

# The Office of Government-Wide Policy's Procurement Management Review Division Should Strengthen Its Reporting Function

Report Number A230074/M/6/F25002 May 28, 2025

## **Executive Summary**

The Office of Government-Wide Policy's Procurement Management Review Division Should Strengthen Its Reporting Function

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#### Why We Performed This Audit

The GSA Office of Government-wide Policy's (OGP's) Procurement Management Review Division (PMRD) performs procurement management reviews (PMRs) to monitor and evaluate GSA's acquisition programs. In response to a PMR report, the contracting activity may be required to develop a corrective action plan (CAP) to address PMR findings and recommendations. During our annual audit planning, we identified a risk that the PMRD is not verifying submitted CAP-supporting documentation; therefore, there may not be adequate controls to ensure corrective actions are taken. As a result, this audit was included in our *Fiscal Year 2023 Audit Plan*.

Our audit objective was to determine whether the OGP's PMR process effectively identifies, assesses, reports, and corrects internal control deficiencies in accordance with applicable policies, regulations, and procedures.

#### What We Found

GSA relies on its PMR process as a critical internal control to monitor its acquisition programs and evaluate if they are operating effectively, efficiently, and in compliance with applicable policies, regulations, and procedures. However, the PMRD should strengthen its PMR reporting process to more effectively identify deficiencies and ensure corrective actions are taken. We found that PMR reports lack a clear relationship between the PMR scorecard results, findings, recommendations, and whether corrective actions are required. By not requiring corrective actions for findings and recommendations in PMR reports, weaknesses or issues in GSA acquisition programs may not be corrected. In addition, we found that the PMRD is not ensuring that all supporting documentation for CAPs is maintained in the appropriate system.

#### What We Recommend

We recommend that the OGP Associate Administrator:

- 1. Strengthen the PMRD's policies and procedures to:
  - a. More clearly define the PMR scoring system and its relevance to the PMR report findings and recommendations;
  - b. Clearly identify the findings and recommendations in the PMR report, including whether corrective action is required to address each finding; and

- c. Ensure all required corrective actions are included in a CAP and implemented.
- 2. Perform training and oversight to ensure proper administration and closeout of CAPs.

In his response to our report, the OGP Associate Administrator agreed that improvements can be made in the PMRD's reporting to clarify when a CAP is required. OGP's response can be found in its entirety in *Appendix C*.

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#### Introduction

We performed an audit of the process the GSA Office of Government-wide Policy's (OGP's) Procurement Management Review Division (PMRD) uses to conduct periodic reviews of GSA contracting activities and make recommendations to management for improvement.

#### **Purpose**

The OGP's PMRD performs procurement management reviews (PMRs) to monitor and evaluate GSA's acquisition programs. In response to a PMR report, the contracting activity may be required to develop a corrective action plan (CAP) to address PMR findings and recommendations. During our annual audit planning, we identified a risk that the PMRD is not verifying submitted CAP-supporting documentation; therefore, there may not be adequate controls to ensure corrective actions are taken. As a result, this audit was included in our *Fiscal Year 2023 Audit Plan*.

#### **Objective**

Our audit objective was to determine whether the OGP's PMR process effectively identifies, assesses, reports, and corrects internal control deficiencies in accordance with applicable policies, regulations, and procedures.

See *Appendix A* – Objective, Scope, and Methodology for additional details.

#### **Background**

GSA provides centralized procurement for the federal government, offering billions of dollars' worth of products and services to federal agencies. Through its acquisition programs, GSA seeks to supply federal purchasers with cost-effective, high-quality products and services from commercial vendors.

GSA is required to establish and maintain internal controls in accordance with the Federal Managers' Financial Integrity Act of 1982; U.S. Office of Management and Budget (OMB) Circular No. A-123, Management's Responsibility for Enterprise Risk Management and Internal Control; and the U.S. Government Accountability Office's (GAO's) GAO-14-704G, Standards for Internal Control in the Federal Government. As part of GSA's internal controls, the PMRD conducts PMRs to assess the effectiveness of GSA's contracting activities (e.g., Federal Acquisition Service [FAS] and Public Buildings Service [PBS]), typically on a 3-year cycle.

The PMR process is intended to ensure that GSA complies with applicable policies, regulations, and procedures. It is also intended to verify that adequate management and internal controls are in place to ensure sufficient oversight of contracts used to procure goods and services.

PMRs are conducted by PMRD staff, as well as volunteer GSA acquisition professionals. During PMRs, contracting activities are given scorecard results using two assessments:

- **Entity-Level Assessment** This is an assessment of the contracting activity's internal controls, such as its policies and processes.
- **Transactional-Level Assessment** This is an assessment of a sample of contracts that the contracting activity has awarded.

#### **Entity-Level Assessments**

Entity-level assessments evaluate contracting activities' internal controls against a framework provided in the OMB Office of Federal Procurement Policy's memorandum, *Conducting Acquisition Assessments under OMB Circular A-123*, dated May 21, 2008. The framework is comprised of four cornerstones, each containing multiple focus areas that are tested to gauge the efficiency and effectiveness of: (1) traditional controls and (2) contract administration.<sup>1</sup> Each of the four cornerstones is scored based on the results of testing, and an overall entity-level scorecard result is provided for the contracting activity, as shown in *Figure 1* below.

Figure 1. Example of Entity-Level Results: Fiscal Year 2023 FAS Contracting Activity

Cornerstones	Traditional Controls (%)	Contract Administration (%)	
1. Organizational Alignment and Leadership	93	50	
2. Policies and Processes	77	45	
3. Human Capital	80	89	
4. Information Management and Stewardship	57	36	
Scorecard Result*	77	53	
Overall Entity Score*	67		

<sup>\*</sup>Scorecard results and overall entity scores are presented as percentages of total points, not an average of the percentages.

#### **Transactional-Level Assessments**

Transactional-level assessments are reviews of contract file documentation to assess whether:

- Acquisition data and records support the acquisition strategy selected;
- Acquisitions comply with applicable procurement laws, regulations, policies, and procedures; and
- Internal controls or procedures are implemented and effective.

<sup>&</sup>lt;sup>1</sup> Prior to Fiscal Year 2023, the entity-level assessment scorecards only included assessments of traditional controls.

The contract files are evaluated on various focus areas depending on the contracting activity. Each focus area is tested and scored based upon the evaluation. Each contract file test question is given a score from 0 to 3 (0 = no evidence of compliance; 3 = clear evidence of compliance). An average score is provided for each focus area. Then an overall average transactional-level scorecard result is provided for the contracting activity, as shown in *Figure 2* below.<sup>2</sup>

Figure 2. Example of Transactional-Level Results: Fiscal Year 2023 PBS Contracting Activity

Focus Areas	Score	
Acquisition Planning	2.39	
Solicitation Preparation, Approval, and Issuance	2.68	
Receipt and Evaluation of Offers	2.70	
Small Business Subcontracting	0.67	
Award Decision and Documentation	2.53	
Contract Administration and Management	1.93	
Modifications	2.49	
Contracting Officer's Representative/Lease Administration	2.18	
Manager Contract File Administration	2.18	
Overall Transactional Score	2.20	

#### **PMR Reporting and Tracking**

After conducting a PMR, the PMRD issues an Executive Summary (PMR report) to the contracting activity. The PMRD determines and indicates in the PMR report if a CAP is required from the contracting activity to address the report findings and recommendations. The PMR report contains:

- Entity-Level Results Entity-level scoring results, as shown in Figure 1 on the previous page;
- **Entity Key Takeaways** Significant observations that may include findings and recommendations:
- **Transactional-Level Results** Transactional-level scoring results, as shown in *Figure 2* above;
- Transactional Key Takeaways High-level areas of concern noted from the contract file reviews that may include recommendations;
- **Best Practices** Processes, achievements, innovative methods, and other best practices used by the contracting activity that may be beneficial for other offices or regions; and
- Recommendations Areas where the contracting activity should consider implementing changes.

<sup>&</sup>lt;sup>2</sup> Prior to FY 2023, the transactional-level assessments did not include an overall transactional score. Instead, the transactional-level assessments only presented a score for each focus area.

The results of all PMRs are tracked in the PMR Tool. This tool, which is maintained by the PMRD, is a central repository for entity-level and transactional-level review data for continued data analysis. The PMRD also publishes an annual PMR newsletter to its stakeholders to share trending observations, important news, and updates to the PMRD's review processes and results.

#### Results

GSA relies on its PMR process as a critical internal control to monitor its acquisition programs and evaluate if they are operating effectively, efficiently, and in compliance with applicable policies, regulations, and procedures. However, the PMRD should strengthen its PMR reporting process to more effectively identify deficiencies and ensure corrective actions are taken. We found that PMR reports lack a clear relationship between the PMR scorecard results, findings, recommendations, and whether corrective actions are required. By not requiring corrective actions for findings and recommendations in PMR reports, weaknesses or issues in GSA acquisition programs may not be corrected. In addition, we found that the PMRD is not ensuring that all supporting documentation for CAPs is maintained in the appropriate system.

Finding 1 – PMR reports lack a clear relationship between the PMR scorecard results, findings, recommendations, and whether corrective actions are required.

The PMR reports lack a clear relationship between the PMR scorecard results, findings, recommendations, and whether corrective actions are required. As a result, the PMRD should strengthen its reporting process to more effectively identify deficiencies and ensure corrective actions are taken. We found that the PMRD does not maintain documents to support PMR entity-level scores.

For our analysis, we sampled 25 PMR reports conducted from Fiscal Year (FY) 2020 through FY 2023. To understand the PMRD's scoring and rationale, we requested copies of supporting documentation for the PMR scorecard results from these 25 reports. Despite multiple requests, the PMRD was only able to provide us with incomplete supporting documentation for one PMR report. Subsequently, we were informed that the PMRD does not maintain the documentation and could not provide support for the PMR scores. In explaining the lack of documentation, the PMRD Deputy Director stated that "since PMRs are not an audit, records to tie back an entity test question scores back to a single document are not cataloged."

Since the supporting documentation was not available, our assessment was limited to reviewing the PMR reports.<sup>3</sup> In reviewing our sample of 25 PMR reports, we found that 13 reports lacked a clear relationship between the PMR scorecard results, findings, recommendations, and whether corrective actions were required. Some examples are outlined below.

**Example 1** – In an FY 2021 PMR report, a PBS contracting activity's overall entity-level scorecard result was relatively low at 75 percent. In addition, the transactional-level scores ranged from 1.59 to 2.84, and the PMR Tool showed that this contracting activity's average transactional-level scores were decreasing over time. The PMR report included five findings and four

<sup>&</sup>lt;sup>3</sup> On April 4, 2025, the PMRD provided additional supporting documentation in response to our discussion draft report and exit conference. These documents did not affect our findings.

recommendations, including a recommendation to improve management oversight of lease actions to ensure compliance and quality of work products; however, the PMR report did not require a CAP.

When we asked the PMRD why a CAP was not required despite the four recommendations and low entity-level score, the PMRD Director stated that "controls can be in place but not being followed." As a result, the PMRD did not ensure that the identified deficiencies were addressed and corrected.

**Example 2** – In an FY 2022 PMR report, a PBS contracting activity's overall entity-level scorecard result was relatively high at 86 percent, with the transactional-level scores ranging from 0.40 to 2.85. The FY 2022 PMR report included six findings and 10 recommendations but did not require a CAP. The same contracting activity's FY 2017 PMR report had similar findings and recommendations, with lower entity-level scorecard results and higher transactional-level scores; however, the FY 2017 PMR report required a CAP.

Both the FY 2017 and FY 2022 PMR reports identified entity-level findings related to personnel management and workload tracking, as well as transactional-level findings including missing award documents, unsupported price evaluations, and missing price negotiation memorandums. Despite declining transactional-level scoring and similar findings and recommendations identified between the two PMR reports, only the FY 2017 PMR report required a CAP. The PMRD Director asserted that no CAP was required for the FY 2022 PMR report due to the increased entity-level scoring. Without a clear relationship between the entity-level and transactional-level scoring, the findings and high number of recommendations, and the lack of a CAP requirement, it is difficult to determine what areas, if any, the contracting activity needs to address for the future. As a result, the PMRD did not ensure that the contracting deficiencies identified in the transactional-level scores were addressed and corrected.

**Example 3** – In an FY 2022 PMR report, a PBS contracting activity's overall entity-level scorecard result was relatively high at 89 percent, with the transactional-level scores ranging from 0.00 to 3.00. The PMR report included six findings and six recommendations but did not require a CAP.

When asked about the decision to not require a CAP despite six recommendations, the PMRD Director responded that not every recommendation requires a corrective action. The PMRD Director added that "CAP issuance is typically based on the reviewed entity's efforts towards continued improvement...." As a result, the PMRD did not ensure that the findings and recommendations were addressed and corrected.

**Example 4** – We found two PMR reports that had multiple findings but contained no listed recommendations. These PMR reports did require CAPs. The PMRD Director again stated that there is not a 1:1 ratio between findings and recommendations in the PMR reports. In these cases, the PMRD Director stated that the recommendations in the CAPs were developed directly from the PMR reports. However, while the contracting activities developed CAPs as

required, we found that the corrective actions did not address all of the findings, which left some of the issues at risk of being uncorrected.

**Example 5** – We found several instances where the PMR report recommendations were inconsistent with the recommendations included by the contracting activity in the CAP. For example, an FY 2020 PMR report contained eight findings and two specific recommendations for an FAS contracting activity regarding its warrant distribution and contract administration issues related to contractor badging and contracting officer's representative certifications. However, the only finding and recommendation in the CAP addressed high-risk contracts, which was not mentioned in the listed PMR report recommendations. There was no rationale for the difference between the findings and recommendations identified in the PMR report compared to those included in the CAP.

As discussed in the examples above, we found the entity-level and transactional-level scoring often lacked a clear relationship to whether a CAP was required. In the examples above, the PMRD Director indicated that the CAP requirement is based on the entity-level scores that assess a contracting activity's internal controls. However, this is not apparent in our sample. For example, one PMR performed in FY 2021 with an overall entity-level score of 75 percent and transactional-level scoring range of 1.59 to 2.84 did not require a CAP. However, an FY 2020 PMR with an overall entity-level score of 88 percent and transactional-level scoring range of 1.91 to 2.92 required a CAP. As such, the requirement for a CAP is not consistent with the PMR scoring.

Further, because the PMRD has no definition or guidance as to what the entity-level and transactional-level scores in the PMR reports mean, it is difficult to understand the significance of the scores. In interviews with PMR report recipients, some expressed confusion and frustration over the relationship between entity-level and transactional-level scoring.

In addition to the lack of a clear relationship between the scoring and the CAP, we also identified instances where there was not a clear relationship between recommendations reported and whether a CAP was required in response to those report recommendations. We summarized the number of: (1) PMR reports requiring a CAP, (2) PMR report recommendations, and (3) recommendations included in the CAP in *Figure 3* on the next page (see *Appendix B* for more details). As shown in *Figure 3*, only 24 percent of the recommendations in the PMR reports were addressed in the CAPs.

Figure 3. Recommendations Summary for Sampled PMR Reports

	PMR Reports Requiring a CAP	PMR Reports Not Requiring a CAP	Totals
Number of Sampled PMR Reports	12	13	25
Number of PMR Report Recommendations	61	60	121
Number of Recommendations Included in the CAP	29	0	29
Percentage of PMR Report Recommendations Included in the CAP	48%	0%	24%

The PMRD could not provide any written guidance related to when a CAP is required or how contracting activities are to address recommendations that are not included in a CAP. In interviews with PMR report recipients, some expressed confusion and frustration over the lack of correlation between recommendations and whether corrective actions are required.

In sum, the lack of a clear relationship between the PMR scorecard results, findings, recommendations, and whether corrective actions are required limits the effectiveness of the PMR reports. By not requiring corrective action for findings and recommendations in PMR reports, weaknesses or issues in GSA contracting activities—or contracts themselves—may not be addressed.

As a result, the PMRD should strengthen its reporting function by more clearly defining the PMR scoring system and its relevance to the PMR report findings and recommendations. The PMR reports should also clearly identify the findings and recommendations, including whether corrective action is required to address each finding, and ensure that all required corrective actions are included in a CAP and implemented.

# Finding 2 – The PMRD does not ensure that all supporting documentation for CAPs is maintained in the appropriate system.

The PMRD's Standard Operating Procedures - PMRD Corrective Action Plan (CAP) requires CAPs and all supporting documentation to be entered and maintained within the Internal Control Audit Tracking System (ICATS). ICATS is GSA's central repository for records management and tracking of corrective actions. However, the PMRD does not ensure that all supporting documentation for corrective actions taken in response to PMR findings and recommendations is maintained in ICATS.

Of the 12 PMR reports we sampled that required CAPs, six of the CAPs did not have complete supporting documentation in ICATS.<sup>4</sup> The missing documentation is listed on the next page:

<sup>&</sup>lt;sup>4</sup> Some of the six CAPs had more than one documentation deficiency.

- Five CAPs had missing or incomplete supporting documentation (i.e., missing documents to support that a corrective action was taken, or the wrong attached documents were uploaded into ICATS).
- One CAP did not have CAP extension due date requests and approvals of the extensions maintained within ICATS.
- One CAP had none of the CAP-supporting documentation in ICATS.

After we requested the missing documentation, the PMRD was able to provide it. The PMRD Deputy Director stated that the information was found on the division's shared Google Drive. However, as required in the PMRD's internal standard operating procedures, all documentation supporting the completion of each CAP step should be maintained within ICATS because it is GSA's central repository for records management and tracking of corrective actions.

To address this deficiency, the PMRD should conduct training and oversight to ensure that proper administration and closeout of CAPs are completed when all supporting documentation is submitted.

## **Conclusion**

GSA relies on its PMR process as a critical internal control to monitor its acquisition programs and evaluate if they are operating effectively, efficiently, and in compliance with applicable policies, regulations, and procedures. However, the PMRD should strengthen its PMR reporting process to more effectively identify deficiencies and ensure corrective actions are taken. We found that PMR reports lack a clear relationship between the PMR scorecard results, findings, recommendations, and whether corrective actions are required. By not requiring corrective actions for findings and recommendations in PMR reports, weaknesses or issues in GSA acquisition programs may not be corrected. In addition, we found that the PMRD is not ensuring that all supporting documentation for CAPs is maintained in the appropriate system.

Therefore, the PMRD should: (1) strengthen its policies and procedures related to PMR scoring and implementation of corrective actions and (2) conduct training on the administration and closeout of CAPs.

#### Recommendations

We recommend that the OGP Associate Administrator:

- 1. Strengthen the PMRD's policies and procedures to:
  - a. More clearly define the PMR scoring system and its relevance to the PMR report findings and recommendations;
  - b. Clearly identify the findings and recommendations in the PMR report, including whether corrective action is required to address each finding; and
  - c. Ensure all required corrective actions are included in a CAP and implemented.
- 2. Perform training and oversight to ensure proper administration and closeout of CAPs.

#### **GSA Comments**

In his response to our report, the OGP Associate Administrator agreed that improvements can be made in the PMRD's reporting to clarify when a CAP is required. OGP's response can be found in its entirety in *Appendix C*.

# Appendix A – Objective, Scope, and Methodology

#### **Objective**

This audit was included in our *Fiscal Year 2023 Audit Plan*. Our audit objective was to determine whether the OGP's PMR process effectively identifies, assesses, reports, and corrects internal control deficiencies in accordance with applicable policies, regulations, and procedures.

#### **Scope and Methodology**

The scope of our audit was limited to PMRs conducted from FY 2020 through FY 2023.

To accomplish our objective, we:

- Reviewed the PMRD's policies, processes, and procedures related to PMRs;
- Reviewed public laws and guidance related to conducting PMRs;
- Reviewed prior GSA Office of Inspector General audit reports to identify significant issues that may affect the current audit;
- Reviewed and evaluated PMR reports and internal documentation, including checklists and the PMR Tool;
- Obtained and reviewed relevant file documentation related to our judgmental sample of 25 PMR reports;
- Conducted interviews with FAS and PBS personnel related to 6 of our 25 sampled PMR reports; and
- Held discussions with PMRD officials to understand the PMR process.

#### **Data Reliability**

We assessed the reliability of the list of PMRs conducted from FY 2020 through FY 2023 by comparing it to the annual summaries in the PMR newsletters. We determined that the data was sufficiently reliable for the purposes of this audit.

## Sampling

We selected a judgmental sample of 25 of the 54 PMRs that were conducted from FY 2020 through FY 2023. Our sample targeted a mix of both traditional and special PMRs with and without CAPs to address our audit objective. Traditional PMRs are regular maintenance checkups and general-in-nature reviews. Special PMRs are strategic, narrowly focused, and requested by the Head of Contracting Activity or other Agency senior leaders.

For the same period, we also judgmentally sampled one CAP out of a population of three where a CAP was present but did not have a corresponding PMR. We found no issues associated with this CAP. This evidence was used to determine how the PMRD identified, assessed, corrected,

and reported on internal control deficiencies for contracting activities. Our sample design did not include sample sizes that would allow for projection to the population; however, it allowed us to sufficiently address our audit objective.

#### **Internal Controls**

We assessed internal controls significant within the context of our audit objective against GAO-14-704G, Standards for Internal Control in the Federal Government. The methodology above describes the scope of our assessment, and the report findings include any internal control deficiencies we identified. Our assessment is not intended to provide assurance on GSA's internal control structure as a whole. GSA management is responsible for establishing and maintaining internal controls.

#### **Compliance Statement**

We conducted the audit between August 2023 and October 2024 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 audit objective. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objective.

# Appendix B – Sampled PMR Results for Fiscal Years 2020 through 2023

Fiscal Year	Contracting Activity	Overall Entity-Level Scorecard Results (%)	Transactional- Level Scoring Range	CAP Required	Number of PMR Report Recommendations	Number of CAP Recommendations
2020	Region 1 FAS	88	1.91-2.92	Yes	2	1
2020	Region 3 FAS	83	1.01-3.00	Yes	0	3
2020	Region 7 FAS	84	0.78-2.95	No	3	N/A
2020	Region 7 PBS	80	0.88-2.91	No	2	N/A
2020	PBS Electronic Contract File (ECF)	Note 1	0.00-3.00	No	2	N/A
2020	Office of Administrative Services ECF	Note 1	0.00-3.00	No	5	N/A
2020	FAS ECF	Note 1	0.75-3.00	Yes	3	3
2021	Region 5 FAS	86	0.95-3.00	Yes	8	1
2021	Region 9 FAS	72	1.59-2.47	Yes	0	3
2021	Region 9 PBS	82	0.86-2.86	No	7	N/A
2021	Region 5 PBS Leasing	75	1.59-2.84	No	4	N/A
2021	PBS Construction Management Review	Note 1	0.00-3.00	No	3	N/A
2021	FAS General Supplies and Services Order Management Services	Note 1	N/A	No	4	N/A
2021	PBS Energy Savings Performance Contract	Note 1	0.00-3.00	Yes	6	Note 2
2021	PBS Lease Modification 889 Review	Note 1	0.30-3.00	Yes	3	2
2022	Region 11 FAS	83	1.36-2.59	Yes	4	2
2022	Region 4 PBS	86	0.40-2.85	No	10	N/A
2022	Region 11 PBS	89	0.00-3.00	No	6	N/A
2022	Region 1 PBS Leasing	71	1.09-2.80	Yes	17	4
2022	Internal Information Technology Acquisitions	Note 1	N/A	No	3	N/A
2022	Multiple Award Schedule Rejections and Withdrawals	Note 1	N/A	Yes	6	6
2023	FAS Technology Transformation Services	67	0.18-2.37	Yes	7	4
2023	Region 7 PBS Leasing	89	1.05-2.55	No	5	N/A
2023	Region 8 PBS Leasing	84	0.67-2.70	No	6	N/A
2023	PBS Performance-Based Acquisitions	Note 1	0.45-1.84	Yes	5	Note 2
	Total Number of Recommendations:					29

### Notes:

- 1. These special PMRs were strategic, narrowly focused, and requested by the Head of Contracting Activity or other Agency senior leaders. Special PMRs generally do not include an entity-level assessment; therefore, the entity-level scoring is not applicable.
- 2. A CAP was originally required because of the PMR; however, the CAP was canceled or absorbed into a GSA Office of Inspector General's CAP for a related subject audit.

# Appendix C - GSA Comments

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May 13, 2025

MEMORANDUM FOR MICHELLE L. WESTRUP

REGIONAL INSPECTOR GENERAL FOR AUDITING

HEARTLAND REGION AUDIT OFFICE (JA-6)

FROM: LARRY ALLEN Larry Allen

ASSOCIATE ADMINISTRATOR

OFFICE OF GOVERNMENT-WIDE POLICY (M)

SUBJECT: The Office of Government-wide Policy's Procurement Management Review Division Should Strengthen Its Reporting Function, dated March 11, 2025, Assignment Number A230074

The Office of Governmentwide Policy appreciates the opportunity to review the Office of Inspector General's (OIG) draft report detailing findings from the OIG's review of the Procurement Management Review Division's effective management of GSA's internal controls environment and measures to correct deficiencies identified in OIG Audit Number A230074, issued on April 23, 2025. GSA is committed to acquisition excellence, including ensuring that the agency has a sound controls environment where early detection of procurement and programmatic issues are identified and addressed.

We appreciate the OIG's partnership in assessing the processes and procedures of OGP's PMR Division around the acceptance of corrective actions plans, response to review findings, and alignment of supporting activities to the action steps. As highlighted in the discussion draft, while PMRD's general processes are sound, we agree improvements can be made in our reporting to clarify when a corrective action plan is required.

Upon issuance of the final audit report, OGP will establish a Corrective Action Plan which will outline the specific actions to be taken in support of the implementation as well as the estimated dates for completion of those actions.

If you have any questions, please contact Nicholas West, Acting Director GSA Office of Acquisition Policy, Integrity & Workforce, at <a href="mailto:nicholas.west@gsa.gov">nicholas.west@gsa.gov</a>.

# Appendix D – Report Distribution

Acting GSA Administrator (A)

GSA Deputy Administrator (AD)

Associate Administrator (M)

Deputy Associate Administrator (M1)

Chief of Staff (M1)

Procurement Management Review Division Director (MVAA)

Chief Financial Officer (B)

Acting Deputy Chief Financial Officer (B)

Office of Audit Management and Accountability (BA)

Assistant Inspector General for Auditing (JA)

Deputy Assistant Inspector General for Acquisition Audits (JA)

Deputy Assistant Inspector General for Real Property Audits (JA)

Director (JAO)



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