Audit	Finding	Finding and	
Report	Number		Corrective Action Status
1032843	2022-002	Finding:	The University of Washington did not have adequate internal controls to ensure key personnel commitments specified in grant proposals or awards were met.
		Corrective Action:	The University has established internal controls to ensure compliance with key personnel program requirement through time and effort certifications, project reporting processes, and budget reconciliation requirements. Additionally, the University offers multiple training courses to research administrators and principal investigators (PI) on management of sponsored awards.
			The University agrees there are areas for improvement over staff and PI training, and resources available to monitor contribution and documentation of committed levels of time and effort.
			The University will implement the following improvements:
			• Update training materials and provide additional training to PIs and key personnel on:
			 Documentation of time and effort.
			• Prior approval requirements for reductions in time and effort.
			• Update guidance and instructions for time and effort certifications to ensure all personnel involvement in various grant programs is properly accounted for during the certification process.
			• Develop exception reports to provide additional oversight to monitor deviations from committed time and effort for PIs and key personnel.
		Completion	
		Date:	Corrective action is expected to be complete by February 2024
		Agency Contact:	Erick Winger Controller 4300 Roosevelt Way NE Seattle, WA 98105-4718 (206) 543-5322 erickw@uw.edu

Audit	Finding		Finding and
Report	Number		Corrective Action Status
1032843	2022-028	Finding:	The University of Washington did not establish adequate internal controls to ensure payments to contractors and subrecipients for the Global AIDS program were allowable, properly supported and within the period of performance.
		Corrective Action:	The University partially concurs with the finding.
			The University disagrees with the auditors' assertion that internal controls were inadequate to ensure payments to contractors and subrecipients of the Global AIDS program were allowable, properly supported, and within the period of performance.
			Payments to country offices
			The University administers the program through its International Training and Education Center for Health (I-TECH), a center in the University's Department of Global Health, with staff in various locations worldwide. I- TECH country offices are not contractors but are an extension of the University. The audit identified one of 58 payments in the test sample (1.7 percent) that did not meet the approval requirements set forth in I-TECH's standard operating procedures. Based on the error percentage, the University disagrees with this part of the finding.
			Payments to contractors
			The University's current payment process to contractors has multiple approval requirements. Upon receipt, program/budget manager reviews and approves individual invoices prior to input into the University's procurement system by the I-TECH accounts payable administrator. The system requires compliance approval from the account payable supervisor or other manager, as well as funding approval from the budget manager prior to payment. Approvals of Budget Activity Reports (BARS) are not part of the approval process for contractor payments, but are post-payment reviews by budget managers of monthly expenses posted to the budget to ensure they are within expectations.
			The University disagrees with the exceptions identified in the finding related to payments to contractors. The exceptions noted were payments made to country offices instead of contractors, the supporting approvals of which were provided to the auditors on April 26, 2023, prior to the completion of fieldwork.
			Subrecipient reimbursements
			Contract managers review each subrecipient invoice for reasonableness, allowability and allocability, and require approval by both budget managers and principal investigators (PI) prior to payment in the University's procurement system. The auditors reviewed and verified PI approvals for each selected subrecipient with no exception identified. It should be noted that approvals of BARS are also not part of the approval process for payments to subrecipients.

Audit Report	Finding Number		Finding and Corrective Action Status
1032843	2022-028		The University acknowledges that documentation related to BARS reviews
1052015	(cont'd)		by budget managers was not available for 52 of the transactions tested and agrees that improvement is needed for retaining documentation of monthly reviews. In response to the finding, the University has started saving BARS review documentation on the server to ensure the documents are readily available.
		Completion Date:	April 2023, subject to audit follow-up
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Audit	Finding		Finding and
Report	Number		Corrective Action Status
1032843	2022-029	Finding:	The University of Washington did not have adequate internal controls over and did not comply with requirements to ensure it filed reports required by the Federal Funding Accountability and Transparency Act.
		Corrective Action:	The University acknowledges that one report related to the Global AIDS program subaward modification was not submitted during the audit period in accordance with Federal Funding Accountability and Transparency Act (FFATA) requirements.
			The University:
			• Submitted the required report as of May 2023.
			• Reviewed all subaward actions (new subawards and modifications) for the program active during fiscal year 2022 and verified that no additional reports were missed.
			The University maintains that solid and effective controls are already in place related to FFATA reporting, but acknowledges that the current process can be enhanced through better use of the data in the Sponsored Projects Administration and Electronic Research Compliance (SPAERC) system. The University will:
			• Strengthen management monitoring process to ensure compliance with FFATA reporting requirements.
			• Design a report to assist in the identification and review of FFATA-reportable actions. Implementation of this process is expected to occur in fiscal year 2024.
		Completion	
		Date:	Corrective action is expected to be complete by March 2024
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Audit Report	Finding Number		Finding and Corrective Action Status
Report 1032843	2022-030	Finding:	The University of Washington did not have adequate internal controls over and did not comply with federal requirements to ensure subrecipients of the Global AIDS program received required single or program-specific audits, and that it followed up on findings and issued management decisions.
		Corrective Action:	The University maintains that there are adequate internal controls to ensure the Global AIDS program complies with the requirements for pass-through entities as outlined in Uniform Guidance 2 CFR § 200.332 and the university policy incorporated in Grants Information Memorandum 8.
			As noted in the finding, the University uses a certification process to obtain information and documentation needed, such as audited financial statements, from each subrecipient and perform a risk assessment using standard risk criteria. For the one exception identified by the auditors, the University misinterpreted the response provided by the subrecipient regarding whether it expended \$750,000 or more in federal awards during the fiscal year. Although the single or program specific audit report was not obtained and reviewed, a risk assessment was performed on the subrecipient. With a medium risk rating, the subrecipient was subject to monitoring at the program level throughout the project during the period in question, in accordance with University policy.
			The University will:
			• Update the certification process with all subrecipients to confirm if federal expenditures during a fiscal year exceed the \$750,000 threshold to require a single or program-specific audit.
			Issue written management decisions for all applicable audit findings.Ensure subrecipients develop and perform acceptable corrective
			actions to address all audit recommendations, if applicable.
		Completion	
		Date:	September 2023, subject to audit follow-up
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