Purpose and Mission

The purpose of Old Dominion University’s internal audit activity is to provide independent, objective assurance and consulting services designed to add value and improve the University’s operations. The mission of internal audit is to enhance and protect organizational value by providing risk-based and objective assurance, advice and insight. The internal audit activity helps the University accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of governance, risk management and control processes.

This charter as adopted herein will serve as a guide for the activities of the University Audit Department at Old Dominion University. This charter does not include, nor is it intended to include, all of the department’s duties or responsibilities as they may exist from time to time.

Objectives and Scope of Internal Audit Activities

The scope of internal audit activities encompasses, but is not limited to, objective examination of evidence for the purpose of providing independent assessments to the Audit and Compliance Committee and management on the adequacy and effectiveness of governance, risk management and control processes for Old Dominion University.

1. Evaluating financial and operating procedures for adequacy of internal controls and providing advice and guidance on control aspects of new policies, systems, processes and procedures;

2. Ascertaining the extent of adherence, by the University and its employees, to established policies, plans, and procedures, and compliance with state and federal laws and regulations;

3. Determining whether resources and assets are acquired economically, and protected adequately;

4. Determining the propriety and accuracy of financial transactions and data;

5. Working with management to identify opportunities for process improvements, cost savings and revenue enhancements;
6. Evaluating the accuracy, security, effectiveness and efficiency of the University’s information technology and processing systems;

7. Evaluating the effectiveness and efficiency of operations and programs along with determining whether the results of operations or programs are consistent with established goals and objectives;

8. Assisting in the education and training of employees in University policies and procedures, as well as the need for and characteristics of strong internal controls;

9. Assisting management in the deterrence of fraud and investigating any instances of such activity discovered at the University; and

10. Coordinating audit efforts with the Auditor of Public Accounts and other external auditors.

Standards for the Professional Practice of Internal Auditing

The Institute of Internal Auditors, Inc., an international organization dedicated solely to the advancement of the internal auditing profession, has adopted "The International Professional Practices Framework (IPPF)." The four mandatory elements of the IPPF are the core principles for the professional practice of internal auditing, definition of internal audit, Code of Ethics, and the International Standards for the professional practice of internal auditing (Standards).

The University Audit Department will govern itself by adherence to the mandatory elements of the Institute of Internal Auditors’ International Professional Practices Framework. The Chief Audit Executive will periodically report to senior management and the Audit Committee regarding the internal audit activity’s conformance to the Code of Ethics and the Standards.

Reporting and Responsibilities

The University Audit Department is functionally accountable and reports to the Board of Visitors through the Audit and Compliance Committee. The Chief Audit Executive will meet with the Audit and Compliance Committee at each of the scheduled quarterly Board meetings.

The Department reports administratively to the President’s Office and works with the President or through a designated representative for the purpose of the day-to-day operations.

The Chief Audit Executive shall have direct access to the President and to the Audit and Compliance Committee of the Board of Visitors in any instance where the Chief Audit Executive believes that such access is needed to fulfill the stated objectives of the department.

The Chief Audit Executive shall periodically report to senior management and the Audit and Compliance Committee of the Board of Visitors regarding:
1. The department’s purpose, authority and responsibility.

2. Risk-based audit plan and performance relative to the plan along with any adjustments needed to the plan.

3. Conformance with the IIA’s Code of Ethics and Standards, and action plans to address any significant conformity issues.

4. Significant risk exposures and control issues to include fraud, governance issues and other matters requiring the attention of, or requested by, the Audit and Compliance Committee.

5. Results of audit engagements and other activities.

6. The propriety of any limitations on the scope of internal audits that may be imposed by University management.

7. Resource requirements.

8. Any response to risk by management that may be unacceptable to the University.

As used herein, the term "external" shall refer to representatives of or the activities of the Auditor of Public Accounts for the Commonwealth of Virginia, individual certified public accountants (the "CPA") and auditors from organizations, governmental or commercial, outside the University.

Code of Virginia §2.2-307 et seq., established the Office of the State Inspector General (OSIG) effective July 1, 2012, and charged the office with providing services in three core areas: (1) investigating complaints alleging fraud, waste, abuse, or corruption; (2) conducting performance reviews of executive branch agencies; and (3) coordinating and requiring standards for internal audit programs existing as of July 1, 2012, and developing and maintaining other internal audit programs. As the OSIG is required to coordinate and require standards for those internal audit programs, ODU’s University Audit Department will adhere to any OSIG directives.

Authority

The Chief Audit Executive will have unrestricted access to, and communicate and interact directly with, the Audit and Compliance Committee, including private meetings without management present.

The Audit and Compliance Committee authorizes the internal audit activity to:

Have full, free, and unrestricted access to all university activities, property, personnel, and records which are relevant to fulfillment of the department’s mission to the University.

- It is understood that certain items of the university are confidential in nature and special arrangements will be made when examining and reporting upon such items.
Allocate resources, set frequencies, select subjects, determine scope of work, apply techniques required to accomplish audit objectives, and issue reports.

Obtain assistance from the necessary personnel of Old Dominion University, as well as other specialized services from within or outside of the University, in order to complete the engagement.

Independence and Objectivity

The University Audit Department shall be free from all conditions that threaten the ability of internal auditors to carry out their responsibilities in an unbiased manner, including matters of audit selection, scope, procedures, frequency, timing, and report content. The University Audit Department shall be free from control or undue influence in the determination of facts revealed by the examination or in the development of recommendations or opinions as a result of the examination.

If the Chief Audit Executive determines that independence or objectivity may be impaired in fact or appearance, the details of impairment will be disclosed to the appropriate parties. The Chief Audit Executive will disclose to the Audit and Compliance Committee any interference and related implications in determining the scope of internal auditing, performing work, and/or communicating results.

Internal auditors will maintain an unbiased mental attitude that allows them to perform engagements objectively and in such a manner that they believe in their work product, that no quality compromises are made, and that they do not subordinate their judgment on audit matters to others. Internal auditors will have no direct operational responsibility or authority over any of the activities audited. Accordingly, internal auditors will not implement internal controls, develop procedures, install systems, prepare records, or engage in any other activity that may impair their judgment.

System Planning and Development

The University Audit Department will participate, in an advisory capacity, in the planning, development, implementation, and modification of major computer-based and manual systems to ensure that:

1. Adequate controls are incorporated in the system;
2. A thorough testing of the system is performed at appropriate stages;
3. System documentation is complete and accurate; and
4. The intended purpose and objective of the system implementation or modification has been met.

The internal auditor participating in such a review should ensure that the extent of participation does not affect independence, thus suggested audit trails or other controls will be transmitted through formal correspondence.
Responsibility for the Detection of Errors or Irregularities

The staff of the University Audit Department have a professional responsibility to conduct reviews with an attitude of professional skepticism, recognizing that the application of internal auditing procedures may produce evidential matter indicating the possibility of errors or irregularities.

If the internal audit staff believe that an error or irregularity may exist in an area under review or in any other area of the university, the Chief Audit Executive shall be notified at once. The Chief Audit Executive should consider the implications of such an error or irregularity and its disposition with the President and/or the President's designated representative. If the Chief Audit Executive believes that both of the individuals are directly involved, then the disclosure of potential errors or irregularities should be made directly to the chairman of the Audit and Compliance Committee of the Board of Visitors.

The University Audit Department cannot be solely responsible for the detection and prevention of all errors and irregularities which may occur within the university. This is a responsibility shared by all members of the university management team.

Coordination of External Auditors

The Chief Audit Executive is responsible for coordinating the audit efforts of the University Audit Department with those of the Auditor of Public Accounts for the Commonwealth of Virginia and other external auditors that have business with the University. This coordination of audit efforts should be in the planning and definition of the scope of proposed audits so the work of auditing groups is complementary and will provide a comprehensive, cost-effective audit.

Audit Plan

Each year, a proposed detailed audit plan for the next fiscal year will be submitted to the Audit and Compliance Committee. Upon approval of the plan by the Committee, audits will be initiated pursuant to the plan.

A block of time will be set aside for unexpected audits, special request audits and consulting, and cases received from the Commonwealth's fraud, waste and abuse hotline. In excess of this, any additions to the plan will require written documentation as to the need for such additions with final approval for the request being made by the President and Committee.

A copy of all approved revisions to the audit plan will be submitted to the President and the Audit and Compliance Committee.

Audit Reports

At the conclusion of each audit, the department or activity audited will be provided an opportunity to respond in writing to the findings, conclusions, and recommendations of the University Audit Department. In addition, an exit conference will be held with the individual in charge of the department or activity under review. All findings, conclusions and recommendations will be
discussed and any differences of opinion settled or so noted. A formal audit report will be prepared after the exit conference is held and draft report reviewed. This report will contain a summary of the function of the department or area, the objective of performing the audit, the audit methods used, detailed explanations of any issues noted and recommendations for improvements thereon. A section of the audit report will include the department's response to the recommendations made by the University Audit Department.

Audit reports will be discussed with the vice president responsible for the area under review prior to the issuance to the President. All final audit reports will be issued to the President, with copies to the Vice President of the area audited and the department head. Executive summaries of all final audit reports will be presented to the members of the Audit and Compliance Committee. Final Audit Reports are also shared with the Office of the State Inspector General as required. Further distribution will be at the discretion of the Chief Audit Executive.

The University Audit Department will conduct a follow-up review on issues noted within the final audit reports to determine whether recommendations have been considered and acted upon. A status of open audit issues will be provided to the Committee periodically.

**Detection, Investigation and Reporting of Fraud**

The University Audit Department shall be notified in all cases where the discovery of circumstances suggests a reasonable possibility that assets have, or are thought to have, been lost through defalcation or other security breaches in the financial, operating or information systems. Upon such notifications, the Chief Audit Executive should ensure that the proper authorities within the department and the University have been notified of the potential loss. The Chief Audit Executive should work to ensure that the University promptly notifies other state departments as required under Section 30-138 of the Code of Virginia.

The University Audit Department will perform sufficient tests to identify the weaknesses in financial and operating procedures, both automated and manual, which permitted the loss and evaluate the impact the weaknesses have with respect to other activities of the institution. In addition, the University Audit Department will recommend improvements to correct the weaknesses and incorporate appropriate tests in future audits to disclose the existence of similar weaknesses in other areas of the institution.

**Consulting Activities**

As part of its mission, the University Audit Department will engage in evolving forms of value-added services which are consistent with the broad definition of internal auditing. As such, the Department from time to time may be asked to perform a variety of non-standard audit services, such as advisory activities and consulting engagements, both of which may involve formal or informal advice, analysis or assessment. These services will be provided at the discretion of the Chief Audit Executive where they do not represent a conflict of interest or detract from the Department’s obligation to the Board of Visitors or the President.
Decisions to adapt or implement recommendations as a result of consulting activities should be made by management. It must be understood that consulting services cannot be rendered in a manner that masks information that, in the judgment of the Chief Audit Executive, should be provided to the Board of Visitors and senior management. In the conduct of consulting activities, the Department will be guided by the IIA Code of Ethics and the Standards for the Professional Practice of Internal Auditing.

**Personnel**

The ultimate quality of the University Audit Department's performance is directly related to the quality of the people employed. The internal audit function should be directed by and staffed with qualified and competent individuals.

Minimum qualifications for each position within the audit function have been established; however, additional experience, training, specialized skills, as well as intelligence, adaptability, promotability, an inquiring mind, analytical ability, good business judgment, and an ability to communicate with individuals should be considered in the employment process.

The Chief Audit Executive should report annually to the Audit and Compliance Committee and the President and/or a designated representative as to the effectiveness of the present staff in fulfilling the stated objective of the University Audit Department.

**Continuing Professional Development**

The university recognizes the need for internal auditors to enhance their knowledge and skills and other competencies through continuing professional development.

To fulfill this need, it is required that each representative of the department obtain at least forty (40) hours of continuing professional education credits annually, subject to funding availability.

**Quality Assurance and Improvement Program**

Old Dominion University recognizes the benefits to be derived from a quality assurance review of the internal audit function. The internal audit activity will maintain a quality assurance and improvement programs that covers all aspects of the internal audit activity. The program will include an evaluation of the department’s conformance with the Standards and an evaluation of whether the internal auditors apply The IIA’s Code of Ethics. The program will also assess the efficiency and effectiveness of the department and identify opportunities for improvement.

The Chief Audit Executive will communicate to senior management and the Audit and Compliance Committee on the department’s quality assurance and improvement program, including results of internal assessments (both ongoing and periodic) and external assessments at least once every five years by a qualified, independent assessor, or assessment team from outside the University.