



Corrective Action Plan Follow-up Review

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Abbreviations

ALPHA Student Outreach Specialist – "Alpha Team"

CAP Corrective Action Plan

DAEP Disciplinary Alternative Education Program
DTP DAEP Present absence reason code
EPISD EI Paso Independent School District

IIA Institute of Internal Auditors
ILT Instructional Leadership

IT Information Technology Department NN No Note/Call, absence reason code

NOA Notice of Absence

PEIMS Public Education Information Management System

SPS Student and Parent Services Department

TEA Texas Education Agency UNV Unverified Absence

Background

The Institute of Internal Auditors' (IIA) International Standards for the Professional Practice of Internal Auditing, Performance Standard 2500 - Monitoring Progress, require we "...establish and maintain a system to monitor the disposition of results communicated to management." Internal Audit has established the Corrective Action Plan (CAP) process to meet this requirement. The process includes monitoring and reporting whether management has implemented corrective actions to address audit findings, observations, and recommendations.

Internal Audit issued the Campus Systems Audit: Attendance & Truancy Dr. Josefina Villamil Tinajero PK-8 Audit Report to District management and administration on January 29, 2024. The <u>original audit report</u> is posted on the EPISD website. We performed the audit as part of the Board-approved 2023-2024 Internal Audit Plan. The objective of the original audit was to determine if school staff:

- 1. Followed the Texas Education Agency's (TEA) Student Attendance Accounting Handbook and the District's Attendance Procedures Manual as it pertains to:
 - a. Attendance is taken and recorded accurately.
 - b. Self-audits are performed.
- 2. Notified parents when students had three or more unexcused absences within a four-week period and developed a 45-day attendance plan for the students who received a notice of absence.

The scope of the audit was the 2023-2024 school year (through November 3, 2023). The audit objectives aligned with the EPISD Strategic Blueprint Lever IV Culture of Accountability.

The original audit report included ten (10) findings, five (5) observations, and 24 recommendations addressed to the campus. In addition, the report included one (1) observation and two (2) recommendations addressed to the Student Retention and Truancy Prevention Department. In summary:

- 1. The campus had a total of 1,350 unverified (UNV) absences and 699 nonote/no-call (NN) absences as of November 1, 2023, which translates into approximately \$118,801.02 in state funding.
- The ten (10) absences tested were recorded accurately; however, there were instances of non-compliance with the District's Attendance Procedures Manual relating to the bell schedule, the six weeks self-audits, daily procedures, supporting documentation, and misfiling.
- 3. For two of the three students tested, the 45-Day Attendance Improvement Plan was not developed. For the other student, the form was not signed by the student and parent. In addition, monitoring responsibilities are not outlined in the Student Retention and Truancy Prevention Manual, and there is no policy in place to track when the NOA letters are mailed out.

For reference, a summary of the original audit report results is provided in **Exhibit A.** The Campus Administrators agreed with our recommendations and developed a corrective action plan (CAP) with seven (7) activities.

Objective and Scope

The objective and scope of this follow-up review were to determine whether the campus administrators implemented the seven (7) CAP activities or took other actions to address the ten (10) findings, five (5) observations, and 24 recommendations outlined in the Campus Systems Audit: Attendance & Truancy Dr. Josefina Villamil Tinajero PK-8 Audit Report.

Methodology

To achieve our follow-up review objective, we:

- Held meetings and communicated with persons responsible for carrying out the CAP activities.
- Reviewed supporting documentation maintained by the campus administrators as evidence of completion of the CAP activities provided to Internal Audit.

Inherent Limitations

This was a limited scope follow-up review covering only the actions taken by administration to address the original audit results and recommendations stated in the Objective and Scope section of this report. No representations of assurance are made to other areas or periods not covered by this follow-up review.

Summary of Results

CAP Activities	Implemented	Overall CAP Status
7	7	Closed

The campus administrators implemented the seven (7) activities in the CAP to address the ten (10) findings, five (5) observations, and 24 recommendations in the original audit report. As such, this report represents the close-out of this CAP.

CAP Activities and Action Taken

The campus administrators agreed with all of the recommendations for the campus outlined in the original audit report and incorporated them into seven (7) CAP activities. The details of the seven (7) CAP activities, the person(s) responsible, and the action taken are outlined below.

Activity 1 Implemented

"Develop a daily checklist which includes times specifically secured for clearing of unverified absences, run all required reports, and daily filing folders."

Person Responsible: Assistant Principal, Dr. Josefina Villamil Tinajero PK-8

Action Taken: The campus implemented a checklist that includes the reports and actions identified in the results and recommendations in the original audit report. The attendance clerk is using the checklist daily and attaching it to the daily attendance folders.

Activity 2 Implemented

"Principal will contact SPS for attendance trainings and inform attendance clerk and backups."

Person Responsible: Assistant Principal, Dr. Josefina Villamil Tinajero PK-8

Action Taken: The Principal, one of the Assistant Principals, and the employees who have access to modify attendance received attendance training from Student and Parent Services (SPS) on March 25, 2024.

Activity 3 Implemented

"The Principal, along with School Leadership, will determine if the bell schedule in Frontline should be in alignment with the school's bell schedule. In addition, the principal and principal designee will request access in Frontline to monitor bell schedules."

Person Responsible: Principal, Dr. Josefina Villamil Tinajero PK-8

Action Taken: The Principal and the Executive Principal agreed the campus bell schedule should align to the bell schedule in Frontline. Following a Zendesk request from the Principal at Dr. Josefina Villamil Tinajero PK-8 School, the Information Technology (IT) department proceeded to align the school schedule in Frontline. Additionally, the IT department provided a list of employees with access to view the Frontline bell schedule for Tinajero to the Principal.

Activity 4 Implemented

"The Principal will direct the attendance clerk, in writing, to download and review the EPISD Attendance Procedures Manual."

Person Responsible: Assistant Principal, Dr. Josefina Villamil Tinajero PK-8

Action Taken: The Attendance Clerk acknowledged printing the EPISD Attendance Procedures Manual and reviewing the items mentioned in the results and recommendations pertaining to the attendance clerk.

Activity 5 Implemented

"Principal will create a 6 week calendar reminder to notify Assistant Superintendent of teachers who did not take attendance and scheduling 6 week audits."

Person Responsible: Assistant Principal, Dr. Josefina Villamil Tinajero PK-8

Action Taken: The Principal set up a 6-week calendar reminder to inform the Assistant Superintendent about teachers who have not taken attendance and to send the 6-week attendance self-audits. The Assistant Principal completed the attendance self-audit review for the 5th six weeks and the Principal submitted it to the Executive Principal and the Executive Director of Student Parent Services April 1, 2024.

Activity 6 Implemented

"Principal will request training from ALPHA Team. The Principal will determine a plan of action to monitor development of the 45 Day Attendance Improvement Plans for all students who receive an NOA letter. The 45 Day Attendance Improvement plans will be developed for the students addressed in the results."

Person Responsible: Assistant Principal, Dr. Josefina Villamil Tinajero PK-8

Action Taken: The campus administrators received training from members of the ALPHA team on March 26, 2024. Collaboratively, a plan was devised with input from the ALPHA team members, the Attendance Clerk, and the PEIMS clerk to monitor Notice of Absence letters and the progress of the 45-Day Attendance Improvement Plans. On May 15, 2024, campus administrators provided the 45-Day Attendance Improvement Plans signed by the respective parents for the two students identified in the audit.

Follow-up recommendations: The Student Retention and Truancy Prevention department should consider adding to their procedures the course of action to follow whenever campus staff cannot get a hold of the parents/guardians to develop a 45-Day Attendance Improvement Plan.

Campus Administrators, along with the Student Retention and Truancy Prevention department, should persist in their efforts to timely determine the whereabouts of students with chronic absenteeism, ensuring their attendance and safety.

Activity 7 Implemented

"Assistant Principals will revisit and discuss (in leadership meeting) the EPISD Student Retention and Truancy Prevention Manual and Student Attendance Procedures Manual."

Person Responsible: Assistant Principal, Dr. Josefina Villamil Tinajero PK-8

Action Taken: The Tinajero campus administrators and counselors held their Instructional Leadership "ILT" meeting on March 25, 2024. During the ILT meeting, the campus administrators and counselors revisited and discussed the attendance and truancy procedures. The Assistant Principal indicated emailing the attendance manuals to the attendees.

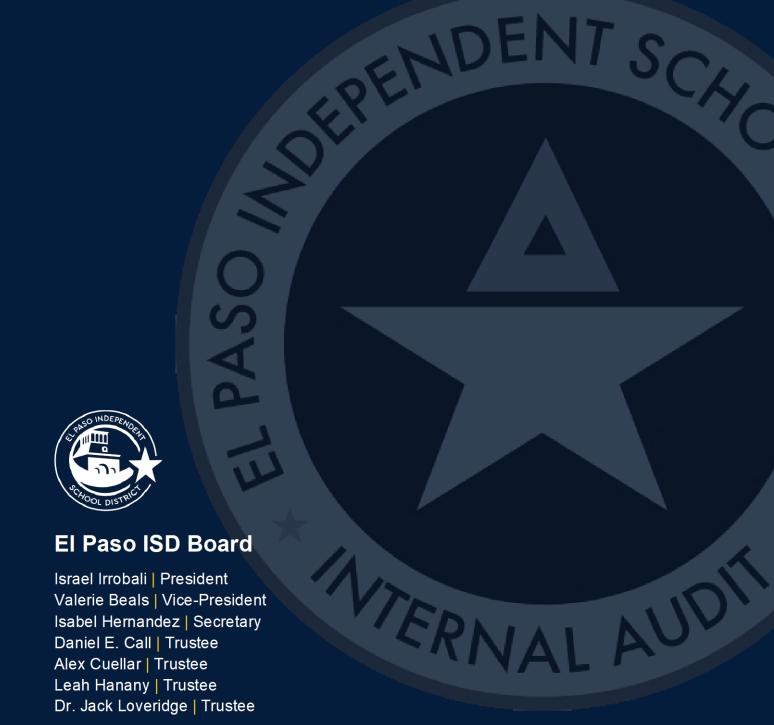
Exhibit A: Summary of Original Audit Results

Finding	Summary Finding
Attendance	
1.1	The campus had 1,350 unverified (UNV) absence and 669 absences coded as no-note/no-call (NN) as of November 1, 2023. Combined, the 2,049 absences translate into approximately \$118,801.02 in state funding based on the 2022-2023 Summary of Finances as of November 20, 2023 (\$57.98 per absence). This amount represents the total funds the District would not receive due to the UNV and NN absences.
1.2	The PEIMS clerk did not attend attendance training, and s/he serves in the backup attendance role.
1.3	The accounting period start and end times for the middle school do not agree with the times in Frontline. The Attendance Clerk did not verify the campus bell schedule and accounting period in the student system prior to the first day of school.
1.4	The "Attendance not Taken" report was not on file for five of six dates tested. The campus did not identify if any teachers had not taken attendance on August 15, 2023, September 13, 2023, September 20, 2023, September 22, 2023, and October 25, 2023.
1.5	The Attendance Clerk did not provide written notice to the Principal of teachers not taking attendance on August 15, 2023, September 20, 2023, and September 22, 2023.
1.6	The Principal does not inform the Assistant Superintendent on a six-week basis when teachers do not take attendance.
1.7	The "Daily Attendance by Student" or "Student Attendance Detail" reports were not on file for three (3) of the five (5) daily attendance folders tested.
1.8	The attendance self-audit review for the 1 st six weeks was not performed. The Principal and Assistant Principal overseeing attendance were unaware of the requirement to perform a self-audit and complete the "Principal's (or Designee's) Daily Attendance File Audit Form."
Truancy	
2.1	Of the three (3) students selected for our sample who received a Notice of Absence (NOA) letter, the 45-Day Attendance Improvement Plan was not developed for two (2) students.
2.2	One 45-day Attendance Improvement Plan tested did not include the parent's and student's signatures.

Observation	Summary Observation
Attendance	
1.1	The Principal and two Assistant Principals did not attend the beginning of the school year attendance training.
1.2	The supporting documentation on file for three (3) of the five (5) absences tested was not date-stamped. Without date stamps, it is difficult to determine if documentation was posted within five days as required.

Observation	Summary Observation	
1.3	One instance of a misfiled attendance document was identified during the campus visit	
1.4	The supporting documentation to justify the absence reason code NN dated September 13, 2023, for one student, was not filed in the daily attendance file folder. Also, the copy of the blackboard log was not stored in the daily file folder of September 13, 2023. The Attendance Clerk indicated that s/he was unaware of how to retrieve the blackboard log, and that s/he had to store it in the daily attendance file folder.	
1.5	The supporting documentation for one absence tested classified as DTP (DAEP Prese was not filed in the September 20, 2023, daily attendance file folder. The DAEP attendar rosters are stored in a separate folder in the Attendance Clerk's office.	
Truancy		
2.1	There is no current practice nor policy in place to track when the NOA letters are mailed to the parents/responsible person or adult student. This Observation corresponded to the EPISD Student Retention and Truancy Prevention Department.	

The complete original audit report is available on the EPISD website.



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1014 N. Stanton | El Paso, TX 79902 Phone: 915-230-2743 audit@episd.org

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