



**Performance Audit**

***State Correctional Institution at Greene***

**Commonwealth of Pennsylvania  
Department of Corrections**

**November 2012**

November 9, 2012

The Honorable Tom Corbett  
Governor  
Commonwealth of Pennsylvania  
Harrisburg, Pennsylvania 17120

Dear Governor Corbett:

This report contains the results of a performance audit of the State Correctional Institution at Greene of the Department of Corrections from July 1, 2007, to August 26, 2011. The audit was conducted under authority provided in Section 402 of The Fiscal Code and in accordance with generally accepted government auditing standards.

The report details the audit objectives, scope, methodology, findings, and recommendations. The report notes that the institution complied with commonwealth and Department of Corrections' policies regarding contracting, processing work orders, time keeping, and hiring. However, in determining the status of our prior audit recommendations, we again note that SCI Greene failed to ensure complete compliance with the Department of Corrections' requirements for employee training.

We discussed the contents of the report with the management of the institution, and all appropriate comments are reflected in the report.

Sincerely,

**JACK WAGNER**  
Auditor General

State Correctional Institution at Greene  
Department of Corrections

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Jack Wagner, Auditor General  
November 2012*

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**State Correctional Institution at Greene  
Department of Corrections**

**Background  
Information**

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**Background  
Information**

*History, mission,  
and operating  
statistics*

**Department of Corrections**

The Pennsylvania General Assembly created the Bureau of Corrections under the authority of the Pennsylvania Department of Justice with the passage of Act 408 of July 29, 1953, P.L. 1428 Section I. In December 1980, responsibility moved from the Pennsylvania Department of Justice to the Office of the General Counsel under the Governor. 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.

The mission of the Department of Corrections is as follows:

*Our mission is to reduce criminal behavior by providing individualized treatment and education to offenders, resulting in successful community reintegration through accountability and positive change.<sup>2</sup>*

The Department of Corrections is responsible for all adult offenders serving sentences of two years or more. As of July 14, 2012, it operated 26 correctional institutions, 1 motivational boot camp, 1 training academy, and 14 community pre-release centers throughout the Commonwealth of Pennsylvania. In addition to the 14 community pre-release centers, the Department of Corrections also had oversight for 39 contracted facilities, all part of the community corrections program.<sup>3</sup>

**State Correctional Institution at Greene**

The State Correctional Institution at Greene, which we refer to as SCI Greene or the institution in this report, is a maximum-security facility for adult male offenders. It is located in Franklin Township, Greene County, approximately 60 miles south of Pittsburgh. The institution, dedicated on November 9, 1993, accepted its first inmate on January 3, 1994.

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<sup>1</sup> 71 P.S. § 310.1

<sup>2</sup> [http://www.portal.state.pa.us/portal/server.pt/community/our\\_mission/20645](http://www.portal.state.pa.us/portal/server.pt/community/our_mission/20645), accessed July 14, 2012.

<sup>3</sup> [http://www.portal.state.pa.us/portal/server.pt/community/about\\_us/20857](http://www.portal.state.pa.us/portal/server.pt/community/about_us/20857), accessed July 14, 2012.

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SCI Greene is situated on approximately 128 acres of land with 44 acres inside a double fence topped with razor wire. The institution is comprised of 33 buildings, including 12 individual housing units.

The table on the following page presents unaudited SCI Greene operating statistics compiled from Department of Corrections' accounting reports for the fiscal years ended June 30, 2007, through 2011:

	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>
<b>Operating expenditures<sup>4</sup></b>					
State	\$62,000,067	\$63,324,837	\$65,296,351	\$68,711,750	\$71,433,247
Federal	<u>6,227</u>	<u>3,281</u>	<u>5,910</u>	<u>6,202</u>	<u>0</u>
<b>Total operating expenditures</b>	<u>\$62,006,294</u>	<u>\$63,328,118</u>	<u>\$65,302,261</u>	<u>\$68,717,952</u>	<u>\$71,433,247</u>
Inmate population at year end	1,932	1,870	1,924	1,858	1,778
Inmate capacity at year end	1,823	1,823	1,823	1,823	1,724
Percentage of capacity at year end	106.0%	102.6%	105.5%	101.9%	103.1%
Average monthly inmate population	1,921	1,885	1,911	1,889	1,808
Average cost per inmate per year <sup>5</sup>	\$32,278	\$33,596	\$34,172	\$36,378	\$39,510

<sup>4</sup> Operating expenditures were recorded net of fixed asset costs, an amount that would normally be recovered as part of depreciation expense. In addition, regional level and indirect charges were not allocated to the totals reported here.

<sup>5</sup> Average cost per inmate per year was calculated by dividing total operating expenditures by the average monthly inmate population.

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Department of Corrections**

**Audit  
Objectives**

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**Audit  
Objectives**

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

Our performance audit of SCI Greene had four objectives. We selected our audit objectives from the following areas: contract management, expense management, and personnel management. Our specific audit objectives were as follows:

- One To determine whether SCI Greene awarded its service contracts in compliance with the commonwealth's procurement policy and procedures, as well as to assess whether the institution effectively monitored its service contracts. (Finding 1)
- Two To determine whether SCI Greene properly processed its maintenance work orders in compliance with Department of Corrections' maintenance policy. (Finding 2)
- Three To assess whether SCI Greene effectively monitored its timekeeping/leave system. (Finding 3)
- Four To determine whether SCI Greene hired employees in accordance with Commonwealth of Pennsylvania employment policies. (Finding 4)

Unless indicated otherwise, the scope of the audit was from July 1, 2007, to August 26, 2011.

To accomplish our objectives, we obtained and reviewed records and analyzed pertinent policies, agreements, and guidelines of the Commonwealth of Pennsylvania and the Department of Corrections. In the course of our audit work, we interviewed various facility management and staff. The audit results section of this report contains the specific inquiries, observations, tests, and analyses conducted for each audit objective.

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Objectives**

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We also performed inquiries and tests as part of, or in conjunction with, our current audit to determine the status of the implementation of the recommendations made during our prior audit. Those recommendations addressed employee training, warehouse inventory, and fire emergency response team training.



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**Audit  
Results**

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**Audit  
Results**

In the pages that follow, we have organized our audit results into four sections, one for each objective. Each of the four sections is organized as follows:

- Statement of the objective
- Relevant laws, policies, or agreements
- Audit scope in terms of period covered, types of transactions reviewed, and other parameters that define the limits of our audit, and the methodologies used to gather sufficient evidence to meet the objective
- Finding(s) and conclusion(s)
- Recommendation(s), if applicable
- Response by SCI Greene management, if applicable
- Our evaluation of SCI Greene management's response, if applicable

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**Audit Results for  
Objective One**

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**Audit Results  
for  
Objective One**

*Contract  
Management*

**The objective**

Objective one for our performance audit was to determine whether SCI Greene awarded its service contracts in compliance with the commonwealth’s procurement policy and procedures, as well as to assess whether the institution effectively monitored its service contracts.

**Relevant laws, policies, or agreements**

SCI Greene contracted with various vendors instead of providing services in-house, because the services did not warrant full-time positions or institution personnel did not possess the necessary expertise. During the fiscal years ended June 30, 2010, and June 30, 2011, SCI Greene contracted for religious services and for the service and maintenance of its security system, radios, and dietary equipment. The individual contracts specified the terms for pricing, nature of the service to be delivered, and payment methods.

The commonwealth has developed an online handbook to convey the policy and procedures for state agency procurement of services. The online handbook addresses the monetary thresholds and procedures for formal bids as well as the required justification and approvals for sole source procurements. The procurement handbook also addresses the requirements for contract monitoring.<sup>6</sup>

Section A of Chapter 54 in Part I of the commonwealth’s online procurement handbook discusses the necessity for contract monitoring, as follows:

*...Monitoring and control are essential to ensure the contractor uses and manages its resources in a manner that will provide the agency exactly what it has contracted for in terms of quality, timeliness, and economy of cost.<sup>7</sup>*

<sup>6</sup> [http://www.portal.state.pa.us/portal/server.pt/community/procurement\\_handbook/14304](http://www.portal.state.pa.us/portal/server.pt/community/procurement_handbook/14304), accessed July 23, 2012.

<sup>7</sup> Ibid.

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**Audit Results for  
Objective One**

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**Scope and methodologies to meet our objective**

To accomplish this objective, we reviewed the above referenced procurement handbook.

We interviewed SCI Greene's business manager, food service manager, facility maintenance manager, and purchasing agent.

After reviewing SCI Greene's detailed list of 31 service purchase contracts in effect between July 1, 2007, and June 30, 2011, we used our professional judgment to select six of the contracts. The six contracts included one each for the service and maintenance of SCI Greene's security system, radios, and dietary equipment, as well as three contracts for Catholic chaplaincy.

We reviewed the bid documentation for the radio and dietary equipment service contracts and the sole source justification and approvals for the chaplaincy and security system maintenance contracts.

Finally, we compared applicable invoices, expenditure ledger entries, and service reports to the terms of each of the six contracts. More specifically, our testing included the following:

- Chaplaincy contracts - We examined the chaplaincy time sheets and invoices associated with 29 of 142 payments posted to the expenditure ledger between July 1, 2009, and June 23, 2011. The 29 payments were valued at approximately \$15,140, whereas all 142 payments had a total value of approximately \$79,910. (The three separate contracts were for the individual services of three Catholic chaplains whose contracted weekly hours varied from 4 to 25 hours.)
- Dietary equipment service contract - We examined the dietary equipment service reports and invoices associated with 20 of 101 payments posted to the expenditure ledger between July 1, 2009, and June 23, 2011. The 20 payments had an approximate value of \$27,810, whereas all 101 payments totaled approximately \$98,930.
- Radio maintenance contract - We examined the purchase request, purchase order, and invoice associated with the annual \$6,000

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payment made to the radio maintenance contractor during the fiscal year ended June 30, 2010.

- Security system service contract - We examined the security system service call reports and invoices associated with all seven payments posted to the expenditure ledger between July 1, 2009, and February 11, 2011. The expenditures totaled approximately \$21,380.

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**Finding 1**

**SCI Greene awarded and effectively monitored six service contracts in compliance with commonwealth policy and procedures.**

SCI Greene awarded the six tested service contracts in compliance with commonwealth procurement policy and procedures. The institution solicited bids and awarded the radio and dietary equipment maintenance contracts to the applicable lowest responsible bidder.

SCI Greene used sole source procurement to award the four remaining tested contracts. We verified that the institution documented the necessary sole source contract justifications. We also found that the justifications presented by SCI Greene were reasonable. Finally, we verified that the required management approvals were documented on the three chaplaincy and the security system service contracts.

SCI Greene effectively monitored each of the six tested contracts. The institution assigned a monitor for each contract, ensured compliance with the terms of each contract, and verified receipt and the accuracy of vendor invoices prior to approval for payment.

More specifically, we found that the billed hours on the 29 chaplaincy invoices agreed with the work hours reported on the corresponding time sheets, and the hourly pay rates on these 29 invoices agreed with the rates specified in the contracts. Furthermore, the facility chaplaincy program director, the monitor for the chaplaincy contracts, signed each of the tested time sheets and invoices.

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**Audit Results for  
Objective One**

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We found that the labor hours and material costs reported on the 20 tested dietary equipment and 7 tested security system service invoices agreed with the labor hours and parts reported on the corresponding service call reports. The hourly labor rates on these invoices agreed with the rates specified in the corresponding contracts. The food service manager, the monitor for the dietary equipment service contract, signed each of the 20 tested dietary equipment service reports; the facility maintenance manager, the monitor for the security system service contract, approved each of the 7 tested security system invoices.

SCI Greene assigned the lieutenant for incident command support as the monitor for the radio maintenance contract. The \$6,000 yearly payment covered radio maintenance (parts and labor) for the fiscal year ended June 30, 2010. We found that \$6,000 charge was included in the contract and also matched the dollar amount recorded on both the purchase order and invoice.

Finally, we found that the services provided by the contractors in our review could not have been performed by the staff of SCI Greene. We also found that the services provided under the six selected contracts did not duplicate, overlap, or conflict with institution efforts to provide similar or related goods and services.

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**Audit Results for  
Objective Two**

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**Audit Results  
for  
Objective  
Two**

**The objective**

Objective two for our performance audit was to determine whether SCI Greene properly processed its maintenance work orders in compliance with Department of Corrections' maintenance policy.

*Maintenance*

**Relevant laws, policies, or agreements**

SCI Greene utilizes the Department of Corrections' maintenance management software to administer its work order system. According to the Department of Corrections' maintenance policy, this system enables departments in the institution to electronically submit work orders to the maintenance department. The maintenance department is then able to review, evaluate, approve, prioritize, and assign the task to the proper department or shop.<sup>8</sup>

Section 12.A.1.a of the Department of Corrections' facility maintenance procedure manual requires the maintenance department to assign a priority code to all new work orders for repairs. Section 12 .F.4 of the same manual establishes policy regarding the completion of each work order assignment, as follows:

*As work order assignments are completed, it shall be the responsibility of each maintenance staff member to provide information listing time and materials used. As work order assignments are completed, the work order 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, and forward the work order to the Facility Maintenance Manager's office for review and administrative tracking.<sup>9</sup>*

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<sup>8</sup> Department of Corrections, Policy Number 10.2.1, "Facility Maintenance," September 3, 2008.

<sup>9</sup> Ibid.

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**Audit Results for  
Objective Two**

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**Scope and methodologies to meet our objective**

To accomplish this objective, we reviewed the Department of Corrections' policy regarding facility maintenance.<sup>10</sup>

We interviewed SCI Greene's business manager, most senior facility maintenance manager, and human resources director.

We examined the documentation for 65 of 27,630 work orders completed between January 1, 2009, and December 31, 2010.

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**Finding 2**

**SCI Greene properly processed its maintenance work orders in compliance with Department of Corrections' policy.**

Between July 1, 2008, and June 30, 2010, SCI Greene expended approximately \$12.6 million for maintenance, including about \$6.0 million for the salaries and benefits of its 34 maintenance employees.

The maintenance department at SCI Greene consists of 13 specialty trade shops, including the electrical, plumbing, carpentry, painting, and refrigeration shops. The maintenance department is responsible for providing emergency, routine, and preventive maintenance throughout the facility.

According to interviews we conducted with the institution's most senior maintenance manager, SCI Greene employees input requests for maintenance work and then note supervisor approval through the electronic system. After approval, the institution's facility maintenance managers prioritize the work orders, print the work order requests, and assign the maintenance work according to the required expertise. When maintenance workers complete the assignments, the institution requires the workers to enter specifics about the jobs on the printed forms and submit them to the maintenance office to update the computer system. The job specifics include the completion date, materials cost, and labor

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<sup>10</sup> Department of Corrections, Policy Number 10.2.1, "Facility Maintenance," September 3, 2008.

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**Audit Results for  
Objective Two**

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hours and costs. Finally, according to the institution's most senior maintenance manager, maintenance management personnel conduct reviews of open work orders each quarter to determine whether work orders are completed timely.

SCI Greene properly processed work orders through the Department of Corrections' maintenance management system. Our examination of the 65 processed work orders revealed that SCI Greene's maintenance department properly assigned, authorized, and documented the labor hours, materials utilized, and priority codes for all 65 tested work orders in compliance with the Department of Corrections' maintenance policy.



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Audit Results for  
Objective Three

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**Audit Results  
for  
Objective  
Three**

**The objective**

Objective three for our performance audit was to assess whether SCI Greene effectively monitored its timekeeping/leave system.

**Relevant laws, policies, or agreements**

*Timekeeping/  
Leave*

The commonwealth has established policy regarding personnel rules<sup>11</sup> as well as a manual that outlines employee responsibilities for absences.<sup>12</sup> The policy identifies the Integrated Enterprise System (IES), a comprehensive computerized system for business processes, as the official record of employment for employees of the Department of Corrections.<sup>13</sup> The Integrated Enterprise System, which utilizes the Systems Applications Products (SAP) software, supports human resource functions such as employee absence/leave requests and records through its Employee Self Service (ESS) system.<sup>14</sup>

The commonwealth’s absence program manual requires each employee to request all absences/leave through the Employee Self Service system or through a paper request form (STD-330) when the employee does not have access to the Employee Self Service system. Each employee’s supervisor or designee is responsible for ensuring that all absences from the workplace are recorded and approved/rejected in a timely manner. A timekeeper is responsible for entering absences/leave in the Employee Self Service system when an employee does not have access to the electronic system.<sup>15</sup>

Department of Corrections’ policy requires every person who enters and leaves the confines of the secured perimeter of a correctional facility to be verified on an identity verification system or by a photo identification card.<sup>16</sup> SCI Greene employees utilize photo identification cards to register

<sup>11</sup> Commonwealth of Pennsylvania Governor’s Office, Management Directive 505.7, “Personnel Rules,” September 1, 2009, and amended November 9, 2010.

<sup>12</sup> Commonwealth of Pennsylvania Governor’s Office, Manual Number M530.7 Amended, “Absence Program,” April 23, 2009.

<sup>13</sup> Commonwealth of Pennsylvania Governor’s Office, Management Directive 505.7, “Personnel Rules,” September 1, 2009, and amended November 9, 2010.

<sup>14</sup> [http://www.ies.state.pa.us/portal/server.pt/community/about\\_ies/3916](http://www.ies.state.pa.us/portal/server.pt/community/about_ies/3916) accessed on July 15, 2012.

<sup>15</sup> Commonwealth of Pennsylvania Governor’s Office, Manual Number M530.7 Amended, “Absence Program,” April 23, 2009.

<sup>16</sup> Department of Corrections, Policy Number 6.3.1, “Facility Security,” April 20, 2006.

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**Audit Results for  
Objective Three**

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in and out on a time card machine at the start and end of each work day. Additionally, every employee that enters or leaves the secured perimeter of the institution must register in and out at the institution's biometric readers.

**Scope and methodologies to meet our objective**

To accomplish this objective, we reviewed the above referenced policies and manual, including the commonwealth's policy regarding personnel rules and its absence program manual and the Department of Corrections' policy for facility security.

We interviewed the institution's director, analyst, and clerk typist for the human resources department.

We reviewed the work schedules, time card readings, biometric verification reports, and Employee Self Service system absence records associated with 43 of the 715 employees on the institution's complement report dated May 4, 2011, for the two pay periods ended May 1, 2010, and January 8, 2011.

We examined the institution's reports of two internal audits of the timekeeping/leave system conducted in June 2010 and July 2011.

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**Finding 3**

**SCI Greene effectively monitored its timekeeping/leave system.**

At SCI Greene, employees with access to the Employee Self Service system submitted leave requests electronically to their supervisors. When the appropriate supervisor electronically approved the leave, the absence was automatically recorded in the Employee Self Service system. SCI Greene employees without access to the Employee Self Service system, including most corrections officers, maintenance workers, and food service employees, submitted paper leave requests to their supervisors. After the appropriate supervisor signed the paper form, timekeepers entered the leave and the approval into the Employee Self Service system. Additionally, when employees entered or exited the institution's secured perimeter, they registered in and out at the biometric readers and then

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registered in and out at the time card machine at the start and end of each work day.

According to SCI Greene's human resources director, SCI Greene's management periodically conducted internal audits of the timekeeping/leave records of selected departments to ensure that all leave was properly recorded. Management compared the entry and departure times recorded by the time card machine to the leave records of the employees in the selected department and then investigated and resolved any discrepancies. Our review of the reports of two such internal audits conducted in June 2010 and July 2011 corroborated these assertions.

SCI Greene effectively managed the institution's timekeeping/leave system. Our review of the work schedules, time card readings, biometric verification reports, and Employee Self Service absence records for 43 employees for the two pay periods ended May 1, 2010, and January 8, 2011, revealed that the institution properly and accurately processed absences/leave on a consistent basis.

We compared the work schedules to the time card readings and biometric verification reports for 15 employees who directly used the Employee Self Service system and for 28 employees who requested leave on paper forms for the two tested pay periods. If an employee's work schedule did not agree with the time card or biometric reports, we obtained the associated leave documentation or a documented explanation for the inconsistent time card or biometric data. (For example, if an employee received training outside the secured perimeter for a specified number of hours, the time card and biometric reports would not verify the employee's presence for those hours.) We found that all 189 absences for the 43 employees during the two tested pay periods were properly approved and recorded in the electronic system.

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**Audit Results for  
Objective Four**

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**Audit Results  
for  
Objective  
Four**

**The objective**

Objective four for our performance audit was to determine whether SCI Greene hired employees in accordance with Commonwealth of Pennsylvania employment policies.

**Relevant laws, policies, or agreements**

*Hiring  
Practices*

There are two types of employment available with the Department of Corrections - civil service and non-civil service. Our audit work focused on the hiring practices of civil service positions. Civil service employment is the responsibility of the State Civil Service Commission (commission). Persons seeking employment with the Department of Corrections should apply directly to the commission to get on the list of eligible applicants.

The State Civil Service Commission has prescribed policies and procedures for the recruitment, eligibility assessment, interview, and selection of candidates for positions classified as civil service.<sup>17</sup> The Governor’s Office of the Commonwealth of Pennsylvania has also issued a management directive regarding the use of veterans’ preference for classified service employment.<sup>18</sup>

The commission provides information to potential applicants, recruits and tests applicants, and then sends lists of qualified applicants to agencies seeking to fill jobs. The commission ranks qualified applicants for specific job classifications based on the scores for written or oral examinations, demonstrations of skill, evaluations of experience and education, or a combination of these. If a vacant position is filled from an employment list, the agency must select a person who is among the three highest ranking available persons. The commission refers to this selection process as the Rule-of-Three.<sup>19</sup>

<sup>17</sup> Commonwealth of Pennsylvania Governor’s Office, Manual Number 580.1, “Certification of Eligibles for the Classified Service,” April 7, 1997.

<sup>18</sup> Commonwealth of Pennsylvania Governor’s Office, Management Directive Number 580.21, “Veterans’ Preference on Classified Service Employment Lists,” May 5, 2008.

<sup>19</sup> Commonwealth of Pennsylvania Governor’s Office, Manual Number 580.1, “Certification of Eligibles for the Classified Service,” April 7, 1997.

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Section 5b of the Commonwealth's management directive regarding the use of veterans' preference for employment states the following:

*Eligible veterans, spouses of disabled veterans, and widows or widowers of veterans:*

- (1) Receive 10 additional points on their final earned ratings, provided they pass the examination.*
- (2) Have mandatory appointment preference over non-veterans when their names appear together within the Rule-of-Three on certifications covered by this policy.*
- (3) May be given preference for selection from certifications covered by this policy regardless of their rank on the list.<sup>20</sup>*

**Scope and methodologies to meet our objective**

To accomplish this objective, we reviewed the policies and procedures specified in the commission's hiring manual<sup>21</sup> and in the commonwealth's management directive regarding veterans' preference for employment.<sup>22</sup>

We interviewed appropriate SCI Greene personnel, including the human resources director.

We analyzed the documentation associated with the hire of 29 civil service employees between July 1, 2007, and January 31, 2011.

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<sup>20</sup> Commonwealth of Pennsylvania Governor's Office, Management Directive Number 580.21, "Veterans' Preference on Classified Service Employment Lists," May 5, 2008.

<sup>21</sup> Commonwealth of Pennsylvania Governor's Office, Manual Number 580.1, "Certification of Eligibles for the Classified Service," April 7, 1997.

<sup>22</sup> Commonwealth of Pennsylvania Governor's Office, Management Directive Number 580.21, "Veterans' Preference on Classified Service Employment Lists," May 5, 2008.

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**Finding 4**

**SCI Greene complied with Commonwealth of Pennsylvania hiring policies for civil service employees.**

SCI Greene hired 141 civil service employees between July 1, 2007, and January 31, 2011. Our review of documentation for 29 civil service hires (including 19 veterans and 10 non-veterans) showed that the institution hired employees in compliance with commonwealth policies and procedures.

SCI Greene interviewed candidates and properly applied the Rule-of-Three and veterans' preference in its hiring of the 29 civil service employees for the positions of corrections officer trainee, licensed practical nurse, counselor, teacher, and dental hygienist. The institution gave veterans preference for appointment regardless of the applicant's rank on the relevant employment lists, an option authorized by the Commonwealth of Pennsylvania's management directive.

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**Status of  
Prior Audits**

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**Status of  
Prior Audits**

**Findings and  
Recommendations**

Our prior audit report of SCI Greene covered the period of July 1, 2004, to August 24, 2007, and contained five findings. Three of the findings (Findings 1, 3, and 4) were positive and thus had no recommendations. The status of the remaining findings (Findings 2 and 5) and their accompanying recommendations is presented below.

The prior audit report also contained one unresolved finding (Prior Finding I-2) from the audit report of SCI Greene that covered the period July 1, 2002, to November 19, 2004. The status of the unresolved finding and its accompanying recommendations is also presented below.

**Scope and Methodologies of our audit work**

To determine the status of the implementation of the recommendations made during the prior audits, we reviewed the Department of Corrections' response to our report from July 1, 2004, to August 24, 2007. We also interviewed appropriate institution personnel, reviewed policies and procedures, and conducted tests as part of, or in conjunction with, the current audit.

**Prior Finding 2  
(from the audit reports dated July 1, 2001, to December 6, 2002, July 1, 2002, to November 19, 2004, and July 1, 2004, to August 24, 2007)**

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**Greene still did not provide sufficient training to employees.  
(Partially resolved)**

Our three preceding audits reported that SCI Greene did not comply with the Department of Corrections' mandatory training requirements. In each audit we examined the training records for a select group of employees and found numerous employees who did not receive the total number of required training hours or all of the required classes. In the most recent audit, we also found two additional deficiencies: SCI Greene did not maintain documentation to certify that some of the tested instructors were qualified to teach the listed courses, and the training department did not maintain complete training records in the files of all staff members.

We recommended that SCI Greene management enforce Department of Corrections' training requirements to ensure that all employees receive the required training and all instructors are properly certified to teach assigned

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courses. We also recommended that the training coordinator monitor on-site training and ensure that the training department maintains complete training records in the files of all staff members.

In a letter dated December 10, 2007, the Department of Corrections responded to our latest finding, as follows:

*The Department agrees with this finding. SCI Greene intends to comply with all DOC mandatory and non-mandatory training requirements. As indicated in the Auditor General's exit findings, the training is being provided, generally by the facility's departments. Unfortunately, the compilation and documentation by the training office was inadequate. SCI Greene recently reassigned staff and a new training coordinator is expected to adequately document the provision of training at the institution.*

**Status**

To determine if the institution implemented our recommendations in the prior report, we reviewed Department of Corrections' annual inspection reports for SCI Greene from 2007 through 2010, we examined the certification and training records for 12 of the institution's 57 instructors as of May 19, 2011, and we reviewed the in-service training records for 43 of the institution's 723 employees for the fiscal year ended June 30, 2010. Finally, we inspected the training records for the 14 employees promoted to commissioned officer positions between July 1, 2007, and April 17, 2011.

According to Section 2 of the Department of Corrections' staff development and training procedures manual, each employee must receive the minimum training hours and course content specified by the Department of Corrections for his/her job classification and duties. Section 3 of the manual requires any staff member who is promoted or placed into a commissioned officer position to attend the Department of Corrections' commissioned officer training course within one year of promotion or placement. Finally, Section 9 of the manual establishes the certification requirements for instructors.<sup>23</sup>

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<sup>23</sup> Department of Corrections, Policy Number 5.1.1, "Staff Development and Training," December 15, 2003, and revised October 2009.



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Our current audit revealed that SCI Greene only partially implemented the recommendations of the prior report. Our review of the certification and training records for 12 of the institution's 57 instructors showed that each of the 12 instructors possessed the certification required in Section 9 of the Department of Corrections' staff development and training procedures manual. Additionally, the institution documented employee in-service training on internal electronic spreadsheets for the fiscal year ended June 30, 2010

However, the institution did not comply with the Department of Corrections' requirements for in-service training and commissioned officer training. In fact, our current audit represents the fourth consecutive audit in which we found that SCI Greene did not comply with the Department of Corrections' training requirements.

Our review of the training records for the 43 employees selected for detailed testing again identified instances of noncompliance with the Department's mandatory training requirements. Specifically:

- 7 of the 43 employees did not receive all the required minimum number of in-service hours for the year
- 41 of the 43 employees did not receive all the specific courses required for their job classifications

We also found that 2 of the 14 staff members promoted to commissioned officer positions between July 1, 2007, and April 17, 2011, did not attend the Department of Corrections' commissioned officer training course within one year of promotion as required by policy.

Over the years, SCI Greene and Department of Corrections officials have agreed with our findings, provided explanations for the deficiencies, and indicated that corrective actions would be implemented. While we noted some areas of improvement, our reviews of individual employee training records identify similar areas of noncompliance audit after audit.

Nonetheless, when the Department of Corrections conducted its own review of SCI Greene's training records, it found general compliance with the policy requirements. Stated another way, as long as 90 percent of

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employees required to complete any individual class received that specific training, the department considered the institution to be in compliance with the training requirement. Therefore, because we have found noncompliance deficiencies in four consecutive audits, and the Department of Corrections does not require 100 percent compliance with its own policy, it is not meaningful for us to continue to recommend that SCI Greene attain absolute compliance with the department's training policy.

Instead, we will review the Department of Corrections' training policies and its monitoring of each correctional facility's compliance with these policies in a future audit of the department.

In the meantime, SCI Greene should continue to make every effort possible to ensure that all staff members receive all of the mandated training.

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**Prior Finding 5**

**(from the audit reports dated July 1, 2002, to November 19, 2004, and July 1, 2004, to August 24, 2007)**

**Greene's annual physical counts only agreed with approximately 50 percent of the corresponding warehouse records. (Resolved)**

The two preceding audits identified weaknesses in SCI Greene's inventory controls. The first audit revealed differences between the audit team's physical counts and the recorded balances on hand for 10 of 25 tested inventory items. Business office personnel did not conduct regular spot checks of warehouse items, and warehouse personnel did not adequately support adjustments to the recorded balances on hand.

In our most recent audit, we reported that SCI Greene conducted annual physical inventory counts for the fiscal years ended June 30, 2006, and June 30, 2007. However, the annual physical counts only agreed with the corresponding warehouse perpetual inventory records for approximately 50 percent of the items stored in the warehouse. At June 30, 2006, the physical count matched the inventory record for only 555, or 51 percent, of 1,089 stocked items. At June 30, 2007, the physical count matched the inventory record for only 497, or 49.8 percent, of 998 warehouse items.

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According to SCI Greene's warehouse superintendent, staff other than warehouse personnel had access to the warehouse to accommodate the supply needs of the institution that arose during off-hours. Those institution employees did not always document the inventory removal for the warehouse staff.

Finally, our most recent audit's review of documentation for warehouse spot checks revealed that business office personnel performed such spot checks monthly during the fiscal year ended June 30, 2007. However, business office personnel limited these twelve spot checks to inventory items from only 6 of 34 available inventory categories.

We recommended that SCI Greene implement and enforce internal control policies and procedures to ensure that its warehouse records are accurately maintained. We also recommended that SCI Greene require institution staff to document the removal of warehouse supplies during non-business hours. Finally, we recommended that business office personnel rotate the monthly spot checks to ensure that all categories of warehouse items are counted at least once a year.

In a letter dated December 10, 2007, the Department of Corrections responded to our latest finding, as follows:

*The Department agrees with the finding. SCI Greene business/warehouse staff expanded the 25-test count in September 2007 to include all categories inventoried. As noted by the auditors this is a 24-7 operation in the facility; however, the warehouse is only staffed five (5) days per week, eight (8) hours each day. We have set into operation new control procedures as a result of this audit keeping all bays locked during the day while staff and inmate workers are present in the warehouse and only unlocking these bays while pulling supply orders for distribution throughout the facility.*

*A restricted key log sign-out sheet in control monitors entries into the warehouse during non-business hours. A log directly inside the warehouse door now affords staff that needs to transfer items from the warehouse to the facility during non-business hours a place to document what they are removing.*

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*This procedure will enhance internal control procedures and alert warehouse personnel to update accordingly computer inventories, in a timely manner, ensuring correct counts.*

*We have also installed an additional camera in the warehouse to monitor the hallways in the warehouse whenever it is not staffed evenings and weekends.*

**Status**

To determine if the institution implemented our recommendations in the prior report, we reviewed a memorandum dated September 10, 2007, from SCI Greene's warehouse superintendent to all institution staff. We analyzed the physical inventory count sheets and the corresponding perpetual inventory records for the fiscal year ended June 30, 2010, as well as the documentation for the monthly spot checks conducted by business office personnel between July 1, 2009, and June 30, 2010.

SCI Greene's perpetual inventory system reported that the institution had 823 items (including food, wearing apparel, and housekeeping and office supplies) valued at approximately \$761,000 in its warehouse at June 30, 2010.

Our current audit revealed that SCI Greene implemented the recommendations of the prior report. Our review of SCI Greene's June 30, 2010, physical counts and perpetual inventory records indicated that the institution improved its warehouse recordkeeping. At June 30, 2010, the physical counts matched the inventory record for 779, or 94.7 percent, of 823 warehouse items. The difference represented an overage of approximately \$2,350.

SCI Greene management attributed the above improvement to a warehouse policy change communicated and implemented on September 10, 2007. The revised policy required employees entering the warehouse during non-business hours to sign a sheet and document the items removed from the warehouse.

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Finally, the current audit revealed that business office personnel performed monthly spot checks during the fiscal year ended June 30, 2010. The twelve monthly spot checks covered 25 of 34 inventory categories. The remaining nine inventory categories included only 32, or 4 percent, of the 823 available inventory items.

As a result of the actions taken by SCI Greene, this finding has been resolved.

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**Prior Finding I-2**

**(from the audit reports dated July 1, 2001, to December 6, 2002, July 1, 2002, to November 19, 2004, and July 1, 2004, to August 24, 2007)**

**Greene still did not provide the required training to fire emergency response team members. (Partially resolved)**

The three preceding audits reported that SCI Greene did not provide fire emergency response team members the specialized fire safety training required by the Department of Corrections.

The Department of Corrections' staff development and training policy effective for the fiscal years ended June 30, 2002, and June 30, 2003, required institutions to annually provide 12 hours of specialized fire safety training to fire emergency response team members.<sup>24</sup> In December 2003, the Department of Corrections revised this policy to require institutions to annually provide 16 hours of specialized fire safety training to fire emergency response team members beginning the fiscal year ended June 30, 2004.<sup>25</sup>

The first audit reported that SCI Greene did not provide the required 12 hours of fire safety training to any of its 32 fire emergency response team members during the fiscal year ended June 30, 2002. The second audit reported that none of SCI Greene's 22 fire emergency response team members received the required 12 and then 16 hours of fire safety education during the fiscal years ended June 30, 2003, and 2004, respectively. In our most recent audit, we found that the institution provided the Department of Corrections' mandated 16 annual hours of fire

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<sup>24</sup> Department of Corrections, Policy 5.1.1, "Staff Development and Training," March 19, 2001.

<sup>25</sup> Department of Corrections, Policy 5.1.1, "Staff Development and Training," December 15, 2003, and revised October 2009 and December 2010.

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safety training to only 15 of 27 team members for the fiscal year ended June 30, 2006, and to 18 of 29 team members for the fiscal year ended June 30, 2007. Moreover, we found that SCI Greene scheduled only one training course on a single day during each quarter. Although this schedule did not conflict with Department of Corrections' policy, it limited the availability of classes and reduced the opportunity/likelihood for team member attendance. If a team member missed one course, the team member was noncompliant for the year.

We recommended that SCI Greene management ensure that all fire emergency response team members receive the required hours of annual fire safety training. We repeated our prior recommendation that the institution conduct on-site training quarterly at a scheduled time or frequency that accommodates the working schedules of all team members. We explained that measures such as longer training hours per session, more frequent training courses, or alternate training times may facilitate compliance with the fire emergency response team training requirements.

In a letter dated December 10, 2007, the Department of Corrections responded to our latest finding, as follows:

*The Department agrees with the finding. The Safety Manager has offered training to enable all FERT to receive their 16 required hours; however, the training isn't always convenient for every member's personal or work schedule. We are pursuing alternate methods to satisfy the mandated training. We will also contact our local fire department(s) to determine if their resources for training are available as well as possible video training.*

#### **Status**

To determine if the institution implemented the recommendations we made in our prior report, we examined the attendance rosters and sign-in sheets for fire emergency response team training sessions conducted during the fiscal year ended June 30, 2010.

Our current audit revealed that SCI Greene only partially implemented the recommendations of our immediately preceding audit. The review of class

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rosters revealed that SCI Greene conducted four-hour fire safety courses on seven different dates during the fiscal year ended June 30, 2010. Two classes were offered during each of the first three quarters, while one class was offered during the last quarter of the fiscal year.

Nevertheless, our review of training records for the 20 FERT members showed that five members did not receive all of the required 16 hours of fire safety training during the fiscal year ended June 30, 2010. In fact, the current audit represents the fourth consecutive audit in which we have found that SCI Greene did not provide all members of the fire emergency response team the full number of training hours required by the Department of Corrections' staff development and training policy.

As we stated previously in our status to prior finding 2, it is not meaningful for us to continue to recommend 100 percent compliance with the department's training requirements. Therefore, we will include an examination of the fire emergency response team training requirements in a future review of the Department of Corrections' training policies and its monitoring of each correctional facility's compliance with these policies.

In the meantime, SCI Greene should continue to take every possible measure to ensure that all fire emergency response team members receive the mandated training.

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