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CORRECTIONS

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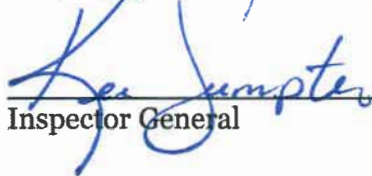
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**TO:** Ricky Dixon, Secretary Received 7-11-24 JLAC  
**FROM:** Kenneth Sumpter, Inspector General  
**DATE:** July 11, 2024  
**SUBJECT:** Audit Report No. A24018F – Follow-up of Auditor General’s Report 2024-108  
Department of Corrections Selected Administrative Activities and Prior Audit  
Follow-Up

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The Bureau of Internal Audit performed a follow-up audit to the Auditor General’s Department of Corrections Selected Administrative Activities and Prior Audit Follow-Up, Report No. 2024-108, issued in January 2024. The objective of this follow-up was to determine if corrective action was taken on the reported audit findings.

The scope of the follow-up consisted of obtaining from the Offices of Community Corrections and Administration a written response along with documentation of corrective action taken to implement the audit recommendations. The Bureau of Internal Audit has evaluated the follow-up responses and documentation provided. As discussed in the attached report, the Department has taken corrective action to address the four findings identified in the Auditor General’s report.

  
Inspector General

Attachments

cc: Timothy Fitzgerald, Chief of Staff  
Richard Comerford, Assistant Deputy Secretary of Institutions  
Joe Winkler, Assistant Secretary of Community Corrections  
Melissa McDaniel, Director of Administration  
Michael Park, Chief of Fleet Management  
Debra Arrant, Deputy Inspector General  
Melinda M. Miguel, Chief Inspector General  
Joint Legislative Auditing Committee

## FLORIDA DEPARTMENT OF CORRECTIONS

# Follow-up of Auditor General's Report 2024-108

## Department of Corrections Selected Administrative Activities and Prior Audit Follow-Up

*Kenneth Sumpter, Inspector General**Paul Strickland, Chief Internal Auditor**Report No. A24018F**Dan McWilliams, Audit Supervisor**July 11, 2024*

### BACKGROUND

Section 20.315(1), Florida Statutes, specifies that the purpose of the Department of Corrections (Department) is to protect the public through the incarceration and supervision of offenders and to rehabilitate offenders through application of work, programs, and services. According to Department records, the Department operates the third largest prison system in the United States and, as of June 30, 2023, housed 85,174 inmates and supervised 140,978 offenders released on supervision. For the 2022-23 fiscal year, the Legislature appropriated approximately \$3.8 billion to the Department and authorized 23,380 positions.

### OBJECTIVES

The follow-up audit objective was to determine if corrective action was taken on the reported audit findings.

### SCOPE AND METHODOLOGY

A request was made to the Offices of Community Corrections and Administration for a written response and documentation of action taken to address the findings.

### RESULTS OF FOLLOW-UP

Audit staff has evaluated the follow-up responses and documentation provided. The report had four findings. The Department has taken corrective action to address the findings identified in the Auditor General's report.

#### ***Management's Original Response:***

*Findings 1-3 were discussed with Regional and Circuit Leadership during statewide meetings.*

**Finding 1:** Department controls over the intake, orientation, and case review of offenders released on community supervision continue to need improvement.

**Recommendation:** Department management enhance controls, including the provision of additional employee training, to ensure that all intake, orientation, and initial 60-day case review activities are timely and appropriately performed, reviewed, and documented. Department management take steps to ensure that Department records evidence the completion of assigned re-reviews, the resolution of documented case review exceptions, the provision of emergency

contact telephone numbers to offenders, and compliance with career offender registration requirements.

**Management's Original Response:**

1. *Enhanced Employee Training*

- *We have initiated a comprehensive training program for all relevant staff, focusing on the specific areas highlighted in your recommendations.*
- *Training modules cover proper documentation, re-review processes, handling exceptions, and compliance with career offender registration requirements.*

2. *Controls and Monitoring*

- *Clear protocols for re-reviews have been established, and records will evidence the completion of assigned re-reviews.*

3. *Emergency Contact Information*

- *To address the provision of emergency contact telephone numbers to offenders, we have reinforced our procedures to ensure this information is consistently provided during the intake and orientation processes.*
- *Staff have been trained on the importance of collecting and conveying emergency contact details to offenders.*

4. *Compliance with Career Offender Registration*

- *A training specifically designed for High-Risk Specialists will be implemented in the Spring of 2024. During the training, Career Offender responsibilities will be discussed in detail.*

5. *Continuous Improvement*

- *Employee feedback have been actively sought, and mechanisms for process improvement will be established based on lessons learned from ongoing reviews and assessments.*

**Management's Follow-up Response:**

1. *Compliance with Career Offender Registration*

- *A training specifically designed for High-Risk Specialists has been implemented then delivered in the Spring of 2024. During the training, Career Offender responsibilities were discussed in detail.*

2. *Continuous Improvement*

- *Employee feedback have been actively sought, and mechanisms for process improvement will be established based on lessons learned from ongoing reviews and assessments. We have sent several surveys then created a Work Smarter, Not Harder Workgroup consisting of a diverse group of staff from throughout the state.*

**Finding 2:** The Department did not always timely perform Florida Crime Information Center and National Crime Information Center records checks on offenders recommended for early termination of probation. A similar finding was noted in our report No. 2020-006.

**Recommendation:** Department management ensure that Department records evidence the timely conduct of FCIC and NCIC records checks prior to recommending offenders for early termination of probation.

**Management's Original Response:**

## 1. Training and Awareness

- Staff members involved in the recommendation process have been trained to prioritize and conduct FCIC and NCIC records checks in a timely manner, with a focus on the significance of this step in the decision-making process.

## 2. Monitoring and Audits

- Internal audits have been conducted to ensure that FCIC and NCIC records checks are consistently performed before any recommendation for early termination of probation, and deviations will be addressed promptly.

**Management's Follow-up Response:**

No updates.

**Bureau of Internal Audit Comments:**

Corrective action was addressed in program management's original response to the finding.

**Finding 3:** Department controls for offender supervision continue to need improvement.

**Recommendation:** Department management improve certain offender supervision controls.

**Management's Original Response:**

## 1. Employee Training and Development

- Staff members involved in offender supervision have been trained to ensure they are well-equipped to implement and adhere to enhanced controls.

## 2. Technology Integration

- We will explore and implement technology solutions to augment our offender supervision controls during the OBIS Modernization process.

## 3. Regular Monitoring and Audits

- To reinforce compliance and effectiveness, we will establish regular monitoring and auditing processes.
- Internal audits will be conducted to assess the implementation of enhanced controls, with a focus on identifying and addressing any deviations promptly.

## 4. Continuous Improvement

- Embracing a culture of continuous improvement, we will encourage staff to provide feedback on the effectiveness of the revised controls.
- Lessons learned from ongoing reviews and assessments will be used to make informed adjustments and ensure continual enhancement.

**Management's Follow-up Response:**

No updates.

**Bureau of Internal Audit Comments:**

Corrective action was addressed in program management's original response to the finding.

**Finding 4:** Department controls over fuel cards and the disposal of motor vehicles need improvement.

**Recommendation:** Department management enhance motor vehicle disposal controls to ensure that equipment, such as license plates and fuel cards, is removed during the vehicle

disposal process. Department establish and adhere to procedures requiring the timely deactivation of fuel cards.

***Management's Original Response:***

*The Office of Administration concurs with this finding. The Department has taken corrective action and established internal procedures to document the removal of equipment during the vehicle disposal process. The Department will update fleet policy and procedure to execute and document a timely deactivation of fuel cards.*

***Management's Follow-up Response:***

*FDC Form DC2-5039, Mobile Equipment Removal, was revised to include the vehicle's WEX Fuel Card and License Plate as a standardized requirement on the removal table. This ensures both the equipment ID number and the date of removal for both of these items are documented for verification of removal during the vehicle disposal process. The Department is establishing a three-business day timetable for the deactivation of fuels cards from the point the vehicle is officially disposed of and removed from Department inventory.*