

A SPECIAL PERFORMANCE AUDIT OF THE BOARD OF PROBATION AND PAROLE

SUPERVISION AND MONITORING OF PAROLEES

JUNE 2009

Bureau of Departmental Audits

The Honorable Edward G. Rendell Governor Commonwealth of Pennsylvania Room 225 Main Capitol Building Harrisburg, PA 17120

Dear Governor Rendell:

This report contains the results of the Department of the Auditor General's special performance audit of the supervision and monitoring of parolees by the Board of Probation and Parole (board) for the period July 1, 2001 through June 30, 2006, including follow-up procedures performed and concluded as of May 15, 2009. This audit was conducted pursuant to Sections 402 and 403 of the Fiscal Code and in accordance with generally accepted government auditing standards (GAGAS). The aforementioned standards, issued by the Comptroller General of the United States, require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

Our audit methodology was planned and executed in accordance with GAGAS and included interviewing board management to gain an understanding of board's systems, policies and procedures; verifying and analyzing relevant data; designing and selecting appropriate samples based on audit risk; and reviewing board documentation to obtain sufficient evidence. Our sampling methodology, including sample size for each audit objective, was designed to ensure that the items tested represented the populations examined. As a result, the deficiencies identified in the findings were considered systemic in nature. Therefore, selecting additional items for testing was considered unnecessary.

Despite our best efforts to ensure the timely completion of this audit, the board's protocols and untimely and inadequate responses delayed the release of our report. Conversely, our auditors willingly agreed to review any additional documentation that Chairman McVey and the board deemed appropriate. The additional documentation, provided since our audit exit conference, failed to change our audit conclusions. Moreover, at the behest of the board, our auditors reviewed two published sections of Dr. John S. Goldkamp's ongoing study on the process by which Pennsylvania paroles violent offenders. Auditors also spoke with Dr.

Goldkamp on two separate occasions to determine the connection, if any, between his study and our audit report. However, our auditors determined that the current findings and ongoing study do not pertain to our audit objectives, which was confirmed by Dr. Goldkamp during our interview. Therefore, we are able to conclude our audit knowing that our auditors have made every effort to gather all necessary evidence, while ensuring that all reasonable concerns of the board were addressed.

Our audit found that the board's inadequate supervisory oversight of parole agents could possibly lead to parolees not being adequately supervised. In addition, parole agents failed to react timely to missing parolees and, once declared absconded, failed to attempt to locate them as required. Moreover, we found that the board lacked effective internal controls for monitoring parolee rehabilitation treatment. Our auditors also were unable to validate the board's assertions on the ratio of cases per parole agent due to the board's failure to provide the requested information.

We offer 11 recommendations to strengthen the board's policies, controls, and oversight pertaining to the supervision and monitoring of parolees. While we recognize that the challenges faced by criminal justice agencies are numerous, it is our hope that these recommendations will heighten the safety of both the residents of Pennsylvania and the various law enforcement officials entrusted with protecting our communities. Therefore, we find it disconcerting that the board has chosen to disregard all of our recommendations. We ask that it reconsider its position and take the necessary corrective action.

Finally, we offer an observation, encouraging the board to implement the use of global positioning system (GPS) technology to monitor sexually violent offenders. Although this topic was not an objective of our current audit, we felt that it was the appropriate venue to reiterate the findings discussed in our special report released in July of 2008, entitled, *Using GPS Technology to Track Sex Offenders: Should Pennsylvania Do More?* As part of our observation, we recommend that the board should request that the General Assembly amend current law as necessary, to require five years of GPS monitoring for all sex offenders released on parole who are caught after failing to register with state or local police as required, and for sexually violent predators whose victims are children.

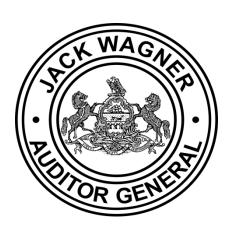
We will follow up at the appropriate time to determine whether and to what extent all recommendations have been implemented.

Sincerely,

JACK WAGNER Auditor General

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RESULTS IN BRIEF

Despite our best efforts to ensure the timely completion of this audit, the board's protocols and untimely and inadequate responses delayed the release of our report. On March 2, 2009, at the exit conference between our auditors and board management, conducted in the final phase of the audit process, Chairman Catherine McVey indicated to our audit staff that the board would provide us with documentation that would refute all of the findings and recommendations contained in our report provided to the board. The board was of the opinion that we reviewed inadequate documentation to reach our conclusions. Although we disagreed with the board's position, we agreed to review any additional documentation that Chairman McVey and the board deemed appropriate. The additional documentation, provided since the exit conference, failed to change our audit conclusions. The additional documentation included copies of confidentiality laws, the board's own test work of our transactions, reports, analysis, charts, and graphs that were not germane to our audit objectives. These specific audit objectives were repeatedly communicated to board management throughout the audit, verbally and in writing. Furthermore, the board, at the exit conference and in its written response to our findings, attempts to refute our audit conclusions by referencing a study recently commissioned by the Governor and conducted by agency consultant Dr. John S. Goldkamp, Chairman of Temple University's Department of Criminal Justice.

In accordance with Chairman McVey's request, our auditors reviewed two published sections of Dr. Goldkamp's ongoing study on the process by which Pennsylvania paroles violent offenders. Auditors also spoke with Dr. Goldkamp on April 21, 2009 and April 24, 2009 to determine the connection, if any, between his study and our audit report. However, our auditors determined that Dr. Goldkamp's current findings and ongoing study do not pertain to our audit objectives, which was confirmed by Dr. Goldkamp during our interview. In addition, according to Dr. Goldkamp, his focus relies on the examination of data provided by the board and not a review of detailed individual parolee case files. Dr. Goldkamp indicated that he does not have the resources to review numerous individual case files. When our auditors asked Dr. Goldkamp about the Record of Interview contained in each case file, Dr. Goldkamp replied, that his focus was not the review of case files, and that, therefore, he was not familiar with that document. Our auditors used the Record of Interview to determine weaknesses in the way the board pursues offenders who have absconded from parole and weaknesses related to the agents documenting their interaction with parolees. Dr. Goldkamp emphasized that his study, unlike our audit, was not focusing on issues of compliance. Dr. Goldkamp stated that his review is different from a government audit in both focus and detail and his final report will not be as narrowly focused and will not contain the amount of detail as a government audit.

Overall, we identified four findings and offer 11 recommendations as a result of our audit.

Finding 1 - We discuss deficiencies related to inadequate supervisory oversight of parole agents. Specifically, we found that the board could not provide the auditors half of the supervisory documentation required to be completed by parole agent supervisors when performing case file reviews and found discrepancies with agent documentation within the case files. Finally, we found weaknesses regarding senior management monitoring these activities.

RESULTS IN BRIEF

We recommend that the board immediately cease destroying documents that could evidence proper internal controls and develop a retention policy for the checklists and other monitoring documents used for supervisor case reviews. The board should also verify that all supervisors are accurately completing their supervisor case review checklists to ensure accountability and to ensure that parole agents are properly completing and retaining supervision plans and the Record of Interview documents, as well as completing the proper number of face-to-face and collateral contacts as required. In addition, written comments should be included with any "No" responses that are recorded on the checklists. Furthermore, the board should ensure that supervisors and senior management adhere to policies and procedures regarding the monitoring of case reviews.

Finding 2 - We found that parole agents failed to timely react to missing parolees and, once the parolees were declared absconded, failed to attempt to locate them as required. Based on our review of documentation, we found a 13 percent discrepancy rate related to untimely reacting to missing parolees. We also found a 76 percent error rate with respect to parole agents not making at least one attempt to locate absconders on a quarterly basis as required.

We recommend that the board improve its monitoring procedures by either developing a mechanism or editing the Supervisor Case Review Checklist to include verifying that parole agents attempt to locate absconders on a quarterly basis and ensure compliance with the 30-day and 48-hour requirements. The board policy allows parole agents up to 30 days to conduct a diligent search to determine if an offender has absconded from supervision. During the diligent search, if a parole agent determines that the parolee is unavailable for supervision, a Delinquency Request Form must be submitted within 48 hours which will initiate the police warrant for arrest.

Finding 3 - We discuss how the board failed to adequately monitor rehabilitation treatment that parolees are required to attend. Weaknesses noted included: data entry of treatment information into its Parole Follow-up System was untimely, and therefore was not useful; policies and procedures for consistently documenting treatment were inadequate; and a centralized accountability of treatment for offenders was lacking.

RESULTS IN BRIEF

We recommend that the board develop a comprehensive monitoring mechanism of rehabilitation treatment at the senior level, rather than relying on comments retained in respective case files. If the Parole Follow-up System is used as the monitoring mechanism, the software would need to be enhanced to enable management to assess the adequacy of the treatment programs utilized as well as the success rate of these programs. Moreover, the board should develop written policies and procedures for documenting parolees' rehabilitation treatment on a uniform basis, including developing a methodology and standard form(s) to adequately document treatment activities. Documentation should clearly identify all necessary treatment information, such as when, where, or how often the parolee should be attending treatment and for how long and whether the parolee actually attended the treatment.

Finding 4 - We explain that, due to the board failing to provide information, we could not validate the board's assertions on the ratio of cases per parole agent. Specifically, we requested information to corroborate Philadelphia's case-to-staff ratio, but was denied the information.

We recommend that the board take the necessary action to achieve and maintain case-to-staff ratios at sufficient levels to ensure that offenders are adequately supervised and receiving necessary services. We also recommend that the board provide all information to the Department of the Auditor General upon request.

All findings are discussed at length in the main body of this report.



BACKGROUND

Board of Probation and Parole

The Pennsylvania Board of Probation and Parole (board) is an independent administrative board originally established by Act 323 of 1941. The Act and its subsequent amendments established a uniform parole system and provide for assistance in improvement of adult probation services in the Commonwealth. According to the board's mission statement, "The Pennsylvania Board of Probation and Parole is committed to protecting the safety of the public, addressing the needs of crime victims, improving county adult probation and parole services, and assisting in the fair administration of justice by ensuring the custody, control and treatment of offenders under the jurisdiction of the Board."

As of June 30, 2006, the board was responsible for more than 22,800 parolees and 6,200 probationers and, as of June 30, 2008, these populations increased to more than 24,700 and 7,300, respectively. In total, over 78 percent of the board's caseload consists of offenders released from incarceration for parole. Parolees are not "free"; rather, they have been released from actual incarceration and are serving the remainder of their sentences while living in the community under the supervision of parole agents.

The board consists of nine members who are appointed by the Governor and confirmed by the Senate of Pennsylvania. Board members may not hold any other office or employment, and they are not permitted to take any active part in politics. The Governor designates one of the members of the board to serve as chairman. The board evaluates state offenders' suitability for release to parole supervision. If approved for parole, the board also provides supervision services in the community. The board believes that it must balance the demands of protecting the safety of the public interest while facilitating the offender's reintegration into the community.

The board's duties include:

- Granting parole and to supervise all offenders sentenced by the courts to a maximum sentence of two years or more;
- Revoking the parole of parole violators and those convicted of new crimes;
- Making pre-sentence investigations and reports as provided by law;
- Collecting, compiling, and publishing statistical and other information relating to probation and parole work in all courts and such other information that the board may deem of value in probation service;
- Supervising offenders sentenced by the courts to imprisonment for less than two years where a request is made by the sentencing court;
- Supervising offenders sentenced by other states where a request is accepted pursuant to the Interstate Compact for Adult Offender Supervision; and
- Releasing from parole persons under supervision who have served their entire sentence in compliance with the conditions governing their parole.

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¹ <u>See</u> 61 P.S. § 331.2 <u>et seq</u>.

BACKGROUND

Supervision and Monitoring of Parolees

The board, through its Office of Probation and Parole Services (office), is responsible for supervising more than 29,000 offenders as of June 30, 2006 and 32,000 as of June 30, 2008 who are on parole and probation across the Commonwealth. The office is responsible for nearly 800 institutional and field staff located in the three regions across the Commonwealth. Institutional staff processes inmates for parole consideration and field staff supervises offenders granted parole. Each regional office - Eastern (Philadelphia), Central (Harrisburg), and Western (Pittsburgh) - manages the institutional and field operations in its respective area. The three regional offices include 10 district offices as follows:

District Offices				
Eastern Region	Central Region	Western Region		
Chester	Allentown	Altoona		
Philadelphia	Harrisburg	Mercer		
-	Scranton	Erie		
-	Williamsport	Pittsburgh		

The Office of Probation and Parole Services also includes the Bureau of Probation Services which provides technical assistance and in-service training, as well as establishes standards for the 65 Commonwealth county probation offices. The counties are responsible for individuals on probation and the board is responsible for parolees. In cases where the courts assign a probation case to the board rather than to the county, the board will supervise the probationer. Typically, most individuals serving sentences of probation rather than imprisonment are supervised by county-run probation offices rather than by the board. However, two of the 67 counties, Mercer and Venango, have no county probation offices, so it is the responsibility of the board to supervise probationers there. In addition to Venango and Mercer County probation cases, probationers from other states living in Pennsylvania and special cases as declared by the courts are supervised by the board.

Once placed under the board's supervision, parolees are assigned to a parole agent, who is responsible for contacting and monitoring the activities of the parolees. According to board management, on average, parole agents are each assigned approximately 75 parolees to supervise.

The board has developed an operations and procedures manual for parole agents and management to follow in completing their job duties. These procedures include the number of face-to-face and collateral contacts (such as a relative, employer, or friend) a parole agent needs to make; the information that needs to be maintained in parolees' case files; and how supervisors and management monitor parole agents, including reviewing parolee case files.

BACKGROUND

Contact with Parolees. As part of their job duties, the board's parole agents need to frequently make contact with offenders (parolees) to ensure that they are adhering to their conditions of parole, such as ongoing drug testing, attending drug or alcohol treatment, curfew restrictions, or maintaining residence. The required number of face-to-face and collateral contacts depends on the parolee's assigned supervision level: minimum, medium, maximum, enhanced, or special circumstances. The number of contacts range from two contacts within a six-month period to six contacts per month.

The board has developed standard forms to use to document information in the case files. The Record of Interview form chronologically summarizes a parole agent's contacts with the parolee or his/her collateral contacts. Activity to be documented includes date, start and stop times of each contact, brief narrative of discussion, and the name of the collateral contact, if applicable. Another form utilized by the parole agents is the Supervision Plan form, which is completed annually and then updated after six months. This form contains the risk/needs areas of the parolee, the plan of action to improve the risk/needs areas, the assigned supervision level, and signatures and dates of the parolee, parole agent and supervisor.

Board's Review of Case Files. In addition to developing standard forms for documenting information in case files, the board has also developed the Supervisor Case Review Checklist (checklist) for use in documenting the supervisor's quarterly review of parolee case files and a method of monitoring this process through several levels of management. The checklist requires the supervisor to review each case, document certain information, and conclude on 14 categories by placing a "Yes," "No," or "N/A" in the column. The categories include the completeness of the supervision plan, the completeness of the Record of Interview, compliance with the required number of contacts, and whether the rehabilitation treatment was current. Once complete, the supervisor forwards the checklists and corresponding results to the deputy district director, who must also examine some case files and then forward the checklists and the results to the district director. After the district director re-examines two case files, he/she will document the results in a monthly report to the regional director, and if necessary, indicate corrective action to be taken. Finally, the regional directors will forward the case review results to the Director of the Office of Probation and Parole Services. Although these procedures are required, the board does not require the checklists or other monitoring documents to be retained.

BACKGROUND

Absconders. Parolees who deliberately make themselves unavailable for supervision violate their conditions of parole. According to the board's operations and procedures manual, if a parole agent discovers that a parolee has moved from a residence without permission or misses a scheduled contact, the parole agent has up to 30 days to conduct a diligent search for the individual, which can include an immediate search of the parolee's residence, obtaining a written statement from a home provider, or contacting a relative, employer, or associate of the parolee. Upon determination that the parolee is unavailable for supervision, the parole agent has 48 hours to file a Delinquency Request Form, requesting the board to declare the parolee an absconder. This declaration will result in police authorities issuing an arrest warrant for the absconder. Additionally, the parole agent who supervised an absconder must make, at a minimum, one attempt to locate the absconder per quarter through conducting a diligent search, or, if the absconder resides in the Philadelphia, Pittsburgh, Erie and Harrisburg districts, the case file will be transferred to the Fugitive Apprehension Search Team (FAST Units), in the appropriate district office. The FAST Units must also make, at a minimum, one attempt to locate the absconder per quarter.

AUDIT OBJECTIVES, SCOPE, AND METHODOLOGY

Objectives

The objectives of this special performance audit were to determine if:

- The Parole Board (board) performed quarterly supervisory case reviews of all parolee case files and internal reviews of parolees' semiannual supervision plans, and if senior management verified that these reviews were performed (See Findings 1 and 3);
- Offenders were declared delinquent timely, warrants were issued timely, absconders were adequately pursued, absconders were found, and, if found, were recommitted or sanctioned (See Finding 2); and
- The funding for probation and parole agents in relation to their caseload and area of operation is adequate (See Finding 4).

Scope

Our audit covered the board's duties and responsibilities with regard to these objectives for the period July 1, 2001 through June 30, 2006, including follow-up procedures performed and concluded as of May 15, 2009.

Methodology

The methodology in support of the audit objectives included:

- Interviewing and corresponding with board management to gain an understanding of policies and procedures with regard to the supervision and monitoring of parolees and adequacy of funding;
- Verifying and analyzing parolee and parole agent data from the board;
- Obtaining and reviewing select case file documentation regarding the oversight of parole agent activities, including the timeliness of parole agents reacting to missing parolees and declaring them absconded. Our review was limited to documentation that was copied and redacted for confidential reasons by the board; and
- Performing analytical procedures on financial data and staffing data.

FINDINGS AND RECOMMENDATIONS

FINDINGS AND RECOMMENDATIONS

Finding No. 1 – The Board's Inadequate Supervisory Oversight of Agents Could Lead to Parolees Not Being Adequately Supervised

<u>Condition:</u> According to the Parole Act, "The parole system provides several benefits to the criminal justice system including the provision of adequate supervision of the offender while protecting the public, the opportunity for the offender to become a useful member of society, and the diversion of appropriate offenders from prison." The Board of Probation and Parole (board) utilizes parole agents to supervise the offenders (parolees) and has developed policies and procedures for parole agents to follow in performing their duties, including how often to make contact and what documentation needs to be maintained. The required number of contacts depends on the parolee's assigned supervision level: minimum, medium, maximum, enhanced, or special circumstances and includes both face-to-face and collateral contacts.

To ensure parole agents are adequately supervising parolees, the board also created policies and procedures for overseeing and monitoring parole agents. These procedures require parole supervisors to perform various duties including reviewing all the parolee case files assigned to his/her parole agents on a quarterly basis. This review is documented on a Supervisor Case Review Checklist (checklist). At the beginning of each month, each supervisor is required to print the checklists with the names of the parolee cases that need to be reviewed that month for each parole agent. The review of cases must be completed during that month.

Once complete, the supervisor forwards the checklists and results of the review to the deputy district director, who must personally re-examine a minimum of 10 case files (at least two per supervisor). Once completed, the deputy district director will forward the checklists and the results to the district director, who must re-examine two case files previously reviewed by the deputy district director. After completion, the district directors, in their monthly reports to the regional director, will forward copies of the checklists and review summaries, and if necessary, indicate corrective action to be taken. Finally, the regional directors will forward the case review results to the Director, Office of Probation and Parole Services, in their monthly reports.

We interviewed management and obtained documentation regarding these processes. Based on our test work, we noted three areas of deficiencies: supervision checklist accountability, case files, and senior management monitoring. In addition, based on discussions with board management, there were no significant changes in the noted processes and procedures from our audit period through March 2009. The following explains each area:

FINDINGS AND RECOMMENDATIONS

Finding No. 1

I. Supervision Checklist Accountability Deficiencies – 49 Percent could not be provided

To verify that parole supervisors reviewed all required case files for one month, we requested copies of all checklists completed from five of the ten districts for either the month of August or September 2005 which represented 241 checklists. When we compared the number of redacted checklists received to the number of parole agents identified from the data file of case related information maintained by the board, we found that all checklists were not provided as shown in the following table:

	Altoona District (Sept. 2005)	Harrisburg District (Sept. 2005)	Philadelphia District (August 2005)	Pittsburgh District (August 2005)	Williamsport District (August 2005)	Totals
Number of Agents						
Per Data	15	47	107	58	14	241
Number of						
Checklists Received	11	44	13	42	14	124
Number of						
Checklists Missing	4	3	94	16	0	117

In response to not providing all the checklists, the board stated that it has no retention policy to maintain checklists because the checklists are considered training tools only. As a result, we could not verify that agents were properly supervised for almost 50 percent of the agents selected in our review. In addition, we noted the Philadelphia checklists were mostly incomplete or left blank. Therefore, it appears that Philadelphia parole supervisors are not completing the checklists as required, even though board management informed us that parole supervisors in Philadelphia complete the checklists in conjunction with a monthly Administrative Day and then they are destroyed.

II. Case File Deficiencies

To verify the accuracy of the parole supervisors' case reviews, we selected a sample of 40 cases to examine the case file documentation from 40 checklists received as noted above, except for Philadelphia since the checklists received were not completed. We prorated our selection based on the number of cases listed by district. Our analysis focused on verifying the following three categories: 1) the supervision plan, which should have been completed three months prior, was completed and properly signed; 2) the Record of Interview contained necessary information and was legible; and 3) the parole agent made the required number of face-to-face and collateral contacts, based on the parolees assigned supervision level for the prior three months. The results are as follows:

FINDINGS AND RECOMMENDATIONS

Finding No. 1

<u>Supervision Plan – 69 Percent Problematic</u>

We reviewed the supervision plans to determine whether the supervisor properly concluded that the plans for the related period were properly completed. Of the 40 cases, one was not applicable because the parolee was not available for supervision. For the remaining 39 cases we found that 69 percent were problematic:

- 11 cases could not be tested because we did not receive applicable supervision plans.
- Two cases in which the supervisor left the supervision plan category blank; therefore, no evidence was present to verify the supervisors reviewed these plans.
- Of the four cases that the supervisors listed "No" in the category Supervision Plan Completed, we noted that in three cases the supervisor's required comments were missing.
- Of the 22 cases that the supervisors listed "Yes" in the category entitled Supervision Plan Completed, we found 11 to be incorrect. Deficiencies noted included failing to complete the plan of action or level of supervision sections, or no parolee or supervisor signature.

Record of Interview – 73 Percent Problematic

We reviewed the Records of Interview for completeness and whether the supervisor provided accurate conclusions. Of the 40 cases, three were not applicable because the parolees were not required to be supervised by parole agents during the time period. For the remaining 37 cases we found that 73 percent were problematic:

- Five cases could not be tested because we did not receive the requested Records of Interview.
- Three cases in which the supervisors left the checklists blank; therefore, no evidence was present to verify the supervisors reviewed these cases.
- One case the supervisor concluded "No" in the category Record of Interview Completed. Although we agreed with the conclusion, we noted a deficiency in that the supervisor failed to comment on the "No" as required.
- Of the 28 cases that the supervisors listed "Yes" in the category entitled Record of Interview Completed, we found 18 to be incorrect. Deficiencies noted included missing start/stop times, brief narratives, or name of collateral contact, and/or the information was not legible as required.

FINDINGS AND RECOMMENDATIONS

Finding No. 1

<u>Contacts – 69 Percent Problematic</u>

We reviewed the Records of Interview to determine whether the supervisor properly concluded that the parole agent had made the correct number of face-to-face and collateral contacts during the three-month period. Of the 40 cases reviewed, four were not applicable because the parolee was not required to be supervised by the parole agent during the time period. For the remaining 36 cases, we found that 69 percent were problematic:

- Six cases could not be tested because the Records of Interview were not provided.
- Three cases in which the supervisors left the checklists blank; therefore, no evidence was present to verify the supervisors reviewed these cases.
- Although we agreed with the seven cases the supervisors listed "No" in the category entitled Contacts Appropriate, we take exception to the lack of required comments for "No" responses by the supervisor in four of the seven cases. We noted a parolee assigned as maximum supervision, requiring six face-to-face-contacts and six collateral contacts per quarter only had conducted two face-to-face contacts and one collateral contact.
- Of the 20 cases that the supervisors listed "Yes" in the category entitled Contacts Appropriate, we found that 12 were incorrect. Of these 12, a total of 13 face-to-face contacts and 35 collateral contacts were missing. In one instance, we found that the parole agent failed to conduct four face-to-face contacts and six collateral contacts with a parolee assigned a maximum supervision level, but the supervisor considered the number of contacts appropriate.

III. Senior Management Monitoring Deficiencies

We also requested documentation from the same five districts to substantiate that the deputy district directors, district directors, and regional directors received the required checklists and results, and performed their required monitoring procedures for the same respective month. We were provided evidence that case reviews at the district level were performed at the Harrisburg District and Williamsport District. However, we did not receive any documentation to support the review of cases at the remaining districts. Additionally, no documentation was provided to verify that the regional directors forwarded any case review results to the Director, Office of Probation and Parole Services for the respective month. Again, board management indicated that checklists and other documentation demonstrating that monitoring procedures were performed at the district or regional levels are not required to be maintained. Therefore, we could not verify that these procedures were performed in compliance with the operations and procedures manual.

FINDINGS AND RECOMMENDATIONS

Finding No. 1

<u>Criteria:</u> The board's operations and procedures manual (manual) explains the supervision practices that are required to be performed, including the supervisor case review. This process is required to be performed monthly by each supervisor for the cases assigned to his/her parole agents that are due to have either a supervision plan or Supervisor Case Review Checklist (checklist) completed. The supervision plan, completed annually but also includes a six-month update, contains the following information: the risk/needs areas, plan of action, supervision level, and signatures and dates by the parolee, parole agent and supervisor. It is required to be maintained in the parolee's case file. The checklist, completed by the supervisor, includes the names of the parolees' case files that are required to be reviewed that month for each parole agent. It requires the supervisor to review each case, document certain information, and conclude on 14 categories by placing a "Yes," "No," or "N/A" in their respective column. In addition to the categories we tested, other categories included addressing specific fees and special conditions, as well as proper use of sanctions. Furthermore, the checklist states that comments must be noted for all "No" responses.

The board's manual also requires the Record of Interview to be maintained in the case file. It dictates that each entry be legible and contain the date, start/stop times, and a brief narrative indicating all information of importance obtained during the contact, including the name of the collateral contact.

The manual stipulates the minimum number of face-to-face and collateral contacts depending on the assigned level of supervision. The following table identifies the number of contacts required by period based on level of supervision:

Level of Supervision	Contact Requirements
	4 face-to-face contacts per month
Enhanced	2 collateral contacts per month
	6 face-to-face contacts per quarter
Maximum	2 collateral contacts per month
	3 face-to-face contacts per quarter
Medium	3 collateral contacts per quarter
	1 face-to-face contact per quarter
Minimum	1 collateral contact per quarter
	1 face-to-face contact per six months
Special Circumstance	1 collateral contact per six months

FINDINGS AND RECOMMENDATIONS

Finding No. 1

In addition to supervisors performing case reviews, the deputy district directors, district directors, and regional directors are required to perform monitoring procedures as previously described and to forward the results to their supervisors. Documentation should be maintained to demonstrate that the case reviews at all levels were performed in compliance with the manual. Furthermore, management must have controls in place to ensure its policies and procedures are completed and functioning as designed.

<u>Cause:</u> Many of the checklists and other monitoring documents performed by several supervisory levels were unavailable because the board does not have a retention policy for these items. Management stated that the checklists and related upper-level monitoring documentation, implemented approximately early 2003, "were developed to serve as coaching and mentoring tools to help ensure the observance of agency policies and procedures." According to management, the checklists are destroyed once completed. However, because these procedures are included within its manual, we believe management should ensure that documentation is retained so the board and others may verify the procedures were completed and determined satisfactory.

With regard to not providing supervision plans and Records of Interview, management indicated that they were unavailable.

With regard to how supervisors perform their case reviews and why their conclusions did not agree to the auditors' conclusion, board management would not provide us names and contact information for us to schedule interviews. Therefore, we could not discuss these discrepancies with any of the supervisors performing this work.

Effect: The board's failure to adequately monitor the activities of the parole agents could result in the parolees not being adequately supervised. As noted in the condition, we found that the proper number of face-to-face and collateral contacts had not been completed in many instances. Furthermore, a lack of oversight over the parole supervisors' case reviews resulted in the inaccuracies we noted on the checklists not being detected. These inaccurate results may mislead board management in concluding that parole agents are adequately supervising parolees, when they are not.

Additionally, failing to develop a retention policy for checklists and other monitoring documents precludes the board and others from verifying whether the Office of Probation and Parole is satisfactory meeting the requirements of the board from assessing whether deficiencies are improving or deteriorating.

FINDINGS AND RECOMMENDATIONS

Finding No. 1

Recommendations: We recommend that the board:

- 1. Cease destroying documents that evidence proper internal controls;
- 2. Develop a retention policy for the checklists and other monitoring documents for supervisor case reviews;
- 3. Verify all supervisors are accurately completing their supervisor case review checklists to ensure accountability and to ensure parole agents are properly completing and retaining supervision plans and Records of Interview and appropriately completing the proper number of face-to-face and collateral contacts as required;
- 4. Ensure that all "No" responses have adequate written comments; and
- 5. Ensure that supervisors and senior management adhere to policies and procedures regarding monitoring case reviews.



FINDINGS AND RECOMMENDATIONS

Finding No.2 – Parole Agents Failed to Timely Respond to Missing Parolees, and Once Declared Absconded, Failed to Attempt to Locate Them as Required

<u>Condition:</u> According to its mission statement, the Board of Probation and Parole (board) "is committed to protecting the safety of the public, addressing the needs of crime victims, improving county adult probation and parole services, and assisting in the fair administration of justice by ensuring the custody, control and treatment of offenders under the jurisdiction of the Board." As part of this responsibility, the board's parole agents need to frequently make contact with offenders (parolees) to ensure that they are adhering to their conditions of parole, such as ongoing drug testing, attending drug or alcohol treatment, curfew restrictions, or maintaining residence. The required number of contacts between the parolee and the parole agent is based on the parolee's assigned supervision level: minimum, medium, maximum, enhanced, or special circumstances.

Parolees who deliberately make themselves unavailable for supervision violate their conditions of parole. According to the board's operations and procedures manual, if a parole agent discovers that a parolee has moved from a residence without permission or misses an arranged "contact," the parole agent has up to 30 days to conduct a diligent search for the individual. Upon determination that the parolee is unavailable for supervision, the parole agent has 48 hours to file a Delinquency Request Form, requesting the board to declare the parolee an absconder. This declaration will result in police authorities generating an arrest warrant for the absconder. Additionally, the parole agent who supervises an absconder must make, at a minimum, one attempt to locate the absconder per quarter through conducting a diligent search, or, if the absconder resides in the Philadelphia, Pittsburgh, Erie and Harrisburg districts, the case file will be transferred to the Fugitive Apprehension Search Team (FAST Units) in the respective district office, who must meet that same requirement. Based on discussions with board management, there were no significant changes in the above processes and procedures from our audit period through March 2009.

To determine whether the parole agents or FAST Units were continuing to look for absconders on a quarterly basis as required, we obtained a data file of 1,659 parolees declared absconded as of June 30, 2006. We randomly selected 24 absconders by pro-rating the sample based on the number of absconders listed by district. Our results are based on select redacted case documentation provided by the board. The documentation examined included the Record of Interview, used to account for contacts made or attempted to be made by a parole agent, the Delinquency Request Form, the Administrative Action Form, used to declare a parolee absconded, and Supervision History.

FINDINGS AND RECOMMENDATIONS

Finding No. 2

Evidence to Support Locating Absconders – 76 Percent Problematic

Of our sample of 24 parolees declared absconded as of June 30, 2006, ten were absconded for less than three months, which we did not include in our test because the minimum requirement is once per quarter. Of the remaining 14, nine had been declared absconded for up to three years, four had been declared absconded for more than five years, and one wasn't applicable to our test due to being an interstate transfer. For these nine, we reviewed documentation to determine whether parole agents or FAST Units made quarterly attempts to locate these absconders for all quarters absconded through June 30, 2006, and for the remaining four, we reviewed documentation for up to 16 consecutive quarters prior to June 30, 2006. We found that of the 92 quarters examined for the 13 absconders, 70 (76 percent) showed no evidence that a parole agent attempted to locate these absconders. In one instance, no attempts to locate an absconder were documented for 16 consecutive quarters. This indicates that little effort is made by parole agents or FAST Units to locate parolees once they are declared absconded even though it is required by the board.

Evidence to Support Reacting to Missing Parolees – 13 Percent Problematic

In addition to determining whether the parole agents or FAST Units were continuing to look for absconders on a quarterly basis as required, we also used the same sample of absconders to determine whether parole agents adequately reacted to missing parolees as required. Of the 24 absconder case files reviewed, we found that the parole agents failed to timely react to three (13 percent) parolees that missed appointments or were unaccounted for, as noted below:

- Two parole agents waited five days and 11 days, respectively, after determining the parolee was unavailable for supervision, to file the Delinquency Request Form, which is not in compliance with the 48 hour limitation; and
- One parole agent took 53 days to file the Delinquency Request Form after the parolee failed to show up for a scheduled appointment. Although case documentation indicates the parole agent attempted to contact the parolee via phone calls and visits to the parolee's home, no details are noted as to when these actions took place and no reason is documented as to why it took almost two months for the parole agent to file the Delinquency Request Form. Due to lack of documentation, this situation indicates noncompliance with the 30-day diligent search requirement and the 48-hour limitation to file the Delinquency Request Form.

FINDINGS AND RECOMMENDATIONS

Finding No. 2

<u>Criteria:</u> Commonwealth citizens expect government, including the board, to make every effort to ensure their safety and well being. As such, the board needs to know the whereabouts and activities of individuals on parole. This includes immediately reacting to parolees failing to report to appointments with parole agents or parolees that may have moved from their approved residences. Furthermore, once the parole agent determines the parolee is unavailable for supervision, the parole agent should immediately file the Delinquency Request Form requesting the board to declare the parolee an absconder, which will result in an arrest warrant being issued.

The board's operations and procedures manual, allows parole agents up to 30 days to conduct a diligent search to determine if an offender has absconded from supervision. A diligent search would include any or all of the following steps:

- An immediate visit shall be made to the parolee's last known residence. The parole agent shall attempt to search the offender's living quarters to determine if personal items, such as clothing, have been removed from the residence.
- Efforts to obtain a signed and written statement(s) from the home provider should always be made for possible use in future violation proceedings.
- The parole agent may contact the offender's family, employer, friends, associates, attorney, clergy, local jails, hospitals, utility companies, welfare and treatment providers and law enforcement agencies.

The manual requires parole agents to document their efforts to locate parolees on the Record of Interview. During the diligent search, if the parole agent determines that the parolee is unavailable for supervision, a Delinquency Request Form must be submitted within 48 hours.

Upon being declared delinquent or placed in absconder status, the parole agent is required to continue a diligent search for the absconder, making a minimum of at least one attempt per quarter. All efforts to locate absconders must be recorded and summarized by the parole agent or FAST Unit on the Record of Interview.

The Record of Interview, required to be completed by the parole agent, documents all contacts the parole agent has with respect to the parolee. All information must be complete, accurate and legible as well as include dates, start/stop times of each contact along with a brief narrative indicating all information of importance obtained during the contact.

FINDINGS AND RECOMMENDATIONS

Finding No. 2

<u>Cause:</u> With regard to why the parole agents failed to timely react to missing parolees or to attempt to locate absconders, board management would not provide us names and contact information for us to schedule interviews. During our preliminary meetings, management indicated that there are no exceptions to these respective compliance requirements.

Additionally, inadequate monitoring by parole supervisors affords parole agents the opportunity to not comply with board requirements. The Supervisor Case Review Checklist (discussed in Finding No. 1) does not address the requirement to ensure that parole agents are quarterly performing a diligent search for absconders. Furthermore, the checklist does not require supervisors to verify parole agents are complying with the 30-day and 48-hour requirements.

Effect: The board's failure to timely react to missing parolees could delay declaring the parolees as absconded, which delays the issuance of arrest warrants, increases the risk of not finding the absconder, and may jeopardize citizens' safety.

Additionally, the board's failure to quarterly perform a diligent search for absconders reduces the likelihood that the absconder is caught. With the passing of time, an absconder's chance of avoiding arrest increases.

Recommendation: We recommend that the board:

6. Improve its monitoring procedures by developing a mechanism or edit the Supervisor Case Review Checklist to include verifying that parole agents attempt to locate absconders on a quarterly basis and ensure compliance with the 30-day and 48-hour requirements.

FINDINGS AND RECOMMENDATIONS

Finding No. 3 – The Board Failed to Effectively Monitor Rehabilitation Treatment that Parolees are Required to Attend

<u>Condition:</u> One of the Pennsylvania Board of Probation and Parole (board) responsibilities involves evaluating parolees under its supervision to determine if rehabilitation treatment (treatment) is necessary to assist in rehabilitating parolees and to reduce any potential threat to the general public. Treatment may include placement within an in-patient or out-patient program for problems such as drug abuse, alcohol abuse, domestic violence, or sexual offenses. In addition to the parole agent determining the need for treatment, which may also be determined by correctional facilities or court decisions prior to placement into the parole system, the parole agent should ensure that the parolee attends the required treatment.

Based on our interviews with board management in 2008 and review of the Parole Follow-up System, we found that the board failed to adequately monitor treatment that parolees are required to attend. We noted the following weaknesses:

- The Parole Follow-up System, which was implemented in 2004 to record parolee information including treatment, is not an effective monitoring tool because the information is incomplete. According to management, due to insufficient clerical staff, treatment referrals have not been timely data entered into this system. Thus management considered the data not useful and not consistently populated in the automated system. Management also indicated that it was relying on the hard copy case file not the system for treatment tracking which are maintained throughout Pennsylvania at respective district offices. As a result, the only method of monitoring treatment would be to review individual case files of each parolee.
- The board has inadequate policies and procedures for documenting treatment. According to the board's manual, the "status of treatment referrals" is required to be documented in the parolee's Record of Interview. However, there is no explanation described as to the methodology or process to ensure compliance. The manual is silent on the need to record when, where, or how often the parolee should be attending treatment and for how long and whether the parolee actually attended the treatment. Management indicated that it is up to each supervisor to determine the method of documentation. The board has not developed a standard form(s) or methodology for recording treatment activities of parolees. According to management, in order to monitor treatment, one would need to review the entire case file, and if necessary, may also need to contact the respective treatment program.

FINDINGS AND RECOMMENDATIONS

Finding No. 3

• The board lacks centralized accountability of treatment for offenders. It has decentralized this function and relies on its direct supervisors to monitor parolees' treatment. There are more than 60 supervisors state-wide to monitor approximately 29,000 offender's (approximately 22,800 parolees and 6,200 probationers) case files. Supervisors are required to review case files quarterly or approximately 116,000 case reviews annually. This equates to each supervisor reviewing approximately 475 cases each quarter or 1,900 case files yearly for an average 150 per month. We asked board management how it verifies that supervisors are effectively monitoring parolees' treatment. Management indicated that it solely relies on its supervisors to adequately perform this function.

As a result of the board's inadequate accountability and monitoring procedures, as noted above, we were unable to determine which parolees were required to attend rehabilitation treatment, what treatment was required, when treatment was to occur, and whether parolees actually participated in the rehabilitation treatment.

<u>Criteria:</u> To reduce the risk to the general public, a system must be in place to adequately document parolee treatment, which would include developing a methodology and creating a standard form(s) for placement into the case files, as well as a database system to allow management at all levels to monitor rehabilitation treatment to ensure proper treatment is assigned and completed by parolees. This system would be incorporated into the board's written policies and procedures and include internal controls to ensure it is effectively functioning as designed.

Although the audit period end date is June 30, 2006, based on our interviews with management these procedures remained in effect through 2008.

<u>Cause:</u> The board indicated that its current system for monitoring rehabilitation treatment is adequate. Management relies solely on its supervisors for monitoring treatment. According to management, each supervisor is familiar with its respective cases and can effectively manage and monitor rehabilitation treatment for parolees under its supervision. We disagree with management. A lack of standard form(s) or documented methodology and inadequate records result in supervisors using judgment to rely on their familiarity of the cases, rely on the parole agents' comments about parolee treatment, or require extensive time and effort to review each case file. This judgment could result in inconsistently monitoring rehabilitation treatment.

With regard to the Parole Follow-up System, the board stated that insufficient clerical staff has resulted in untimely data entering treatment referrals.

FINDINGS AND RECOMMENDATIONS

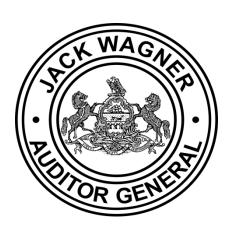
Finding No. 3

Effect: The board's failure to adequately monitor rehabilitation treatment of parolees has the potential to increase the recidivism rate among parolees and may place the general public at greater risk. Rehabilitation treatment for problems such as drug abuse, alcohol abuse, domestic violence, or sexual offenses is a vital part in assisting parolees to be productive citizens. Assuring proper treatment is assigned and completed by parolees must be a priority for the board. Failing to have a centralized mechanism for recording treatment activity limits management's assessment of the adequacy of its treatment programs, including determining whether the expected benefits of the programs are being met or if changes or adjustments to programs are necessary to improve the outcomes of the treatment.

Furthermore, Pennsylvania residents would incur additional cost burdens to fund any pursuit, apprehension, incarceration and further treatment of parolees due to recidivism.

Recommendations: We recommend that the board:

- 7. Monitor rehabilitation treatment at the senior level. If the Parole Follow-up System is used as the monitoring mechanism, the software would need to be enhanced to enable management to assess the adequacy of the treatment programs utilized as well as the success rate of these programs.
- 8. Enter treatment information data timely into the Parole Follow-up System.
- 9. Develop written policies and procedures for documenting parolees' rehabilitation treatment on a uniform basis, including developing a methodology and standard form(s) to adequately document treatment activities. Documentation should clearly identify all necessary treatment information, including when, where, or how often the parolee should be attending treatment and for how long and whether the parolee actually attended the treatment.



FINDINGS AND RECOMMENDATIONS

Finding No. 4 – We Were Unable to Validate the Board's Assertions on the Ratio of Cases Per Parole Agent Due to the Board's Failure to Provide Requested Information

<u>Condition:</u> The majority of probation and parole cases in Pennsylvania are assigned by the Pennsylvania Board of Probation and Parole (board) to its general field agents, with a smaller percentage of caseloads handled by specialty units. Field agents in the Commonwealth are entrusted with oversight of a multitude of violent and non-violent offenders who have been identified as eligible for supervised release.

The board indicated in interviews with our audit personnel that during our audit period and, as of June 30, 2006, the cited statewide parolee case-to-parole agent ratio of 75:1 (75 cases to one parole agent) is sufficient to maintain effective operations throughout the Commonwealth of Pennsylvania. Furthermore, the board provided information that 50:1 is the caseload ratio in other states that are considered to have effective parole supervision programs. The board did acknowledge that it is striving to adhere to caseload ratios more in line with a 50:1 average. The board indicated that its budget for the audit period was adequate to effectively sustain proper operations and oversight but an increase for the fiscal year 2007-2008 was anticipated. The board also indicated that, as of January 2009, the average caseload statewide was 70:1 and 76:1 in Philadelphia.

In an effort to achieve optimum case-to-staff ratios, the board uses a workload formula it developed to forecast the number of field agents needed to supervise offenders. It was mentioned that this formula ensures better supervision. However, we became aware of allegations that the board's workload formula inadequately reflects overwhelming demands placed on individual field agents and that the actual case-to-staff ratio for field agents working in Philadelphia may be more than 100:1.

As part of our audit, we attempted to corroborate the board's assertions that Philadelphia's case-to-staff ratios were adequate. We requested that the board provide us with specific documentation, including information relating to the caseload duties performed by general field agents on behalf of specialty unit agents; job descriptions and performance evaluation standards for specialty unit agents as well as general field agents; and a list itemizing the names, unit, title, work phone numbers, e-mail addresses to directly contact agents regarding their caseloads, and caseloads of all agents assigned to the Philadelphia District Office for the periods ending June 30, 2006 and June 30, 2008. The request was submitted directly to the chairman of the board in writing.

FINDINGS AND RECOMMENDATIONS

Finding No. 4

In two conference calls and several written correspondences, the chairman indicated that the board would provide all documentation in our requests, including a breakdown of agent names, phone numbers, e-mail addresses and caseloads per agent. Despite such assurances from the chairman, our efforts to validate certain data were hindered because of continual delays by the board. In addition, the board's Agency Audit liaison was present on our conference calls in which we asked for, and were promised, explicit agent information from the Philadelphia District Office. Nevertheless, the board failed to provide all the requested agent documentation and instead indicated that the information not provided is considered confidential. As a result of these aforementioned audit impediments, we were unable to substantiate the board's assertions on caseloads due to the board's failure to provide the information requested to the Department of the Auditor General.

In addition, in the written response to our request, the board acknowledged that deficiencies existed with respect to hiring and retention of agents in the Philadelphia District, noting that the board has been unsuccessful in retaining agents in this office. The board indicated that, in 2007, it undertook an analysis of the Philadelphia District to assess the reasons for the ongoing turnover and vacancies. Based on the results of the analysis, in May 2008, the board submitted a proposal to the Office of Administration to implement an employee retention incentive program to fill vacancies while maintaining more experienced agents and supervisors within the Philadelphia District.

<u>Criteria:</u> The board should ensure that offenders are matched with the appropriate level of supervision and services. In accordance with the board, an average caseload ratio of 75:1 is adequate, but it is striving for a ratio of 50:1, which was indicated as the ratio in other states that have effective parole supervision programs.

<u>Cause:</u> The board indicated in interviews with our audit personnel that the cited statewide case-to-staff ratio of 75:1 is sufficient to maintain effective operations throughout the Commonwealth of Pennsylvania. The board also asserted its budget was adequate to ensure public safety. However, the board's failure to provide our requested information covering the Philadelphia District Office hindered our ability to determine the acceptability of the case-to-staff ratio of 75:1, if field agents in the Philadelphia District are assigned reasonable caseload levels to ensure public safety, and if the board is properly funded in Philadelphia.

FINDINGS AND RECOMMENDATIONS

Finding No. 4

Effect: Residents of the Commonwealth of Pennsylvania have a legitimate expectation that their government will make every effort to ensure the safety and well being of the general public. It is a belief entrusted to the board and inserted in the Parole Act, which states that "the Board shall first and foremost seek to protect the safety of the public." While the board acknowledged the validity of the suggested case-to-staff ratio of 50:1, its acceptance of a case-to-staff ratio of 75:1 is deemed adequate by the board. Failing to provide agent and caseload related information purports a sense of secrecy as opposed to a sense of openness with regard to citizens' confidence in government.

Recommendations: We recommend that the board:

- 10. Take the necessary action to achieve and maintain case-to-staff ratios at sufficient levels to ensure that offenders are adequately supervised and receiving necessary services.
- 11. As part of all audits, we recommend that the board provide all information to the Department of the Auditor General upon request, including, but not limited to, the names of respective agents, work phone numbers, and caseloads per agent.

OBSERVATION

OBSERVATION

Observation – Using GPS Technology to Track Sex Offenders

In addition to the findings in this report on the supervision and monitoring of parolees by the Pennsylvania Board of Probation and Parole (board), we made the following observation during our audit, which we consider important to merit attention by management in its future operation of the program:

As covered thoroughly in a special report prepared by the Department of the Auditor General entitled, *Using GPS Technology to Track Sex Offenders: Should Pennsylvania Do More?*, released in July of 2008, we believe this current audit report provides another forum in which to reiterate our suggestion for the use of global positioning system (GPS) technology. This technology would improve the monitoring and supervision of sexually violent offenders who avoid registration requirements.

In early June 2008, there were approximately 9,800 sex offenders listed on the Megan's Law web site registry of the Pennsylvania State Police, of which, more than 240 were classified as sexually violent predators. Also in early June 2008, 923 sex offenders had non-current verification dates, indicating that these offenders had evaded registration requirements.

A global positioning system can pinpoint a person's physical location using satellites in orbit. These satellites continuously transmit position and time signals, which can be detected by a GPS receiver. Using active GPS technology, law enforcement officials can track an offender's movements almost at the same time they are occurring, whether minute-by-minute or in other selected intervals. At least 33 states currently use GPS technology to track the movements of certain sex offenders. Fourteen Pennsylvania counties said they use GPS technology to supervise some sex offenders.

Therefore, we recommend that the board should request that the General Assembly amend current law as necessary to require five years of GPS monitoring for all sex offenders released on parole who are caught after failing to register with state or local police as required, and for sexually violent predators whose victims are children.

What follows in Appendix A is the Pennsylvania Board of Probation and Parole's verbatim response to our four findings and 11 recommendations. Appendix A also contains our auditors' conclusions to these responses. Management has stated in its response that it disagrees with all of our important recommendations and is opposed to implementing them. In addition, management has raised concerns about the reliability of our audit evidence and the qualifications of the audit personnel assigned to perform this audit. Moreover, the Pennsylvania Board of Probation and Parole (board) accuses our department of not complying with generally accepted government auditing standards.

Despite the board's assertions, our audit was conducted in accordance with the applicable generally accepted government auditing standards (GAGAS) issued by the Comptroller General of the United States. We believe that the evidence obtained during the course of our audit provides a reasonable basis for our findings and conclusions based on our audit objectives. Also, in accordance with the provisions referenced as part of GAGAS, our auditors apply the highest ethical principles when conducting an audit, including taking on only work that each auditor is competent to perform, performing high-quality work, and following the applicable standards cited in the audit report. The auditors assigned to perform this audit have a combined 75 years of auditing experience and possess extensive education and training in the fields of accounting, fraud, and government auditing practices. Therefore, the board's claim that we violated audit standards is without merit.

The board begins its response to our findings and recommendations by asserting, "[The Department of the Auditor General] appears to have failed to meaningfully consult with any experts on parole." While our auditors gathered and corroborated audit evidence from numerous sources in the performance of their duties, auditors attempted to collect the majority of our audit evidence from the board. It is a reasonable expectation that the board, with its breadth of experience and statutory responsibilities, should be one of the leading professional authorities in the field of probation and parole within the Commonwealth of Pennsylvania. The board insisted on approving all interviews because it wanted to ensure that we interviewed the resident expert on the subject. Therefore, our auditors believed that, in interviewing the board, they did "meaningfully consult with...experts on parole."

Despite our best efforts to ensure the timely completion of this audit, the board's protocols and untimely and inadequate responses delayed the release of our report. On March 2, 2009, at the exit conference between our auditors and board management, conducted in the final phase of the audit process, Chairman Catherine McVey indicated to our audit staff that the board would provide us with documentation that would refute all of the findings and recommendations contained in our report provided to the board. The board was of the opinion that we reviewed inadequate documentation to reach our conclusions. Although we disagreed with the board's position we, agreed to review any additional documentation that Chairman McVey and the board deemed appropriate. The additional documentation, provided since the exit conference, failed to change our audit conclusions. The additional documentation included copies of confidentiality laws, the board's own test work of our transactions, reports, analysis, charts, and graphs that were not germane to our audit objectives. These specific audit objectives were repeatedly communicated to board management throughout the audit, verbally and in writing. Furthermore, the board, at the exit conference and in its written response to our findings, attempts to refute our audit conclusions by referencing a study recently commissioned by the Governor and conducted by agency consultant Dr. John S. Goldkamp, Chairman of Temple University's Department of Criminal Justice.

In accordance with Chairman McVey's request, our auditors reviewed two published sections of Dr. Goldkamp's ongoing study on the process by which Pennsylvania paroles violent offenders. Auditors also spoke with Dr. Goldkamp on April 21, 2009 and April 24, 2009 to determine the connection, if any, between his study and our audit report. However, our auditors determined that Dr. Goldkamp's current findings and ongoing study do not pertain to our audit objectives, which was confirmed by Dr. Goldkamp during our interview. In addition, according to Dr. Goldkamp, his focus relies on the examination of data provided by the board and not a review of detailed individual parolee case files. Dr. Goldkamp indicated that he does not have the resources to review numerous individual case files. When our auditors asked Dr. Goldkamp about the Record of Interview contained in each case file, Dr. Goldkamp replied, that his focus was not the review of case files, and that, therefore, he was not familiar with that document. Our auditors used the Record of Interview to determine weaknesses in the way the board pursues offenders who have absconded from parole and weaknesses related to the agents documenting their interaction with parolees. Dr. Goldkamp emphasized that his study, unlike ours, was not focusing on issues of compliance.

Additionally, the board was not forthcoming in granting all of our requests for specific information from the Philadelphia region. While the board publicized the success of its workload formula, our auditors were also intent on deciphering the actual caseload ratio per parole agent statewide, which the board indicated to be 75:1 (75 cases to one parole agent). However, sources familiar with the parole process asserted that the actual case-to-parole agent ratio is much greater than the board's current 75:1 ratio. In fact, we became aware of allegations that the board's workload formula inadequately reflects overwhelming demands placed on individual field agents and the actual case-to-parole agent ratio for field agents working in Philadelphia may be more than 100:1. As a result, we requested specific documentation from the board to evaluate the caseloads of the staff in Philadelphia, including the parole agents' names, phone numbers, e-mail addresses, and caseloads. We explained that this information was needed to independently validate the board's assertions regarding the reported caseloads. At that time, the chairman assured us during two conference calls and by e-mail that we would receive all of the documentation that we requested by a particular date. Despite these assurances, we did not receive all the information requested. The board indicated that it would not provide the parole agents' names, phone numbers, and e-mail addresses due to confidentiality concerns that we believe to have been unfounded.

The board also expressed disagreement with our finding involving the examination of specific documents to discern the existence of proper supervisory oversight. We concluded that the board's inadequate supervisory oversight of parole agents has the potential to result in parolees not being adequately supervised. We examined various documents to support this finding, a large percentage of which were problematic, could not be located, or were simply "not available." Despite our review of a range of documents, the board asserts that this finding is "flawed" because we relied on certain documentation, which it uses only as a "training tool." In actuality, the documentation we reviewed was developed by the board to correct deficiencies noted in a prior audit performed by the Department of the Auditor General and is noted as necessary documentation in the board's written policies and procedures. There is no mention of a "training tool" in the board's manual. It was only when we disclosed our audit deficiencies to the board, indicating that numerous supervisory documents were missing, that management stated that the document was only a training tool. Our audit test work was performed to determine if the board was complying with its own policies and procedures. As noted in the finding, employees should be following prescribed procedures in conducting their day-to-day job activities.

Board management contested our finding that parole agents failed to respond timely to missing parolees and, once declared absconded, failed to attempt to locate them as required. We do not state, nor was it our objective to determine, if the board failed to find absconders. The board has failed to address the facts and recommendations presented in the finding. Our audit procedures examined whether parole agents responded timely in determining absconder delinquency and, once individuals were declared absconded, if the board performed, at a minimum, at least one attempt per quarter to locate the absconders as required by the board's policy. As noted in the finding, the parole agents' work was in noncompliance with the board's policy and procedures.

The board disputes our finding that it failed to adequately monitor rehabilitation treatment that parolees are required to attend. The board asserts that we are referencing a system that was not used and that we lacked an adequate understanding of the application the board uses to monitor rehabilitation treatment. However, its executive director presented the tracking system as the mechanism used by the board to monitor and track offender treatment. We determined, through documentation requests and subsequent interviews, that the data from this system was incomplete due to the insufficient complement of clerical staff required to perform ongoing data entry. When we brought this deficiency to the board's attention, management indicated that the data in this system was not reliable. Furthermore, as explained in the finding, board management indicated that the documentation for treatment is maintained in the case file and may vary from case to case, so one might have to review the entire case file to determine the details of parolee rehabilitation treatment. The board's system is not an effective monitoring tool for parolee rehabilitation treatment, the policies and procedures are insufficient, and the board lacks centralized accountability for documenting and monitoring treatment that parolees are required to attend.

We are disappointed that the board has chosen to disregard all recommendations provided by the Commonwealth's independent auditing agency. The auditors assigned to perform this audit have a combined 75 years of auditing experience and possess extensive education, professional certifications, and training in government auditing practices. In accordance with provisions referenced as part of GAGAS, our auditors apply the highest ethical principles when conducting an audit, including taking on only work that the auditor is competent to perform, performing high-quality work, and following the applicable standards cited in the audit report.



February 24, 2009

Mr. Randall R. Marchi, CPA, CFE, CGFM Director Bureau of Departmental Audits 225-D Finance Building Harrisburg, PA 17120-0018

Dear Mr. Marchi,

Thank you for the opportunity to respond to the findings contained in your audit of the supervision and monitoring of parolees under the jurisdiction of the Board of Probation and Parole. Enclosed please find our response to the audit report.

We look forward to discussing our response with you on Monday, March 2, 2009, during our exit conference.

Sincerely,

Catherine C. McVey

Chairman

Pennsylvania Board of Probation and Parole

Enclosure (1)

Response of the Pennsylvania Board of Probation and Parole to the Auditor General's Audit of the Board's Supervision and Monitoring of Parolees from July 1, 2001 through June 30, 2006 (note: all footnotes are the board's)

February 24, 2009

Introduction

On September 6, 2006, the Department of the Auditor General (DAG) informed the Pennsylvania Board of Probation and Parole (Board) of its intent to conduct a special audit. The focus of the audit is on the duties and responsibilities of the Board. Now, almost two and a half years later, the DAG has completed this special audit but appears to have failed to meaningfully consult with any experts on parole. Most notably deficient is the failure to have contacted and worked with Dr. John Goldkamp, Chair of Temple University's Department of Criminal Justice, who has been and continues to conduct a top to bottom review of parole since September 29, 2008.¹

In fact, on both October 20, 2008, and on December 1, 2008, Dr. Goldkamp submitted interim reports regarding the parole system. The reports state that the overall system is sound, but acknowledged that we can do better. Dr. Goldkamp provided a number of recommendations of how the Board and DOC can improve their systems, and we have already implemented many of his recommendations:

One specific area of review by Dr. Goldkamp that is the same issue under review by the DAG is the parole agent workload and resulting caseloads. Dr. Goldkamp enlisted the expertise of a nationally recognized criminal justice expert, Dr. William Burrell, whose expertise is in community corrections and specifically regarding parole and probation agent workload formulas and offender supervision by level of risk. The DAG failed in its review of this issue to confer with Dr. Burrell and Dr. Goldkamp to secure their analysis of the PBPP's adopted workload formula approach and resulting caseloads.

The Board continues to work to implement other recommendations from Dr. Goldkamp's review. Unfortunately, the DAG's audit appears to ignore Dr. Goldkamp's work, and the work of the Board to implement Dr. Goldkamp's recommendations.

Ultimately, the DAG's decision not to contact Dr. Goldkamp is illustrative of the deficiencies of the DAG's audit. As is explained in the Board's responses to each finding, the audit consistently ignores critical documents, procedures, and policies and repeatedly uses wholly unreliable methodology – errors that ultimately result in recommendations that will have no positive impact on public safety.

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¹ On September 29, 2008, Governor Rendell requested that Dr. John Goldkamp, chair of Temple University's Department of Criminal Justice, review how the Department of Corrections prepares violent offenders for release, the Board of Probation and Parole determines whether to parole a violent offender, and how both entities supervise parolees after release.

As is demonstrated by our work with Dr. Goldkamp and the changes we have quickly implemented at his suggestion, the Board welcomes audits and reviews of our system and is willing to make critical changes that will improve public safety. In fact, as recognized by Dr. Goldkamp in his first two reports, the PBPP has consistently and routinely sought the expertise and advisement of nationally recognized parole experts to continue to refine and advance its system. In fact in the last three years the Board has used the expertise of: Dr. Jim Austin, who validated the risk assessment instrument used by the Board in assigning the levels of supervision in the community; Ms. Peggy Burke, Center for Effective Public Policy, to review and refine the parole guidelines to ensure they reflect nationally recognized best practices. Ms. Burke also completed a review and refinement of the PBPP's Violation Sanctioning Grid, which guides the parole agent's decisions regarding the appropriate sanctions to be imposed on parolees who violate parole conditions. Dr. John Kramer and Dr. Eric Silver of Penn State University completed a two year study of agent responses to parole violations and provided recommendations for refinements to the process. The Board has also enlisted nationally recognized trainers to provide external expertise to both parole decision makers and agents to ensure the Board's adherence to evidenced based practices. Unfortunately, the DAG has been unable to provide any meaningful recommendations that should be used by the Board, as other outside experts and researchers have done.

The following constitute the Board's response to the report's findings:

Finding 1 – The Board's Inadequate Supervisory Oversight Could Lead to Parolees Not Being Adequately Supervised.

PBPP's Response - As one of the goals of its audit, the DAG stated that it wanted to verify that parole supervisors reviewed all required case files during quarterly case reviews. As is explained below, the DAG's methodology is flawed, and as a result the DAG's conclusion that the Board has inadequate supervisory oversight is simply not true.

The reasons why the Board does not agree with the methodology and conclusions are as follows.

A. Supervision Checklist Accountability Deficiencies

The DAG concludes that the Board had inadequate supervisory oversight of parole agent case files. DAG bases this premise on the erroneous notion that during a two month period of time in August and September of 2005 the Board could only provide 124 supervisory checklists² from a total of 241 requested. This conclusion is flawed, however, because the supervisory checklist is simply a training tool that supervisors use to train their agents on how to properly supervise their parolees and properly document their case files. The DAG states in its report that they "could not verify that parolees were properly supervised' because of a lack of checklists. This is inaccurate. While the Board understandably does not retain its training tool, it does keep

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² The supervisory case review checklist is merely a training tool used by a parole supervisor to train the agents under supervision to ensure that the respective agents have complete and proper documentation of a parolee's history in the case file. PBPP Procedure 4.01.19. The checklist allows the supervisor to give a yes or no answer to the following information so that the supervisor can go over this information with the agent in order to perfect the agent's record-keeping duties.

records of the actual supervisory documentation that documents the agent's interactions with the offender. Unfortunately, the DAG has chosen to ignore this critical fact.

The Board scrupulously exceeds national standards regarding agent case supervision. The Board's supervision procedures are based on the more than 200 field supervision standards developed by the American Correctional Association (ACA) for Adult Probation and Parole Field Services.³ In particular, according to ACA standard 3-3138, the field supervision plan must be reviewed with the offender on an as-needed basis, and at least once every six months, and adjusted in accordance with the offender's performance in the community. These changes are reviewed with the supervisor.

Further, the ACA standard 3-3139 requires that the levels of supervision should be reviewed at least every six months, with prompt reclassification, where warranted. This ensures that the offender is supervised at the appropriate level: increased supervision in response to higher risk and/or identified needs, and reduced supervision in recognition of successful adjustment and reduced risks to the community. This process contributes to the proper allocation of resources. (See attached ACA standards 3-3138 and 3-3139.)

The Board goes beyond these standards to require that a supervisor conduct quarterly case reviews with the parole agent.⁴ To assist the supervisor and the agent with this process, especially employees new to these positions, the Board implemented the Supervisor Case Review Checklist as a training tool. The checklist is not the appropriate document to review in order to determine if an offender has been supervised properly.

By looking at the wrong document, DAG chose to ignore the following information, explained to them by the PBPP, which demonstrates that:

- In alignment with ACA standards and Board procedures, supervision staff reassesses the level of supervision for each case every six months and submits an updated Supervision Plan/Report which must be reviewed and approved by the supervisor.⁵
- Board managers conduct annual supervision unit inspection visits, review any necessary corrective action plans, and retain highly detailed documents that confirm compliance and/or noncompliance with supervision requirements.⁶

³ American Correctional Association, Standards for Adult Probation and Parole Field Services, 3rd Edition. The ACA graded the Board to be 100% compliant in all categories during our re-accreditation audit last year. ACA standards regarding adult probation and parole are the national benchmark for the effective operation of a parole system. In fact, the Board is only 1 of 10 statewide probation and parole agencies in the United States that have attained this accreditation. In order to receive this accreditation, ACA auditors spent hours reviewing and evaluating the Board's practices and procedures.

⁴ The Board's supervisory oversight procedure provides that supervisors shall conduct quarterly case reviews. PBPP Procedure 4.01.19.

⁵ The Board's procedures require the agent to conduct a reassessment of the level of supervision every six months. PBPP Procedure 4.01.05. Supervision. Assessment and Supervision Plan.

⁶ See Board Staff Inspection Visit Procedures.

- The managers inspect agents' files to ensure that each file has a complete and accurate Supervision Plan/Report (PBPP-22) and accompanying Record of Interview (PBPP-259). Every parolee case file that has a record-keeping deficiency is noted.⁷
- The unit Supervisor assigns a completion due date, and the agent responsible is required to provide evidence that the discrepancy is resolved.⁸
- This extensive and comprehensive annual audit/inspection procedure of each supervision unit, determines whether or not the supervisor and the agents in the unit are in substantial compliance with the Board's policies and procedures.

In short, the DAG has ignored the supervisory documentation provided, relied upon the wrong documentation, and jumped to a conclusion based on reviewing a training tool rather than actual supervisory procedures documentation. As such, the Board must disagree with the DAG's findings on this point.

B. Case File Deficiencies

DAG next maintains that the Board allegedly did not maintain an adequate paper trail of interviews, supervision plans, and records of contact by parole agents. The DAG makes this erroneous assertion by mischaracterizing and misunderstanding critical information about the Board's record keeping. For instance, the DAG's conclusion that the "Record of Interview" documents were not reviewed by supervisors is clearly erroneous because in most cases the DAG auditors chose not to review the relevant documentation associated with documenting such interviews. Specifically, the Board's PBPP-259 (Record of Interview) is the form required to be used by agents for documenting contacts between agents and parolees. Yet inexplicably the DAG used a Board training tool -- the supervision checklist -- as its primary evidence that Board agents were allegedly insufficient in their documentation of parolee interviews.

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⁷Pursuant to Board policy, the Board's Bureau of Offender Reentry is responsible for auditing each supervision unit annually. PBPP Procedure 4.01.19. In conducting these audits, the Board's supervision staff verifies that the agent's files contain the following documentation for each parolee: Records of Interviews for the auditing period (PBPP-259), Face Sheet (PBPP-50), Special Conditions of Parole (PBPP-336), the Daily Supervision Report (PBPP-145), Parole Violation Warnings (PBPP-348), Initial/Annual/Semi-Annual Supervision Plans for the auditing period, and Supervision History Reports (PBPP 257-H). PBPP Procedure 4.01.19.

⁸ If a supervisor finds a discrepancy in an agent's parolee file, Board procedures provide that the supervisor must make note of this deficiency on a task list which informs the agent that the subject parole file is deficient and then outline the tasks that the agent must complete in order to ensure that the parole file is in compliance with Board standards. On the task list, the supervisor includes a due date for the agent to demonstrate to her supervisor that she has corrected the enumerated deficiencies and that the file is in full compliance with Board standards. PBPP Procedure 4.01.19.

With respect to the DAG's assertion that many of the PBPP-259 Record of Interview's had "brief narratives" and were illegible, the Board suggests that it is more likely that the auditors reviewing the materials did not understand the shorthand that agents are required to use in completing this form. Furthermore, as agreed upon by the DAG and the Board, all of the files that were made part of the audit were redacted in order to remove information that could identify the parolee in compliance with the Criminal History Records Information Act. 10 Therefore, the redaction of documents and agent shorthand are probably the two leading reasons why the DAG found the Records of Interviews to be brief and illegible in some cases.

With respect to the DAG's assertion that Board agents failed to meet the appropriate number of contacts with individual parolees, the Board contends that this was again another situation where the auditors were not reviewing the relevant document associated with documenting parolee contacts. The auditors mistakenly relied on the aforementioned training tool, the supervision case review checklist, in determining whether adequate contacts were made. Rather, the Board's PBPP-259 is the record required to be used by agents for documenting contacts between agents and parolees.

Of the twenty PBPP-259's that the DAG reviewed, the DAG found that in some cases agents did not obtain the appropriate number of collateral contacts. 11 As such, the Board will make missed collateral contacts a priority issue with supervisors and agents during subsequent staff inspection visits, as we are in full agreement with the DAG that these contacts are of paramount importance to the Board's supervision duties.

Since the termination of the audit period, as a result of observations made by the auditors when they did in fact review the PBPP-259, the Board is putting even greater focus on its staff inspection audits in order to identify administrative errors and missing information.

Finally, it must be noted that, contrary to the DAG's assertion, the Board has had a records retention and disposition schedule since 2004 which prohibits the destruction of internal documents before the expiration of the retention time period. For instance, Staff Inspection Result Reports have a retention period of 1 year from document origination. ¹² As the audit report indicates, at numerous times we informed DAG auditors that the Supervisor Case Review

⁹ The instructions for completing the PBPP-259 provide that the following symbols shall be used: Parolee/Probationer; C-Collateral; E-Employer; F-Field; H-Home; O-Office; T-Telephone; P/H - contact with Parolee/Probationer at approved residence; PC/F - contact with Parolee/Probationer and a collateral in the filed somewhere other than the approved residence or parole office; P/O – Parolee/Probationer contact at a parole office; PE/F – Parolee/Probationer and his/her employer.

¹⁰ The Criminal History Records Information Act ("CHRIA") provides for the collection and dissemination of intelligence, investigation, and treatment information known as "protected information." 18 Pa.C.S. § 9101. Specifically, CHRIA sets forth in pertinent part that investigative and treatment information shall not be disseminated to any department, agency or individual unless the department, agency or individual requesting the information is a criminal justice agency. 18 Pa.C.S. § 9106 (c)(4). The DAG is not a criminal justice agency as defined by the Act. 18 Pa.C.S. § 9102. See also Department of Auditor General v. Pennsylvania State Police, 844 A.2d 78 (Pa. Cmwlth.2004).

¹¹ It is important to note that these few missed contacts were limited to "collateral" contacts and not the more critical "face to face" contacts with the parolee. By further explanation, collateral contacts are not direct contacts with the parolee, but rather they are contacts with their home plan provider, employer, or family member. ¹² PBPP Records Retention and Disposition Schedule, page 14.

Checklist was established as a training tool. Since the Board considered it a training tool, and relevant documentation exists regarding the daily supervision of a parolee, the Board did not previously find it necessary to maintain these checklists. However, out of an abundance of caution in response to the DAG's concerns, supervisors are now mandated to retain a copy of each completed case review checklist until the next staff inspection.¹³

Unfortunately, the minor improvements we have made as a result of the DAG's conclusions do not mask the shortcomings of its conclusions. Its conclusions are based on ascribing a purpose to a set of documents that does not exist and ignoring other more relevant documents and procedures altogether.

<u>Auditors' Conclusion:</u> With regard to the Supervision Case Review Checklist (checklist) accountability deficiencies, the board asserts that our conclusion regarding the adequacy of supervisory oversight of parole agents is "flawed" because we relied on the checklist, which is only a "training tool." We disagree with the board. This checklist was developed by the board to correct deficiencies noted in a prior audit performed by the Department of the Auditor General. We are puzzled by the board's assertion that this was created to be a training tool. As noted in the board's response to our prior audit and as documented in the board's current written policy, entitled "Supervisory Oversight," the checklist is to be utilized to document a supervisor's review of parolee cases. There is no mention of a "training tool" in the board's manual. It was only when we disclosed our audit deficiencies to the board, indicating that numerous checklists were missing, did management state that it was only a training tool. Our audit test work was performed to determine if the board was complying with its own policies and procedures. As noted in the finding, employees should be following prescribed procedures in conducting their day to day job duties.

Furthermore, the board indicated that "DAG states in its report that they could not verify that parolees were properly supervised." This is incorrect; we state that we "could not verify if <u>agents</u> were properly supervised," which was our audit objective.

The board asserts that we chose to ignore various documents that it believes demonstrate supervisory oversight, such as the annual audits, task lists, and the supervision plans. The board emphasizes that we chose to ignore the six-month supervision plan, which it purports to be the correct document. However, this is simply not true. As noted in the finding, we examined 40 supervision plans and found that 69 percent were problematic, including 11 supervision plans that could not be located.

The board also states that as part of the supervisory oversight, we chose to ignore the accompanying task list document, which the supervisor is supposed to complete for corrective action regarding deficiencies noted on the supervisor checklists. We again disagree. During the audit, we identified that the accompanying task lists were missing for a number of test items we examined. As indicated throughout the finding, the lack of required comments for the "no" responses on the checklists were supposed to be documented on the task lists. Therefore, we believe that this document is not being properly utilized.

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¹³ PBPP Procedure 4.01.19 (amended January 14, 2008).

Additionally, it is the board's contention that we chose to ignore its internal annual audit process. This is also not true. Although we did not take issue with the board's internal audit process in the audit report, we did examine a number of audits. We examined 15 internal annual audit reports and additional supporting documentation and found the results of the board's audits to closely mirror the results we disclose in this finding. For example, one of the audit summaries we reviewed stated:

Case files and field book inspections indicate high levels of non-compliance in some of the standards inspected. 89% of the case files either did not have properly completed supervision plans or did not have any at all; 32% of the cases did not have a current risk assessment completed; 26% of the case files did not contain any Record of Interviews, and 30% of the case files were not within manual and ACA compliance.

With regard to the case file deficiencies, the board's response states, "DAG used a Board training tool – the supervision checklist – as its primary evidence that the board agents were allegedly insufficient in their documentation of parolee interviews." The board indicates that the correct document to examine for parolee interviews is the "Record of Interview" (PBPP-259). We are confused by the board's response. As part of our test work, we examined 40 Record of Interview documents to determine if the agent made the appropriate number of contacts and adequately documented the contacts as required by the board's written policy and procedures. The board again asserts that we ignored the correct document, the Record of Interview, in making our assessments regarding contacts. However, contrary to the board's assertions, we requested the Record of Interview for all 40 cases and examined the actual Record of Interview when assessing contacts. Furthermore, the board is acknowledging in its response that we did review some Records of Interview (PBPP-259) and we found instances where parole agents failed to obtain the appropriate number of collateral contacts. Although the board chose not to comment on the lack of face-to-face contacts that we also found, we applaud the board's comments that missed contacts will be a priority in its future staff inspection visits.

The board believes that shorthand techniques and the redaction of documents led the auditors to misinterpret the sufficiency and legibility of the Record of Interview documents. We disagree that we were unable to distinguish the difference between shorthand and illegible/insufficient information. As noted in the finding, we identified missing notations (e.g., start and stop times), insufficient narratives, and illegible handwriting, all of which are required by the board's written policy. We consider the board's response in this area misleading and unfortunate because the Record of Interview, which we tested, is a key tool used by parole agents to document their ongoing work, such as contacts, treatment tracking, urinalysis, and sanctions. As a result, we are particularly concerned that the board has chosen to disregard our findings and recommendations by identifying the deficiencies in the finding as "administrative errors." We consider the identified deficiencies to be significant.

As noted in the finding, a number of the checklists and the large majority of senior management documentation, as required by policy, were not available for our review. Of the 241 checklists, 117 were "unavailable" for our review. Also, for five districts, we requested the documentation to verify that the deputy district directors, district directors, and regional directors were performing their duties as required by the oversight policy. In response to our request, we received limited documentation of the district director reviews in two of five districts, and received no evidence of the five requested reviews required to be performed by the regional directors. When we asked the board for an explanation, management indicated that there is "no requirement to maintain these documents for any length of time." We take exception to this explanation. The board has the responsibility of being accountable, and, as such, sufficient documentation to demonstrate its efforts should be maintained for an adequate period of time. However, we are confused with the board's written response. The board indicates that it has a retention policy that has been in place since 2004. However, as noted in the finding, nothing has been provided to us to substantiate that the board had a retention policy. A majority of the documentation requested (117 checklists and the majority of senior management reviews) as part of the audit had not been provided.

During the exit conference on March 2, 2009, the Chairman objected to all of the findings contained in our report, stressing that the board would provide our auditors with documentation that would refute our findings. As a result, we agreed to review any documentation they would provide prior to making our final conclusions. We reviewed all of the documentation that the board provided and none of the documentation refuted our original findings in our audit report.

The Chairman also stressed that it was a failure on our part that we did not speak with Dr. Goldkamp, and examine the two reports he published regarding the process by which Pennsylvania paroles violent offenders. Although the board did not indicate the perceived importance of speaking with Dr. Goldkamp or reviewing his reports during our audit, we did review his reports at that time. Our conclusions were that the reports did not pertain to our audit objectives. However, due to the Chairman's concerns we chose to contact Dr. Goldkamp to gain a better understanding of his study and how it might impact our audit objectives. During the interview with Dr. Goldkamp, he confirmed that the first two sections of his ongoing report, released in October and December 2008, respectively, were limited to the pre-release of parolees and therefore, did not relate to our audit. The next phase of his ongoing study will address post release, although much of this work is in the planning phases, he expressly stated that his review is different from a government audit in both focus and detail and his final report will not be as narrowly focused and will not contain the amount of detail as a government audit. Also, he indicated that the study will include analysis of electronic data, not a detail review of case files.

Additionally, based on our test results and an overall risk assessment of high in Philadelphia we attempted to obtain and review a sample of recent annual supervision unit audits conducted by the board to evaluate if the board has made improvements in the areas that were identified during our audit. We had examined a number of the board's annual audit reports from 2005 and 2006 and found that the boards internal audit staff had results similar to the findings in our audit. However, in response to our request for copies of annual audit reports, board management provided a different sample of audit reports for us to review. This is just another example of perpetual challenges/delays encountered with the board. Furthermore, we chose to review the reports and found that the board identified weaknesses similar to those in Finding No. 1 of our audit report. Therefore, our conclusions and recommendations remain unchanged.

Despite our best efforts to resolve challenges and productively work with the board, we are disappointed that the board so adamantly disagrees with the results and recommendations presented in Finding No. 1.

Finding 2 – Parole Agents Failed to Timely React to Missing Parolees, and Once Declared Absconded, Failed to Attempt to Locate Them as Required.

PBPP's Response - DAG asserts that the Board has failed to find absconders. Unfortunately, DAG's methodology is so flawed that it renders its entire discussion on this issue irrelevant.

The problem with DAG's methodology is as follows: After looking at a sample of only 24 absconder files out of 1,659 absconder case files, the DAG makes the assertion that Board agents have failed to timely react and locate missing and absconding parolees. Further, the DAG excluded 10 of those 24 files because the absconding period by the parolee was less than three months. As such, the DAG reached its conclusion on a sample of only 14 absconder files, or less than 1% of the total number of absconders. Additionally, in making its assertion that agents failed to timely react when parolees absconded, the DAG – in its nearly two and a half years of work — can find only 3 instances where agents did not meet this standard. Therefore, it is evident that the DAG's process for determining a poor absconder recovery record is not based on credible and fair sampling methods.

Instead, a better methodology would have been to look at the average number of days an absconder was at large starting from the beginning of the audit period until the end of the audit period. For instance, in 2003, the average number of days an absconder was at large was 206 days. Four years later, in 2007, the average number declined to 121 days. ¹⁵ This type of information was, however, inexplicably overlooked by the auditors.

A proper methodological review would have shown the undeniable truth: the Board's absconder rate has dropped dramatically in the five years during the DAG's audit period. In June 2001, the Board's absconder rate was 6.5% of all parolees. Beginning in the fall of 2002, a special unit of Philadelphia parole agents partnered with the U.S. Marshals Service to create the Fugitive Apprehension Search Team (FAST). The sole mission of the FAST team is to apprehend fugitives and absconders. Since its inception, the FAST model has expanded to other parts of the state to focus specifically on apprehending absconders. Through these efforts, in May of 2008, the Board's absconder rate has fallen to only 4.2%, less than half the national average. Furthermore, between 2002 and 2008, the total number of absconders has declined by 20% from 1,681 to 1,353 while the Board's supervision population has substantially increased over the same amount of time – from 24,753 parolees to 32,097 parolees. As such, the Board takes exception to the DAG's finding on this point because the evidence shows that the Board has succeeded, rather than failed, to find and apprehend the vast majority of absconding parolees.

¹⁴ The DAG failed to indicate whether or not the reason why these 10 parolees absconded for less than three months was because of agent efforts to find, locate and apprehend them.

¹⁵ This is a decline of 41%.

¹⁶ The nationwide average of parole absconders is between 10% and 11%.

<u>Auditors' Conclusion:</u> The board states, "DAG asserts that the Board has failed to find absconders." We disagree with this statement. We do not state, nor was it our objective to determine, if the board failed to find absconders. The board has failed to address the facts and recommendations presented in the finding. Our audit procedures examined whether parole agents responded timely in determining absconder delinquency, and, once individuals were declared absconded, if the board performed, at a minimum, at least one attempt per quarter to locate the absconders as required by the board's policy.

The board takes issue with our sample size of 24 absconder case files out of 1,659. The board believes that we did not adhere to generally accepted government auditing standards (GAGAS) due to our sample size. At the exit conference, the chairman indicated that she was personally available to consult with the auditors to agree on an appropriate sample size and methodology and suggested that we should have spoken to her for guidance during the audit. Additionally, the chairman indicated that we should have tested 100 percent of the absconder files. We responded at the exit conference that a 100 percent test was not feasible or efficient. Furthermore, for the auditors to consult with the auditee on a sampling methodology and approach would have impaired our independence, thus violating GAGAS. We are confident that our sampling techniques were performed and documented in accordance with GAGAS.

The board also asserts that we improperly excluded 10 of the 24 cases from our sample. Our test work included verifying the continued attempts by the parole agent to locate the absconder. We tested 14 cases to determine if the parole agents continued to attempt to locate the absconder on a quarterly basis as required. We excluded the 10 cases from our test work because these parolees had absconded for less than three months (quarter) prior to June 30, 2006, which was the cutoff date of our test. If we would have adhered to the chairman's recommendation at the exit conference and included the 10 cases in our results, thereby overlooking the quarterly requirement, we would have concluded that seven of the 10 were deficient.

Our test results were based on the board's written policy and procedures, which we obtained during our audit. As noted in the finding, the parole agents' work was in noncompliance with the board's policy and procedures.

At the exit conference the chairman indicated that the board would provide us with documentation to refute our finding. We reviewed the additional information provided and concluded that no changes to the finding were necessary. Included in the information provided was a 2008 Absconder Report that the board asserts is evidence that it reduced the absconder rate from prior years. As noted in the finding we found deficiencies with respect to parole agents not timely reacting to missing parolees. We did not audit or address absconder rates.

Finding 3 – The Board Failed to Adequately Monitor Rehabilitation Treatment that Parolees are Required to Attend.

PBPP's Response. The DAG asserts that the Board has failed to adequately monitor the treatment of the parolees it supervises. The Board, however, disagrees with this conclusion because the DAG is referencing a system that we do not use and they lack an understanding of the application we do use.

First, the DAG points to the Board's Parole Follow-Up System as not being an effective tool to monitor parolee treatment. The Parole Follow-Up System collates and displays information from several data sources, but was not designed to and is not used as a mechanism for tracking parolee treatment. The DAG ascribes a purpose to this application which simply does not exist, which again renders its conclusions inaccurate. To the extent that the DAG is referring to the Board's Treatment Tracking Application, the Board would first note that this application became operational in 2005 – only one year prior to the end of the audit period – which is not a sufficient amount of time to assess its efficacy. Moreover, the primary purpose of the Treatment Tracking Application is not to monitor offender compliance with treatment. Instead, this application is simply a data collection tool to evaluate treatment programs.

Second, the DAG claims that the Board has inadequate policies and procedures for documenting treatment. The Board, however, disagrees with this conclusion as the Board has a comprehensive procedure aimed at tracking and monitoring parolees in treatment. Board policy requires that parole agents document the status of treatment referrals as well as any noncompliance that a parolee has with any special conditions imposed, including conditions requiring treatment. Further, parole agents are able to track parolees compliance with treatment using a series of case file documents: (1) treatment provider written records, (2) the Record of Interview (PBPP-259), which details the parolees referral to treatment, attendance at the treatment program, and either successful or unsuccessful completion of the treatment program; (3) the supervision plan and six month case reassessments which describes the parolee's progress during the treatment period; and (4) review of the case file by the parole agent's supervisor, Deputy District Director, District Director, as well as staff inspection visits. Therefore, the Board has a multi-layered policy and procedure for documenting parolee treatment.

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¹⁷ PBPP Procedure 4.01.04.

Third, the DAG asserts that the Board lacks "centralized accountability of treatment for offenders." The Board challenges the validity of this assertion as the Board has a centralized database to track treatment data. Additionally, with the incorporation of specialized parole agents know as Assessment Sanctioning and Community Resource Agent (ASCRA)¹⁸, treatment tracking is more accurate than it has ever been in the Board's history. Finally, the Bureau of Offender Reentry provides supervisory oversight of the ASCRA agents to ensure that treatment tracking is both accurate and timely. Therefore, with the incorporation of ASCRA agents and the oversight of the Bureau of Offender Reentry, the Board contends that it does in fact have centralized accountability of treatment for offenders it supervises.

In conclusion, the DAG chooses to ignore the records of interview, the copies of treatment provider records, and the supervision plan and case reassessments as well as the case file reviews by supervisors. These records are evidence of the Board's compliance with its procedures and the recent improvements to the parole system.

Auditors' Conclusion: The board asserts that we are referencing a system that was not used and that we lacked an adequate understanding of the application the board uses to monitor rehabilitation treatment. In January 2008, we requested a meeting with the board to determine how it monitors parolee rehabilitation treatment. The board's audit coordinator directed us to speak with the executive director of the board. In the meeting, the executive director presented the tracking system as the tool used by the board to monitor and track offender treatment. However, we determined, through documentation requests and subsequent interviews, that the data from this system was incomplete due to the insufficient complement of clerical staff required to perform ongoing data entry. When we brought this deficiency to the board's attention, management indicated that the data in this system could not be relied on. Furthermore, as explained in the finding, board management indicated that the documentation for treatment is maintained in the case file and may vary from case to case, so one might have to review the entire case file to determine the details of parolee rehabilitation treatment. As noted in the finding, based on its policies and procedures, as well as a review of documentation and explanation provided by management, the board's system is not an effective monitoring tool for parolee rehabilitation treatment. The policies and procedures are insufficient and the board lacks centralized accountability for documenting and monitoring treatment that parolees are required to attend.

At the exit conference the chairman indicated that the board made improvements to the system and would provide us with documentation to refute our finding. To date, no significant evidence or support was provided to change our conclusions.

agents evaluate these programs utilizing appropriate program assessment instruments, in order to determine compliance with effective correctional principles. PBPP Procedure 1.6 (effective April 13, 2008).

¹⁸ The core job duties of ASCRA agents are to ensure that the Board policy of progressive, corrective, and rehabilitative management of parolees is achieved consistently across all parole districts, with the objective of managing parolees in the communities as long as they can safely and effectively be supervised. ASCRA agents, with the assistance of Parole Managers from the Bureau of Offender Reentry, review a predefined percentage of case files from each district for performance measurement purposes on a semi-annual basis. ASCRA agents also research and analyze existing general and specialized community programs, including treatment programs. ASCRA

Finding 4 – We Were Unable to Validate the Board's Assertions on the Ratio of Cases Per Parole Agent Due to the Board's Failure to Provide Requested Information

PBPP's Response. The Board does not understand DAG's complaint. At all times we have been forthcoming and timely with requested information. The Board originally provided caseload information, along with other requested information, in 2006 and 2007. On December 30, 2008, the Board received an additional request for specific information regarding caseloads. On January 16, 2009, a list was provided of parole agent complement for 2006 and 2008, job descriptions, employee evaluation forms and a thorough explanation of specialty agent units, our workload model and how caseload ratios result from the workload.

The DAG's finding shows a basic unwillingness to review and understand the information provided regarding workload and caseload. Their recommendation that the Board "take all necessary action to achieve and maintain case to staff ratios at sufficient levels to ensure that offenders are adequately supervised and receiving necessary services" is exactly what we are and have been doing.

The Board uses a workload model developed by the National Institute of Corrections (NIC), which is based on the number of agent hours available to work. The Board determines workload on a monthly basis with every agent having a capacity of 131 working hours. The workload formula factors in an agent's responsibility to do investigations, appear at hearings, transport offenders, and complete documentation on offenders as well as how many parolee cases to supervise. Each task and type of case requires a different amount of time.

The Board develops caseload ratios based on recommendations of the APPA. ¹⁹ DAG misstates APPA's recommendation²⁰. The APPA did not and does not recommend a blanket 50:1 ratio for all caseloads as stated by the DAG. The APPA developed caseload recommendations based on the level of risk and the type of case under supervision – which are some of the factors included in the workload model. The APPA recommended caseload for medium and maximum supervision cases is 50:1; and 200:1 for low risk and probation cases. It is not the recommendation of the APPA, nor is it best practices in parole, to supervise all offenders at the same level regardless of risk, type of offense or where they are located, i.e. a community corrections center versus a home. Since the Board's supervised population is a mix of low, medium and maximum supervision levels, different types of cases and spread across vastly different geographic areas, the caseload must be considered in context of the workload.

¹⁹ Caseload Standards for Probation and Parole, American Probation and Parole Association, Sept. 2006.

²⁰ The Board informed the DAG that Dr. William Burrell is the national expert who authored the recommended caseload standards of the American Probation and Parole Association (APPA). Dr. Burrell is currently working with Dr. Goldkamp to review the Board's workload formula and caseload standards. The DAG did not contact Dr. Burrell to assist them with their review. The Board finds this unfortunate as Dr. Burrell's expertise would have helped them to understand the complex subject matter of workload and caseload.

Workload and caseload are dynamic, not static; changing as parolees are released, detained, or finish their sentences. Workloads are monitored by supervisors on a regular basis and adjusted as needed. A snapshot of an agent's workload at a particular point in time does not adequately reflect the workload equalization efforts that are underway. Supervisors adjust the workload for extended periods of absence.

The allegation that the Board's workload formula places "overwhelming" demands on field agents is unfounded. The Board's workload formula is standardized and applied equally to all supervised cases across the Commonwealth. And it was developed with input from parole agents – those individuals who actually do the work. The job expectations of field agents in the Philadelphia District are no different than those expected of field agents in the Board's other nine districts.

The Board explained in great length to the DAG that attrition of staff and long-term leaves of absence for military or medical reasons sometimes result in workloads or caseloads spiking above acceptable levels. We have been proactively addressing these issues by working with the Office of Administration and the Civil Service Commission to attract more qualified candidates and retain experienced parole agents. To this end, we have hired agent annuitants and created agent wage positions to provide agent support, requested a salary differential for agents working in the Philadelphia District, and required that all agents must remain assigned within the district that they are initially hired for their first two years.

We also informed the DAG that we do not have an IT application that will allow us to print out the caseloads and workloads for individual units or agents historically. Attached is a page from the monthly reports on our website for June 2006 and June 2008, stating the current month population, number of agents, the total workload and the average workload per agent. However, we also offer the enclosed chart prepared last June to assist in your review. The chart provides the overall caseload and workload by district as of June 30, 2008. At the authorized complement level the overall caseload ratio would be 1:63. These overall caseload ratios are within the recommended national standards.

Auditors' Conclusion: As indicated in the finding, we were unable to independently validate the ratio of cases per parole agent due to the board's failure to provide documentation. Our audit approach was to determine whether the board's reporting of case-to-staff ratios was accurate and sufficient. During the audit, we received information that the general field agent caseloads in the Philadelphia office were unreasonable and the board was misrepresenting this information. As a result, we requested specific documentation from the board to evaluate the caseloads of the staff in Philadelphia. The board asserts that "at all times we [the board] have been forthcoming and timely with requested information." We disagree with the board. We requested specific information related to Philadelphia, including the parole agents' names, phone numbers, and caseloads. We explained that this information was needed to validate the board's assertions regarding the reported caseloads. At that time, the chairman assured us during two conference calls and by e-mail that we would receive all of the documentation that we requested by a particular date. However, we did not receive the parole agents' names, phone numbers, e-mail addresses, or caseload data. Although the board eventually provided a spreadsheet of caseload data subsequent to the exit conference, the board indicated that the parole agents' names, phone numbers, and e-mail addresses would not be provided due to confidentiality concerns that we believe to have been unfounded.

The Board also states that we made an inaccurate reference to APPA standards having a blanket 50:1 ratio for all cases. We disagree with the board. The reference in the finding to the 50:1 caseload ratio was taken directly from the board's own budget report for the 2007-2008 fiscal year as an effective level in other states and was used to support the board's proposed funding increases. We understand that, depending on the nature of the cases and offenders, a reasonable caseload may vary. Therefore, we do not take issue with respect to APPA standards presented in the board's response. However, as indicated in the finding, when we inquired with management regarding staffing levels, the board provided us with its 2007-2008 budget report as evidence of its objective of striving to achieve an overall average caseload ratio of 50:1.

PBPP's [Overall] Conclusion

The DAG's audit is unreliable because of its multiple failures: failure to reference, acknowledge or consult with a national probation and parole expert; failure to examine the appropriate documents and procedures that demonstrate our document retention, supervision policies, and attention to finding absconders; failure to use appropriate and reliable methodology in examining absconders; and, ultimately failure to provide recommendations that if implemented would actually improve public safety.

Parole supervision is difficult and genuinely challenging work, and independent reviews help us improve our system. However, the Board is stunned and ultimately disappointed that in some cases the DAG did not review the appropriate documents that evidence proper internal controls, and in other cases simply ignored information and documentation we presented it. Moreover, the DAG's methodology and sampling would not be in accordance with government auditing standards. This is a lost opportunity because DAG has failed to provide meaningful recommendations on how we can better protect the public.

<u>Auditors' Conclusion:</u> Despite the board's assertions, our audit was conducted in accordance with the applicable generally accepted government auditing standards (GAGAS) issued by the Comptroller General of the United States. We believe that the evidence obtained during the course of our audit provides a reasonable basis for our findings and conclusions, based on our audit objectives. Furthermore, in accordance with the provisions referenced as part of GAGAS, our auditors apply the highest ethical principles when conducting an audit, including taking on only work that each auditor is competent to perform, performing high-quality work, and following the applicable standards cited in the audit report. The auditors assigned to perform this audit have a combined 75 years of auditing experience and possess extensive education and training in the fields of accounting, fraud, and government auditing practices. Therefore, the board's claim that we violated audit standards is without merit.

As stated in detail in our report, our methodology is sound and we repeatedly communicated our audit objectives to the board throughout the course of the audit. According to board protocol, the board approved all interviews because it wanted to ensure that we interviewed the agency experts. We also reviewed documentation and recommendations from outside authorities, as suggested by the board, including the completed sections of Dr. John S. Goldkamp's ongoing study on the process by which Pennsylvania paroles violent offenders. Our auditors spoke to Dr. Goldkamp on two separate occasions. However, certain documentation did not pertain to our audit objectives. Furthermore, our auditors were unable to evaluate certain allegations pertaining to caseload ratios because the board would not supply requested information.

We are confident that our report reflects a fair and accurate assessment of the Pennsylvania Board of Probation and Parole's supervision and monitoring of parolees. While we recognize that the challenges faced by criminal justice agencies are numerous, it is our hope that these recommendations will heighten the safety of both the residents of Pennsylvania and the various law enforcement officials entrusted with protecting our communities.

Additional charts and graphs included with the board's response:

District Office	Parolee Population	% of Statewide Population	Assigned Complement	Assigned Complement Caseload (1: Ratio ¹)	Filled Complement	Filed Complement Caseload (1: Ratio ¹)	96 of Statewide Agents	Average Workload
Allentown	3,578	1 196	52	69	50	72	1196	125
Altoona	1,300	496	19	68	20	65	496	127
Chester	2,504	896	37	68	37	68	896	112
Erie	1,443	496	77.	66	77	66	596	120
Harrisburg	4,162	1396	58	72	58	72	13%	124
Mercer	2,886	996	48	67	38	76	896	142
Philadelphia	9,410	296	13Z	71	122	77	27%	123
Pittsburgh	4,226	1396	66	64	63	67	14%	121
Scranton	1,658	596	T	61	27	61	696	114
W illiamsport	930	3%	15	62	16	58	496	109
	32,097	100%	471	68	453	71	100%	

Table 1
WORKLOAD AND POPULATION CHANGES BY REGION / DISTRICT
June 2006

Julie 2000									
	Beginning	Current	Fiscal		De	etions	Number		
REGION / DISTRICT	Fiscal Yr1	Month	YTD		Recommits/	Other	of	Average	Total
, . <u></u>	July 2005	Population	Index	Additions	Revocations	Deletions	Agents ²	Workload	Workload
CHESTER	2,366	2,291	97	71	28	40	32	133	4,252
PHILADELPHIA	8,674	8,850	102	355	165	205	119	131	15,600
EASTERN REGION	11,040	11,141	101	426	193	245	151	131	19,853
ALLENTOWN	3,017	3,254	108	165	40	62	40	142	5,681
HARRISBURG	3,669	3,752	102	162	72	60	46	149	6,841
SCRANTON	1,444	1,556	108	66	39	51	22	137	3,011
WILLIAMSPORT	830	828	100	33	17	26	14	117	1,635
CENTRAL REGION	8,960	9,390	105	426	168	199	122	141	17,168
ALTOONA	1,044	1,058	101	39	21	22	16	135	2,157
MERCER	2,369	2,481	105	117	44	90	37	130	4,801
ERIE	1,135	1,217	107	53	45	28	18	131	2,361
PITTSBURGH	3,824	3,856	101	155	71	65	60	121	7,246
WESTERN REGION	8,372	8,612	103	364	181	205	131	126	16,564
TOTAL Supervised	28,372	29,143	103	1,216	542	649	404	133	53,585

 1 effective June 30
 2 Filled agent positions

 PA Offenders in Other States
 2,659
 2,752
 103
 50
 9
 31

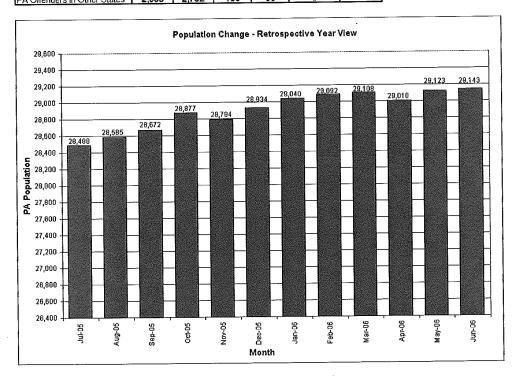
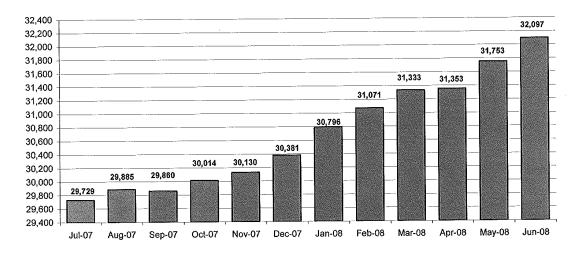


Table 1
WORKLOAD AND POPULATION CHANGES BY REGION / DISTRICT
June 2008

			- u	.,0 2000					
	Beginning	ing Current Fiscal			Deletions		Number		
REGION / DISTRICT	Fiscal Yr1	Month	YTD		Recommits/	Other	of	Average	Total
	July 2007	Population	Index	Additions	Revocations	Deletions	Agents ²	Workload	Workload
CHESTER	2,307	2,504	109	94	17	47	37	112	4,128
PHILADELPHIA	8,776	9,410	107	382	92	185	122	123	15,034
EASTERN REGION	11,083	11,914	107	476	109	232	159	121	19,161
ALLENTOWN	3,399	3,578	105	179	38	90	50	125	6,251
HARRISBURG	3,792	4,162	110	161	42	75	58	124	7,201
SCRANTON	1,520	1,658	109	107	24	53	27	114	3,078
WILLIAMSPORT	837	930	111	37	17	30	16	109	1,748
CENTRAL REGION	9,548	10,328	108	484	121	248	151	121	18,278
ALTOONA	1,124	1,300	116	58	21	24	20	127	2,537
MERCER	2,611	2,886	111	169	56	108	38	142	5,378
ERIE	1,294	1,443	112	72	32	38	22	120	2,640
PITTSBURGH	3,908	4,226	108	212	44	97	63	121	7,651
WESTERN REGION	8,937	9,855	110	511	153	267	143	127	18,206
TOTAL Supervised	29,568	32,097	109	1,471	383	747	453	123	55,645
	effective June 3	80					² Filled agent p	ositions	
PA Offenders in Other States	2.672	2,884	108	66	22	12			

•The average caseload per agent in June was 71.

Population - Retrospective Year View



Section A: Probation and Parole Agencies

3-3136

(Ref. 2-3114)

Consistent with court or parole authority requirements, the field officer and the offender jointly develop objectives and supervision plans. This plan includes whichever of the following is most appropriate for the supervision of the individual offender: field contacts, office contact, or collateral contacts. The offender receives a copy of the plan.

COMMENT:

Planning that incorporates the needs, problems, capabilities, limitations, and the participation of the offender provides a positive framework for the period of supervision, such as reporting and testing requirements, complying with regular and special conditions of probation/parole, and so forth.

3-3137

(Ref. 2-3115)

Written policy, procedure, and practice provide that when specific services ordered by the court or releasing authority are not available, the field staff should return the case to the court or releasing authority for further dispositional consideration.

COMMENT:

Offenders often are subject to discriminatory treatment by noncorrectional agencies and are prevented from participating in service programs available to citizens. If access to ordered services is not being provided to the offender, the field office should so inform the releasing authority.

3-3138

(Ref. 2-3116)

The field supervision plan is reviewed with the offender on an as-needed basis and adjusted in accordance with the offender's performance in the community.

COMMENT:

The agency's supervision system should include provisions for the field officer to review with the offender the adjustment and/or progress the offender is making and to revise the supervision plan and level of supervision, as needed. This review should take place on an as-needed basis, but no less often than once every six months. Changes in the supervision plan are reviewed with the field officer's supervisor.

3-3139

(Ref. 2-3120)

Written policy, procedure, and practice governing community supervision provides for review of levels of supervision at least every six months, with prompt reclassification, where warranted.

COMMENT:

A structured review process ensures the appropriate level of supervision for the offender, increased supervision in response to higher risk and/or identified needs, and reduced supervision in recognition of successful adjustment and reduced risks to the community. This process contributes to the proper allocation of resources.

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