



STATE OF MICHIGAN
DEPARTMENT OF CORRECTIONS
LANSING

JENNIFER M. GRANHOLM
GOVERNOR

PATRICIA L. CARUSO
DIRECTOR

DATE: May 13, 2008

TO: Executive Office
Office of the Auditor General
House Fiscal Agency
Senate Fiscal Agency
House Judiciary Committee
Senate Judiciary Committee
House Appropriations Sub-Committee on Corrections
Senate Appropriations Sub-Committee on Judiciary and Corrections

FROM: Connie MacKenzie, SBO Internal Audit Contact for the Department of Corrections

SUBJECT: Auditor General's Performance Audit of the Parnall Correctional Facility

In accordance with the State of Michigan Financial Management Guide Part VII, Chapter 4, Section 100, I am forwarding a copy of the response to the Auditor General's performance audit of the Parnall Correctional Facility. The attached response has been accepted by the State Budget Office (SBO).

If you have any questions, please contact me at (517) 241-7342.

Attachment

c: SBO, Office of Internal Audit Services, Operations Division
S. Pike, SBO Analyst
S. Burt
B. Curtis
D. Straub
H. Washington



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March 20, 2008

Bryan Weiler
Support Services Division
Office of State Budget
George W. Romney Building
111 South Capitol, 5th Floor
Lansing, MI 48913

Dear Mr. Weiler:

In accordance with the State of Michigan, Financial Management Guide, Part VII, attached please find a preliminary summary table and corrective action plans to address the recommendations that were directed at the Department of Corrections within the Office of the Auditor General's audit report of the:

Parnall Correctional Facility

Questions regarding the preliminary summary table or corrective action plans should be directed to Connie MacKenzie, internal audit liaison, at 517 241-7342.

Sincerely,

DEPARTMENT OF CORRECTIONS

Signature Redacted

Patricia L. Caruso, Director
Attachment
PC/22/cm

c: B. Bock
S. Burt
C. MacKenzie
D. Straub

**Parnall Correctional Facility
Department of Corrections
Preliminary Corrective Action Plan
October 2004 through July 2007**

1. Gate Manifests

The auditors recommended that the Facility properly complete gate manifests to help control the movement of items into and out of the Facility.

Agency Preliminary Response:

The Parnall Correctional Facility agrees and has complied. Front desk/gate staff have been re-trained and supervisors are reviewing manifests for proper completion prior to signing the manifest. The third shift captain reviews all gate manifests and logs and reports any deficiencies to the inspector and the assistant deputy warden of custody.

2. Tool Controls

The auditors recommended that the Facility maintain proper inventory controls over critical and dangerous tools.

Agency Preliminary Response:

The Parnall Correctional Facility agrees and has taken steps to comply. The tool control officer ensures that area supervisors conduct monthly inspections. The tool officer resolves any deficiencies.

The Facility has also implemented a procedure to account for all tools. The Facility's supervisors were provided with instructions regarding policy and procedure requirements for tool control. The Facility's annual inventory of tools will be reconciled, approved, and completed by July 1, 2008.

3. Key and Padlock Controls

The auditors recommended that the Facility improve its controls over keys and padlocks.

Agency Preliminary Response:

The Parnall Correctional Facility agrees and has taken steps to comply. The Facility will inventory its keys and update the master key inventory system. The Facility is also developing an up-to-date inventory of padlocks.

4. Prisoner Shakedowns and Cell Searches

The auditors recommended that the Facility ensure that it performs and documents the required number of prisoner shakedowns and cell searches.

Agency Preliminary Response:

The Parnall Correctional Facility agrees and has complied. The Facility implemented a new cell/shakedown log. For prisoner shakedowns, the sergeant ensures that shakedowns are performed and properly recorded and takes corrective action as necessary. The captain certifies the logs at the end of the month and forwards them to the assistant deputy warden (ADW) for review and retention. For cell shakedowns, the assistant resident unit supervisor ensures that shakedowns are performed and properly recorded and takes corrective actions as necessary. The resident unit manager certifies the logs at the end of the month and forwards them to the ADW for review and retention.

5. Medication Controls

The auditors recommended that the Facility implement proper internal control over medications maintained in the physician dispensing box in the health services unit.

Agency Preliminary Response:

The Parnall Correctional Facility agrees and has complied. The Facility has created an inventory record for the physician dispensing box and will utilize log sheets to document when medication is added or removed. In addition, the Facility will conduct weekly inventories of all medication stored in the physician dispensing box.

6. Drug Testing

The auditors recommended that the Facility conduct required drug tests of all selected prisoners in a timely manner.

Agency Preliminary Response:

The Parnall Correctional Facility agrees and has complied. Second shift has been assigned to conduct drug tests. The shift captain and assistant deputy warden of custody monitor compliance.

7. Prisoner Counts

The auditors recommended that the Facility conduct and document all required prisoner counts.

Agency Preliminary Response:

The Parnall Correctional Facility agrees and has complied. The Facility revised its operating procedure to conform to policy requirements for non-secure facilities. Also, the Facility conducts an unscheduled formal count on all shifts. The shift captains and assistant deputy warden of custody monitor compliance.

8. Security Monitoring Exercises

The auditors recommended that the Facility document the completion of all required security monitoring exercises.

Agency Preliminary Response:

The Parnall Correctional Facility agrees and has complied. The Facility has reorganized its security monitoring exercise assignments by shift. Each sergeant is assigned to conduct monthly SMEs. The shift captains review each completed SME and ensure that the required number of SMEs are completed monthly. Captains forward their SMEs to the Inspector at the end of the month for review.

9. Sanitation Inspections

The auditors recommended that the Facility properly document all required weekly and monthly sanitation inspections.

Agency Preliminary Response:

The Parnall Correctional Facility agrees and has complied. The assistant deputy warden's office logs all monthly sanitation inspection reports, follow-up with area supervisors, and report to the Deputy Warden if a report is not received.

Weekly and monthly sanitation inspections are reviewed at the weekly warden meetings. Each area provides a written report indicating how prior deficiencies were corrected.

10. Gate Pass Assignments

The auditors recommended that the Facility assign only those prisoners to gate pass details who meet all eligibility criteria.

Agency Preliminary Response:

The Parnall Correctional Facility agrees and has complied. The Facility has reviewed the files of all current gate pass prisoners to ensure that they meet the gate pass criteria. A checklist has also been developed based on the 15 criteria listed in the policy. Records Office staff will communicate changes in a prisoner's status to the Classification Director when the Records

Office audit a prisoner's file. The Facility will also periodically audit gate pass prisoner files to check for compliance.

11. Food Service Policies and Procedures

The auditors recommended that the Facility comply with all policies and procedures relating to food service.

Agency Preliminary Response:

The Parnall Correctional Facility agrees and has complied. The Facility implemented a daily checklist form to ensure that sanitation rounds, meal evaluations, production sheets are completed. The Facility had completed sanitation inspections for the areas cited but the information had been discarded prematurely. The Facility has implemented a new filing system in the Food Service Director's Office to ensure proper retention of daily sanitation inspections, meal evaluations, and production sheets.

The Food Service Director or Assistant Director will approve menu changes on a daily basis.

The Food Service Director implemented a production sheet system to monitor rations disposed of or retained for reuse within 48 hours.