CYP	120		0
IGCC (L14008)	CYP	40	0%	0
BSOM Malpractice Insurance (L14027)	CYP	20		
ECU Physician Manual (A14016)	CYP	20		
BSOM Hiring Decisions (L14012)	CYP	20	0%	Low
CSDI (L13038)	CYP	40	0%	
Total Follow-Up Review Audit Hours		1100	7%	

#### East Carolina University Office of Internal Audit Annual Engagement Plan By Type FY 2014-2015

	Budget	Budgeted	%age	Risk
Description	Status	Hours	of Total	Ranking
Other/Special Projects:				
Consultations	CYP	2200	13%	NA
Committees/Other Routine Tasks (ie. SBI Reports, Assist State Auditor)	CYP	500	3%	NA
Risk Assessment/Audit Planning 2015-2016	CYP	100	1%	NA
Total Other/Special Project Hours		2800	17%	
Total Direct Audit Hours		12140	72%	
Administration	CYP	1310	8%	NA
Leave	CYP	2728	16%	NA
Professional Development	CYP	662	4%	NA
Total Indirect Audit Hours:		4700	28%	
Grand Total Audit Hours		16840	100%	

Management Consults:

Diving and Water Safety

15640

=Request to Defer to Next FY

Session	Audit
Responsible Person	
Agenda Item	V.
Item Description	Other Business
Comments	
Action Requested	
Disposition	
Notes	

Session	Audit
Responsible Person	
Agenda Item	VI.
Item Description	Closed Session
Comments	
Action Requested	
Disposition	
Notes	