

PERFORMANCE AUDIT  
OF THE  
OFFICE OF AUDIT, INTERNAL AFFAIRS, AND LITIGATION  
DEPARTMENT OF CORRECTIONS

September 2003



Michigan  
*Office of the Auditor General*  
**REPORT SUMMARY**

*Performance Audit*  
*Office of Audit, Internal Affairs, and*  
*Litigation*  
*Department of Corrections*

Report Number:  
 47-370-02

Released:  
 September 2003

*The Office of Audit, Internal Affairs, and Litigation, Department of Corrections (DOC), is responsible for internal auditing, inspecting and auditing county jails, and reviewing requests from county jails for reimbursement for housing felons. The Office is also responsible for coordinating litigation activities and investigations of allegations of violations of laws or rules by employees. In addition, the Office is responsible for coordinating prisoner/parolee grievances.*

**Audit Objectives:**

1. To assess the effectiveness and efficiency of DOC's litigation process.
2. To assess the effectiveness and efficiency of DOC's Internal Audit Division.
3. To assess the effectiveness of the Internal Affairs Division in processing criminal and major policy violation complaints.
4. To assess the effectiveness of the Prisoner Affairs Section (PAS) in responding to prisoner/parolee grievances.

~ ~ ~ ~ ~

**Audit Conclusions:**

1. We concluded that DOC's litigation process was generally effective and efficient.
2. We concluded that the Internal Audit Division was generally effective and efficient.

3. We concluded that the Internal Affairs Division was generally effective in processing criminal and major policy violation complaints.
4. We concluded that PAS was generally effective in responding to prisoner/parolee grievances.

~ ~ ~ ~ ~

**Noteworthy Accomplishments:**

1. DOC successfully lobbied for one county jail reimbursement rate. Since the inception of the Jail Reimbursement Program in 1998, three different reimbursement rates had been used each year to reimburse counties for housing felons eligible for the Program.
2. The administrative rules for jails and lockups were revised. DOC simplified the rules to include only life-safety issues and patterned them after the mandatory standards established by the American Correctional Association

for local adult detection facilities. This action has enabled DOC to be more effective and efficient and to fulfill its responsibility to promote proper, efficient, and humane administration of county jails and lockups.

3. PAS has improved its filing of prisoner/parolee grievances. PAS informed us that it took several days for staff to locate a file, which resulted in inefficient use of staff resources and impeded the processing of prisoner/parolee grievances. PAS has developed a new filing system and hired a filing clerk. This has reduced the retrieval time for prisoner/parolee grievances from several days to a few minutes.

~ ~ ~ ~ ~

**Reportable Conditions:**

1. DOC had not established organizational independence for its internal auditor.

Because the Internal Audit Division is not organizationally independent, this places the internal auditor in a position of auditing the operations for which his or her immediate supervisor is responsible. Such placement impairs the internal auditor's ability to perform independent audits.

2. DOC needs to improve staff compliance with investigative procedures.

DOC requires that Internal Affairs investigations for cases involving sexual misconduct be completed within 45 business days of receipt and all other investigations be completed within 90 days of receipt.

Timely investigative procedures help ensure that thorough investigations have been conducted and that accurate data is provided so that DOC makes informed decisions involving complaint closure.

3. DOC needs to improve the effectiveness of the prisoner/parolee grievance process in addressing prisoner issues. Also, DOC needs to reduce the number of grievances dealing with frivolous, duplicative, nonmeritorious, and nongrievable issues. The burden of cost for grievances rests with the State. Thus, there is no disincentive for prisoners/parolee who desire to file these types of grievances.

~ ~ ~ ~ ~

**Agency Response:**

The agency preliminary response indicates that DOC agrees with 2 recommendations and disagrees with 2 recommendations.

A copy of the full report can be obtained by calling 517.334.8050 or by visiting our Web site at: [www.state.mi.us/audgen/](http://www.state.mi.us/audgen/)



Michigan Office of the Auditor General  
201 N. Washington Square  
Lansing, Michigan 48913

**Thomas H. McTavish, C.P.A.**  
Auditor General

**James S. Neubecker, C.P.A., C.I.A., D.P.A.**  
Executive Deputy Auditor General

**Scott M. Strong, C.P.A., C.I.A.**  
Director of Audit Operations



STATE OF MICHIGAN  
OFFICE OF THE AUDITOR GENERAL  
201 N. WASHINGTON SQUARE  
LANSING, MICHIGAN 48913  
(517) 334-8050  
FAX (517) 334-8079

THOMAS H. MCTAVISH, C.P.A.  
AUDITOR GENERAL

September 25, 2003

Ms. Patricia L. Caruso, Director  
Department of Corrections  
Grandview Plaza  
Lansing, Michigan

Dear Ms. Caruso:

This is our report on the performance audit of the Office of Audit, Internal Affairs, and Litigation, Department of Corrections.

This report contains our report summary; description of agency; audit objectives, scope, and methodology and agency responses and prior audit follow-up; comments, findings, recommendations, and agency preliminary responses; and a glossary of acronyms and terms.

Our comments, findings, and recommendations are organized by audit objective. The agency preliminary responses were taken from the agency's responses subsequent to our audit fieldwork. The *Michigan Compiled Laws* and administrative procedures require that the audited agency develop a formal response within 60 days after release of the audit report.

We appreciate the courtesy and cooperation extended to us during this audit.

AUDITOR GENERAL

This page left intentionally blank.

## TABLE OF CONTENTS

### OFFICE OF AUDIT, INTERNAL AFFAIRS, AND LITIGATION DEPARTMENT OF CORRECTIONS

	<u>Page</u>
INTRODUCTION	
Report Summary	1
Report Letter	3
Description of Agency	6
Audit Objectives, Scope, and Methodology and Agency Responses and Prior Audit Follow-Up	8
COMMENTS, FINDINGS, RECOMMENDATIONS, AND AGENCY PRELIMINARY RESPONSES	
Litigation Process	11
Internal Audit Operations	12
1. Organizational Independence	12
Internal Affairs Operations	14
2. Compliance With Investigative Procedures	14
Prisoner Affairs Operations	15
3. Prisoner/Parolee Grievance Process	16
GLOSSARY	
Glossary of Acronyms and Terms	20

## Description of Agency

The Office of Audit, Internal Affairs, and Litigation, Department of Corrections (DOC), consists of two divisions (Internal Audit and Internal Affairs) and three sections (Litigation and Freedom of Information Act, Consent Decree, and Prisoner Affairs). The Office administrator reports to the DOC director.

The Internal Audit Division is responsible for performing all of DOC's internal auditing, evaluating DOC's internal accounting and administrative control system as required by Sections 18.1483 - 18.1487 of the *Michigan Compiled Laws*, and acting as liaison to external auditors reviewing DOC programs. The County Jail Services Unit is within the Internal Audit Division. It is responsible for inspecting and auditing county jails for compliance with State law and administrative rules (*Michigan Administrative Code R 791.701 - 791.749*) and for reviewing and providing technical assistance and consultation services to the jails. The Unit also is responsible for reviewing and approving all requests from county jails for reimbursement under DOC's Jail Reimbursement Program for the cost of housing felons diverted to jail who would otherwise be sentenced to prison.

The Internal Affairs Division is responsible for coordinating, with law enforcement agencies and institutional investigators, the investigation of allegations of criminal or administrative violations of laws or rules by DOC employees and for directing and conducting other sensitive or complex investigations as assigned by the DOC director or the Office administrator.

The Litigation and Freedom of Information Act Section is responsible for coordinating DOC's litigation activities with the Department of Attorney General and coordinating DOC's compliance with the Freedom of Information Act (Section 15.231, et seq., of the *Michigan Compiled Laws*).

The Consent Decree Section is responsible for coordinating DOC's compliance with court-ordered consent decrees and other departmentwide litigation matters, as determined by the DOC director or the Office administrator.

The Prisoner Affairs Section is responsible for coordinating prisoner/parolee grievances when the prisoner/parolee is unsatisfied with the response received at the facility and coordinating prisoner property reimbursement with the State Administrative Board.

The Office's General Fund expenditures totaled approximately \$3.5 million for the fiscal year ended September 30, 2001, and it employed 42 employees as of July 31, 2002.

## **Audit Objectives, Scope, and Methodology and Agency Responses and Prior Audit Follow-Up**

### Audit Objectives

Our performance audit\* of the Office of Audit, Internal Affairs, and Litigation, Department of Corrections (DOC), had the following objectives:

1. To assess the effectiveness\* and efficiency\* of DOC's litigation process.
2. To assess the effectiveness and efficiency of DOC's Internal Audit Division.
3. To assess the effectiveness of the Internal Affairs Division in processing criminal and major policy violation complaints.
4. To assess the effectiveness of the Prisoner Affairs Section in responding to prisoner/parolee grievances.

### Audit Scope

Our audit scope was to examine the program and other records of the Office of Audit, Internal Affairs, and Litigation. Our audit was conducted in accordance with *Government Auditing Standards* issued by the Comptroller General of the United States and, accordingly, included such tests of the records and such other auditing procedures as we considered necessary in the circumstances.

### Audit Methodology

Our audit procedures, conducted from March through August 2002, included examination of records and activities primarily for the period October 1, 1999 through July 31, 2002.

Our methodology included conducting a preliminary review of the Office's operations to gain an understanding of its activities. This included interviewing Office personnel and reviewing applicable statutes, rules, policies and procedures, and other reference materials.

\* See glossary at end of report for definition.

To accomplish our first objective, we evaluated DOC's decision process and tested a sample of DOC's litigation cases to evaluate litigation outcomes resulting from DOC's decision process.

To accomplish our second objective, we evaluated the Internal Audit Division's effectiveness in providing an independent system of investigation, audit, and reporting to provide reasonable assurances regarding the proper safeguarding of assets, the accuracy and reliability of information, the promotion of operational efficiency, the adherence to prescribed policies and procedures, and the accomplishment of established objectives\* and goals\* for operations or programs. We tested a sample of Internal Audit Division audits and examined the associated audit working papers. We analyzed the Internal Audit Division's audit plan development and professional staff training. We reviewed DOC's policies and procedures and *Standards for the Professional Practice of Internal Auditing*, issued by the Institute of Internal Auditors, affecting internal auditors' independence, professional proficiency, and audit performance.

We selected a sample of completed jail inspections. We assessed the effectiveness of inspections performed by the County Jail Services Unit within the Internal Audit Division to ensure that the county jails were in compliance with administrative rules and policies. We reviewed the completed jail inspection forms to ensure that all significant jail areas outlined in the administrative rules for jails and lockups were inspected. We sampled the inspectors' reviews of new county jail construction or renovations to determine that the plans were reviewed in a timely manner and that noncompliance issues were followed up.

We selected a sample of prisoners for whom DOC reimbursed counties under its Jail Reimbursement Program to ensure that the prisoners met the sentencing guideline requirements and that reimbursements were for the correct number of days. We also selected billing requests and verified that the counties provided appropriate prisoner reimbursement request documentation. We further tested procedures that the County Jail Services Unit performed at the facilities to verify the reimbursement requests.

To accomplish our third objective, we tested case files related to criminal, misdemeanor, and policy investigations and determined whether the case files were investigated within the required time frames. Also, we examined the sexual misconduct list of cases and

\* See glossary at end of report for definition.

determined that each case was investigated at the administrative level by a DOC investigator and referred to the Michigan Department of State Police for a criminal investigation.

To accomplish our fourth objective, we sampled prisoner/parolee grievances and analyzed the prisoner/parolee grievance process.

#### Agency Responses and Prior Audit Follow-Up

Our report includes 3 findings and 4 corresponding recommendations. The agency preliminary response indicates that DOC agrees with 2 recommendations and disagrees with 2 recommendations.

The agency preliminary response that follows each recommendation in our report was taken from the agency's written comments and oral discussion subsequent to our audit fieldwork. Section 18.1462 of the *Michigan Compiled Laws* and Department of Management and Budget Administrative Guide procedure 1280.02 require DOC to develop a formal response to our audit findings and recommendations within 60 days after release of the audit report.

DOC had complied with all 6 of the prior audit recommendations included within our current audit scope.

# COMMENTS, FINDINGS, RECOMMENDATIONS, AND AGENCY PRELIMINARY RESPONSES

## LITIGATION PROCESS

### COMMENT

**Background:** The litigation process includes the responsibility for coordinating the Department of Correction's (DOC's) compliance with court-ordered consent decrees and other departmentwide litigation matters. Senate Fiscal Agency reports on the status of lawsuits indicated that, during the 10-year period ended September 30, 2001, annual DOC court judgments and settlements averaged \$3,459,278.

During the 34-month period ended July 31, 2002, DOC incurred the following types of court judgments and settlements:

Case Type	Court-Ordered Payments	Number of Cases
Employee discrimination	\$ 7,014,838	43
Employee sexual harassment	555,200	4
Employee - other than discrimination and sexual harassment	754,015	3
Failure to protect prisoner	3,812,000	2
Other	1,192,357	56
Total	\$13,328,410	108

DOC has established policies and procedures, developed training courses for new employees, and offered continuing education programs to deal with situations surrounding employee discrimination and sexual harassment. Also, DOC communicated information that would be useful in modifying practices that ultimately result in court judgments and settlements related to employee discrimination and sexual harassment. DOC's efforts to reduce court judgments and settlements are critical to the efficient management of State resources because court judgments and settlements redirect significant General Fund resources away from prison operations.

**Audit Objective:** To assess the effectiveness and efficiency of DOC's litigation process.

**Conclusion:** We concluded that DOC's litigation process was generally effective and efficient.

## INTERNAL AUDIT OPERATIONS

### COMMENT

**Audit Objective:** To assess the effectiveness and efficiency of DOC's Internal Audit Division.

**Conclusion:** We concluded that the Internal Audit Division was generally effective and efficient. However, we noted a reportable condition\* related to organizational independence.

**Noteworthy Accomplishments:** Effective in fiscal year 2002-03, the implementation of one county jail reimbursement rate simplified the billing process for counties and the County Jail Services Unit audit process and reduced the risk of mathematical errors.

DOC successfully lobbied for one rate. Since the inception of the Jail Reimbursement Program in 1998, three different reimbursement rates had been used each year to reimburse counties for housing felons eligible for the Program. The rates were dependent on the respective county's population size and the felon's length of stay.

Also, the administrative rules for jails and lockups were revised in 1998 pursuant to DOC's authority to promulgate rules. DOC simplified the rules to include only life-safety issues and patterned them after the mandatory standards established by the American Correctional Association for local adult detention facilities. This action has enabled DOC to be more effective and efficient and to fulfill its responsibility to promote proper, efficient, and humane administration of county jails and lockups.

### FINDING

1. Organizational Independence

DOC had not established organizational independence for its internal auditor.

\* See glossary at end of report for definition.

Section 18.1486(2) of the *Michigan Compiled Laws* states that the internal auditor shall report to and be under the general supervision of the department head. Section 18.1486(5) of the *Michigan Compiled Laws* states that each internal auditor shall adhere to appropriate professional standards in carrying out any financial or program audits or investigations. The internal auditor informed us that the Internal Audit Division conducts audits in accordance with the *Standards for the Professional Practice of Internal Auditing*, issued by the Institute of Internal Auditors (*Standards*). The *Standards'* Practice Advisory 1110-1 states that the internal auditor should be responsible to an individual in the organization that allows the internal audit activity to accomplish its responsibilities. The *Standards* also state that the internal audit activity should be free from interference in determining the scope of internal auditing, performing work, and communicating results.

However, the Internal Audit Division organizationally reports to the Office of Audit, Internal Affairs, and Litigation administrator. The Office administrator coordinates DOC communications with the Department of Attorney General regarding legal issues that affect DOC and supervises the Internal Audit Division, including the County Jail Services Unit; Internal Affairs Division; Litigation and Freedom of Information Act Section; Consent Decree Section; and Prisoner Affairs Section.

Because the Internal Audit Division is not organizationally independent from these programs, this places the internal auditor in the position of auditing the operations for which his or her immediate supervisor is responsible. Such organizational placement impairs the internal auditor's ability to perform independent audits as required by law.

In August 2001, a public accounting firm analyzed the coverage and effectiveness of the State's internal audit related activities and similarly presented the preceding issue in its report. The firm recommended that department internal auditors report directly to the director or beyond, as this is the only way to ensure that independence exists within the internal audit function and that undue influence is not being placed on the auditors from senior officials. The firm also reported that DOC is performing exceptionally well related to a number of other areas that were assessed. This included DOC's internal audit risk assessment strategy and an innovative way to structure the internal audit reports.

## **RECOMMENDATION**

We recommend that DOC establish organizational independence for its internal auditor.

## **AGENCY PRELIMINARY RESPONSE**

DOC agrees and will comply by having the internal auditor report to the director for functional purposes (e.g., approval of audit plans and audit result communications) and to the Office of Audit, Internal Affairs, and Litigation administrator for administrative purposes (e.g., day-to-day operations). DOC will depict this in its organization chart and update relevant policies and procedures.

## **INTERNAL AFFAIRS OPERATIONS**

### **COMMENT**

**Audit Objective:** To assess the effectiveness of the Internal Affairs Division in processing criminal and major policy violation complaints.

**Conclusions:** **We concluded that the Internal Affairs Division was generally effective in processing criminal and major policy violation complaints.** However, we noted a reportable condition related to compliance with investigative procedures.

### **FINDING**

#### **2. Compliance With Investigative Procedures**

DOC needs to improve staff compliance with investigative procedures.

DOC's Internal Affairs Investigative Manual requires that investigations conducted for cases involving sexual misconduct be completed within 45 business days of receipt unless permission to extend the investigation is granted for cause. Also, the Internal Affairs Division's performance goals require that all other investigations be completed within 90 days of receipt.

Our review of the Internal Affairs Division's and facilities' investigation process disclosed:

- a. Six (75%) of 8 case file investigations involving sexual misconduct that we reviewed were not closed within 45 business days of receipt by the Internal

Affairs Division. These investigations were closed 84 to 260 days after receipt. The investigators did not document that it obtained permission to extend the investigations.

- b. Nine (35%) of 26 case file investigations for offenses other than sexual misconduct that we reviewed were not closed within 90 days of receipt by the Internal Affairs Division. These investigations were closed 96 to 213 days after receipt.

Timely investigative procedures help ensure that thorough investigations have been conducted and that accurate data is provided so that DOC makes informed decisions involving complaint closure.

### **RECOMMENDATION**

We recommend that DOC improve staff compliance with investigative procedures.

### **AGENCY PRELIMINARY RESPONSE**

The Office of Audit, Internal Affairs, and Litigation agrees and is taking steps to comply. The Internal Affairs Division informed us that it is establishing a process for granting and documenting extensions for cause for all case types. In addition, the status of all cases is now being reviewed in weekly staff meetings to ensure compliance with due dates. For investigations conducted by staff other than Internal Affairs Division staff, the Internal Affairs Division now contacts the investigators to discuss the status of cases approaching due dates. The Internal Affairs Division may make suggestions for moving the cases forward and may grant extensions as appropriate.

## **PRISONER AFFAIRS OPERATIONS**

### **COMMENT**

**Background:** DOC policy directive 03.02.130 and operating procedure 03.02.130 establish the procedures for the prisoner/parolee grievance process. Prisoners'/parolees' grievances may be submitted regarding alleged violations of policy and procedure or unsatisfactory conditions of confinement, which directly affect the grievant (Step I). The grievance may be rejected for various reasons, such as it is duplicative, vague, or illegible or it contains multiple unrelated issues. However, a

prisoner/parolee whose grievance is rejected may appeal the rejection to the next step as set forth in the policy. Wardens designate staff members to serve as grievance coordinators. The grievance coordinators review each grievance and assign a respondent to interview the grievant and prepare a written response to the Step I grievance. The prisoner/parolee has the option to accept the Step I response or to appeal and submit his or her grievance appeal to the grievance coordinator with the reason for appeal (Step II). The grievance coordinator assigns the grievance to a respondent other than the individual at Step I who prepares a response to the grievance appeal. The Step II respondent reviews the Step I response, appeal, and reason for the appeal and completes the Step II response. If the grievant is dissatisfied with the Step II response, the prisoner/parolee may appeal to Step III by submitting it to the Prisoner Affairs Section (PAS). PAS investigators review all steps in the grievance process and Step III reason for appeal to determine whether to respond directly to the grievance or request an investigation into the grievance issue.

**Audit Objective:** To assess the effectiveness of PAS in responding to prisoner/parolee grievances.

**Conclusion:** We concluded that PAS was generally effective in responding to prisoner/parolee grievances. However, we noted a reportable condition related to the prisoner/parolee grievance process.

**Noteworthy Accomplishment:** PAS has improved its filing system for prisoner/parolee grievances. PAS is required to maintain all prisoner/parolee grievances for 5 years, 2 at the agency and 3 at the State archives. These files must be available so that information can be provided to the Department of Attorney General, the Legislative Corrections Ombudsman's Office, and DOC's Litigation and Freedom of Information Act Section. PAS informed us that it took several days for staff to locate a file, which resulted in inefficient use of staff resources and impeded the processing of prisoner/parolee grievances. PAS has developed a new filing system and hired a filing clerk. This has reduced the retrieval time for prisoner/parolee grievances from several days to a few minutes.

## **FINDING**

### **3. Prisoner/Parolee Grievance Process**

DOC needs to improve the effectiveness of the prisoner/parolee grievance process in addressing prisoner issues. Also, DOC needs to reduce the number of

grievances dealing with frivolous, duplicative, nonmeritorious, and nongrievable issues.

DOC policy directive 03.02.130 establishes the procedures for the prisoner/parolee grievance process. This directive specifies the protocol and timing for each step in the grievance process.

Within PAS, 7 DOC staff are assigned to prisoner/parolee grievances (the section manager, 4 investigators, a file clerk, and a data entry technician), costing approximately \$350,000 annually.

Our review of prisoner/parolee grievances processed by PAS during the 30-month period ended June 30, 2002 disclosed the following statistics:

Grievance Disposition	Number of Grievances
Denied*	26,012
Resolved* or partially resolved*	1,218
Nongrievable	13
Disposition not recorded or investigation not completed	856
Total grievances investigated	28,099

PAS received 10,600 grievances during calendar year 2000 and 11,718 during 2001, an increase of 10.5%. During the same period, the prisoner population increased 4.0%. At this rate, the prisoner/parolee grievances could exceed 19,000 annually within five years.

In an attempt to reduce the number of grievances that are frivolous, duplicative, nonmeritorious, or nongrievable, the prison warden or PAS may limit access to the grievance policy for those prisoners/parolees who file these types of grievances.

PAS investigators annually review selected prisons and their prisoner/parolee grievance processes to determine if they are in compliance with DOC policy. PAS informed us that only in approximately 3% of the grievances received at Step III was further investigation needed and/or did the PAS investigator disagree with the

\* See glossary at end of report for definition.

facility investigator's response. We concluded that PAS should consider empowering individual prisons with the authority to deny Step III grievances that are frivolous, duplicative, nonmeritorious, or nongrievable issues. PAS could rely on the PAS investigator audits to ensure that prisons were complying with DOC policy to reduce the number of grievances.

The burden of cost for prisoner/parolee grievances rests with the State. Thus, there is no disincentive for prisoners/parolee who desire to file grievances for frivolous, duplicative, nonmeritorious, or nongrievable issues, which hinder DOC's ability to process legitimate prisoner/parolee grievances in an effective and efficient manner. DOC should consider creating a prisoner/parolee copayment to reduce the number of grievances submitted to DOC. In June 1997, DOC instituted a \$3 prisoner copayment for nonemergency, prisoner-initiated health care. This copayment reduced the number of prisoner requests for health care by approximately 10,000 requests per month. As reported in our performance audit of the Bureau of Health Care Services in February 2000, this reduction in health care requests allowed clinical personnel to focus their efforts on more significant health care issues. We conclude that a similar program for prisoner/parolee grievances may significantly reduce grievances and allow DOC staff to focus their efforts on more valid grievances.

## **RECOMMENDATIONS**

We recommend that DOC refine the prisoner/parolee grievance process to be more effective in addressing valid prisoner issues.

We also recommend that DOC reduce the number of grievances dealing with frivolous, duplicative, nonmeritorious, and nongrievable issues.

## **AGENCY PRELIMINARY RESPONSE**

DOC disagrees. DOC feels that the availability of the PAS Step III review process is necessary for all grievances. DOC also feels that imposing a copay could be interpreted as limiting the prisoners' access to courts. DOC's grievance process has been approved by the American Corrections Association. In addition, the prisoner grievance process has been accepted by the courts as the method by which prisoners can exhaust their administrative remedies, which is necessary before filing litigation. The grievance process is a means through which prisoners can vent their concerns, without resorting to other, less desirable or effective,

methods. Per DOC, it is important to allow grievance issues to be reviewed and appealed and for the final review to be an impartial one, which is why the final review/response (Step III) is provided by the DOC director or designee.

In addition to limiting prisoners' access to the grievance process for filing frivolous, duplicative, nonmeritorious, or nongrievable issues, it should be noted that DOC has also established a process to limit access and/or to issue major misconduct tickets. If a prisoner intentionally files a grievance that is investigated and determined to be unfounded which, if proven true, may have caused an employee or a prisoner to be disciplined or an employee to receive corrective action, the prisoner may be placed on modified access and/or be issued a major misconduct.

## **EPILOGUE**

DOC's PAS Step III review within the prisoner/parolee grievance process remains a viable option for valid prisoner issues. However, the Step III review is not a necessary option for frivolous, duplicative, nonmeritorious, or nongrievable grievances. The creation of a prisoner/parolee copayment would not result in limited prisoner/parolee access to the courts because, at DOC's discretion, the copay could be refunded for valid prisoner issues or assessed only at the Step III review process.

## Glossary of Acronyms and Terms

<b>denied</b>	DOC did not agree with the grievant and found in the favor of the facility, e.g., grievant has not provided evidence to support the complaint; therefore, this grievance is denied.
<b>DOC</b>	Department of Corrections.
<b>effectiveness</b>	Program success in achieving mission and goals.
<b>efficiency</b>	Achieving the most outputs and outcomes practical with the minimum amount of resources.
<b>goals</b>	The agency's intended outcomes or impacts for a program to accomplish its mission.
<b>objectives</b>	Specific outcomes that a program seeks to achieve its goals.
<b>partially resolved</b>	DOC has satisfied a portion of the issue of the grievance, e.g., this grievance is partially resolved; when the grievant receives his/her back pay, this grievance will be considered completely resolved.
<b>PAS</b>	Prisoner Affairs Section.
<b>performance audit</b>	An economy and efficiency audit or a program audit that is designed to provide an independent assessment of the performance of a governmental entity, program, activity, or function to improve public accountability and to facilitate decision making by parties responsible for overseeing or initiating corrective action.
<b>reportable condition</b>	A matter that, in the auditor's judgment, represents either an opportunity for improvement or a significant deficiency in management's ability to operate a program in an effective and efficient manner.

**resolved**

DOC has satisfied the issue of the grievance, e.g., the grievant received his/her requested copies; therefore, this grievance is considered resolved.

**Standards**

*Standards for the Professional Practice of Internal Auditing*, issued by the Institute of Internal Auditors.