

## District of Columbia Water and Sewer Authority Board of Directors

Audit and Risk Committee October 23, 2025 / 11:00am

**Microsoft Teams meeting** 

Click here to join the meeting Meeting ID: 228 926 066 864

Passcode: VW3Xx6by

Call in (audio only) 202-753-6714, 750917522#

Phone Conference ID: 750 917 522#

1.	Call to Order	Christopher Herrington, Chairperson
2.	Roll Call	Michelle Rhodd, Board Secretary
3.	Enterprise Risk Management Briefing	Francis Cooper, Director EPMO
4.	Internal Audit Update	Cherry Bekaert, Internal Audit
	A. FY 2025 Internal Audit Status Update	
	B. Status Update on Prior Audit Findings	
	C. Hotline Update	
	D. Risk Assessment Results & Proposed FY 2026 Audit Plan	
5.	Executive Session*	Christopher Herrington
	<ul> <li>To discuss facility security matters under D.C. Official Cod</li> </ul>	de § 2-575(b)(8).
6.	Adjournment	Christopher Herrington

This meeting is governed by the Open Meetings Act. Please address any questions or complaints arising under this meeting to the Office of Open Government at <a href="mailto:opengovoffice@dc.gov">opengovoffice@dc.gov</a>.

1The DC Water Board of Directors may go into executive session at this meeting pursuant to the District of Columbia Open Meetings Act of 2010, if such action is approved by a majority vote of the Board members who constitute a quorum to discuss certain matters, including but not limited to: matters prohibited from public disclosure pursuant to a court order or law under D.C. Official Code § 2-575(b)(1); terms for negotiating a contract, including an employment contract, under D.C. Official Code § 2-575(b)(2); obtain legal advice and preserve attorney-client privilege or settlement terms under D.C. Official Code § 2-575(b)(4)(A); collective bargaining negotiations under D.C. Official Code § 2-575(b)(5); facility security matters under D.C. Official Code § 2-575(b)(8); disciplinary matters under D.C. Official Code § 2-575(b)(9); personnel matters under D.C. Official Code § 2-575(b)(11); train and develop Board members and staff under D.C. Official Code § 2-575(b)(12); adjudication action under D.C. Official Code § 2-575(b)(13); civil or criminal matters or violations of laws or regulations where disclosure to the public may harm the investigation under D.C. Official Code § 2-575(b)(14); and other matters provided under the Act.



## Enterprise Risk Management

October 23, 2025

Francis Cooper

Director, Enterprise Program Management Office (EPMO)

# dcd Today's Agenda



Non-Revenue Water Initiative



**Bottoms-Up Approach Update** 



**ERM Training Update** 



## Non-Revenue Water Initiative

Francis Cooper
Director, Enterprise Program Management Office (EPMO)

Chris Collier
Vice-President, Water Operations



### Background and Context

## Revenue Erosion and Expenditure Increase Non-Revenue Water Loss

## Strategic Risk - Revenue Erosion and Expenditure Increase:

The risk of potential inefficiencies in internal processes and resource prioritization and/or unfavorable external factors (e.g., increasing costs, continued water loss) may lead to revenue erosion.

## Sub-Risk – Non-Revenue Water Loss (NRWL):

The risk of revenue losses due to **Apparent Losses** (nonphysical revenue losses) and **Real Losses** (physical volumes lost). It can also be derived by calculating the difference between water supplied and water billed. (Ref. AWWA M36)

## Annual Water Balance Data Non Revenue Water (ccf)



### NRW = System Input Volume (Purchased) - Billed Consumption

- Authorized unbilled consumption (flushing)
- Real Losses (infrastructure)
- Apparent Losses (unauthorized consumption, meter issues)



## Background and Context

## **Enterprise Performance Management Office (EPMO) Engagement Enterprise Risk Management (ERM) Framework and Governance**

The EPMO was established by Mr. Gadis in April of 2019 to effectively carry out the vision of Blueprint 1.0. On May 27<sup>th</sup>, Mr. Gadis authorized the EPMO team to provide facilitation and risk/performance management support across all participating DC Water clusters to remediate Non-Revenue Water Loss. Implementing our demonstrated DC Water ERM approach, which leverages existing risk governance structures and frameworks, documenting and coordinating risk treatment and mitigation plans, and monitoring progress through risk and performance reporting.



#### **RISK GOVERNANCE**

Enhancing risk governance, coordination, and accountability across all non-revenue water loss mitigation activities within the Authority.



#### RISK TREATMENT AND MITIGATION

The EPMO team will lead the organization in risk management efforts designed to leverage our collective experience and knowledge to treat and mitigate varying identified risk drivers



#### RISK AND PERFORMANCE REPORTING

Efficient and accurate risk and performance reporting is integral to managing to results.



### Non-Revenue Water Current Activities

### **Risk Mitigation Category - Apparent Losses:**

### Audit of Water Ops metering network:

- As of September 30<sup>th</sup>, Water Operations has completed over 1100 field inspection surveys across multiple pressure zones: 1<sup>st</sup> High, 2<sup>nd</sup> High, 2<sup>nd</sup> High and Low Service, 4<sup>th</sup> High Alaska and Reno, and Anacostia 1<sup>st</sup> High
- Categories of findings: Missing meters, Missing Meter Transmission Unit (MTU), Damaged Meters or Inaccessible meters

#### Process Improvements:

 Improved operational coordination with weekly Ops meetings, review and improve existing metering and monitoring processes, enhanced monitoring of system health & performance (91% read rate current vs 98% industry standard)

#### Benefits realized:

- Improved meter read rate accuracy resulting in fewer estimated bills and increased revenue realized
- Improved metering exception management resulting in better AMI alert support for early detection of leaks, theft, and zero-use
- Asset optimization resulting in new and improved Return Material Authorization (RMA) and field investigation practices, cutting waste and recovering warranty value
- Enhanced revenue protection through reliable data captured which supports improved billing equity and reduces NRW losses



### Non-Revenue Water Current Activities

## Risk Mitigation Category - Apparent Losses: AWWA M36 Water Audit Key Metrics (FY24)

- NRW as a percentage of Water Supplied: 26.86%
- Total Losses: 198 GCD (Gallons per Connection per Day)
  - Apparent Losses: 23 GCD (meter accuracy, billing practices, data handling errors, theft etc.)
  - o Real Losses: 175 GCD (leaks, tank overflows)
- Data Validity Score: 51 (out of 100) Tier III (current)

#### Water Audit Data sources:

- DC Water Consumption Report (July 18,2025)
- Fiscal Year 2024 Consumption and Revenue Report
- Report Regarding Fire Service Charges (May 15, 2024)
- Unbilled Unmetered Authorized Consumption Storage Facilities (August 6, 2025)
- VS-2022-01 AWOL 2.0 Support TM Final 06192023
- Final Test Bench Report Analysis (August 8, 2025)
- Pressure Zone Calculations (August 8, 2025)





### Non-Revenue Water Current Activities

AWWA Fre Water Bala	e Water Aud nce		Audit Report for:		Copyright @	FWAS v6.0 Water Works Association. 2020, All Rights Reserved.
		D	Audit Year: ata Validity Tier:		Oct 01 2023 - Sep 30 2024	
		Water Exported (WE) (corrected for known errors) 12,135.010		Billed Water E	xported	Revenue Water (Exported) 12,135.010
Volume from Own Sources (VOS)			Authorized Consumption	Billed Authorized Consumption 26,902.619	Billed Metered Consumption (BMAC) (water exported is removed) 26,134.479  Billed Unmetered Consumption (BUAC)	Revenue Water 26,902,619
(corrected for known	System Input Volume Water Supplied 36,781.230  Water Losses 9,646.371	The second secon	. 53/633333	768.140		
errors)		Volume Water Supplied	ater Supplied	Unbilled Authorized Consumption	Unbilled Metered Consumption (UMAC)  0.000	Non-Revenue Wate (NRW)
0.000				232.240	Unbilled Unmetered Consumption (UUAC) 232.240	
				Apparent Losses	Systematic Data Handling Errors (SDHE) 67.257	9,878.611
			1,118.929 Water Losses	Customer Metering Inaccuracies (CMI) 984.416		
		Water Losses		Unauthorized Consumption (UC) 67.257		
Vater Imported (WI) corrected for known errors)		Real Losses 8,527.442	Leakage on Transmission and/or Distribution  Mains  Not broken down			
48,916.240			Leakage and Overflows at Utility's Storage Tanks  Not broken down			
					Leakage on Service Connections  Not broken down	



### Non-Revenue Water Planned Activities

### Goals

- Improve zonal integrity and subzone metering focusing on accuracy, functionality and meter quantity (access to federal meters and illegal meters)
- Improve Data Validity score (Target: Tier V, 71 or higher)
- Improve network metering accuracy by verifying and calibration of import-export meters at the Washington Aqueduct
- Installation of meters at reservoir inlets and outlets
- Creation of additional subzones for enhanced flow balance
- · Establish a leak detection team trained on active leakage monitoring and control



### Non-Revenue Water Planned Activities

## **Expansion of internal and contract acoustic leak** detection technologies and integration of AI:

- DC Water has deployed Gutermann Acoustic Leak detection correlators to optimize field crews' accuracy in leak location
- Since June 2025, leak detection accuracy has increased by 65%, reducing unnecessary excavation, service disruptions and repair costs with10+ successful leak detections

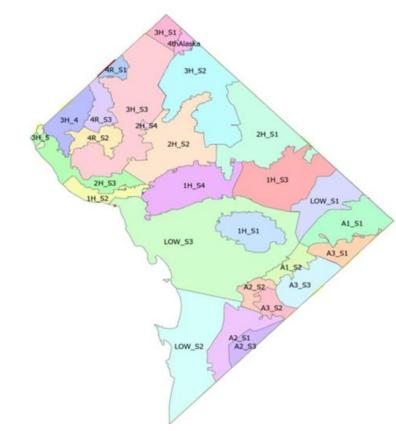
### **Current recommended Leak Detection Technologies:**

**Gutermann**: non-destructive, low-cost approaches to assessing reliability of leak detection

- Purchased lift and shift sensors and live point-to point inspection tools
- Reliable for detecting small leaks

**FIDO:** Al-enabled acoustics-based technologies to address water loss

Reliable for detecting large leaks



Conceptual delineation of additional subzones



### Non-Revenue Water Planned Activities

### Unmetered connections

- Improved collaboration between Customer Care, Permit Operations, and Water Operations
- Implemented new business process to ensure meters are installed by requiring the tap and meter installation occur at the same time
- Identifying missing meters through the construction inspection refund process and field inspections

### • Asset Assessment and Renewal



- Improved collaboration between Customer Care, Engineering, and Operations
- Develop a critical valves replacement program
- Continue replacing small diameter water mains at 1.5%rate (17 miles per year)
- Improve condition
   assessment program of large
   diameter transmission mains



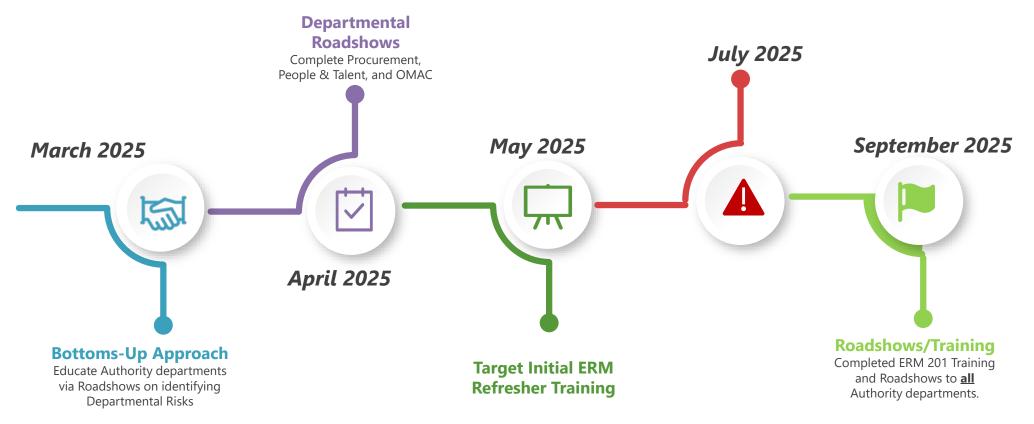
### **Next Steps**

- Measuring and Defining Success (AWWA-leveraged performance dashboards, etc.)
- Gap analysis and recommendations action plans
  - Leak detection innovations
  - NRWL centric policies and SOPs
  - AMI process improvements (missing or inoperable meters, access to Federal meters, etc.)
- Board engagement with the ERMC



## Timeline for Bottoms-Up Approach

This approach refers to starting risk management activities at the functional, operational and/or department level. Advancing this method of Risk Management will support the Authority in gaining a more detailed and nuanced understanding of the specific/functional risks, allowing for targeted and effective risk management strategies





### **ERM Trainings**



### **ERM 201/ERM202**

#### ERM 101

98% of non-union employees completed.

#### ERM 201

- ERM team conducted four training sessions.
- Reached **116** of 291 grade 17+ employees. ✓

#### ERM 202

- Launch of ERM 202 training sessions in Q2.
- Continuous engagement with departments to sustain risk culture.



### **Board Training**

- The training will reinforce the Board's role in overseeing the organization's risk management framework and processes.
- An overview of the training content and objectives will be provided in advance to the Board Chair for review and input.
- ERM training briefing prepared for Board distribution upon scheduling.



## Key Takeaways



#### 1. Departmental Roadshows

Educate Authority departments via Roadshows on identifying Departmental Risks. Completed Roadshows to <u>all</u> Authority departments September 8, 2025.



#### 2. Initial ERM Refresher Training

ERM team conducted four ERM 201 training sessions, reaching 116 of 291 Grade 17+ employees.



### 3. ERM 202 Training

Launch of ERM 202 training sessions planned for Q2. The goal is to maintain continuous departmental engagement and provide annual refresher training to sustain DC Water's risk culture.



#### 4. Board ERM Training

An overview of the training content and objectives will be provided in advance to the Board Chair for review and input.



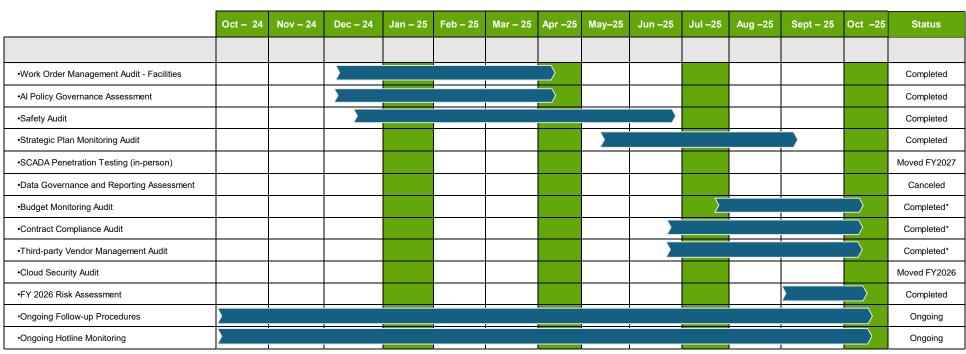
5. Next steps: Establish an ERM Annual Report



## FY 2025 Internal Audit Plan

Audit and Risk Committee Report October 23, 2025

## Internal Audit Plan FY 2025 Timeline & Status



<sup>\*</sup>Audit work is completed, in discussion with management

## G FY 2025 Internal Audit Plan – Q4 Completed

Strategic Plan Monitoring Audit External IP Block
SCADA
Environment
Penetration
Testing Audit

Budget Monitoring Audit\* Contract Compliance Audit\* Third Party Vendor Management Audit\*

FY2026 Risk Assessment

<sup>\*</sup> Audit work is completed, in discussion with management



## PRIOR AUDIT FINDINGS- FOLLOW UP STATUS

# dc Quarterly Progress Highlights

Seven total prior audit findings were closed, 2 high, 3 moderate and 2 low.

- FY17 Entity Level Assessment: Policies and Procedures
- FY25 Facilities Work Order Management Audit: Non-Compliance of Maximo Standard Operating Procedures (SOPs)

### The two oldest engagements were closed:

- The final finding for the FY17 Entity Level Assessment was validated & closed, and the audit was closed.
- The final finding for the FY23 Payroll & Timekeeping Audit was validated and closed.

Only two engagements prior to FY25 remain, both from FY23.

2 FY25 engagements were completed, and the corresponding findings have been added.



## **Open High Risk Prior Audit Findings**

There are a total of 23 open findings, which include the following 7 high-risk findings.

Audit FY	Issue Date	Audit Report and Open Finding	Target Completion Date
2023	10/27/2023	Fleet Management Audit  Lack of current policies and procedures  Fleet has drafted a RACI and 15 Authority wide Fleet policies. Legal provided commentary on the Fleet policies submitted and as a result the department has requested an extension to allow time to implement edits identified during Legal's review. The extension will allow time for these changes to be made in collaboration with the Union and for Legal to conduct a final review of the updated policies and standard operating procedures.	9/30/2025 Extended to 12/31/2025
	4/15/2025	Facilities Work Order Management Audit: Facilities team is currently working towards completing the set action plans.	
2025		Unaudited Maximo User Access Listing Lack of Current Asset Retirement and Disposal Standard Operating Procedures (SOPs)	11/30/2025 3/31/2026
	6/18/2025	Safety Audit: Safety team is currently working towards completing the set action plans.	
2025		User access not monitored for SRS Training matrix not routinely updated Lack of monitoring for corrective actions Training records not being maintained	12/31/2025 1/31/2026 1/31/2026 9/30/2026

Legend

Target date has not yet come due

Target date has passed

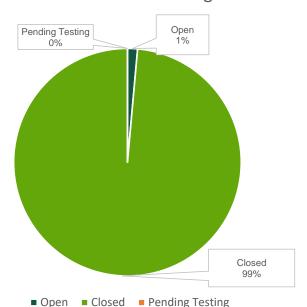




## **Status Update on FY17-FY24 Prior Audit Findings**

### Prior to FY2024 Audit Findings Status

	Report Issue	Corrective Actions				
Audit Report/Subject	Date	Total	Open	Closed	Pending Testing	
Prior to FY2024 Audit Findings*						
Work Order Management Audit-DWO	7/23/2023	3	1	2	0	
Fleet Management Audit 10/27/20		6	2	4	0	
Total Closed Audit Findings		201	0	201	0	
	Total		3	207	0	



\*Note: All FY24 Audit Findings have been closed.

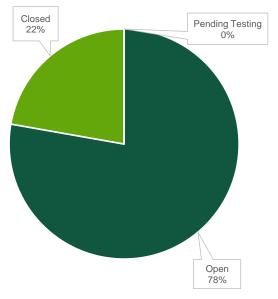
- Work Order Management Audit-DWO: Management Action Plan will not be fully implemented until 2028.
- Fleet Management Audit (1): Open finding regarding policies and procedures, estimated completion date was extended again to 12/31/25. As of 9/30, we have received 6 SOPs.
- Fleet Management Audit (2): Open finding regarding the manual tracking of employee credentials estimated completion date was extended again to 10/31/2025. Note: As of 8/28, 2/3s of the finding evidence has been submitted, new assignments have been set for completing the action plan and are on track to be completed by 10/31.

<sup>\*</sup> The remediation of the management action plans are not complete and pending testing, as the policies are not fully approved. To be consistent with other findings these findings were reopened. \*Data before FY2023 was provided by RSM

# dc Status Update on FY25 Audit Findings

	Draft Report	Corrective Actions			
Audit Report/Subject	Issue Date	Total	Open	Closed	Pending Testing
FY 20	25 Audit Findings				_
Work Order Management-Facilities Audit	4/11/2025	13	7	6	0
Safety Audit	6/18/2025	8	6	2	0
Strategic Plan Monitoring Audit	9/29/2025	3	3	0	0
SCADA Penetration Testing	10/6/2025	4	4	0	0
	Total	28	20	8	0

### **FY2025 Audit Findings Status**



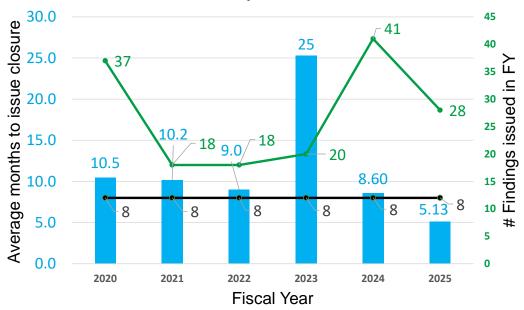
- Work Order Management Facilities Audit: 4 action plans were completed by 9/30: 1 high risk, 2 moderate risk & 1 low risk findings have been closed
- · Safety Audit: 1 moderate risk finding has been closed
- · Strategic Plan Monitoring Audit: CB received management action plans and are updating the report to include the plans.



## Time to closure by fiscal year

The below graph illustrates the average number of months from audit finding issuance to audit finding closure yearover year as of October 2025. Management has made significant improvements to achieve timelier audit finding closure as illustrated by the decline from FY23 to FY24. Management's target time to closure is 8 months.

#### Internal Audit follow up remediation FY20-FY25



\*Data before FY2023 was provided by RSM



## **Allegations Update**



## **Allegations Update**

Below is a summary of the cases received in FY25 as of October 15, 2025. There are four open cases.

FY 25 Allegation Summary							
FY 25 Allegations Received	19						
FY 25 Cases Closed	15						
FY 25 Allegations Open	4						
FY 25 Open Allegation Breakdown							
Four cases are being investigated. Two of the above cases were logged as two calls Allegation Source	Two of the above cases were logged as two calls each.						
Hotline	15						
	-						
Management Alert 4							
Employee Email 0							
Personal Conversation	0						
T (   A    ('     E'     1) (							

FY 25 Closed Allegation Breakdown*				
Fraud, Waste, and Abuse Related Allegations:				
Theft of Time	1			
Theft or Misuse of Company Assets	1			
Policy Issues	2			
Employee Relations	2			
Sexual Harassment	1			
Substance Abuse	0			
Wage/Hour Issues	0			
Workplace Violence/Threats	1			

### Total Allegations by Fiscal Year:

Year	FY 20	FY 21	FY 22	FY 23	FY 24
# of Cases	10	7	18	15	25
Action Taken	0	0	2	2	1

### FY25 Allegations by Quarter:

Year	Q1	Q2	Q3	Q4	Total
# of Cases	4	4	1	10	19
Action Taken	1	2	0	5	8

<sup>\*</sup>Calls that do not pertain to fraud, waste, or abuse are automatically referred to the appropriate department head and closed by Internal Audit. These calls will never result in corrective action by Internal Audit and are not included in the FY25 Closed Allegation Breakdown



### **Contacts**

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Tiffany McCoy, Manager Engagement Manager Tiffany.mccoy@cbh.com

Chris Leffler, Senior Chris.leffler@cbh.com

Rachel Drishinski, Senior Rachel.drishinski@cbh.com



## **Appendix**

## GC FY 2025 Internal Audit Plan - Completed

### **Strategic Plan Monitoring Audit**

Based upon the DC Water FY2025 Risk Assessment results, we conducted an audit to evaluate the controls in place regarding the creations, updating, enforcing, monitoring, validating, and reporting out on the strategic plan initiatives. The data examined ranged from January 1, 2022, through April 30, 2025. The audit scope included the following objectives:

- 1. Creation: Review the plan creation process for the assignment of roles and responsibilities, key leadership buy-in, identification of goals and objectives, resource allocation, and the development of tactical plans.
- 2. Updates and Validation: Examine the process for identifying, designing, approving and implementing changes to objectives to the plan based on current and emerging strengths, threats, weaknesses, and opportunities internally and externally.
- 3. Enforcement: Assess leaderships methodology for maintaining accountability to ensure plan goals and objectives are being achieved on time, effectively and as desired.
- 4. Monitoring: Evaluate the collection of data, key performance indicators to measure progress, initiatives, and the related communication protocols.
- 5. Reporting: Assess the effectiveness and efficiency of information sharing and reporting on key results, plan development, execution and monitoring.

The audit was performed May 2025 through August 2025.

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## GC FY 2025 Internal Audit Plan - Completed

### **Strategic Plan Monitoring Audit**

## **Findings Summary**

During the audit, we identified 3 findings. These findings have been categorized and assigned a risk rating of High, Medium, or Low, as detailed in the Table.

#### Themes:

- · Governance and Oversight
- · Policies and Procedures

The detailed recommendations are further described in the Findings, Process Improvements & Recommendations section of this report.

Findings (Total:3)	Risk Rating				
<b>Audit Themes</b>	HIGH MEDIUM LOV				
Governance and Oversight	0	1	1		
Policies and Procedures	0	0	1		
Totals	0	1	2		

## **GCO** FY 2025 Internal Audit Plan - Completed

### **Strategic Plan Monitoring Audit Process Improvement Opportunity Summary**

During the audit, we identified 1 process improvement opportunity. The opportunities have been assigned a risk rating of High, Medium, or Low, as detailed in the table.

Audit Objective #3: Enforcement: Assess leaderships methodology for maintaining accountability to ensure plan goals and objectives are being achieved on time, effectively and as desired.

The detailed recommendations are further described in the Findings, Process Improvements & Recommendations section of the report.

Opportunity	Risk Rating				
(Total: 1)	HIGH	MEDIUM	LOW		
Objective #1	0	0	0		
Objective #2	0	0	0		
Objective #3	0	0	1		
Objective #4	0	0	0		
Objective #5	0	0	0		
Totals	0	0	1		



### **Contents**

- FY26 Risk Assessment
  - Risk Assessment approach
  - Risk themes
  - Survey results
  - Internal Audit approach
- FY26 Proposed Internal Audit Plan
- Audit Execution Logistic Updates
- Appendix
  - 5 Year Audit Plan
  - Prior audits performed



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## **FY26 Risk Assessment**



## **Risk Assessment Approach**



### **Survey**

- Issued an enterprise risk assessment survey to DCW Board members to evaluate inherent risks to the DCW environment.
- Issued an enterprise risk assessment survey to DCW senior leadership to evaluate inherent risks to the DCW environment.
- Feedback was collected electronically.



### **Analysis**

Synthesized risks by department. During this process, the engagement team reviewed the results of the senior leadership survey results and using their best collective judgment, ascribed a risk rating (high, medium, or low) to each risk category under likelihood and impact for each department.



### Internal Audit Plan



### Reporting

 Ranked and prioritized potential audits based on risk assessment results, Management priorities, and resources to ensure the greatest risks are addressed holistically.  Prepared a draft report that includes risk assessment results and the proposed FY2026 internal audit plan, the final report and presentation.



### **Assessment Criteria**

#### **Likelihood and Impact Ratings**

1	Likelihood	Impact			
High	Immediate and high degree of vulnerability such that it is critical that the risk be managed and controlled in order for this area to achieve its objectives. If not properly controlled, that area could have a serious, long-term, or detrimental effect on operations, internal controls and the achievement or organizational goals and objectives.	High	If an event occurs, the financial ramifications would be severe and/or operations would suffer long standing consequences.		
Medium	Risk present should be addressed and controlled but the probability is not as severe as defined above. If not properly controlled, the area could have some impact on operations and internal controls, but achievement of organizational goals and objectives will still be met.	Medium	Indicates that the resulting consequences of an event would be negative and must be managed but would not have a substantial effect on finance or on-going operations.		
Low	The threat of a serious event occurring is either non-existent or remote. The area should be managed but the level of risk response is limited.	Low	Indicates that the event occurring would have little or no impact financially or operationally.		



## **DCW Leadership Involvement**

#### The risk assessment survey was distributed across all DCW departments including the following:

#	Name	Title
1	Korey Gray	Vice-President & Chief Procurement Officer
2	Nelson Sims	Director, Cyber Security Services
3	Paul Guttridge	Director, Shared Services and Asset Management
4	Ecudemio Gutierrez II	Director, Safety
5	John T. Pappajohn	Director of Procurement, Goods & Services
6	Cheryl Jackson-Brockett	Director, IT Customer Engagement Services
7	Tanya Deleon	Manager, Risk   Finance Accounting Budget
8	Ivan Boykin	Vice-President, Finance
9	Moussa Wone	Vice-President, Clean Rivers Project
10	Henok Getahun	Controller
11	Dusti Lowndes	Director, Emergency Management
12	Syed Khalil	Vice-President, Rates & Revenue
13	Shawn A. Brown	Vice President, Employment, Labor, and HR Compliance
14	Meisha D. Thomas	Director, Customer Care
15	Marcus McKenzie	Sr. Manager, Customer Care, CIS & Performance Control
16	Meena Gowda	Vice-President & Deputy General Counsel
17	Lola Oyeyemi	Vice-President, Budget
18	Matt Ries	Vice-President, Strategy & Performance

#	Name	Title
#	Name	Title
19	Matt Brown*	Chief Financial Officer and Executive Vice- President, Finance and Procurement
20	Wayne Griffith*	Chief of Staff and Executive Vice President, Strategy & Performance
21	Amber Jackson*	Chief People Officer, and Executive Vice- President, People & Talent
22	Kirsten Williams*	Chief Administrative Officer and Executive Vice-President
23	David L. Gadis*	CEO and General Manager
24	Marc Battle*	Chief Legal Officer and EVP, Legal Affairs
25	Tony Giancola	Board Member, DC
26	Christopher Herrington	Board Member, Fairfax County, VA
27	Jed Ross	Board Member, DC
28	Floyd Holt	Board Member, Prince George's County, MD
29	Rachna Butani Bhatt	Principal Board Member
30	Dr. Unique N. Morris-Hughes	Board Chair
31	Fariba Kassiri	Board Member, Montgomery County, MD
32	Chris M. Collier	Vice-President, Water Operations
33	Salil Kharkar	Senior Technical Advisor to the CEO
34	Gregory Hope	Deputy General Counsel

\*SET

The following departments did not participate in the survey: Administration, People and Talent, Legal, Shared Services & Asset Management and Procurement

## **Top Survey Risks**

Internal Audit distributed a risk assessment survey to all 11 Board members, of which we received 9 responses. The top 6 enterprise-wide risks that Board members identified as a priority to DC Water's success in FY26 were the following:

- Financials & Reporting
- Legal & Regulatory Compliance
- People/Culture (Talent Acquisition & Employee Quality and Knowledge)
- Operational
- Cybersecurity
- Governance Reporting & Communication

Internal Audit distributed a risk assessment survey to approximately 27 members of DC Water leadership, of which we received 12 responses\*. The top five enterprise-wide risks that leadership identified as a priority to DC Water's success in FY26 were the following:

- Financials & Reporting
- Legal & Regulatory Compliance
- People/Culture (Talent Acquisition & Employee Quality and Knowledge)
- Pressure to Perform
- Reputational Risk

\*The following departments did not participate in the survey: Administration, People and Talent, Legal, Shared Services & Asset Management and Procurement



## **Overall Top Survey Risk Themes**

Below are the definition for the top 8 risk themes that emerged during the internal audit risk assessment this year.

- 1) Financials & Reporting: Risk of potential financial loss or instability that can arise from various factors affecting the organization. Loss exposure due to risk and ineffective controls could result in material misstatement in financial reporting.
- 2) Legal & Regulatory Compliance: Degree of regulatory oversight or compliance requirements associated with the activity at DCW.
- 3) People/Culture (Talent Acquisition & Employee Quality and Knowledge) Risk: Risk with the potential challenges and uncertainties the Authority faces during the process of identifying, attracting, and hiring suitable candidates for open positions. Also, risk with employees 'experience, education, and length of service in current role, including known quality or knowledge issues.
- 4) Pressure to Perform: Risk associated with the level of expectations from internal and external parties.





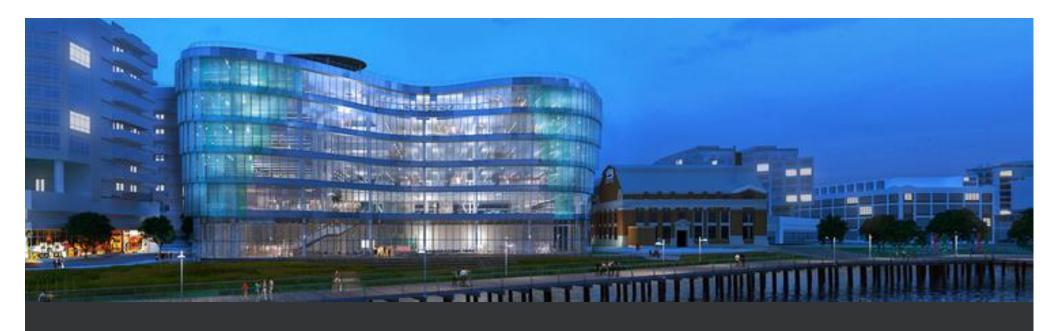
## Overall Top Survey Risk Themes (cont'd)

Below are the definition for the top 8 risk themes that emerged during the internal audit risk assessment this year.

- 5) **Reputational Risk:** Risk associated with the ability to maintain or communicate the Authority's commitment to achieving objectives and executing its mission in an ethical and effective manner.
- 6) **Operational:** Risk of potential loss from failed or inadequate internal processes, people, and systems, or from external events.
- 7) Cybersecurity: Risk of the potential for loss, damage, or disruption to the Authority's data, systems, or networks due to cyber threats or attacks.
- 8) **Board Governance Reporting and Communication:** Lack of transparency into the current risk profile of the Authority and management's risk response.







## **Proposed FY2026 Internal Audit Plan**



## **Internal Audit Execution Approach**

#### **Project Types:**

- Cycle audits Conduct formal reviews of management's controls at a specified frequency based on highly transactional processes that have elevated risk exposure across the industry.
- Ad hoc audits Perform formal reviews of management's control environment over a specific area/process with elevated risk or limited audit exposure.
- Management assessments Leverage
   Internal Audit's expertise and institutional knowledge to assist in identifying process improvements, best practices, automation opportunities, benchmarking, etc. Assessment results will be delivered to management to help inform future strategic decision-making.

#### Approach:

- For each audit conducted, Internal Audit evaluates the design and operating effectiveness of the internal control environment (draft process flowcharts, establish risk and control matrix, conduct sample-based transactional testing, issue audit report). Report is issued to management and the Board.
- For management assessments conducted, Internal Audit will review and analyze existing processes and data to identify strategic improvement opportunities for management. The report is issued directly to management.



## **Proposed FY2026 Internal Audit Plan**

Based on the risk assessment results, this is the proposed FY26 internal audit plan which includes cycle audits, ad hoc and management assessments. The intended scope for each engagement is included on the next 4 project justification





Note: The Cloud Security Audit and Data Governance and Reporting Assessment were not completed in FY25. The Cloud Security audit has been moved to FY26. The SCADA audit has been tentatively pushed to FY27 to allow Management time to prepare. The Operational Technology Resiliency Audit has been scheduled for FY26.

Note: If the top risk areas exceed the capacity to execute the internal audit plan the remaining risks will be deferred to the next year.



#### **Auditable Entity**

#### **Project Justification**

#### **Cloud Security**

 DC Water has transitioned to cloud-based applications to accommodate the evolving operation needs to be flexible and scalable. Internal Audit will evaluate the security posture of DC Water's Azure cloud environment by conducting a configuration security scan and assessing the architecture's adherence to best practice.

# Operational Technology Resiliency Audit

 Protecting sensitive data and maintaining system integrity and ability to effectively deliver services are crucial to DC Water's. Internal Audit will perform a non-technical resiliency assessment of DC Waters operational systems to identify potential gaps and recommend improvements to improve resiliency. This audit will enhance DC Water's operational, cybersecurity, and technology posture, ensuring that critical operations will continue to deliver services to stakeholders in a manner they have come to expect.

## Customer Billing and Collections Audit

• Ensuring the accuracy and efficiency of DC Water's customer billing and collections processes that are vital for maintaining financial stability and customer trust. Internal audit will evaluate these processes to identify discrepancies, recommend streamlining operations, and enhance cash flow management. By addressing any inefficiencies and potential errors, we expect to make recommendations that will reduce revenue leakage and improve customer satisfaction. Ultimately, this audit will help optimize the financial operations, ensuring timely collections and robust financial health.



#### **Auditable Entity**

#### **Project Justification**

# Procurement, Contracting, & Contract Compliance Audit

Conduct a comprehensive review of the procedures involved in contract development during
the procurement process. This includes, but is not limited to, evaluating manuals, standard
operating procedures (SOPs), designated stakeholders, training protocols, employee turnover
considerations, the contract review (legal sufficiency) and approval workflows. Additionally,
Internal Audit will evaluate three individual contracts from departments throughout the
Authority. Internal Audit will evaluate for compliance with contract terms and conditions,
contract monitoring best practices, and invoice payment controls.

Recruitment, Performance Evaluation, Compensation Analysis & Training/LMS Assessment • Evaluation of the talent acquisition and performance evaluation processes based on job roles. Review of the equity/fairness of practices related to union vs. non-union and their impact on wages, future raises, promotions, and retirement calculations. As training requirements evolve, it is critical to assess whether the Learning Management System (LMS) content, functionality, and user experience remain relevant, efficient, and aligned with DC Water's objectives. Internal Audit will evaluate the effectiveness, compliance and usability of the LMS platform in supporting employee learning and development. Assess if training content is current, relevant, and aligned with organizational goals and regulatory requirements. Additionally, IA will examine user engagement, system performance, data accuracy, and the platform's reporting capabilities to ensure a comprehensive and impactful learning experience.



**Auditable Entity** 

**Project Justification** 

Asset Management Lifecyle

 Audit of the DCW asset management practices throughout the entire asset lifecycle including acquisition, deployment, maintenance, depreciation to disposal.

Work Order Management Department of
Maintenance Services

• The Department of Maintenance Services (DMS) has a responsibility to maintain safe and properly functioning electrical and mechanical process equipment at the Blue Plains Wastewater Treatment Plant, a duty which requires the timely addressing of work orders when problems arise. Internal Audit will evaluate the controls surrounding appropriate workflow, data capture, and overall utilization of system(s) to quantify the effectiveness of asset management and execute on data-driven strategic decisions.

Emergency Management Policy Gap Analysis

 The Office of Emergency Management has a suite of emergency response plans, policies, and procedures both for general emergency response and incident specific responses (drinking water contamination, winter weather, flooding, etc.). Conduct a departmental policy and standard operating procedure gap analysis on all procedures to determine whether documented policies exist, assess the maturity of their composition, evaluate the adequacy of the review



#### **Auditable Entity**

#### **Project Justification**

Physical Security - HQO & Fort Reno

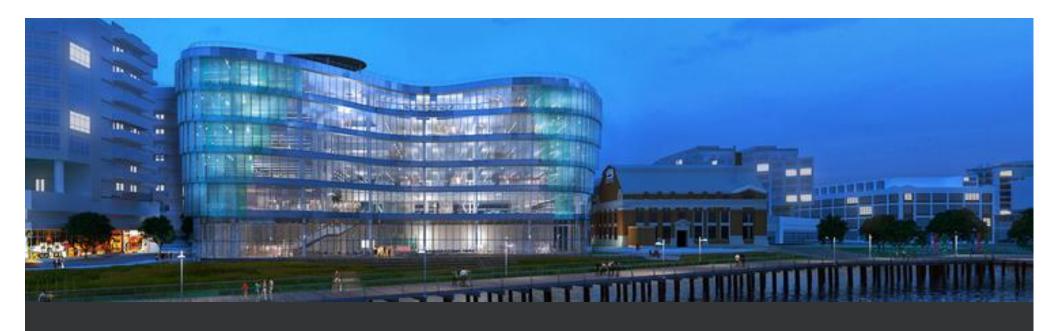
Physical security vulnerabilities could lead to unauthorized access, theft, or safety risks. Internal Audit will
evaluate the effectiveness of current security measures, identify potential vulnerabilities in the protection of
personnel, assets, and facilities. This audit aims to strengthen the organization's physical security posture,
support compliance with relevant regulations, and reduce risks related to unauthorized access, theft, or
disruption of operations.

Legal Operational

Audit

 Evaluate the internal control environment of the legal department function and operations including regulatory compliance, litigation, FOIA, contract, employment and leadership counsel. Internal Audit will provide recommendations to enhance performance, mitigate legal risks, and support strategic decision-making.





## **Audit Execution Logistic Updates**



## **Audit Execution Updates**

Based upon the FY25 internal audit plan execution Cherry Bekaert will be implementing several new processes to improve audit execution efficiency for FY26.

# Points of Contact

• Each audit should be assigned a primary and secondary contact for information sharing.

### Data Collection

• Special requests may be submitted to use the "I" drive as a mechanism for information sharing during audit execution.

## Follow Up

• Implement an internal findings tracker for audit remediation until closure.

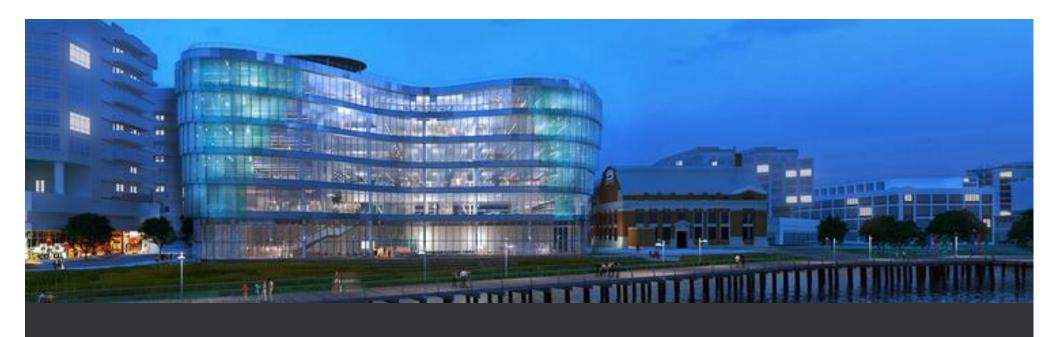


## **Audit Execution Updates**

This is an example of the audit finding remediation tracker that should be leveraged to provide status on management action plans until closure.

Title	Response	Target Completion	Responsible Party	Finding	Comments	Comple	Item Type	Path
					completion date. 8/28/25: This item tracks with finding 5. On track to meet 9/30/25 completion date.			
	Facilities will look at process improvements				8/7/25: This finding is closely aligned with finding 5.			
	to include more and relevant performance				1) Looking at process improvements to include more and relevant			
	indicators and metrics such as scheduled				performance indicators and metrics: scheduled compliance, asset			
	compliance, asset availability and usage,				availability and usage, work order backlog, and labor hours			
	work order backlog, and labor hours, based				2) Checking industry standards for comparison and alignment			
Objective 4, Finding 12	on industry standards. Refer to finding 5.	9/30/2025	Tayo Olatunji;#9;#Karla Dimitri (CTR);#30	Medium	3) Reviewing existing work order fields list and comparing with	FALSE	Item	sites/FacilitiesDepartment/Lists/Audit Findings MAPs





# Appendix:



## **Illustrative 5 Year Internal Audit Plan**

CB Legend:		СВ	RSM years 2-5>				
Cycle Audit		Year 1	Year 2	Year 3	Year 4	Year 5	Frequency
Management Assessment	FY:	FY2026					
Ad Hoc	Count:	10	11	10	12	11	
Ongoing Activities	Administration	on	•				
- v	P	Physical Security - HQO & Fort Reno	Physical Security - Blue Plains		Physical Security - Location TBD		Every 2 years (rotating locations
RSM Legend:	В	Billing and Collections	Physical Security - Bryant Street		Physical Security - Location TBD		Every 2 years (rotating locations
Ad Hoc		-	Billing and Collections			Billing and Collections	Every 3 years
Business Process Cycle			_		Strategic Plan Monitoring		Every 3 years
IT Ad Hoc	А	Asset Management Lifecycle		Business Continuity Assessment (OEM)	ESG Management Assessment	Fleet Management Audit	Ad Hoc
	E	Emergency Management Policy Gap					
IT Cycle	A				Customer Complaints Assessment		Ad Hoc
	Finance, Pro	ocurement & Compliance					
			Payroll & Timekeeping			Payroll & Timekeeping	Every 3 years
			Accounts Payable			Accounts Payable	Every 3 years
				Purchasing Card			Every 3 years
	P	Procurement, Contracting, & Contract					
	C		Contract Compliance	Contract Compliance	Contract Compliance	Contract Compliance	Every 1 year
				Procurement		Procurement	Every 2 years
			Materials Management		Grand Administration	Annual Budget Process Audit	Ad Hoc
	People & Ta						
		Recruitment, Performance Evaluation,					
	C	Compensation Analysis & Training/LMS					
	A	Assessment Audit		Training and Recruiting			Every 3 years
						Succession Planning	Ad Hoc
	Information '	Technology					
			Applications Inventory and Mapping Assessment		Oracle ITGC and SOD Audit	Data Governance and Strategy	Ad Hoc
	C	Operational Technology Resiliency		Records Management Audit			Ad Hoc
							Every 2 years (Int/Ext pen testin
			Internal and External Network Pen Testing	PCS Penetration Testing	Internal and External Network Pen Testing	External Wi-Fi Penetration Testing	in off years, rotating systems)
		& Engineering	-				
	V						Every 1 year (rotating
	0	of Maintenance Services (DMS)	Work Order Management - DMS	Work Order Management - DSO	Work Order Management - DWO	Work Order Management - DPSO	
					Construction Design and Asset Management		Ad Hoc
					Business Development Plan Subcontractor Assessment		Ad Hoc
		t & Legal Affairs					
		egal Operational Audit.	Compliance Monitoring Assessment	Legal Operations Case Management Aud	lit		Ad Hoc
	Ongoing						
		Hotline Case Management	Hotline Case Management	Hotline Case Management	Hotline Case Management	Hotline Case Management	
		Open Action Items - Remediation &					
		ollow Up	Open Action Items - Remediation & Follow Up		Open Action Items - Remediation & Follow Up	Open Action Items - Remediation &	Follow Up
	F	Y27 Risk Assessment	FY Risk Assessment	FY Risk Assessment	FY Risk Assessment	FY Risk Assessment	



## FY25 Prior Audits Performed by Cherry Bekaert

- Work Order Management
- Al Policy Assessment\*
- Safety Audit
- Strategic Plan Monitoring
- Budget Plan Monitoring
- Contract Compliance
- Third-Party Management

\*Management Assessment

