

INTERNAL AUDIT DEPARTMENT



Information Technology Audit: OCIT Enterprise IT Governance

For The Period July 1, 2022 To June 30, 2023

Audit No. 2315 (2242) Report Date: March 28, 2024

Number of Recommendations



Critical Control Weaknesses



Significant Control Weaknesses



Control Findings

OC Board of Supervisors

CHAIRMAN DONALD P. WAGNER 3rd DISTRICT VICE CHAIRMAN DOUG CHAFFEE 4th DISTRICT SUPERVISOR ANDREW DO 1st DISTRICT SUPERVISOR VICENTE SARMIENTO 2nd DISTRICT SUPERVISOR KATRINA FOLEY 5th DISTRICT



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Information Technology Audit: OCIT Enterprise IT Governance March 28, 2024

Audit Highlights			
SCOPE	of Work	Perform an information technology audit of OCIT selected enterprise IT governance controls for the period July 1, 2022 to June 30, 2023.	
RESUL	TS	Content has been removed from this report due to the sensitive nature of the specific findings.	
Risks		Content has been removed from this report due to the sensitive nature of the specific findings.	
NUMBER OF RECOMMENDATIONS		Content has been removed from this report due to the sensitive nature of the specific findings.	
0	Critical Control Weaknesses		
0	Significant Control Weaknesses		
4	Control Findings		
Re	port suspected fra	aud, or misuse of County resources by vendors, contractors, or County employees to (714) 834-3608	

Audit No. 2315 (2242)

PUBLIC INFORMATION



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March 28, 2024

To:	KC Roestenberg Chief Information Officer	
From:	Aggie Alonso, CPA, CIA, CRMA Internal Audit Department Director	Digitally signed by Agripino Alonso Date: 2024.03.28 13:48:19 -07'00'
Subject:	Information Technology Audit: OCIT Enterprise IT Governance	

We have completed an information technology audit of selected enterprise IT governance controls administered or monitored by OCIT for the period July 1, 2022 to June 30, 2023. Due to the sensitive nature of specific findings (restricted information), results are redacted from public release. Additional information including background and our objectives, scope, and methodology are included in Appendix A.

OCIT concurred with all our recommendations and the Internal Audit Department considers management's response appropriate to the recommendations in this report.

We will include the results of this audit in a future status report submitted quarterly to the Audit Oversight Committee and the Board of Supervisors. In addition, we will request your department complete a Customer Survey of Audit Services, which you will receive shortly after the distribution of our final report.

We appreciate the courtesy extended to us by OCIT during our audit. If you have any questions, please contact me at (714) 834-5442 or IT Audit Manager Jimmy Nguyen at (714) 834-2526.

Attachments

Other recipients of this report: Members, Board of Supervisors Members, Audit Oversight Committee Frank Kim, County Executive Officer OCIT Distribution Foreperson, Grand Jury Robin Stieler, Clerk of the Board Eide Bailly LLP, County External Auditor

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RESULTS

Content has been removed from Results due to the sensitive nature of the specific findings.

AUDIT TEAM	Jimmy Nguyen, CISA, CFE, CEH Thuy Luu	Senior IT Audit Manager Staff Specialist



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APPENDIX A: ADDITIONAL INFORMATION

OBJECTIVES	Design, implementation, and operating effectiveness of internal control to determine whether IT Governance controls provide reasonable assurance that Strategic Alignment, Resource/Risk/Performance Management and Value Delivery are properly managed and comply with best practices and standards.
SCOPE & METHODOLOGY	Our audit scope was limited to OCIT selected enterprise IT governance controls for the period July 1, 2022 to June 30, 2023. Our methodology included inquiry, observation, examination of documentation, and sampling of relevant items.
Exclusions	 We did not examine IT general controls, application controls, or any processes that involve County elected departments or ones that independently manage their own IT functions or IT governance separate from OCIT. These departments include: Assessor Auditor-Controller Clerk-Recorder Health Care Agency John Wayne Airport OC District Attorney OC Sheriff Registrar of Voters
PRIOR AUDIT COVERAGE	An audit with similar scope, Information Technology Audit, County Executive Office/OC Information Technology General Controls, Audit No. 1644, was issued on April 10, 2018.



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BACKGROUND	OC Information Technology (OCIT) is a division of the County Executive Office and reports directly to the County Executive Officer. In addition, OCIT is comprised of six departments (1) Data Center Services; (2) Information Security; (3) Strategy, Innovation & Architecture; (4) Administrative Services, (5) Clients Services and (6) E-gov Software Applications.
	The mission of OCIT is to provide innovative, reliable, and secure technology solutions that support County departments in the delivery of quality public services. OCIT is structured in such a manner that departments can select from several IT service delivery options that include:
	1) Shared Services is an in-house OCIT solution delivery model that enables OCIT to achieve greater efficiencies through the use of pooled resources, increased knowledge sharing, streamlined processes, and standardized hardware and software. Furthermore, it encompasses a number of IT service areas including customer relationship management, applications development and support, project management, business analysis, service desk and desktop support, and infrastructure services. Departments supported include OC Public Works (OCPW), OC Waste & Recycling (OCWR), OC Community Resources (OCCR), Social Services Agency (SSA), Child Support Services (CSS), Probation, and Treasurer-Tax Collector.
	2) Managed Services is a solution delivery model that provides IT services based on managed agreements defined through partnership with OCIT. The responsibilities of delivering this service model is outsourced to the County's third-party vendor Science Applications International Corporation (SAIC) and is responsible for IT services that encompass managing and maintaining Countywide network infrastructure and communications, Data Center (OCDC) facility, hardware, data storage and backup, service desk support, and the Security Operations Center. Departments supported include County Executive Office, Board of Supervisors, Clerk of the Board, Internal Audit and County Counsel.



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PURPOSE & AUTHORITY	We performed this audit in accordance with the FY 2023-24 Audit Plan and Risk Assessment approved by the Audit Oversight Committee (AOC) and the Board of Supervisors (Board).
PROFESSIONAL STANDARDS	Our audit was conducted in conformance with the International Standards for the Professional Practice of Internal Auditing issued by the International Internal Audit Standards Board.
Follow-UP Process	In accordance with professional standards, the Internal Audit Department has a process to follow-up on its recommendations. A first follow-up audit will generally begin six months after release of the initial report.
	The AOC and Board expect that audit recommendations will typically be implemented within six months or sooner for significant and higher risk issues. A second follow-up audit will generally begin six months after release of the first follow-up audit report, by which time all audit recommendations are expected to be implemented. Any audit recommendations not implemented after the second follow-up audit will be brought to the attention of the AOC at its next scheduled meeting.
	A Follow-Up Audit Report Form is attached and is required to be returned to the Internal Audit Department approximately six months from the date of this report in order to facilitate the follow-up audit process.
MANAGEMENT'S RESPONSIBILITY FOR INTERNAL CONTROL	In accordance with the Auditor-Controller's County Accounting Manual No. S-2 Internal Control Systems: "All County departments/agencies shall maintain effective internal control systems as an integral part of their management practices. This is because management has primary responsibility for establishing and maintaining the internal control system. All levels of management must be involved in assessing and strengthening internal controls." Internal control should be continuously evaluated by management and weaknesses, when detected, must be promptly corrected. The criteria for evaluating internal control is the Committee of Sponsoring Organizations of the Treadway Commission (COSO) Internal Control – Integrated Framework. Our audit complements but does not substitute for department management's continuing emphasis on control activities and monitoring of control risks.
INTERNAL CONTROL LIMITATIONS	Because of inherent limitations in any system of internal control, errors or irregularities may nevertheless occur and not be detected. Specific examples of limitations include, but are not limited to, resource constraints, unintentional errors, management override, circumvention by collusion, and poor judgment. Also, projection of any evaluation of the system to future periods is subject to the risk that procedures may become inadequate because of changes in conditions or the degree of compliance with the procedures may deteriorate. Accordingly, our audit would not necessarily disclose all weaknesses in the department's operating procedures, accounting practices, and compliance with County policy.



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APPENDIX B: REPORT ITEM CLASSIFICATION

Critical Control Weakness	Significant Control Weakness	Control Finding
These are audit findings or a combination of audit findings that represent critical exceptions to the audit objective(s) and/or business goals. Such conditions may involve either actual or potential large dollar errors or be of such a nature as to compromise the department's or County's reputation for integrity. Management is expected to address Critical Control Weaknesses brought to its attention immediately.	These are audit findings or a combination of audit findings that represent a significant deficiency in the design or operation of internal controls. Significant Control Weaknesses require prompt corrective actions.	These are audit findings concerning the effectiveness of internal control, compliance issues, or efficiency issues that require management's corrective action to implement or enhance processes and internal control. Control Findings are expected to be addressed within our follow- up process of six months, but no later than twelve months.



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APPENDIX C: OCIT MANAGEMENT RESPONSE

Content in Appendix C has been removed from this report due to the sensitive nature of the specific findings.

