



MICHIGAN

OFFICE OF THE AUDITOR GENERAL

AUDIT REPORT



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

“...The auditor general shall conduct post audits of financial transactions and accounts of the state and of all branches, departments, offices, boards, commissions, agencies, authorities and institutions of the state established by this constitution or by law, and performance post audits thereof.”

– Article IV, Section 53 of the Michigan Constitution

Audit report information may be accessed at:

<http://audgen.michigan.gov>



Michigan
Office of the Auditor General
REPORT SUMMARY

Performance Audit

Report Number:
47-278-05

Ojibway Correctional Facility

Department of Corrections

Released:
July 2006

Ojibway Correctional Facility (OCF) is a minimum security (level I) and medium security (level II) prison located in Marenisco Township, Gogebic County, Michigan. OCF was originally established as Camp Ojibway in 1977 and was converted to a level II prison in July 2000. OCF subsequently became a multi-level I/II prison in 2005 with an operating capacity of approximately 1,040 prisoners.

Audit Objective:

To assess OCF's compliance with selected policies and procedures related to safety and security.

~ ~ ~ ~ ~

Audit Conclusion:

We concluded that OCF was generally in compliance with selected policies and procedures related to safety and security. However, we noted reportable conditions related to medication control, bubble security, gate manifests, and security threat group prisoners (Findings 1 through 4).

~ ~ ~ ~ ~

Agency Response:

Our audit report includes 4 findings and 4 corresponding recommendations. OCF's preliminary response indicates that it agrees with all the recommendations.

~ ~ ~ ~ ~

A copy of the full report can be
obtained by calling 517.334.8050
or by visiting our Web site at:
<http://audgen.michigan.gov>



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

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

Scott M. Strong, C.P.A., C.I.A.
Deputy Auditor General



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

July 28, 2006

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

Dear Ms. Caruso:

This is our report on the performance audit of Ojibway Correctional Facility, Department of Corrections.

This report contains our report summary; description of agency; audit objective, scope, and methodology and agency responses; comment, findings, recommendations, and agency preliminary responses; and a glossary of acronyms and terms.

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

TABLE OF CONTENTS

OJIBWAY CORRECTIONAL FACILITY DEPARTMENT OF CORRECTIONS

	<u>Page</u>
INTRODUCTION	
Report Summary	1
Report Letter	3
Description of Agency	6
Audit Objective, Scope, and Methodology and Agency Responses	7
COMMENT, FINDINGS, RECOMMENDATIONS, AND AGENCY PRELIMINARY RESPONSES	
Safety and Security	10
1. Medication Control	10
2. Bubble Security	13
3. Gate Manifests	14
4. Security Threat Group (STG) Prisoners	17
GLOSSARY	
Glossary of Acronyms and Terms	19

Description of Agency

The mission* of Ojibway Correctional Facility (OCF) is to provide a safe, secure, and humane environment for both staff and prisoners. OCF is a minimum security (level I*) and medium security (level II*) prison located in Marenisco Township, Gogebic County, Michigan. OCF was originally established as Camp Ojibway in 1977 and was converted to a level II prison in July 2000. OCF subsequently became a multi-level I/II prison in 2005.

OCF's perimeter security includes two fences with rolls of razor-ribbon wire, an electronic detection system, a camera monitoring system, and a perimeter security vehicle that patrols the outside grounds. An alert response vehicle is also available for backup to the perimeter security vehicle, if necessary.

Outside the secure perimeter, OCF consists of an administration building, a warehouse/maintenance building, a store, and a staff training center. Inside the secure perimeter are an education/program building, a food service building, and five separate prisoner housing unit buildings. OCF has an operating capacity of approximately 1,040 prisoners. As of October 2005, OCF reported housing 1,042 prisoners.

For fiscal year 2004-05, OCF operating expenditures were approximately \$18 million. As of October 2005, OCF had 299 employees.

* See glossary at end of report for definition.

Audit Objective, Scope, and Methodology and Agency Responses

Audit Objective

The objective for our performance audit* of Ojibway Correctional Facility (OCF), Department of Corrections (DOC), was to assess OCF's compliance with selected policies and procedures related to safety and security.

Audit Scope

Our audit scope was to examine the program and other records of Ojibway Correctional Facility. 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, performed from September through December 2005, included examination of program records and activities for the period October 1, 2003 through September 30, 2005.

To establish our audit objective and to gain an understanding of OCF's activities, we conducted a preliminary review of its operations. This included discussions with OCF staff regarding their functions and responsibilities and examination of program records, DOC policy directives and operating procedures, and OCF operating procedures. In addition, we reviewed self-audits*, prisoner counts, prisoner classifications, gate pass assignments*, food service, inventories, mailroom operations, employee training, prisoner accounts, prisoner store, monthly reports to the warden, community liaison committee meeting minutes, and the Commission on Accreditation for Corrections evaluation reports.

To assess OCF's compliance with selected policies and procedures related to safety and security, we conducted tests of records related to firearm inventories; employee firearm qualifications; medication control; substance abuse testing of prisoners; key controls; and prisoner, cell, and employee searches. On a test basis, we inventoried critical tools* and dangerous tools*. In addition, we reviewed security monitoring

* See glossary at end of report for definition.

exercises, disaster management plans, and documentation of items taken into and out of the prison. We also reviewed procedures and conducted tests of records related to fire safety activities, preventive maintenance programs, and housekeeping and sanitation inspections.

Agency Responses

Our audit report includes 4 findings and 4 corresponding recommendations. OCF's preliminary response indicates that it agrees with all the 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.

COMMENT, FINDINGS, RECOMMENDATIONS,
AND AGENCY PRELIMINARY RESPONSES

SAFETY AND SECURITY

COMMENT

Background: Ojibway Correctional Facility (OCF) operates under policy directives and operating procedures established by the Department of Corrections (DOC) and additional operating procedures developed by OCF. These policies and procedures were designed to have a positive impact on the safety and security of OCF as well as to help ensure that prisoners receive proper care and services. The procedures address many aspects of OCF operations, including key, tool, and firearm security; prisoner, visitor, employee, and housing unit searches; prisoner counts; fire safety, preventive maintenance, and disaster planning; and food and medical services.

Although compliance with these procedures contributes to a safe and secure prison, the nature of the prison population and environment is unpredictable and inherently dangerous. Therefore, compliance with the procedures will not entirely eliminate the safety and security risks.

Audit Objective: To assess OCF's compliance with selected policies and procedures related to safety and security.

Conclusion: We concluded that OCF was generally in compliance with selected policies and procedures related to safety and security. However, we noted reportable conditions* related to medication control, bubble* security, gate manifests*, and security threat group (STG) prisoners* (Findings 1 through 4).

FINDING

1. Medication Control

OCF had not established sufficient inventory controls over prisoner medications.

Without proper inventory controls over prisoner medications, OCF cannot provide assurance that the medications are properly accounted for and dispensed as prescribed.

OCF reported that its health care unit dispenses approximately 150 doses of medications daily.

* See glossary at end of report for definition.

Our review of OCF's medication inventory controls disclosed the following weaknesses:

- a. OCF did not maintain an accurate inventory of medications contained in the physician dispensing box*.

An accurate inventory is necessary to ensure that medications are properly accounted for and dispensed. OCF completed weekly inventories of the physician dispensing box, but simply adjusted its inventory records to reflect actual medications on hand without determining the reason for the differences between its inventory records and medications on hand.

For 7 (29%) of 24 medications in the physician dispensing box, the amount on hand did not agree with the amount recorded in the inventory records at the time of our inventory. Differences in the inventory generally ranged from 1 to 4 doses, with one medication being 30 doses less than the amount recorded in the inventory records. Medications that we tested included ibuprofen (pain reliever), pseudoephedrine (decongestant), sulfamethoxazole-trimethoprim (antibiotic), tramadol hydrochloride (pain reliever), and triamterene (diuretic). Our inventory of controlled substances* did not identify any differences between the inventory records and the amounts on hand.

DOC operating procedure 03.04.100C requires that OCF inventory medications contained in the physician dispensing box as often as necessary based on use, but at least monthly.

- b. OCF should expand the medications that it inventories to include additional restricted medications*.

By not inventorying medications that are deemed "restricted," OCF increases its risk that these medications are not properly accounted for or are dispensed without proper authorization.

Under DOC operating procedure 03.04.100C, restricted medications include not only controlled substances, but other listed medications with a high potential for abuse, as well as other medications determined unsafe for

* See glossary at end of report for definition.

prisoners to possess. However, DOC policy does not require that all restricted medications be inventoried; only those that are located in the physician dispensing box or are classified as a controlled substance must be inventoried. Other restricted medications are stored in a locked medication storage area but are not periodically inventoried. OCF should consider expanding its procedures to inventory additional restricted medications, such as amitriptyline (anti-depressant), tramadol hydrochloride (pain reliever), and diphenhydramine (anti-anxiety).

- c. OCF acquired and maintained an excessive quantity of pseudoephedrine tablets (17 boxes, each containing 500 tablets) in its medication storage areas separate from the physician dispensing box. OCF indicated that it uses only 1 to 1.5 boxes per month; therefore, OCF was maintaining approximately an 11- to 17-month supply of pseudoephedrine in its storage area.

Maintaining excessive quantities of pseudoephedrine in areas outside of the physician dispensing box increases the risk that the medication may be misappropriated or misused without detection in a timely manner. Our review did not identify excessive quantities of any other over-the-counter medication.

DOC operating procedure 03.04.100C limits the amount of pseudoephedrine that OCF may store to the amount carried in the physician dispensing box. Pseudoephedrine that is stored outside the physician dispensing box is not subject to a number of safeguards set forth by DOC operating procedure 03.04.100C, such as monthly inventories, storage in a secure room inside a locked box with a plastic numbered seal, and procedures and documentation for dispensing of the medication.

RECOMMENDATION

We recommend that OCF establish sufficient inventory controls over prisoner medications.

AGENCY PRELIMINARY RESPONSE

OCF agrees and will comply. OCF informed us that for item a., a pharmacy technician has been hired, making medication inventory control the primary responsibility of one person. In addition, OCF informed us that the use of a signature sheet and sequentially sequenced seal tag has been implemented to

ensure that access to the physician dispensing box and medication removal are tracked. OCF informed us that inventory and proof-of-use sheet verification is performed weekly.

OCF informed us that for item b., DOC recently entered into a new contract for pharmacy management services, which includes the provision of an Electronic Medication Administration Record (MAR) that will electronically record the receiving and dispensing of all pharmaceuticals. OCF informed us that with this in place, reconciliation of inventory should be made easier and more accurate and DOC will take steps to inventory and reconcile restricted medications that pose a high risk of abuse.

OCF informed us that for item c., the excess pseudoephedrine has been removed and a limited supply will be maintained in the physician dispensing box and will be inventoried.

FINDING

2. Bubble Security

OCF needs to improve its use of cameras and metal detection screening devices in the bubble area of the prison.

The stationary cameras in the bubble, which provided only limited visibility, and the noncompliance with screening procedures by OCF staff may increase the risk that contraband* or other breaches in security will not be detected. The bubble is the central point of entry into and exit from the prison and is a primary point of security for the prison.

Our review disclosed the following security weaknesses within the bubble:

- a. OCF's stationary cameras in the bubble area did not provide either a clear or a complete view of the area to sufficiently observe operations and activities.

We noted that other prison areas, such as housing units and the prison yard, were equipped with cameras that allowed zooming and panning of the entire

* See glossary at end of report for definition.

room or area. These features provided OCF staff with the ability to completely view an entire room or area in great detail. Such features should also be available in an area as critical to security as the bubble, both to observe operations and to record incidents and activities.

- b. OCF did not require all individuals to pass through a metal detector screening device at the bubble prior to going inside the prison walls.

Metal detector screening devices provide an efficient means of routine detection of items prohibited inside the prison. DOC policy directive 04.04.110 requires that all staff submit to the use of a hand-held screening device or a walk-through device, as required by the warden. DOC policy directive 04.04.110 also requires that members of the public walk through a screening device or submit to the use of a hand-held device prior to entering the prison.

OCF indicated that its practice was to require only visitors to pass through its walk-through device. We observed that OCF staff and vendors routinely entered the prison walls through the bubble without passing through a screening device or submitting to a hand-held screening device.

RECOMMENDATION

We recommend that OCF improve its use of cameras and metal detection screening devices in the bubble area of the prison.

AGENCY PRELIMINARY RESPONSE

OCF agrees and will comply. OCF informed us it has implemented procedures for the daily use of the metal detection screening device and is waiting for the ordered camera to be placed in service.

FINDING

3. Gate Manifests

OCF did not properly complete gate manifests to document the movement of critical and dangerous tools, medical supplies, and other materials entering and leaving the prison.

Gate manifests provide a record of items (tools, supplies, food, materials, etc.) entering and leaving the prison and are used to control and prevent the introduction of contraband as well as the theft of State property. Failure to properly complete and monitor gate manifests could result in dangerous items being left inside the secure perimeter, thus endangering the safety of staff and prisoners.

Our review of OCF gate manifests and the log of gate manifests for the period January 1, 2005 through October 17, 2005 disclosed weaknesses in accounting for and completing gate manifests:

- a. OCF could not account for 32 of the 2,530 gate manifests issued during the period examined.

OCF cannot ensure that items listed on its gate manifests were properly accounted for or disposed of unless it can account for each gate manifest.

- b. OCF was missing 1 gate officer's manifest copy and 15 receivers' manifest copies for the 2,530 gate manifests issued during the period examined. The manifests listed such items as medications, tools, and supplies.

For items delivered inside the prison, OCF operating procedure 04.04.100V requires the gate officer to inspect and sign the gate officer's copy of the manifest certifying the items entering the prison. The person who receives the items must sign the receiver's copy of the manifest certifying receipt of the items listed on the manifest. The gate officer must then obtain and compare the receiver's signed copy of the manifest to the gate officer's copy of the manifest in order to account for the delivery of all items on each manifest.

OCF cannot validate the proper location and disposition of items entering the prison unless it retains and reconciles the copy of the gate manifest kept by the gate officer to the copy signed by the authorized individual receiving the items listed on the manifest.

- c. OCF's gate manifests did not indicate the disposition of some of the items that entered the prison.

Our review of 96 gate manifests issued during the period September 1, 2005 through September 13, 2005 disclosed that 25 (42%) of 60 gate manifests for

items that were expected to remain inside the prison (consumable materials) did not contain the signature of the person who received the items, as required. Also, 23 (64%) of 36 gate manifests for items that were required to leave the prison (e.g., tools) with the persons who took the items into the prison did not document that the items actually left with the persons upon their exit from the prison.

OCF cannot maintain control over items that are transported through the prison entrance unless it maintains a complete record of the location and disposition of items listed on the gate manifests.

- d. OCF did not number gate manifests sequentially. Sequential numbering of gate manifests helps to account for missing manifests and aids in the reconciliation of gate manifest copies.

DOC operating procedure 04.04.100 requires that gate manifests be issued to a person authorized to bring an otherwise prohibited item into the secure perimeter of the prison. OCF operating procedures require that all packages, supplies, tools, equipment, and materials transported into and out of the security perimeter be accompanied by a manifest and that all items being transported be clearly listed on the manifest. Both DOC and OCF policy require daily reconciliations of gate manifests.

RECOMMENDATION

We recommend that OCF properly complete gate manifests to document the movement of critical and dangerous tools, medical supplies, and other materials entering and leaving the prison.

AGENCY PRELIMINARY RESPONSE

OCF agrees and informed us that it has complied by implementing DOC's new gate manifest operating procedure. OCF has informed us that it has also revised its operating procedure to reflect the necessary change and the arsenal sergeant will now review all gate manifests, correct any discrepancies, and forward his findings to the inspector.

FINDING

4. Security Threat Group (STG) Prisoners

OCF did not complete all required cell searches for prisoners identified as STG prisoners. Without periodic searches of STG prisoners' cells, OCF increases the risk of not detecting contraband in a timely manner.

DOC and OCF classify prisoners considered to be a threat to the safety and security of the prison because of gang-related activities or affiliations as STG prisoners. Known leaders of gangs or groups are classified as STG II prisoners; affiliates of gangs or groups are classified as STG I prisoners. Because OCF is a security level I and II prison, it houses only STG I prisoners. DOC policy directive 04.04.113 requires that STG I prisoners receive weekly cell searches.

During July 1, 2005 through September 5, 2005 (a 9-week period), OCF had 6 STG I prisoners. Our review of OCF's logbooks for this period disclosed that 9 (17%) of 53 required cell searches were not documented as completed. Each of OCF's 6 STG prisoners had 1 or 2 cell searches that were not completed during the period examined.

RECOMMENDATION

We recommend that OCF complete all required cell searches for prisoners identified as STG prisoners.

AGENCY PRELIMINARY RESPONSE

OCF agrees and will comply by having assistant residential unit supervisors check the STG shakedown logbook twice a week to ensure that the shakedowns have been completed. OCF informed us that the supervisor will then sign his/her name in the logbook verifying that all STG cell searches have been completed for the week, which will assist the resident unit managers to monitor compliance on a monthly basis.

GLOSSARY

Glossary of Acronyms and Terms

bubble	Central point of entry into and exit from a prison.
contraband	Property that is not allowed on facility grounds or in visiting rooms by State law, rule, or DOC policy. For prisoners, this includes any property that they are not specifically authorized to possess, authorized property in excessive amounts, or authorized property that has been altered without permission.
controlled substance	A drug or other substance, or immediate precursor, included in Schedule I, II, III, IV, or V of the federal Controlled Substances Act (i.e., Title 21, section 801, et seq., of the <i>United States Code</i> , which controls the manufacture, distribution, and dispensing of controlled substances).
critical tools	Items designated specifically for use by employees only or for use or handling by a prisoner while under direct employee supervision. Critical tools shall be stored only in a secure area and shall be accounted for at all times.
dangerous tools	Items that may be used or handled by prisoners while under indirect employee supervision. Dangerous tools shall be stored only in a secure area and shall be accounted for at all times.
DOC	Department of Corrections.
gate manifest	A record used to control materials and supplies entering and leaving a prison through the front gates and sallyport.
gate pass assignment	Assignment of a supervised prisoner to a work duty on DOC grounds but outside the security perimeter of the prison.
level I	The classification assigned to prisons that house prisoners who can live in facilities with a minimal amount of security.

These prisoners are normally relatively near parole, are not serving for a sexual offense, and have no history of certain kinds of arson behavior.

level II	The classification assigned to prisons that house prisoners who generally have longer sentences than do level I prisoners, who need more supervision but who are not likely to escape or who are not difficult to manage. This classification generally covers open barracks-style housing.
mission	The agency's main purpose or the reason that the agency was established.
OCF	Ojibway Correctional Facility.
performance audit	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.
physician dispensing box	A box containing a maximum 72-hour supply of noninjectable prescription medications that is kept in the prison clinic. Medications may only be dispensed from the box by the physician who has obtained the drug control license for the box or by a delegated registered nurse under written or verbal order of the physician.
reportable condition	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.

restricted medication	Medication identified by the DOC Bureau of Health Care Services that is required to be administered by a nurse or medication that the prescriber or registered nurse has determined is unsafe for the prisoner to possess.
sallyport	A controlled, secure gate by which vehicles can enter the prison grounds through the perimeter fencing.
security threat group (STG) prisoner	As prisoner who is considered a threat to the safety and security of an institution because of gang-related activities or affiliations or violence toward staff or other prisoners. Prisoners can be designated as STG I (members of gangs or groups) or STG II (leaders of gangs or groups). Prisoners who are designed STG II must generally be housed in a maximum security classification (level V) facility.
self-audits	Audits performed by facility staff that enable management and staff to ensure that all operational units comply with policy directives and take proactive steps to correct any noncompliance. Performing self-audits is intended to maximize safe and efficient operations by DOC.

