Corrective Action Plan Follow-up Review: Transcript Audit

udit Plan Code: 23.08.F1



Assurance Insight Objectivity

First Follow-up Report June 18, 2024

Management has implemented 16 of the 19 activities in the CAP to address the findings, observation, and recommendations in the original audit report. Management submitted an extension for the three (3) remaining activities that are in progress.



Corrective Action Plan Follow-up Review

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Abbreviations

CAP	Corrective Action Plan
CCRP	College and Career Readiness Planner
CPELA	College Preparatory Course English Language Arts
CPR	Cardiopulmonary Resuscitation
CUM	Cumulative Record folder (student file
EPISD	El Paso Independent School District
FAFSA	Free Application for Federal Student Aid
FHSP	Foundation High School Program
HB5	House Bill 5
IIA	Institute of Internal Auditors
TEA	Texas Education Agency



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 Transcript Audit Report to District management and administration on November 1, 2023. The <u>original audit report</u> is posted on the EPISD's website. We performed the audit as part of the Board-approved 2022-2023 Internal Audit Plan. The objective and scope of the original audit were to determine if the 2023 cohort of 12th-grade students were scheduled to meet the graduation requirements from the El Paso Independent School District (EPISD) and the Texas Administrative Code Chapter 74 Foundation High School Program in the areas of courses, credits, endorsement, cardiopulmonary resuscitation (CPR), and proper interaction with peace officers.

Our audit identified that 85% of 12th graders or students in the 2023 cohort were on track to achieve their graduation plan in the sample tested. The District needed improvement in the areas of data quality and monitoring of student graduation requirements, conversion of letter grade to numerical grade, and requirements for maintaining documentation to support student achievement recorded in the transcript.

The original audit report included five (5) findings, one (1) observation, and 16 recommendations. For reference, a summary of the original Transcript Audit Report findings is provided in **Exhibit A.** District management and administration agreed with our recommendations and developed a corrective action plan (CAP) with 19 activities.

Objective and Scope

The objective and scope of this follow-up review were to determine whether management implemented the 19 CAP activities or took other actions to address the five (5) findings, one observation, and 16 recommendations outlined in the Transcript 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 management 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 findings 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
19	16	Open

Management implemented 16 CAP activities, and three (3) CAP activities are in progress. Management and leadership have submitted an extension for the three (3) CAP activities in progress. One activity has been extended until June 30, 2024, and the other two activities have been extended to November 1, 2024. This represents the first extension for this CAP and activities.

The CAP will remain open until all activities have been implemented or deemed no longer applicable/necessary. Internal Audit will continue to monitor the implementation of the CAP and report the CAP status to the Board.

CAP Activities and Action Taken

Management and leadership agreed with the 16 recommendations in the original audit report and incorporated them into 19 CAP activities. The details of the 19 CAP activities, the person(s) responsible, and the action taken are outlined below.

Activity 1 Implemented "Develop recurring procedures for entering, maintaining and monitoring transcript audit data entry in Frontline throughout the school year. The new procedures will include the development and use of reports and/or dashboards for monitoring the student transcript audit data."

Person(s) Responsible: Director, Counseling and Advising

Action Taken: A Graduation Requirements Monitoring dashboard was created for the Guidance and Instruction (G&I) Assistant Principals and counselors to monitor the cohort, graduation plan, endorsements, end-of-course assessments, Free Application for Federal Student Aid (FAFSA), cardiopulmonary resuscitation (CPR) instruction, Peace Officer interaction instruction, and speech requirement. The principals, graduation coaches, and registrars also have access to the dashboard. Counseling and Advising created the "Cohort - graduation plan timeline" procedure which requires G&Is to run reports on the dashboard to identify students missing cohort year, graduation plan, and/or endorsement.

Activity 2 Implemented

"Develop recurring procedures for entering, maintaining and monitoring transcript audit data entry in Frontline throughout the school year. The new procedures will include timelines for entering and verifying correct cohort year, graduation plan, endorsement(s), CPR and Peace Officer Interaction Instruction." **Person(s) Responsible:** Director, Counseling and Advising; and Assistant Superintendent, Secondary Schools Division

Action Taken: Counseling and Advising created the following procedures for counselors: 1) "Steps for Completing Change in Graduation Plan," 2) "Timeline for Identifying missing Cohort Year and Graduation Plan to include Endorsement," and 3) "CPR and Peace Officer Training Timeline."

Activity 3 Implemented "Develop recurring procedures for entering, maintaining and monitoring transcript audit data entry in Frontline throughout the school year. The new procedures will include a process for updating student graduation plan selection."

Person(s) Responsible: Director, Counseling and Advising; and Assistant Superintendent, Secondary Schools Division

Action Taken: Counseling and Advising created procedures for counselors to update student graduation plan selection (i.e., "Steps for Completing Change in Graduation Plan").

Activity 4 In-progress Extension "Develop recurring procedures for entering, maintaining and monitoring transcript audit data entry in Frontline throughout the school year. The new procedures will include a process for updating endorsement(s) when changes are made and opting out of endorsements."

Person(s) Responsible: Director, Counseling and Advising; and Assistant Superintendent, Secondary Schools Division

Action Taken: Training was provided to administrators and professional staff, including counselors, regarding updating endorsements (See Activity #6). However, revised training is needed since the District is moving from CCRP to Frontline to enter, maintain, and monitor endorsements.

Internal Audit received a Corrective Action Plan (CAP) Extension Request dated May 31, 2024, with a new due date of November 1, 2024 for the activity. The justification for the extension reads, 1) "Activity 4 and 14 are connected and require training for users with new steps and procedures. Access to provide the training won't be available until July 1st. Training will be conducted in August and September for counselors and G&I Assistant Principals;" 2) "This will allow all users to be fully trained and supported prior to using new tools;" and 3) "Once users have access to the new platform, they will have proper training for full implementation and use with fidelity."

Activity 5 Implemented "Develop recurring procedures for entering, maintaining and monitoring transcript audit data entry in Frontline throughout the school year. The new procedures will include a process for retaining supporting documentation for data entries/ updates, including the location where documentation is stored and staff responsible. This should include HB5 Endorsement letter."

Person(s) Responsible: Director, Counseling and Advising; and Assistant Superintendent, Secondary Schools Division

submitted

	Action Taken: Counseling and Advising created "Procedures for Storing and Retaining Documentation" for counselors and registrars for making data entries/updates and storage of the HB5 Endorsement letter.
Activity 6 Implemented	"Provide training to appropriate stakeholders on revised procedures identified in report recommendations 1.1 a $-$ e." (See CAP Activities #1- #5)
	Person(s) Responsible: Director, Counseling and Advising; and Assistant Superintendent, Secondary Schools Division
	Action Taken: Training was provided to administrators and professional staff, including counselors, to discuss procedures for data entry and monitoring of student transcript data (e.g., cohort year, endorsement, CPR instruction, peace officer interaction, and graduation plans). Based on PowerPoint presentations and sign-in sheets, morning and afternoon training sessions were provided on September 12, 2023, October 17, 2023, and April 30, 2024. In addition, during a Principal Level Meeting on August 22, 2023, the Transcript Audit CAP was discussed with the principals in attendance based on the meeting agenda.
Activity 7 Implemented	"Develop follow-up monitoring systems and procedures to ensure timely and correct transcript audit data entry for transfer students."
F	Person(s) Responsible: Director, Counseling and Advising
	Action Taken: Counseling and Advising created the "Direction Sheet for transcript procedures for new students" for counselors, which includes links to the "International Student Transcript Checklist" and the "Transcript Evaluation Checklist" used for transfer students.
Activity 8 Implemented	"Provide training to appropriate stakeholders on procedures to ensure timely and correct transcript audit data entry for transfer students."
Implemented	Person(s) Responsible: Director, Counseling and Advising; and Assistant Superintendent, Secondary Schools Division
	Action Taken: Training on the procedures for transfer students was provided to administrators and professional staff, including counselors. Based on PowerPoint presentations and sign-in sheets, morning and afternoon training sessions were provided on September 12, 2023, October 17, 2023, and April 30, 2024.
Activity 9 Implemented	"Develop updated systems and procedures for updates/changes and proper storage of a students HB5 Endorsement Letter."
	Person(s) Responsible: Director, Counseling and Advising; and Executive Director, Whole Learner Support and Intervention
	Action Taken: Counseling and Advising created "Procedures for Updating Endorsements" and "Procedures for Storing and Retaining Documentation" for counselors.

Activity 10 Implemented	"Develop updated systems and procedures to determine student completion of required CPR Training. Develop a process to review and monitor the documentation required to support instruction was completed by the student. Develop a process to identify the type of instruction received by the student. Develop a supporting document that identifies the type of instruction provided to the student and to verify the identified instruction has been completed by the student. Determine proper storage of the supporting documentation verifying student(s) completed required instruction. Develop a monitoring process to ensure student instruction is documented and identifies responsible persons that will monitor and ensure student instruction is documentation and data entry in Frontline. Procedures will be available online for campus administrators, teachers, counselors, registrars and other staff can access."
	Person(s) Responsible: Director, Counseling and Advising; Assistant Superintendent, Secondary Schools Division; and Executive Director, Whole Learner Support and Intervention
	Action Taken: Counseling and Advising created the "CPR and Peace Officer Training Timeline," which outlines the people responsible for ensuring CPR instruction is provided and documented, the classes that will incorporate the CPR instruction, the monitoring steps to ensure the graduation requirement is fulfilled, and deadlines for instruction, documentation, and monitoring.
	Also, the Graduation Requirements Monitoring dashboard provides information on students' completion of the CPR requirement.
Activity 11	"Provide training to appropriate stakeholders on procedures for CPR training."
Implemented	Person(s) Responsible: Director, Counseling and Advising; Assistant Superintendent, Secondary Schools Division; and Executive Director, Whole Learner Support and Intervention
	Action Taken: Training on the procedures for CPR instruction monitoring and documentation protocol was provided to administrators and professional staff, including counselors. Based on PowerPoint presentations and sign-in sheets, morning and afternoon training sessions were provided on September 12, 2023, October 17, 2023, and April 30, 2024.
Activity 12 Implemented	"Develop updated systems and procedures to determine student completion of required Peace Officer Interaction Instruction. Develop a process to review and monitor the documentation required to support instruction was completed by the student. Develop a process to identify the type of instruction received by the student. Develop a supporting document that identifies the type of instruction provided to the student and to verify the identified instruction has been completed by the student. Determine proper storage of the supporting documentation verifying student(s) completed required instruction. Develop a monitoring process to ensure student instruction is documented and identifies responsible persons that will monitor and ensure student instruction is documentation and data entry in Frontline. Procedures will be available online for campus administrators, teachers, counselors, registrars and other staff can access."

	 Person(s) Responsible: Director, Counseling and Advising; Assistant Superintendent, Secondary Schools Division; and Executive Director, Whole Learner Support and Intervention Action Taken: Counseling and Advising created the "CPR and Peace Officer
	Training Timeline," which outlines the people responsible for ensuring Peace Officer Interaction instruction is provided and documented, the classes that will incorporate the Peace Officer Interaction instruction, the monitoring steps to ensure the graduation requirement is fulfilled, and deadlines for instruction, documentation, and monitoring.
	Also, the Graduation Requirements Monitoring dashboard provides information on students' completion of the Peace Officer Interaction requirement.
Activity 13 Implemented	"Provide training to appropriate stakeholders on procedures for Peace Officer Interaction Instruction."
	Person(s) Responsible: Director, Counseling and Advising; Assistant Superintendent, Secondary Schools Division; and Executive Director, Whole Learner Support and Intervention
	Action Taken: Training on the procedures for Peace Officer Interaction instruction monitoring and documentation protocol was provided to administrators and professional staff, including counselors. Based on PowerPoint presentations and sign-in sheets, morning and afternoon training sessions were provided on September 12, 2023, October 17, 2023, and April 30, 2024.
Activity 14 In-progress	"Frontline data entry process update: Develop a district team to determine how Frontline fields and data related to graduation plans and endorsements populate PEIMS data. Create Frontline exception reports to monitor mismatches."
Extension submitted	Person(s) Responsible: Assistant Superintendent, Secondary Schools Division; and Executive Director, Whole Learner Support and Intervention
	Action Taken: A report was created to verify graduation code versus endorsements (mismatches). However, revised training is needed since the District is moving from CCRP to Frontline to enter, maintain, and monitor endorsements.
	Internal Audit received a Corrective Action Plan (CAP) Extension Request dated May 31, 2024, with a new due date for the activity for November 1, 2024. The justification for the extension reads, 1) "Activity 4 and 14 are connected and require training for users with new steps and procedures. Access to provide the training won't be available until July 1 st . Training will be conducted in August and September for counselors and G&I Assistant Principals;" 2) "This will allow all users to be fully trained and supported prior to using new tools;" and 3) "Once users have access to the new platform, they will have proper training for full implementation and use with fidelity."
Activity 15 Implemented	"A district team to evaluate if CCRP is the appropriate data source for the entry of student endorsement(s)."

Person(s) Responsible: Assistant Superintendent, Secondary Schools Division; and Executive Director, Whole Learner Support and Intervention

Action Taken: Notes from the Transcript Audit Review Committee dated May 16, 2024, indicate the committee decided "on terminating College and Career Readiness Planner (CCRP) by June 29, 2024, and transitioning over to Frontline by July 1, 2024, to be implemented for the 2024-2025 school year."

Activity 16 Implemented "Develop a district team to determine if a student's endorsement(s) should be removed in Frontline/CCRP if a student's graduation plan changes to "without endorsement" of (sic) if the student submits an "opt-out form."

Person(s) Responsible: Assistant Superintendent, Secondary Schools Division; and Executive Director, Whole Learner Support and Intervention

Action Taken: Counseling and Advising created the "Steps for Completing Change in Graduation Plan" and "Procedures for Removing an Endorsement" for counselors, which require that the endorsement must be removed from CCRP/ Frontline when an "opt-out" form is submitted.

Activity 17 In-progress Extension submitted "Develop a district team to determine if students graduating with less than 26 credits for SY 2022-2023 should reflect endorsement in transcript or remove endorsement. If decision is made to remove endorsement from student transcripts for SY 2022-2023, identify process, responsible persons and self-reporting process to TEA."

Person(s) Responsible: Director, Counseling and Advising; Assistant Superintendent, Secondary Schools Division; Executive Director, Whole Learner Support and Intervention

Action Taken: A report was generated identifying 2022-2023 high school graduates with less than 26 credits and an endorsement. The report will be available for campuses to run to identify students with "Credits Earned less than a number" specified by the user of the report (e.g., students with endorsements that have fewer than (user entered) credits earned).

Internal Audit received a Corrective Action Plan (CAP) Extension Request dated May 31, 2024, with a new due date for the activity of June 30, 2024. The justification for the extension reads, "Activity 17 requires a clean PEIMS report of before and after corrections. Waiting on one student correction to be corrected to finalize activity."

Once all the corrections for the students identified in the report are made, the District is pending self-reporting the outcomes to the Texas Education Agency.

Activity 18 Implemented "Frontline data entry process update: Develop and schedule a counselor training/workshop to review on Board Policy EIC (Regulation) to convert letter grades to numerical grades correctly. Counseling and Advising will develop a district team to determine if the grade scale on the transcript template should be reviewed to be in alignment with Board Policy EIC (Regulation)."

Person(s) Responsible: Director, Counseling and Advising; Assistant Superintendent, Secondary Schools Division; and Executive Director, Whole Learner Support and Intervention

Action Taken: Training was provided to administrators and professional staff, including counselors, on letter grade conversion. Based on PowerPoint presentations and sign-in sheets, morning and afternoon training sessions were provided on September 12, 2023, October 17, 2023, and April 30, 2024. The District team concluded the "EIC Local policy should not be aligned with EIC Regulation, as EIC Local Policy addresses students enrolled in EPISD while EIC Regulation addresses students who are transferring into EPISD from another district where the sending district utilizes letter grades, and they don't have a letter grade conversion for numerical grades."

A Zendesk ticket and email thread were provided for the corrections made to the grade scale on transcripts in Frontline due to the transcript showing letter grade D twice; the changes to the grading scale addressed the overlap issue between letter grades C and D outlined in the audit report.

Activity 19 Implemented

"Develop a district team to revise the audit card process and templates to ensure there is consistency in the information recorded on the audit card. The items noted in Observation 1 (1.1 - 1.5) will be addressed. Training on the updated audit card process and templates will be provided to all counselors."

Person(s) Responsible: Director, Counseling and Advising

Action Taken: Counseling and advising created procedures for counselors when conducting credit audit checks and making updates, which include links to revised audit cards. Training was provided to administrators and professional staff, including counselors, on audit cards. Based on PowerPoint presentations and sign-in sheets, morning and afternoon training sessions were provided on September 12, 2023, October 17, 2023, and April 30, 2024.

Exhibit A: Summary of Original Audit Results

Finding	Summary Finding
1	As of February 2023, there were 5,701 instances of <u>missing</u> required Foundation High School Program (FHSP) graduation data for students in 12 th grade or cohort 2023. It is important the student graduation data is entered accurately in Frontline as this data is used for monitoring the student's progress towards achieving their graduation plan. In addition, the District must submit complete and accurate data to the state through the Public Education Information Management System (PEIMS).
2	From a sample of 60 students tested, 85% of seniors were on track to meet their graduation plan; however, exceptions were identified with student graduation data and supporting documentation on file.
3	From a sample of 60 students, identified instances of missing instruction dates and/or supporting documentation for 36 of 60 (60%) students related to CPR and 25 of 60 (42%) students related to Peace Officer Interaction. The Texas Administrative Code (TAC) Title 19 Rules 74.38 and 74.39 require instruction in CPR and Proper Interaction with Peace Officers.
4	There were 253 instances identified District-wide where a student's graduation plan and the endorsement declaration did not match ("graduation code mismatch"). The student's graduation plan and endorsement should match to accurately reflect the student's graduation plan and academic achievement. In addition, there is a risk that the graduation data submitted through PEIMS, including graduation code (graduation plan) and/or endorsement(s), may be inaccurate and/or incomplete for those students with graduation code mismatches.
5	Identified inconsistencies in the conversion of letter grade to numerical grade for transfer students. There is a risk of inconsistencies if counselors do not use the Board Policy EIC(Regulation) for assigning numerical grades to letter grades. Assigning numerical grades inconsistently can affect students' grade point average (GPA) and Rank.

Observation	Summary Observation
1	Identified an observation related to inconsistencies in the use of audit cards. The information that should be recorded in the audit cards is not standardized; therefore, not all information needed to monitor student achievement may be recorded.

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



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