

The September 2021 Arizona Department of Public Safety performance audit and sunset review found that the Department has met some of its statutory objectives and purposes but did not include information on the sex offender website for some offenders and included information it should not have for others we reviewed. We made 17 recommendations to the Department and 1 recommendation to the Legislature, and the Department’s and Legislature’s status in implementing the recommendations is as follows:

Status of 17 Department recommendations

Implemented	5
In process	10
In process in a different manner	1
Not implemented	1

Status of 1 Legislature recommendation

Not implemented	1
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We will conduct a 24-month followup with the Department on the status of the recommendations that have not yet been implemented.

Finding 1: For some offenders we reviewed, Department did not publish or update, or should not but did publish their names, photographs, or other information on the sex offender website, and for some others it did not determine whether they should be published, potentially increasing public safety risk

1. The Department should publish on the sex offender website offender information, including names, photographs, and other information of sex offenders, as statutorily required, for those offenders who meet statutory publication requirements.

Implementation in process—The Department has taken some steps to improve the accuracy and completeness of the information on its sex offender website. For example, our review of a sample of offenders from the original audit who had been published to the Department’s sex offender website without sufficient documentation found that these offenders are now appropriately published/not published on the sex offender website.

However, we continue to identify concerns with offender information that is or should be included on the website for offenders who meet statutory publication requirements. For example, we identified at least 3 offenders who were not published on the sex offender website who should have been. Additionally, we identified 1 offender who was deceased as of 2018, and as of November 2022, this offender was still published on the website. We will further review and test the Department’s progress in accurately publishing information on the sex offender website, as statutorily required, during our 24-month followup.

2. The Department should update on the sex offender website photographs of sex offenders, as required by statute.

Implemented at 12 months

3. The Department should develop and implement policies and procedures to:

- a. Verify, as part of its quality control review, that offenders' risk levels are correctly recorded in the sex offender database, offenders with convictions from other jurisdictions have been referred for legal review to assess whether the offenders meet sex offender website publication requirements, and that the required information for offenders who meet publication requirements is published on the sex offender website. Also, establish a time frame for conducting these reviews and monitor for compliance with the established time frame.

Implementation in process—In January 2023, after we had completed our follow-up work, the Department modified its policies and procedures to verify, as part of its quality control review process, that offenders' risk levels are correctly recorded in the sex offender database, that offenders with convictions from other jurisdictions have been referred for legal review, and that the required information for offenders who meet publication requirements is published on the sex offender website. The Department's time frames for conducting these reviews range from daily to weekly. Additionally, the Department reported it is in the process of further modifying its policies and procedures to reflect changes made at the national level that impact its processes for publishing sex offender information on the sex offender website. We will assess the Department's efforts to further revise and implement its policies and procedures during our 24-month followup.

- b. Track and follow up on the requests that it makes to other jurisdictions to obtain conviction documents.

Implementation in process—The Department has modified its tracking log to document requests it makes to other jurisdictions to obtain conviction documents. However, the Department has yet to develop policies and procedures to reflect this new process, including steps for following up on these requests as needed.

- c. Annually publish offenders' updated photographs to the sex offender website.

Implemented at 12 months

4. The Department should update its policies and procedures for preparing and referring hard copy files for legal review, and ensure its staff comply with them.

Implementation in process in a different manner—The Department reported that it no longer prepares hard-copy files for legal review. Instead, in May 2022, the Department revised its policies and procedures for preparing and referring electronic files for legal review, which includes steps for tracking the status of these reviews. Additionally, the Department reported that its staff were trained on these revised policies and procedures and that its supervisors perform spot-checks of the employees' work to ensure compliance. However, the Department did not provide documentation demonstrating that staff were trained or that supervisor spot-checks were performed. Additionally, as further explained in recommendation 6, we identified inconsistencies and inaccuracies with the Department's tracking log.

5. The Department should refer for legal review the files of sex offenders that it did not refer between March 2020 and June 2021.

Implemented at 12 months

6. The Department should ensure that its staff follow its policy to track offender files referred to legal review and the legal review outcome, including logging the date referred, the outcome of the legal review, and the legal review outcome date.

Implementation in process—Although the Department established a process for tracking offender files referred for legal review, our review of the log the Department uses to track offender files referred for legal review as part of this process identified inconsistent and inaccurate entries. However, the Department has further modified the log and its policies for tracking offender files referred for legal review, which should address the issues we identified. We will assess the Department's implementation of its modified log and policies during our 24-month followup.

7. The Department should train applicable staff on its existing, updated, and newly implemented policies and procedures for publishing offender information on the sex offender website and quality control review process.

Implementation in process—The Department provided some training to staff on its policies and procedures for publishing offender information on the sex offender website in January 2022 and October 2022. In December 2022, the Department reported that it is in the process of further modifying its policies and procedures to reflect changes made at the national level that impact its processes for publishing offender information and expects to implement these modified policies and procedures in 2023. However, it did not provide a time frame for when it would train applicable staff on these modified policies and procedures. Additionally, as previously discussed (see explanations for Recommendations 3a and 3b), the Department has not yet developed and/or updated some policies and procedures related to its quality control review process and following up on requests it makes to other jurisdictions for conviction documentation and therefore, would not have been able to train its staff on any new or updated policies and procedures. As a result, we will further assess the Department's progress in training its staff on existing, updated, and newly implemented policies and procedures during our 24-month followup.

Sunset Factor 2: The extent to which the Department has met its statutory objective and purpose and the efficiency with which it has operated.

8. The Department should train staff who use purchasing cards and supervisory staff responsible for reviewing purchasing card purchases to ensure that purchasing card transactions comply with the Department's policies and procedures and with the SAAM.

Implementation in process—The Department provided purchasing card training to some staff in October 2021 on some SAAM purchasing card requirements and Department policies and procedures. However, the Department did not provide documentation demonstrating that all staff who use purchasing cards and all supervisory staff responsible for reviewing purchasing card purchases attended the training.

9. The Department should review and follow up on the instances of noncompliance with the Minimum Standards for the 13 school districts that we reported to it during calendar years 2019 and 2020.

Implemented at 12 months

10. The Department should continue to develop and implement written policies and procedures to track, review, and follow up on instances of noncompliance with the Minimum Standards that are reported to it.

Implementation in process—In February 2022, the Department developed procedures to track, review, and follow up on instances of noncompliance with the Minimum Standards that are reported to it by our Office. However, although the Department reported having additional written policies and procedures to track, review, and follow up on instances of noncompliance with or violations of the Minimum Standards that are reported to it by other parties, such as by the public, it did not provide these written policies and procedures. As a result, we will review the Department's written policies and procedures and test the Department's compliance with these policies and procedures during our 24-month followup.

Sunset Factor 3: The extent to which the Department serves the entire State rather than specific interests.

11. The Department should update its policy and procedures to reflect its conflict-of-interest disclosure process and requirements, and train Department employees on its updated process.

Implementation in process—Although the Department updated its conflict-of-interest policy and procedures in April 2022, it did not demonstrate that it trained its employees on its updated process. As a result, we will further assess the Department's efforts to implement this recommendation during our 24-month followup.

12. The Department should remind all employees at least annually to complete a new disclosure form when their circumstances change, such as by requiring its employees to complete annual conflict-of-interest disclosure forms that include a statement where its employees can affirm that they do not have any conflict if no conflict exists.
- Not implemented**—As indicated in its response to the performance audit report, the Department did not agree with this finding and will not implement the recommendation.

Sunset Factor 6: The extent to which the Department has been able to investigate and resolve complaints that are within its jurisdiction and the ability of the Department to timely investigate and resolve complaints within its jurisdiction.

13. The Department should ensure a review of disciplinary history is conducted and documented when applicable, as required by its complaint and discipline policies and procedures.
- Implementation in process**—Our review of 4 complaints that should have included a review of disciplinary history found that 1 did not include documentation demonstrating the disciplinary history was reviewed. Subsequent to our review, the Department revised its procedures to require reviewing disciplinary history during the disciplinary process. We will assess the Department's implementation of its revised procedures during our 24-month followup.
14. The Department should document how complaint inquiries were resolved, as required by its complaint and discipline policies and procedures.
- Implemented at 12 months**
15. The Department should notify external complainants of the outcome, as required by its complaint and discipline policies and procedures, and document the complainant notification.
- Implementation in process**—Our review of a sample of 4 complaints the Department resolved found that for 1 complaint that met the Department's notification requirements, it notified the complainant of the complaint outcome, as required by its policies and procedures. To help ensure the Department continues to adhere to its complaint notification requirements, we will further assess the Department's implementation of this recommendation during our 24-month followup.

Sunset Factor 9: The extent to which changes are necessary in the laws of the Department to adequately comply with the factors listed in this sunset law.

16. To help ensure that the Department notifies the appropriate fingerprint clearance card sponsoring agencies of clearance card driving restrictions, suspensions, and revocations, the Legislature should consider revising statute to require fingerprint clearance cardholders to notify the Department of changes in fingerprint clearance card sponsoring agencies.
- Not implemented**—The Legislature has not revised statute to require fingerprint clearance cardholders to notify the Department of changes in fingerprint clearance card sponsoring agencies.