# **Cochise County Community College District**



Lindsey A. Perry Auditor General



The Arizona Auditor General's mission is to provide independent and impartial information and specific recommendations to improve the operations of State and local government entities. To this end, the Office provides financial audits and accounting services to the State and political subdivisions, investigates possible misuse of public monies, and conducts performance audits and special reviews of school districts, State agencies, and the programs they administer.

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# Audit Staff

Melanie M. Chesney, Deputy Auditor General and Acting Director, Financial Audit Division Victoria Fisher, Manager

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# Auditors section

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Annual Comprehensive Financial Report



# Independent auditors' report on internal control over financial reporting and on compliance and other matters based on an audit of basic financial statements performed in accordance with *Government Auditing Standards*

Members of the Arizona State Legislature

The Governing Board of Cochise County Community College District

We have audited, in accordance with U.S. generally accepted auditing standards and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the U.S. Comptroller General, the financial statements of the business-type activities and discretely presented component unit of Cochise County Community College District as of and for the year ended June 30, 2022, and the related notes to the financial statements, which collectively comprise the District's basic financial statements, and have issued our report thereon dated April 26, 2023. Our report includes a reference to other auditors who audited the financial statements of the Cochise College Foundation, Inc., the discretely presented component unit, as described in our report on the District's financial statements. The Foundation's financial statements were not audited in accordance with *Government Auditing Standards*, and accordingly, this report does not include reporting on internal control over financial reporting or instances of reportable noncompliance associated with the Foundation.

# Report on internal control over financial reporting

In planning and performing our audit of the financial statements, we considered the District's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinions on the basic financial statements, but not for the purpose of expressing an opinion on the effectiveness of the District's internal control. Accordingly, we do not express an opinion on the effectiveness of the District's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the District's basic financial statements will not be prevented, or detected and corrected, on a timely basis. A significant deficiency is a deficiency, or a combination of deficiencies, in internal control weakness, yet important enough to merit attention by those charged with governance.

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LINDSEY A. PERRY AUDITOR GENERAL Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies, and therefore, material weaknesses or significant deficiencies may exist that were not identified. Given these limitations, during our audit, we did not identify any deficiencies in internal control that we consider to be material weaknesses. We identified a deficiency in internal control, described in the accompanying schedule of findings and questioned costs as item 2022-02, that we consider to be a significant deficiency.

# Report on compliance and other matters

As part of obtaining reasonable assurance about whether the District's basic financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed an instance of noncompliance or other matter that is required to be reported under *Government Auditing Standards* and that is described in the accompanying schedule of findings and questioned costs as item 2022-01.

# District response to findings

Government Auditing Standards requires the auditor to perform limited procedures on the District's responses to the findings identified in our audit that are presented in its corrective action plan at the end of this report. The District is responsible for preparing a corrective action plan to address each finding. The District's responses and corrective action plan were not subjected to the other auditing procedures applied in the audit of the basic financial statements, and accordingly, we express no opinion on them.

# Purpose of this report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the District's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the District's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Lindsey A. Perry

Lindsey A. Perry, CPA, CFE Auditor General

April 26, 2023



# Independent auditors' report on compliance for each major federal program; report on internal control over compliance; and report on schedule of expenditures of federal awards required by the Uniform Guidance

Members of the Arizona State Legislature

LINDSEY A. PERRY

AUDITOR GENERAL

The Governing Board of Cochise County Community College District

# Report on compliance for each major federal program

# Opinion on each major federal program

We have audited Cochise County Community College District's compliance with the types of compliance requirements identified as subject to audit in the *U.S. Office of Management and Budget (OMB) Compliance Supplement* that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2022. The District's major federal programs are identified in the summary of auditors' results section of the accompanying schedule of findings and questioned costs.

In our opinion, the District complied, in all material respects, with the compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2022.

# Basis for opinion on each major federal program

We conducted our audit of compliance in accordance with U.S. generally accepted auditing standards, the standards applicable to financial audits contained in *Government Auditing Standards* issued by the U.S. Comptroller General, and the audit requirement of Title 2 U.S. Code of Federal Regulations Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Our responsibilities under those standards and the Uniform Guidance are further described in the audit of compliance section of our report.

We are required to be independent of the District and to meet our other ethical responsibilities, in accordance with relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion on compliance for each major federal program. Our audit does not provide a legal determination of the District's compliance with the compliance requirements referred to above.

# Management's responsibilities for compliance

Management is responsible for compliance with the requirements referred to above and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statutes, regulations, rules, and provisions of contracts or grant agreements applicable to the District's federal programs.

# Auditors' responsibilities for the audit of compliance

Our objectives are to obtain reasonable assurance about whether material noncompliance with compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on the District's compliance based on our audit. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with U.S. generally accepted auditing standards, *Government Auditing Standards*, and the Uniform Guidance will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Noncompliance with the compliance requirements referred to above is considered material if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about the District's compliance with the requirements of each major federal program as a whole.

In performing an audit in accordance with U.S. generally accepted auditing standards, *Government Auditing Standards*, and the Uniform Guidance, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material noncompliance, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the District's compliance with the compliance requirements referred to above and performing such other procedures as we considered necessary in the circumstances.
- Obtain an understanding of the District's internal control over compliance relevant to the audit in order to design audit procedures that are appropriate in the circumstances and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of the District's internal control over compliance. Accordingly, we express no such opinion.

We are required to communicate with those charged with governance regarding, among other matters, the audit's planned scope and timing and any significant deficiencies and material weaknesses in internal control over compliance that we identified during the audit.

# Other matters

The results of our auditing procedures disclosed an instance of noncompliance that is required to be reported in accordance with the Uniform Guidance and that is described in the accompanying schedule of findings and questioned costs as item 2022-101. Our opinion on each major federal program is not modified with respect to this matter.

# Report on internal control over compliance

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A material weakness in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A significant deficiency in internal control over compliance is a deficiency with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A significant deficiency in internal control over compliance with a type of compliance is a deficiency, or a combination of deficiencies, in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the auditors' responsibilities for the audit of compliance section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance. Given these limitations, during our audit, we did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above. However, material weaknesses or significant deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above. However, material weaknesses or significant deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above. However, material weaknesses or significant deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above. However, material weaknesses or significant deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above. However, material weaknesses or significant deficiencies in internal control over compliance may exist that were not identified.

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

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

# District response to findings

Government Auditing Standards requires the auditor to perform limited procedures on the District's response to the noncompliance and internal control over compliance findings that are presented in its corrective action plan at the end of this report. The District is responsible for preparing a corrective action plan to address each finding. The District's responses and corrective action plan were not subjected to the other auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on them.

# Report on schedule of expenditures of federal awards required by the Uniform Guidance

We have audited the financial statements of the District's business-type activities and discretely presented component unit as of and for the year ended June 30, 2022, and the related notes to the financial statements, which collectively comprise the District's basic financial statements. We issued our report thereon dated April 26, 2023, that contained unmodified opinions on those financial statements. Our report also included a reference to our reliance on other auditors. Our audit was performed for the purpose of forming our opinions on the financial statements that collectively comprise the District's basic financial statements. The accompanying schedule of expenditures of federal awards is presented for purposes of additional analysis as required by the Uniform Guidance and is not a required part of the basic financial statements. Such information is the responsibility of the District's management and was derived from and relates directly to the underlying accounting and other records used to prepare the basic financial statements. The information has been subjected to the auditing procedures applied in the audit of the basic financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the basic financial statements or to the basic financial statements themselves, and other additional procedures in accordance with U.S. generally accepted auditing standards. In our opinion, the schedule of expenditures of federal awards is fairly stated in all material respects in relation to the basic financial statements as a whole.

Lindsey A. Perry

Lindsey A. Perry, CPA, CFE Auditor General

April 26, 2023



# SCHEDULE OF FINDINGS AND QUESTIONED COSTS

# Summary of auditors' results

# **Financial statements**

Type of auditors' report issued on whether the financial statements audited were prepared in accordance with generally accepted accounting principles	Unmodified					
Internal control over financial reporting						
Material weaknesses identified?	Νο					
Significant deficiencies identified?	Yes					
Noncompliance material to the financial statements noted?	Νο					
Federal awards						
Internal control over major programs						
Material weaknesses identified?	Νο					
Significant deficiencies identified?	Νο					
Significant deficiencies identified?   Type of auditors' report issued on compliance for major programs Unr						
Any audit findings disclosed that are required to be reported in accordance with 2 CFR §200.516(a)?	Yes					
Identification of major programs						
Assistance Listings numberName of federal program or cluster84.425COVID-19 - Education Stabilization Fund						
Dollar threshold used to distinguish between Type A and Type B programs	\$750,000					
Auditee qualified as low-risk auditee?	No					

# Financial statement findings

# 2022-01

The District failed to provide key financial information to auditors timely and issued its Annual Comprehensive Financial Report late, resulting in untimely financial information for decision makers

**Condition**—Contrary to State law, the District issued its Annual Comprehensive Financial Report (ACFR) for the year ended June 30, 2022, 10 months after fiscal year-end, 27 days later than required. Specifically, the District's Finance Department failed to provide key financial information, such as complete financial statements, associated note disclosures, and supporting schedules, to auditors by established deadlines agreed upon at the beginning of the audit. This information was provided to auditors up to 2 months past agreed-upon deadlines.

**Effect**—The District's Finance Department did not provide timely financial information to its Governing Board and others who rely on it to make important decisions about the District's operations. Additionally, because the District had not issued timely financial statements, its Annual Budgeted Expenditure Limitation Report (ABELR), which relies on information from the ACFR and was due 9 months after fiscal year-end, will also be issued late.

**Cause**—The District experienced significant delays at the beginning of the audit due to repeated turnover in a key position responsible for compiling the ACFR.

**Criteria**—State law requires the District to issue its audited financial statements and ABELR within 9 months after fiscal year-end, or by March 31, 2023, for the June 30, 2022, ACFR and ABELR (Arizona Revised Statutes §41-1279.07[C]).

# Recommendations—The District should:

- 1. Provide key financial information to auditors by the agreed-upon deadlines established at the beginning of the audit to ensure timely issuance of its audited financial statements.
- 2. Allocate or acquire sufficient resources to compile its ACFR in a timely manner.

The District's corrective action plan at the end of this report includes the views and planned corrective action of its responsible officials. We are not required to audit and have not audited these responses and planned corrective actions and therefore provide no assurances as to their accuracy.

# 2022-02

The District's control procedures over access to IT systems and data were not sufficient, which increases the risk that the District may not adequately protect those systems and data

**Condition**—The District's control procedures were not sufficiently developed, documented, and implemented to respond to risks associated with its information technology (IT) systems and data. Specifically, the District's procedures for restricting access did not consistently help prevent or detect unauthorized or inappropriate access to its IT systems and data.

**Effect**—There is an increased risk that the District may not adequately protect its IT systems and data, which could result in unauthorized or inappropriate access and/or the loss of confidentiality or integrity of systems and data.

**Cause**—The District reported it did not prioritize developing and implementing a process for assigning and reviewing account access or enhance authentication requirements for its IT systems because of limited resources, such as the District's ability to hire and retain qualified IT personnel.

**Criteria**—Implementing effective internal controls that follow a credible industry source, such as the National Institute of Standards and Technology, help the District to protect its IT systems and ensure the integrity and accuracy of the data it maintains. Restricting access through logical access controls that help ensure systems and data are accessed by users who have a need and that access granted is appropriate, and key systems and data access is monitored and reviewed.

**Recommendations**—The District should make it a priority to develop and document IT access policies and procedures and allocate sufficient resources to implement these processes to ensure the procedures are being consistently followed. In addition, the District should:

**Restrict access**—To restrict access to its IT systems and data, develop, document, and implement processes to:

- 1. Assign and periodically review employee user access ensuring appropriateness and compatibility with job responsibilities.
- 2. Enhance authentication requirements for IT systems.

The District's corrective action plan at the end of this report includes the views and planned corrective action of its responsible officials. We are not required to audit and have not audited these responses and planned corrective actions and therefore provide no assurances as to their accuracy.

This finding is similar to prior-year finding 2021-01.

# Federal award findings and questioned costs

2022-101Assistance Listings numbers<br/>and names:Not applicableQuestioned costs:Not applicable

**Condition**—Contrary to federal regulation, the District did not submit its June 30, 2022, Single Audit Report to the federal audit clearinghouse until April 27, 2023, which was 27 days later than required.

**Effect**—The District submitting its Single Audit Report late prevents the federal government and other grantors of federal awards from having current information to effectively monitor their programs and could delay corrective actions that the District needs to take. Further, federal grantors may deny the District future federal awards or subject it to additional cash-monitoring requirements. This finding was not a result of internal control deficiencies of individual federal programs and, accordingly, did not have a direct and material effect on the compliance requirements over the District's major federal programs.

**Cause**—The District failed to prepare its June 30, 2022, Annual Comprehensive Financial Report in a timely manner for the reasons we reported in finding 2022-01, which delayed the completion of the Single Audit.

**Criteria**—Federal regulation requires the District to submit its Single Audit Report to the federal audit clearinghouse no later than 9 months after fiscal year-end, or by March 31, 2023, for the District's June 30, 2022, Single Audit Report (2 Code of Federal Regulations §200.512).

**Recommendations**—The District should improve its financial reporting process, as noted in finding 2022-01, so that it can submit all future Single Audit Reports on or before the federally required submission deadline, which is no later than 9 months after fiscal year-end or by March 31 of the subsequent year.

The District's corrective action plan at the end of this report includes the views and planned corrective action of its responsible officials. We are not required to audit and have not audited these responses and planned corrective actions and therefore provide no assurances as to their accuracy.

# DISTRICT SECTION

# COCHISE COUNTY COMMUNITY COLLEGE DISTRICT SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS Fiscal Period 7/1/2021 - 6/30/2022

Federal Awarding Agency/Program Title	Assistance Listings Number	Additional Award Identification (Optional)	Name of Funder Pass-Through Entity	Identifying Number Assigned By Funder Pass-Through Entity	Federal Expenditures	Federal Program Total	Cluster Name	Cluster Total
DEPARTMENT OF JUSTICE		(0)	,		experiances	10101		10101
CORONAVIRUS EMERGENCY SUPPLEMENTAL FUNDING PROGRAM	16.034	COVID-19	ARIZONA CRIMINAL JUSTICE COMMISSION	ACESF-22-016	\$21,952	\$21,952	N/A	\$0
TOTAL DEPARTMENT OF JUSTICE	10.034	COVID-19	COMMISSION	ACESF-22-010		\$21,932	N/A	ŞU
					\$21,952			
INSTITUTE OF MUSEUM AND LIBRARY SERVICES OR NATIONAL ENDOWMENT FOR THE ARTS OR NATIONAL ENDOWMENT FOR THE								
HUMANITIES								
			INSTITUTE OF MUSEUM AND	2021-0340-WIFIH-03				
GRANTS TO STATES	45.310		LIBRARY SERVICES	2022-0340-W2	\$8,000	\$8,000	N/A	\$0
TOTAL INSTITUTE OF MUSEUM AND LIBRARY SERVICES OR NATIONAL ENDOWMENT FOR THE ARTS OR NATIONAL ENDOWMENT FOR THE HUMANITIES								
					\$8,000			
NATIONAL SCIENCE FOUNDATION								
STEM EDUCATION (FORMERLY EDUCATION AND HUMAN RESOURCES)	47.076				\$32,419	\$32,419	N/A	\$0
TOTAL NATIONAL SCIENCE FOUNDATION						<i>+,</i>		
					\$32,419			
SMALL BUSINESS ADMINISTRATION								
			MARICOPA COUNTY COMMUNITY	SBAHQ21B0028				
SMALL BUSINESS DEVELOPMENT CENTERS	59.037		COLLEGE DISTRICT MARICOPA COUNTY COMMUNITY	SBAHQ22B0041	\$129,594	\$220,299	N/A	\$0
COVID-19 SMALL BUSINESS DEVELOPMENT CENTERS	59.037	COVID-19	COLLEGE DISTRICT	SBAHQ20C0012	\$90,705	\$220,299	N/A	\$0
TOTAL SMALL BUSINESS ADMINISTRATION					\$220,299	, , .,	,	
					\$220,299			
DEPARTMENT OF EDUCATION								
				22FABASC-212181-01A				
				22FIELCC-212181-01A 22FIETCO-212181-01A				
				22FIE1CO-212181-01A 22FPRLEC-212181-01A				
			ARIZONA DEPARTMENT OF	22FVILEC-212181-01A				
ADULT EDUCATION - BASIC GRANTS TO STATES	84.002		EDUCATION	22FEAEWF-212181-01	\$517,852	\$517,852	N/A	\$0
FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANTS	84.007				\$105,299		STUDENT FINANCIAL ASSISTANCE	\$7,958,593
FEDERAL WORK-STUDY PROGRAM	84.033				\$95,981	\$95,981	STUDENT FINANCIAL ASSISTANCE	\$7,958,593
TRIO_STUDENT SUPPORT SERVICES	84.042				\$274,052	\$274,052	TRIO CLUSTER	\$274,052
			ARIZONA DEPARTMENT OF	21FCTDBG-212181-20A	6200 405	6200 405		<i></i>
CAREER AND TECHNICAL EDUCATION BASIC GRANTS TO STATES FEDERAL PELL GRANT PROGRAM	84.048 84.063		EDUCATION	22FCTDBG-212181-20A	\$389,405	\$389,405	N/A STUDENT FINANCIAL ASSISTANCE	\$7.059.50
FEDERAL PELL GRANT PROGRAM FEDERAL DIRECT STUDENT LOANS	84.063				\$6,124,614 \$1,632,699		STUDENT FINANCIAL ASSISTANCE	\$7,958,593 \$7,958,593
EDUCATION STABILIZATION FUND	84.268	COVID-19, 84.425E			\$4,699,476	\$8,526,866	N/A	\$7,958,59:
EDUCATION STABILIZATION FUND	84.425	COVID-19, 84.425F			\$3,647,094	\$8,526,866	N/A N/A	\$0
EDUCATION STABILIZATION FUND	84.425	COVID-19, 84.425L			\$180,296	\$8,526,866	N/A	\$0
TOTAL DEPARTMENT OF EDUCATION	04.423	COVID-15, 84.425L			\$180,290	\$6,520,600	N/A	Ş
					\$17,666,768			
TOTAL EXPENDITURE OF FEDERAL AWARDS					\$17,949,438			

Please Note: Italicized award lines indicate pass-through funding

The accompanying Notes to the Schedule of Expenditures of Federal Awards are an integral part of the schedule.

# COCHISE COUNTY COMMUNITY COLLEGE DISTRICT NOTES TO THE SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS Fiscal Period 7/1/2021 - 6/30/2022

# Significant Accounting Policies Used in Preparing the SEFA

Expenditures reported on the schedule are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance, wherein certain types of expenditures are not allowable or are limited as to reimbursement. Therefore, some amounts presented in this schedule may differ from amounts presented in, or used in the preparation of, the financial statements.

#### 10% De Minimis Cost Rate

The District did not elect to use the 10 percent de minimis indirect cost rate as covered in 2 CFR §200.414.

#### **Basis of presentation**

The accompanying schedule of expenditures of federal awards includes the federal grant activity of Cochise County Community College District for the year ended June 30, 2022. The information in this schedule is presented in accordance with the requirements of Title 2 U.S. Code of Federal Regulations (CFR) Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.

### **Federal Assistance Listings numbers**

The program titles and Federal Assistance Listings numbers were obtained from the federal or pass-through grantor or the 2022 Federal Assistance Listings.

# Donated personal protective equipment (PPE)

For the fiscal year ended June 30, 2022, the District received donated personal protective equipment purchased with federal assistance funds from the Cochise County Health and Social Service department with a fair market value of \$2,000.

# DISTRICT RESPONSE



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April 26, 2023

Lindsey A. Perry, CPA, CFE Auditor General 2910 N 44th St, Suite 410 Phoenix, AZ 85018

Dear Ms. Perry:

We have prepared the accompanying corrective action plan as required by the standards applicable to financial audits contained in *Government Auditing Standards*. Specifically, for this finding, we are providing you with our responsible officials' views, the names of the contact people responsible for corrective action, the corrective action that has been taken or is planned, and the anticipated completion date.

Sincerely,

Wendywairs

Wendy Davis, Ph.D. Vice President for Administration

# **Financial statement findings**

# 2022-01

The District failed to provide key financial information to auditors timely and issued its Annual Comprehensive Financial Report late, resulting in untimely financial information for decision makers

Name of contact person and title: Wendy Davis (VPA/CFO) Anticipated completion date: July 16, 2023 District's response: Concur

Cochise College experienced unfortunate staffing issues resulting in delayed financial information being submitted to auditors. Competent staffing is a priority for the District and strategies have been developed to ensure timely delivery of financial information and issuance of audited financial statements.

# 2022-02

The District's control procedures over access to IT systems and data were not sufficient, which increases the risk that the District may not adequately protect those systems and data

Name of contact person and title: David Luna (Chief Information Officer) Anticipated completion date: June 30, 2023/August 31, 2023 District's response: Concur

Cochise College has implemented authentication enhancements to include Multi-factor Authentication, improvement of password policies, and implementation of network access controls restricting how and from which networks certain user accesses may be initiated. The highest risk authentication risk areas have already been addressed, with remaining authentication improvements scheduled to complete by or before the end of FY23.

Cochise College has developed and is implementing an access management process that ensures access is granted based on job role/job description. This access management process includes regular, formal reviews to ensure the process is continually improved and is meeting its intended goals for appropriate access. Appropriate management will be responsible for ensuring the continual and timely execution of the process and its required annual cadence of reviews. Cochise College is partially through the access management implementation and expects to complete the full implementation by August 2023.

### Federal award findings and questioned costs

# 2022-101

Name of contact person and title: Wendy Davis (VPA/CFO) Anticipated completion date: July 16, 2023 District's response: Concur

As noted in finding 2022-01, Cochise College has developed a revised organizational structure in the finance department, including additional staffing to ensure timely submission of financial reports.



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April 26, 2023

Lindsey A. Perry, CPA, CFE Arizona Auditor General 2910 N. 44th St., Ste. 410 Phoenix, AZ 85018

Dear Ms. Perry:

We have prepared the accompanying summary schedule of prior audit findings as required by the audit requirements of Title 2 U.S. Code of Federal Regulations Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*. Specifically, we are reporting the status of audit findings included in the prior audit's schedule of findings and questioned costs. This schedule also includes the status of audit findings reported in the prior audit's summary schedule of prior audit findings that were not corrected.

Sincerely,

Wendy wavis

Wendy Davis, Ph.D. Vice President for Administration

#### **Financial statement findings**

#### 2021-01

The District's control procedures over access to IT systems and data were not sufficient, which increases the risk that the District may not adequately protect those systems and data

Name of contact person and title: David Luna (Chief Information Officer) Anticipated completion date: June 30, 2023 District's response: Concur

The District agrees with the Auditors' assessment regarding information technology (IT) control procedures. The District has implemented policies and procedures to address deficiencies in these matters. The District has taken actions to implement the internal controls recommended by the National Institute of Standards and Technology and anticipates completion by the end of the current fiscal year.

