

## STATE OF MICHIGAN JOCELYN BENSON, SECRETARY OF STATE DEPARTMENT OF STATE LANSING

June 30, 2025

Jessica Thomas, Director Office of Internal Audit Services George W. Romney Building 111 South Capitol Avenue Lansing, MI 48933

Dear Ms. Thomas:

In accordance with the State of Michigan Financial Management Guide, Part VII, and Article V, Part 2, Section 229 of P.A. 166 of 2022, attached is a summary table identifying our response and corrective action plan to address the recommendation contained within the Office of the Auditor General's audit report of the Michigan Department of State, Branch Operations Division, covering the period of October 1, 2022 through May 31, 2024.

Questions regarding the summary table or corrective action plan should be directed to me at 517-285-7079.

Sincerely,

Sarah Fries, Audit Liaison Information Security and Control Division Michigan Department of State

#### Enclosures

c:

Honorable Jocelyn Benson, Secretary of State Doug Ringler, CPA, CIA, Auditor General JoAnne Huls, Executive Office of the Governor, Chief of Staff Shelia Marshall-Curtis, Executive Office of the Governor, Chief Compliance Officer Tricia Foster, Executive Office of the Governor, Chief Operating Officer Jen Flood, State Budget Director Tina Anderson, MDOS, Chief of Staff Jackie Venton, MDOS, Chief Operating Officer Khyla Craine, MDOS, Chief Legal Director Jennifer Mazzola, MDOS, Bureau of Branch Operations Director Erin Schor, MDOS, Legislative Policy Director Angela Benander, MDOS, Chief Communications Officer Bryan Bryson, MDOS, Internal Control Officer Senator Sarah Anthony, Chair, Senate Appropriations Representative Ann Bollin, Chair, House Appropriations Kathryn Summers, Director, Senate Fiscal Agency Mary Ann Cleary, Director, House Fiscal Agency

#### Michigan Department of State Performance Audit Branch Operations Division 231-0333-24 Issued By OAG May 1, 2025

#### Department Final Corrective Action Plan

**Summary Response Matrix** 

# Complied Will Comply Partially Comply Agrees 1455 1456 Partially Agrees 1457 Disagrees 1458

#### Final Corrective Action Plan (CAP)

#### Finding Number 1

Finding Title: Improvement in collecting and utilizing customer service information recommended

#### **Department Response**

#### **Management Views:**

Agrees and will comply

#### Planned Corrective Action and Milestones:

Wait time data is tracked in the CARS/FASTQ system. Branch offices that have permanent greeters utilize a process of customer check-ins and have consistent data. Offices without a permanent greeter check customers in upon their arrival to the counter. The difference in process is due to the operational need for offices with a smaller employee and customer base. Wait times for both customers with scheduled visits and those walking in have vastly improved due to the appointment-based operational model. BOD will continue to partner with the Office of Continuous Improvement and Transformation (OCIT) to track, and monitor wait time data. MDOS is in the process of developing a system to obtain customer feedback and are waiting on approval of a contract with Qualtrics. The goal is to survey customers via text or email after their branch visit if allowable by the system. MDOS has been diligently working to deploy a customer feedback system. The delay has been in part waiting for software MDOS could use and for software that could provide the best data. MDOS will continue to pursue this initiative to better obtain customer feedback.

#### **Anticipated Compliance Date:**

September 30, 2026

#### Responsible Individuals:

Lakeesha Perryman, MDOS

Michelle Wioskowski, MDOS John Dessart, MDOS India Callen, MDOS Shawn Starkey, MDOS

Finding Number 2

Finding Title: Improved REAL ID compliant documentation needed

#### <u>Department Response</u>

#### Management Views:

Agrees and will not comply

#### **Planned Corrective Action and Milestones:**

While BOD acknowledges the REAL ID and EDL security requirements highlighted by the Office of the Auditor General, the practical implementation of said requirements will likely create more problems than it solves within MDOS. Since the MDOS REAL ID implementation in 2017, federal audits have yielded no findings pertaining to storage of SSN documentation at the time of this writing, including the Transportation Security Administration's assessment in December 2024. Therefore, on this matter, MDOS is choosing to follow the expectations of the Transportation Security Administration, the federal agency responsible for REAL ID and EDL regulation.

#### **Anticipated Compliance Date:**

N/A

#### Responsible Individual:

N/A

Finding Number 3

Finding Title: Improved oversight of testing area monitoring needed

#### **Department Response**

#### Management Views:

Partially agrees and will comply

#### **Planned Corrective Action and Milestones:**

To improve oversight, BOD will add a work item to the District Manager Checklist to include observation of the testing area during office visits by District Managers. BOD will schedule testing oversight training to be completed during branch

#### Comment on CAP from Michigan Office of the Auditor General (07/23/2025, 2:00 PM)

See our complete Auditor's Comments on pages 34 and 35 of the <u>audit report</u>. DOS did not accurately represent its document retention process in its checklist submitted to TSA and instructed employees to limit scanning documentation containing SSNs to the extent possible. In addition, although TSA conducted a one-day site visit at 1 branch office, TSA did not review any REAL ID transactions to determine if BOD maintained the required source documents.

#### Comment on CAP from Michigan Office of the Auditor General (07/23/2025, 2:00 PM)

See our complete Auditor's Comments on page 19 of the <u>audit report</u>. BOD partially agrees with the recommendation, while it also indicates it plans to implement corrective actions and does not state disagreement with any facts in the finding.

dedicated training time. BOD can also review physical plant spaces to better accommodate the storage of belongings found in Item a. Additionally, Know to Drive Online (K2DO) will be launching in the near future in which customers may be able to take operator tests from home. While BOD can work to improve oversight for testing at branch offices, staff take the proper measures to ensure testing policies are being followed to the most reasonable extent, with the understanding that some quick actions taken by customers such as a swipe of a watch will not always be possible to observe.

#### **Anticipated Compliance Date:**

September 30, 2025

#### Responsible Individuals:

India Callen, MDOS John Dessart, MDOS

#### Finding Number 4

Finding Title: Improved documentation and monitoring of ongoing employee training needed

Related IT system, if applicable: SOM Learning Center

#### Department Response

#### Management Views:

Disagrees and will not comply

#### **Planned Corrective Action and Milestones:**

While BOD acknowledges there are limitations within the State of Michigan Learning Center (SOMLC) system that have impacted the integrity of training records, those limitations should not result in an audit finding for MDOS because the system is owned by MCSC. Instead, MDOS requests OAG to characterize this as an IT audit finding on SOMLC and task remediation at the statewide level given its impact on all SOM departments. SOMLC is the enterprise solution that all SOM departments are required to use for their training administration. As such, all SOM departments have inherited the same risks to training record integrity caused by the same system limitations. While the SOMLC deficiencies are addressed, MDOS disagrees with the need to maintain training records outside the system as a compensating control. Doing so creates waste in terms of time and resources among MDOS staff for an issue that is not an MDOS responsibility. Instead, MDOS will continue using SOMLC for its training administration as required. The MDOS Office of Human Resources will request additional documentation and guidance from MCSC on the administrative roles for which MDOS is responsible within the



SOM Learning Center. This approach will enhance MDOS knowledge on system capabilities and clarify the situations where MCSC intervention is needed.

## Anticipated Compliance Date: July 9, 2025

### Responsible Individual: Alisha Thomas, MDOS