

**CHRISTIAN APPALACHIAN PROJECT'S ADMINISTRATION OF  
ROCKCASTLE COUNTY'S ADULT EDUCATION GRANTS  
FROM THE COUNCIL ON POSTSECONDARY EDUCATION  
AND KENTUCKY ADULT EDUCATION**

**For The Period  
July 1, 2003 Through June 30, 2004**



**CRIT LUALLEN  
AUDITOR OF PUBLIC ACCOUNTS  
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CRIT LUALLEN  
AUDITOR OF PUBLIC ACCOUNTS

July 8, 2005

Reecie Stagnolia, Associate Vice President  
Kentucky Adult Education  
Council on Postsecondary Education  
1024 Capital Center Drive, Suite 250  
Frankfort, KY 40601

Casey Sterr, Vice-President  
Christian Appalachian Project, Inc.  
Rt. 6 Box 43  
Mt. Vernon, KY 40456

Re: Adult Education Grants

Dear Mr. Stagnolia and Mr. Sterr:

This report contains the results of the performance audit of Christian Appalachian Project, Inc.'s administration of Rockcastle County's Adult Education Grant for the fiscal year ending June 30, 2004. The Council on Postsecondary Education and Kentucky Adult Education contracted with us to conduct performance audits of selected local adult education providers. This report represents our findings, recommendations, and the provider's responses.

We conducted this performance audit in accordance with applicable standards contained in *Government Auditing Standards*, issued by the Comptroller General of the United States of America.

We greatly appreciate the courtesies and cooperation extended to our staff during the audit.

Respectfully submitted,

Crit Luallen  
Auditor of Public Accounts





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**CHRISTIAN APPALACHIAN PROJECT, INC.'S ADMINISTRATION OF  
ADULT EDUCATION GRANTS FROM THE COUNCIL ON POSTSECONDARY  
EDUCATION AND KENTUCKY ADULT EDUCATION AS OF JUNE 30, 2004**

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**EXECUTIVE SUMMARY**

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**PURPOSE AND SCOPE**

The Council on Postsecondary Education and Kentucky Adult Education (KYAE) selected the Christian Appalachian Project, Inc. (local provider) for a limited scope performance audit of its administration of the Adult Education and Family Literacy Grant for Rockcastle County. An on-site review was conducted May 4 through May 5, 2005 to address the following objectives:

- Reconcile student and faculty data electronically submitted to Adult Education with the information retained by the local provider.
- Determine whether the local provider's professional development activities comply with applicable professional development policies and procedures.
- Determine whether local providers' expenditures and costs comply with the terms of their grant agreement and reconcile to invoices submitted.
- Report internal control weaknesses identified during our audit that relate to the audit's objectives.

To accomplish these objectives, the performance audit team reviewed the Policy and Procedure Manual for Kentucky Adult Education, as well as the provider's grant proposal and final agreement with KYAE. During the on-site review, the audit team reviewed the provider's accounting records (trial balance/general ledger), interviewed program administrators regarding internal controls related to the above grants, and tested samples of participant files, personnel files, and expenditure documentation for compliance with applicable requirements. Below is the summary of findings:

**FINDINGS SUMMARY**

<b>FINDING</b>	<b>Disallowed Costs</b>
One (1) participant's file did not contain evidence of an initial formal assessment.	N/A
One (1) participant's file did not contain evidence that a goal was set, when applicable.	N/A
One (1) participant met the goal of employment but there was no evidence of follow-up correspondence.	N/A
One (1) participant's file did not contain an applicable withdrawn statement.	N/A
One (1) participant's file did not agree with the electronic information reported to KYAE. The participant's file information documented that she was enrolled in Program Type 15 instead of Program Type 1.	N/A

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One (1) full-time employee file only supported 16 hours of professional development training.	N/A
Three (3) employees were not included in KYAE's electronic information system.	N/A

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**RESULTS AND RECOMMENDATIONS**

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**FINANCIAL REPORTING AND COMPLIANCE**

**Scope and Methodology**

The KAE-10 Expenditure Reports were compared to the line item budget approved in the final agreement modification. This comparison was used to determine whether the provider's reimbursements complied with the approved budget.

The KAE-10 Expenditure Reports were then compared to the internally generated financial records maintained by the local provider. This comparison was used to determine whether the local provider's accounting records support the amounts requested for reimbursement on the KAE-10 Expenditure Reports.

**Findings**

No exceptions noted.

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**PARTICIPANT ELIGIBILITY AND RECORD KEEPING**

**Scope and Methodology**

A total of 60 participants were selected randomly from the electronic student data sent from KYAE and compared to the documentation maintained in the participant files. We examined the files for the following:

- Proper eligibility documentation.
- Proper assessment testing.
- Evidence to support the achievement of goals/objectives.
- Agreed the establishment and achievement of goals/objectives to the information reported to KYAE.
- Proper separation from the program when applicable.
- Other requirements were tested based upon the applicable program requirements.

The participants tested received services during the period of July 1, 2003 and June 30, 2004.

**Findings**

Proper file maintenance and accurate data entry is important to support and document the success of a provider in meeting eligibility requirements and goal achievement. CPE and KYAE require that providers administer the initial assessment at orientation, or within a short period thereafter, and shall use the lowest test score in a subject area to determine a learner's entry level and eligibility. Any achievement or completion of goals should be documented. Programs are to maintain assessment forms on file for three years.

The following exceptions were noted:

- One (1) participant's file did not contain evidence of an initial formal assessment.
- One (1) participant's file did not contain evidence that a goal was set, when applicable.
- One (1) participant met the goal of employment but there was no evidence of follow-up correspondence.
- One (1) participant's file did not contain an applicable withdrawn statement.
- One (1) participant's file did not agree with the electronic information reported to KYAE. The participant's file information documented that she was enrolled in Program Type 15 instead of Program Type 1.

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**Recommendations**

We recommend the Provider create a checklist for participant files to facilitate a periodic review of the contents to ensure that the required documentation is being maintained for all participants. All initial assessments and any achievement of goals/objectives should be documented and maintained. If the participant is between 16 and 18 years of age, official documentation of their withdrawal from school should be included in their file. The person entering participant data should require documentation for any data entry performed on a participant and any deficiencies should be reported to the Program Director.

**Provider Response**

The majority of these students/folders were those of two instructors with whom there were performance issues, and who are no longer with the program. Their leaving coincided with the hiring of a new Clerk, and her inexperience probably contributed to some of these errors not being found and corrected.

The program staff did not know that a 12-month follow-up was required for those students for whom job placement was a goal. Nor did they realize that a copy of the withdraw letter was to be kept in the student's folder – these have always been sent with the student to the testing site. Both of these changes will be implemented immediately.

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**PAYROLL AND STAFF REQUIREMENTS**

**Scope and Methodology**

A sample of 15 payroll disbursements, representing 14% of the total payroll expenditures, was judgmentally selected for payroll testing. Personnel files were examined to verify that staff had received the required professional development training hours and had completed an Individual Professional Development Plan if applicable. Timesheets were examined for existence and approval. Personnel files were examined to verify evidence of the instructor's bachelor's degree. A determination was made as to whether the employee was included in the staff listing information reported to KYAE.

**Findings**

CPE and KYAE require full-time instructors to obtain eighteen hours of professional development training. There was one (1) employee file that only supported 16 hours of professional development training.

CPE and KYAE rely on each provider to update its electronic staff listing to ensure complete and accurate information. There were three (3) employees that were not included in KYAE's electronic information system..

**Recommendations**

We recommend that all full-time employees receive at least 18 hours of professional development training and that this information is documented in the employee's file.

We recommend that all staff information be entered accurately and completely in KYAE's electronic information system.

**Provider Response**

The two-hour deficit was in the Director's PD file, and was an oversight on her part.

The three individuals not listed were the former Clerk, the new Clerk, and an Instructor's Aid. It was assumed that because these individuals did not have students to enroll, their names did not need to be listed in AERIN. This error has been corrected.

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**PURCHASING/EXPENDITURE COMPLIANCE**

**Scope and Methodology**

A sample of 15 expenditures, representing 16% of the total purchases, was selected judgmentally from the detailed general ledger. These expenditures were tested for authorization/approval, supporting documentation, proper recording, and that it was an actual expense during the grant period of July 1, 2003 and June 30, 2004.

**Findings**

No exceptions noted.

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**PROFESSIONAL DEVELOPMENT REIMBURSEMENT COMPLIANCE**

**Scope and Methodology**

Professional Development expenditures were tested for proper authorization, supporting documentation, and adherence to approved rates and reimbursement policies. A sample of 15 expenditures, representing 29% of the total professional development expenditures, was selected judgmentally from the detailed general ledger.

**Findings**

No exceptions noted.

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**INTERNAL CONTROLS RELATING TO GRANT**

**Scope and Methodology**

Christian Appalachian Project, Inc.'s fiscal administrator was given an Internal Control Questionnaire regarding the controls in place for cash disbursements, bank reconciliations, revenue, expenditures, and payroll. The questionnaire was completed by the fiscal administrator and reviewed for any significant control deficiencies.

**Findings**

No significant control deficiencies noted.