

Commonwealth of Pennsylvania
Department of Corrections
State Correctional Institution at Albion
July 1, 2005, to October 26, 2007
Performance Audit



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January 28, 2008

The Honorable Edward G. Rendell
Governor
Commonwealth of Pennsylvania
Harrisburg, Pennsylvania 17120

Dear Governor Rendell:

This report contains the results of a performance audit of the State Correctional Institution at Albion of the Department of Corrections from July 1, 2005, to October 26, 2007. The audit was conducted under authority provided in Section 402 of The Fiscal Code and in accordance with *Government Auditing Standards* as issued by the Comptroller General of the United States.

The report details our audit objectives, scope, methodology, findings, and recommendations. The report notes that the institution remains out of compliance with the fire safety recommendations made in our two prior audit reports. The institution still has not conducted the required fire drills or provided the required training to fire emergency response team members. We discussed the contents of the report with the management of the State Correctional Institution at Albion, and all appropriate comments are reflected in the report.

We appreciate the cooperation extended to us by the management and the staff of the State Correctional Institution at Albion and by others who provided assistance during the audit.

Sincerely,

JACK WAGNER
Auditor General

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Background Information

Department of Corrections

The Pennsylvania General Assembly created the Pennsylvania Bureau of Corrections with the passage of Act 408 of July 29, 1953, P.L. 1428, Section I. In January 1981, responsibility for bureau operations moved from the authority of the Attorney General to the Office of General Counsel. On December 30, 1984, the Governor signed Act 245 of 1984,¹ elevating the Bureau of Corrections to cabinet level status as the Department of Corrections (Department).

The main purpose and goal of the Department is to maintain a safe and secure environment for both the incarcerated offenders and the staff responsible for them. In addition, the Department believes that every inmate should have the opportunity to be involved in a program of self-improvement.

The Department is responsible for all adult offenders serving state sentences of two years or more. As of June 30, 2007, the Department operated 24 correctional institutions, 1 regional correctional facility, 1 motivational boot camp, 1 training academy, and 15 community pre-release centers throughout the Commonwealth of Pennsylvania.

Inmate General Welfare Fund

The Department centrally controls an Inmate General Welfare Fund (IGWF) to provide custodial services for inmate personal monies and to generate funds for recreational activities. Each correctional institution within the Department maintains accounting records for its own portion of the IGWF. The institutions' funds are consolidated for control and investment purposes and administered by a central council.

State Correctional Institution at Albion

The State Correctional Institution at Albion is a medium security facility for adult male offenders. The facility, opened in June 1993, is located in the borough of Albion, Erie County, approximately 25 miles southwest of Erie.

¹ 71 P.S. § 310.1.

Background Information

Albion's mission is to protect the citizens of the Commonwealth by managing the facility in a safe, secure, and humane manner. This includes offering treatment services at professionally accepted standards to prepare committed individuals to return to society as contributing and productive members.

Albion is situated on approximately 290 acres of land with 63 acres located inside a double 14-foot fence topped with razor wire. The following schedule presents select unaudited Albion operating statistics compiled by the Department for the years ended June 30, 2006, and 2007:

	2006	2007
Operating expenditures (rounded in millions) ²		
State	\$49.62	\$51.97
Federal	<u>.02</u>	<u>.02</u>
Total	<u>\$49.64</u>	<u>\$51.99</u>
Inmate population at year-end	2,251	2,307
Capacity at year-end	1,900	1,900
Percentage of capacity at year-end	118.5%	121.4%
Average monthly inmate population	2,244	2,287
Average cost per inmate ³	\$22,120	\$22,736

² Operating expenditures were recorded net of fixed asset costs, an amount that would normally be recovered as part of depreciation expense.

³ Average cost was calculated by dividing the operating expenditures by the average monthly inmate population.

Objectives, Scope, and Methodology

The objectives for the current audit were selected from four general areas: Expense Management, including a review of Albion's maintenance expenses and work order administration; Facility Safeguards, including a review of Albion's accreditation; Personnel Management, including evaluations of Albion's staffing levels and complaint management; and Client Management, including an assessment of Albion's compliance with Department and internal policies and procedures regarding the IGWF. The audit also included an update on the status of prior audit findings and recommendations regarding procurement, travel expenses, and fire safety.

To accomplish these objectives, auditors reviewed Department policy and procedures regarding facility maintenance,⁴ reviewed the American Correctional Association and the Commission on Accreditation for Corrections accreditation and visiting committee reports and associated correspondence for the audit conducted in March 2005. In addition, auditors evaluated the Department's and institution's policy regarding equal employment opportunity,⁵ and the current collective bargaining agreements for the institution's seven active unions. Auditors also reviewed the Department's accounting manual and policies and procedures regarding the administration of the IGWF.⁶

Auditors interviewed appropriate management and staff, including two facility maintenance managers, the Deputy Superintendent for Security, the Human Resource Director, and two professionals from the Human Resources Department, the local Vice President for the Pennsylvania State Corrections Officers Association, and the local representative for the Service Employees International Union. Auditors also interviewed Albion accounting personnel responsible for administration of the Inmate General Welfare Fund.

To accomplish the objective to assess the adequacy of controls over maintenance expenditures including an assessment of the economy and efficiency of operations, as well as work order administration, auditors analyzed the documentation associated with 38 of 6,458 work orders completed between January 1, 2007, and August 16, 2007, examined the documentation associated with 29 of 784 corrective work orders open on August 16, 2007, and examined the supporting documentation for 37 maintenance credit card purchases made during the months of January, April, and June 2007.

To accomplish the objective to evaluate the existence and efficacy of measures taken by Albion to remedy any deficiencies noted in the most recent standards compliance audit,

⁴ Department of Corrections, Policy Number 10.2.1, "Facility Maintenance," October 10, 2005.

⁵ Department of Corrections, Policy Number 1.6.1, "Equal Employment Opportunity," February 8, 2005.

⁶ Ibid.

Objectives, Scope, and Methodology

auditors examined Albion's responses to the issues of noncompliance detailed in the aforementioned audit report.

To accomplish the objective to assess the sufficiency of Albion's staffing levels and to determine whether the institution adequately addressed position vacancies auditors reviewed the Department's corrections officer work force survey dated September 2005, analyzed the Department's 2006 individual staffing reviews for food service, nursing, maintenance, and business office personnel, and examined Albion's detailed complement and wage report dated September 5, 2007, and vacancy report dated September 20, 2007.

To accomplish the objective to determine the existence and effectiveness of employee complaint systems at Albion, auditors examined the logs of union grievances filed by institution employees between January 1, 2006, and August 31, 2007, analyzed the documentation for 40 of the 158 grievances filed between January 1, 2006, and August 31, 2007, reviewed the 2006 and 2007 Joint Area Committee hearing schedules for unresolved union grievances. The auditors also examined the equal employment opportunity record of complaints for the 2005 and 2006 calendar years, reviewed the minutes of the meetings of seven of the institution's ten units from July 1, 2005, to June 30, 2007, and reviewed the employee recommendations and management responses associated with the institution's employee suggestion program from November 2005 through August 2007.

To accomplish the objective to determine whether Albion operated the IGWF in accordance with Department policies and procedures and to assess the adequacy of relevant management controls, auditors reviewed the minutes of the September 12, 2007, meeting of the IGWF Inmate Committee, examined the balance sheets and income statements for the fiscal years ended June 30, 2006, and 2007, and analyzed the June 2006 and June 2007 bank statements and associated reconciliation forms for accuracy. The auditors also evaluated the timeliness of management's review of 24 monthly bank reconciliations conducted from July 2005 through June 2007, examined the supporting documentation for 55 of 9,225 disbursements transacted from July 1, 2005, through June 30, 2007, and reviewed the supporting documentation for 37 of 599 receipts deposited from July 1, 2005, through September 30, 2007.

To obtain an understanding of the status of prior audit findings and recommendations regarding procurement, travel expenses, and fire safety, auditors performed tests as part of, or in conjunction with, the current audit, and had discussions with appropriate institution personnel regarding the prior audit findings.

The scope of the audit was from July 1, 2005, to October 26, 2007, unless indicated otherwise in the body of the individual report sections.

Audit Results

Maintenance Operations

Albion houses over 2,300 inmates and employs over 500 workers, including 38 employees in its maintenance department. The physical plant consists of 21 major buildings within the perimeter fencing.

The institution's maintenance department consists of 12 specialty trade shops, including the electrical, carpentry, and paint shops. Albion uses inmate labor to support the maintenance operations and to provide training. The primary objective of the maintenance department is to provide routine and preventive maintenance for the facility. According to Department policy, construction projects are subordinate to this primary function.⁷

In May 2006, Albion implemented new computer software to administer its work order system. This new software enables the institution to request, prioritize, assign, log, and track work orders electronically.

Finding 1 – Albion effectively controlled its maintenance expenditures and work order system.

Albion adequately controlled its maintenance expenditures and effectively administered its work order system. The review of 37 purchasing card disbursements and 38 processed work orders did not disclose any unnecessary or exorbitant maintenance expenditures. Additionally, purchasing documents, receiving documents, and invoices accompanied the 37 sampled purchasing card disbursements. The examination of the 38 processed work orders also disclosed that the maintenance department completed its work in a timely manner. On average, the maintenance department completed work orders in seven days and a median of four days after receiving the work order requests. The maintenance department documented the labor and material costs for the sampled work orders. Lastly, none of the 29 sampled open work orders involved emergency safety or security issues.

⁷ Department of Corrections, Policy Number 10.2.1, "Facility Maintenance," October 10, 2005.

Audit Results

Accreditation

The American Correctional Association (ACA) and the Commission on Accreditation for Corrections (CAC) are private, non-profit organizations that administer the only national accreditation program for all components of adult and juvenile corrections. The purpose of this voluntary accreditation program is to promote improvement in the management of correctional facilities through the ongoing development and revision of relevant, useful standards.⁸

Although the accreditation process is a voluntary program, it affords participating agencies the opportunity to evaluate their operations against national standards, to remedy deficiencies, and to upgrade the quality of programs and services. A major component of the accreditation process is the standards compliance audit conducted by a visiting committee appointed by the ACA. The purpose of this audit is to measure operations against CAC standards based on documentation provided by the facility, facility tours, interviews with staff and inmates, and reviews with facility administrators. The audit report submitted to the CAC describes audit activities and findings and examines issues or concerns that may affect the quality of life and services in an agency or facility. The visiting committee narrative report also includes comments from interviews conducted with inmates and staff, as well as a detailed explanation of all noncompliant and inapplicable standards.⁹

Finding 2 – Albion appropriately responded to the issues noted in the most recent standards compliance audit.

In August 2005, the ACA and CAC awarded a three-year accreditation to Albion as a result of the audit conducted in March 2005. According to the visiting committee report, Albion complied with 100 percent of the 62 applicable mandatory standards and 450, or 99.3 percent, of the 453 applicable non-mandatory standards. The CAC granted discretionary compliance to Albion for one non-mandatory standard and waivers for two additional non-mandatory standards.

The CAC waived Albion's requirement to develop a plan of action to remedy the visiting committee's finding regarding the institution's failure to provide access to operable showers at a minimum ratio of one shower for every eight inmates. Albion's request for the waiver indicated that inmates had frequent access to showers. The institution restricted inmate time in the shower to a maximum of 20 minutes and only closed the showers for cleaning.

The CAC also granted a waiver regarding its finding that Albion's inmate population exceeded the institution's rated bed capacity. Albion indicated that the Commonwealth was in statewide non-compliance at the direction of the Department.

⁸ Department of Corrections, Policy Number 1.1.2, "Accreditation Program and Annual Inspections," March 16, 2007.

⁹ www.aca.org View Date: July 19, 2007.

Finally, the CAC reported that Albion inmates held in disciplinary detention for greater than 60 days did not receive the same program services and privileges as those in administrative segregation and protective custody. Albion indicated that the Department directed these practices/policies. In an undated memorandum to all Commonwealth correctional institution superintendents, the Department stated the following:

...It is our philosophy that inmates who have “earned” disciplinary detention for periods longer than 60 days should not be rewarded for their poor behavior. This should not be interpreted to mean that inmates are not receiving ALL of their basic needs. Healthcare, food service, hair care, educational, access to courts, etc. are all provided services to inmates housed in disciplinary, administrative, and protective custody. Items such as televisions, etc. will not be provided to inmates housed in disciplinary detention for 60 days or longer.

Accordingly, the CAC granted discretionary compliance for this statewide issue of noncompliance.

Staffing Levels

The Department periodically conducts work force surveys in order to assess each institution's security staffing requirements. The Department most recently conducted its corrections officer manpower survey at Albion in September 2005. During 2006, the Department developed staffing requirements/plans for additional institution departments, including maintenance, food service, the business office, and nursing. Overall, the Department developed proposed staffing levels that addressed 434 of the institution's 599 salaried and wage positions.

Finding 3 – Albion's employee complement satisfied Department requirements, and the institution adequately addressed its position vacancies.

Albion's employee complement satisfied Department requirements. At September 5, 2007, the complement was generally commensurate with the staffing levels proposed in the individual Department staffing surveys conducted in 2005 and 2006.

Additionally, the institution adequately addressed its position vacancies. Internal reports disclosed that 14 of Albion's 561 available salaried positions and 12 of its 38 available wage positions were vacant at September 20, 2007. Personnel from Albion's Human Resources Department indicated that Albion was in the process of actively addressing all of the above vacancies. As of October 2, 2007, Albion had taken the following steps:

Audit Results

<u>Disposition</u>	<u>Nr of Positions</u>
Institution was reclassifying positions	2
Institution was waiting for Civil Service determination or other certified candidate listing	4
Interviews were completed and selection was pending	4
Vacancy was to be filled by trainee	3
Institution was processing appointment letter	1
Institution was waiting for department approval to fill positions	<u>12</u>
Total number of addressed vacancies	<u>26</u>

As a result of the actions taken by the Human Resources Department, we concluded that Albion effectively managed its staffing levels.

Employee Complaints

Albion employs over 600 personnel, including corrections officers, clerical staff, teachers, and nurses. Seven different unions represent 487 of these employees. Effective institution management provides for complaint systems where employees voice grievances and the facility responds to those grievances.

Finding 4 – Albion established effective employee complaint systems.

Albion established both informal and formal employee complaint processes. The institution provided employees a suggestion box, as well as the opportunity to voice complaints at the monthly meetings for the institution's ten units. Moreover, the collective bargaining agreements for each of the institution's seven active unions established formal procedures for resolving employee grievances, including an initial meeting between union representatives and Albion management and then, if necessary, a meeting of the Joint Area Committee. The Joint Area Committee, composed of an equal number of union representatives and Commonwealth personnel, had the authority to render final and binding decisions. Finally, the agreements provided for formal arbitration for those issues unresolved by the Joint Area Committee.

At September 30, 2007, the institution's seven unions represented approximately 487 staff members. Between January 1, 2006, and August 31, 2007, members of these seven unions filed 158 grievances, as illustrated in the following table:

Audit Results

Union	Represented Employees	Number of Employees	Number of Grievances
Pennsylvania State Corrections Officers Association	Corrections Officers, Food Service Instructors	367	150
American Federation of State, County and Municipal Employees	Clerical Staff, Licensed Practical Nurses	61	4
Federation of State Cultural and Educational Professionals	Vocational Guidance Counselors	1	0
Service Employees International Union	Registered Nurses	12	1
Pennsylvania Social Services Union	Correctional Guidance Counselors	25	2
Correctional Institution Vocation Education Association	Teachers	19	1
Office of Professional Employees International Union (OPEIU)	Registered Nurse Supervisors	<u>2</u>	<u>0</u>
	Total	<u>487</u>	<u>158</u>

The review of documentation for 40 of the 158 grievances filed between January 1, 2006, and August 31, 2007, disclosed that the complaint process reasonably and timely addressed grievances. The initial meetings between union representatives and Albion management were generally scheduled during the month immediately subsequent to the grievance filing date. Joint Action Committee meetings were also regularly scheduled.

Inmate General Welfare Fund

IGWF consists of non-appropriated funds that are locally controlled and administered. The fund serves as a depository for inmates' personal monies and for revenues generated by inmate-related enterprises. The profits from inmate-related enterprises are used to purchase items or activities that benefit the inmates but are not deemed inmate necessities by the Department.

The Department has developed policies and procedures for the administration of the IGWF.¹⁰ These policies and procedures specify the required approvals, nature, and processing of fund expenditures, as well as the collection and safeguarding of monies generated by IGWF revenue-producing shops. Department policies and procedures also identify the financial reports to be prepared by the individual correctional facility, including monthly balance sheets and income statements for all fund activities.

¹⁰ Department of Corrections, Policy Number 3.1.1, "Fiscal Administration," June 16, 2005, and revised April 27, 2007.

Audit Results

Finding 5 – Albion complied with Department policies and procedures and effectively managed the IGWF.

Albion maintained a single checking account covering IGWF activities in accordance with Department policies and procedures. Albion accounting personnel obtained the proper approvals and processed the 55 sampled disbursements and 37 sampled receipts accurately and timely. Additionally, the 55 disbursements were supported by cash slips, approved purchase orders, and invoices and met the definition of allowable transactions. The accountant accurately and timely conducted monthly bank reconciliations, which were then reviewed by the business manager. The institution's business office personnel prepared the required IGWF financial statements. Albion adequately segregated the check preparation, check signing, and bank statement receipt and reconciliation duties. Accordingly, we concluded that internal controls over the institution's IGWF were effective.

According to Albion management, the institution established an Inmate General Welfare Committee comprised of institution employees and inmate representatives. The purpose of the committee was to provide input into IGWF activities. In addition, the institution posted a monthly statement of fund activities on all inmate bulletin boards in compliance with Department policies and procedures.

Status of Prior Audit Findings and Recommendations

Objectives and Methodology

The following is a summary of the findings and recommendations presented in our audit report for July 1, 2002, to July 13, 2005, along with descriptions of Albion's disposition of the recommendations.

Prior Audit Findings

Prior Finding I-2 – Albion did not segregate employee duties in the procurement process.

Albion did not properly segregate the duties assigned to seven employees in the SAP R/3 Materials Management module. The institution assigned its two purchasing agents, four warehouse employees, and one food service employee the ability to create purchase orders and to receive goods. The assignment of purchasing and receiving roles in the SAP R/3 Materials Management module must be segregated to reduce the risk of misappropriation of Commonwealth funds.

We recommended that the Department and Albion management evaluate the duties assigned to each institution employee in the SAP R/3 Materials Management module and make all necessary changes to optimize the segregation of duties.

Status:

The current audit revealed that the Department and Albion implemented the prior report's recommendations. In June 2005, the Commonwealth issued a policy that required all SAP roles to be uniformly assigned to positions instead of employees in order to ensure adequate separation of duties.¹¹ In June 2007, the Commonwealth's Bureau of Integrated Enterprise System (IES) completed the associated "roles to position implementation." SAP roles directly assigned to employees were removed and composite roles were assigned to positions.¹² Our review of Albion's role assignments in October 2007 disclosed that the institution's two purchasing agents, food service employee, and four warehouse employees no longer had the ability to create purchase orders and receive goods or services within the SAP R/3 Materials Management module. The institution's two purchasing agents could

¹¹ Commonwealth of Pennsylvania Governor's Office, Management Directive Number 205.37, "Role Assignment, Security, and Internal Control Maintenance," June 13, 2005.

¹² <http://www.ies.state.pa.us/imaginepa/cwp/view.asp?Q=211326&a+7> View Date: October 17, 2007.

Status of Prior Audit Findings and Recommendations

requisition and purchase goods and services, but they could no longer receive the goods or services in the SAP R/3 system. Moreover, the warehouse employees could only receive goods and services within the SAP R/3 module.

In a new development, the Department recently role-mapped Albion employees to the new SRM procurement module in July 2007. Since Albion is only now in the process of learning this new module, the Department of the Auditor General will defer testing this new module until the next scheduled audit of Albion.

Prior Finding III-2 – Albion incurred \$10,100 of additional travel expense and did not collect \$600 in maintenance charges or any fair market rental payments when it approved the continued occupancy of Commonwealth housing by a former employee for 80 days after retirement.

The prior audit reported that Albion approved its former Deputy Superintendent's request to remain in Commonwealth housing for more than two months following retirement. As a result, housing on Albion grounds was not immediately available for the retired Deputy Superintendent's replacement, and the new Deputy Superintendent incurred transfer travel expenses (lodging, personal mileage, and subsistence) that totaled approximately \$10,100. Additionally, Albion did not charge the retired Deputy Superintendent any fee for the continued lodging on institution premises or report the value of the additional lodging to the Internal Revenue Service (IRS). Albion did not receive approximately \$600 in maintenance charges or any fair market rental payments from the retired Deputy Superintendent for the 80 days of continued occupancy in the Commonwealth residence.

We recommended that Albion manage its resources effectively and efficiently and only provide lodging to authorized, current and active employees. We also recommended that Albion management charge and collect payment from the retired Deputy Superintendent for the lodging provided after his retirement. Finally, we recommended that Albion notify the IRS of the value of any former employee's free extended lodging arrangements.

Status:

The current audit disclosed that Albion complied with the recommendations of the prior report. Interviews with Albion management and the review of payroll records disclosed that current and active Department employees continuously occupied the three Commonwealth residences on Albion grounds from July 2005 through May 2007. Each of the occupants paid maintenance charges for the lodging. Additionally, in July 2005, Albion collected payment from the former Deputy Superintendent for the lodging provided after his retirement.

Status of Prior Audit Findings and Recommendations

Prior Finding III-3 – Travel expense vouchers did not contain justification for overnight lodging expenses that exceeded the allowable rates.

The prior audit of the supporting documentation for ten travel expense statements submitted by the newly promoted Deputy Superintendent revealed that Albion did not adequately monitor all travel expenses. The institution's Superintendent approved travel expense vouchers that did not contain justification for overnight lodging expenses that exceeded the allowable rates established by Commonwealth guidelines. As a result, Albion paid approximately \$2,900 in overnight lodging expenses without properly documenting justification for the expenses.

We recommended that Albion train its staff regarding the Department's policy regarding allowable lodging and subsistence rates, monitor travel expenses to ensure compliance with Commonwealth policies and procedures, and document the justification for any exceptions to the overnight travel guidelines.

Status:

The current audit disclosed that Albion complied with the recommendations of the prior report. According to institution management, Albion trained its staff regarding the Department's policy regarding allowable lodging and subsistence rates, as well as required documentation. The review of 121 travel transactions from February and May 2007 revealed that lodging and subsistence expenses agreed with the rates established by Commonwealth directives.

Prior Finding IV-1 – Albion still did not conduct the required fire drills or provide the required training to fire emergency response team members.

The two preceding audits reported that Albion did not conduct fire evacuation drills at the required frequency and work shifts. During the 2004 calendar year, the institution did not conduct 2 of 40 required drills in its 10 housing units or any drills during the second shift in five of its ten housing units. Additionally, the two preceding audits noted that Albion did not provide the required fire safety training to fire emergency response team (FERT) members during the fiscal year ended June 30, 2002, as well as during the 2004 calendar year.

We recommended that Albion management enforce Department fire safety guidelines to ensure that the facility conducts the required number of drills on all shifts. We also recommended that institution management enforce Department training guidelines and provide all required training to members of its FERT.

Status of Prior Audit Findings and Recommendations

Status:

In order to follow up on the fire safety deficiencies noted in the prior report, the auditors interviewed Albion's Safety Manager and reviewed the Department's Safety Procedures Manual¹³ and its Staff Development and Training Procedures Manual.¹⁴ The auditors also examined the facility's fire drill records for its ten housing units and the institution's FERT training records for the fiscal year ended June 30, 2007.

The audit disclosed that Albion partially implemented the recommendations of the prior report. The institution conducted fire evacuation drills at least once per quarter and rotated the drills over all shifts in its ten housing units during the fiscal year ended June 30, 2007. However, during the same fiscal year, Albion management did not provide the required 16 hours of fire safety training to any of its 26 FERT members. Only one FERT member received greater than 12 hours of training, while two members did not receive any training hours. The following chart illustrates the training completed by Albion's 26 FERT members during the fiscal year ended June 30, 2007:

<u>Training Hours Received</u>	<u>Nr. of FERT Members</u>	<u>Team Percentage</u>
0 to 4	11	42.3%
5 to 8	9	34.6%
9 to 12	5	19.2%
13 to 16	1	3.9%

Members of the institution's FERT must be trained in fire fighting, smoke control, and rescue techniques in order to reduce the risk of injury to inmates and staff during an emergency. Department policy requires each institution to provide its FERT members 16 hours of fire safety training annually.¹⁵

Recommendation:

For the third time, we recommend that Albion management enforce Department training guidelines to ensure that FERT members receive the required annual training.

Management Comments:

We have completed eight hours of FERT training since the audit. The first training session, we had twenty-two team members complete four hours each at the Franklin Township Training Tower. In conjunction with the Albion Volunteer Fire Department, the State Instructor completed training in Search and Rescue, and Accountability. The second session was just completed from 1400 – 1800 here on grounds on December 12, 2007, with twenty-four members present for four hours

¹³ Department of Corrections, Policy Number 15.1.1, "Safety," July 16, 2003.

¹⁴ Department of Corrections, Policy Number 5.1.1, "Staff Development and Training," December 15, 2003.

¹⁵ Ibid.

Status of Prior Audit Findings and Recommendations

each of training. We completed training on the FERT Policy, responsibilities of the team, Vertical Ventilation on the fire ground, and Firefighting clothing. Those that have failed to attend the training have been dropped from the team. Therefore, we are in compliance with the policy at the current time. Our next scheduled FERT training is on February 13, 2008.

Audit Report Distribution List

This report was initially distributed to the following:

Commonwealth of Pennsylvania

The Honorable Edward G. Rendell
Governor

The Honorable Gibson E. Armstrong
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Senate of Pennsylvania

The Honorable Gerald J. LaValle
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This report is a matter of public record. Copies of this report may be obtained from the Pennsylvania Department of the Auditor General, Office of Communications, 318 Finance Building, Harrisburg, Pennsylvania 17120. If you have any questions regarding this report or any other matter, you may contact the Department of the Auditor General by accessing our Web site at www.auditorgen.state.pa.us.