The September 2021 Arizona Department of Corrections, Rehabilitation and Reentry performance audit and sunset review found that the Department met some statutory objectives and purposes in the areas we reviewed but did not release all inmates approved for the transition program 3 months early in 2020 and lacked a reliable process to ensure inmate grievances were processed according to its time frames. The Department's status in implementing the recommendations is as follows:

Status of 9 recommendations

In process:	8
Not implemented:	1

We will conduct an 18-month followup with the Department on the status of the recommendations that have not yet been implemented.

Finding 1: In 2020, Department did not release a quarter of inmates approved for transition program the full 3 months early as statutorily required, which may lengthen their prison stays, thereby increasing Department costs

- 1. To help ensure inmates are timely released 3 months early to the transition program, as statutorily required, the Department should:
 - **a.** Establish time frames in its staff procedures for how quickly the eligibility reviews for the transition program and drug possession release should be initiated and completed, and prioritize for review those inmates who are closest to release.

Implementation in process—The Department has taken steps to establish some time frames for conducting transition program and drug possession release eligibility reviews, such as a time frame for when Correctional Officers should work with an inmate to develop and sign a transition program agreement form. However, the Department has only established time frames for when the reviews will be initiated, not when they will be completed.

Additionally, the Department indicated that it plans to implement this recommendation utilizing a "long-term" strategy in which the Department will work with stakeholders such as sentencing courts and prosecutors to develop a process to determine potential eligibility for the transition program at sentencing. According to the Department, this will help reduce both the time and need for the Department to later determine eligibility for the transition program. The Department indicated that conversations with these stakeholders are still ongoing, and the Department has not determined a timeline for when it will implement this strategy.

b. Develop and implement a written procedure for monitoring, identifying, and addressing delays in transition program processes that are within the Department's control.

Implementation in process—The Department is developing formal policies and procedures for monitoring, identifying, and addressing delays in transition program processes that are within the Department's control. For example, the policies and procedures will require supervisors to ensure that Department staff adhere to specified time frames for identifying, reviewing, and approving inmates for the transition program. The Department plans to implement the policies and procedures by November 2022.

c. Continue to work on automating the process for identifying inmates who may qualify for drug possession release and calculating their potential drug possession release dates.

Implementation in process—The Department reported that it has been focusing on automating the processes for identifying inmates who may qualify for or meet the legislative changes to the standard transition program eligibility requirements that went into effect in September 2021. Because it has been focusing on automating the standard transition program, the Department has revised its expected date for implementing an automated process for identifying inmates who may qualify for drug possession release from November 2022 to May 2023.

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

2. The Department should continue to work on automating the processes for identifying inmates who may qualify for or meet the drug transition and September 2021 standard transition program eligibility requirements.

Implementation in process—As explained in Recommendation 1c, the Department has been focusing on automating the processes for identifying inmates who may qualify for or meet the legislative changes to the standard transition program eligibility requirements that went into effect in September 2021. According to the Department, it implemented 1 of 2 automated processes for the standard transition program as of September 24, 2021, and it expects to implement the second process by July 2022. Because it has focused on automating the standard transition program, the Department revised its expected date to implement an automated process for identifying inmates who may qualify for or meet the drug transition program eligibility requirements from August 2022 to December 2023.

3. The Department should evaluate and prioritize developing all ASET-required IT security policies based on its IT environment and mission. The Department should then use this information to guide its efforts to develop and implement written IT security procedures in line with ASET requirements and credible industry standards, focusing on the IT security areas with the highest security risks first.

Implementation in process—The Department has developed an action plan for creating an internal IT Technical Manual that will include all ASET-required IT security policies. In addition to the IT Technical Manual, the Department reported that it plans to develop procedures for each of the ASET-required IT areas and that it is holding weekly meetings to discuss the status of the action items in the plan. However, the Department's plan does not include specific tasks for developing the ASET-required IT security procedures, implementing the required policies and procedures, the status of the tasks, and a process for regularly reviewing and updating the plan based on its progress. The Department reported that it does not plan to prioritize developing these policies and procedures because it plans to develop them all at the same time. According to the Department's action plan, the IT Technical Manual will be completed by the end of July 2022. We will further assess the Department's efforts to implement IT security policies and procedures during the 18-month followup.

4. The Department should create a written action plan for implementing Recommendation 3 that includes specific tasks, the status of those tasks, and their estimated completion dates, as well as a process for regularly reviewing and updating the plan based on its progress.

Implementation in process—See explanation for Recommendation 3.

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

5. The Department should develop and implement revisions to its conflict-of-interest policy and procedures to help ensure compliance with State conflict-of-interest requirements and better align its policy and procedures with recommended practices, including (1) reminding Department employees at least annually to complete a new

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conflict-of-interest disclosure form when their circumstances change; (2) maintaining a special disclosure file of all required documentation, such as disclosures of substantial interest; and (3) documenting its process for remediating any disclosed conflicts of interests.

Not implemented—As indicated in its response to our report, the Department did not agree with the finding or plan to implement the recommendation, indicating it had already exceeded this recommendation. However, as indicated in our comments on the Department's response (see pages b-1 through b-2 of Report 21-119), the Department misinterpreted our recommendation, and by stating it would not implement it, the Department indicated in part that it would not follow State law. Specifically, the Department's response explanation focused on conflicts of interest related solely to procurement actions. However, conflicts of interest are not solely limited to procurement actions or activities. State laws require all employees to disclose substantial financial or decision-making interests and then refrain from participating in matters related to the disclosed interests. Further, we found that the Department lacked the required special disclosure file and a formal process for remediating disclosed conflicts other than for secondary employment. Finally, although the Department required employees to complete a conflict-of-interest disclosure statement that included an affirmative statement indicating whether or not a conflict exists when they are hired, it did not follow recommended practices to remind its employees at least annually to submit new disclosure forms when their circumstances change.

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.

6. The Department should establish a process for ensuring that the Department, including prison units, have complete and accurate formal inmate grievance information.

Implementation in process—The Department reported that it has acquired and implemented software to track and resolve constituent inquiries, concerns, and complaints. It plans to use this software to also track and resolve inmate grievances after assessing how the software is performing for constituent inquiries, concerns, and complaints. The Department expects to start using this software to track and process inmate grievances, including monitoring compliance with its time frames for the various steps in its inmate grievance handling process, such as the overall 120-day time frame for resolving grievances, by the end of September 2022. We will further assess the Department's efforts to implement this recommendation during the 18-month followup, including efforts to establish a process for ensuring that the Department and prison units have complete and accurate formal inmate grievance information.

7. The Department should establish a centralized process to monitor compliance with its time frames for the various steps in its inmate grievance handling process, including the overall 120-day time frame for resolving grievances, to help identify and address potential issues related to processing inmate grievances within required time frames.

Implementation in process—See explanation for Recommendation 6.