

## KNUST INTERNAL AUDIT

 STRATEGIC PLAN ${ }^{2020-2024}$
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## Introduction

The Internal Audit Department of Kwame Nkrumah University of Science and Technology (KNUST) provides an independent, objective assurance and consulting activity that is guided by principles designed to add value and improve the University's operations. It assists the University to accomplish its objectives by bringing a systematic and discipline approach to evaluate and improve the effectiveness of risk management, control and governance processes.

The Internal Audit Strategic Plan sets out a five - year medium term direction of the Department. This five-year plan outlines what the priorities of the Department are, taking into consideration the objectives of the University and what actions will be undertaken to achieve them.

The plan sets out how the Internal Audit shall continue to provide adequate level of services to management.

The establishment of Internal Audit Department in the University is based on the following:

- University Statute,
- Section 16(1) of the Internal Audit Agency Act 2003, Act 658,
- Section 82 (1) of the Public Financial Management Act 2016, Act 921.

The activities of Internal Audit Department are conducted in accordance with the Institute of Internal Auditors International Standard for the Professional Practice of Internal Auditing (IIA Standard) and other Auditing Standards as may be applicable.

In line with the aforementioned policy, the Internal Audit Department has been established to provide assurance, consulting and advisory services by reviewing internal controls, compliance and operating procedures to the extent necessary to comply with policies and procedures while adding value to improve the University's operations. It is important to note that, the internal audit function continues to evolve and therefore audit must provide an effective assurance in this transformational landscape.

The Internal Auditor of KNUST, who is the head of the Department oversees the adherence and compliance with policies relating to the auditing of the University.


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## Purpose

The purpose of this Strategic Plan is to allow the University derive maximum benefits from the Internal Audit Department. For the activities of the Internal Audit to be relevant to management, the Department needs to continue to play an important role by making immense contributions to the University in the area of governance, risks management and controls.

This Strategic Plan has been developed to formalize Internal Audit's overall strategy in achieving these workable broad base objectives enshrined in this document.

## Mission \& Vision

The mission of the Internal Audit Department is to provide independent and objective review and assessment of the business activities, operations, financial systems and internal accounting controls of KNUST.

The Internal Audit Department accomplishes its mission through the conduct of operational, financial and performance audits, through risk identification and assessment process.

Our vision is to be a valued partner with KNUST management by providing assurance and consulting services that assist the University to achieve its goals through building trust, partnerships and exhibiting a high level skill and a thorough understanding of the University's operations.

## Core Principles

For an internal audit function to be considered effective, all the key principles enshrined below should be present and operating effectively:

- Demonstrates integrity
- Demonstrates competence and due professional care
- Objective and free from undue influence (independent)
- Align with the strategies, objectives and risks of the organization
- Appropriately positioned and adequately resourced
- Demonstrates quality and continuous improvement
- Communicates effectively
- Provides risk-based assurance
- Insightful, proactive and future-focused
- Promotes organizational improvement

Using a risk-based approach, Internal Audit Department plans to deliver the above stated Vision \& Mission Statements by providing the following four types of core services:

- Assurance Services: Review of operations, policies and procedures to evaluate the adequacy and effectiveness of compliance with related control structures so as to provide an assessment as to whether the University's risks are appropriately considered and addressed.
- Advisory Services: Assist the Audit Committee and other key stakeholders by helping them deal with specific issues and concerns that are better addressed through management advisory engagement.
- Information Technology (IT) Services: Undertake IT specific assurance and advisory engagements that help to ensure the security, integrity,
confidentiality and reliability of KNUST's information systems and resources.
- Investigative Services: Investigate allegations of financial misconduct or suspected fraud of KNUST's resources. This include addressing matters brought to Internal Audit Department's attention through its safe disclosure mechanisms by staff and students.


## Internal Audit's Administrative Priorities

To ensure continuous improvement of Internal Audit Department's effectiveness in improving value addition to its diverse stakeholders and client groups, the department has identified the following as key administrative priorities for the Strategic Plan cycle (2020-2024):

- Upgrade, develop and retain its human force (staff) through regular training and refresher courses.
- Continue to mentor staff with leadership potential to take up positions in future in KNUST and other Public Universities.
- Use of current auditing tools and technology in auditing processes.
- Greater use of contemporary audit tools and techniques (e.g. data analytics).
- Conduct self-assessment by engaging its clients on its auditing engagement
- Continuously update the Internal Audit Website space to improve visibility, locally and internationally.
- Data Protection: In order to protect the University from loss or leakage of important data through unlawful acts or human errors.

Internal Audit will continuously be assessing the controls put in place by management, which are aimed at curbing data losses.

- Introduce reviews that would focus on activities towards minimizing cyber-crime and cyber-attacks in the University: To do this the Internal Audit Department would assist management to evaluate and strengthen the Cyber Risk Management controls put in place to ascertain if the appropriate capacities (people, processes, and technology) are in place to ward off such threats.


Currently the number of staff available to the Department are six (6) Senior Members and Nineteen (19) Senior Staff.

All the six senior members are qualified Accountants having their membership with either the Institute of Chartered Accountants, Ghana (ICAG) or the Association of Certified Chartered Accountant (ACCA - UK). We also have three senior staff who are qualified, but yet to be promoted to the senior member category. Some of the staff have been deployed to work at the various Colleges. The remaining staff have been deployed to work at areas like, the Procurement of Goods, Services \& Works, Finance Office, Hospital, just to mention but few.

It is expected that the full complement of staff would stand at Twenty Seven (27) Senior Staff and Fourteen (14) Senior Members by the end of the Five Year. Below is the distribution:

| Staff Numbers | Expected | Actual | Difference |
| :--- | :---: | :---: | :---: |
| Senior Staff | 27 | 19 | 8 |
| Senior Members | 14 | 7 | 7 |
| Total Staff Numbers | $\mathbf{4 1}$ | $\mathbf{2 6}$ | $\mathbf{1 5}$ |

Approximately 80\% of the Internal Audit's available resources are committed to the completion of planned audit projects and follow-up of previous accepted audit recommendations. The annual audit plan is designed to provide appropriate coverage utilizing a variety of audit methodologies:

- Audits of individual Units both on campus and outside campus,
- Functional and process audits,
- University-wide reviews and information system projects.

In selecting specific Units/Functions for inclusion in the annual audit plan, we placed priority on providing coverage of higher risk units/processes, and areas of interest to University administrative leadership.

The remainder of our audit resources is allocated as follows:

- 10\% for employee professional development,
- $10 \%$ to accommodate requests from the Vice Chancellor, the Provost, Deans and Directors, including special request from Internal Audit Agency.



## Principles / Assumptions in Developing the Strategic Plan

The Internal Audit Department considered the Institute of Internal Auditors (IIA) International Professional Practice Framework (IPPF) while developing the Internal Audit Strategic Plan for KNUST. The core values the Internal Audit personnel should adopt are contained within the Framework's Standard and Code of Ethics.

The KNUST Internal Audit has adopted IPPF of the IIAs. The Internal Audit Agency in Ghana has developed Code of Ethics, and standard Audit Manual, in accordance with IPPF for adoption.

Accordingly, the development of this Strategic Plan is based on the recommended guidelines of IPPF; that is, "Practice Guide on Developing the International Strategic Plan" as issued by the Institute of Internal Auditors.

The following fundamental principles are considered:

## Independence from Operational Management:

To ensure independence, the Internal Audit Department of KNUST functionally report to the Chairman of the Audit Committee and administratively to the Vice Chancellor. The Internal Audit's independence from management is enshrined in the University's Statute, Section 16(1) of the Internal Audit Agency Act 2003, Act 658, and Section 82 (1) of the Public Financial Management Act 2016, Act 921.

## Recruiting and Retaining Qualified Staff:

The Internal Audit Department will continue to attract, recruit and retain wellqualified team of professional staff for the conduct of its audit engagement. We will also encourage staff with other disciplines to consider being auditors. For example, IT and Quantity Surveyor professionals to review the ICT Infrastructure and construction contracts.

## Audit Committee and Management support:

Internal Audit Department will continue to enjoy the support of the University Council, Audit Committee as well as University management. Such support will include the allocation of budgetary and other resources that will enhance the delivery of work in the annual audit plan.

## Flexibility in the Delivery of Approved Annual Audit Plan:

While every effort is made to deliver on the approved annual audit plan, the ever-evolving nature of risks, as well as management request for unplanned audit engagements, would be prioritized. Any such action will be undertaken in consultation with the Chairman of the Audit Committee and/or the Vice Chancellor.


SWOT Analysis

As part of the strategic planning process, an analysis of the Strengths, Weaknesses, Opportunities and Threats facing the Internal Audit Department were assessed.

This assessment enables the Department to use its Strength for efficient delivery of audit engagement. On its weaknesses, we would analyse how best it can be managed to achieve the needed results.

We would maximize the opportunities for the benefits of the department and manage the impact of Threats on day-to-day operations of the Department.

The table below highlights the SWOT analysis:

## Strengths

1. Top Management support to Audit and preparedness to act on audit reports.
2. Defined internal audit vision, mission, values, and charter as well as clear roles, responsibilities and reporting line.
3. Policies, Procedures and Manuals including formal reporting standard templates.
4. Skilled and innovative staff.
5. Approachable and flexible leadership style.
6. Provision of Audit reports with appropriate level of professional judgement based on standards.
7. Ability to conduct value for money service in the area of consultancy and assurance.
8. Maintain a high level of independence in the conduct of staff during audit reviews.

## Opportunity

1. Continuous improvement of staff skills, knowledge and capabilities.
2. Educate stakeholders on internal audit's role and capabilities.
3. Increased collaboration with other assurance/risk management function.
4. Enhance knowledge and skills in data analysis.
5. Attendance of workshop and seminars to upgrade staff knowledge.
6. Providing avenue for training for Internal Audit Staff in the private and public Universities.

## Weaknesses

1. Inability of staff to undertake special assignments.
2. Lack of specialized IT audit staff for IT and other related audits.
3. Inadequate number of audit staff to cover wide audit scope.
4. Limited staff career opportunities.
5. Provision of resources and other tools for audit assignments.
6. Relative High Staff turnover.

## Threats

1. Negative client perception about the audit work.
2. Unattractive financial conditions in the University to attract qualified Accountant
3. Inability to recruit staff due to Government policy.
4. Limited involvement in the University's strategic decision.
5. Lack of understanding by most staff of the work of the Internal Audit Department (Internal Audit is equal to Pre-Audit).
6. Unwillingness of staff to provide information to Audit Staff, including some management staff.
7. Negative reaction to Audit Reports by some staff, including Management Staff whose areas were reviewed.

## Key Strategic Focus Areas

The Institute of Internal Auditor's (IIA's) guidance paper on "The Role of Auditing in Public Sector Governance" requires that the public sector auditor's role supports the governance responsibilities of Oversight, Insight and Foresight.
I. Oversight: Addresses whether public sector entities are doing what they are supposed to do to detect and deter any irregularities.
II. Insight: Assist decision-makers by providing an independent assessment of programs, policies, operations and results.
III. Foresight: Identifies trends, emerging risks and challenges, which would assist the University to achieve its strategic objectives.

Notwithstanding the above, we also identified a strategic thrust area of improving the image of the Department internally and outside the University in line with the Visibility objective of the University.

The Internal Audit Department acknowledges that areas directly related to education (e.g. curriculum development, education delivery mechanisms, academic results \& outcomes) remain outside the scope of Internal Audit's purview. According to the University's arrangement, Quality Assurance and Planning Unit (QAPU) is responsible.

Not all risks are necessarily auditable. Internal Audit therefore focuses on areas that typically lend themselves to an independent review and assessment, and where Internal Audit can provide value to its key stakeholders.

There is the need to embark on staff awareness drive so that they would understand the work of the Internal Audit Unit in the University and see them as partners in the achievement of goals of the University.

## Internal Audit's 5-Year Rolling Audit Plan

To guide operational activities, the Internal Audit Department shall prepare a risk-based annual audit plan which is presented to the Audit Committee for consideration as per the Public Financial Management Act, 2016 Act 921. The approval from the Audit Committee will be sought before the plan becomes operationalized.

The 5-year rolling plan is developed with focus on the identification of key risks facing KNUST, as well as consideration of potential risks that are likely to occur in the University over the 5-year plan cycle. This risk identification process includes:
i. Review of KNUST's Strategic Plan to gain an understanding of the Collegiate and other Service Units goals \& priorities.
ii. Review of KNUST's risk register together with any other risk related information that may have been provided to the Audit Committee or the University Risk Management Committee.
iii. Obtain a high level understanding of the activities undertaken by each major sector area within KNUST. This includes education, student support, research, ancillary services, finance \& administration and other support functions such as Information Systems \& Technology.
iv. A review of the strategic plan of the Colleges and Support Services.
v. Obtain input from members of the Audit Committee as well as the University Management especially their perspective on key risk areas and where Internal Audit may be able to add value.
vi. Obtain an understanding of significant new initiatives for the coming years for planning purposes.
vii. Identification of any recent or anticipated changes in key business processes or functions for planning purposes.
viii. Internal Audit's own experience based on the KNUST functions or processes previously reviewed and where significant opportunities for improvement may have been noted.
ix. A high level understanding of internal or operational controls that may be in place to mitigate identified risks.
x. Application of guidance material from professional bodies such as the Institute of Internal Auditors, the Association of Certified Fraud Examiners and others.
xi. Communicate and liaise with Internal Audit Departments in other Universities for share of knowledge.

Acknowledging the dynamic nature of risks, the KNUST Internal Audit Department as well as the Audit Committee recognizes the need to make amendments as the year progresses. Any proposed changes to the approved annual plan would be reviewed with the Chairman of the Audit Committee, and the Committee would be made aware of the changes at the next scheduled Audit Committee meeting.

Refer to page 23 for the auditable areas over the five-year period, from which our annual audit plan would be drawn from.

The selection of the audit areas to be covered would be based on the risk impact and the availability of staff. In other words, the year-on-year audit scope would be based on these two limiting factors.

We also take cognizance of the fact that some of the areas are directly related to academic and therefore would be reviewed by QAPU.

## Key Performance Indicators (KPIs):

The Department will use the following qualitative and quantitative KPIs to periodically monitor and assess its performance against the strategic and annual audit plan.

## Qualitative:

- Instances where the Internal Auditor is invited by management to participate in key University initiatives, for example development of policy.
- Feedback from Audit Committee members on the quality of Internal Audit reports, the value they provide and the degree to which Internal Auditor meets the Committee's expectations.
- The Department's participation in any divisional or institutional staff/ client engagement surveys.


## Quantitative:

- Percentage of Internal Audit recommendations accepted by management;
- Percentage of Internal Audit recommendations implemented by management;
- Number of engagements completed relative to the Annual Audit Plan;
- Number of engagements completed that were not included in the annual audit plan;
- Performance against approved annual budget.

Internal Audit Department will periodically report to the Audit Committee its performance against the above stated qualitative and quantitative KPIs.

## Update to the Strategic Plan

This Strategic Plan is intended to cover a 5-year period - 2020 to 2024. To ensure relevance of the underlying assumptions and principles, the Plan will be revisited annually commencing December 2020. The timing for this annual review and validation would coincide with the Audit Committee's consideration \& approval of the Department's annual work plan at the December Audit Committee meeting each year.

## Conclusion

This document represents the KNUST Internal Audit Department's effort to consciously draft a successful Strategic Plan. We trust that our drive and motivations as laid out will provide enough inspiration for all stakeholders to pledge their support to our plan. Our success will be grounded by the commitment we prove in the execution process for which we hold ourselves answerable.

This plan will be subjected to a continuous impartial evaluation to establish its effectiveness and uphold its significance. We are persuaded that the process of thorough analysis and internal dialogue that we have undergone, put us in a good position for future planning.


| Key Thrust Area 1: Ensure the Policies and Procedures of the University are able to detect and deter any irregularities. |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Actions to achieve goals | Activity | Responsible Officers | Timelines | Output/Outcomes |
| To assist the University review existing financial control regulations | Review and report on the level of compliance of this objective | Internal Auditor \& Team Leaders | Aug. 31, 2022 | Report submitted to management |
| To assist the University enforce the revised financial control measures. | Audit would be conducted strictly to check the compliance of financial control measures | Internal Auditor \& Team Leaders | Sept. 1, 2020 <br> - July 31, <br> 2024 | Quarterly Internal Audit Report on Compliance to be submitted to the VC |
| Continuous Professional Development on financial controls. |  |  |  |  |
| To assist the University ensure that Investment Policy, Relevant Acts \& Regulations are complied with | Review During audit, we would check whether staff are complying with control measures | Internal Auditor | Short term <br> Sept. 1, 2020 <br> - Aug. 31, <br> 2021 | KNUST Investment Policy Statement formulated and operational. |


| Actions to achieve goals | Activity | Responsible <br> Officers | Timelines | Output/Outcomes |
| :--- | :--- | :--- | :--- | :--- |
| Assist the University enforce <br> Conflict of Interest Policy <br> and Procedures. | Review polices on conflict <br> of interest and make staff <br> aware of them | Internal Auditor | December 31, <br> 2021 | Staff awareness of the <br> Policies |
|  | Review compliance or <br> otherwise of this policy <br> and submit report to <br> the Vice Chancellor for <br> sanction of breach | Internal Auditor <br> / Audit Team <br> Leader | Sept. 1, 2020 <br> - July 31, <br> 2024 | Conflict of Interest <br> Policy and Procedures <br> enforced. |
| To assist the University <br> develop and enforce a <br> Transport Policy to promote <br> a pooling system of <br> transport. | Liaise with the Transport <br> Engineer to discuss and <br> find possible ways of <br> establishing the Vehicle <br> Pooling System | Internal Auditor | November <br> 2021 | Draft Transport Policy <br> submitted |
|  | Review and recommend <br> internal controls to be <br> established before the <br> pooling system can take <br> place | Internal Auditor / <br> Audit Staff | August 2022 | Report on how to run the <br> vehicle pooling system is <br> submitted |
| Review and make <br> recommendation on how <br> to obtain vehicles to be <br> used to establish the <br> Vehicle Pooling System | Internal Auditor / <br> Audit Staff | September | 2022 | Vehicle Pooling System <br> in place |


| Actions to achieve goals | Activity | Responsible <br> Officers | Timelines | Output/Outcomes |
| :--- | :--- | :--- | :--- | :--- |
| Assist the University <br> develop and enforce <br> Tenancy Agreements for <br> tenants of University's <br> residential accommodation. | A list of all tenants would <br> be obtained from the <br> Estate Organisation and <br> reviewed: <br> (Occupants of University <br> structures and Occupants <br> on University lands) | Internal Auditor / <br> Audit Staff | Sept. 1, 2020 <br> - Aug. 31, <br> 2024 | Updated list of <br> occupants on University <br> lands |
|  | Monitor whether there <br> are new tenants that, <br> i.e. those occupying <br> new buildings and those <br> constructing buildings <br> on campus have been <br> captured | Internal Auditor / <br> Audit Staff | Sept. 1, 2020 <br> - Aug. 31, <br> 2024 | Tenancy records are <br> updated |
|  | Review the payment of <br> annual rents in line with <br> the agreements | Internal Auditor / <br> Audit Staff | Sept. 1, 2020 <br> - Aug. 31, <br> 2024 | Users of University <br> facilities are paying <br> appropriate rents. |

Key Thrust Area 2: Assist Decision-Makers by Providing an
Independent Assessment of Programs, Policies, Operations and

| Actions to achieve goals | Activity | Responsible Officers | Timelines | Output/Outcomes |
| :---: | :---: | :---: | :---: | :---: |
| Assist the University to assess the financial viability of any major business development. | Auditors will scan the University and compile a list of major business development on campus | Internal Auditor / Audit Team Leader | $\begin{aligned} & \text { January 31, } \\ & 2022 \end{aligned}$ | Documented list on major business development on campus |
|  | Review and viability or otherwise of the various business development and recommend implementation strategies | Internal Auditor / Audit Team Leader | $\begin{aligned} & \text { June 30, } \\ & 2022 \end{aligned}$ | Financial viability report, including recommendations submitted for implementation |
| Assist the University to manage contracts and to ensure efficiency in the use of resources | Review and advice as appropriate on the Planning of physical infrastructural development in campus | Internal Auditor / Audit Team Leader | Sept. 1, <br> 2O20- <br> July 31, <br> 2024 | Physical Infrastructure development plan reviewed from time to time |
|  | Attend bid opening of construction contract and ensure that bids are not far above or too low of the University's estimated price | Internal Auditor / Audit Team Leader | Sept. 1, <br> 2O20- <br> July 31, <br> 2024 | Prices within the University approved estimates |


| Actions to achieve goals | Activity | Responsible Officers | Timelines | Output/Outcomes |
| :---: | :---: | :---: | :---: | :---: |
|  | Periodically visit the construction sites to assess the construction of physical infrastructure | Internal Auditor / Audit Team Leader | Sept. 1, <br> 2020- <br> July 31, <br> 2024 | Quantities of fixtures and fitting are confirmed to be in line with contract document |
|  | Review contract certificate to ensure the approval of fluctuations and variations. | Internal Auditor / Audit Team Leader | Sept. 1, <br> 2020 - <br> July 31, <br> 2024 | Contracts prudently managed |
| Assist the University to get the full benefit of MOUs signed in respect of PublicPrivate Partnerships (PPP) by the University | Review all MOUs and outline all the conditions that exist to be implemented | Internal Auditor / Audit Team Leaders | December $2021$ | Existence of Agreement for all PPP |
|  | Review and confirm whether the conditions and benefits in the agreements are adhered to | Internal Auditor / Audit Staff | Sept 2021 <br> - August <br> 2024 | Enhanced Revenue Position from such PPPs. Report on review submitted |
| To assist the University implement bulk purchase of stationery and consumables for distribution to departments and units | Review the University's policy on bulk purchases and storage at the Warehouse | Internal Auditor / Audit Staff | December $2021$ | Report on the Stores/ Warehouse running submitted |


| Actions to achieve goals | Activity | Responsible Officers | Timelines | Output/Outcomes |
| :---: | :---: | :---: | :---: | :---: |
| To assist the University implement bulk purchase of stationery and consumables for distribution to departments and units | Review the conditions at the Warehouse to stock the bulk items to be purchased | Internal Auditor / Audit Staff | December $2021$ | Proper warehouse space to keep bulk stationery |
|  | Review and submit report on the Store recording and control systems and ensure that best Store practices are in place to execute management's vision | Internal Auditor / Audit Staff | Sept. 1, 2020July 31, 2024 | Bulk purchase procurement practices implemented |
| Identify opportunities for continuous resource generation to generate 5\% increase in IGF | Review the list of Internally Generated Funds (IGF) at all College \& Units and identify potential income generating activity | Internal Auditor / Audit Staff | December $\text { 31, } 2021$ | List of IGF and potential income generating activity submitted |
|  | Review the activities and estimate the additional income from the IGF that can give the minimum increase of $5 \%$ | Internal Auditor / Audit Staff | $\begin{aligned} & \text { July 31, } \\ & 2022 \end{aligned}$ | A report on how to achieve the 5\% increase in IGF with the necessary computation submitted |
| To assist the University revamp production units at Animal Science and Horticulture | Review the activities of the Animal Science Department and the internal control system established at the Department | Internal Auditor / Audit Staff | June 30, 2022 | Audit Report submitted |


| Actions to achieve goals | Activity | Responsible <br> Officers | Timelines | Output/Outcomes |
| :--- | :--- | :--- | :--- | :--- |
| To assist the University <br> revamp production units <br> at Animal Science and <br> Horticulture | Ensure the existing internal <br> controls are effective <br> regarding the production, <br> storage and sale of poultry <br> products | Internal Auditor / <br> Audit Staff | June 30, <br> 2022 | Existence of workable <br> internal control systems |
|  | Review and advice of the <br> Production System and how <br> it can be viable | Internal Auditor / <br> Audit Staff | Sept. 1, <br> $2020-$ <br> July 31, <br> 2024 | Fully established <br> Production Units |
| To assist the University <br> improve budget funding <br> deficit at all units | Review the prepared budget <br> to ensure that no College/ <br> Faculty/Department and <br> Units started its budget with <br> deficit financing | Internal Auditor / <br> Audit Staff | Sept. 1, <br> $2020-$ <br> July 31, | Departmental Budgets <br> are balanced or has <br> surplus |
|  | Assess whether the College/ <br> Faculty/ Department and <br> Units budgets aligned with | Internal Auditor / <br> Audit Staff | Sept. 1, <br> 2020 - <br> July 31, <br> 2024 | Amounts are allocated to <br> strategic activities |
|  | Monitor the quarterly <br> mreparation of variance <br> analysis and report of <br> adverse variances | Internal Auditor / <br> Audit Staff | Sept. 1, <br> $2020-$ <br> July 31, <br> 2024 | No Department records <br> budget deficit |

## Key Thrust Area 3: Identifies trends and emerging risks and challenges and make

needed recommendations that would assist the University to achieve its strategic

| Actions to achieve goals | Activity | Responsible <br> Officers | Timelines | Output/Outcomes |
| :--- | :--- | :--- | :--- | :--- |
| To support the University <br> to create and implement an <br> Enterprise Risk Management <br> Policy | Continuously review <br> the risk policy of the <br> University and the <br> Colleges and Units | Internal Auditor <br> / Audit Team <br> Leaders | Sept. 1, 2020 <br> - July 31, <br> 2024 | Existence of Risk Policy |
|  | Liaise with the Risk <br> Management Committee <br> to look for updates to <br> direct the preparation of <br> Audit Annual Work Plan | Internal Auditor <br> / Audit Team <br> Leaders | Sept. 1, 2020 <br> - July 31, <br> 2024 | Review annual work plan |
|  | Sensitized the <br> University to embed <br> risk management/ <br> assessments in strategic <br> planning, policies, <br> procedures and activities <br> including physical and <br> academic projects | Internal Auditor <br> /Audit Team <br> Leaders | Sept. 1, 2020 <br> - July 31, <br> 2024 | Staff awareness of <br> Enterprise Risks |
|  | Workshops organised <br> for staff to enlighten <br> them about the risk <br> management framework, <br> process and principles | Internal Auditor <br> / Audit Team <br> Leaders | Sept. 1, 2020 <br> - July 31, <br> 2024 | Usage of risk <br> management frame <br> work |


| Actions to achieve goals | Activity | Responsible <br> Officers | Timelines | Output/Outcomes |
| :--- | :--- | :--- | :--- | :--- |
| To strengthen the skills of <br> staff on the monitoring and <br> evaluation of risks and on <br> Risk Based Auditing | Workshops organised <br> for staff to enlighten <br> them about the risk <br> management framework, <br> process and principles | Internal Auditor <br> / Audit Team <br> Leaders | Sept. 1, 2020 <br> - July 31, <br> 2024 | Audit staff awareness <br> of Risk Based Internal <br> Auditing (RBIA) |
|  | Workshops organised <br> for staff on Risk Based <br> Auditing methodology | Internal Auditor <br> / Audit Team <br> Leaders | Sept. 1, 2020 <br> - July 31, <br> 2024 | Audit reviews are risk- <br> based |

Key Thrust Area 4: Improve the image of the Department
internally and outside the University in line with the Visibility
Objective of the University

| Actions to achieve goals | Activity | Task owners | Timelines | Output/Outcomes |
| :--- | :--- | :--- | :--- | :--- |
| To ensure adequate and <br> qualified staff are employed <br> to the Department | Using the annual <br> allocation given to the <br> Audit Department every <br> year, we will employ <br> young, talented and <br> brilliant candidates to the <br> Department | Internal Auditor | September 1, <br> $2020-$ July | Budgeted staff numbers <br> achieved |
| .Train staff on internal <br> auditing including how <br> to use audit software <br> Train staff on soft skills <br> to be able to manage <br> the audit client who <br> poses challenge during <br> audit. Internal Auditor | September 1, <br> $2020-$ July <br> 31,2024 | Well Trained Audit staff |  |  |


| Actions to achieve goals | Activity | Task owners | Timelines | Output/Outcomes |
| :---: | :---: | :---: | :---: | :---: |
| Maintain Quality Staff in the Department | Review and align the positions created in the audit department to be in line with University establishment | Internal Auditor | September 1, 2020 - July 31, 2024 | Motivated staff |
|  | -Ensure allowances paid to appropriate positions are given to staff occupying the position <br> Recognizing achievement to serve as motivation to others | Internal Auditor | $\begin{aligned} & \text { September 1, } \\ & 2020 \text { - July } \\ & 31,2024 \end{aligned}$ | Resignation to other University is absent |
| Approach Audit Work with professionalism and minimize disagreements with staff | Create the awareness of how hostile the general staff body usually see audit staff. | Internal Auditor | $\begin{aligned} & \text { September 1, } \\ & 2020 \text { - July } \\ & 31,2024 \end{aligned}$ | Well prepared staff |
|  | Give them training on how to approach audit client for information / evidence | Internal Auditor |  | Obtaining audit evidence without hitches |
|  | Internal auditor making himself/herself available to intervene where disagreements occur | Internal Auditor |  | Completion of jobs without disagreement with staff |
| Provide Visibility of the Audit Department and the University at large | Update website | Internal Auditor | $\begin{aligned} & \text { December 31, } \\ & 2021 \end{aligned}$ | Website updated |


| Actions to achieve goals | Activity | Task owners | Timelines | Output/Outcomes |
| :--- | :--- | :--- | :--- | :--- |
| Equip and develop the Audit <br> Unit in tandem with modern <br> trends. | Refurbish the Audit <br> offices, provide furniture <br> and create conducive <br> atmosphere for work | Internal Auditor | Sept. 1, 2021 - <br> July 31, 2023 | Conducive work <br> environment created |
|  | Provide laptops and other <br> resources to audit staff <br> to enable them work on <br> the field and collect data <br> electronically | Internal Auditor | Sept. 1, 2021 - <br> July 31, 2023 | Resources for work is <br> provided |
|  | Buy an audit software, <br> preferably Team Mate and <br> train staff on how to use it <br> to work | Internal Auditor | Sept.1,2021- | Well trained staff <br> ready to undertake all <br> assignments |

## Strategic Risk Register / Auditable Areas

| \# | Risk Description | Relative Weight (Inherent Risk) | Last <br> Audited | 2021 | 2022 | 2023 | 2024 | Comments |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Financial Sustainability \& Management |  |  |  |  |  |  |  |
| 1 | Resource mobilization \& management | 6 | 2019 |  | $\checkmark$ |  | $\checkmark$ |  |
| 2 | Monitoring of Budgets | 5 | 2019 | $\checkmark$ |  | $\checkmark$ |  |  |
| 3 | Management of Pension Funds (P.F) | 5 | 2020 | $\checkmark$ | $\checkmark$ | $\checkmark$ | $\checkmark$ | Annual Audit |
| 4 | Payroll Audit | 4 | 2020 | $\checkmark$ | $\checkmark$ | $\checkmark$ | $\checkmark$ | Annual <br> Audit |
| 5 | Annual Stock Taking | 3 | 2020 | $\checkmark$ | $\checkmark$ | $\checkmark$ | $\checkmark$ | Annual Audit |
| 6 | Review of Accounts Receivables | 6 | 2019 |  | $\checkmark$ |  | $\checkmark$ |  |
| 7 | Recording of Financial transactions (systems audit | 4 | Nil |  | $\checkmark$ |  | $\checkmark$ | Testing reliability |


| \# | Risk <br> Description | Relative <br> Weight <br> (Inherent Risk) | Last <br> Audited | 2021 | 2022 | 2023 | 2024 | Comments |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 8 | Procurement (goods, services \& works) | 7 | 2020 | $\checkmark$ | $\checkmark$ | $\checkmark$ | $\checkmark$ | Annual <br> Audit |
| 9 | Investments \& Cash Management | 4 | 2018 |  | $\checkmark$ |  | $\checkmark$ |  |
| 10 | Audit of Research Grants / Donor Funds | 4 | 2019 | $\checkmark$ | $\checkmark$ | $\checkmark$ | $\checkmark$ | Annual <br> Audit |
| 11 | Audit of Joint Ventures and MoU agreement | 2 | 2017 | $\checkmark$ |  | $\checkmark$ |  | Third parties |
| 12 | Fuel Consumption | 6 | 2019 | $\checkmark$ | $\checkmark$ | $\checkmark$ | $\checkmark$ | Annual Audit |
| 13 | Review of Final Accounts | 5 | Nil |  | $\checkmark$ |  | $\checkmark$ |  |
|  | Assets <br> Management |  |  |  |  |  |  |  |
| 14 | Systems to capture assets of the University | 3 | Nil |  | $\checkmark$ |  | $\checkmark$ |  |
| 15 | Assets <br>  <br> Documentations | 7 | 2017 | $\checkmark$ | $\checkmark$ | $\checkmark$ | $\checkmark$ | Annual Audit |
| 16 | Civil Works Inspection | 7 | 2020 |  | $\checkmark$ |  | $\checkmark$ |  |


| \# | Risk Description | Relative <br> Weight <br> (Inherent <br> Risk) | Last <br> Audited | 2021 | 2022 | 2023 | 2024 | Comments |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Recruitment, <br> Promotions <br> \& Staff <br> Development |  |  |  |  |  |  |  |
| 17 | Recruitment Procedures | 3 | 2015 |  | $\checkmark$ |  | $\checkmark$ |  |
| 18 | Staff training | 3 | 2015 |  | $\checkmark$ |  | $\checkmark$ |  |
| 19 | Staff Promotion and delays | 2 | Nil |  | $\checkmark$ |  | $\checkmark$ |  |
| 20 | Management of staff long leave | 6 | 2019 | $\checkmark$ | $\checkmark$ | $\checkmark$ | $\checkmark$ |  |
|  | General Education Infrastructure |  |  |  |  |  |  |  |
| 21 | Accessibility to the library by the disabled | 2 |  |  |  |  |  | QAPU <br> Reviews |
| 22 | Inadequate lecture and conference rooms | 2 |  |  |  |  |  | -do- |
|  | ICT <br> Infrastructure \& Systems |  |  |  |  |  |  |  |
| 23 | IT infrastructure Audit | 5 | Nil |  | $\checkmark$ |  | $\checkmark$ | Lack of capacity |
| 24 | General Physical Control Reviews | 5 | Nil |  | $\checkmark$ |  | $\checkmark$ | -do- |


| \# | Risk Description | Relative <br> Weight <br> (Inherent <br> Risk) | Last <br> Audited | 2021 | 2022 | 2023 | 2024 | Comments |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 25 | Management and protection of data collected | 5 | Nil |  | $\checkmark$ |  | $\checkmark$ | -do- |
| 26 | Software development \& control (+ Licensing) | 5 | Nil |  | $\checkmark$ |  | $\checkmark$ | -do- |
|  | Admissions |  |  |  |  |  |  |  |
| 27 | Accountability of sale of forms | 5 | 2018 |  | $\checkmark$ |  | $\checkmark$ |  |
| 28 | Appropriate infrastructure and staff issues | 3 |  |  |  |  |  | QAPU <br> Reviews |
| 29 | Impersonation / middle men in admission | 6 |  |  |  |  |  | -do- |
| 30 | General NCTE Norms including STR | 3 |  |  |  |  |  | -do- |
|  | Examinations |  |  |  |  |  |  |  |
| 31 | Planning for Examinations \& logistics | 2 |  |  |  |  |  | QAPU <br> Reviews |
| 32 | Delay in submitting exams questions | 3 |  |  |  |  |  | -do- |


| \# | Risk <br> Description | Relative <br> Weight <br> (Inherent Risk) | Last <br> Audited | 2021 | 2022 | 2023 | 2024 | Comments |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 33 | Unregistered students and exams | 5 |  |  |  |  |  | -do- |
| 34 | Management of Students harassment issue | 4 |  |  |  |  |  | -do- |
| 35 | Management of examination malpractices | 6 |  |  |  |  |  | -do- |
| 36 | Auditing Examination Results | 5 |  |  |  |  |  | -do- |
| 37 | Certificate Management | 4 | 2020 |  |  | $\checkmark$ |  |  |
|  | Campus Security |  |  |  |  |  |  |  |
| 38 | Effectiveness of security installations | 5 | Nil |  | $\checkmark$ |  | $\checkmark$ | Lack of capacity |
| 39 | Surveillance system and equipment | 6 | Nil |  | $\checkmark$ |  | $\checkmark$ | -do- |
| 40 | Personnel and riot control procedures | 6 | Nil |  | $\checkmark$ |  | $\checkmark$ | -do- |
| 41 | Campus Security and Police relationship | 3 | Nil |  | $\checkmark$ |  | $\checkmark$ | -do- |
|  | Students Welfare <br> \& Management |  |  |  |  |  |  |  |


| \# | Risk Description | Relative Weight (Inherent Risk) | Last <br> Audited | 2021 | 2022 | 2023 | 2024 | Comments |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 42 | Management of Scholarships \& Bursaries | 4 | 2018 | $\checkmark$ | $\checkmark$ |  | $\checkmark$ |  |
| 43 | Review of Students Association Accounts | 5 | 2019 |  | $\checkmark$ |  | $\checkmark$ |  |
| 44 | Review of Students disciplinary procedures | 4 |  |  |  |  |  | QAPU Reviews |
| 45 | Review of Students counseling activities | 3 |  |  |  |  |  | -do- |
|  | Affiliations |  |  |  |  |  |  |  |
| 46 | Management of procedures for affiliations | 4 |  |  |  |  |  | QAPU <br> Reviews |
| 47 | Monitoring of Affiliate Institution | 4 |  |  |  |  |  | -do- |
| 48 | Payment \& Records on Affiliates Institutions | 3 | 2018 |  | $\checkmark$ |  | $\checkmark$ |  |
|  |  |  |  |  |  |  |  |  |
|  | International Relations |  |  |  |  |  |  |  |


| \# | Risk Description | Relative <br> Weight <br> (Inherent <br> Risk) | Last <br> Audited | 2021 | 2022 | 2023 | 2024 | Comments |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 49 | Management of International Relations | 2 |  |  |  |  |  | QAPU <br> Reviews |
| 50 | Management of Student Exchange Programmes | 2 |  |  |  |  |  | -do- |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  | Operations at the Following Areas |  |  |  |  |  |  | State of Facilities, Operational and compliance |
| 50 | College of Agriculture \& Natural Resources | 6 | 2020 | $\checkmark$ | $\checkmark$ | $\checkmark$ | $\checkmark$ | -do- |
| 51 | College of Art \& Built Environment | 6 | 2020 | $\checkmark$ | $\checkmark$ | $\checkmark$ | $\checkmark$ | -do- |
| 52 | College of Science | 6 | 2020 | $\checkmark$ | $\checkmark$ | $\checkmark$ | $\checkmark$ | -do- |
| 53 | College of Health Sciences | 6 | 2020 | $\checkmark$ | $\checkmark$ | $\checkmark$ | $\checkmark$ | -do- |


| \# | Risk Description | Relative <br> Weight <br> (Inherent Risk) | Last <br> Audited | 2021 | 2022 | 2023 | 2024 | Comments |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 54 | College of Engineering | 6 | 2020 | $\checkmark$ | $\checkmark$ | $\checkmark$ | $\checkmark$ | -do- |
| 55 | College of Humanities \& Social Sciences | 6 | 2020 | $\checkmark$ | $\checkmark$ | $\checkmark$ | $\checkmark$ | -do- |
| 56 | The Institute of Distance Learning | 6 | 2020 | $\checkmark$ | $\checkmark$ | $\checkmark$ | $\checkmark$ | -do- |
| 57 | University Library | 4 | Nil | $\checkmark$ | $\checkmark$ | $\checkmark$ | $\checkmark$ | -do- |
| 58 | Students' Halls of Residence | 6 | 2020 |  | $\checkmark$ | $\checkmark$ | $\checkmark$ | -do- |
| 59 | University Hospital | 6 | 2017 |  | $\checkmark$ |  | $\checkmark$ | -do- |
| 60 | School of Graduate Studies | 2 | 2018 |  | $\checkmark$ |  | $\checkmark$ | -do- |
| 61 | Central Laboratory | 3 | Nil | $\checkmark$ |  |  |  | -do- |
| 62 | Guest Houses / Staff Club | 6 | 2018 |  | $\checkmark$ |  |  | -do- |
| 63 | Basic Schools | 5 | 2018 | $\checkmark$ |  | $\checkmark$ |  | -do- |
| 64 | Printing Press / Photocopy | 3 | 2020 |  |  |  |  | -do- |
| 65 | Maintenance Section | 4 | 2019 |  | $\checkmark$ |  | $\checkmark$ | -do- |
| 66 | Transport Organization | 4 | 2020 |  | $\checkmark$ |  | $\checkmark$ | -do- |
|  |  |  |  |  |  |  |  |  |

LEGEND FOR RISK SCORES
Low Risk ..... 1-3
Medium Risk. ..... 4-6
High Risk. ..... 7-9
APPROVAL
PREPARED BY
HEAD OF AUDIT
Daniel Bart-Plange
Internal Auditor
July 14, 2021
APPROVED BY
AUDIT COMMITTEE HEAD OF THE COVERED ENTITY
Kwaku Danso Abeam Prof. Mrs. Rita Akosua Dickson
Audit Committee Chairman Vice Chancellor


[^0]:    2 | INTERNAL AUDIT DEPARTMENT'S STRATEGIC PLAN 2020-2024

