
**OFFICE OF
THE INSPECTOR GENERAL**

SOCIAL SECURITY ADMINISTRATION

**THE SOCIAL SECURITY ADMINISTRATION'S
CONTRACT WITH UNIFIED CONSULTANTS
GROUP, INC., CONTRACT NUMBER
SS00-05-60015**

September 2008 A-15-08-18033

AUDIT REPORT



Mission

By conducting independent and objective audits, evaluations and investigations, we inspire public confidence in the integrity and security of SSA's programs and operations and protect them against fraud, waste and abuse. We provide timely, useful and reliable information and advice to Administration officials, Congress and the public.

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- Conduct and supervise independent and objective audits and investigations relating to agency programs and operations.**
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- Prevent and detect fraud, waste, and abuse in agency programs and operations.**
- Review and make recommendations regarding existing and proposed legislation and regulations relating to agency programs and operations.**
- Keep the agency head and the Congress fully and currently informed of problems in agency programs and operations.**

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- Access to all information necessary for the reviews.**
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SOCIAL SECURITY

MEMORANDUM

Date: September 26, 2008 **Refer To:**

To: The Commissioner

From: Inspector General

Subject: The Social Security Administration's Contract with Unified Consultants Group, Inc.
Contract Number SS00-05-60015 (A-15-08-18033)

OBJECTIVE

Our objectives were to determine whether the contractor was complying with the contract terms and applicable Social Security Administration (SSA) policies, and to ensure SSA personnel were properly monitoring the contract. We also determined whether SSA was maximizing the use of the benefits rendered from the contractor's services.

BACKGROUND

On July 22, 2005, SSA awarded Unified Consultants Group, Inc., (UCG) a contract to conduct physical security facility reviews (PSFR) at SSA facilities¹ nationwide. The PSFR program is designed to assess the adequacy of physical security measures in place at an SSA facility and determine whether there are vulnerabilities that must be addressed. Physical security includes those safeguards that protect SSA facilities, staff and visitors, information, and equipment, but excludes computer systems security. Refer to Appendix D for a list of UCG's most frequently identified field office security issues. SSA's Administrative Instructions Manual System (AIMS) defines the priority of physical security issues by designating the most serious security problems as Tier 1, and lesser security issues as Tier 2. Physical security issues relating to fire safety and training are classified as health and safety issues. See Appendix E for a list of Tier 1 and Tier 2 security requirements.

¹SSA facilities may include (1) field offices, (2) Offices of Disability Adjudication and Review (ODAR), (3) Contact Stations, (4) ODAR Remote Sites, (5) teleservice centers, (6) regional offices, (7) program service centers, (8) the Regional Training Center, (9) the National Records Center, (10) the Regional Office Warehouse and (11) SSA Headquarters.

The contract requires that UCG review 312 offices at a cost of \$2,773,332.

Period of Performance	Number of Offices	Total Amount
Base Year - Fiscal Year (FY) 2006	100	\$881,590
Option Year 1 - FY 2007	106	\$890,821
Option Year 2 - FY 2008	106	<u>\$1,000,921</u>
Total	312	\$2,773,332

The SSA Office of Facilities Management (OFM), Office of Protective Security Services, (OPSS) is responsible for ensuring a safe and secure workplace for Social Security employees nationwide. OPSS personnel are responsible for managing and monitoring the UCG contract. OPSS' responsibilities under this contract include (1) selecting the SSA facilities to be reviewed, (2) ensuring UCG's compliance with the contract, (3) reviewing UCG's completed PSFR reports, (4) monitoring the facilities' responses to UCG's recommendations and (5) examining and approving UCG's invoices.

Security Assessments and Funded Enhancements

OFM developed and implemented the Security Assessments and Funded Enhancements (SAFE) system, which is a secure web portal, to provide a central repository of physical security reports, information and tools² to assist in managing the Agency's physical and protective security program. SAFE, which has been available on the SSA Intranet since October 1, 2007, provides a means of better tracking security reviews for a designated activity, corrective actions taken to correct deficiencies and funding use for security compliance. All field office managers, assistant managers and area directors have access to their offices' physical security data on SAFE.

Before SAFE was implemented, SSA's regional physical security coordinators and Office of Disability Adjudication and Review (ODAR) Physical Security Coordinators (PSC) maintained varying forms of documentation to track corrections and request funds from OPSS, if necessary, to assist in resolving the identified physical security issues.

RESULTS OF REVIEW

Overall, we found UCG was conducting the PSFRs in compliance with the contract terms and applicable SSA policy, and OPSS personnel were properly managing and monitoring the UCG contract. We found UCG completed the required number of PSFRs within the required time frames, and submitted reports with the information required by the contract. However, we found (1) inadequate follow-up of outstanding

² SAFE provides information on-line, which includes a Physical Security Action Plan, and tools, such as an Occupant Emergency Plan Questionnaire, electronic logs (intrusion detection system testing and activation; duress alarm testing and activation; fire extinguisher inspection; emergency lighting testing; key logs; training logs; and evacuation drills), and an online Physical Security Self-Assessment Questionnaire.

FY 2006 and FY 2007 PSFR recommendations, (2) inefficient use of SAFE, and (3) a missing suitability determination. In addition, we believe SSA is not maximizing the benefits of services rendered under the UCG contract.

Inadequate Follow-up of Outstanding FY 2006 and 2007 PSFR Recommendations

The office manager must address each PSFR security team finding.³ The PSFR is a comprehensive review that checks for approximately 70 potential physical security issues. Any disagreement with a finding or suggested remediation method must be presented to the Regional or ODAR Headquarters PSC, who will present the issue to OPSS for resolution.⁴

We reviewed 38 PSFRs consisting of 18 and 20 PSFRs for FYs 2006 and 2007, respectively. These PSFRs identified 577 recommendations. For the FY 2006 and 2007 PSFRs, OPSS passed the PSFR reports to the regions to address the UCG identified security issues. Our review of the regional and ODAR PSC responses to the status of UCG's recommendations found that 311 (54 percent) of the 577 recommendations were closed; however, 266 (46 percent) of the recommendations remained open, as shown in the Table below.

Fiscal Year	Number of PSFRs Reviewed	Closed Recommendations	Open Recommendations	Total Recommendations
2006	18	154	117	271
2007	20	157	149	306
Total	38	311	266	577

Closed Recommendations

We did not independently verify the information reported. As a result, we did not assess whether the recommendations were properly closed. The regional and ODAR PSC responses indicated that 42 of the 311 closed recommendations were closed because the office disagreed with the recommendation.

Open Recommendations

The regional and ODAR PSC responses indicated that 96 of the 266 open recommendations pertained to areas requiring mandatory Tier 1 security

³ SSA's Administrative Instructions Manual System (AIMS), Materiel Resources Manual (MRM) § 04.50.09, PSFR Program D.4.

⁴ Id.

enhancements.⁵ The remaining 170 open recommendations related to less critical physical security issues (Tier 2),⁶ and health and safety issues.⁷

In some instances, the PSCs could not provide information on the status of the recommendation or stated the recommendation was still under review. For example, in October 2006, UCG found the exterior lighting in one field office was activated on a timer between 5 p.m. and 8 p.m. UCG recommended that the lessor of the building reset the lights' automatic timer to remain on during all hours of darkness. Sufficient lighting eliminates potential hiding areas and aids in security monitoring. However, as of April 2008, the PSC could not provide information as to whether this recommendation had been addressed or resolved. UCG is completing its work as required by the contract and making recommendations, therefore, the PSCs should be more responsive in completing the required corrective actions, and OPSS along with the Region and ODAR PSCs should ensure all recommendations are addressed.

Also, we found SSA had not addressed 56 recommendations identified in the FY 2006 reviews. All of these reviews were completed during October through December 2005. In one instance, the PSC's response indicated action was taken. In November 2005, UCG identified an expired fire extinguisher in a field office computer room that may not have worked in the event of a fire. In April 2008, we performed a site visit and found the fire extinguisher had been removed. We were informed the field office was replacing the fire extinguisher. Additionally, a PSFR conducted in April 2007 found fire extinguishers were not clearly marked. SSA policy⁸ indicates fire extinguishers should be mounted where they are easily seen and accessed, and where visual obstructions cannot be avoided the location must be conspicuously marked. Accordingly, labels should be applied that conspicuously indicate the positions of obstructed fire extinguishers. In April 2008, we performed a site visit and found the labels of certain obstructed fire extinguishers were too low to be seen over office cubicle walls.

⁵ AIMS, General Administration Manual (GAM) § 12.06.07 C, Tier 1 Security Enhancements. This policy requires SSA management to ensure that, in SSA offices dealing with the public, mandatory Tier 1 security enhancements are in place.

⁶ AIMS, GAM § 12.06.07 D, Tier 2 Security Enhancements. Although not mandated, management is to consider Tier 2 enhancements.

⁷ AIMS, GAM § 13.04.09 Attachments A- J.

⁸ AIMS, MRM § 04.50.08.E.

SSA's physical protective security program protects all Agency personnel, visitors, records, equipment and facilities. Inadequate physical protective security controls⁹ could result in

1. physical harm to employees and the public,
2. damage to or loss of facilities,
3. the compromise of personally identifiable information,
4. theft,
5. destruction of Government records and property,
6. vulnerability to civil liability, and
7. inability to carry out SSA's mission.

The examples noted above indicate that identified security issues existed for lengthy periods of time. Additionally, the PSCs stated that some recommendations were still open as a result of a pending action (such as requesting funds). However, we found that 163 (61 percent) of 266 recommendations did not require funding, or the cost of the repair and/or improvement was less than \$200. Based on UCG's estimates, SSA could resolve all 163 issues with as little as \$2,963 in funding. While we recognize that SSA policy includes no specific timeframes for correcting security issues, we believe 2 years should be sufficient time to resolve security issues—particularly mandatory Tier 1 issues.

SSA is paying about \$2.8 million for a contract meant to improve the security of all Agency personnel, visitors, records, equipment and facilities. However, SSA is not taking timely action to correct security issues identified by the contractor. At the time of our review, many of the contractor's recommendations remained unimplemented and SSA facilities, data, and employees continued to be vulnerable.

Inefficient Use of SAFE

Starting in FY 2008, UCG input the PSFR results directly into SAFE; therefore, all UCG recommendations and cost estimates are included in SAFE. As previously stated, the office manager must address each PSFR security team finding.¹⁰ Any disagreement with a finding or suggested remediation method must be presented to the Regional or ODAR Headquarters PSC who will present the issue to OPSS for resolution.¹¹

OPSS monitors the status of each finding and the implementation of corrective actions via the SAFE web portal. The PSCs are responsible for contacting managers to obtain

⁹ AIMS, MRM § 04.50.02.B.

¹⁰ AIMS, MRM § 04.50.09.D.4.

¹¹ Id.

current information about the corrective actions implemented. The office manager is responsible for marking the items “Resolved” in SAFE after remediation is complete.¹²

We reviewed 17 PSFRs for FY 2008 and found that 5 (29 percent) had included an entry in SAFE. For those regions that completed some form of entry in SAFE, we found many input requests for funds, but did not identify any non-funded corrective action entries. Generally, for the non-funded corrective actions, there was no evidence the issue was addressed or resolved. Also, in several instances, the site managers stated they had not heard of SAFE or had no training and/or understanding of how SAFE operated. Subsequent to our review, we learned that SAFE had not been officially rolled out nationwide until July 2, 2008. Therefore, offices may not have been using the system, although it was available.

SAFE could be better used if SSA would require that the regions respond to all PSFR recommendations (that is, funded and non-funded, and current and prior year) within the SAFE web portal. OPSS stated that SSA policy is being revised to require the use of SAFE.

Missing Suitability Determination

We reviewed the suitability determinations for the 9 contractor employees on this contract. We identified one instance where SSA did not complete the suitability process for a UCG employee, causing non-compliance with the Security Requirement Clause of the contract. Specifically, we identified one contractor employee (a subcontractor with SEI) who had performed under the contract¹³ for at least 2 years with access to sensitive SSA information, who did not have a pre-screening or suitability determination. SSA’s Center for Personnel Security and Project Management (CPSPM) confirmed that it had no suitability determination letter for this individual.

According to CPSPM staff, processing of the suitability determination for this individual was under another SSA contract with SEI. However, the SEI contract ended before the suitability determination was completed; therefore, SSA stopped the suitability determination process, no continuation of the process took place under the current contract with UCG. Also, UCG stated the SEI employee without the suitability determination had retired, and his replacement had submitted information for a suitability determination.

The sensitive physical security information in the PSFR protects Agency personnel, visitors, records, equipment and facilities; therefore, SSA must remain committed to safeguarding its information. The SSA Office of Acquisition and Grants contract officer and the OPSS Contracting Officer’s Technical Representative should consistently

¹² Id.

¹³ SSA Contract Number SS00-05-60015, section C-4.6 Security Requirements Clause, (b) defines “performing under the contract” as either working on-site at an SSA facility (including visiting the SSA site for any reason) or having access to agency programmatic or sensitive information.

monitor the staffing of the contractor and any sub-contractor to ensure that only approved staff are allowed access to SSA's facilities and programmatic or sensitive information.

CONCLUSION AND RECOMMENDATIONS

We found UCG was conducting the PSFRs in compliance with the contract terms and applicable SSA policies, and OPSS personnel were properly managing and monitoring the UCG contract.

However, SSA is not maximizing the potential benefits of the UCG contract; since SSA has not completed the corrective actions on contractor recommendations timely, effectively and efficiently. Therefore, SSA should either take timely, effective and efficient action on the UCG recommendations, or SSA should modify future contracts to limit the scope of the testing to those areas that the Agency considers more significant and is willing to resolve timely. The reduction in the scope of the PSFRs, to focus only on the corrective actions that SSA would be willing to undertake, could result in potential savings to SSA in a lower contract cost.

Also, we believe SAFE is a useful program, but internal controls must be strengthened to ensure the SSA staff responsible for corrective action complete those actions timely and satisfy the security needs of the office. Additionally, OPSS should make an effort to address older recommendations before SAFE implementation. Some of these recommendations require little or no funding and should be immediately addressed and resolved.

We recommend SSA:

1. Monitor and resolve all outstanding FY 2006 and 2007 PSFR recommendations promptly.
2. Revise SSA policy to require that the regions enter all remedial action into SAFE promptly. Also, SSA should remind all field office managers, assistant managers and area directors on the use of SAFE and ensure recommendations are addressed timely.
3. Ensure all contractor personnel (including subcontractors) who work on the UCG contract have a favorable suitability determination.

AGENCY COMMENTS AND OIG RESPONSE

SSA agreed with the recommendations. The full text of the Agency's comments is included in Appendix C.

A handwritten signature in black ink, appearing to read "Patrick P. O'Carroll, Jr."

Patrick P. O'Carroll, Jr.

Appendices

[APPENDIX A](#) – Acronyms

[APPENDIX B](#) – Scope and Methodology

[APPENDIX C](#) – Agency Comments

[APPENDIX D](#) – Unified Consultants Group’s Most Frequently Identified Field Office Security Issues

[APPENDIX E](#) – Social Security Administration’s Tier Security Enhancements

[APPENDIX F](#) – OIG Contacts and Staff Acknowledgments

Appendix A

Acronyms

AIMS	Administrative Instructions Manual System
CCTV	Closed Circuit Television System
CPSPM	Center for Personnel Security and Project Management
FY	Fiscal Year
GAM	General Administration Manual
MRM	Materiel Resources Manual
ODAR	Office
OFM	Office of Facilities Management
OIG	Office of the Inspector General
OPSS	Office of Protective Security Services
PSAP	Physical Security Action Plan
PSC	Physical Security Coordinator
PSFR	Physical Security Facility Review
SAFE	Security Assessments and Funded Enhancements
SAS	Space Allocation Standards
SSA	Social Security Administration
UCG	Unified Consultants Group, Incorporated

Scope and Methodology

To accomplish our objectives, we:

- Reviewed the Unified Consultants Group, Inc., (UCG) contract SS00-05-60015 and contract modifications for Fiscal Years (FY) 2006 through 2008. Also, we reviewed the Social Security Administration's (SSA) Administrative Instructions Manual System sections related to physical security.
- Reviewed the Office of Protective Security Services' physical security facility review (PSFR) site selection list.
- Sampled 55 PSFR reports and reviewed the findings and recommendations. Additionally, we assessed the reported information to ensure compliance with the contract.
 - The base year contract included the requirement for 100 physical security surveys. The subsequent option years require 106 physical security surveys per option year.
 - For FYs 2006 and 2007, we sorted the sites visited by Region. We selected the first two sites visited in each Region. For FY 2006, 9 Regions were visited; therefore, we reviewed 18 site reports. For FY 2007, 10 Regions were visited; therefore, we reviewed 20 site reports.
 - Additionally, we ensured each report contained the items required by the contract and the required number of PSFRs were completed.
 - For FY 2008, we used December 1st as the cut-off date (since this year was on-going). We reviewed the reports for all 17 sites visited during the first 2 months of FY 2008.
- Evaluated internal controls at UCG and SSA's Offices of Protective Security Services, Acquisition and Grants, and Finance to determine if the processes were functioning properly, such as, contract invoices were properly reviewed and paid.
- Interviewed staff at UCG and SSA's Offices of Protective Security Services, Acquisition and Grants, and Finance.

- Evaluated OPSS' oversight of UCG to ensure the contractor's compliance with the contract, which included OPSS' examining and approving of UCG's invoices for our sample group.
- Obtained written responses from the Regional and Office of Disability Adjudication and Review physical security coordinators on their monitoring process and the status of corrective actions for our sample group.
- Conducted interviews with selected site managers a week after UCG completed reviews at SSA field office sites. We obtained information on the contractor actions and the site manager's receptiveness to the findings.
- Visited seven field offices in our sample and observed the corrective actions.

We performed our audit at the SSA Headquarters and field offices in Boston, New York, Philadelphia, Atlanta, and Kansas City from November 2007 through May 2008. We found the data used for this audit were sufficiently reliable to meet our objectives. The entities audited were the Offices of Acquisition and Grants, and Protective Security Services under the Deputy Commissioner for Budget, Finance and Management.

We conducted this audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our objectives. We believe the evidence obtained provides a reasonable basis for our findings and conclusions based on our objectives.

Appendix C

Agency Comments



SOCIAL SECURITY

MEMORANDUM

Date: September 18, 2008 **Refer To:** S1J-3

To: Patrick P. O'Carroll, Jr.
Inspector General

From: David V. Foster /s/
Executive Counselor to the Commissioner

Subject Office of the Inspector General (OIG) Draft Report, "The Social Security Administration's Contract with Unified Consultants Group, Inc., Contract Number SS00-05-60015" (A-15-08-18033)--INFORMATION

We appreciate OIG's efforts in conducting this review. Attached is our response to the recommendations.

Please let me know if we can be of further assistance. Please direct staff inquiries to Ms. Candace Skurnik, Director, Audit Management and Liaison Staff, at (410) 965-4636.

Attachment

**COMMENTS ON THE OFFICE OF THE INSPECTOR GENERAL DRAFT REPORT,
“THE SOCIAL SECURITY ADMINISTRATION’S CONTRACT WITH UNIFIED
CONSULTANTS GROUP, INC., CONTRACT NUMBER SS00-05-60015” (A-15-08-18033)**

Thank you for the opportunity to review and provide comments on this draft report.

Recommendation 1

Monitor and resolve all outstanding fiscal year 2006 and 2007 Physical Security Facility Review recommendations promptly.

Comment

We agree. We will monitor and resolve all outstanding fiscal year 2006 and 2007 Physical Security Facility Review recommendations.

Recommendation 2

Revise policy to require that the regions enter all remedial action into Security Assessments and Funded Enhancements (SAFE) promptly. Also, remind all field office managers, assistant managers, and area directors on the use of SAFE and ensure recommendations are addressed timely.

Comment

We agree. On August 22, 2008, we issued the Administrative Instructions Manual System (AIMS) 12.06, which mandates SAFE usage. We are working to update AIMS 12.06 to include timeframes for remedial actions. By March 31, 2009, we will complete updates to SAFE. This update will remind users of pending actions that need handling, to update Physical Security Action Plans/Occupant Emergency Plans, of pending remedial actions, etc. Any pending items that do not require funding will be corrected within 30 days of the security review report. Deficiencies identified that require funding will be corrected within 12 months of the security review report or an extension must be requested.

Recommendation 3

Ensure all contractor personnel, (including subcontractors), who work on the Unified Consultants Group, Incorporated (UCG) contract, have a favorable suitability determination.

Comment

We agree. We have identified a single point of contact to review and monitor all persons working under the UCG contract. We will ensure all UCG employees have proper suitability determinations prior to performing duties.

Appendix D

Unified Consultants Group's Most Frequently Identified Field Office Security Issues

Reception:

1. Reception area chairs/Other objects are not secured.

Access:

1. Keys are not stamped "Do not duplicate."

Doors:

1. No deadbolt equivalent lock on perimeter doors.

Intrusion Detection Systems and Duress:

1. Intrusion detection system or sensors are inadequate.
2. Install/improve closed-circuit television system.
3. Install/improve duress alarm system.

Lighting:

1. Inadequate or inoperative exterior lighting.
2. Emergency lighting is not tested monthly.
3. Inadequate or inoperative emergency lighting/no flashlight.

Plans, Policies and Procedures:

1. Update and test the Physical Security Action Plan (PSAP) and Occupant Emergency Program.
2. Revise the PSAP/provide employees copies.

Guard Services:

1. Guard post orders are inadequate/ No Contract Guard Manual.

Exterior:

1. Utilities are not protected.

Social Security Administration's Tier Security Enhancements

Tier 1 Security Enhancements¹

Management is to ensure that, in Social Security Administration (SSA) offices dealing with the public, the following mandatory Tier 1 security enhancements are in place:

1. Duress (panic) alarms at all workstations used for interviewing the public. This also includes the reception counter and the private interview room in field offices.
2. Peepholes in exterior and interior doors as needed (and installed at wheel chair height if appropriate). Office of Disability Adjudication and Review (ODAR) hearing rooms are to have peepholes which look into the rooms.
3. Locks and panic bars on exterior and interior doors as needed. Locks are to meet the security locking requirements in the current SSA or ODAR Space Allocation Standards (SAS). Due to technology developments, types of locks may be changed as long as the intent of the SAS is met. Locks are to be installed in accordance with local fire and building codes.
4. Intrusion detection system.
5. Security lighting (interior and exterior) at building entrances and in parking areas controlled by SSA for employee and visitor safety.

Tier 2 Security Enhancements²

Although not mandated, management is to consider the following Tier 2 enhancements:

1. Emergency lighting to provide sufficient lighting for employees to safely evacuate the office during power failures and other emergencies.
2. Emergency power back-up systems for critical security systems such as the intrusion detection system.

¹ Administrative Instructions Manual System (AIMS), General Administration Manual (GAM) § 12.06.07 C, Tier 1 Security Enhancements.

² AIMS, GAM § 12.06.07 D, Tier 2 Security Enhancements.

3. Closed circuit television (CCTV) systems (Refer to OFM memorandum dated April 25, 2000 entitled "Use of CCTVs Within SSA/ODAR Offices", available by contacting OPSS (410) 965-4544).
4. Physical modifications to the space, such as the installation of barrier walls, Plexiglas reception windows, separate restrooms for the public, etc.

Appendix F

OIG Contacts and Staff Acknowledgments

OIG Contacts

Kristen Schnatterly, Acting Director, Financial Audit Division, (410) 965-0433

Mark Meehan, Acting Audit Manager, (410) 966-7147

Acknowledgments

In addition to those named above:

Sig Wisowaty, Senior Auditor

Tonia Hill, Auditor

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www.socialsecurity.gov/oig or contact the Office of the Inspector General's Public Affairs Staff Assistant at (410) 965-4518. Refer to Common Identification Number A-15-08-18033.

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