# KENTUCKY VALLEY EDUCATION COOPERATIVE'S ADMINISTRATION OF BREATHITT 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

Jeff Hawkins, Executive Director Kentucky Valley Educational Cooperative 325 Broadway Hazard, KY 41701

Re: Adult Education Grants

Dear Mr. Stagnolia and Mr. Hawkins:

This report contains the results of the performance audit of Kentucky Valley Educational Cooperative's administration of Breathitt 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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### **EXECUTIVE SUMMARY**

### PURPOSE AND SCOPE

The Council on Postsecondary Education and Kentucky Adult Education (KYAE) selected the Kentucky Valley Education Cooperative's (local provider) for a limited scope performance audit of its administration of the Adult Education and Family Literacy Grant for Breathitt County. An on-site review was conducted on April 25 through April 29, 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**

	Disallowed
FINDING	Costs
Three (3) participant files did not contain evidence of establishing a goal.	N/A
Three (3) participants did not appear eligible per their initial assessments	
(score>11.9).	N/A
Three (3) participants met the goal of entering post-secondary	
education/training but there was no evidence of follow-up	
correspondence.	N/A
One (1) participant's file did not contain evidence of an initial assessment	
test.	N/A

One (1) participant's file contained goal-related information that did not	
agree with the electronic information reported to KYAE.	N/A
Two (2) employee files did not have documentation to support the	
required level of professional development training.	N/A
Three (3) employee files did not contain adequate documentation of a	
bachelor's degree.	N/A
Two (2) employees were not included in KYAE's electronic information	
system.	N/A
Miller Headstart is no longer an operating site but there was no evidence	
to support that this closing was reported to KYAE.	N/A

### RESULTS AND RECOMMENDATIONS

### 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.

### 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:

- Three participant files did not contain evidence of establishing a goal.
- Three participants did not appear eligible per their initial assessments (score>11.9).
- Three participants met the goal of entering post-secondary education/training but there was no evidence of follow-up correspondence.
- One participant's file did not contain evidence of an initial assessment test.
- One participant's file information (goals) did not agree with the electronic information reported to KYAE.

### Recommendations

We recommend that the provider ensure all participant files contain all of the necessary documentation to support compliance with applicable policies and procedures. Initial assessments should be on file to support the participants' eligibility and any necessary follow-up should be documented. Appropriate goals should be established, documented, and accurately reported to KYAE.

### **Provider Response**

Recommendation accepted.

### PAYROLL AND STAFF REQUIREMENTS

### **Scope and Methodology**

A sample of 15 payroll disbursements, representing 20% 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 did not have documentation to support the required level of professional development training.

CPE and KYAE require all part-time instructors to obtain six hours of professional development training. There was one (1) employee files that did not have documentation to support the required level of professional development training.

CPE and KYAE require all instructors hired after July 1, 1998 to have a bachelor's degree. We noted three (3) employee files did not contain adequate documentation of a bachelor's degree.

CPE and KYAE rely on each provider to update its electronic staff listing to ensure complete and accurate information. We noted two (2) employees that were not included in KYAE's electronic information system.

### Recommendations

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

We recommend that employees' files contain the proper evidence to support compliance with KYAE's bachelor's degree requirement when applicable.

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

### **Provider Response**

Recommendation accepted.

### PURCHASING/EXPENDITURE COMPLIANCE

### **Scope and Methodology**

A sample of 7 expenditures, representing 30% 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.

### 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 7 expenditures, representing 48% of the total professional development expenditures, was selected judgmentally from the detailed general ledger.

### **Findings**

No exceptions noted.

### INTERNAL CONTROLS RELATING TO GRANT

### **Scope and Methodology**

Kentucky Valley Educational Cooperative'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.

### MISCELLANEOUS FINDINGS

### **Findings**

Miller Headstart is no longer an operating site and there was no evidence to support that this closing was reported to KYAE.

### Recommendations

We recommend that any site openings and/or closings are reported to KYAE in writing within ten (10) days of the event to ensure that KYAE is aware of the provider's operation sites.

### **Provider Response**

Recommendation accepted. Updated provider site information will be submitted to KYAE prior to the start of a grant continuation year. Site closure during current year will be reported to KYAE.