

**ST JOHNS COUNTY
CLERK OF THE CIRCUIT COURT AND COMPTROLLER
ST AUGUSTINE, FLORIDA**

**Nilsa Arissa
INSPECTOR GENERAL**



**DAVID AUDIT
DRIVER AND VEHICLE INFORMATION DATABASE
AUDIT OF EMPLOYEES' USE OF DAVID DATA 2021**

February 5, 2021

Brandon J. Patty

Clerk of the Circuit Court and
Comptroller



Mark P. Miner

Chief Deputy Clerk

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DATE: February 5, 2021

TO: The Honorable Brandon J. Patty, Clerk of the Circuit Court and Comptroller

FROM: Nilsa Arissa, Inspector General

SUBJECT: Florida Department of Highway Safety and Motor Vehicles (DHSMV) Driver and Vehicle Information Database (DAVID) Audit: HSMV 0436-18

Pursuant to the conditions agreed to on the Memorandum of Understanding (MOU) executed on February 8th, 2018 and the Amendment dated November 21, 2018 the Office of the Inspector General (OIG) conducted an audit of the internal controls over the St. Johns County Clerk of the Circuit Court and Comptroller's (SJC COCC) access and usage of Driver and Vehicle Information Database (DAVID) provided by the Department of Highway Safety Motor Vehicle (DHSMV.)

The objective of the review was to determine whether the use of DAVID complies with the terms of the MOU with the DHSMV and whether internal controls are adequate to protect personal data received from DAVID from unauthorized access, distribution, use, modification, or disclosure.

It was determined that the use of DAVID complies with the terms of the MOU and that internal controls are adequate to protect data received from DAVID. Included within the attached report, recommendations to strengthen existing controls have been provided.

We appreciate the cooperation and responsiveness of the Clerk of the Circuit Court's Point of Contact and the Chief Personnel Clerk during this audit.

Respectfully Submitted,

Nilsa Arissa
Inspector General

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INTRODUCTION

Background

On February 8, 2018, the Clerk of the Court executed a Memorandum of Understanding (MOU) HSMV.: 0436-18 on behalf of the St. Johns County Clerk of the Circuit Court (COCC) with the Florida Department of Highway Safety Motor Vehicle (DHSMV). An amendment to the MOU was received and signed on November 21, 2018. The MOU is entered into for the purpose of establishing the conditions and limitations under which DHSMV agreed to provide electronic access to information pertaining to driver licenses and vehicles, including personal information to SJC COCC.

Driver and Vehicle Information Database (DAVID) contains confidential personal information protected by Chapter 119 of the Florida Statutes and the Driver Privacy Protection Act (DPPA.) In accordance with the MOU, and to maintain access privileges, the DHSMV requires the COCC to access DAVID for official purposes only, to safeguard personal data obtained and maintain internal controls to prevent, deter, and detect any misuse. DAVID offers the ability to generate audit reports with details of user access for a selected period. Points-of-Contact (POCs) at the sub agency level are provided a system administrator role, which allows for the ability to modify user access as necessary and to monitor and audit DAVID usage.

As stipulated in the MOU, the SJC COCC must submit an Attestation Statement from the Inspector General (IG) on or before the third and sixth anniversary of the agreement or within 180 days from receipt of an Attestation review request. See timeline below:

Memorandum of Understanding	Executed	2/8/2018
Attestation Statement 1	3 rd Anniversary	2/7/2021
Attestation Statement 2	6 th Anniversary	2/7/2024

The attestation ensures the COCC is following the terms of the DAVID MOU and has appropriate and adequate internal controls in place to protect personal data obtained from DAVID from unauthorized access, distribution, use, modification, or disclosure.

The DAVID audit guide (questionnaire), MOU, and Training documents provided by DHSMV were used to conduct the audit. The questions in the audit guide were derived from Section IV.B and Section V of the MOU between the COC and the DHSMV.

Prior to the start of the audit, the IG, Nilsa Arissa, the Point of Contact, Melissa Renfroe and Chief Personnel Clerk, Lisa Smith discussed the state of internal controls pertaining to the access and use of DAVID and it was apparent that internal controls are in place, could be more robust, and are undergoing a review. During the audit, the Point of Contact further developed and/or updated policies, processes, and internal controls, as necessary, to ensure compliance with the MOU and adequate protection of DAVID information.

Objective

The objective of the audit was to determine whether access and use of DAVID complies with the terms of the MOU and whether internal controls are adequate to protect personal data received from DAVID from unauthorized access, distribution, use, modification, or disclosure.

Scope

The scope of the audit included a review of the SJC COCC's processes and related internal controls pertaining to the access and use of DAVID and the protection of information obtained from DAVID. The period reviewed was January 1, 2020 to December 31, 2020.

Methodology

The audit methodology consisted of three phases:

- **Planning:** Audit procedures were developed based upon research, audit objective, scope, and the preliminary meetings.
- **Field Work:** Preliminary observations and findings were discussed. Evaluations and tests were conducted to complete audit fieldwork.
- **Reporting:** An exit conference was held with management to discuss and obtain responses to audit observations and recommendations. Audit report was finalized.

Planning

The audit plan and procedures were primarily based on review of the following information:

- DAVID MOU between the COC and the DHSMV.
- DAVID audit guide provided by the DHSMV.
- Initial discussion with the Point of Contact-Administrator and Chief Personnel Clerk.
- St. Johns Clerk of Court Administrative Code.
- Clerk of the Circuit Court documented DAVID procedures.

Fieldwork

On January 19, 2021, OIG interviewed the Director of the Family Law Division, who was the POC Administrator for DAVID at the COCC. OIG discussed the department's policies, procedures, and practices regarding the use of DAVID and the safeguarding of personal information obtained from DAVID. OIG also discussed the recommendations from the previous review in 2017, initial responses to the DAVID questionnaire and collaborated on identifying and further developing and/or updating internal controls to further protect personal data in DAVID.

The Point of Contact Administrator, and the Chief Personnel Clerk, agreed they would address any issues identified during the audit, and prior to submission of the attestation statement.

Our field work procedures involved the following:

- Reviewing the legal basis for DAVID users to access the database.
- Reviewing the Quarterly Quality Control Review process.
- Determining whether SJC COCC is in compliance with the provisions of the MOU.
- Verifying each user had completed training and whether training was current.
- Assessing the adequacy and effectiveness of internal controls over the safeguarding of information obtained from DAVID.
- Verifying whether POC Administrator is in compliance with the requirement that access permissions are removed immediately upon termination and updated within five days of reassignment.
- Reviewing annual certification statements.
- Analyzing activity, on a sample basis, for all fifteen COCC account holders that used DAVID during the audit period, to determine whether improper use had occurred. Our review involved performing an independent review of DAVID usage, verifying the following:
 - The inquiry date and time was within normal business hours.
 - The inquiry was related to a proper business function.
 - Repeated searches were appropriate.
 - The inquiry was not performed on relatives, celebrities, or political figures.
 - Access to Emergency Contact Information was appropriate.
 - Access to Deceased date was appropriate.

Reporting

On February 2, 2021, an exit conference was held with the POC-Administrator and Chief Personnel Clerk. During the meeting, we finalized responses to the DAVID audit guide and collaborated on resolution for any remaining attestation control issues. We completed an audit report summarizing our observations and recommendations, which incorporated management's responses.

Overall Conclusion

We determined that the SJC COCC's use of DAVID complies with the terms of the MOU and that internal controls are generally adequate to protect data received from DAVID. We also determined that, in some areas, internal controls could be strengthened to help ensure compliance with the MOU terms regarding DAVID access and use, and with the safeguarding of information from DAVID. Our audit observations and recommendations are included within the section below.

Observations and Recommendations

The Office of the Inspector General (IG) conducted an audit of St Johns County Clerk of the Circuit Court (SJC COCC) usage of the Driver and Vehicle Information Database (DAVID) and identified opportunities for improvement with the implementation of policies and enhanced procedures. As part of the audit, IG reviewed prior year's audit recommendations. IG's recommendations would further ensure internal controls are strengthened and appropriate for the safeguarding of DAVID data. IG has included three observations with recommendations below:

Observation 1: A review of the SJC COCC DAVID Access Compliance Standard Operating Procedures (SOP) was performed and the following observations were noted:

SOP		Does not include:
Access	1	Procedures for creating and maintaining an internal list of DAVID SJC COCC users.
	2	A definitive timeline for removal of access for: <ul style="list-style-type: none"> ○ An employee termination from five days to immediate. ○ A transfer employee to five days from transfer date.
	3	Indicate annual training is required.
	4	Signed User Agreement forms maintenance requirement. (This was a 2017 Audit Recommendation).
QQCR	5	Procedures for completing the Quarterly Quality Control Review Report. (QQCR) (This was a 2017 Audit Recommendation).
	6	A consistent method of reminder for completing QQCRs.
	7	Procedures for detecting misuse of DAVID access.
	8	Language that unauthorized DAVID usage may result in civil liability and criminal sanctions.
	9	Reference to the completion timeline of the Annual Certification Statement.
	10	Reference to the completion timeline of the Internal Control Attestation.

During the audit, the POCs updated the Access SOP and drafted an additional SOP to cover the review of the QQCRs.

Recommendation to Management:

- A. Review and update the SOPs (Access and QQCR) for the identified items listed in the table above.

Management's Response:

Management concurs and will implement.

Observation 2: A review of the QQCR for each quarter in calendar year 2020 was performed and the following observations were noted:

POC Area	Quarter	Due	Submitted	Days Late	Timely
Traffic	Q1	4/10/2020	5/21/2020	41	N
	Q2	7/9/2020	8/11/2020	33	N
	Q3	10/9/2020	10/5/2020	0	✓
	Q4	1/10/2021	1/8/2021	0	✓
Criminal	Q1	4/10/2020	8/21/2020	133	N
	Q2	7/9/2020	8/21/2020	43	N
	Q3	10/9/2020	10/7/2020	0	✓
	Q4	1/10/2021	1/6/2021	0	✓
Finance	Q1-Q4	n/a	n/a	-	-
Civil POC-Administrator	Q1	4/10/2020	1/19/2021	No Evidence of Review	N
	Q2	7/9/2020	“		
	Q3	10/9/2020	“		
	Q4	1/10/2021	“		

1. The POC Administrator provided all QQCRs for each POC sub agency except for Q1 POC sub agency Traffic. The POC sub agency Traffic subsequently provided a copy of the QQCR and stated the QQCR reviews are sent to the POC Administrator through intra office mail and Q1 may have been lost in transit.
2. A QQCR was not submitted timely for 2 of the 4 quarters. (See chart above) MOU Section VI.A requires Quarterly Quality Control Review Reports be completed “within 10 days after the end of each quarter and maintained for 2 years.”
3. There was no review evidence retained for any of the QQCRs provided. According to the POC sub agencies, reports are generated, random selections are made, review for appropriate use is performed and support is not retained. POC sub agencies understood the information is available on-line and therefore not required to be retained. However, the MOU states a QQCR review sheet with supporting documentation, along with review notes should be provided to the POC Administrator to review and retain for two years. MOU Section V.A. requires the COCC monitor use of DAVID to ensure “Information exchanged will not be used for any purposes not specifically authorized by the MOU. Unauthorized use includes, but is not limited to, queries not related to a legitimate business purpose, personal use, and the dissemination, sharing, copying, or passing of this information to unauthorized persons.”
4. The POC Administrator, who also served as POC sub agency Civil, did not retain a QQCR sheet, nor supporting documentation for each quarter reviewed. The POC Administrator indicated reports were generated, review performed, but documents were not retained. The

POC Administrator prepared and signed the QQCR sheet as evidence of review on January 19, 2021. (See chart above)

Additional Audit Performed:

To mitigate the risk of not performing the QQCR reviews timely, and identifying potential misuse, the IG conducted an additional audit of DAVID data accessed by users. IG reviewed all DAVID usage records for the period January 1, 2020 through December 31, 2020 for seven of the 15 DAVID users with an active status. Six out of the seven users were deemed to have used DAVID for legitimate business purposes. The seventh user appeared to have a questionable address inquiry which, upon further investigation, was conducted to determine where to direct a payment check in the COCC (Recommendation to address found in following section). Based on the review of DAVID’s activity log and interviews with the POCs, IG did not identify any illegitimate usage of DAVID.

IG also reviewed the last training dates for all active users to see if they were recently trained on the confidentiality and use of DAVID. 13 out of the 15 active users completed their training within the last year. The 14th user had not completed training in the last year. The 15th user had not completed training since 2014. IG noted that the 14th user and 15th user had not accessed DAVID in over a year (March 6, 2018 and March 12, 2014 respectively).

Acknowledgement of Confidentiality\Role Access\Training			
DAVID User	Most Recent Training	Create Date	Annual Training
1	8/21/2020	8/21/2020	✓
2	8/7/2020	12/11/2013	✓
3	11/3/2020	10/25/2018	✓
4	1/14/2021	12/10/2013	✓
5	1/12/2021	12/10/2013	✓
6	3/12/2014	3/12/2014	NO
7	10/7/2020	12/10/2013	✓
8	8/19/2020	9/14/2016	✓
9	12/17/2020	12/9/2013	✓
10	5/21/2020	5/21/2020	✓
11	7/30/2020	7/30/2020	✓
12	9/22/2020	9/22/2020	✓
13	3/16/2018	3/16/2018	NO
14	2/10/2020	12/9/2013	✓
15	2/4/2020	12/9/2013	✓

Recommendation to Management:

- A. To ensure segregation of duties and provide a check and balance, the POC Administrator should be responsible for DAVID access control and QQCR management. A POC should be assigned to each sub agency and report to the POC Administrator. The POC Administrator should not also serve as a POC sub agency.
- B. POC sub agency should manage annual access and usage training to their sub agency's DAVID users. IG further recommends additional guided training to users to reinforce confidentiality and usage requirements. POC Administrator should track and retain overall training statistics and completions for the office.
- C. POC sub agency should monitor, determine, and manage their sub agency's DAVID users, especially those who have not used their access or completed annual training.
- D. POC Administrator should oversee the execution, documentation, and retention of QQCRs to comply with the MOU. IG respectfully recommends the use of a reminder mechanism such as a calendar invite to ensure the QQCRs timely completion.
- E. SJC COCC is highly recommended to assign a backup POC Administrator who can perform audits by running User Activity Reports in the absence of the POC Administrator.
- F. SJC COCC should ensure the primary and back up POC Administrators conduct a quarterly audit of each other's DAVID's use.
- G. POC Administrator should identify a secured server location to retain QQCRs and their supporting documentation.

Management's Response:

Management concurs with recommendations. Regarding additional guided training, management will work with Human Resources to determine viability and potential implementation.

Observation 3: A review of all SJC COCC DAVID users was performed to determine user access was appropriate based on employee department and job responsibilities or access not warranted based on inactivity. IG reviewed all active, terminated and transferred employees and made the following observations:

To test for appropriate access IG requested the reconciliation of SJC COCC DAVID users to the DAVID Users by Agency report and found no formal reconciliation had been performed by the POC Administrator. To comply with MOU Section V.F IG generated employee listings from the eFinancePlus Human Resources application and compared to the DAVID Users by Agency report and found all DAVID users were assigned to the correct sub agency in DAVID. POC

Administrator and sub agencies' interview confirmed access was appropriate based on their department and job description.

As part of a 2017 Audit recommendation, SJC COCC was to maintain signed user agreements on file for each employee with a DAVID user account. IG obtained an agreement for each of the fifteen users, four of the agreements were dated within the 2017 Audit recommendation, but eleven were not. Changes in POC Administrator between the audits appears to have impacted the retention of the signed user agreements. The POC Administrator obtained signed user agreements between January 19th and January 26th, 2021 for the eleven users (See Recommendation D below). IG relied on the results of the additional procedures performed over training on confidentiality and use of David (See Observation #2 and Recommendation B).

During the review of personnel changes and terminations pertaining to employees with access to DAVID, IG determined access had not been immediately inactivated for three of four employees that separated from the SJC COCC during the audit period.

Employee	Termed Date	Access Removed	Removed timely
A	2/14/2020	8/21/2020	No
B	5/14/2020	5/21/2020	No
C	5/28/2020	8/24/2020	No
D	10/9/2020	10/8/2020	✓

To mitigate the risk, IG reviewed the last logon date for each employee and confirmed the former employees had not logged in to DAVID over 100 days prior to their end of employment. However, user access for the three employees was not terminated within the timeframe of "immediate" specified in the MOU Section IV.B.8.

Additionally, a transferred employee's access from one sub agency to another had not been processed within the DAVID guidelines of 5 days. The transfer in DAVID occurred 100 days after the HR transfer. The POC Administrator explained that the lag in removal of access for terminated and transferred employees was due to the ramifications the pandemic had on the SJC COCC's personnel and attendance. Based on this response, and to mitigate the risk of exposure, IG reviewed each terminated and transferred user and confirmed through the review of the user activity details report for the period January 1, 2020 through December 31, 2020 that no data had been accessed by terminated employees, and no inappropriate data had been accessed by the transferred employee during the lag time.

MOU Section IV.B.8 requires the SJC COCC to "immediately inactive user access/permissions following termination or the determination of negligent, improper, or unauthorized use or dissemination of information. Update user access/permissions upon reassignment of users within five (5) business workdays."

Recommendation to Management:

- A. Create and maintain a list of authorized SJC COCC DAVID users for use in the reconciliation of DAVID Users by Agency report.

- B. Create a retention policy to maintain signed user agreement forms. (This was a 2017 Audit Recommendation).
- C. POC Sub agencies should monitor and notify POC Administrator of any user transfers or end of employments.

Management's Response:

Management concurs and will create a policy to address.