



PUBLIC INFORMATION

# INTERNAL AUDIT DEPARTMENT



## Information Technology Audit: Health Care Agency Selected Cybersecurity Controls

For the Year Ended November 30, 2024

Audit No. 2419  
Report Date: March 25, 2025

### Number of Recommendations

0

Critical Control Weaknesses

0

Significant Control Weaknesses

2

Control Findings

## OC Board of Supervisors

CHAIR DOUG CHAFFEE  
4th DISTRICT

VICE CHAIR KATRINA FOLEY  
5th DISTRICT

SUPERVISOR JANET NGUYEN  
1st DISTRICT

SUPERVISOR VICENTE SARMIENTO  
2nd DISTRICT

SUPERVISOR DONALD P. WAGNER  
3rd DISTRICT



# INTERNAL AUDIT DEPARTMENT

Information Technology Audit:  
Health Care Agency Selected Cybersecurity  
Controls March 25, 2025

## AUDIT HIGHLIGHTS

SCOPE OF WORK	Perform an information technology audit of Health Care Agency (HCA) Selected Cybersecurity Controls administered or monitored by HCA for the year ended November 30, 2024.						
RESULTS	Content has been removed from this report due to the sensitive nature of the specific findings.						
RISKS	Content has been removed from this report due to the sensitive nature of the specific findings.						
<p>NUMBER OF RECOMMENDATIONS</p> <table border="1"> <tr> <td data-bbox="107 1255 220 1360">0</td> <td data-bbox="220 1255 402 1360">CRITICAL CONTROL WEAKNESSES</td> </tr> <tr> <td data-bbox="107 1360 220 1465">0</td> <td data-bbox="220 1360 402 1465">SIGNIFICANT CONTROL WEAKNESSES</td> </tr> <tr> <td data-bbox="107 1465 220 1575">2</td> <td data-bbox="220 1465 402 1575">CONTROL FINDINGS</td> </tr> </table>	0	CRITICAL CONTROL WEAKNESSES	0	SIGNIFICANT CONTROL WEAKNESSES	2	CONTROL FINDINGS	Content has been removed from this report due to the sensitive nature of the specific findings.
0	CRITICAL CONTROL WEAKNESSES						
0	SIGNIFICANT CONTROL WEAKNESSES						
2	CONTROL FINDINGS						

Report suspected fraud, or misuse of County resources by vendors, contractors, or County employees to (714) 834-3608



## INTERNAL AUDIT DEPARTMENT

---

Audit No. 2419

March 25, 2025

To: Veronica Kelley, DSW, MSW, LCSW  
Health Care Agency Director

From: Aggie Alonso, CPA, CIA, CRMA  
Internal Audit Department Director

A handwritten signature in blue ink, appearing to read "Aggie Alonso".

Digitally signed by Agripino  
Alonso  
Date: 2025.03.25 09:18:19  
-07'00'

Subject: Information Technology Audit: Health Care Agency Selected Cybersecurity Controls

---

We have completed an information technology audit of Health Care Agency' (HCA) Selected Cybersecurity Controls administered or monitored by HCA for the year ended November 30, 2024. Due to the sensitive nature of specific findings (restricted information), results are redacted from public release. Additional information including background and our objectives, scope, and methodology are included in Appendix A.

HCA concurred with our recommendations and the Internal Audit Department considers management's responses appropriate to the recommendations in this report.

We will include the results of this audit in a future status report submitted quarterly to the Audit Oversight Committee and the Board of Supervisors. In addition, we will request your department complete a Customer Survey of Audit Services, which you will receive shortly after the distribution of our final report.

We appreciate the courtesy extended to us by HCA during our audit. If you have any questions, please contact me at (714) 834-5442 or Deputy Director Jose Olivo at (714) 834-5509.

### Attachments

#### Other recipients of this report:

- Members, Board of Supervisors
- Members, Audit Oversight Committee
- Michelle Aguirre, Interim County Executive Officer
- OCIT Distribution
- Foreperson, Grand Jury
- Robin Stieler, Clerk of the Board
- Eide Bailly LLP, County External Auditor

# INTERNAL AUDIT DEPARTMENT

## RESULTS

Content has been removed from Results due to the sensitive nature of the specific findings.

<b>AUDIT TEAM</b>	Jimmy Nguyen, CISA, CFE, CEH Michael Steinhaus, CISA, CIA, CPA Gabriela Cabrera, CIA	Senior IT Audit Manager IT Audit Manager Administrative Services Manager
-------------------	--	--



## INTERNAL AUDIT DEPARTMENT

## APPENDIX A: ADDITIONAL INFORMATION

<b>OBJECTIVE</b>	Evaluate HCA's design and operating effectiveness of internal control to determine whether inventory and control of enterprise assets and software asset controls provide reasonable assurance that assets are properly tracked, managed, and comply with best practices.
<b>SCOPE &amp; METHODOLOGY</b>	Our engagement scope was limited to selected cybersecurity controls over inventory and control of enterprise assets and software assets for the year ended November 30, 2024. Our methodology included inquiry, observation, examination of documentation, and sampling of relevant items.
<b>EXCLUSIONS</b>	We did not evaluate application controls or processes that involve external parties such as OCIT, the State of California, or third-party vendors.
<b>PRIOR AUDIT COVERAGE</b>	We have not issued any audit reports for HCA with a similar scope within the last ten years.
<b>BACKGROUND</b>	<p>HCA IT is part of the Director's Office and is responsible for supporting and managing the department's network infrastructure, software development, service delivery, and cybersecurity.</p> <p>This also includes inventory of its enterprise and software assets. Effective controls over inventory of enterprise assets enables the organization to track, manage, and secure IT infrastructure and resources effectively.</p>



# INTERNAL AUDIT DEPARTMENT

<b>PURPOSE &amp; AUTHORITY</b>	We performed this audit in accordance with the Fiscal Year 2023-24 Audit Plan and Risk Assessment approved by the Audit Oversight Committee (AOC) and the Board of Supervisors (Board).
<b>PROFESSIONAL STANDARDS</b>	Our audit was conducted in conformance with the Global Internal Audit Standards issued by the International Internal Audit Standards Board.
<b>FOLLOW-UP PROCESS</b>	<p>In accordance with professional standards, the Internal Audit Department has a process to follow-up on its recommendations. A first follow-up audit will generally begin six months after release of the initial report.</p> <p>The AOC and Board expect that audit recommendations will typically be implemented within six months or sooner for significant and higher risk issues. A second follow-up audit will generally begin six months after release of the first follow-up audit report, by which time all audit recommendations are expected to be implemented. Any audit recommendations not implemented after the second follow-up audit will be brought to the attention of the AOC at its next scheduled meeting.</p> <p>A Follow-Up Audit Report Form is attached and is required to be returned to the Internal Audit Department approximately six months from the date of this report to facilitate the follow-up audit process.</p>
<b>MANAGEMENT'S RESPONSIBILITY FOR INTERNAL CONTROL</b>	In accordance with the Auditor-Controller's County Accounting Manual No. S-2 Internal Control Systems: "All County departments/agencies shall maintain effective internal control systems as an integral part of their management practices. This is because management has primary responsibility for establishing and maintaining the internal control system. All levels of management must be involved in assessing and strengthening internal controls." Internal control should be continuously evaluated by management and weaknesses, when detected, must be promptly corrected. The criterion for evaluating internal control is the Committee of Sponsoring Organizations of the Treadway Commission (COSO) Internal Control – Integrated Framework (ICIF). Our audit complements but does not substitute for department management's continuing emphasis on control activities and monitoring of control risks.
<b>INTERNAL CONTROL LIMITATIONS</b>	Because of inherent limitations in any system of internal control, errors or irregularities may nevertheless occur and not be detected. Specific examples of limitations include, but are not limited to, resource constraints, unintentional errors, management override, circumvention by collusion, and poor judgment. Also, projection of any evaluation of the system to future periods is subject to the risk that procedures may become inadequate because of changes in conditions or the degree of compliance with the procedures may deteriorate. Accordingly, our audit would not necessarily disclose all weaknesses in the department's operating procedures, accounting practices, and compliance with County policy.



INTERNAL AUDIT DEPARTMENT

APPENDIX B: REPORT ITEM CLASSIFICATION

Critical Control Weakness	Significant Control Weakness	Control Finding
<p>These are audit findings or a combination of audit findings that represent critical exceptions to the audit objective(s) and/or business goals. Such conditions may involve either actual or potential large dollar errors or be of such a nature as to compromise the department's or County's reputation for integrity. Management is expected to address <b>Critical Control Weaknesses</b> brought to its attention immediately.</p>	<p>These are audit findings or a combination of audit findings that represent a significant deficiency in the design or operation of internal controls. <b>Significant Control Weaknesses</b> require prompt corrective actions.</p>	<p>These are audit findings concerning the effectiveness of internal control, compliance issues, or efficiency issues that require management's corrective action to implement or enhance processes and internal control. <b>Control Findings</b> are expected to be addressed within our follow-up process of six months, but no later than twelve months.</p>



# INTERNAL AUDIT DEPARTMENT

## APPENDIX C: HCA MANAGEMENT RESPONSE

Content in Appendix C has been removed from this report due to the sensitive nature of the specific findings.

