



FISCAL YEAR 2020 ANNUAL AUDIT REPORT

October 28, 2020

OUR MISSION

The mission of the Internal Audit Division is to assist agency administrators by furnishing independent analyses, appraisals, and recommendations concerning the adequacy and effectiveness of the agency's system of internal control procedures, and the quality of performance in carrying out assigned responsibilities.

AUDIT TEAM

Renee Russell, CIA, CGAP
Deputy Director, Audit Services

Kevin Campbell
Deputy Director, Support Services

Kristy Bailey, CGAP
Audit Manager

Charlotte Jeffcoat, CGAP
Audit Manager

Cheryl Foreman, JD, CIA, CRMA
Audit Manager

To: Sarah Hicks
Governor's Office Budget and Policy Division

Christopher Mattsson
Legislative Budget Board

Internal Audit Coordinator
Texas State Auditor's Office

A report on the activity of the Internal Audit Division of the Texas Board of Criminal Justice is attached. This report fulfills the requirements of the Texas Internal Auditing Act (Government Code, Chapter 2102) and provides the content prescribed by the State Auditor's Office *Fiscal Year 2020 Guidelines for Submitting and Posting the Internal Audit Annual Report and Periodic Internal Audit Reports*. The information in this report is intended to assist state decision makers in their efforts to improve accountability and increase the effectiveness and efficiency of state government.

We appreciate the opportunity to participate in this program. For additional information concerning this report, please contact me at (936) 437-7100.

Sincerely,

A handwritten signature in blue ink, appearing to read "CCirrito".

Chris Cirrito, CIA, CFE, CGAP
Director, Internal Audit Division
Texas Board of Criminal Justice

xc: Members, Texas Board of Criminal Justice
Bryan Collier, Texas Department of Criminal Justice
David Gutierrez, Texas Board of Pardons and Paroles
Kristina Hartman, Windham School District

INTRODUCTION

Purpose

To provide information on the assurance services, consulting services, and other activities of the internal audit function. In addition, the annual internal audit report assists oversight agencies in their planning and coordination efforts.

Statutory Requirement

In accordance with Chapter 2102 of the Government Code, the internal auditor shall prepare an annual report and submit the report before November 1 of each year to the Governor, the Legislative Budget Board, the State Auditor, the state agency's governing board, and the agency administrator. The State Auditor shall prescribe the form and content of the report, subject to the approval of the Legislative Audit Committee.

Texas Board of Criminal Justice Policy

In accordance with Board Policy 14.02, the Director of the Internal Audit Division shall annually report to the Board on the activities of the preceding year.

TABLE OF CONTENTS

Compliance with Government Code Section 2102.015	4
Fiscal Year 2019 and 2020 Annual Audit Plans	5
Consulting Services and Non-Audit Services Completed	7
External Quality Assurance Review	8
Fiscal Year 2021 Annual Audit Plan	9
External Audit Services	23
Reporting Suspected Fraud and Abuse	25
Texas Government Code Sections 2102.015 (d) and (e) Update	26

I. COMPLIANCE WITH TEXAS GOVERNMENT CODE 2102.015

Section 2102.015 of the Texas Government Code requires state agencies and higher education institutions to post certain information on their internet websites. The TDCJ Internal Audit Division will follow the procedures below to ensure compliance with posting requirements.

Texas Government Code Section 2102.015 (b) (1) requires posting of the agency's internal audit plan approved as provided by section 2102.008.

The Annual Internal Audit Plan is developed in the spring and summer of each fiscal year and presented to the Texas Board of Criminal Justice for approval at the August board meeting. Upon approval, the plan will be posted to the agency's web site no later than September 1st of each year.

Texas Government Code Section 2102.015 (b) (2) requires posting of the agency's annual report required under section 2102.009.

The State Auditor's Office provides guidance to state agencies and higher education institutions for the preparation of the annual report in September of each year. Upon receipt of those instructions the TDCJ Internal Audit Division will begin compiling the information into the prescribed format. The report will be distributed as required and posted to the agency's website.

Texas Government Code Sections 2102.015 (d) and (e) require entities to update the posting with:

- A detailed summary of the weaknesses, deficiencies, wrongdoings, or other concerns raised by the audit plan or annual report; and,
- A summary of the action taken by the agency to address concerns, if any, that are raised by the audit plan or annual report.

To comply with this reporting requirement we have added Chapter VIII to this report. That Chapter is titled, *Texas Government Code Sections 2102.015 (d) and (e) Update*, and consists of a table, which includes every audit report issued in fiscal year 2020.

The final column titled, *Actions Taken*, satisfies the updating requirements for part (e). It presents management's self-reported status of implementation for the recommendation.

II. FISCAL YEAR 2019 AND 2020 ANNUAL AUDIT PLANS

The table provided below includes audits performed during fiscal year 2020 as well as audits on the fiscal year 2019 plan which were ongoing when the 2019 annual report was issued. Additionally, the Annual Audit Plan for Fiscal Year 2020 was modified. The change reflected the cancelation of six audits on the plan approved by the Texas Board of Criminal Justice (TBCJ) on August 21, 2019. These projects were canceled due to the impact of the COVID – 19 pandemic and will be considered in developing future annual audit plans. The Texas Board of Criminal Justice was advised of this modification at their meeting on June 26, 2020. Projects canceled were as follows:

- 2007 Security Equipment
- 2009 Employment Services
- 2011 AD 10.20 Program
- 2012 SAFPF/ISF Placements
- 2013 Unit Schedules
- 2014 Program Referrals

AUDIT NO.	AUDIT/REPORT TITLE	STATUS	REPORT DATE	EXPLANATION FOR DEVIATION
1907	<i>Pest Control</i> Manufacturing, Agribusiness, and Logistics Division	Complete	09/25/19	N/A
1908	<i>Uniformed Employee Time Records</i> Human Resources Division	Complete	01/16/19	N/A
1909	<i>Unity Activity Documentation</i> Correctional Institutions Division	Complete	03/02/20	N/A
1911	<i>Resource Access Control Facility</i> Information Technology Division	Complete	01/16/20	N/A
1912	<i>Rehabilitation Tier Tracking and Placement</i> Rehabilitation Programs Division	Complete	03/02/20	N/A
1913	<i>Complaint Resolution</i> Health Services Division	Complete	11/15/19	N/A
1914	<i>Offender Food Procurement</i> Business and Finance Division	Complete	10/09/19	N/A
1915	<i>Access to Courts</i> Administrative Review and Risk Management Division	Complete	04/30/20	N/A
2004	<i>Public Funds Investment</i> Business and Finance Division Windham School District	Complete	12/17/19	N/A
2005	<i>Employee Clearances</i> Human Resources Division	Complete	07/21/20	N/A

II. FISCAL YEAR 2019 AND 2020 ANNUAL AUDIT PLANS

AUDIT No.	AUDIT/REPORT TITLE	STATUS	REPORT DATE	EXPLANATION FOR DEVIATION
2006	<i>Warrants Section</i> Parole Division	Complete	08/12/20	N/A
2008	<i>Social Media Governance</i> Executive Administrative Services	Complete	04/22/20	N/A
2010	<i>OIG Information System Security</i> Office of the Inspector General	Ongoing	N/A	N/A
2015	<i>Action Plan Follow Up and Tracking</i> Internal Audit Division	Ongoing	N/A	N/A

III. CONSULTING SERVICES AND NONAUDIT SERVICES COMPLETED

NAME OF REPORT	OBJECTIVE(S)	OBSERVATIONS/RESULTS AND RECOMMENDATIONS
<p>Project Number: 2001 <i>Operational Review Consultation</i> Report Date: N/A</p>	<p>To provide advice related to determining whether the review covers the most important areas and whether review methodology identifies areas in need of management action.</p>	<p>This project will continue through fiscal year 2021 as project number 2101.</p>
<p>Project Number: 2002 <i>Parole Case File Consultation</i> Report Date: N/A</p>	<p>To provide advice regarding risks and internal controls during joint efforts to image parole case files.</p>	<p>This project will continue through fiscal year 2021 as project number 2102.</p>
<p>Project Number: 2003 <i>Corrections Information Technology System Consultation</i> Report Date: N/A</p>	<p>To provide advice regarding risks and internal controls during efforts to implement the Corrections Information Technology System.</p>	<p>As part of the 5% budget reduction as instructed by the Governor, the funding for the Corrections Information Technology System was eliminated by the TDCJ; therefore, this consultation was discontinued.</p>

IV. EXTERNAL QUALITY ASSURANCE REVIEW

Texas Department of Criminal Justice – Internal Audit Division
External Quality Assurance Review – August 2019

Overall Opinion

Based on the information received and evaluated during this external quality assurance review, it is our opinion that the Texas Department of Criminal Justice Internal Audit Division receives a rating of "Pass/Generally Conforms" and is in compliance with the Institute of Internal Auditors (IIA) *International Standards for the Professional Practice of Internal Auditing* and Code of Ethics, the United States Government Accountability Office (GAO) *Government Auditing Standards*, and the Texas Internal Auditing Act (Texas Government Code, Chapter 2102). This opinion, which is the highest of the three possible ratings, means that policies, procedures, and practices are in place to implement the standards and requirements necessary for ensuring the independence, objectivity, and proficiency of the internal audit function.

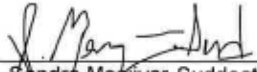
We found that the Internal Audit Division is independent, objective, and able to render impartial and unbiased judgments on the audit work performed. The staff members are qualified, proficient, and knowledgeable in the areas they audit. Individual audit projects are planned using risk assessment techniques; audit conclusions are supported in the working papers; and findings and recommendations are communicated clearly and concisely.

The Internal Audit Division is well managed internally. In addition, the Department has effective relationships with the Board and is well respected and supported by management. Surveys and interviews conducted during the quality assurance review indicate that management considers Internal Audit a useful part of the overall agency operations and finds that the audit process and report recommendations add value and help improve the agency's operations.

The Internal Audit Division has reviewed the results of the peer review team's work and has accepted them to be an accurate representation of the Department's operations.


Acknowledgements

We appreciate the courtesy and cooperation extended to us by the Internal Audit Director, Internal Audit staff, the Chairman and the Audit and Review Committee Chairman of the Board, the Executive Director, and the senior managers who participated in the interview process. We would also like to thank each person who completed surveys for the quality assurance review. The feedback from the surveys and the interviews provided valuable information regarding the operations of the Internal Audit Division and its relationship with management.


Sandra Mejivar-Suddeath
Director of Internal Audit
Texas Department of Motor
Vehicles
SAIAF Peer Review Team Leader

09/09/2019

Date


Eleazar Garcia
Chief Auditor
Texas Juvenile Justice Department
SAIAF Peer Review Team Member

9/9/19
Date

V. FISCAL YEAR 2021 AUDIT PLAN

The following table is our Fiscal Year 2021 Annual Audit Plan as presented to, and approved by, the Texas Board of Criminal Justice on August 14, 2020.

All audits that, in our opinion, were ranked “high” risk are included on the plan.

The first step in the risk assessment process is the identification of the audit universe. We review and update this universe on an ongoing basis and are diligent to ensure areas of the agency that monitor and manage contracts are identified in our universe. In addition, our identification of the audit universe for information technology includes functions listed in Title 1, Texas Administrative Code, Chapter 202.

Our risk assessment methodology is based on the Committee of Sponsoring Organization’s (COSO) Internal Control Integrated Framework. This framework is applicable to evaluate risks in all agency functions; therefore, the process described below is applied to contract management and information technology functions identified in the audit universe.

I. Purpose

The Internal Audit Division’s methodology for developing an annual risk-based audit plan. The framework described within this manual is based on the Committee of Sponsoring Organization’s *Integrated Framework* and the Government Accountability Office’s *Assessing Internal Controls in Performance Audits* (Publication OP-4.14).

II. Procedures

A. Identification of the Audit Universe

The Audit Universe is a list of all auditable activities. The audit universe is based on organizational charts, but activities may be identified through other sources. These sources are reviewed on an ongoing basis to ensure the universe is complete and accurate and may include the following:

1. Agency Strategic Plan;
2. Agency Budget;
3. Management Presentations at board meetings;
4. Policy and Procedure manuals;
5. Input from Management;
6. Legislative Implementation Plans; and,
7. Fraud Self-Assessment, Continuity of Operations, and Enterprise Risk Management exercises.

B. Quantifying Risk and Exposures

The audit universe is monitored on an ongoing basis. As events occur that potentially impact the risk associated with a specific auditable activity, the activity is scored or re-scored using the following framework:

V. FISCAL YEAR 2021 AUDIT PLAN

1. Impact is the extent to which a risk event might affect the enterprise. Impact is presented in terms of the three COSO objectives and is weighted as 30% of overall ranking. The three components will provide a score reflecting impact risk.

The framework sets forth three categories of objectives, which allow organizations to focus on separate aspects of internal control. These distinct but overlapping categories (a particular objective can fall under more than one category) address different needs and may be the direct responsibility of different individuals. The three categories can also indicate what is to be expected of internal control. When scoring, the auditor should be cognizant of inherent risk associated with the subject matter. This scoring should **not** take into consideration knowledge the auditor may have of internal control in the area.

These objectives include and have been weighted in COSO objectives scoring as follows (staff may also use 2 or 4 to indicate judgement between the set categories):

30% Reporting Objectives: Pertain to internal and external financial and nonfinancial reporting and may encompass reliability, timeliness, transparency, or other terms as set forth by regulators, standard setters, or the entity's policies.

- 5 Should be given if the reporting is to external entities such as the federal government, governor's office, legislature, Comptroller of Public Accounts, or State Auditor's Office. In addition, should be given if internal reporting may cause management to make poor decisions that would be severe in terms of impact on the agency mission.
- 3 Given in cases in which internal reporting may cause poor decisions with a moderate impact on operations.
- 1 No reporting or little impact on operations.

45% Operational Objectives: Pertain to the effectiveness and efficiency of the entity's operations, including operational and financial performance goals and safeguarding assets against loss.

- 5 Deficiencies would have a significant impact on operations. For example, the operational objective is directly related to human safety and/or secure operation of facilities.
- 3 Deficiencies would have a moderate impact on operations. The operational objective is not related to human safety and/or secure operations of facilities and/or serves a support role.
- 1 Deficiencies would have a limited impact on operations. Minor supporting role.

V. FISCAL YEAR 2021 AUDIT PLAN

25% **Compliance Objectives:** Pertain to adherence to laws and regulations to which the entity is subject.

5 Mandate in federal or state law, Texas Administrative Code, Board Policy, or a significant Executive Directive.

3 Mandate is found in agency Administrative Directives and/or significant operating procedures (e.g. Security Memorandums, operational plans, etc.).

1 Departmental procedures not directly tied to higher level mandates.

2. Likelihood is the possibility that a given event or consequence will occur. Measuring likelihood includes consideration of the application of control activities and is indicative of residual risk: Weighted as 70% of overall ranking.

40% **Control Environment:** The control environment is the set of standards, processes and structures that provide the basis for carrying out internal control across the organization. The board of directors and senior management establish the tone at the top regarding the importance of internal control and expected standards of conduct. There are five principles relating to Control Environment:

- a. The organization demonstrates a commitment to integrity and ethical values.
- b. The board of directors demonstrates independence from management and exercises oversight of the development and performance of internal control.
- c. Management establishes, with board oversight, structures, reporting lines, and appropriate authorities and responsibilities in the pursuit of objectives.
- d. The organization demonstrates a commitment to attract, develop, and retain competent individuals in alignment with objectives.
- e. The organization holds individuals accountable for their internal control responsibilities in the pursuit of objectives.

The auditor should consider all of the above factors and any other knowledge about the control environment and use their respective judgment to score between 1 (strong environment) and 5 (weak environment).

25% **Process Complexity:** Indicates the degree to which processes are difficult to perform and require a high degree of specialized knowledge and capability.

5 The process is very complex and requires a high degree of staff capability, knowledge etc.

3 The process is complex and requires a moderate level of capability and knowledge.

1 Not complex and does not require a great deal of capability and knowledge.

20% **Historical Problems:** Indicates the degree to which problems within the function are known to the auditors. This may include, but not be limited to, red flags, past

V. FISCAL YEAR 2021 AUDIT PLAN

performance, legislative inquiry, negative media, etc.

- 5 Problems are known to be significant and to have occurred within two years. Poor performance found in prior audits. Negative, recent interaction with legislature and/or media. Negative State Auditor's Office reports have been issued. Recent red flags exist.
- 3 Moderate problems are known or problems occurred longer than two years ago. Problems may have occurred but there is evidence of corrective action.
- 1 Minor problems or no known issues exist.

15% **Degree of Change:** This factor is used to evaluate turnover in key positions and/or changes in operational responsibilities, and organizational realignments.

- 5 High turnover in key positions, assignment of operational responsibilities not previously conducted, significant organizational restructuring.
- 3 Moderate turnover in key positions, assignment of operational responsibilities not previously conducted but within the realm of experience of the area, minor organizational restructuring.
- 1 Stable.

III. Developing Audit Objectives

The Internal Audit Division must assess and make appropriate recommendations for improving governance, risk management, and control processes within the agency. Recommendations are derived from audit objectives identified during audit plan development.

Audit objectives are designed to assess the risk identified during plan development. Risk is defined as the possibility of an event occurring that will have an impact on the achievement of objectives. The effect of these risks on the organization can be categorized as a failure to ensure:

- Reliability and integrity of financial and operational information;
- Effectiveness and efficiency of operations and programs;
- Safeguarding of assets; and,
- Compliance with policies, plans, procedures, laws, regulations, policies, procedures, and contracts.

Key audit objectives are usually to provide senior management and the board with assurance and information to help them accomplish the organization's objectives. To support these objectives audit recommendations may:

V. FISCAL YEAR 2021 AUDIT PLAN

- Promote appropriate ethics and values;
- Ensure effective organizational performance management and accountability;
- Ensure organizational objectives support and align with the agency’s mission; or,
- Promote continuous improvement in the internal control system.

IV. Overall Risk Assessment

Overall risk assessment is determined by summing all risk factor scores and applying the scoring guidelines to determine low, moderate, or high risk. Due to the maturity of management processes in place, we do not automatically quantify an auditable activity as “high risk”. Instead we evaluate the audit universe on an ongoing basis and assign the top third as being of higher risk.

V. Input from Senior Management and the Texas Board of Criminal Justice

Input to the annual audit plan is formally solicited from senior management and the Texas Board of Criminal Justice. This solicitation includes a request being sent to the Board for their input. In addition, a series of meetings with Division Directors (and their staff, if present) to discuss the Catalog of Auditable Activities will result in an email (with attachments if necessary) being sent to the Division Director confirming any planned audits in their division. This communication will be the method used to document the discussions with Division Directors as to the level of risk associated with the identified activities.

Audit requests by a single person will be given a score of 1, with points being added for each successive request in the same area. Scores will be added to pre-request scoring outcomes and weighted as follows:

- 20% Desire communicated by a Department head within auditable activity;
- 30% Desire communicated by Division Director; or a Board of Pardons and Paroles member; or,
- 50% Desire communicated by TBCJ member, TDCJ Executive or Deputy Executive Director, or SAO requests a joint audit.

VI. Legislative Mandate

Based on a legislative mandate an audit will be scheduled.

VII. Auditor Judgment

Activities with the highest scores will be reviewed for inclusion on the proposed Annual Audit Plan, identification for continued monitoring and consideration in future audit periods, or an adjustment in score to a more appropriate relative ranking. This review will consider such factors as:

V. FISCAL YEAR 2021 AUDIT PLAN

- the availability of audit staff with the requisite knowledge, skills, and disciplines;
- time frames for implementation of remedial actions as a result of prior audits;
- reorganizations;
- extent and frequency of audits in the area;
- the score of an activity relative to the scores of other activities; or,
- the potential to obtain operating benefits from the audit.

This review will also consider potential cyclical audits of areas with high inherent risk but low residual risk.

VIII. Communication and Approval

Subsequent to the compilation of the requests by the various Division Directors and the risks identified by Audit Management judgment, a proposed Annual Audit Plan will be prepared and reviewed with the Executive Director and the Deputy Executive Director to solicit their input. Subsequent to those discussions the Annual Audit Plan will be submitted to the Board Office by their established deadline. Once submitted, Audit Management will personally review the proposed plan with the Chairman of the Board. At this time, the Board Office will then submit the proposed plan to the full Board to allow for their review. After their review, each Board Member is personally briefed by Audit Management on the proposed Annual Audit Plan.

In addition, a meeting with the State Auditor's Office risk assessment team is conducted to ensure duplication of efforts is minimized and audit work is coordinated.

The proposed Annual Audit Plan is presented to the Audit and Review Committee of the Texas Board of Criminal Justice at the board meeting prior to the start of the fiscal year; typically in August. The presentation to the Audit and Review Committee should include a discussion of the potential for completion of the proposed Annual Audit Plan and a discussion of resource requirements. In addition, higher risks that are not likely to be covered by the plan should be discussed to ensure the committee is aware of the activities that will not be audited.

Typically, the approval of the Annual Audit Plan and the associated risk assessment incorporates a provision allowing the Director of Internal Audit to perform work outside the audit plan if the changes are merited in the judgment of the Internal Audit Director and the deviations are based on an updated risk analysis and documented as required by the Act.

FISCAL YEAR 2021 AUDIT PLAN

PROJECT NUMBER	PROJECT TITLE, DIVISION(S) & PROJECT HOURS	JUSTIFICATION	OBJECTIVE
2101	<p>Operational Review Consultation</p> <p><i>Administrative Review and Risk Management Division</i></p> <p>Project Hours: As needed.</p>	<p>The concept of self-auditing began within the Texas Department of Corrections in 1984, with the establishment of the Office of Compliance in response to monitor reports regarding specific functional areas prepared by the Special Master of the Ruiz case. When the final Ruiz case judgment was issued in December of 1992, this function was renamed as Operational Review and expanded to monitor and determine policy compliance with all aspects of unit level operations.</p> <p>Currently, the Operational Review program utilizes 34 functional area checklists consisting of questions developed by each functional area proponent to conduct unit, division, and division level follow-up compliance reviews of unit-based operations on both TDCJ and privately operated units.</p> <p>We will assist management by providing non-audit advisory services during agency efforts to revise methodologies related to the division level compliance review. This would include providing advice related to determining whether the review covers the most important areas and whether review methodology identifies areas in need of management action.</p> <p>This project was included on our fiscal year 2020 audit plan as consultation (2001). This consultation project remains ongoing.</p>	<p>To provide advice related to determining whether the review covers the most important areas and whether review methodology identifies areas in need of management action.</p>
2102	<p>Parole Case File Consultation</p> <p><i>Board of Pardons and Paroles</i></p> <p><i>Parole Division</i></p> <p><i>Executive Administrative</i></p>	<p>A parole case file is a physical parole file created and maintained for each parole eligible offender until the offender discharges the Texas Department of Criminal Justice's supervision. These files contain important information and documentation for use by various entities making offender parole supervision decisions. Requested parole case files are boxed, transported, and delivered throughout the state via truck mail couriers, hand delivery, and commercial or U.S. Postal Service mail.</p>	<p>To provide advice regarding risks and internal controls during joint efforts to image parole case files.</p>

FISCAL YEAR 2021 AUDIT PLAN

PROJECT NUMBER	PROJECT TITLE, DIVISION(S) & PROJECT HOURS	JUSTIFICATION	OBJECTIVE
	<p><i>Services</i></p> <p><i>Information Technology Division</i></p> <p>Project Hours: As needed.</p>	<p>To address the ongoing transition of physical paper records to electronic records using new and evolving information technologies, the TDCJ created the Records Management Department. The first priority of the department is to digitize approximately 173,000 parole case files utilizing a streamlined method of scanning and indexing currently managed by the Central File Coordination Unit of the Parole Division. The TDCJ and Board of Pardons and Paroles requested we serve as consultants to this project and provide advice related to risks and internal controls.</p> <p>This project was included on our fiscal year 2020 audit plan as consultation (2002). This consultation project remains ongoing.</p>	
2103	<p>Data Management</p> <p><i>Information Technology Division</i></p> <p>Project Hours: 1,968</p>	<p>The Texas Department of Criminal Justice generates and stores large quantities of electronic data. Data storage is facilitated through contractual agreements with the Texas Department of Information Resources on a fee basis. As of June 2020, the Information Technology Division reported 241,075 gigabytes of data stored at a monthly cost of approximately \$87,800.</p> <p>In addition to costs associated with data storage, the agency is also responsible for managing data to ensure the data is available when needed and maintained in accordance with state and agency records retention requirements.</p>	<p>To determine the effectiveness of processes to ensure agency data is available, retained for the appropriate period, and stored at the minimum cost necessary for the specific data set.</p>
2104	<p>Workforce Diversity</p> <p><i>Human Resources Division</i></p> <p>Project Hours: 2,624</p>	<p>Personnel Directive – 10, <i>Workforce Diversity</i>, establishes that the TDCJ recognizes diversity as one of the agency’s greatest strengths by enhancing its ability to accomplish the agency’s mission and enriching employees both professionally and personally. The directive further acknowledges agency goals to:</p>	<p>To evaluate the effectiveness of agency efforts to achieve the goals listed in Personnel Directive - 10.</p>

FISCAL YEAR 2021 AUDIT PLAN

PROJECT NUMBER	PROJECT TITLE, DIVISION(S) & PROJECT HOURS	JUSTIFICATION	OBJECTIVE
		<ul style="list-style-type: none"> • Create a positive environment that promotes personal and professional development and attracts new talent; • Promote policies, programs, and procedures that value diversity and individual dignity; • Encourage education about diversity, the development of supportive workplace relationships with others, and leading by example when making decisions related to the workplace; • Remove barriers hindering progress; and, • Develop leadership that empowers all employees to reach their full potential while contributing to the agency's mission. <p>To assist in the achievement of these goals, the agency organized the Human Resources Division Employee Relations department to proactively maintain and enhance a positive working environment for employees. Through interdepartmental coordination, the Employee Relations department is tasked with offering: empowerment for the employee, support for administration, and fact-based responses and recommendations consistent with the agency's policies.</p>	
2105	<p>License Plate Factory</p> <p><i>Manufacturing, Agribusiness, and Logistics Division</i></p> <p><i>Texas Department of Motor Vehicles</i></p> <p>Project Hours: 1,476</p>	<p>Texas Correctional Industries is responsible for manufacturing vehicle license plates in the State of Texas. Original license plate production began at the Huntsville Unit in 1935 and relocated to the Wynne Unit in 1975. Through an interagency agreement with the Texas Department of Motor Vehicles (DMV), the factory manufactures license plates for the State of Texas. The Wynne License Plate Factory employs 12 personnel and approximately 123 offenders.</p> <p>The factory receives orders from DMV inspectors housed on-site and DMV staff assumes responsibility of the license plates once they are received at the Wynne Unit warehouse. The Department of Motor Vehicles ships orders daily to regional or county offices. As of June 15, 2020, the DMV</p>	<p>To determine whether Texas Correctional Industries complies with, and maintains accurate financial records related to, the interagency agreement with the Texas Department of Motor Vehicles for license plates.</p>

FISCAL YEAR 2021 AUDIT PLAN

PROJECT NUMBER	PROJECT TITLE, DIVISION(S) & PROJECT HOURS	JUSTIFICATION	OBJECTIVE
		warehouse contained an inventory of 7,638,000 plates (8 months of inventory). In fiscal year 2019 the license plate factory produced 9,425,000 plates at a contracted amount of \$14,598,910.50. The agency also began producing license plates for the State of Tennessee in May of 2020. This project will be performed in coordination with a similar audit planned by the Texas Department of Motor Vehicles.	
2106	<p>Student Contact Hour Tracking</p> <p><i>Windham School District</i></p> <p>Project Hours: 1,476</p>	<p>The Texas Education Code (TEC) provides for the operation of the Windham School District through funding received from the foundation school fund of the Texas Education Agency, through appropriated receipt agreements with the Texas Department of Criminal Justice, and through the use of awarded grant funds. Under section 19.005 of the TEC, <i>Eligibility of Certain Programs and Services</i>, the Commissioner of Education allocates funds to the district based on an amount established in the General Appropriations Act for each contact hour between a teacher and an eligible person, including administrative costs, for the best 180 of 210 school days in each year of the state’s fiscal biennium.</p> <p>Student attendance records are among the most essential records maintained by the Windham School District for reporting, as contact hours are the basis for the district’s funding. For fiscal year 2019, the district reported 12,325,250 contact hours received by students attending both academic and career and technical education programs. The contact hour rates for the 2020-2021 biennium are approximately \$4.48 per hour for academic education and \$3.67 per hour for career and technical education.</p> <p>Management requested this audit.</p>	To determine the efficiency of the processes to track student contact hours in the Windham School District’s academic and career and technical education programs.
2107	<p>Texas Risk Assessment System Scoring</p>	<p>The Texas Risk Assessment System (TRAS) is a seamless, evidenced-based assessment system that follows an offender through the criminal justice system from community supervision, incarceration, re-entry, and parole</p>	To determine the effectiveness of efforts to score and assign offenders

FISCAL YEAR 2021 AUDIT PLAN

PROJECT NUMBER	PROJECT TITLE, DIVISION(S) & PROJECT HOURS	JUSTIFICATION	OBJECTIVE
	<p><i>Reentry and Integration Division</i></p> <p><i>Parole Division</i></p> <p>Project Hours: 2,624</p>	<p>supervision. The TRAS is divided into felony and misdemeanor sections, comprising a series of static and dynamic questions about the offender’s criminal history, education, employment, family and social support, neighborhood problems, substance abuse and mental health issues, peer association, and criminal attitudes and behavioral patterns.</p> <p>The assessment system interprets an offender’s criminal history and determines risk levels related to criminogenic needs and risk of re-offending. Assessment results allow criminal justice professionals to devise the most efficient case plans possible for changing behavior and enabling the allocation of supervision resources to best meet the needs of the individual offender.</p>	<p>the appropriate criminogenic risk level within the Texas Risk Assessment System.</p>
2108	<p>Farm Shop Equipment Repairs</p> <p><i>Manufacturing, Agribusiness, and Logistics Division</i></p> <p>Project Hours: 1,968</p>	<p>The Manufacturing, Agribusiness, and Logistics Division manages 13 full scale farm shops and oversees agricultural activities on 24 TDCJ units. The farm shops provide repair and preventive maintenance for a variety of agriculture equipment and fleet vehicles for various departments throughout the TDCJ. Repair and maintenance of equipment includes tractors, combines, dozers, road graders, balers, plows, harrows, vehicles used in the operations of agribusiness, security, and transportation, etc. Servicing and repairing this equipment, requires each farm shop to purchase and maintain an inventory of parts and tools.</p> <p>For fiscal year 2019, the Manufacturing, Agribusiness, and Logistics Division reported farm shop operations expenditures totaling over \$3,000,000.00 with 14,923 repair and preventive maintenance services performed on agriculture equipment and fleet vehicles.</p>	<p>To evaluate the cost effectiveness of farm shop equipment repairs.</p>
2109	<p>Community–Based Contracts</p>	<p>The Private Facility Contract Monitoring Oversight Division is responsible for monitoring compliance with contractual requirements for eight community-based privately operated residential reentry centers (halfway</p>	<p>To evaluate the effectiveness of efforts to monitor community-based</p>

FISCAL YEAR 2021 AUDIT PLAN

PROJECT NUMBER	PROJECT TITLE, DIVISION(S) & PROJECT HOURS	JUSTIFICATION	OBJECTIVE
	<p><i>Private Facility Contract Monitoring Oversight Division</i></p> <p>Project Hours: 2,460</p>	<p>houses) and 19 transitional treatment center locations. These contracts are designed to ensure both public safety and the health, safety, and treatment of the client residents.</p> <p>Parole supervision clients without an approved residence are placed in a residential reentry center either immediately upon release from prison or upon referral from parole field staff in the event the client no longer has an approved residence. Clients completing a Substance Abuse Felony Punishment Facility or In-prison Therapeutic Community treatment program may be placed in a transitional treatment center for up to 90 days to participate in the initial phase of their treatment programming as part of their continuum of care.</p> <p>The Private Facility Contract Monitoring Oversight Division reported fiscal year 2019 expenditures totaling approximately \$31,277,803.00 for residential reentry center contracts and \$28,110,860.00 for transitional treatment center contracts.</p>	<p>residential reentry and transitional treatment center contracts.</p>
2110	<p>Offender Safety Training</p> <p><i>Administrative Review and Risk Management Division</i></p> <p><i>Correctional Institutions Division</i></p> <p><i>Facilities Division</i></p> <p><i>Manufacturing, Agribusiness, and Logistics Division</i></p>	<p>Providing and maintaining a safe work and educational environment for offenders throughout their incarceration is a responsibility of both the Texas Department of Criminal Justice (TDCJ) and the Windham School District. To meet unit specific and individual offender rehabilitative needs, offenders are provided various jobs and career and technical education program training to prepare them for successful reentry into the community upon release.</p> <p>As such, each supervisor or teacher has the responsibility to facilitate and document required offender safety training within each department or classroom. This is accomplished using four types of safety training: safety orientation during the intake process; initial job training demonstrating the safe operation and use of the equipment, tools, chemicals, and the</p>	<p>To determine compliance with offender safety training requirements.</p>

FISCAL YEAR 2021 AUDIT PLAN

PROJECT NUMBER	PROJECT TITLE, DIVISION(S) & PROJECT HOURS	JUSTIFICATION	OBJECTIVE
	<p><i>Private Facility Contract Monitoring and Oversight Division</i></p> <p><i>Windham School District</i></p> <p>Project Hours: 1,476</p>	<p>identification of any associated or potential hazards; monthly safety training sessions relating to the work being performed and general safety requirements; and annual or specific needs training to increase job efficiency and reduce accident exposure.</p>	
2111	<p>Unit Schedules</p> <p><i>Correctional Institutions Division</i></p> <p>Project Hours: 3,280</p>	<p>Unit schedules are required to facilitate the management of both security and offender activities throughout all correctional facilities. Developing and following unit schedules involves coordination and cooperation across multiple divisions. Examples of scheduled unit activities include offender meals, showers and necessities exchange, recreation, commissary, education, healthcare appointments, religious programs, and various offender workforce turnouts to maintain and operate the facility.</p> <p>The development of unit schedules requires the organization, optimization, and prioritization of unit activities within available timeframes while also ensuring a sufficient number of security staff are available to supervise the offender population.</p> <p>This project was included on our fiscal year 2020 audit plan as audit (2013) and was subsequently canceled because of the COVID-19 pandemic. This audit has been rescheduled for this year's plan.</p>	<p>To evaluate the effectiveness of aligning unit schedules with available security resources.</p>
2112	<p>Freight Transportation</p> <p><i>Manufacturing, Agribusiness, and Logistics Division</i></p>	<p>The Fleet and Freight Transportation department within the Manufacturing, Agribusiness, and Logistics Division oversees the agency's transportation and distribution requirements. Fleet and Freight Transportation has four freight terminals and six mechanical operations located in Beeville, Huntsville, Tennessee Colony, Rosharon and Snyder. Freight terminals are</p>	<p>To determine the efficiency of freight transportation processes.</p>

FISCAL YEAR 2021 AUDIT PLAN

PROJECT NUMBER	PROJECT TITLE, DIVISION(S) & PROJECT HOURS	JUSTIFICATION	OBJECTIVE
	Project Hours: 1,968	<p>responsible for goods transportation, shipping and distribution planning, safety education training for employees and offenders, and coordinating the transportation and receipt of customer goods. In an effort to manage the movement of these goods and meet customer requirements, offender drivers are utilized to transport freight in a convoy with staff freight drivers providing supervision.</p> <p>The Fleet and Freight Transportation department oversees approximately 2,200 active vehicles, several thousand trailers, and other equipment. In FY 2019, the department managed a fleet of 171 tractor trucks and 460 tractor trailers. The four dispatch offices coordinated more than 29,000 freight hauls and truck drivers logged approximately 5.8 million miles. Management requested this audit.</p>	
2113	<p>Action Plan Follow Up and Tracking</p> <p><i>Internal Audit Division</i></p> <p>Project Hours: As needed.</p>	<p>We track implementation of audit recommendation action plans on an ongoing basis and determine if or when implementation verification is required. Based on our assessment, we perform audit follow up review and/or testing, as needed. This project encompasses our efforts for the review and tracking of those audit recommendations and their implementation status.</p>	<p>To determine the status of implementation for audit recommendations.</p>
2114	<p>Various Walk Throughs</p> <p><i>Internal Audit Division</i></p> <p>Project Hours: As needed.</p>	<p>Conducting walk throughs of functional areas enables the Internal Audit Division to update our risk analysis on a regular basis and ensures attention to those areas of the agency that would not otherwise be reviewed.</p>	<p>To assist in the development of future audit plans by increasing our knowledge of unaudited areas of the agency.</p>

VI. EXTERNAL AUDIT SERVICES

The TDCJ, through delegated authority from the State Auditor's Office, contract an outside vendor for audits of compliance with the Prison Rape Elimination Act. The Internal Audit Division did not use any external audit services during fiscal year 2020.

VII. REPORTING SUSPECTED FRAUD AND ABUSE

Actions taken to implement the requirements of:

1. **Fraud Reporting: Article IX, Section 7.09, the General Appropriations Act (84th Legislature, Conference Committee Report)**

This section of the Appropriations Act states:

Sec. 7.09 Fraud Reporting. A state agency or institution of higher education appropriated funds by this Act, shall use appropriated funds to assist with the detection and reporting of fraud involving state funds, as follows:

(a) By providing information on the home page of the entity's website on how to report suspected fraud waste and abuse involving state resources directly to the State Auditor's Office. This shall include, at a minimum, the State Auditor's fraud hotline information and a link to the State Auditor's website for fraud reporting; and,

○ **To implement (a) of Section 7.09, the TDCJ has:**

- Included a link on the TDCJ website homepage to report waste, fraud, and abuse to the State Auditor's Office website for fraud reporting.
- Included in each edition of the agency's monthly newsletter, *Criminal Justice Connections*, instructions to report waste, fraud, and abuse.

These communications provide information on reporting of waste, fraud, and abuse and provide the toll free phone numbers of the TDCJ Office of the Inspector General, Crime Stoppers, and the State Auditor's Office hotline.

(b) By including in the agency or institution's policies information on how to report suspected fraud involving state funds to the state auditor.

○ **To implement (b) of Section 7.09, the TDCJ has:**

- Included in Executive Directive 02.02, *Fraud Prevention, Detection, and Reporting*, a section on reporting suspected fraud that includes reference to the State Auditor's Office and the SAO Hotline. As required by ED-02.02, a copy of the policy is to be provided to every newly hired employee during their orientation.

2. **Texas Government Code, Section 321.022**

This section of the Texas Government Code states:

COORDINATION OF INVESTIGATIONS

(a) If the administrative head of a department or entity that is subject to audit by the state auditor has reasonable cause to believe that money received from the state by

VII. REPORTING SUSPECTED FRAUD AND ABUSE

the department or entity or by a client or contractor of the department or entity may have been lost, misappropriated, or misused, or that other fraudulent or unlawful conduct has occurred in relation to the operation of the department or entity, the administrative head shall report the reason and basis for the belief to the state auditor. The state auditor may investigate the report or may monitor any investigation conducted by the department or entity.

- (b) The state auditor, in consultation with state agencies and institutions, shall prescribe the form, content, and timing of a report required by this section.
- (c) All records of a communication by or to the state auditor relating to a report to the state auditor under Subsection (a) are audit working papers of the state auditor.
 - **To implement this statute TDCJ has:**
 - Developed Executive Directive 14.03, *Coordination of Investigations with the State Auditor*, which includes reference to the reporting of incidents involving the loss, misappropriation, misuse, or other fraudulent or unlawful conduct that have occurred in relation to the operation of the TDCJ to the State Auditor's Office. To fulfill these reporting requirements the TDCJ Office of the Inspector General coordinates with the State Auditor's Office to provide routine updates of potential fraud.

TEXAS GOVERNMENT CODE 2102.015 (D) AND (E) UPDATE

Texas Government Code Sections 2102.015 (d) and (e) require entities to update the posting with:

- A detailed summary of the weaknesses, deficiencies, wrongdoings, or other concerns raised by the audit plan or annual report; and,
- A summary of the action taken by the agency to address concerns, if any, that are raised by the audit plan or annual report.

The table below provides the required update for audit reports issued between September 1, 2019 and August 31, 2020. As a result of TDCJ's efforts to mitigate the effects of the COVID-19 pandemic during this timeframe, the reporting of actions taken by the agency was extended with actions captured through October 31, 2020.

TEXAS GOVERNMENT CODE 2102.015 UPDATE

AUDIT	FINDINGS AND RECOMMENDATIONS	ACTIONS TAKEN AS OF 10/31/20
<p>Audit 1907</p> <p><i>Pest Control</i></p> <p>Manufacturing, Agribusiness, and Logistics Division</p> <p>Report Date: 9/25/19</p>	<p>Finding: Pest control efforts were not always effective.</p> <p>Recommendations:</p> <ol style="list-style-type: none"> 1. Manufacturing, Agribusiness and Logistics Division management should coordinate with the Facilities and Correctional Institutions Divisions to revise Administrative Directive (AD) 10.20, AD-08.50, and Agribusiness Manual 5.01 to describe a cohesive pest control system. 2. Manufacturing, Agribusiness and Logistics Division management should work with the Facilities Division to identify and correct all maintenance issues affecting pest control. 3. Correctional Institutions Division management should ensure all units are adequately cleaned. 	<p>Management submitted action plans consistent with the recommendations made in this report. Actions are reported as ongoing with full implementation by April 2021.</p>
<p>Audit 1908</p> <p><i>Uniformed Employee Time Records</i></p> <p>Human Resources Division</p> <p>Report Date: 01/16/19</p>	<p>Finding: Uniformed employees were generally credited for the time they reported.</p> <p>Recommendations:</p> <ol style="list-style-type: none"> 1. Human Resources Division management should consider electronic solutions to replace manual time reporting processes. 2. Human Resources Division management should consider simplifying the timekeeping process by eliminating the PERS 534 and delegating responsibility for recording hours worked beyond a regular shift to a security supervisor. 	<p>Management submitted action plans consistent with the recommendations made in this report. Actions are reported as ongoing with full implementation by July 2022.</p>
<p>Audit 1909</p> <p><i>Unit Activity Documentation</i></p> <p>Correctional Institutions Division</p> <p>Report Date: 03/02/20</p>	<p>Finding: We believe the volume of paperwork is detrimental to operations and the agency should engage in a concerted effort to reduce unit-based paperwork.</p> <p>Recommendations:</p> <ol style="list-style-type: none"> 1. Correctional Institutions Division management should coordinate with applicable divisions to evaluate forms required by policy identified in this audit and make a determination of whether they are needed. 	<p>Management submitted action plans consistent with the recommendations made in this report. Actions are reported as ongoing with full implementation by November 2021.</p>

TEXAS GOVERNMENT CODE 2102.015 UPDATE

AUDIT	FINDINGS AND RECOMMENDATIONS	ACTIONS TAKEN AS OF 10/31/20
	<ol style="list-style-type: none"> 2. Executive Services should modify the agency policy review process to include a mandatory component of evaluating the necessity of paperwork associated with the policy under review. 3. Subsequent to determining whether the paperwork is needed, Correctional Institutions Division management should work with other divisions to evaluate those forms which appear to duplicate information and consolidate the documentation to the extent possible. 4. Correctional Institutions Division management should work to eliminate unit created documents, discourage future creation of this type of document, and formalize an approval process for unit-based documents that may be necessary. 5. Management should consider electronic solutions to unit-based paperwork needs as opportunities allow. 6. During implementation of the Correctional Information Technology System, management should continuously evaluate the need for unit-level paperwork and actively pursue opportunities to automate processes to reduce paperwork. 	
<p>Audit 1911</p> <p><i>Resource Access Control Facility</i></p> <p>Information Technology Division</p> <p>Report Date: 01/16/20</p>	<p>Findings:</p> <ol style="list-style-type: none"> 1. Appropriate approvals for new user access were generally obtained and access granted was generally appropriate. 2. While appropriate access may have been granted based on current job requirements, users in our sample retained inappropriate access over time. 3. Access rights were not appropriately modified according to user changes in responsibility. 4. Access rights were not appropriately deleted when employees separated from the agency. <p>Recommendations:</p> <ol style="list-style-type: none"> 1. Information Technology Division management should ensure a complete and accurate listing of user groups is made available to users and consider working with the user departments and data owners to standardize access for common job positions. 	<p>Management submitted action plans consistent with the recommendations made in this report. Actions are reported as ongoing with full implementation by December 2021.</p>

TEXAS GOVERNMENT CODE 2102.015 UPDATE

AUDIT	FINDINGS AND RECOMMENDATIONS	ACTIONS TAKEN AS OF 10/31/20
	<ol style="list-style-type: none"> 2. Information Technology Division management should ensure appropriate data owner approval is obtained prior to granting access. 3. Information Technology Division management should discontinue modifying user access without appropriately documented requests and work with executive management to ensure users understand and comply with their responsibilities related to requesting changes to user access. 4. Information Technology Division management should define when user access should be suspended, clarify who should submit the Suspend User-ID Access form and work with executive management to ensure users understand and comply with their responsibilities for submitting requests to suspend user access. 	
<p>Audit 1912</p> <p><i>Rehabilitation Tier Tracking and Placement</i></p> <p>Rehabilitation Programs Division</p> <p>Report Date: 03/02/20</p>	<p>Findings:</p> <ol style="list-style-type: none"> 1. Offenders voted to a program by the Board of Pardons and Paroles as a condition for release on parole were placed in programs consistent with the vote type. 2. Offenders voted to a rehabilitation program were generally placed in programs within the applicable timeframes. However, we believe improvements could be made. 3. Offenders voted to the FI-5 program were generally transferred within applicable timeframes. However, processes could be more efficient. 4. Offenders voted to the FI-6 program were transferred within applicable timeframes. <p>Recommendations:</p> <ol style="list-style-type: none"> 1. Rehabilitation Tier Tracking and Placement staff should continue to monitor the progress of enrollment to ensure offenders are enrolled in a timely manner once transferred to their program facility. 2. Management should consider consolidating processes related to offenders voted to a program by the Board of Pardons and Paroles as a condition for release under the responsibility of the Rehabilitation Tier Tracking and Placement staff, to include the FI-5 program. 	<p>Management submitted action plans consistent with the recommendations made in this report. Actions are reported as complete.</p>

TEXAS GOVERNMENT CODE 2102.015 UPDATE

AUDIT	FINDINGS AND RECOMMENDATIONS	ACTIONS TAKEN AS OF 10/31/20
<p>Audit 1913</p> <p><i>Complaint Resolution</i></p> <p>Health Services Division</p> <p>Report Date: 11/15/19</p>	<p>Findings:</p> <ol style="list-style-type: none"> 1. Complaints were routed to the appropriate investigator and investigations were complete. 2. Complaints were generally responded to within established timeframes. <p>Recommendations:</p> <ol style="list-style-type: none"> 1. Health Services Division management should ensure they are informed of the outcome for all cases investigated by a health service provider. 2. Health Services Division management should ensure extensions for third party complaints are appropriately documented. 	<p>Management submitted action plans consistent with the recommendations made in this report. Actions are reported as complete.</p>
<p>Audit 1914</p> <p><i>Offender Food Procurement</i></p> <p>Business and Finance Division</p> <p>Report Date: 10/9/19</p>	<p>Finding: Offender Food Procurement processes to ensure compliance with Administrative Directive 14.06 were well designed.</p> <p>We made no recommendations.</p>	<p>N/A</p>
<p>Audit 1915</p> <p><i>Access to Courts</i></p> <p>Administrative Review and Risk Management Division</p> <p>Report Date: 04/30/20</p>	<p>Findings:</p> <ol style="list-style-type: none"> 1. Unit law library holdings generally included all required materials. 2. Although law library schedules were not always designed to afford weekend access, access to law library sessions at each unit in our sample was typically facilitated upon request. 3. Offenders with indirect access were allowed to request and received legal research materials in compliance with BP-03.81. <p>Recommendation: Management should ensure written schedules notify offenders of specific session</p>	<p>Management submitted action plans consistent with the recommendations made in this report. Actions are reported as ongoing with full implementation by November 2020.</p>

TEXAS GOVERNMENT CODE 2102.015 UPDATE

AUDIT	FINDINGS AND RECOMMENDATIONS	ACTIONS TAKEN AS OF 10/31/20
	<p>availability (to include weekends) in accordance with policy.</p> <p>Additional Observation: Historically, legal materials provided to these offenders were bound publications which were costly and difficult to replace. While conducting this work, we observed most materials provided to offenders with indirect access were copies of items printed from an electronic source thereby reducing replacement costs. Given the evolution of this process, management may wish to revisit provisions for access suspension when items are damaged or not returned. For example, we observed an offender’s access was suspended due to removing a staple from a packet of printed information which may not be consistent with the intent of the rule.</p> <p>Recommendation: The Administrative Review and Risk Management Division should coordinate with executive management and review existing reasons for legal material suspension to ensure policy is consistent with management’s intent. In addition, management should consider revising policy to allow a delegate to approve suspensions.</p>	
<p>Audit 2004</p> <p><i>Public Funds Investment</i></p> <p>Business and Finance Division</p> <p>Report Date: 12/17/19</p>	<p>Findings:</p> <ol style="list-style-type: none"> 1. The TDCJ and the WSD were both compliant with the Public Funds Investment Act, (Texas Government Code, Chapter 2256). 2. The investment policies and procedures for both the TDCJ and the WSD were in compliance with the Public Funds Investment Act. 3. Investments for both TDCJ and WSD were adequately safeguarded in accordance with the Public Funds Investment Act requirements. 4. In our opinion, management from the TDCJ and the WSD should continue to operate with the same standards and controls in place. <p>We made no recommendations.</p>	N/A
<p>Audit 2005</p> <p><i>Employee Clearances</i></p>	<p>Findings:</p> <ol style="list-style-type: none"> 1. Cleared applicants met all employment requirements and the Clearance Area did not deny clearance for eligible applicants. 	Management submitted action plans consistent with the recommendations made in this report. Actions are reported as

TEXAS GOVERNMENT CODE 2102.015 UPDATE

AUDIT	FINDINGS AND RECOMMENDATIONS	ACTIONS TAKEN AS OF 10/31/20
<p>Human Resources Division</p> <p>Report Date: 07/21/20</p>	<p>2. Timeliness could be improved for the clearance process.</p> <p>Recommendations:</p> <ol style="list-style-type: none"> 1. Human Resources Division management should continue to evaluate resources dedicated to agency clearances. 2. Human Resources Division management should develop acceptable timeframes for completing clearances and subsequently update the system to track clearance processing time. 3. Human Resources Division management should enforce utilization of the TDCJ Application Clearance Request Fax Cover Sheet. 	<p>ongoing with full implementation by July 2021.</p>
<p>Audit 2006</p> <p><i>Warrants Section</i></p> <p>Parole Division</p> <p>Report Date: 08/12/20</p>	<p>Findings:</p> <ol style="list-style-type: none"> 1. Violation reports were generally reviewed within the required incremental timeframes and warrants were generally issued within required timeframes. However, an overall timeframe for the entire warrant issuance process was not established and processes could be improved to increase overall timeliness. 2. After-hours warrants were not always issued within required timeframes. 3. Warrants were modified within established timeframes. <p>Recommendations:</p> <ol style="list-style-type: none"> 1. Parole Division Management should consider defining the total expected timeframe for the violation report review process, including any returns for corrections. 2. Parole Division Management should identify and track recurring violation report errors to provide feedback and training to parole officers and unit supervisors. 3. Parole Division management should consider revising processes to expedite issuance of warrants for offenders with new felony charges. 4. Parole Division management should ensure Warrants Section staff review email notifications and 	<p>Management submitted action plans consistent with the recommendations made in this report. Actions are reported as ongoing with full implementation by November 2020.</p>

TEXAS GOVERNMENT CODE 2102.015 UPDATE

AUDIT	FINDINGS AND RECOMMENDATIONS	ACTIONS TAKEN AS OF 10/31/20
	<p>the Daily Arrival Report in a timely manner to ensure all EM and GPS offenders arrive at their approved residence by the expected date and time and consider placing monitors on all Electronic Monitoring offenders prior to release.</p> <p>5. Parole Division management should clearly define the timeframe for issuing after-hours warrants for band open and bracelet strap alerts and ensure the Bracelet Strap Report is distributed in a timely manner.</p>	
<p>Audit 2008</p> <p><i>Social Media Governance</i></p> <p>Executive Administrative Services</p> <p>Report Date: 04/22/20</p>	<p>Finding: We have completed our audit of Social Media Governance and determined processes to ensure content was informed, directed, managed, and monitored were generally effective.</p> <p>Recommendations:</p> <ol style="list-style-type: none"> 1. Management should update Executive Directive – 02.44, Social Media, to represent the current Communications Department structure and require all divisions to provide social media content to the Communications Department. 2. Management should formalize standard operating procedures for the Communications Department. Procedures should be flexible to allow for the evolving social media environment, to include procedures for the agency’s approach to interaction with public comments. 	<p>Management submitted action plans consistent with the recommendations made in this report. Actions are reported as ongoing with full implementation by January 2021.</p>