KENTUCKY EDUCATIONAL DEVELOPMENT CORPORATION’S ADMINISTRATION OF ELLIOTT 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
www.auditor.ky.gov
July 8, 2005

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

Stanley Riggs, Executive Director  
Kentucky Educational Development Corporation  
904 Rose Road  
Ashland, KY 41102-7104

Re: Adult Education Grants

Dear Mr. Stagnolia and Mr. Riggs:

This report contains the results of the performance audit of Kentucky Educational Development Corporation’s administration of Elliott 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 Educational Development Corporation (local provider) for a limited scope performance audit of its administration of the Adult Education and Family Literacy Grant for Elliott County. An on-site review was conducted on April 19 and 20 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

<table>
<thead>
<tr>
<th>FINDING</th>
<th>Disallowed Costs</th>
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<tr>
<td>Four (4) participant files did not contain evidence that a goal was set, when applicable.</td>
<td>N/A</td>
</tr>
<tr>
<td>One (1) participant’s file did not contain evidence to support that goals were met.</td>
<td>N/A</td>
</tr>
<tr>
<td>Three (3) participant files did not agree with the electronic information reported to KYAE (specifically goal information).</td>
<td>N/A</td>
</tr>
<tr>
<td>One (1) participant’s file did not contain documentation that their Official Practice Test scores averaged 450 prior to taking the GED.</td>
<td>N/A</td>
</tr>
<tr>
<td>Description</td>
<td>Status</td>
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<td>-----------------------------------------------------------------------------</td>
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</tr>
<tr>
<td>Eleven (11) participant files did not contain evidence of separation due to no contact for 90 consecutive days.</td>
<td>N/A</td>
</tr>
<tr>
<td>One (1) participant met the goal of entering postsecondary education/training but there was no evidence of follow-up correspondence.</td>
<td>N/A</td>
</tr>
<tr>
<td>One (1) participant’s file did not contain an applicable withdrawn statement.</td>
<td>N/A</td>
</tr>
<tr>
<td>Three (3) employees were not included in KYAE’s electronic information system.</td>
<td>N/A</td>
</tr>
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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 44 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:

- Four (4) participant files did not contain evidence that a goal was set, when applicable.
- One (1) participant’s file did not contain evidence to support that goals were met.
- Three (3) participant files did not agree with the electronic information reported to KYAE (specifically goal information).
- One (1) participant’s file did not contain documentation that their Official Practice Test scores averaged 450 prior to taking the GED.
- Eleven (11) participant files did not contain evidence of separation due to no contact for 90 consecutive days.
- One (1) participant met the goal of entering postsecondary education/training but there was no evidence of follow-up correspondence.
- One (1) participant’s file did not contain an applicable withdrawn statement.
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. Any achievement of goals/objectives should be documented and maintained. 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

Kentucky Educational Development Corporation is working with Elliott County to correct the exceptions that were noted. Elliott has started implementing a checklist in each student’s folder to organize and easily find student data. They will start clearly marking the goals for each student in the files so that they are easily accessible. The separation date will also be clearly marked inside the folder along with written on the outside the folder.
PAYROLL AND STAFF REQUIREMENTS

Scope and Methodology

A sample of 10 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 rely on each provider to update its electronic staff listing to ensure complete and accurate information. We noted three (3) employees that were not included in KYAE’s electronic information system.

Recommendations

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

Provider Response

A response was not submitted for the report.
PURCHASING/EXPENDITURE COMPLIANCE

Scope and Methodology

A sample of 15 expenditures, representing approximately 17% 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 4 expenditures, representing 20% 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 Educational Development Corporation’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.