

**SAN BERNARDINO COUNTY
AUDITOR-CONTROLLER/TREASURER/TAX COLLECTOR
INTERNAL AUDITS DIVISION**



**CLERK OF THE BOARD:
INFORMATION SECURITY AUDIT**

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Mission Statement

This office is committed to serving our customers by processing, safeguarding, and providing information regarding the finances and public records of the County. We perform these functions with integrity, independent judgment, and outstanding service. We are accurate, timely, courteous, innovative, and efficient because of our well-trained and accountable staff.

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Clerk of the Board: Information Security Audit

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June 2, 2022

Lynna Monell, Clerk of the Board
Clerk of the Board
385 North Arrowhead Ave, 2nd Floor
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RE: Clerk of the Board Information Security Audit

We have completed an audit of the Clerk of the Board’s information security for the period of July 1, 2020, through June 30, 2021. The primary objective of the audit was to determine whether the Department is following its Policy and Standard Practice regarding Confidentiality of Personally Identifiable Information (PII) and Information Breach (Department policy). We conducted our audit in accordance with the International Standards for the Professional Practice of Internal Auditing established by the Institute of Internal Auditors.

We identified procedures and practices that could be improved. We have listed these areas for improvement in the Audit Findings and Recommendations section of this report.

We sent a draft report to the Department on March 4, 2022, and discussed our observations with management on March 18, 2022. The Department’s responses to our recommendations are included in this report.

We would like to express our appreciation to the personnel at the Clerk of the Board who assisted and cooperated with us during this engagement.

Respectfully submitted,

Ensen Mason CPA, CFA
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By:

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Summary of Audit Results

The table below summarizes the audit findings and recommendations for this audit engagement. For further discussion, refer to the *Audit Findings and Recommendations* section of this report.

Finding No.	Findings and Recommendations	Page No.
1	There were staff members that did not receive an annual PII update training.	6
	We recommend management follow up with staff members absent from the annual PII update training to ensure Department policies and procedures are reviewed. Upon completing their annual training requirement, the staff should sign an acknowledgment of receipt of training.	
2	The shred container for disposal of sensitive PII documents was not properly locked.	7
	We recommend management contact the third-party provider of the shred containers and request a replacement container with a lock. We also recommend management update the Department's policy to include procedures for staff to alert management if an unlocked shred container is observed.	

Background

The Clerk of the Board (COB) provides legislative and administrative support services to the Board of Supervisors (BOS). The COB coordinates, prepares, and maintains minutes, ordinances, resolutions, contracts, agreements, and other official records and documents related to meetings conducted by the BOS. The COB coordinates the annual filing of financial disclosure documents in accordance with state law and local conflict of interest codes. The County has more than 150 advisory boards, commissions, and committees for which the COB maintains records and membership information, posts vacancies, processes appointments, and monitors ethics training.

The COB provides staff support to the County's Assessment Appeals Boards and facilitates the filing, hearing, and disposition of thousands of appeals annually. The County requires that businesses operating in unincorporated areas obtain and maintain a valid business license. The COB receives, reviews, and processes business license applications, and issues licenses for approved businesses.

Due to the nature of the work performed by the COB, PII is regularly handled by the Department. PII is defined by the COB's Department policy as any piece of information maintained by the County electronically or in paper format which can potentially be used to uniquely identify, contact, or locate County employees or members of the public. Examples are information, such as but not limited to, social security numbers, driver's license numbers, and addresses.

Scope and Objective

The objective of this audit was to determine if PII received, collected, stored, and transmitted by the COB is handled in compliance with the Department's policy, as of October 18, 2021.

The COB's office at 385 North Arrowhead Ave, San Bernardino, CA was visited during our fieldwork.

Methodology

In achieving the audit objective, the following audit procedures were performed, including but not limited to:

- Interviews of Department personnel
- Review of policies and procedures
- Walk-through of activity

Finding 1: There were staff members that did not receive an annual PII update training.

The Department policy states management staff is responsible for training new staff and annually training all staff on the internal policy and associated procedures to ensure the protection of PII. The Department holds an annual PII update training during the staff meeting in February of each year. Staff in attendance are recorded on the sign-in sheet. Staff hired after February will receive the PII training and sign an acknowledgment form upon completion.

There were three staff members absent during the annual PII update training at the staff meeting held in February 2021 and there was no other documentation to support that the three staff received their annual training to ensure the protection of PII.

Without proper training on the current Department policies and procedures, the potential risk of loss or fraudulent use of PII increases.

Recommendation:

We recommend management follow up with staff members absent from the annual PII update training to ensure Department policies and procedures are reviewed. Upon completing their annual training requirement, the staff should sign an acknowledgment of receipt of training.

Management's Response:

The Clerk of the Board will conduct training annually at a staff meeting and have all staff sign an acknowledgment of receipt of training. If any staff are absent from the training, the supervisor will conduct the training upon their return and have the staff member sign an acknowledgment.

Auditor's Response:

The Department's planned actions will correct the deficiencies identified in the finding.

Finding 2: The shred container for disposal of sensitive PII documents was not properly locked.

The Department policy requires PII documents ready for disposal to be shredded on-site or be placed in a locked shred container. Under no circumstances may PII be placed in the regular unsecured shred containers.

A shred container for sensitive PII document disposal was missing the locking components in the lid.

The Department maintains two shred containers from a third-party information security company located within the office. Typically, the containers will contain a lock on the lid to prevent unwanted access. When the containers used for PII document disposal are not properly locked, there is an increased risk of loss or fraudulent use of PII.

Recommendation:

We recommend management contact the third-party provider of the shred containers and obtain a replacement container with a lock. We also recommend management update the Department's policy to include procedures for staff to alert management if an unlocked shred container is observed.

Management's Response:

Every other Friday after the shred vendor empties the bins, the Department Executive Secretary is verifying that bins are placed in the proper area and that the confidential bin is locked. The unlocked non-confidential bin is placed near the department exit door and the confidential bin is placed near the elevator. The unlocked bin is not marked as a confidential receptacle, and the locked bin is marked as a confidential receptacle. The staff has been instructed to place only confidential documents in the locked confidential bin and to only place non-confidential documents in the unlocked non-confidential bin.

Auditor's Response:

The Department's actions and planned actions will correct the deficiencies identified in the finding.