Arizona Department of Corrections
Rehabilitation & Reentry

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September 22, 2021

Lindsey Perry, CPA, CFE
Auditor General
2910 N. 44th Street, Suite 410
Phoenix, AZ 85018-7271

Re: Auditor General Report – Programming

Dear Ms. Perry:

Attached is the Arizona Department of Corrections, Rehabilitation and Reentry's response to the performance audit report, focusing on Programming. Thank you for the opportunity to respond.

If you have any questions, please do not hesitate to contact my office.

Thank you,

David Shinn
Director

Finding 1: Department did not provide cognitive restructuring and SA treatment programs to most inmates who needed them; therefore, these inmates could not achieve these programs' rehabilitative benefits

Recommendation 1: The Department should take steps to expand its capacity to provide its cognitive restructuring, SA treatment, and DUI treatment programs, and thereby increase inmate enrollments in these programs, by:

Recommendation 1a: Continuing to certify applicable COIIIs and private prison staff to teach COB.

Department response: The finding of the Auditor General is agreed to and a different method of dealing with the finding will be implemented.

Response explanation: The Department has increased the number of COIIIs certified from the 106 cited in the report to 145 and efforts continue. The amount of time COIII's are assigned to security posts impacts this effort and we have recently begun tracking the number of hours that COIIIs are assigned security posts to fill Correctional Officer vacancies.

Recommendation 1b: Continuing to monitor COB enrollments and completions to help ensure that program staff who are certified to teach COB are indeed teaching it.

Department response: The finding of the Auditor General is agreed to and the audit recommendation will be implemented.

Response explanation: The development and rollout of COIV standard work related to programs addresses this issue. This will now be monitored both at the unit level in addition to monitoring at the Central Office level.

Recommendation 1c: Finalizing and implementing the program-related standard work for COIVs.

Department response: The finding of the Auditor General is agreed to and the audit recommendation will be implemented.

Response explanation: Accepted recommendation and implemented. This was developed and rolled out on August 18, 2021 via a statewide meeting with COIVs. The Department will implement a regular schedule for onboarding and/or refresher training for COIVs addressing standard work.

Recommendation 1d: Continuing its efforts to fill its vacant licensed counselor positions.

Department response: The finding of the Auditor General is agreed to and the audit recommendation will be implemented.

Response explanation: Efforts are outlined in the audit report and ADCRR will continue all efforts discussed on page 9 of the report.

Recommendation 1e: Using its increased appropriation to contract for additional SA treatment services as planned.

Department response: The finding of the Auditor General is agreed to and the audit recommendation will be implemented.

Response explanation: The fiscal year 2022 Appropriation has provided funding for the Department to contract private services. The RFP was released and will close September 29, 2021 with an award made as expeditiously as the legal procurement process permits. This one time appropriation will allow us to meet more treatment needs. The department will continue to pursue additional funding sources to meet 100% of the need.

Recommendation 1f: Based on the number of inmates with assessed SA treatment needs, continuing to assess the level of counseling staff resources needed to meet inmates' SA treatment needs and requesting additional resources as appropriate, including monies to contract for SA treatment services.

Department response: The finding of the Auditor General is agreed to and the audit recommendation will be implemented.

Response explanation: Please see the above response to Recommendation 1e.

Recommendation 1g: Continuing to expand the use of technology as staff resources permit to provide SA treatment programs at State prisons where treatment has not been provided.

Department response: The finding of the Auditor General is agreed to and the audit recommendation will be implemented.

Response explanation: With the unique challenges presented by COVID, previous technological boundaries were challenged and new solutions were implemented. Based on the success we have had with virtual substance abuse treatment and other classes, these efforts will continue to be expanded. A few examples of virtual programming using the Google platform which are currently offered include substance abuse counseling, Persevere coding classes, in reach efforts by community providers, religious services, and an employment readiness program offered in conjunction with DES.

Recommendation 1h: Completing the process to obtain licensure of its DUI treatment program and implementing its plan to provide DUI treatment to male inmates housed at State prisons.

Department response: The finding of the Auditor General is agreed to and the audit recommendation will be implemented.

Response explanation: Anticipate obtaining licensure by the end of the calendar year.

Finding 2: Although program completion can decrease inmate recidivism, many enrolled inmates did not complete programs mostly due to transfers to different units and administrative discharges from programs

Recommendation 2: The Department should continue to assess whether condensing SA treatment program time frames has helped reduce program noncompletions and assess its impact on inmate recidivism. Based on its assessments, the Department should continue to use the condensed time frames or make adjustments, as appropriate.

  Department response: The finding of the Auditor General is agreed to and the audit recommendation will be implemented.

  Response explanation: We continue to monitor the ongoing success and the three year assessment phase is underway.

Recommendation 3: The Department should continue its project to research and track specific reasons inmates do not complete SA treatment programs at State prisons and use this information to address problems that contribute to program noncompletions.

  Department response: The finding of the Auditor General is agreed to and the audit recommendation will be implemented.

  Response explanation: We have recently implemented a new Convergent Case Management (CCM) process to identify personal engagement and the role it plays in successful treatment completion. ADCRR will also continue the specific tracking efforts currently in place related to completions of SA treatment.

Recommendation 4: The Department should continue to implement its new process for approving transfers of inmates enrolled in major programs and codify this new process in its Department Orders. The Department should assess whether this new process helps to reduce program noncompletions due to inmate transfers and determine whether additional actions are needed.

  Department response: The finding of the Auditor General is agreed to and the audit recommendation will be implemented.

  Response explanation: Since implementation we have had 73 inmates held to complete programming and of those 24 have already successfully completed their program.

Recommendation 5: The Department should update its program-enrollment guidance to provide standard and consistent direction on specific factors that all program staff should consider when identifying potential inmates to enroll in programs, including inmates' discipline histories, potential language barriers, assigned living spaces, racial balance, and other factors it deems appropriate, and train program staff on this updated guidance.

  Department response: The finding of the Auditor General is agreed to and a different method of dealing with the finding will be implemented.

  Response explanation: The Department has standard work for program placement. In instances where some staff have developed their own local procedures, the Department will re-train and reinforce adherence to the approved standard work.

Recommendation 6: The Department should place its enrollment guidance materials in a single shared location to help ensure that they are readily accessible to program staff.

Department response: The finding of the Auditor General is agreed to and a different method of dealing with the finding will be implemented.

Response explanation: Please see response to Recommendation 5. These materials will be placed on the Convergent Case Management (CCM) web page.

Recommendation 7: The Department should, for the 4 programs we reviewed and other programs it deems appropriate, develop and implement documented processes to use enrollment data to monitor program noncompletions by prison/prison unit, both overall and by reason for noncompletion (e.g., inmate transfers, administrative discharges, etc.); research the causes for variation in program noncompletions across prisons/prison units; and use this information to make changes, as needed, to its enrollment policies, guidance, and/or trainings.

Department response: The finding of the Auditor General is agreed to and the audit recommendation will be implemented.

Response explanation: When CCM is fully implemented, this recommendation will be fully addressed. Additionally, this will be added to COIV standard work to include review of program completion and non-completion for their unit.

Finding 3: Department does not monitor program-completion time frames, which would help it evaluate and potentially improve enrollment practices

Recommendation 8: The Department should, for the 4 programs we reviewed and other programs it deems appropriate, develop and implement documented processes to use enrollment data to monitor program-completion time frames for unexpected values; research the causes for unexpected values in program-completion time frames; and use this information to make changes, as needed, to its enrollment policies, guidance, and/or trainings.

Department response: The finding of the Auditor General is agreed to and the audit recommendation will be implemented.

Response explanation: Please see response to Recommendation 7. Additionally, a requirement will be added to COIV standard work to include monitoring program completion times for their unit. Enhanced tracking has been implemented in addition to the recommendation.