





# Arizona Department of Juvenile Corrections

## 48-Month Followup of Sunset Review Report 21-122

The October 2021 Arizona Department of Juvenile Corrections sunset review was the final of 3 audit reports of the Department we issued as part of the Department’s sunset review.<sup>1</sup> Our sunset review found that the Department has established processes for the statutory responsibilities we reviewed, including assessing youths’ educational needs, but had deficiencies in some processes, including not always following its requirements for supervising youth on parole and not ensuring that youth in its work incentive program were paid as required by statute. We made **23** recommendations to the Department.

### Department’s status in implementing 23 recommendations

Implementation status	Number of recommendations
 Implemented	18 recommendations
 Implemented in a different manner	1 recommendation
 In process	1 recommendation
 No longer applicable	3 recommendations

As discussed in Recommendation 8, the Department has made progress with implementing the outstanding recommendation and indicated it has plans to address it. Unless otherwise directed by the Joint Legislative Audit Committee, this report concludes our followup work on the Department’s efforts to implement the recommendations from the October 2021 report.

<sup>1</sup> The first performance audit determined whether the Department’s use of temporary stabilization units for delinquent youth committed to its care is consistent with Department policies and best practices for rehabilitating delinquent youth, and the second audit evaluated whether the Department had assessed fidelity for some treatment intervention components, implemented some treatment programming recommended improvements, and tracked a comprehensive set of outcome measures for its treatment programming. For more information on the other performance audits we issued as part of the Department’s sunset review, including applicable followup reports, see Report 21-104 and Report 21-121.

# Recommendations to the Department

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

1. The Department should ensure that parole officers are following parole supervision requirements.

▶ Status: **Implemented at 48 months.**

As reported in our 36-month followup, the Department has established a process to help ensure that parole officers are following parole supervision requirements. For example, the parole supervisor manual requires that supervisors review parole officer compliance with youth supervision requirements at regular intervals, such as weekly and monthly, and address any identified noncompliance through corrective action plans. Our review of youth case plans, parole officer notes, and supervisory review data for a random sample of 3 of 48 youths on parole between July and August 2025 found that parole officers were following youth supervision requirements and that parole supervisors were regularly completing and documenting reviews of parole officer compliance in alignment with Department policies. Additionally, we reviewed the 1 instance of parole officer noncompliance reported by parole supervisors between August 2024 and August 2025 and found the parole supervisor developed a corresponding action plan, including details regarding the nature of the noncompliance, the date it was assigned for corrective action, and the due date for the corrective action, as required by the parole officer manual. Finally, the instance included a completion date, an action plan documenting how the parole officer and supervisor resolved the incident within the 10-day required review, and closure time as required by the Department's parole supervisor standards (see Recommendation 2 for more information on the Department's development of a process for reviewing parole officers' compliance with requirements for supervising youth).

2. The Department should revise and implement its parole supervisor manual to include a process for reviewing parole officers' compliance with requirements for supervising youth, including outlining procedures and time frames for conducting reviews, documentation requirements, and how noncompliance should be addressed.

▶ Status: **Implemented at 48 months.**

The Department has revised its guidance for parole supervisors to include a process for reviewing parole officers' compliance with requirements for supervising youth, including specific procedures and time frames for conducting reviews as well as requirements for documenting these reviews. For example, the parole supervisor manual requires that supervisors review parole officers' updates to youth case plans, documentation of required contact, and documentation of required drug testing on a monthly basis. The Department has also developed a written procedure that outlines how to perform and document these reviews in the Department's data system. Our review of case plans,

parole officer notes, and supervisor review data for a random sample of 3 of 48 youths on parole between July and August 2025 found that parole supervisors reviewed and documented assigned parole officers' compliance with youth supervisory requirements, consistent with the Department's updated policies.

Additionally, the Department updated its parole supervisor manual to include a process to address any identified parole officer noncompliance through corrective action plans, including a 2-day required time frame for supervisors to contact officers regarding noncompliance and a 10-day required time frame for supervisors to develop and complete an associated action plan. As discussed in Recommendation 1, we reviewed the 1 instance of parole officer noncompliance reported by parole supervisors between August 2024 and August 2025 and found that the parole supervisor adhered to the required time frames.

3. The Department should revise and implement its parole officer manual to explain the intent and expectations for requirements for supervising youth, including how parole officers should handle any extenuating circumstances that would prevent them from meeting any youth supervision requirements.

▶ Status: **Implemented at 48 months.**

As discussed in our 36-month followup, the Department revised its expectations and requirements for supervising youth in its parole officer manual since the initial followup. Specifically, the Department revised the parole officer manual to include specific time frames in which parole officers should contact all associated service providers for a youth and the intent and expectations for parole officers when contacting a youth's school, employer, or counselor. For example, the Department revised its parole officer manual to explain that parole officers are expected to contact education providers to verify enrollment and attendance monthly. Additionally, the Department revised its parole officer manual to require parole officers to discuss with their supervisors if they cannot meet a youth supervision requirement and to document in their case notes that they have notified their supervisor. Finally, as previously discussed, our review of a random sample of 3 youths on parole between July and August 2025 found that parole officers were following youth supervision requirements.

4. The Department should provide training to parole supervisors and parole officers on any revisions to the parole supervisor and parole officer manuals.

▶ Status: **Implemented at 48 months.**

The Department updated its parole supervisor and case management standards and provided training for applicable staff in October 2024 and January 2025. Our review of attendance rosters found that 39 of 40 staff provided signatures indicating that they attended the training. According to the Department, 1 staff member was unable to attend a scheduled training, but received training at a later date, but the Department did not obtain their signature.

5. The Department should continue to implement its revised youth work experience policy and procedures.

▶ Status: **Implemented at 36 months.**

The Department has revised its policies to explain the expectations and responsibilities for supervisors and their role in the review process for time cards in the youth work experience program. Specifically, the revised policy requires that the program be overseen by a Juvenile Work Program Administrator and that the Department use a wristband electronic scanning system to track when youth begin and end a work shift by scanning each youth's wristband upon arrival and departure. Additionally, youth are required to review their time card for accuracy and digitally sign the time card at the end of each pay period. Finally, Department staff are required to review the time card for accuracy, digitally sign it, then submit it into the Department's electronic banking system. Our August 2024 observation found that the Department staff implemented its revised youth work experience policies and procedures to help ensure that youth are accurately paid for the time they work and that it had hired a Juvenile Work Program Administrator to oversee the program. We also observed a random sample of 2 youths electronically clocking in and out for their work assignment and reviewed these youths' time cards for the 2 preceding pay periods and found that the youths signed their time cards verifying they were accurately paid for the time worked.

6. The Department should revise and implement policies and procedures for reimbursing employees' travel expenses, including:

- a. Conducting monthly and annual reviews of employee travel card (ETC) charges and payments as required by SAAM.

▶ Status: **No longer applicable at 36 months.**

As of July 2024, the Department had deactivated all its ETCs and reported that it does not plan to issue ETCs to its staff in the future.

- b. Conducting reviews of ETC and CTA travel reimbursement documentation to help ensure all required documents are obtained and requested reimbursement amounts comply with SAAM requirements.

▶ Status: **Implemented at 36 months.**

As indicated in our initial followup, the Department revised its policies and procedures for reimbursing employees' travel expenses to include procedures for conducting reviews of ETC and CTA travel reimbursement documentation. Our review of travel reimbursement documentation, including travel claims, submitted by 6 Department employees who attended an out-of-State conference in July 2023 found that these employees submitted, and the Department reviewed and approved, all documentation required by Department policies and procedures and the SAAM prior to reimbursing these employees' travel expenses. Additionally, consistent with the SAAM, Department policy requires its staff to obtain approval

from the State Comptroller to pay for conference lodging rates that exceed the lowest single-occupancy lodging rate listed in the applicable conference brochure. The Department provided documentation demonstrating that the lodging rates for conferences attended by its employees were the lowest single-occupancy lodging rates available according to official conference documentation and that it did not need to obtain approval from the State Comptroller.

7. The Department should revise and continue to implement its policies and procedures related to its new process for monitoring employee time entries to include detailed steps for completing this process.

▶ Status: **Implemented at 6 months.**

8. The Department should continue to implement its written plan for implementing its newly developed IT security policies and regularly review and update the plan, as appropriate, based on progress.

▶ Status: **Implementation in process.**

At the time of our 36-month followup, the Department had developed a detailed written plan and tracker for implementing its IT security policies but was still in process of completing 1 of 55 action items in its written plan. According to the Department's tracker, the Department had completed the final action item in December 2024. To assess the Department's implementation of its written plan, we judgmentally selected and reviewed the Department's implementation of its IT security policies in 2 areas—IT risk-assessment and security awareness training. Our review found that although the Department developed IT risk-assessment and security awareness training policies, the Department's policies and associated training materials did not incorporate all Arizona Department of Homeland Security's (AZDOHS) State-wide policy requirements. For example, consistent with AZDOHS' State-wide policy requirements, the Department developed and implemented its IT risk-assessment policy, which identifies the threats and vulnerabilities that the Department considers as part of its risk assessment. However, the Department did not revise its risk-assessment policy to incorporate updates that AZDOHS made to State-wide policy requirements in January 2024, such as an assessment of privacy risk, which includes identifying the negative impact on individuals from unauthorized access or use of the individuals' personally identifiable information. Additionally, although the Department provided training to employees consistent with its IT security awareness training policy, the training it provided to its staff does not include all training components required by AZDOHS' State-wide policies, including training on how Department staff should report suspected IT security incidents.

Because we found that the Department did not incorporate some AZDOHS' State-wide policy requirements in its IT risk-assessment policy and security awareness training, we selected and reviewed the Department's IT security policies in 3 additional areas—data classification, contingency planning, and cybersecurity incident response. Our review of these policies similarly found that the Department did not revise its policies to include updates made to AZDOHS' State-wide policy requirements.

By not regularly updating its IT security policies to include all State requirements, the Department faces an increased risk of IT security incidents, such as compromising sensitive data or operational disruptions. According to the Department, it started updating its IT security policies to align with all AZDOHS' State-wide policy requirements in January 2026, and it will finish making updates by the end of March 2026. Additionally, the Department reported that it is updating its IT security training to incorporate all training components required by ADOHS' State-wide policies and will provide the training to its staff in October 2026.

9. The Department should revise and implement its QA policies and procedures to ensure its quality assurance team reviews all uses of TSU over 24 hours.
  - ▶ Status: **Implemented at 6 months.**
10. The Department should evaluate and revise its method for measuring and reporting recidivism to further align it with additional practices recommended by literature, such as reporting youth recidivism defined as adjudication/conviction for a new crime and other recidivating events and reporting recidivism data by youth demographics, recidivism risk, and/or other factors that may provide important context.
  - ▶ Status: **Implemented at 6 months.**
11. The Department should modify and implement its policies and procedures to:
  - a. Require Department staff to electronically record youth movement as an exclusion when youth are placed in their rooms for exclusion.
    - ▶ Status: **Implemented at 6 months.**
  - b. Use the electronic exclusion data to follow up on any discrepancies between the electronic exclusion data and paper exclusion time sheets and to track information on the use of exclusion in the Facility, as needed.
    - ▶ Status: **Implemented in a different manner at 6 months.**

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

12. The Department should enhance its conflict-of-interest process to help ensure compliance with State conflict-of-interest requirements by revising and implementing its policies and procedures to:
  - a. Remind its employees/public officers at least annually to complete a new disclosure form when their circumstances change, such as by requiring its employees and RSAC members to complete an annual conflict-of-interest disclosure form.
    - ▶ Status: **Implemented at 6 months.**

- b.** Require RSAC members to complete a disclosure form when they are appointed to the committee by the Department Director that includes an “affirmative no” attestation and requires disclosure of substantial decision-making interests.
  - ▶ Status: **Implemented at 6 months.**
- c.** Establish a process for remediating any disclosed conflicts of interest.
  - ▶ Status: **Implemented at 6 months.**

### **Sunset Factor 5: The extent to which the Department has encouraged input from the public before adopting its rules and the extent to which it has informed the public as to its actions and their expected impact on the public.**

- 13.** The Department should consult with the Solicitor General’s Office within the Attorney General’s Office to determine if RSAC is required to comply with open meeting law.

- ▶ Status: **Implemented at 6 months.**

The Department consulted with the Attorney General’s Office, Solicitor General, to determine if RSAC is required to comply with open meeting law. The Department reported determining that RSAC is not required to comply with open meeting law and that RSAC will no longer follow the requirements set forth in open meeting law

- 14.** The Department should do the following if it determines RSAC is required to comply with open meeting law:

- a.** Include a disclosure on its website stating where all public meeting notices will be posted.

- ▶ Status: **No longer applicable at 6 months.**

The Department reported consulting with the Attorney General’s Office, Solicitor General, to determine that RSAC is not required to comply with open meeting law (see explanation for recommendation 13). Therefore, this recommendation is no longer applicable.

- b.** Develop and implement policies and procedures for complying with open meeting law, including posting meeting notices at least 24 hours prior to meetings, ensuring meeting agendas and meeting minutes contain all necessary elements, and making public meeting minutes or meeting recordings available for public inspection within 3 working days after the meeting, as required by statute.

- ▶ Status: **No longer applicable at 6 months.**

The Department reported consulting with the Attorney General’s Office, Solicitor General, to determine that RSAC is not required to comply with open meeting law (see explanation for recommendation 13). Therefore, this recommendation is no longer applicable.

- 15.** The Department should discontinue actions that could lead the public to believe it is legally permitted to attend RSAC meetings, such as citing open meeting law in RSAC meeting notices, if it determines RSAC is not required to comply with open meeting law.
- ▶ Status: **Implemented at 6 months.**

**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.**

- 16.** The Department should follow the time frames for reviewing and resolving youth grievances outlined in its youth grievance policy and procedures.
- ▶ Status: **Implemented at 6 months.**
- 17.** Develop and implement a youth grievance supervisory review policy and procedures that outlines roles and responsibilities for reviewing grievances for compliance with the Department's policy and procedures and time frames for these reviews.
- ▶ Status: **Implemented at 6 months.**
- 18.** Continue to implement its AIR policy and procedures.
- ▶ Status: **Implemented at 6 months.**