

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF CIVIL RIGHTS DETROIT

JOHN E. JOHNSON, JR. EXECUTIVE DIRECTOR

May 9, 2024

Chief Internal Auditor State Budget Office Office of Internal Audit Services 111 S Capitol Ave 7th Floor, Romney Building Lansing MI 48933

Dear Rick Lowe,

In accordance with the State of Michigan, <u>Financial Management Guide</u>, <u>Part VII</u>, enclosed is our final corrective action plan to address recommendations contained within the Office of Auditor General report of the Michigan Department of Civil Rights:

Questions regarding the corrective action plan should be directed to Deputy Executive Director, Kimberly Woolridge, WoodridgeK@Michigan.gov.

Sincerely,

Simburly C. Wooln in

Kimberly Woolridge Deputy Executive Director

Enclosures (1)

c: Executive Office of the Governor Office of the Auditor General House Fiscal Agency Senate Fiscal Agency House Appropriations Chair Senate Appropriations Chair Office of the Internal Audit Services State Budget Director

Michigan Department of Civil Rights (MDCR) Performance Audit: Selected Activities Related to Investigation Timeliness and Complaint Intake Issued By Office of Auditor General (OAG) August 2023 Department Final Corrective Action Plan

Summary Response Matrix

	Complied	Will Comply	Partially	Will Not Comply
			Complied	
Agrees		DEF-1164		
		DEF-1166		
		DEF-1167		
		DEF-1170		
		DEF-1171		
		DEF-1191		
Partially Agrees			DEF-1165	
Disagrees				

Final Corrective Action Plan (CAP)

Finding Number 1

Finding Title: DEF-1164 Significant improvement needed to timely complete civil rights complaint investigations.

Related IT system, if applicable: No

Department Response (Required)

Management Views (Agree/Disagree): Agree

Planned Corrective Action and Milestones (Management Response): Will Comply **CAP**: MDCR will hire additional staff to address the time it takes to complete certified complaint investigations.

CAP: New staff to complete four-to-six-week training so that staff are proficient in their jobs. **CAP**: MDCR has revised policies and procedures, including, but not limited to, timeline goals for complaint assignments to investigators, customer contact for interviews, documentation of case progress with CRIS notes in CRIS database, requirements for Civil Rights Managers to monitors their team's case activities.

- Milestone #1 Details: The MDCR Enforcement division will hire additional staff to address the time it takes to complete certified complaint investigations.
- Milestone #2 Details: The MDCR Enforcement Division's new staff to complete certified compliant investigations are proficient in their jobs and have successfully completed probation.

Training and experience will allow staff to become proficient in their duties and the aged cases can be completed.

Milestone #3 Details: Revising policies and procedures, including: • Establishing a timeframe goal for complaint assignment to an investigator. • Establishing a timeframe goal for investigators to attempt to contact the claimant regarding an initial interview. • Requiring investigators to place a note in CRIS on any attempt to contact the claimant regarding the monitoring of case activity.

Anticipated Compliance Date (Estimated or Actual Compliance Date): April 30, 2025

Responsible Individual: Director of Enforcement, Marcelina Trevino

Finding Number 2

Finding Title: DEF-1165 Management review process for complaint assignment decisions needs strengthening.

Related IT system, if applicable: No

Department Response (Required)

Management Views (Agree/Disagree): Partially agrees

Planned Corrective Action and Milestones (Management Response): Will Comply **CAP**: Intake managers are required to review all complaints, including both Summary of Complaints (SOC) and Certified Complaints, that are received from staff. Intake managers are also required to document every review of any complaint in CRIS.

CAP: Administrative processes have been reviewed and revised to ensure managers have reviewed and properly followed policy and procedures when addressing complaints.

CAP: Refresher training will include the mandatory documenting of case management in CRIS. **CAP**: MDCR does not require secondary review and approval of assignment decisions for appealed complaints because these determinations are appealable to the circuit court having jurisdiction over the mater, per Michigan Civil Rights Commission Rules.

Milestone 1: For Part a. of the finding, MDCR took the following actions: Intake managers are required to review all complaints, including both Summary of Complaints and Certified Complaints, that are received from staff. Intake managers are also required to document every review of any complaints in CRIS. If edits are necessary, it is noted in CRIS and documented when a final document has been approved for processing. Certified Complaints are reviewed and approved by both the Civil Rights Manager and Deputy Director of Investigations. All Summary of Complaints are reviewed and approved by the Civil Rights Manager. For Summary of Complaints, periodic system checks will be conducted by a Deputy Director of Investigations and/or Director of Investigations to ensure procedures are being followed, including the proper documentation of review of complaints. For cases of first impression and/or other certain designated areas of discrimination, a staff attorney may review and provide legal guidance to staff and document next steps in CRIS.

- Milestone 2: For part a: Administrative processes have been reviewed and revised to ensure managers have reviewed and properly followed policy and procedure when addressing complaints.
- Milestone 3: Refresher training will include the mandatory documenting the review of complaints in CRIS.
- Milestone 4: MDCR does not require secondary review and approval of assignment decisions for appealed complaints because these determinations are appealable to the circuit court having jurisdiction, per the Michigan Civil Rights Commission Rules. However, MDCR has the Reconsideration Attorney submit monthly reports outlining the reconsideration requests for both Summary of Complaints (SOC) and Investigative cases. The Director of Enforcement reviews the reports and may follow-up and check CRIS for further review.

Anticipated Compliance Date (Estimated or Actual Compliance Date): June 3, 2024

Responsible Individual: Director of Enforcement, Marcelina Trevino

Finding Number 3

Finding Title: DEF-1166 Improved controls needed over incoming contacts. Related IT system, if applicable: No

Department Response (Required)

Management Views (Agree/Disagree): Agree

Planned Corrective Action and Milestones (Management Response): Will Comply CAP: MDCR has revised policy and procedures, including the requirement that staff log all incoming telephone contacts. The staff have been advised and trained that all telephone calls be kept on a log and sent to either the Civil Rights Manager and/or a Deputy Director of Investigations for weekly review. CAP: MDCR's policies and procedures have been updated to include the management of the Service Center E-Mail box. This email box is checked twice, minimally, on a daily basis.

- Milestone 1: MDCR has revised policies and procedures, including the requirement that staff log
 all incoming telephone contacts. The staff have been advised and trained that all telephone calls
 be kept on a log and sent to either the Civil Rights Manager and/or the Deputy Director of
 Investigations for review on a weekly basis.
- Milestone 2: MDCR's policies and procedures have been updated to include the management of the Service Center Email box. The MDCR Service Center email box is checked at a minimum of twice daily. When Intake admin support staff are at full capacity, the MDCR Service Center email box is monitored consistently throughout the day, including any messages that go to the "junk" folder. The Civil Rights Manager and/or a Deputy Director of Investigations will go in daily to check that messages have been opened and properly addressed and/or moved to the appropriate complaint processing stage. The junk mailbox folder shall be reviewed daily to ensure we review and evaluate all email messages coming into the department.

Anticipated Compliance Date (Estimated or Actual Compliance Date): April 1, 2024

Responsible Individual (Title/Name): Director of Enforcement, Marcelina Trevino

Finding Number 4

Finding Title: DEF-1167 Improvement needed in documenting verbal intake interviews with claimants.

Related IT system, if applicable: No

Department Response (Required)

Management Views (Agree/Disagree): Agree

Planned Corrective Action and Milestones (Management Response): Will Comply

CAP: New employee training and follow-up training for all Enforcement staff will be conducted to ensure an intake interview form is filled out and uploaded into the CRIS database as a final draft. If a legal basis and/or jurisdiction for a complaint cannot be identified, a note shall be entered into CRIS, and the allegations shall be contained in the SOC.

CAP: Administrative processes have been reviewed to ensure proper policy and procedures are being followed. The CRM ensures that the Intake Interview form is uploaded before approving an SOC and making a note in CRIS. Deputy Directors of Investigation will randomly check files in CRIS to ensure policy and procedures are being followed and that CRIS notes are placed into the case.

CAP: Refresher training will include the importance of utilizing and uploading all intake interview questionnaires for verbal intake calls made over the phone.

- Milestone 1: Training of enforcement staff to ensure an intake interview form is filled out and uploaded into the CRIS system as a final draft. If a basis cannot be identified, a note must be entered in CRIS, and the allegations must be contained in the Summary of Complaint (SOC).
- Milestone 2: Administrative processes have been reviewed and revised to ensure proper policy and procedures are being followed. The Civil Rights Manager ensures that the intake interview form is uploaded before approving a Summary of Complaint (SOC). Deputy Directors of Investigations will randomly check files in CRIS to ensure policy is being followed and CRIS notes are placed into the case.
- Milestone 3: Refresher training includes the importance of utilizing and uploading intake interview questionnaires for verbal intake calls made over the phone.

Anticipated Compliance Date (Estimated or Actual Compliance Date): February 23, 2024

Responsible Individual: Director of Enforcement, Marcelina Trevino

Finding Number 5 Finding Title: DEF-1170 A strengthened customer service complaint process is needed.

Related IT system, if applicable: No

Department Response (Required)

Management Views (Agree/Disagree): Agree

Planned Corrective Action and Milestones (Management Response): Will Comply **CAP**: Assign staff members the responsibility to receive, document, and address customer service complaints, including complaint resolution.

CAP: Develop and implement final policies and procedures that efficiently address and respond to various customer service complaints.

CAP: Incorporate training sessions for all staff, including newly hired, regarding customer service issues, which may include but is not limited to the process of directing customer service complaints, how to handle customer complaints, and best practices in customer service.

- Milestone 1: Assign staff members the responsibility to receive, document and address customer service complaints, including complaint resolution.
- Milestone 2: Draft and implement final policies and procedures to appropriately and efficiently address and respond to various customer service complaints, depending on the type of complaint. The additional drafted policies will address when customers have service related complaints regarding staff and/or MDCR as a department.
- Milestone 3: Incorporate training sessions for newly hired and existing staff regarding customer service issues, which may include but are not limited to, the process for directing customer service complaints, how to handle customer complaints, and best practices in customer service.

Anticipated Compliance Date (Estimated or Actual Compliance Date): April 1, 2024

Responsible Individual: Director of Enforcement, Marcelina Trevino

Finding Number 6

Finding Title: DEF-1171 More robust controls needed for removal of CRIS user access. Related IT system, if applicable: Yes – MDCR-Civil Rights Information System (CRIS)

Department Response (Required)

Management Views (Agree/Disagree): Agree

Planned Corrective Action and Milestones (Management Response):

CAP: MDCR has already implemented an onboarding and off-boarding form that is used when a staff member is hired for a position or leaving MDCR as an employee. This is sent to the Data Systems Management Administrator and Management Services to cross check when staff gain access and are removed from CRIS.

CAP: A biannual review of CRIS users is conducted and at the beginning of each calendar year and then again in July.

 Milestone 1: MDCR established a more robust control over CRIS user access by using an onboarding and off boarding form that is used as soon as a staff member is hired for a position and/or leaving MDCR as an employee. The form is sent to both the Data Systems Management Administrator and MDCR Management Services to cross check when staff get access and are removed from CRIS. In addition, back up/cross training of the staff listed above assist in monitoring and removal of user access as needed. • Milestone 2: A biannual review of CRIS users is conducted and will proceed to be conducted at the beginning of a fiscal year (October) and then again in April.

Anticipated Compliance Date (Estimated or Actual Compliance Date): April 1, 2024

Responsible Individual: Director of Enforcement, Marcelina Trevino

Finding Number 7

Finding Title: DEF-1191 More robust controls needed for removal of CRIS user access.

• Please note that this Finding Title replaces Finding Number 6. This clarifies that a biannual review is conducted during the first month of the calendar year (January) and not the fiscal year (October).

Related IT system, if applicable: Yes – MDCR-Civil Rights Information System (CRIS)

Department Response (Required)

Management Views (Agree/Disagree): Agree

Planned Corrective Action and Milestones (Management Response): Will Comply **CAP**: MDCR has already implemented an onboarding and off-boarding form that is used when a staff member is hired for a position or leaving MDCR as an employee. This is sent to the Data Systems Management Administrator and Management Services to cross check when staff gain access and are removed from CRIS.

CAP: A biannual review of CRIS users is conducted and at the beginning of each calendar year and then again in July.

- Milestone 1: MDCR established a more robust control over CRIS user access by using an onboarding and off boarding form that is used as soon as a staff member is hired for a position and/or leaving MDCR as an employee. The form is sent to both the Data Systems Management Administrator and MDCR Management Services to cross check when staff get access and are removed from CRIS. In addition, back up/cross training of the staff listed above assist in monitoring and removal of user access as needed.
- Milestone 2: A biannual review of CRIS users is conducted and will proceed to be conducted at the beginning of each calendar year (January) and then again in July.

Anticipated Compliance Date (Estimated or Actual Compliance Date): April 1, 2024

Responsible Individual: Director of Enforcement, Marcelina Trevino