

# PERFORMANCE AUDIT

---

## State Correctional Institution at Retreat

---

October 2016



Commonwealth of Pennsylvania  
Department of the Auditor General

Eugene A. DePasquale • Auditor General

This page intentionally left blank



**Commonwealth of Pennsylvania  
Department of the Auditor General  
Harrisburg, PA 17120-0018  
Facebook: Pennsylvania Auditor General  
Twitter: @PAAuditorGen  
www.PaAuditor.gov**

**EUGENE A. DePASQUALE  
AUDITOR GENERAL**

October 26, 2016

The Honorable Tom Wolf  
Governor  
Commonwealth of Pennsylvania  
Harrisburg, PA 17120

Dear Governor Wolf:

This report contains the results of the Department of the Auditor General's performance audit of the Department of Corrections' (Department) State Correctional Institution at Retreat (SCI Retreat). Unless otherwise noted, this audit covered the period July 1, 2014, through May 11, 2016, with updates as necessary through the report's release. This audit was conducted under the authority of Section 402 of The Fiscal Code, 72 P.S § 402, and in accordance with applicable generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our finding and conclusions based on our audit objective. We believe that the evidence obtained provides a reasonable basis for our finding and conclusions based on our audit objective.

We performed this audit to determine whether SCI Retreat ensures that correct medications are timely and appropriately dispensed to inmates, including inmates transferring into SCI Retreat, and that inmates take the medication as prescribed. We found that although SCI Retreat had adequate procedures in place to properly dispense medication to inmates and that no delays were identified in providing medications to inmates transferring into the facility, SCI Retreat needs to improve oversight and documentation of its process of dispensing medications to inmates. Specifically, we found several issues with non-compliance with Department policy, including that nurses did not always document when inmates did not take their prescribed medication and that nursing staff failed to adequately monitor inmates' medication records to ensure that medical providers were timely notified as required. We offer six recommendations to alleviate these deficiencies. The Department indicated that it is in agreement with the finding and concurs with most of the recommendations.

The Honorable Tom Wolf

October 26, 2016

Page 2

We also conducted procedures to determine the status of the implementation of corrective action to address our nine prior audit findings and recommendations as presented in the audit report released on November 3, 2010. We found that five prior audit findings were resolved, two prior audit findings were partially resolved, and two prior audit findings remain unresolved. We offer nine recommendations to address the remaining deficiencies. The Department indicated that it has implemented corrective measures to address the issues noted in the status of prior audit findings.

In closing, I want to thank the management and staff of SCI Retreat and the Department for their cooperation and assistance during the audit. I am encouraged by the Department/SCI Retreat's recent efforts to correct these deficiencies. We will follow up at the appropriate time to determine whether and to what extent all recommendations have been implemented.

Sincerely,

A handwritten signature in black ink, appearing to read "Eugene A. DePasquale". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Eugene A. DePasquale  
Auditor General

**State Correctional Institution at  
Retreat**

---

**Table  
of  
Contents**

<b>Results in Brief</b>	ii
<b>Background</b>	1
<b>Finding One</b> – SCI Retreat needs to improve oversight and documentation of its process of dispensing medication to inmates.	5
<b>Recommendations</b>	13
<b>Status of Prior Audit Findings</b>	14
<b>Agency’s Response and Auditors’ Conclusions</b>	33
<b>Appendix A</b> – <i>Objective, Scope, and Methodology</i>	40
<b>Appendix B</b> – <i>Audit Report Distribution List</i>	50

**State Correctional Institution at  
Retreat**

---

## Results in Brief

---

The purpose of this report is to communicate the results of our performance audit of the Pennsylvania Department of Corrections' (Department) State Correctional Institution at Retreat (SCI Retreat). Our objective was to determine whether SCI Retreat ensures that correct medications are timely and appropriately dispensed to inmates, including inmates transferring into SCI Retreat, and that inmates take the medication as prescribed. We also conducted procedures to determine the status of the implementation of our prior audit report findings and recommendations that were issued in our prior audit report of SCI Retreat dated November 3, 2010.

Our audit found that SCI Retreat needs to improve oversight and documentation of its process of dispensing medication to inmates. Although we found that SCI Retreat has adequate procedures in place to properly dispense medication to inmates and no delays were identified in providing medications to inmates transferring into SCI Retreat, we also identified several non-compliance issues surrounding this process.

Specifically, we found that nurses did not always document in the electronic medication administration records (eMAR) when inmates did not take their prescribed medication; nursing staff failed to adequately monitor inmates' medication records to ensure that medical providers were timely notified as required; SCI Retreat could not provide more than 800 emails to support that doctors were notified when inmates did not take their prescribed medication; medical staff failed to have inmates sign a medical release form when they refused medication; and SCI Retreat's Corrections Health Care Administrator (CHCA) did not perform a daily review of inmates' medication compliance reports as required.

Our audit offers six recommendations to improve this process. Specifically, we recommended that SCI Retreat monitor to ensure that nurses document a nurses' note when medications are missed; develop and implement procedures for nurses to review medications missed by inmates to ensure that medication non-compliant inmates are timely identified and that medical providers are notified; instruct nurses to require an inmate who refuses medication to sign a medical release form; monitor to ensure that medical release forms are initiated and signed when required; and ensure that the CHCA or a designee who is not involved in the initial identification process reviews the eMAR medication compliance reports on a daily basis and follow up with medical providers regarding non-compliant inmates.

As a result of our procedures for determining the status of our nine prior audit findings, we concluded that SCI Retreat management satisfactorily resolved five prior findings, partially resolved two prior findings, and two prior findings remain unresolved. SCI Retreat resolved the prior findings pertaining to monitoring the vending contract, monitoring warehouse

**State Correctional Institution at  
Retreat**

---

inventory adjustments, conducting an annual physical inventory or monthly spot-checks by independent personnel, ensuring the correct payment of fuel card bills, and monitoring in-house bulk fuel purchases. SCI Retreat partially resolved the prior finding involving work orders and preventive maintenance and the prior finding related to personnel information. SCI Retreat did not resolve the two prior findings relating to completing automotive activity reports and paying employees for personal mileage without proper documentation.

Department/SCI Retreat management are in agreement with the finding and concur with most of the recommendations. Additionally, they indicated that they have implemented corrective measures to address the issues noted in the status of prior audit findings. Management's full response is included in this report after the *Status of Prior Audit Findings* section.

## State Correctional Institution at Retreat

---

### Introduction and Background

The State Correctional Institution at Retreat (SCI Retreat) is located in Luzerne County. It is one of the 26 State Correctional Institutions operated by the Pennsylvania Department of Corrections (Department). SCI Retreat has a capacity of 1,104 inmates, but as of June 30, 2016, it housed approximately 1,116 inmates.

### Department Inmate Medication Policy

It is the policy of the Department to ensure that every inmate has access to health care that includes, but is not limited to, inmate health care, initial intake screening and medical clearance for transfer, physical examinations, access to emergency care, and pharmacy guidelines.<sup>1</sup>

Inmates at SCI Retreat who are diagnosed with a health condition may be prescribed medication. Medication is purchased from a vendor through a state-wide pharmacy contract<sup>2</sup> and distributed to inmates by pharmacy nursing staff. Medication is to be distributed in compliance with Department policies which include guidelines on monitoring medication compliance.<sup>3</sup>

### Procedures on Preparing for Inmates Transferring into SCI Retreat

Each week, SCI Retreat's Inmate Employment Vocational Coordinator (coordinator) accesses information in DOCNet, the Department's centralized computer information system, regarding inmates that are scheduled to be transferred to SCI Retreat from other SCIs during the following week. The coordinator utilizes the information listed in DOCNet to prepare a spreadsheet, referred to by SCI Retreat staff as the *van listing*, which includes the inmate

---

<sup>1</sup> Commonwealth of Pennsylvania, Department of Corrections, Policy Number 13.2.1, Access to Health Care, effective date June 28, 2004.

<sup>2</sup> Diamond Pharmacy Services contract number 4400007074 valid from June 15, 2010 through July 31, 2016.

<sup>3</sup> Department of Corrections Policy 13.2.1, Access to Health Care Procedures Manual, Section 12 – Pharmacy Guidelines.



## State Correctional Institution at Retreat

---

name and identification number, the scheduled transfer date, the name of the SCI the inmate is transferring from, and other inmate specific information such as any housing restrictions and mental health classification. The coordinator then emails the van listing to various SCI Retreat personnel including the Corrections Health Care Administrator (CHCA)<sup>4</sup> in order to prepare for the arrival of the inmates the following week.

Prior to an inmate's scheduled transfer, nursing staff accesses and reviews the electronic medication administration records (eMAR) of inmates scheduled to be transferred to SCI Retreat to determine if the inmate is currently prescribed any medication. The eMAR is a report available in the Sapphire eMAR software,<sup>5</sup> which is provided by the contracted pharmacy vendor and is utilized by all of Department institutions. If the inmate has been prescribed multiple medications, the nurse will print out a copy of the eMAR to be used during the initial medical examination of the inmate. If the inmate has been prescribed a minimal amount of medication, the nurse will write the medication information on the "Intra-System Transfer Reception Screening/PV Returns Less Than 90 Days" (reception) form that will be used to document information, such as medication, from the initial examination of the inmate upon transfer.

### Intake Process for Inmates Transferring into SCI Retreat

---

During the intake process, the inmate is seen by a member of SCI Retreat's medical staff, usually a nurse. The nurse will perform an initial examination of the inmate and review his medical history, including the current medications prescribed to that inmate. The examination is documented on the inmate's reception form and in a medical progress note.<sup>6</sup>

---

<sup>4</sup> The CHCA is responsible for overseeing various medical related operations at SCI Retreat which includes medication distribution to inmates.

<sup>5</sup> An electronic pharmacy program that includes on-line ordering and refills, electronic medication administration records (eMAR's), barcode inventory control reconciliation, medication compliance, on-demand reports and electronic medication pass capabilities.

<sup>6</sup> Progress notes include information such as the institution where the inmate transferred from and the date, any allergies or chronic conditions, the inmate's vital signs, current medication information, and whether a

## State Correctional Institution at Retreat

---

Inmates arrive at the institution with a hard copy of their medical records and prescribed medications. If an inmate was taking a medication that is generally kept in stock by all institutions, then the institution that the inmate transferred from would generally not send those medications because SCI Retreat should have that medication on-hand to provide to the inmate. If the inmate was prescribed a non-stock medication, the prior institution should send any remaining medication from the last time that the prescription was filled for the inmate. All inmate medication is taken by the SCI Retreat nurse to be stored in the pharmacy. If an inmate requires medication that is not in stock at SCI Retreat, staff will order it from the contracted pharmacy vendor or, if necessary, obtain the medication from a local pharmacy. As previously reported, during the intake process, the nurse will complete a reception form which is signed by both the nurse and the inmate. The reception form requires a witness signature if the inmate refuses to sign the form.

If the inmate is on medication, the nurse provides him with a Medication Pass which will enable that inmate to go to the pharmacy during the scheduled times for medication distribution (pill line). The nurse will also explain to the inmate the process for attending the pill line, including the times and location.

### Process for SCI Retreat Inmates to Obtain Prescribed Medication

---

The majority of medication is dispensed to inmates at SCI Retreat at either the morning or the evening pill line. Additional times are provided for those inmates that need to take their medications outside of these established times. Inmates line up at the windows in the pharmacy medication room and provide their identification cards to the pharmacy nurse at the window. The nurse scans the identification card to access the inmate's electronic medical record file in the pharmacy computer system that includes a photo of the inmate. The nurse is to verify identity via facial recognition and then obtain the medication listed for the inmate. The label of the medication is also scanned to allow the system to match the

---

Medication Pass was issued to the inmate to indicate that he is authorized to go to the pharmacy to obtain the prescribed medication.

## State Correctional Institution at Retreat

---

medication listed in the system for the inmate to the medication package ensuring that they match. If the medication scanned by the nurse does not match a medication listed in the inmate's file, an error message will flash on the screen to alert the nurse of the discrepancy. If the nurse does not receive an error message, he/she will dispense the medicine to the inmate.

If an inmate attends the pill line but refuses to take his medication, Department policy<sup>7</sup> requires the nurse to indicate the refusal with a code "R" in the inmate's eMAR. SCI Retreat management stated that it cannot force an inmate to take medication against his will.

At the conclusion of the pill line, the nursing staff reviews a list generated from the pharmacy software of inmates who were scheduled to, but did not receive, their medication during that pill line. Nurses indicate with a code "N" in the inmates' eMAR that they did not show up for the pill line. Department policy also requires nurses to document missed medication as a nurse's note in the inmate's eMAR.

Department policy further states that if an inmate misses either a life-sustaining medication, three consecutive doses, or 50% of the doses in a seven-day period of a medication for a chronic medical illness or a psychiatric medication, the nursing staff shall notify the Medical Director/designee or the Psychiatrist (in the case of missed psychiatric medication). Additionally, a *Release from Responsibility for Medical Treatment* form must be initiated. This form documents the inmate's refusal of prescribed medication and releases the physician and institution from all legal responsibility for any ill effects which may result from refusing the medication. The form is to be signed by the inmate, two physicians, and a witness.

---

<sup>7</sup> Department of Corrections Policy 13.2.1 Access to Health Care Procedures Manual, Section 12 – Pharmacy Guidelines.

**State Correctional Institution at  
Retreat****Finding****1****SCI Retreat needs to improve oversight and documentation of its process of dispensing medication to inmates.**

As part of this audit objective, we reviewed the Department of Corrections' (Department) policy that describes the requirements of the corrections health care administrator (CHCA) and nurses regarding monitoring inmate medication compliance<sup>8</sup> and performed various procedures including conducting interviews to understand the process, observing video footage of two pill lines, and testing documentation for a selection of inmates who transferred to SCI Retreat. We found that, although SCI Retreat has adequate procedures in place to ensure that the correct medications are timely and appropriately dispensed to inmates, some inmates refuse to take their medications and SCI Retreat does not always adequately document this refusal nor does it ensure that the appropriate medical professionals have been notified.

**Adequate procedures are in place to properly dispense medication to inmates.**

As previously described in the Background section of this report, the Department has established written procedures regarding nurses dispensing medication to inmates. The procedures include verification of the inmate's identification and medication(s) prescribed prior to dispensing as well as ensuring the inmate takes the prescribed medication.

To ensure that these procedures are being adequately performed, we observed video footage of two pill lines that took place on February 1 and 2, 2016. We observed the process of inmates presenting their identification card to the pharmacy nurse to be electronically scanned and the pharmacy nurse scanning the medication label in order for the software to confirm that the medication has been prescribed to the inmate prior to dispensing the medication to the inmate. The video footage, however, did not show how SCI Retreat ensures that the inmate takes the prescribed medication.

<sup>8</sup> Commonwealth of Pennsylvania, Department of Corrections, Policy Number 13.2.1, Access to Health Care, effective date June 28, 2004.

## State Correctional Institution at Retreat

---

According to SCI Retreat management, corrections officers observe the inmates taking their medication during the pill line and perform regular mouth searches to determine if the inmate has swallowed the medication, especially for those inmates with a history of not taking or spitting out medication. This practice appears sufficient and appropriate.

Based upon our review, it appears that nurses are distributing and inmates are receiving medication during the pill lines in compliance with Department policy.

### **No delays were identified in providing medications to inmates transferring into SCI Retreat.**

---

We analyzed the medication records for 40 of the 625 inmates<sup>9</sup> who transferred into SCI Retreat from other SCIs in the Commonwealth during the period July 1, 2014 through June 30, 2015 to determine whether inmates had any delays in obtaining their medications upon arrival to SCI Retreat. Specifically, we reviewed each inmate's reception form, which is completed by the intake nurse upon each inmate's arrival (and is to be signed by the nurse and the inmate). We also verified that the medications listed on those forms agreed to the medications listed on the inmates' electronic medication administration records (eMAR), which is used state-wide at all SCIs. The purpose of this review is to ensure all medications prescribed are identified and continued to be dispensed at SCI Retreat without interruption.

We found that the eMARs for the 40 inmates indicated that each inmate was offered his first dose of medication in a timely manner after transfer to SCI Retreat. We also confirmed that the reception forms for each of the inmates were signed by SCI Retreat nurses as required; however, because inmate identification information was redacted by the Department, we obtained written confirmation from SCI Retreat management that the inmates' signatures were present on the reception form prior to being redacted.

---

<sup>9</sup> See the methodology section of this report for an explanation of how we selected the 40 inmates for testing.

**State Correctional Institution at  
Retreat**

---

**Non-compliance identified in SCI Retreat's  
documentation and oversight when inmates failed to  
take their medications.**

---

Based on our testing of the same 40 inmates for a six-month period, we found several non-compliance issues surrounding the documentation and oversight of this process as noted below:

- Nurses did not always document in the eMAR when inmates did not take their prescribed medication.
- Nursing staff failed to adequately monitor inmates' medication records to ensure that medical providers were timely notified as required.
- SCI Retreat could not provide emails to provide evidence that doctors were notified for more than 800 instances in which documentation indicated that inmates did not take their prescribed medication.
- Medical staff failed to have inmates sign a medical release form when they refused medication.
- SCI Retreat's CHCA did not perform a daily review of inmates' medication compliance reports as required.

The remainder of this finding describes these issues.

**Nurses did not always document in the eMAR when inmates  
did not take their prescribed medication.**

---

Department policy requires nursing staff to document a note in the inmate's eMAR when an inmate does not take his prescribed medication (nurse's note). We limited our testing in this area to 16 of the 40 inmates that we identified as missing either three consecutive doses of medication or missing 50 percent of the prescribed doses within a seven-day period for either psychiatric medication or medication for a chronic medical illness, as discussed in the next section.

### State Correctional Institution at Retreat

Based upon a review of the 16 inmates' eMARs, we found that they collectively missed 1,834 doses of medication during the six-month period following their transfer to SCI Retreat. We requested the nurses' notes for the 16 inmates to determine if the doses missed by the inmates were documented in the inmates' medical records as required by policy. SCI Retreat provided some nurses' notes from 13 of the 16 inmates' records as summarized in the following table:

Number of inmates	Number of missed doses	Number of missed doses with a nurse's note	Number of missed doses without a nurse's note	Percentage of missed doses without a nurse's note
13 with nurse's notes	1,776	509	1,267	71%
3 with no nurse's notes	58	0	58	100%
16 inmates reviewed	1,834	509	1,325	72%

As noted in the table, 72 percent of the missed doses were not documented as a nurse's note in the inmates' eMARs. Further, no missed doses were documented for three inmates. Of the 1,325 doses of missed medication that were not documented in a nurse's note for the 16 inmates, the number of undocumented missed doses per inmate ranged from 1 to 294.

During an interview, one of the pharmacy nurses indicated that not all pharmacy nurses document the notes because they believe that such documentation is not required. This response indicated that nurses were not aware of the documentation required when an inmate does not take his medication, which is evident based on the results above.

Documenting a nurse's note in an inmate's medical record when he misses a dose of prescribed medication is an additional method of providing medical information to the inmate's doctors to assist them in providing medical services to the inmate. SCI Retreat management stated that, as a result of our inquiry, pharmacy nurses were instructed to document a nurse's note when an inmate misses a dose of medication to comply with policy.

**State Correctional Institution at  
Retreat**

---

**Nursing staff failed to adequately monitor inmates' medication records to ensure that medical providers were timely notified as required.**

---

Department policy requires nursing staff to notify the medical provider if an inmate with a chronic medical illness or an inmate prescribed a psychiatric medication misses three consecutive doses of medication or misses 50 percent of prescribed doses within a seven-day period.

According to a pharmacy nurse, to determine whether inmates' missed doses met the above criteria during the period July 2014 through December 2015, the pharmacy nurses would generate and review a Medication Pass Results report from the pharmacy software every three days. The report lists inmates that either did not go to their scheduled pill line to receive their medication or went to the pill line but refused to take their medication. The nurses would review the names listed and determine which inmates were medication non-compliant.<sup>10</sup> The nurses were supposed to notify each inmate's doctor via email and copy the CHCA on the email.

We requested copies of the Medication Pass Results reports; however, the CHCA indicated that the reports can only be generated for the most recent 30 days and staff did not retain the reports from the time period of our review. As discussed in the section below, SCI Retreat staff was able to provide some emails sent by pharmacy nurses to doctors notifying them of inmates that missed doses of prescribed medication. The emails support that a review was done to identify inmates that missed doses of medication. However, without the Medication Pass Results reports or other documentation to support that a review was performed, we were unable to determine if the nurses did in fact identify all the inmates that missed doses of medication that required a doctor to be notified.

Additionally, only reviewing the Medication Pass Results reports every three days would not result in identifying a medication non-compliant inmate in a timely manner if the prescription was for

---

<sup>10</sup> Department policy states that an inmate is non-compliant when three consecutive doses of medication are missed or 50 percent of doses of medication are missed within a seven-day timeframe for a psychiatric medication or other medication for a chronic medical illness.



**State Correctional Institution at  
Retreat**

---

more than one dose per day. For example, if an inmate was prescribed a psychiatric drug twice daily and he missed three consecutive doses he would be non-compliant after one and one-half days. Based upon the procedures in place during the time of our review, the inmate may not have been identified as non-compliant until after three days, or after possibly six doses of medication had been missed. Further, the nurses only reviewed records for the three days selected, they did not review any prior days to determine if an inmate had missed any medications on those days that, combined with the current three days being reviewed, resulted in them being non-compliant.

SCI Retreat management indicated that they have changed the procedures for identifying medication non-compliant inmates to comply with Department policy, but we did not review the new procedures put in place after our testing period.

**SCI Retreat could not provide emails to provide evidence that doctors were notified for more than 800 instances in which documentation indicated that inmates did not take their prescribed medication.**

---

Our review of the 16 inmates' eMARs during the six-month period after their transfer to SCI Retreat found that pharmacy nurses should have notified doctors for 943 instances where inmates missed enough prescribed doses of medication to be non-compliant with Department medication policy. We requested the emails notifying the doctors of the non-compliance; however, the CHCA indicated that, due to limited storage space, emails had been deleted and may not be available to review. SCI Retreat was only able to provide emails for 107 of the 943 occurrences of non-compliance.

Without the emails, we were unable to determine if SCI Retreat did in fact notify the doctors in all required cases. It is imperative that the doctors are notified when an inmate misses prescribed doses of medication to enable them to address the severity of not taking the medication. The CHCA indicated that in April 2016 she began to save the inmate non-compliance notification emails in a folder on her computer to support that the inmate review is being conducted.

**State Correctional Institution at  
Retreat**

---

**Medical staff failed to have inmates sign a medical release form when they refused medication.**

---

In order to ensure that an inmate understands the negative effects of not taking his prescribed medication and to release the medical providers and the Department from responsibility if the missed medication would have any ill effects on the inmate, the Department requires that a “Release from Responsibility for Medical Treatment” (medical release form) be completed and then signed by the inmate and his health care provider when the inmate is medication non-compliant. The medical release form includes a section for medical staff to list the prescribed medication and the possible consequences of the inmate not receiving the medication. The inmate’s signature on the form acknowledges his awareness of the consequences to his health by not taking his prescribed medication.

Our review of the six-month period following the transfer date of each of the 16 inmates who were non-compliant with medication disclosed that 8 inmates were not required to sign a medical release form because they either began to take their medicine as prescribed or their doctors discontinued or changed the medication prescribed to them. The remaining 8 inmates should have been required to sign a medical release form for refusal to take prescribed medication; however, SCI Retreat was only able to provide medical release forms for 2 of the 8 inmates. When we questioned SCI Retreat management as to why the forms were not completed, we were informed that the psychiatric nurse primarily responsible for initiating the medical release forms that we requested had indicated that she was not aware that it was her responsibility to prepare these forms.

As a result of SCI Retreat staff not ensuring that inmates sign a medical release form, doctors and the institution are open to liability for any ill effects that may result when an inmate refuses prescribed medication. The CHCA stated that, after our inquiry, all nurses were instructed on the requirement to initiate medical release forms for inmates that refuse their medication.

**State Correctional Institution at  
Retreat**

---

**SCI Retreat's CHCA did not perform a daily review of inmates' medication compliance reports as required.**

---

Department policy requires the CHCA or a designee to review eMAR medication compliance reports on a daily basis and follow up with medical providers regarding non-compliant inmates. When we questioned the CHCA who was CHCA during the period of our testing,<sup>11</sup> he responded that he was not reviewing the medication compliance reports on a daily basis. Instead, he indicated that he was copied on the non-compliance medication emails that pharmacy nurses send to medical providers when they conduct their monitoring of inmates' medications. The acting CHCA stated that the pharmacy nurses have been the primary designee for monitoring inmate medication non-compliance. However, as previously noted, during the period reviewed the pharmacy nurses' procedure was to review inmates' medication records only once every three days which would not provide a daily review as required by policy.

Additionally, although policy allows for either the CHCA or designee to perform the daily review, we believe that utilizing the pharmacy nurses as a designee is not sufficient since it is the pharmacy nurses that input the missed medication information into the system that generates the medication compliance reports. Further, without conducting his own review, the CHCA could not ensure that the pharmacy nurses notified the respective doctors for all of the inmates that were non-compliant with Department medication policy. The acting CHCA stated that she is reviewing daily for medication non-compliance, however we did not audit this new process.

Monitoring inmates' compliance with prescribed medications is extremely important, especially for medications that are for chronic medical illnesses or are a psychiatric medication. Ensuring that inmates receive their prescribed medication is part of providing health care to inmates as required by Department policy.

---

<sup>11</sup> The CHCA went on extended leave and an acting CHCA was appointed on March 14, 2016.

**State Correctional Institution at  
Retreat**

---

**Recommendations**

We recommend that SCI Retreat:

1. Monitor to ensure that nurses document a nurse's note in an inmate's eMAR when medications are missed.
2. Develop and implement procedures for nurses to review medications missed by inmates to ensure that medication non-compliant inmates are timely identified as required by Department policy. These procedures would include documenting this review and maintaining these records.
3. Develop procedures to maintain records to support that medical providers were notified when inmates were medication non-compliant.
4. Instruct nurses on Department policy requiring an inmate who refuses medication to sign a medical release form.
5. Monitor to ensure that medical release forms are initiated and signed when an inmate refuses necessary medical treatment, including prescribed medication.
6. Ensure that the CHCA, or a designee that is not involved in the initial inmate identification process, reviews the eMAR medication compliance reports on a daily basis and follows up with medical providers regarding non-compliant inmates. Additionally, the review conducted by the CHCA or a designee should be documented.

**State Correctional Institution at  
Retreat**

---

**Status of Prior Audit Findings**

---



---

Our prior audit of the Department of Corrections' State Correctional Institution at Retreat covered the period July 1, 2006, to March 27, 2009, and contained 12 findings. During the current audit, we addressed the nine findings that contained a total of 15 recommendations. On the pages that follow, we provide the status of these findings and offer additional recommendations, when applicable, to eliminate the deficiencies identified.

---

**State Correctional Institution at  
Retreat**

---

**Prior Finding  
One****Management did not monitor the vending contract.  
(Resolved)**

Our prior audit found that SCI Retreat management did not maintain a copy of the contract detailing the terms and conditions of the vending services agreement. Without a copy of the contract, management could not determine if the vendor was charging the approved prices for products or remitting an accurate amount of commission payments to SCI Retreat. Additionally, we found that SCI Retreat employees did not accompany the vendor when the vending machines were restocked. This could cause the vendor to understate sales and, in turn, remit lower commissions. As a result, there could be a potential loss of revenue to the Inmate General Welfare Fund.

We recommended that SCI Retreat management obtain a copy of the contract and implement controls to ensure vending sales and commissions are accurately recorded, collected, and deposited.

**Status as of this audit**

---

SCI Retreat management obtained a copy of the contract that details the terms and conditions of the vending services' agreement. Additionally, SCI Retreat receives monthly commission statements from the vendor that support the commission amounts received. The statements include a monthly listing of each vending machine, by location and type of product sold in the machine. In addition, the statement lists (by product type) the sales totals and the commission amounts. SCI Retreat's business manager provided a spreadsheet that verifies his review of the monthly commission amounts received by SCI Retreat during the audit period. The business manager utilized the sales information on the commission statements and the commission rates agreed upon in the contract to recalculate and confirm commission amounts received from the vendor. Additionally, SCI Retreat management indicated that cash meter reports are available from the vendor, upon request, that document the amount of cash recorded as collected from each machine at SCI Retreat. This data is the support for the sales amounts reported on the monthly commission statements.

**State Correctional Institution at  
Retreat**

---

We selected three months during the period July 2014 through June 2015 to recalculate the monthly commission amounts. Based on the vendor's cash meter reports<sup>12</sup> and contract commission rates, we recalculated the commission amounts and confirmed that they agreed with the amounts paid per the commission statements. Additionally, we obtained bank deposit receipts and confirmed that the amounts recorded on the commission statement, for the same three months, were deposited into SCI Retreat's account. Based upon our test work, we concluded that SCI Retreat has implemented adequate controls regarding vending sales and commissions.

---

<sup>12</sup> We did not perform procedures to evaluate these reports, and as such, we determined this data to be of undetermined reliability as noted in Appendix A. This data, however, appears to be the best data available. We believe that there is sufficient evidence in total to support our conclusion.

**State Correctional Institution at  
Retreat**

---

**Prior Finding  
Two**

**Maintenance work orders remained open long after the maintenance tasks were completed and the maintenance department did not use priority codes for maintenance projects or the maintenance management system for recording and prioritizing preventive maintenance requirements. (Partially resolved)**

Maintenance Priority Codes

Our prior audit disclosed that SCI Retreat management assigned one of the four priority codes to only one of the 5,900 work orders submitted between July 1, 2006, and June 30, 2008. The remaining work orders were assigned a priority code of "5," which is the default code if one is not entered into the system. Failure to assign a priority code may cause a delay in completing work that may have security or health and safety ramifications. We recommended that management begin assigning work orders a priority code, which reflects the severity of the repair.

Preventive Maintenance System

Our prior audit also disclosed that SCI Retreat was utilizing an in-house computerized system for preventive maintenance instead of the Department of Corrections' Maintenance Management System. We recommended that management begin entering all assets into the Maintenance Management System and process all preventive maintenance work orders through the required maintenance management system.

Open Work Orders

Finally, our prior audit disclosed that 863 work orders, dated as far back as July 5, 2006, were still listed as open in the maintenance work order system even though the work had been completed. We recommended that management immediately begin reviewing all open work orders for explanations on why work orders are not being closed out in a timely manner.



## State Correctional Institution at Retreat

---

### Status as of this audit

---

#### Maintenance Priority Codes (Resolved)

From the Maintenance Management System, we reviewed 25 of the 282 work orders<sup>13</sup> processed during the month of August 2015 to determine if management assigned priority codes to the work orders and that those codes reasonably reflected the level of work that was requested. There are four levels of priority codes to select from in the Maintenance Management System.<sup>14</sup> We noted that 23 of the 25 were assigned a *Routine* priority code, one was listed as *Immediate* and the other as *Emergency*. We also reviewed the descriptions of the work requested on each of the 25 work orders and determined that an appropriate priority code was assigned to each work order.

Additionally, we obtained the lists of work orders assigned a priority code other than *Routine* during the period January 1, 2015, through November 8, 2015, to ensure that priority codes other than *Routine* were being assigned. We found that 174 work orders were assigned a priority code of *Emergency*, *Urgent*, or *Immediate*. As a result, it appears that SCI Retreat has been assigning priority codes to work orders instead of allowing the work order system to assign a default code as noted in our prior audit.

#### Preventive Maintenance System (Resolved)

SCI Retreat management indicated that in 2010 staff entered asset information from the in-house system used during the prior audit into the Maintenance Management System. As a result, they are now able to utilize the system to track preventive maintenance work performed on assets as required by policy.<sup>15</sup>

Management provided us with a copy of the preventive maintenance master asset listing generated from the system.

---

<sup>13</sup> We did not perform procedures to evaluate the reports generated by the Maintenance Management System, and as such, we determined this data to be of undetermined reliability as noted in Appendix A. This data, however, appears to be the best data available. We believe that there is sufficient evidence in total to support our conclusion.

<sup>14</sup> Priority code levels include: Level 1 – Emergency, Level 2 – Immediate, Level 3 – Urgent, and Level 4 – Routine.

<sup>15</sup> Commonwealth of Pennsylvania, Department of Corrections, Policy Number 10.2.1, “Facility Maintenance,” Section 13, “Preventive Maintenance,” effective September 3, 2008.

## State Correctional Institution at Retreat

---

The listing was comprised of 184 assets such as air conditioners, boilers, and emergency generators that were scheduled for preventive maintenance. We were also provided an example of a report of one of the assets from the preventive maintenance master asset listing that included the dates the quarterly inspections occurred for the assets from October 2011 through September 2015.

In addition, we selected 10 assets from the preventive maintenance master asset listing and reviewed a work order generated from the system for each of the assets. We confirmed that each of the work orders indicated that the work was for preventive maintenance and included information regarding the date the work was completed and labor and material costs. This documentation provided further confirmation that SCI Retreat is using the system for preventive maintenance as required by Department policy.<sup>16</sup>

### Open Work Orders (Unresolved)

We determined that completed work orders have not been closed out in the Maintenance Management System. Our review on October 29, 2015, of the report of work orders submitted in August 2015 found that 80 of the 282 work orders on the list remained open. We inquired as to why 80 work orders still remained open after more than two months. Management indicated that they inquired of the staff who were assigned the work for the open work orders and found that in most cases the work had been completed but the work order had not been closed out in the system. SCI Retreat management attributed the work orders not being closed out in the system to: (1) staff not turning in the paperwork to the maintenance office when the work was completed in order for the clerk typist to close them out in the system and (2) the limited amount of time that the clerk typist, assigned part-time to the maintenance department, had been able to dedicate to posting the closed work orders to the system for those whose paperwork had been turned in after the work was completed.

Failure to close out work orders in the system does not provide SCI Retreat management with accurate information to utilize to monitor the status of the maintenance department's workload.

---

<sup>16</sup> Commonwealth of Pennsylvania, Department of Corrections, Policy Number 10.2.1, "Facility Maintenance," Section 13, "Preventive Maintenance," effective September 3, 2008.

**State Correctional Institution at  
Retreat**

---

Subsequent to our inquiry, management indicated that various procedures were implemented to correct this deficiency. However, due to the timing of the audit, we did not evaluate the adequacy of these new procedures. We will review these new procedures during our next audit.

**Recommendations**

We recommend that SCI Retreat:

1. Review open work orders and immediately close out work orders that have been completed in the Maintenance Management System.
2. Develop a process for routinely monitoring open work orders in the Maintenance Management System to ensure that completed work orders are closed out in a timely manner.

**State Correctional Institution at  
Retreat****Prior Findings  
Four & Five**

**The business manager did not monitor warehouse inventory adjustments adequately and personnel independent of the warehouse did not conduct an annual physical inventory or monthly spot-checks of inventory. (Resolved)**

Our prior two audits of SCI Retreat noted that, in addition to receiving all goods, the storekeeper supervisor also adjusted inventory without investigation and approval by the business manager. This was due to role-mapping authorizations in the SAP R/3 system that allowed the storekeeper supervisor to adjust records. Our audit identified 71 inventory adjustments of which the business manager was unaware, resulting in an overstatement of inventory and a subsequent increase of total net cost of \$18,628 between September 16, 2008, and February 19, 2009.

Our prior audit also reported that management was still not conducting an annual inventory. As a result, SCI Retreat still did not comply with Department of Corrections fiscal administration policy that states as follows:

*Physical inventories shall be conducted monthly for commissaries and at least annually for warehouses.<sup>17</sup>*

Additionally, our inquiries also revealed that management still did not complete monthly inventory spot-checks, as recommended in our prior audit report. In February 2009, we conducted an inventory spot-check and found variances with 17 of the 39 warehouse inventory items tested which resulted in the inventory cost being understated by \$3,375.53.

The storekeeper supervisor performed semiannual inventories and weekly spot-checks on a few items, and the system maintained a perpetual inventory of all items. However, without the actual count of every item by an impartial and independent person at least once each year, inventory records could become inaccurate and the possibility of theft, fraud, and/or the misuse of Commonwealth property is increased.

---

<sup>17</sup> Commonwealth of Pennsylvania, Department of Corrections, Policy Number 3.1.1, "Fiscal Administration," Section IV, "Procedures," Subsection H, "Inventory Management," effective November 26, 2008.

**State Correctional Institution at  
Retreat**

---

We recommended the following: (1) the storekeeper supervisor should receive documented approval from the business manager before adjusting inventory; (2) the business manager should investigate the reason or cause of the inventory variance and take appropriate action before granting documented approval; and (3) business office staff should complete spot-checks on a monthly basis and thoroughly participate in an annual inventory.

**Status of this audit**

---

SCI Retreat management indicated that the business manager has been responsible for approving and making adjustments to inventory since May 2010. As part of our review, we confirmed that the storekeeper supervisor cannot make inventory adjustments because that role has been removed in the SAP R/3 system. Additionally, management indicated that, if a discrepancy is noted during a physical inventory count, business office staff with the assistance of warehouse staff investigates to determine the cause of the discrepancy. If staff is unable to reconcile the discrepancy, the business manager approves an adjustment to inventory records. Management further stated that warehouse personnel are made aware of the causes of the discrepancies identified to assist in avoiding those type of issues in the future.

Management also indicated that, as a result of our prior audit, in July 2010, business office staff began conducting monthly inventory spot-checks. Our review of the documents provided by SCI Retreat management for the spot-checks conducted for three months (April, May, and June 2015) disclosed that business office staff counted 15 different inventory items each month from the total inventory of approximately 450 items. The documents support that staff compared the counts to the inventory records to determine if there were any discrepancies. Additionally, business office staff signed and dated the documents to support that spot-checks were conducted. SCI Retreat management stated that if a discrepancy is noted during the monthly spot-checks, business office staff with the assistance of warehouse staff investigates to determine the cause of the discrepancy prior to the business manager making an adjustment to inventory records.

SCI Retreat business office and warehouse staff conducted an annual physical inventory in May 2016. We observed the

**State Correctional Institution at  
Retreat**

---

inventory process and noted that the business office staff participated in the physical inventory counts to ensure that independent verification of inventory levels and proper monitoring of warehouse operations exists.

Based upon our test work, we concluded that the SCI Retreat business manager is reviewing and approving inventory adjustments and the business office is now conducting monthly inventory spot-checks and participating in the annual inventory count as recommended in our prior audit.

**State Correctional Institution at  
Retreat**

---

**Prior Finding  
Six****Personnel did not complete required monthly  
automotive activity reports and the automotive  
officer did not require corrected forms.  
(Unresolved)**

Our prior audit of the daily/monthly automotive reports found numerous instances of missing/unrecorded data. During our interview with SCI Retreat's facility maintenance manager and automotive trades' instructor during the prior audit, we were told that many times employees using fleet vehicles did not fill out the reports correctly. We determined that no one at SCI Retreat took responsibility for obtaining corrected automotive reports.

The lack of accurate fleet vehicle usage reports makes it difficult to monitor usage and hinders such determinations as the trip destination, reasonable mileage and gasoline usage for that trip, whether the trip was for a business or personal purpose, and other measurements. The lack of accurate reports also precluded us from further evaluating the situation.

We recommended that SCI Retreat management require monthly automotive activity reports to be complete and accurate. In addition, we recommended that the SCI Retreat training officer establish a refresher course for all employees on the importance of completing automotive activity reports properly.

**Status as of this audit**

---

We determined that the monthly automotive activity reports (automotive reports) are still not being accurately completed or adequately reviewed. Additionally, SCI Retreat did not establish a refresher course on the importance of completing automotive reports properly. Instead, in February 2014, SCI Retreat management issued "Vehicle Issuing Procedures" (procedures) to all staff that instructed staff on the use of state vehicles and completing the automotive reports as well as identified responsibilities for issuing vehicles and processing automotive reports. Although issuing these procedures was a good step, more needs to be done.

## State Correctional Institution at Retreat

---

We reviewed the March 2015 automotive reports for six of SCI Retreat's 32 vehicles to determine if the drivers of the vehicles completed the automotive reports as required. We found improvements on the completion of the reports from the prior audit. Information regarding mileage, driver name, and destination are now being recorded. However, we found mileage differences on five of the six automotive reports. For example, one automotive report recorded 14 days of operation and on 7 of those days, the ending mileage of one day did not match the starting mileage for the next day, which resulted in 203 miles not being documented. These differences were not followed up on by staff in Main Control<sup>18</sup> or by automotive staff during review of the automotive reports. SCI Retreat management attributed the discrepancies to human error when completing the automotive reports and the lack of time and staff in the automotive office to adequately review the automotive reports for completeness and accuracy.

The lack of accurate fleet vehicle usage reports continues to make it difficult to monitor usage and hinders such determinations as reasonable mileage and gasoline usage for a particular trip and whether the trip was for a business or personal purpose.

### Recommendations

We recommend that SCI Retreat:

1. Train staff utilizing vehicles to accurately complete automotive reports to include all required information, such as beginning and ending mileage, each time the vehicle is utilized.
2. Ensure that both Main Control officers and automotive staff review automotive reports for completeness and accuracy and follow-up on any problems identified.

---

<sup>18</sup> Main Control is the area at SCI Retreat that security of the institution is monitored. It is staffed 24/7 by correction officers who are also responsible for issuing the automotive reports, vehicle keys and vehicle credit cards to staff utilizing state vehicles. The correction officers are also responsible for ensuring that these items are returned along with the completed automotive report when staff is done utilizing the state vehicle.



**State Correctional Institution at  
Retreat**

---

**Prior Finding  
Seven****Personal mileage was paid to employees without proper documentation. (Unresolved)**

Our prior audit found that, of the 17 Travel Expense Reports (TER) of employees receiving compensation for personal mileage during the period from July 1, 2006, through June 30, 2008, only seven had submitted vehicle request forms. As a result, SCI Retreat paid personal mileage for 10 TERs even though no vehicle request forms were completed. Without completion of the required vehicle request form, it is not possible to determine if approval was received or mileage was warranted.

We recommended that vehicle request forms be completed for all instances of employee travel by either state car or personal car if mileage is to be reimbursed. In addition, we recommended that the superintendent or his designee approve all claimed personal mileage.

**Status as of this audit**

---

Our current audit found that, since the prior audit, the Department of Corrections (Department) implemented a new electronic system to process travel expenses and, as a result, vehicle request forms are no longer required. Department policy<sup>19</sup> now requires employees to complete a Ground Travel Worksheet (GTW) to determine the most cost effective method of transportation (i.e., pool car, personal car, rental car). Justification must be provided if the lowest cost is not utilized. Additionally, the GTW must be attached to the TER.

Of the 27 personal mileage payments recorded in SAP totaling \$2,033 made to employees who traveled from July 1, 2014, through June 30, 2015,<sup>20</sup> we selected 5 payments totaling \$810 to determine if personal mileage was the most cost effective method of transportation. We requested that SCI Retreat provide the TERs and GTWs for the five selected transactions.

---

<sup>19</sup> Commonwealth of Pennsylvania, Department of Corrections, Policy Number 3.1.1 "Fiscal Administration," Section 10 "Employee Travel" effective January 27, 2009 and updated July 15, 2015.

<sup>20</sup> We did not perform procedures to evaluate this data, and as such, we determined this data to be of undetermined reliability as noted in Appendix A. This data, however, appears to be the best data available. We believe that there is sufficient evidence in total to support our conclusion.

## State Correctional Institution at Retreat

---

Although SCI Retreat management, through the electronic system, was able to provide the five TERs, they were unable to provide three of the five GTWs. SCI Retreat management indicated that the GTWs were completed for the three transactions, but the GTWs could not be located. Each properly completed GTW is to contain the information necessary to determine the most cost effective method of transportation; therefore, by not receiving the three GTWs, we were unable to determine if paying personal mileage was the most cost effective method of transportation for those three transactions. The Department's record retention policy for financial and fiscal records is four years.<sup>21</sup> Therefore, GTWs should have been maintained to support the transactions. Our review of the two GTWs found that only one was properly completed, approved, and contained information to support that personal mileage was the most cost effective method of transportation. The other GTW lacked the required information and it was not approved by a supervisor as required.

As a result of the missing information and documents for four of the five GTWs, we could not determine if the travel selected for review was adequately justified, approved, and provided in the most cost effective manner.

### Recommendations

We recommend that SCI Retreat:

1. Ensure that GTWs are properly completed, reviewed, and approved according to policy.
2. Ensure that a GTW is attached to a TER, when required, prior to a TER being processed and paid.
3. Ensure that GTWs are maintained in accordance with Department records retention policy in order to provide evidence that the travel and reimbursements were adequately justified, approved, and provided in the most cost effective manner.

---

<sup>21</sup> Department of Corrections, "Records Retention and Disposition Schedule" dated May 26, 2009.

**State Correctional Institution at  
Retreat****Prior Finding  
Eight****SCI Retreat did not have a system in place to ensure correct payment of Voyager fuel card bills. (Resolved)**

Our prior audit disclosed that invoices received for Voyager fuel purchases were paid without verification of the actual charges. During the 16-month period from July 1, 2007, to October 31, 2008, SCI Retreat paid for 140 Voyager card transactions totaling \$3,774. We attempted to reconcile the itemized fuel bill for the automotive fleet vehicle to which the fuel was charged, but found that fuel purchase receipts were not recorded or attached to the automotive activity reports. Without the ability to verify the legitimacy of the charges, we could not substantiate that the payments were accurate.

We recommended that Voyager card receipts should be attached and posted to monthly activity automotive reports. After approving these reports with attached Voyager card receipts, the reports should be forwarded to the business office for verification of expenditures before paying Voyager bills.

**Status as of this audit**

SCI Retreat management indicated that it had implemented procedures to verify fuel charges billed by the vendor.<sup>22</sup> SCI Retreat's automotive department staff forwards the fuel receipts submitted by drivers of the fleet vehicles to the budget analyst in SCI Retreat's business office. The budget analyst then compares the fuel receipt amounts to the amounts billed on the monthly statement for accuracy. Management indicated that if the budget analyst notes any discrepancies, the differences would be investigated.

Our review of the vendor's statements for two months (October 2014 and March 2015) disclosed that SCI Retreat's budget analyst performed a reconciliation of fuel receipts to the charges billed by the vendor and signed and dated the statement to indicate accuracy of the statement. As part of our review, we also confirmed the fuel receipt amounts to the charges billed by the vendor. Based on our test work, we concluded that SCI Retreat has implemented adequate controls to ensure correct payment of monthly fuel card bills.

<sup>22</sup> As of October 1, 2012, Voyager was replaced by a new vendor.

**State Correctional Institution at  
Retreat**

---

**Prior Finding  
Nine****Management must monitor in-house bulk fuel purchases and control use based on outside fuel prices. (Resolved)**

Our prior audit disclosed that SCI Retreat obtained fuel for their 35-vehicle fleet from both their in-house fuel pumping station as well as outside gasoline service stations using the Voyager fuel card. We reviewed 140 Voyager card transactions dated between July 1, 2007, and October 31, 2008, and found that 64 (46%) of all Voyager transactions were made within a 20-mile radius of SCI Retreat. We also compared the price per gallon of fuel at the in-house fuel pumping stations to prices at outside gasoline service stations and determined that, due to the volatility of the daily oil market price fluctuations during the time period tested, it was more cost-effective to purchase fuel from outside gasoline service stations.

We recommended SCI Retreat monitor gasoline levels and prices and determine if it would be more economical to fill state vehicles at the in-house pumping station or at outside service stations.

**Status as of this audit**

---

During the period July 1, 2014, through June 30, 2015, SCI Retreat expended \$34,014 on fuel purchases per SAP<sup>23</sup>, of which \$1,003 (3%) was for fuel purchases at outside gasoline service stations and \$33,011 (97%) was for fuel from the in-house fuel pumping station. These percentages indicated that the vast majority of fuel used for fleet vehicles is obtained from the in-house fuel pumping station as required by department policy.<sup>24</sup>

We reviewed vendor statements for two months (October 2014 and March 2015) and found that ten transactions totaling \$403 was for fuel purchased at outside gasoline service stations. Upon review of the locations of the service stations where the purchases were made, we found that seven of the ten service stations were 10 to 22 miles from the closest correctional

---

<sup>23</sup> We did not perform procedures to evaluate this data, and as such, we determined this data to be of undetermined reliability as noted in Appendix A. This data, however, appears to be the best data available. We believe that there is sufficient evidence in total to support our conclusion.

<sup>24</sup> Department of Corrections Policy Number 3.1.1, "Fiscal Administration," Section 8, "Use and Maintenance of State Vehicles," Subsection F, "General Operational Procedures."

**State Correctional Institution at  
Retreat**

---

institution in the commonwealth; however, the remaining three service stations were within five miles of a correctional institution. The information provided on the receipts indicated that the fuel was purchased on days and at times when the nearby correctional institution's pumping station would have been open. We acknowledge that situations may arise though that do not allow for fuel to be obtained from an in-house pumping station.

Based upon our review of expenditures that indicate that 97% of SCI Retreat's total fuel costs were for in-house fuel purchases, it appears that staff utilizing fleet vehicles is complying with department policy and, to the extent practical, is procuring fuel from a state correctional facility.

**State Correctional Institution at  
Retreat**

---

**Prior Finding  
Twelve****SCI Retreat did not adhere to the policy regarding  
the maintenance of personnel information.  
(Partially resolved)**

Our prior audit disclosed that 11 of the 25 SCI Retreat personnel files tested did not contain required documents<sup>25</sup> including an Immigration and Naturalization Form I-9. As a result of failing to complete and retain the Form I-9 in the employee's official personnel file, SCI Retreat could incur penalties with the United States Department of Homeland Security equaling not less than \$110 and not more than \$1,100 for each employee hired after November 6, 1986. In addition to the issue of missing documentation, we found that 3 of the 25 personnel files contained documents strictly prohibited from being maintained in an employee's personnel file such as copies of birth certificates, driver's license, and medical information.

We recommended that the human resources officer ensure that employee personnel files, through periodic reviews, contain all necessary documents. In addition, when prohibited documents are found in employee personnel files, they should be removed and destroyed or maintained in a separate file.

**Status as of this audit**

SCI Retreat management indicated that personnel files were being reviewed to determine if documents maintained were in compliance with applicable policy as part of converting hard copy personnel files to electronic files. Management further stated that personnel files were being reviewed in alphabetical order and that staff had completed their review of files with last names beginning with the letters "A" through "L." Management indicated that the review and conversion of hard copy files to electronic files are expected to be completed by June 30, 2016.

---

<sup>25</sup> Commonwealth of Pennsylvania, Governor's Office, Management Directive 505.18, "Maintenance, Access, and Release of Employee Information," dated September 23, 2014.

## **State Correctional Institution at Retreat**

---

We haphazardly selected 25 of the 371 Retreat employees as of June 30, 2015, per SAP,<sup>26</sup> to determine if their personnel files included required documents and if the files included any prohibited documents. We found that all 25 personnel files included the required documents; however, four of the files contained prohibited documents such as racial identification and leave-related medical documentation. The four files with prohibited documents were for employee whose last names began with letters “M” through “Z” which SCI Retreat management had previously stated had not yet been reviewed. After we notified management of the prohibited documents found in the personnel files, we observed management removing these documents from the employee’s personnel file.

### **Recommendations**

We recommend that SCI Retreat:

1. Continue its review of the remainder of the personnel files, ensure the files contain the required documentation, and remove any prohibited documents.
2. Develop procedures for ensuring that prohibited documents are not placed into personnel files and that the files contain the required documentation.

---

<sup>26</sup> We did not perform procedures to evaluate this data, and as such, we determined this data to be of undetermined reliability as noted in Appendix A. This data, however, appears to be the best data available. We believe that there is sufficient evidence in total to support our conclusion.

**State Correctional Institution at  
Retreat**

---

## **Agency's Response and Auditors' Conclusions**



---

We provided draft copies of our audit finding and status of prior findings and related recommendations to Department/SCI Retreat for its review. On the pages that follow, we included their response in its entirety. Following the agency's response is our auditors' conclusions.

---



**State Correctional Institution at  
Retreat**

**Audit Response from Department/SCI Retreat**



September 15, 2016

Honorable Eugene A. DePasquale  
Auditor General  
229 Finance Building  
Harrisburg, PA 17120-0018

Dear Auditor General DePasquale:

At the request of the Auditors, based on corrections made to the Draft Performance Audit and clarification provided at the Exit Conference, enclosed is the Department of Corrections' Amended Response to the Performance Audit of the State Correctional Institution at Retreat for the period of July 1, 2014 through May 11, 2016.

An audit review committee, appointed in accordance with Management Directive 325.10, prepared the Department of Corrections' response. The review committee included SCI-Retreat's Superintendent, Deputy Superintendent for Centralized Services, Corrections Health Care Administrator, and Business Manager and the Department of Corrections' Deputy Secretary for the Eastern Region.

Thank you for the effort that your office put into the audit report.

Sincerely,

A handwritten signature in black ink, appearing to read 'John E. Wetzel', written over a horizontal line.

John E. Wetzel  
Secretary of Corrections

cc: Shirley R. Moore-Smeal, Executive Deputy Secretary  
Michael Wenerowicz, Deputy Secretary Eastern Region  
Joseph Silva, Director Bureau of Health Care Services  
Vincent Mooney, Superintendent, SCI-Retreat  
Audit Review Committee  
File

**State Correctional Institution at  
Retreat****Audit Response from Department/SCI Retreat**

**TO** John E. Wetzel, Secretary

**THRU** Michael Wenerowicz, Deputy Secretary Eastern Region

**FROM** Vincent Mooney, Superintendent SCI-Retreat

**DATE** September 15, 2016

**RE** **Amended** Response to Draft Audit Report of SCI-Retreat dated August 2016

The Department of the Auditor General's ("AG") Draft Performance Audit Report of the State Correctional Institution at Retreat ("SCI-Retreat"), dated August 2016 ("Report") was reviewed and all findings were evaluated. The Report also provided the status of prior audit findings. For purposes of this response, the prior findings that were annotated as resolved will not be reiterated.

The following are the Department of Corrections' ("Department") responses to each of the findings and recommendations outlined in the Report:

**Audit Finding #1:** SCI-Retreat needs to improve oversight and documentation of its process of dispensing medication to inmates.<sup>1</sup>

**Response:** The Report demonstrates that the nurses are distributing medications appropriately, and that reentrants are receiving medication in compliance with Department policy. The Report also confirms there were no delays in providing medications to reentrants transferring into SCI-Retreat. The Department concurs with this finding and concurs with most of the recommendations.

Discussed in more detail below, while the Department concurs with the finding that SCI-Retreat did not adequately document refusal of medication, and that SCI-Retreat did not ensure the appropriate medical professionals were notified during the audit period, the Department does not concur with the final recommendation and provides several points of clarification.

***Recommendation #1 - Monitor to ensure that nurses document a nurse's note in an inmate's eMAR when medications are missed.***

---

<sup>1</sup> During the audit period of July 1, 2014 through May 11, 2016, there was an update of Department Policy 13.2.1, Section 12, Pharmacy Guidelines effective on January 26, 2015. It is unclear if records viewed in the audit prior to this effective date were audited based on the previous or updated section 12.

**State Correctional Institution at  
Retreat****Audit Response from Department/SCI Retreat**

In order to address the issues identified, the policy has been reviewed and reinforced with nursing staff at SCI-Retreat and compliance will be monitored.

***Recommendation #2 - Develop and implement procedures for nurses to review medications missed by inmates to ensure that medication non-compliant inmates are timely identified as required by Department policy.***

During the audit period, SCI-Retreat developed and fully implemented procedures to address this concern. Under the new system, Pharmacy nurses maintain compliance binders where daily print outs of reentrants who are non-compliant with medication are maintained and passed along to the applicable providers. In addition, SCI-Retreat has advised the Department's Bureau of Healthcare Services of this initiative and the Department-wide policy/procedures will be reviewed to determine whether policy adjustments need to be made or further direction to the field is necessary to ensure consistent practices. The Department concurs with this recommendation.

***Recommendation #3 - Develop procedures to maintain records to support that medical providers were notified when inmates were non-compliant.***

The Department has developed procedures to address the issues identified. The CHCA or designee will print/sign daily reports of non-compliance that will be signed off on by the provider to verify receipt of said non-compliant report. Provider schedulers and/or clinic nurses will then schedule and follow up as per policy to address non-compliance.

It should be noted that the Department had a procedure to maintain records that document notice to medical providers of medication non-compliance. Email notifications were maintained by the CHCA. However, the revised procedure will guard against the technical retrieval issues that came to light during this audit. Specifically, the Report concluded that SCI-Retreat was unable to provide emails as proof of documentation for more than 800 instances where reentrants did not take their prescribed medication. Those emails had been maintained by the CHCA who subsequently went on an extended leave of absence. The CHCA was copied on e-mails sent by nurses to providers indicating non-compliance. Nurses did not retain their emails and efforts to retrieve emails from the CHCA's computer were unsuccessful. Therefore, the significant number of incidents of failure to document missed medication is likely overstated. The revised system will not rely upon the functionality of an individual email account.

In addition, the CHCA disagrees with the interpretation of her statement in the Report that the "pharmacy nurses have been the primary designee for monitoring inmate medication non-compliance." The CHCA notes that the pharmacy nurse is merely a part in the process of monitoring reentrant medication non-compliance. The pharmacy nurses have a binder in which

**State Correctional Institution at  
Retreat****Audit Response from Department/SCI Retreat**

they retain reports regarding incidents of non-compliance, but they are not the designee to monitor the non-compliance.

**Recommendation #4 - Instruct nurses on Department policy requiring an inmate who refuses medication to sign a medical release form.**

To address the issues identified, the policy requirements for completing a medical release form upon medication refusal has been reviewed with all nursing staff. Nurses receive an on-site orientation and orientation booklet when hired which includes policies and procedures that cover protocols for obtaining medical release forms. Newly hired nurses are orientated with a senior nurse in every aspect of the medical department, including time spent working with each provider. Training progress is documented in the orientation booklet as topics are covered. Department policy will continue to be reviewed with staff on an ongoing basis.

**Recommendation #5 - Monitor to ensure that medical release forms are initiated and signed when an inmate refuses necessary medical treatment, including prescribed medication.**

To address the issues identified, the SCI-Retreat CHCA or her designee has been reviewing non-medication compliant reports in the Sapphire system Monday through Friday (with the exception of holidays) to ensure that medication non-compliant reentrants are identified in a timely manner and also that medical release forms (DC-462s) are initiated and signed when a reentrant refuses necessary medical treatment, including prescribed medication. The nurses assigned to both the medical doctor and psychiatrist have initiated logs that contain the non-med compliance report, the DC-462 and the date the reentrant is to be seen by a physician. To date, SCI-Retreat has found the above corrective action to adequately address recommendation #5.

**Recommendation #6 - Ensure that the CHCA, or a designee that is not involved in the initial identification process, reviews the eMAR medication compliance reports on a daily basis and follows up with medical providers regarding non-compliant inmates. Additionally, the review conducted by the CHCA or designee should be documented.**

There is no basis in the policy for requiring a "designee that is not involved in the initial identification process" to review the eMAR medication compliance reports and follow up with providers regarding non-compliant inmates. Further, there is no need for such a policy because identification and evaluation is an ongoing, daily nursing process regardless of who was involved in the initial identification process. Nonetheless, as stated in the response to recommendation #3 above, the Department has implemented a corrective measure to address the concerns that: 1) non-compliance was not

State Correctional Institution at  
Retreat

---

## Audit Response from Department/SCI Retreat

being properly documented and 2) medical providers are not receiving adequate notification of non-compliance.

**Prior Finding #2:** Maintenance work orders remained open long after the maintenance tasks were completed and the maintenance department did not use priority codes for maintenance projects or the maintenance management system for recording and prioritizing preventative maintenance requirements. (Partially Resolved).

**Response:** The Department concurs with this finding and recommendations. To address this issue, SCI-Retreat has filled the position of maintenance clerk to address the remaining open work orders and developed and implemented procedures to address the noted issues.

**Prior Finding #6:** Personnel did not complete required monthly automotive activity reports and the automotive officer did not require corrected forms. (Unresolved).

**Response:** The Department has already taken corrective action to ensure that staff correctly completes automotive reports. SCI-Retreat is also developing further instruction for main control officers to check for accuracy in the submission of automotive reports.

**Prior Finding #7:** Personal mileage was paid to employees without proper documentation (Unresolved).

**Response:** SCI-Retreat will ensure all travel approvers receive the appropriate direction and travel authorizers will ensure that proper paper work is submitted prior to approving the travel reimbursement is SAP.

**Prior Finding #12:** SCI-Retreat did not adhere to the policy regarding the maintenance of personnel information (Partially Resolved).

**Response:** The Department specifically notes that as of this date, all of the personnel files have been reviewed for compliance and procedures are in place to ensure that prohibited documents are not placed into personnel files and that files contain the required documentation.

**State Correctional Institution at  
Retreat****Auditors' Conclusions to Department/SCI Retreat's Response**

With regard to Finding 1, the Department/SCI Retreat concurs with our finding and most of the recommendations. It indicated that many of our recommendations have already been implemented. Furthermore, the Department is now reviewing its policy/procedures to determine whether adjustments need to be made or further direction to the field is necessary to ensure consistent practices. We commend the Department/SCI Retreat for proactively addressing our current year finding and recommendations.

The Department, however, indicates that it does not concur with our Recommendation #6 made for Finding 1 regarding the CHCA's designee needing to not be involved in the initial identification process to review eMAR medication compliance reports. Specifically, the response states that there is no basis in the policy for the recommendation and there is no need for such a policy because identification and evaluation is an ongoing, daily nursing process regardless of who was involved in the initial identification process. We disagree. As part of having an adequate management control system, the oversight control of a function should not be the same person whose work is being overseen and reviewed. In this case, the pharmacy nurses, who input the information regarding inmate medication non-compliance and notifying the providers of any non-compliance, should not be the CHCA's designee to review medication compliance reports on a daily basis. The response, however, indicates that the CHCA's designee currently is not involved in the initial identification process.

There are a few additional responses that require further comment. Footnote 1 to the response states that it was unclear as to whether records viewed during the audit were prior to the effective date of the current policy regarding pharmacy guidelines. As part of our audit, we reviewed the prior policy that the Department referred to and did not note a substantial change to the criteria. Therefore, the update to the policy does not affect the results reported in the audit finding.

The response to Recommendation 3 indicates that the number of incidents of failure to document missed medication is likely overstated because the documents were maintained by the CHCA who subsequently went on an extended medical leave and efforts to retrieve emails from his computer were unsuccessful. However, since the emails were not available to support that doctors were notified when inmates did not take their prescribed medication, no evidence existed to substantiate that notification of missed medication was properly sent to the medical providers, and as a result, we took exception to these instances.

With regard to the status of our prior audit findings, the Department/SCI Retreat agreed with our conclusions and stated that corrective actions have already been taken to address our recommendations. We will evaluate all corrective actions by the Department/SCI Retreat during our next audit.

**State Correctional Institution at  
Retreat****Appendix A****Objective, Scope, and Methodology**

The Department of the Auditor General conducted this performance audit in order to provide an independent assessment of the Pennsylvania Department of Corrections' (Department) State Correctional Institution at Retreat (SCI Retreat).

We conducted this audit in accordance with *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audits to obtain sufficient, appropriate evidence to provide a reasonable basis for our finding and conclusions based on our audit objective. We believe that the evidence obtained provides a reasonable basis for our finding and conclusions based on our audit objective.

**Objective**

---

Our audit objective was to determine whether SCI Retreat ensures that correct medications are timely and appropriately dispensed to inmates, including inmates transferring into SCI Retreat, and that inmates take the medication as prescribed.

We also conducted procedures to determine the status of the implementation of corrective action to address our nine prior audit findings and recommendations as presented in our audit report released on November 3, 2010.

**Scope**

---

Unless otherwise stated, our audit covered the period July 1, 2014, through May 11, 2016, with updates through the report's release.

Department and SCI Retreat management are responsible for establishing and maintaining effective internal controls to provide reasonable assurance that the department is in compliance with applicable laws, regulations, contracts, grant agreements, and administrative policies and procedures.

## State Correctional Institution at Retreat

---

In conducting our audit, we obtained an understanding of SCI Retreat's internal controls, including any information systems controls, if applicable, that we considered to be significant within the context of our audit objective.

For those internal controls that we determined to be significant within the context of our audit objective, we also assessed the effectiveness of the design and implementation of those controls as discussed in the Methodology section that follows. Any deficiencies in internal controls that were identified during the conduct of our audit—and determined to be significant within the context of our audit objective—are included in this report.

### Methodology

---

To address our audit objective, we performed the following:

- Obtained and reviewed Department Policy 13.2.1, "Access to Health Care Procedures Manual," to determine SCI Retreat staff's responsibilities related to dispensing medication to inmates and the procedures to be followed if an inmate refuses his medication.
- Interviewed and corresponded with SCI Retreat staff including the Corrections Health Care Administrator, Registered Nurse Supervisor, and a pharmacy nurse as well as conducted a walkthrough to assess controls and gain an understanding of the procedures related to distributing medication to inmates and the follow-up performed if an inmate refuses his medication.
- For the period July 1, 2014, through June 30, 2015, obtained the van listing from the Department's DOCNet system which lists all the inmates that transferred to SCI Retreat.
- Requested handwritten medical logs for the period July 1, 2014, through June 30, 2015, but only obtained medical logs for the period September 1, 2014 through May 31, 2015. These logs, prepared by SCI Retreat medical staff, lists the names of inmates that transferred to SCI Retreat and indicates whether the inmate was given a Medication Pass.



**State Correctional Institution at  
Retreat**

---

- We selected 40 of the 625 inmates who transferred to SCI Retreat during the period July 1, 2014, through June 30, 2015. The selections from the 625 inmates were made from two lists. The first list was from the 9 monthly handwritten medical logs prepared by SCI Retreat medical staff which indicated that 217 inmates were on prescribed medication when they arrived at SCI Retreat. From that list, due to medical confidentiality issues, we provided SCI Retreat with the names of 90 inmates randomly selected, who then reviewed the list of 90 inmates and provided us with redacted medical records for the first 30 on the list that were still at SCI Retreat at the time of our review. The second list utilized was the van listing for 136 inmates that were permanently transferred to SCI Retreat during the remaining three months of the fiscal year ended June 30, 2015, that SCI Retreat did not have the medical logs available. We provided SCI Retreat with the names of 55 inmates randomly selected from the list of 136 inmates. SCI Retreat then reviewed the list of 55 inmates and provided us with the medical records for the first 10 inmates on the list that arrived at SCI Retreat with a prescribed medication and that were also still at SCI Retreat at the time of our review.
- For each of the 40 inmates selected, we reviewed their redacted medical records beginning with the month of transfer to SCI Retreat through the next six months to determine (1) if there were any delays in obtaining their medications upon arrival to SCI Retreat, (2) if their Intra-System Transfer Reception Screening/PV Returns Less Than 90 Days (reception form) was completed and signed by a nurse and the inmate, (3) if the medication listed on the reception form agreed to the medication listed in the inmates' medical records to ensure all medication prescribed were identified to allow for continued dispensing to the inmates without interruption, and (4) if any inmate missed either three consecutive doses of medication or missed 50 percent of the prescribed doses within a seven-day period for either psychiatric medication or medication for a chronic medical illness.

**State Correctional Institution at  
Retreat**

---

- For 16 of the 40 inmates found to have missed prescribed doses as previously described, we reviewed inmate redacted medical records and documents to determine compliance with Department Policy 13.2.1.
- Observed video footage of two inmate medication distribution lines that took place on February 1 and 2, 2016, to determine if medication was dispensed to inmates in compliance with Department Policy 13.2.1.

To address the status of Prior Finding 1 in our prior audit, we performed the following:

- Confirmed that SCI Retreat obtained a copy of the vending services contract.
- Interviewed and corresponded with SCI Retreat's Business Manager regarding procedures for verifying commissions received from the vendor.
- Haphazardly selected the months of July 2014, December 2014, and March 2015 and using cash meter reports provided by the vendor recalculated the commission amounts to confirm that they agreed with the amounts paid per the commission statements. Additionally, we obtained bank deposit receipts and confirmed that the amounts recorded on the commission statement were deposited into SCI Retreat's account.

To address the status of Prior Finding 2 in our prior audit, we performed the following:

- Obtained and reviewed Department Policy 10.2.1, "Facility Maintenance," Section 12 "Maintenance Work Orders" and Section 13, "Preventive Maintenance" and SCI Retreat's procedures related to preventive maintenance.
- Interviewed and corresponded with SCI Retreat's Corrections Facility Maintenance Manager I and Facility Maintenance Manager II regarding assigning priority codes to work orders, open work orders, and utilizing the Department's Maintenance Management System for preventive maintenance.

**State Correctional Institution at  
Retreat**

---

- Obtained a listing from SCI Retreat’s Maintenance Management System of the 282 work orders processed during August 2015, the most recent month completed at the time of our audit test, to determine how many remained open as of October 29, 2015. Additionally, we haphazardly selected 25 of the 282 work orders to determine if management assigned priority codes to the work orders and that those codes reasonably reflected the level of work that was requested.
- Obtained and reviewed the facility’s computerized maintenance work order list for the period January 1, 2015 through November 8, 2015, to confirm that priority codes other than “Routine” were being assigned.
- Haphazardly selected 10 of the 184 assets from SCI Retreat’s preventive maintenance master asset listing for July 1, 2014 through June 30, 2015, and obtained work orders to confirm that the work was for preventive maintenance and included information regarding the date the work was completed and labor and material costs.

To address the status of Prior Findings 4 and 5 in our prior audit, we performed the following:

- Obtained and reviewed Department Policy 3.1.1, “Fiscal Administration,” Section IV, Subsection H, “Inventory Management,” to determine what procedures SCI Retreat should follow to maintain its inventory.
- Corresponded with SCI Retreat’s Business Manager to obtain an understanding of the procedures used during the physical inventory count, investigation of discrepancies between inventory records and the physical count, and approval of the subsequent adjustments made to inventory records.
- Obtained and reviewed role mapping duties and job descriptions to confirm that the warehouse manager is no longer able to adjust the electronic inventory records.

**State Correctional Institution at  
Retreat**

---

- Obtained and reviewed copies of the monthly inventory spot checks conducted in April, May, and June 2015 by SCI Retreat’s Budget Analyst to confirm that spot checks were performed by business office staff. April, May, and June 2015 were selected because they were the last three months that spot checks were conducted prior to the year-end physical inventory for June 2015.
- Observed the annual physical inventory on May 11, 2016, to ensure that it was conducted by business office staff.

To address the status of Prior Finding 6 in our prior audit, we performed the following:

- Obtained and reviewed Department Policy 3.1.1, “Fiscal Administration,” Section 8, “Use and Maintenance of State Vehicles” and SCI Retreat’s “Vehicle Issuing Procedures.”
- Interviewed and corresponded with SCI Retreat’s Business Manager and Corrections Facility Maintenance Manager II to determine whether management provided a refresher course for all employees on the importance of completing automotive activity reports properly.
- Haphazardly selected 6 of the 32 vehicles in operation during March 2015 to review the automotive reports and determine if they were accurately completed by the driver of the vehicle and reviewed by staff in Main Control and the automotive department.

To address the status of Prior Finding 7 in our prior audit, we performed the following:

- Obtained and reviewed Department Policy 3.1.1, “Fiscal Administration,” Section 10, “Employee Travel Procedures,” and the Department’s “Records Retention and Disposition Schedule.”
- Corresponded with the Business Manager to obtain an understanding of SCI Retreat’s policy and procedures for reimbursement of personal mileage.

**State Correctional Institution at  
Retreat**

---

- Based on highest dollar amounts, we selected 5 of 27 personal mileage payments made to employees that traveled during the period July 1, 2014, to June 30, 2015, and reviewed travel documents to determine if they were completed and approved in accordance with Department policy.

To address the status of Prior Finding 8 in our prior audit, we performed the following:

- Obtained and reviewed Department Policy 3.1.1, “Fiscal Administration,” Section 8, “Use and Maintenance of State Vehicles,” Subsection F, “General Operational Procedures.”
- Interviewed and corresponded with the Business Manager and the Facility Maintenance Manager II regarding procedures implemented by management to verify fuel charges billed by the vendor.
- Judgmentally selected and reviewed monthly fuel charges billed to SCI Retreat by the vendor for October 2014 and March 2015, which were the months with the highest fuel charges during each of the two six month periods during the period July 1, 2014, through June 30, 2015. We also reviewed the fuel receipts to confirm the fuel receipt amounts to the charges billed by the vendor and to confirm that SCI Retreat’s budget analyst reviewed and approved the vendor’s billing statements.

To address the status of Prior Finding 9 in our prior audit, we performed the following:

- Obtained and reviewed the Department Policy 3.1.1, “Fiscal Administration,” Section 8, “Use and Maintenance of State Vehicles,” Subsection F, “General Operational Procedures.”
- Obtained and reviewed fuel expenditure reports during the period July 1, 2014, through June 30, 2015 to determine the amount of fuel purchased for SCI Retreat’s in-house fuel pumping station compared to fuel purchased at outside gasoline service stations.

## State Correctional Institution at Retreat

---

- Judgmentally selected the months of October 2014 and March 2015, which were the months with the highest fuel charges during each of the two six month periods during the period July 1, 2014, through June 30, 2015 to determine the amount of fuel purchased at outside gasoline service stations and the proximity of those service stations to a correctional institution with an available pumping station.

To address the status of Prior Finding 12 in our prior audit, we performed the following:

- Obtained and reviewed Management Directive 505.18, “Maintenance, Access, and Release of Employee Information,” to determine what documents are required to be included in an employee’s personnel file and what documents are prohibited from being included in an employee’s file.
- Interviewed SCI Retreat’s Human Resource Officer III to obtain an understanding of the procedures used for maintaining employee personnel files.
- Haphazardly selected 25 of SCI Retreat’s 371 employees in June 2015 to examine their personnel files to determine if they included required documents and if any included prohibited documents.

### **Data Reliability**

In performing this audit, we obtained from SCI Retreat data files referred to by SCI Retreat staff as *van listings* that list the inmates transferring into the institution from other SCIs. We also obtained electronic medication records for inmates.

SCI Retreat extracted the data file of inmate transfers from the Department’s DOCNet system for the period July 1, 2014, through June 30, 2015. We utilized this data file for selecting inmates to test whether SCI Retreat ensures that correct medications are timely and appropriately dispensed to inmates, including inmates transferring into SCI Retreat.

The contracted pharmacy vendor provides all Department institutions with Sapphire eMAR software, which includes electronic medication administration records (eMARs). We

## State Correctional Institution at Retreat

---

obtained inmates' eMARs from the time of their transfer through the next six months. Each eMar includes a history of whether the inmate took or refused prescribed medication. We utilized this data file to make conclusions about SCI Retreat's distribution of medication to inmates.

*Government Auditing Standards* requires us to assess the sufficiency and appropriateness of computer-processed information that we use to support our findings, conclusions, or recommendations. The assessment of the sufficiency and appropriateness of computer-processed information includes considerations regarding the completeness and accuracy of the data for the intended purposes.

To assess the completeness and accuracy of the van listing of inmates that transferred to SCI Retreat, we conducted the following audit procedures:

- We obtained the available handwritten medical logs maintained by SCI Retreat's medical department staff for the period September 1, 2014 through May 31, 2015, which listed the names of all the inmate transfers and whether each inmate was given a Medication Pass granting access to the facility's pharmacy during the scheduled times for medication distribution upon arrival at SCI Retreat.
- We compared the handwritten medical logs to the van listings in order to ensure SCI Retreat included all inmate transfers in the extracted file. We were able to confirm that 445 of the 625 inmates included on the van listing arrived without exception. Although we do not have the handwritten medical logs for three months during the audit period to compare inmate names for the remaining 180, we still found overall the data to be reliable based on no exceptions noted when confirming 445 of the 625 inmates listed on the van listings.

Based on the above, we found no limitations with using the data for our intended purposes. In accordance with *Government Auditing Standards*, we concluded that SCI Retreat's computer-processed data was sufficiently reliable for the purposes of this engagement.

To assess the completeness and accuracy of the eMARs provided to us, we conducted audit procedures as follows:

**State Correctional Institution at  
Retreat**

---

- Interviewed SCI Retreat personnel with knowledge about the data, and specifically the processes used for data entry and/or input.
- Obtained an understanding of the information technology application, Sapphire eMAR software, used to process the eMARs, which included a general overview of selected information technology controls.
- Performed direct tests of the eMAR data and tested manual controls outside of Sapphire eMAR software, by comparing the data to manual reports completed at the time of an inmate's transfer, such as handwritten reception forms.

Based on the above, we found no limitations with using the data for our intended purposes. In accordance with *Government Auditing Standards*, we concluded that SCI Retreat's computer-processed data was sufficiently reliable for the purposes of this engagement.

In order for the auditors to address the status of the implementation of the corrective actions to the prior audit findings, SCI Retreat provided certain computer-generated reports/data to support some of its actions taken to correct the deficiencies noted in the prior audit report. We did not perform procedures to evaluate these reports/data, and as such, we determined this data to be of undetermined reliability. However, these reports/data appear to be the best data available. We believe that there is sufficient evidence in total to support our conclusions and recommendations related to the status of the implementation of the corrective actions to the prior audit findings.



**State Correctional Institution at  
Retreat**

**Appendix B**

**Audit Distribution List**

Upon its release, this report was distributed to the following Commonwealth officials:

**The Honorable Tom Wolf**  
Governor

**The Honorable John E. Wetzel**  
Secretary  
Pennsylvania Department of Corrections

**The Honorable Sharon P. Minnich**  
Secretary of Administration  
Office of Administration

**Ms. Shirley R. Moore-Smeal**  
Executive Deputy Secretary  
Pennsylvania Department of Corrections

**The Honorable Stewart J. Greenleaf**  
Majority Chair  
Senate Judiciary Committee

**Mr. Michael Wenerowicz**  
Deputy Secretary Eastern Region  
Pennsylvania Department of Corrections

**The Honorable Daylin Leach**  
Democratic Chair  
Senate Judiciary Committee

**Mr. Joseph J. Silva**  
Director  
Bureau of Health Care Services  
Pennsylvania Department of Corrections

**The Honorable Joseph A. Petrarca**  
Democratic Chair  
House Judiciary Committee

**Mr. Vincent Mooney**  
Superintendent  
State Correctional Institute at Retreat

**The Honorable Ronald S. Marsico**  
Majority Chair  
House Judiciary Committee

**The Honorable Randy Albright**  
Secretary of the Budget  
Office of the Budget

**Mr. David Popek**  
Business Manager  
State Correctional Institution at Retreat

**The Honorable Timothy A. Reese**  
State Treasurer  
House Judiciary Committee

**Mr. Brian Lyman, CPA**  
Director  
Bureau of Audits  
Office of Comptroller Operations

**The Honorable Bruce R. Beemer**  
Attorney General  
Office of the Attorney General

**Ms. Mary Spila**  
Collections/Cataloging  
State Library of Pennsylvania