

**Commonwealth of Pennsylvania**  
**Department of Corrections**  
**State Correctional Institution at Cresson**  
**July 1, 2004, to November 3, 2006**  
**Performance Audit**





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June 28, 2007

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 Cresson of the Department of Corrections for the period July 1, 2004, to November 3, 2006. The audit was conducted under the 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 audit noted that maintenance personnel were not completing maintenance work orders, and other personnel did not complete mandatory training. In addition, as also noted in the prior audit report, dietary personnel did not use the automated inventory tracking system and inmate accounting failed to deduct all monies owed for inmate restitution. The contents of the report were discussed with the officials of the State Correctional Institution at Cresson 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 Cresson 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,<sup>1</sup> elevating the Bureau of Corrections to cabinet level status as the Department of Corrections (DOC).

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

The DOC is responsible for all adult offenders serving state sentences of two years or more. As of June 30, 2006, it 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.

### **State Correctional Institution at Cresson**

The State Correctional Institution at Cresson is a medium security facility for adult male offenders located in the town of Cresson, Cambria County, approximately 10 miles southwest of Altoona. Formerly a Department of Public Welfare facility for the mentally retarded, the institution was transferred to the DOC in 1983. After extensive remodeling and construction, it opened as an adult correctional facility in 1987.

Cresson is accredited as an adult institution by the National Commission on Accreditation for Corrections. According to its facility narrative, Cresson's mission is to protect the public by confining persons committed to its custody in a safe secure facility, and to provide opportunities for inmates to acquire the skills and values necessary to become productive law-abiding citizens, while respecting the rights of crime victims.

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<sup>1</sup> 71 P.S. § 310.1.

## **Background Information**

Cresson's physical plant encompasses 505 acres of land, 53 of which are located inside two 14-foot high perimeter fences. Six permanent cellblocks, two modular cell units, one restricted housing unit, and a mental health unit provide housing for the inmates. The following schedule presents selected unaudited Cresson operating data compiled for the years ended June 30, 2004, 2005 and 2006.

	2004	2005	2006
Operating expenditures (rounded in thousands) <sup>2</sup>			
State	\$39,967	\$40,911	\$43,886
Federal	<u>260</u>	<u>31</u>	<u>299</u>
Total	<u>\$40,227</u>	<u>\$40,942</u>	<u>\$44,185</u>
Inmate population at year-end	1,342	1,313	1,336
Capacity at year-end	1,200	1,200	1,200
Percentage of capacity at year-end	111.8%	109.4%	111.3%
Average monthly inmate population	1,334	1,323	1,324
Average cost per inmate <sup>3</sup>	\$30,150	\$30,956	\$33,378

<sup>2</sup> Operating expenditures are recorded net of fixed asset costs, an amount that would normally be recovered as part of depreciation expense.

<sup>3</sup> Average cost was calculated by dividing the operating expenditures by the average monthly inmate population.

## *Objectives, Scope, and Methodology*

The auditors selected audit objectives for the current audit from three areas: maintenance expense, training, and contracts. In addition, auditors determined the status of recommendations made during the prior audit of Cresson. The specific objectives for this audit were:

- To determine the economy and efficiency of maintenance operations and the accuracy of maintenance expenditure transactions. (Findings 1 and 2)
- To determine if Cresson complied with employee training requirements. (Findings 3 and 4)
- To determine if Cresson had adequate internal controls to ensure that service purchase contracts were properly monitored and that they complied with applicable policies and procedures. (Finding 5)
- To determine the status of management's corrective actions in the areas of cash receipts, fixed assets, inmate progress reports, advancement account checks, Visa purchase transactions, purchase transactions processed through the SAP R/3 materials management module, storeroom inventory controls, segregation of duties over purchasing, and inmate restitution. (Status of Prior Audit Findings and Recommendations)

The scope of the audit was from July 1, 2004, to November 3, 2006, unless indicated otherwise in the body of the individual report findings.

To accomplish these objectives, auditors reviewed DOC policies for facility maintenance,<sup>4</sup> staff development and training,<sup>5</sup> and the Commonwealth's field procurement manual sections pertaining to contract management.<sup>6</sup> To update their understanding of the prior audit's findings, they also reviewed the DOC's written response, dated April 21, 2006, replying to the Auditor General report.

Auditors interviewed Cresson management and staff, including those responsible for maintenance operations, maintenance record keeping, training, and contract activity. They also interviewed Cresson personnel from the mailroom, business office, inmate employment,

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<sup>4</sup> Commonwealth of Pennsylvania, Department of Corrections, Policy Number 10.2.1 Facility Maintenance, October 10, 2005.

<sup>5</sup> Commonwealth of Pennsylvania, Department of Corrections, Policy Number 5.1.1, "Staff Development and Training," December 15, 2003.

<sup>6</sup> The Commonwealth of Pennsylvania; Governor's Office; Field Procurement Manual; Number M215.3.

## **Objectives, Scope, and Methodology**

warehouse, dietary, stockroom, and inmate accounting to obtain an updated understanding of the progress in implementing the prior audit's recommendations and other corrective action to resolve the prior findings.

For the audit of maintenance expense, auditors randomly selected and tested 20 of 226 completed maintenance work orders from June 16, 2006, to July 15, 2006, randomly selected and tested 10 of 56 work orders identified as issued/not completed as of October 11, 2006, and randomly selected and tested four maintenance Visa credit card purchases from the fiscal year ended June 30, 2006.

For the audit of training, auditors selected 8 of 87 instructors' certification documents to determine if they possessed the required certifications, randomly selected and tested 35 of 474 employees training records for the fiscal year ended June 30, 2006, and randomly selected and tested 3 of 20 DOC Emergency Response Team (CERT) and 3 of 38 Fire Emergency Response Team (FERT) members training records for the fiscal year ended June 30, 2006.

For the audit of contracts, auditors reviewed the contracts, bids, and purchase order documentation for 2 of 29 service contracts that exceeded the monetary threshold for competitive bidding. The two contracts reviewed included waste removal and fire alarm system maintenance and emergency repairs. The auditors also compared the approved invoices for the two service contracts to expenditure ledger entries from July 1, 2005, to June 30, 2006 for accuracy.

Auditors also performed tests, as necessary, in prior audit areas to substantiate their understanding of Cresson management's progress in resolving the prior audit findings.

## *Audit Results*

### **Maintenance Expense**

Cresson Maintenance Department's primary objective is to provide routine and preventive maintenance. Cresson is required to maintain a written preventive physical plant maintenance plan that includes provisions for emergency repairs and replacement in life-threatening situations. Cresson implemented a new computer maintenance work order system in June 2006 that enabled the institution to request, prioritize, assign, log, and track work orders electronically.

#### **Finding 1 – The maintenance department complied with policies and procedures for credit card purchases.**

We determined that all four maintenance Visa credit card purchases tested were completed in accordance with policies and procedures. The requests were properly approved; justifications were appropriate and all required documentation, such as, agency purchase requests, invoices, receiving reports were included.

#### **Finding 2 – Cresson had weaknesses in its work order system.**

A proper maintenance work order system is necessary to ensure that management maintains a safe, secure, and healthy work environment for staff, inmates, and visitors. The system tracks the approval, employees' time, materials used and timeliness for each project and/or repair. DOC Policy states:

*Work orders for repairs shall be initiated by each respective department staff, signed by the department head and forwarded to the Maintenance Department for review, evaluation, disposition, approval, assignment of a priority code, and scheduling of all work.<sup>7</sup>*

*Only the Department Maintenance Work Order Form DC-437 (Attachment 12-A) or the electronic equivalent is authorized for requesting maintenance work. A DC-437 must be filled out completely.<sup>8</sup>*

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<sup>7</sup> Commonwealth of Pennsylvania, Department of Corrections, Policy Number 10.2.1, Facility Maintenance, Section 12 Maintenance Work Orders, A. General Procedures, 1. Requesting Maintenance Work, a.

<sup>8</sup>The Department of Corrections Policy Number 10.2.1 Facility Maintenance, Section 12 Maintenance Work Orders A. General Procedures 1. Requesting Maintenance Work, b.

## **Audit Results**

*As work orders assignments are completed, it shall be the responsibility of each maintenance staff member to complete the back of the DC-437 listing time, and materials used. As work order assignments are completed, the DC-437 is to be signed and dated by the maintenance personnel completing the work and returned to his/her immediate supervisor. The supervisor shall inspect the completed work, sign the DC-437, and forward the DC-437 to the Facility Maintenance Manager's office for review and administrative tracking.<sup>9</sup>*

Auditors tested 20 completed work orders and noted the following weaknesses: none of the work orders included the employee's time and material costs; and a priority code was not assigned to any of the 20 orders. In addition, testing of ten open work orders found that none of these work orders were assigned a priority code.

Failure to maintain a proper work order system may cause maintenance workers to miss or avoid completing important repairs that may have security and/or safety ramifications. In addition, delaying or failure to complete the necessary work may result in significantly more expensive repairs in the future. The lack of documentation of materials and supplies used may increase the risk of misappropriation of these items for unauthorized use.

### Recommendations:

Cresson management should enforce existing policies to ensure that all work orders include all required information. In addition, all outstanding work orders should be reviewed, verified, prioritized, and completed in a timely manner.

### Management Comments:

*Prior to June 2006, when the new electronic work order system began, the paper version, DC-437 did not require or have a place for a priority code. Since the audit and new electronic system is in place, we have begun to list the priority codes on the work orders. In addition to this, all work orders now are completed with the employee's time and material costs.*

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<sup>9</sup> The Department of Corrections Policy Number 10.2.1 Facility Maintenance, Section 12 Maintenance Work Orders A. General Procedures, 4. Completed Work Orders, d.

## **Training**

Cresson, through the DOC, is responsible for providing all employees with initial orientation and continuing education and training programs that focus on skills and competencies directed toward the safety and care of the inmates as well as the staff of the institution. The Training Coordinator is responsible for overseeing the planning, coordinating, record maintenance and on-site monitoring of training to ensure adherence to requirements.

### **Finding 3 – Training instructors were certified.**

Testing of the three DOC Emergency Response Team members determined that each member received the mandated 60 hours of annual training. We also found that all eight instructors selected for testing received proper certification in his/her teaching assignments.

### **Finding 4 – Some employees did not meet mandatory training requirements.**

Cresson's training program did not comply with the DOC's mandatory training requirements. A review of the facility's training report disclosed that 30 of 35 employees (86 percent) and the 3 FERT members tested did not meet the mandatory minimum training requirements from July 1, 2005, to June 30, 2006. The training policy states:

*All facilities shall ensure that each employee receives all mandatory training. In the event that an employee is unable to attend a scheduled training session due to anticipated or unanticipated leave, the Training Coordinator shall ensure that the employee is rescheduled to receive the missed training. Within 30 days of the employee returning to duty, the Training Coordinator shall ensure that the training is scheduled and that the employee receives the missed training no later than the end of the following training quarter.<sup>10</sup>*

Management stated that mandatory sessions are sometimes missed because of scheduling conflicts. Staff may be on regular days off or on leave time during the dates that training is scheduled.

#### **Recommendation:**

Cresson management should ensure that employees receive all mandatory training, and develop a system to record and track courses attended by employees.

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<sup>10</sup> The Department of Corrections' Policy Number 5.1.1 - Staff Development and Training ; Section 2 – Minimum Training Criteria; Subsection B. Mandated In-Service Training, Number 4.; page 2-2.

## **Audit Results**

### Management Comments:

*During the audit period, the former Training Coordinator at SCI Cresson was twice called to active military duty. In addition, this position was vacant from June 2006 to August 2006 because the employee accepted a position with another state agency. During this period, records were not input in the tracking system and certificates were not filed which left a void in the records.*

*A new Training Coordinator has been hired. Training certificates and records are input to a tracking system in a timely fashion to ensure up to date employee records. A system has been put in place to advise management staff of their employee's yearly requirements. Periodic announcements are made to the staff reminding them of the required training. Training schedules are sent to all staff to ensure they know when training is offered.*

## **Contracts**

Cresson contracts with various vendors to provide a variety of goods and services. Institution management is responsible to ensure that adequate services are provided and expenditures are incurred according to contract stipulations.

### **Finding 5 – Cresson incorporated effective practices in its oversight of the waste removal and fire alarm maintenance contracts.**

Our review of the waste removal and fire alarm maintenance contracts revealed that Cresson complied with DOC policies and procedures for monitoring of the contracts. The internal controls were sufficient to ensure that services billed were actually provided, invoices were accurate, and were approved before payment.

## **Status of Prior Audit Findings and Recommendations**

The following is a summary of the findings and recommendations presented in our audit report from July 1, 2002, to May 7, 2004, along with a description of Cresson's disposition of the recommendations.

### **Inmate General Welfare Fund**

#### **Prior Finding I-1 – Cash transaction receipts were not completed by the mailroom.**

Our prior audit disclosed that the mailroom staff did not complete cash transaction receipts as required. Instead, mailroom staff forwarded mail containing checks and money orders that are to be deposited into inmates' accounts to the inmate accounting office.

We recommended that Cresson management enforce current policies and procedures to ensure that cash transaction receipts are completed as required.

#### Status:

Our current audit disclosed that mailroom staff continued to forward inmate mail containing money orders and cashiers checks to the inmate accounting office for the completion of cash transaction receipts and posting to the inmates' accounts. The DOC revised its policy on accepting cash sent to inmates through the mail effective December 2005. The new DOC policy states:

*The facility will not accept personal checks or cash sent through the mail. If a personal check or cash is discovered during an inspection for contraband, the entire piece of mail is to be returned to the sender with a notice that it is being returned because of non-permitted contents.<sup>11</sup>*

Based on this policy update, the risk that cash would be diverted out of the mail and not recorded in to an inmate's account is minimal. Therefore, this issue has been cleared.

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<sup>11</sup> Department of Corrections Policy Number DC-ADM 803 – Inmate Mail and Incoming Publications, Section VI. Procedures E. Handling and Distribution of Mail; Number 4.

## **Status of Prior Audit Findings and Recommendations**

### **Prior Finding I-2 – Fixed assets were not depreciated.**

Our prior audit revealed that Cresson failed to depreciate \$141,642 worth of fixed assets purchased since the fiscal year ended June 30, 2000. As a result, the financial statements were inaccurate because the fixed assets were overstated by \$28,837, the value of the accumulated depreciation.

We recommended that, for purposes of accurate reporting of financial activity, Cresson management ensure that fixed assets are properly depreciated.

#### **Status:**

Our current audit disclosed that Cresson depreciated all fixed assets as of June 30, 2006. Therefore, Cresson complied with our recommendation.

## **Inmate Employment and Compensation**

### **Prior Finding II-1 – Inmate progress reports were not completed.**

Our prior audit disclosed that not all Inmate Progress Reports, related to employment, were completed as required. The following exceptions were noted:

- Twelve of the 57 inmates received raises before the required progress report was completed.
- Eleven of the 57 inmates did not receive a one-month progress report after their new job assignment and/or promotion.
- Ten of the 57 inmates did not receive an annual progress report.

We recommended that management ensure that progress reports are completed and properly maintained in order to comply with established policies and procedures.

#### **Status:**

Auditors tested 20 inmates during the current audit and found that inmate progress reports are now being completed and properly maintained as required. As a result, we concluded that Cresson has complied with our recommendation.

## **Status of Prior Audit Findings and Recommendations**

### **Procurement**

#### **Prior Finding III-1 – Management did not review advancement account checks.**

Our prior audit found that Cresson management did not review or approve the advancement account checks prior to the checks being sent to vendors.

We recommended that Cresson require Business Office management to review and approve all advancement account checks and supporting documentation prior to releasing the checks for payment.

#### **Status:**

Our current audit found that the Cresson has implemented adequate management controls to monitor the Advancement Account transactions. Therefore, Cresson has complied with our recommendation.

#### **Prior Finding III-2 – Visa purchasing card transactions were not adequately secured.**

Our prior audit of 12 of Cresson's Visa Purchasing Card statements revealed that Business Office personnel did not redact the account numbers on the monthly bank statements, which may allow for unauthorized access to card numbers. Also, the Visa purchasing cards have monthly expenditure limits substantially higher than the actual monthly expenditures. We recommended that Cresson management redact the account numbers on the monthly bank statements in order to ensure that the numbers are not available to unauthorized users. In addition, we recommended that management consider lowering the monthly credit limits on each card to be reflective of the peak monthly expenditures for that operational area to further prevent excessive use of the cards.

#### **Status:**

Our current audit disclosed that Cresson redacted the account numbers on the monthly bank statements. In addition, the monthly credit limits were lowered from \$150,000 to \$50,000. Cresson has complied with our recommendation.

#### **Prior Finding III-3 – Deficiencies were found in several purchase receipts.**

The prior audit of 12 selected purchasing transactions processed through the SAP procurement system disclosed four instances where the quantities listed on the packing slips did not agree with the quantities posted to the system.

## **Status of Prior Audit Findings and Recommendations**

We recommended that Cresson management verify that the goods received are accurately recorded, that those goods are in the quantities ordered on the purchase order, and that only quantities received are paid for.

### **Status:**

Auditors tested 14 purchase orders processed through the SAP R/3 materials management system. All packing slips for the 14 purchase orders tested traced to the receipts posted to the SAP system. Warehouse staff contacted the purchasing department to adjust purchase orders to reflect actual delivery quantities and posted actual quantities received to the inventory record. Therefore, we concluded that Cresson complied with our recommendation.

### **Prior Finding III-4 – Inventory controls were not used.**

Our prior audit initially selected six items from three SAP purchase orders to determine agreement between physical counts and SAP R/3 accounting system totals. Only three of the six items counted agreed to the SAP inventory records. Because of these discrepancies, the audit team performed additional testing of 25 food inventory items requested by the Food Service Department for the month of November 2003. The results of that test indicated that 60 percent of the requested items were unavailable. Therefore, the audit team reached the following conclusions based on the test results:

- Cresson's Dietary Department did not use the SAP system to request food items from the institution's Storeroom.
- Stockroom personnel did not record items disbursed to the Dietary Department in the SAP inventory system.
- Cresson did not use the SAP R/3 system to track reorder points for inventory items.

We recommended that Cresson management enforce the requirement that staff accurately input and verify information in the SAP inventory management program for all receipts and disbursements from inventory in order to track inventory levels and to establish accurate reorder points. In addition, we recommended that management provide adequate inventory training to all stockroom personnel.

### **Status:**

Our current audit found that stockroom personnel began using the Material Requirements Planning module in the SAP R/3 system in August of 2005. As part of our follow-up, auditors reviewed 82 dietary items ordered from the stockroom. We determined that the

## *Status of Prior Audit Findings and Recommendations*

Dietary Department still did not use the SAP system to request food items from the storeroom.

Dietary personnel requested items from the stockroom inventory using typed/handwritten sheets and forwarded the requests to the storeroom approximately two weeks before the desired delivery. Dietary did not enter the received items into the SAP R/3 module until two weeks after delivery. Therefore, stockroom staff was forced to maintain a manual log of items disbursed to Dietary in order to maintain accurate inventory balances. Dietary management stated that they continued to use the manual request system because they thought it was easier to make requests this way instead of using the SAP R/3 module. DOC Policy states that:

*Warehouse inventories are to be maintained in Systems Application Products (SAP) unless the Bureau of Administration provides an exception.<sup>12</sup>*

Auditors also noted that storeroom personnel were delegated both custodial and record-keeping duties in this manual system. In addition, monthly inventory spot checks were conducted by the same employees who maintained the inventory.

Management controls are necessary to ensure resources are adequately safeguarded, accounted for, and efficiently used. Lack of proper controls increases the potential for fraud, waste and abuse, and the likelihood that errors may occur and not be detected. Inventory items are highly marketable, and could invite pilferage or abuse without proper controls. It is imperative that there be a segregation of duties between the custodial and record-keeping duties over inventory in order to provide reasonable assurance that those items are properly safeguarded. Also, individuals who do not have custodial or record-keeping duties should conduct the annual physical inventory and monthly spot checks. In addition, there should be sufficient management oversight over the inventory process to assure that inventory items are safeguarded.

### Recommendation:

Again, we recommend that Cresson management enforce the requirement that staff accurately input and verify information in the SAP R/3 module for all receipts and disbursements from inventory. In addition, Cresson should develop and implement inventory policies and procedures for proper inventory management.

### Management Comments:

*All SCI Cresson departments now use the SAP R/3 module to make their Stock Order Transports (STO). We have also set up automatic reorder points for inventory items. We run an MRP (Material Replenishment Planning) report every week. This report*

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<sup>12</sup> Commonwealth of Pennsylvania, Department of Corrections, Policy Number 3.1.1, Fiscal Administration, Section G. Inventory Management, 3.

## **Status of Prior Audit Findings and Recommendations**

*shows what items have reached the reorder point. This report is reviewed and orders are placed when necessary.*

### **Prior Finding III-5 – Certain SAP roles overrode the segregation of duties.**

The prior audit found that testing of Cresson's role assignments for its two Purchasing Agents revealed that they both were assigned the incompatible duties of Purchaser, EB Pro Requisitioner, and EB Pro Receiver. Therefore, the two Purchasing Agents could create a purchase requisition, complete the purchase order and also receive and post the order. Additionally, the audit disclosed that the Storekeeper Supervisor, two Stock Clerks, and the Food Service Manager were assigned roles that allowed them to create a purchase requisition, create a purchase order, and receive goods.

We recommended that Cresson's Business Office personnel review each purchase to ensure that only legitimate purchases are made. In addition, we recommended that, regardless of the location of the individual, compensating controls be put in place to prevent any one individual from creating a purchase requisition, preparing a purchase order and receiving the order, as well as from receiving and issuing goods from inventory.

#### **Status:**

Our current audit found that testing of role assignments for nine employees involved in the purchasing process revealed that none of the nine were assigned incompatible duties. Therefore, Cresson has complied with our recommendations.

## **Inmate Restitution and Other Court-Ordered Obligations**

### **Prior Finding IV-1 – Restitution was not collected for several court orders.**

Our prior audit reported that, of the 44 Cresson inmates sampled, 17 (or 39 percent) did not have court-ordered obligations deducted from their accounts. Our review of the Inmate Records files revealed that court orders were included in these files. The restitution and court costs for those 17 inmates were approximately \$6,400.

We recommended that Cresson's Records Office review all current files to ensure that Act 84 deductions are made for all relevant court orders.

#### **Status:**

As part of our follow-up of this issue, auditors randomly selected and tested 56 of 1,350 inmates' records to determine if Act 84 deductions were accurate and agreed to court orders. Our current audit disclosed that this issue still exists.

## *Status of Prior Audit Findings and Recommendations*

Act 1998-84 (P.L. 640, No. 84) amends Title 42 of the Pennsylvania Consolidated Statutes, which defines the responsibilities of several judicial matters including court-ordered obligations.<sup>13</sup> Title 42 authorizes the DOC to make monetary deductions from inmate personal accounts for collecting restitution, court costs, fines, fees, and penalties. The DOC has developed policies to address the collection of inmate obligations.<sup>14</sup> Inmate personal accounts, which are the equivalent of bank accounts, are maintained at each institution by the Inmates' General Welfare Fund. The collected deductions are to be sent to the county in which the inmate was convicted.

Auditors selected a sample of 56 inmates' accounts from Cresson's July 21, 2006, list of 1,350 inmates. Our testing disclosed that 12 of the 56 inmates did not have any court ordered costs due. Testing of the remaining 44 inmates' accounts disclosed that 37 accounts had the court orders properly recorded and had the required amounts deducted. Testing of the remaining 7 accounts, or 13 percent, disclosed that restitution was not collected for these accounts. Our review of the Inmate Records files revealed that court orders were included in these files. The restitution and court costs for those inmates were valued at \$9,539.

DOC policy states:

*It is the responsibility of the Inmates Records Office to provide copies of any court order or official county document involving inmate debt to the Business Office, as soon as it is received.*<sup>15</sup>

DOC policy also states that:

*[The Facility Business Office] maintains financial accounts for all inmates. Collects monies owed in accordance with this policy by assessing the inmate's accounts and transmitting the funds to all parties owed.*<sup>16</sup>

Four of the seven inmates had court orders totaling \$6,756 that were not entered into the Inmate Accounts System so no deductions were made. The remaining three inmates had court orders totaling \$2,783 that were recorded in the Inmate Account system but no deductions were taken against these court orders. Through July 2006, Cresson failed to collect \$4,284 in restitution and court costs for these seven inmates. Not collecting court-ordered obligations from inmates' accounts delays or prevents the victims from receiving restitution and counties from receiving court costs during the inmate's incarceration.

Cresson personnel stated that court orders were normally entered into the Inmate Accounts System at the State Correctional Institution at Camp Hill during initial inmate processing. As a result, Cresson's Inmate Records personnel relied on State Correctional Institution at

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<sup>13</sup> 42 Pa.C.S. §9728. Collection of restitution, reparation, fees, costs, fines and penalties.

<sup>14</sup> Department of Corrections' Policy Number DC-ADM 005, Collection of Inmate Debts and Department of Corrections Policy Number 11.5.1 – Records Office Operations Procedures.

<sup>15</sup> Department of Corrections Policy Number 11.5.1, Records Office Operations Procedures, Section 7 – Act 84 Inmate Restitution and Information Exchange, Section B. Number 5. Collection of Debts, b.

<sup>16</sup> Department of Corrections' Policy Number DC-ADM 005, Collection of Inmate Debts, Section VI, Procedures, A. Responsibilities, 1, Facility Business Office.

## **Status of Prior Audit Findings and Recommendations**

Camp Hill personnel and did not review each inmate file upon receipt to ensure that court orders had been entered into the Inmate Accounts System and proper deductions made.

### Recommendations:

Again, we recommend that Cresson management enforce the existing policy requiring Inmate Records Office personnel to forward all court orders to the Business Office for input into the inmate accounting system. In addition, management should require Business Office personnel to verify that the Inmate Accounting System is deducting for all relevant court orders.

### Management Comments:

*The Inmate Records Department forwards all copies of incoming court orders to the Inmate Accounts Department for entry into the Inmate Accounting System. Counties do not always provide SCI Camp Hill with the necessary information when the inmates are entering the DOC. It is the counties responsibility to provide us with the necessary documentation to initiate the deductions in the system. It is not our responsibility to contact counties to obtain this information.*

## *Audit Report Distribution List*

This report was initially distributed to the following:

### Commonwealth of Pennsylvania

The Honorable Edward G. Rendell  
Governor

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Senate of Pennsylvania

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