

# Brevard County, Florida Fiscal Year 2025-26 Revised Proposed Internal Audit Plan

December 10, 2025





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# TRANSMITTAL LETTER

December 10, 2025

The Audit Committee of Brevard County, Florida 2700 Judge Fran Jamieson Way Viera, Florida 32940-6699

We hereby submit the Revised Proposed Internal Audit Plan for the Brevard County, Florida ("County") for fiscal year ("FY") 2025/2026. Per direction from the County and consensus from the Audit Committee we updated the August 13, 2025 internal audit plan to add our ongoing annual review of Save Our Indian River Lagoon ("SORIL") Half Cent Sales Tax internal audit. We applied a broad-based, comprehensive view of risk, linked to the annual budget and operations, and reviewed documents and conducted interviews with County Commissioners, as well as the County Manager, the County Clerk and other stakeholders to gain a high-level understanding of their pressure points and concerns to narrow in on the relevant objectives and identified inherent risks. Our 'risk' focus is centered on Financial, Operational, and Compliance risk, as well as the general effect of Public Perception with regard to County-wide activities and initiatives.

Through our conversations with the County Commissioners, County Manager and County Clerk, it is our understanding that the County Clerk will be assuming responsibility for the internal audit function as of April 1, 2026. We are providing a FY 2025/2026 Revised Proposed Internal Audit Plan focused on Information Technology and SORIL which will be completed by RSM. To help support a smooth transition of the internal audit function to the County Clerk, we met with the County Clerk and shared the high-risk audit areas we had identified during our risk assessment process.

Follow Up is not included in this Revised Proposed Internal Audit Plan due to the transition to the County Clerk, who is assuming responsibility for the internal audit function.

The Plan is continuously evolving and is presented in draft form because it is a living document. As factors change and situations arise, this Plan can and will change. We have included the potential significant risks and internal audit strategy for each of the functions in the revised proposed FY 2025/2026 internal audit plan in this report.

We would like to thank the County Commissioners, County Manager, County Clerk, Management, various departments and staff involved in assisting with the risk assessment process.

Respectfully Submitted,

RSM US LLP

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# **PROCESS OVERVIEW**

### **Objectives**

This process is intended to assist in analyzing risk impacting the County's current operating environment, including inherent and residual impacts and likelihood, and to identify the key risks impacting the current operating environment, functions, and activities. Objectives included the following:

- Identify and prioritize key risks impacting the County's current operating environment, functions, and activities.
- Refresh the County's risk profile and enhance management's awareness of risks, as applicable.
- Facilitate discussions with management regarding risk ownership and mitigation activities.
- Develop a proposed internal audit plan for the County.

### **Approach**

## 1. Identify and Measure Risk

- Conducted interviews with key stakeholders to identify current risks.
- Reviewed the County's strategic plan, financial statements, current events, prior risk universe, and other information as deemed applicable.

### 2. Prioritize risk

- Evaluated the level of risk within each process area based on the frequency with which
  it was mentioned during the interviews and the severity of potential impact on County
  operations and fulfillment of objectives.
- Evaluated risk across various classifications, such as: Reputation, Technology, Compliance, Finance, External Factors, Operations, Human Resources, and Strategic.

Note: RSM evaluated and prioritized risks based on information obtained from interviews, severity of impacted business operations, and interference with fulfillment of County objectives. Our review did not include detailed testing of source documents.

### 3. Communicate Results

- Prepared an overall risk profile by classification.
- Reviewed risk profile and deliverable with each County Commissioner and the County Manager.

#### Risk Classifications

Risk classifications serve as the framework for assessing and prioritizing the risk model. RSM classified each of the risks into one or more of the following categories:



# Compliance

Compliance with applicable laws and regulations.



#### **External Factors**

Known and emerging market trends, industry regulations, external stakeholder expectations, political, environmental, social, and technological unexpected events.



#### **Finance**

Oversight and internal controls over budgeting and forecasting, procurement, financial reporting, endowment, and utilization of resources.



### **Human Resources**

Policies, procedures, and practices for attracting, training, and maintaining a qualified, skilled, and diverse workforce.



### **Operations**

Effectiveness and efficiency of processes and communications across departments to achieve strategic, financial, and operational objectives.



#### Reputation

Ability to anticipate and mitigate risks that could adversely affect external perceptions of the organization.



#### Strategic

Executive level oversight, planning and reporting processes established to achieve strategic objectives including monitoring performance and organizational alignment to meet objectives.



# **Technology**

A sufficient IT infrastructure and environment to meet the needs of the County. Oversight and internal control over data integrity, business continuity, disaster recovery, data privacy, general and application controls, and cybersecurity.

# PROCESS OVERVIEW (CONTINUED)

As previously noted, the objective of this risk assessment is to provide the County with a proposed internal audit plan that has coverage of those areas evaluated as having a relatively high-risk profile or that otherwise require internal audit attention for various reasons.

Our approach is based on the widely accepted Committee of Sponsoring Organizations ("COSO") guidance on monitoring Internal Control Systems as shown to the right.

Preparing the proposed internal audit plan from the risk assessment will facilitate that resources are focused on areas, which are currently of most immediate concern to the County. Our risk assessment considers 'inherent risk', which is the risk of a function in an environment void of controls. Therefore, functions that are inherently high-risk may be included in the proposed internal audit plan; although their inclusion does not mean 'issues' or concerns currently exist, but rather that the high-risk nature of the function is such that a higher potential exists for issues to develop. This proposed internal audit plan is *on-line real-time* and will be consistently presented in *draft* form because it is a *living document*. As factors change and situations arise, this proposed internal audit plan can and will change.

The chart below illustrates the exposure environment for positioning the County's risks and evaluating the desired response based upon the likelihood of occurrence and priority of risk concerns. The proposed internal audit plan generally focuses on areas or functions that are high

Implement Monitoring
Develop and implement cost-effective procedures to gather and evaluate that persuasive information

Information
Information that will persuasively indicate whether the internal Control system is operating effectively

Identify Controls
Identify key controls across the internal control system that address those prioritized risks

exposure and high priority (the upper right quadrant). We also consider other areas that are not included in this quadrant to insert a level of unpredictability into the proposed internal audit plan and risk assessment process in order facilitate County-wide awareness that all business units, functions, and processes may be subject to an internal audit at any time.

A proposed internal audit plan generally focuses on areas or functions that are high exposure and high priority, at a point in time.



Likelihood of Occurrence

#### Inherent Risk

- Risk of an occurrence before the effect of any existing controls.
- If you were building this process, what would you be concerned about?
- ❖ What can we not prevent?

### **Residual Risk**

- Risk remaining after the application of controls.
- Potentially reduced impact or likelihood.



# PROCESS OVERVIEW (CONTINUED)

Our risk assessment was conducted utilizing a broad-based business view of risk. We conducted interviews with each of the County Commissioners to gain an understanding of their perspective of risk, focusing on their objectives to identify potential risks. We also conducted interviews with the County Manager, various department heads and other personnel within the County to identify risks, vulnerabilities, and potential opportunities. In addition, we reviewed media coverage and County meeting agendas, minutes, and other available documentation. Our research and discussion with various levels of leadership within the County provides broad insight and understanding of potential risk from the perspectives of key process owners.

We evaluated the level of risk present in each area / function, across a standard spectrum of industry-accepted risk categories as follows:

Control Environment	Describes the overall tone and control consciousness of the process / function. It involves the integrity, ethical values, and competence of personnel as well as management philosophy and operating style.
Change	Addresses the extent to which change has affected or is expected (in the near term) to affect the process / function, including changes in key personnel, statutes, the organization, its products, services, systems, or processes.
Process Risk	Addresses the inherent risk of the activities performed by the process / function, including assets managed or in the custody of the process / function. Process risk addresses the extent of support the process / function provides to vital County functions, including the threat to continuity of the County caused by failures or errors: the probability of failure due to the amount of judgment, or technical skill required to manage the unit or perform key activities.
External Factors	Describes the environment in which the process / function operates and the type and amount of external interaction in which the process / function engages. Factors to consider include overall County and regulatory environment, the level of interaction with stakeholders and success in satisfying their requirements, the financial reporting environment, and results of regulatory compliance audits.
Revenue Source / Materiality	Describes resources available and expended by the process / function. Factors to consider include the originating source of funds for a process / function, function budget, function spend, availability and use of other resources, and significance of impact to the overall operation of the County.

A strong, high-functioning internal audit process has a balance of all types of internal audits and reviews.



# PROCESS OVERVIEW (CONTINUED)

The County's internal auditors have developed an audit methodology aligned with the Institute of Internal Auditors' International Standards for the Professional Practice of Internal Auditing and AICPA consulting standards. This methodology includes systematic audits selected through a risk assessment, ad hoc audits as new facts emerge, or requests from stakeholders such as the Internal Audit Committee or County Manager. Additionally, fully functioning audit operations should incorporate these processes to verify thorough and effective oversight.

# **Update Risk Assessment and Audit Plan Development**

Risk is not stagnant; it is constantly evolving. As factors change and situations arise, this plan can and will change. The high-risk areas of focus and proposed internal audit plan should be updated annually.

# **Follow-up Procedures**

Auditors should establish a follow-up process to confirm that management actions have been effectively implemented or that Management has accepted the risk of not acting. Included within each report provided, for each audit completed, a Management Response section will be added for Management to respond and include an action plan for remediation (if needed), as well as a targeted date of completion. Follow-up procedures will be performed after the completion date noted by Management. Follow-up typically occurs after ample time has passed with the new control/procedure in place (generally six months) to verify and report the implementation status of the recommendations and Management's action related to the previously reported findings.

The County Clerk is assuming responsibility for Follow-up.

# **Quality Control**

Internal Auditors should maintain a quality assurance and improvement program that covers all aspects of the audit activity, including appropriate supervision, periodic internal assessments, and ongoing monitoring of quality assurance. RSM's quality control processes specific to public sector clients include, when applicable, concurring partner review (independent of the engagement) and, when necessary, consultation with the County General Counsel prior to reports being issued into the public record.





# REVISED PROPOSED INTERNAL AUDIT PLAN - FY 2025-26

Through our conversations with the County Commissioners, County Manager and County Clerk, it is our understanding that the County Clerk will be assuming responsibility for the internal audit function as of April 1, 2026. We are providing a FY 2025/2026 Revised Proposed Internal Audit Plan focused on Information Technology and SORIL which will be completed by RSM. To help support a smooth transition of the internal audit function to the County Clerk, we met with the County Clerk and shared the high risk audit areas we had identified during our risk assessment process. Follow Up is not included in this Revised Proposed Internal Audit Plan due to the transition to the County Clerk, who is assuming responsibility for the internal audit function.

Through the risk assessment, we have identified and propose the following functions to be reviewed during FY 2025/2026. The below revised proposed subject areas are in no particular order.

# 1. Information Technology - IT Governance

#### Overview:

Information Technology (IT) risk is closely linked to business performance and continuity. A clear understanding of IT risks—through structured analysis—is essential for developing effective strategies to mitigate those risks. In an environment of rapid technological advancement and shifting market demands, accurately assessing IT risk becomes increasingly complex. Strong IT governance is critical to ensuring that IT investments and activities align with organizational strategy, deliver business value, and function within an acceptable risk and compliance framework. With this foundation, management can better prioritize infrastructure decisions, operational procedures, and control mechanisms to address the most critical risks. It is important to note that Brevard County's Information Technology Department is anticipating key leadership turnover within the next year. This transition may pose challenges to the continuity and effectiveness of current IT governance and risk management strategies.

### **Inherent Risks:**

Inadequate IT governance poses several inherent risks to the organization, stemming from the absence of proper oversight, alignment, and resource management across IT functions. Key risks include: Lack of Oversight, Strategic Misalignment, Inefficient Resource Allocation, Inadequate Risk Management, Missed Value Realization, Resource Constraints or Overinvestment and Innovation Blind Spots.

# **Internal Audit Strategy:**

The objective will be to evaluate the design and operational effectiveness of Brevard County's IT governance framework. The assessment will focus on:

- Measuring governance maturity based on industry standards
- Identifying control weaknesses and areas of non-compliance
- Evaluating the risks associated with identified gaps
- Providing practical and prioritized recommendations for improvement

Special consideration will be given to the anticipated leadership turnover within the IT Department. Our approach will emphasize the need to reinforce governance continuity by identifying critical risk areas and assessing existing controls. The goal is to offer actionable insights that will help strengthen IT governance, enhance information security, reduce vulnerabilities, and operational resilience during organizational transitions.



# REVISED PROPOSED INTERNAL AUDIT PLAN - FY 2025-26 (CONTINUED)

# 2. Information Technology - Payment Card Industry (PCI) Compliance - Ongoing

### Overview:

The Payment Card Industry Data Security Standard (PCI DSS) refers to payment security standards that verify all sellers safely can securely accept, store, process, and transmit cardholder data and credit card information during a credit card transaction. Any merchant with a merchant ID that accepts payment cards must follow these PCI compliance regulations to protect against data breaches under 4.0.1 of the PCI Data Security Standard (DSS). The requirements range from establishing data security policies to removing card data from the County's processing system and payment terminals.

Cardholder or payment data covers information such as the full primary account number, the cardholder's name, and the credit card service code and expiration date. Merchants are also responsible for protecting sensitive authentication data in the magnetic-stripe data.

### **Inherent Risks:**

Lack of compliance with Payment Card Industry standards increases the risk of data breaches, fines, card replacement costs, costly forensic audits and investigations, damage to public perception and more if a breach occurs. The purpose of this assessment will be to identify areas of non-compliance with the new standard and/or vulnerability and make recommendations to mitigate any issues noted as well as track efforts and progress on those previously noted remediation areas. We have performed procedures to assist the County with their PCI readiness since FY21 and will continue to do so in FY26.

# **Internal Audit Strategy:**

This audit will focus on testing the accuracy and completeness of policy documentation, including incident response plans and their expansion to cover PCI-related events. Testing will also include evaluating the effectiveness of IT controls, particularly around PCI compliance, network segmentation, and third-party service provider management. Additional procedures will involve assessing the adequacy of procurement processes, verifying the proper definition of roles and responsibilities, and validating that backup practices, including offsite backups, are in place to mitigate risks. Assessments will verify ongoing alignment with industry standards and regulatory requirements.



# REVISED PROPOSED INTERNAL AUDIT PLAN - FY 2025-26 (CONTINUED)

# 3. Information Technology - Network Scans / Penetration and Security Testing - Ongoing

### Overview:

We have performed ongoing network scanning and deeper targeted penetration testing regularly since 2017. Network security is constantly evolving as threat actors continue to change their attack approaches. Best practice is to perform ongoing network scanning and targeted penetration testing on a regular basis to monitor the County's defense against attacks. As the County undergoes further transformation in Information Technology this coming year, we will continue to provide ongoing monitoring and penetration testing, provide follow up to our prior reports as needed, as well as provide our subject matter professionals to the County for consultation.

### **Inherent Risks:**

Network scans, penetration testing, and security assessments pose a variety of internal risks. These risks include both internal and external data breaches, potential data theft or inadvertent loss, exposure to social engineering and phishing attacks, reputational damage, operational disruptions or failures, and financial losses. It is crucial to recognize and mitigate these risks to guarantee comprehensive security and maintain business continuity.

# **Internal Audit Strategy:**

The primary objective would be to assess the productivity of the County's current security controls in place by conducting internal and external penetration tests and vulnerability scans. Focus areas may also include social engineering assessments and threat intelligence gathering. The outcome of these penetration tests document the County's existing security posture and identify targeted weaknesses and vulnerabilities in Brevard County's internal and external presence.



# REVISED PROPOSED INTERNAL AUDIT PLAN – FY 2025-26 (CONTINUED)

# 4. Natural Resource Management - Save Our Indian River Lagoon Half-Cent Sales Tax - Ongoing

### Overview:

The citizens of Brevard County voted on November 8, 2016, to approve a half-cent sales tax to be assessed and remitted to the County for use in clean-up efforts for the Indian River Lagoon. The tax is in effect for a period of 10 years and is independently overseen by the Save Our Indian River Lagoon (SORIL) Committee. The role of the Internal Auditors includes monitoring the activities of the SOIRL Committee as well as the reports presented to the Committee by the department of Natural Resource Management.

### **Inherent Risks:**

Lack of proper oversight and monitoring of the Half-Cent Sales Tax - Lagoon Tax presents several risks that could hinder the successful execution of the Lagoon restoration projects. The estimated \$586 million in revenue over ten years increases the risk of mismanagement, fraud, or misuse if not adequately controlled and monitored. Inaccurate reporting of SOIRL collections can lead to significant budgeting issues, creating either a false surplus or potential deficits that could affect project funding. Failing to verify that expenditures from the SOIRL trust fund adhere to proper procedures could lead to misallocation of funds, diverting resources from their intended projects and creating inefficiencies in project execution. The lack of adherence to proper procurement processes further heightens the risk of conflicts of interest, favoritism, or the awarding of contracts to unqualified vendors, which could result in delays, cost overruns, or subpar execution. The purpose of this assessment will be to evaluate these risks and recommend strategies to mitigate them, validating that funds are appropriately allocated, and procurement processes are transparent and efficient.

# **Internal Audit Strategy:**

Internal Audit procedures may include testing project budget set up and monitoring, procurement of contracted services, as well as revenue and expenditure reporting, and compliance with municipal cost-share agreements.

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