

DEPARTMENT OF CORRECTIONS

Correctional Officer Recruitment,
Certification, and Training
and Selected Administrative Activities



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Auditor General

Secretary of the Department of Corrections

The Department of Corrections is established by Section 20.315, Florida Statutes. The head of the Department is the Secretary who is appointed by the Governor and subject to confirmation by the Senate. During the period of our audit, the following individuals served as Department Secretary:

Mark S. Inch From January 14, 2019

Julie L. Jones Through January 13, 2019

The team leader was Jay Molstad, CPA, and the audit was supervised by Barry Bell, CPA.

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DEPARTMENT OF CORRECTIONS

Correctional Officer Recruitment, Certification, and Training and Selected Administrative Activities

SUMMARY

This operational audit of the Department of Corrections (Department) focused on correctional officer recruitment, certification, and training and selected administrative activities. The audit also included a follow-up on the finding noted in our report No. 2018-082 and applicable findings in our report No. 2016-179. Our audit disclosed the following:

Correctional Officer Recruitment, Certification, and Training

Finding 1: Department records did not evidence that all staff who served on a special operations team during the period July 2017 through March 2019 completed required training.

Finding 2: Department records for some first aid instructors did not evidence that the instructors possessed an active CPR certification during the times certain CPR classes were taught.

Finding 3: Department records did not always evidence that correctional officers completed required training prior to administering drug and alcohol tests at Department institutions.

Finding 4: Certain Department controls related to the supervision of correctional officer trainees need improvement.

Finding 5: Department processes for recovering correctional officer hiring bonuses from employees who did not meet their service obligation to the Department need improvement.

Finding 6: Department controls for timely disabling access privileges to the Employee Training Records and Instruction Network need enhancement.

Selected Administrative Activities

Finding 7: Department controls over employee access to the Florida Accounting Information Resource Subsystem need improvement to better affix responsibility for system activity to an individual and to reduce the risk of unauthorized disclosure, modification, or destruction of Department data.

Finding 8: The Department had not established policies and procedures for reviewing the collection and use of social security numbers (SSNs) to ensure compliance with State law. In addition, the Department did not always provide employees the purpose for collecting their SSN or the specific Federal or State law governing the collection, use, or release of the SSNs.

Finding 9: Department procedures had not been established to ensure that text messages are retained in accordance with State law.

Finding 10: Department records did not evidence that employees assigned mobile devices had read and understood Department policies and procedures related to the use of mobile devices and the protection of sensitive data.

BACKGROUND

State law¹ specifies that the purpose of the Department of Corrections (Department) is to protect the public through the incarceration and supervision of offenders and to rehabilitate offenders through the application of work, programs, and services. According to Department records, the Department operates the third largest state prison system in the United States and, as of July 2019, housed 97,034 inmates and supervised 154,395 offenders released on supervision. For the 2018-19 fiscal year, the Legislature appropriated approximately \$2.55 billion to the Department and authorized 24,539 positions.²

FINDINGS AND RECOMMENDATIONS

CORRECTIONAL OFFICER RECRUITMENT, CERTIFICATION, AND TRAINING

State law³ specifies that any person employed as a correctional officer (CO) must satisfy certain minimum employment qualifications, including: be at least 19 years of age,⁴ a United States citizen, and a high school graduate or its equivalent; not have been convicted of any felony; complete a basic recruit training program approved by the Criminal Justice Standards and Training Commission (CJSTC),⁵ unless exempted; and achieve an acceptable score on the CO certification exam. According to Department records, as of June 30, 2018, the Department had 17,356 employees in CO positions, including 12,032 COs, 4,352 sergeants, 484 lieutenants, 356 captains, 85 majors, and 47 colonels.

The Department, Deputy Secretary of Institutions, is responsible for overseeing all Department correctional institutions in the State, which are geographically grouped into four regions. As of February 2019, the average Statewide vacancy rate for Department CO positions was 11.87 percent and, as shown in Table 1, the vacancy rate ranged from 5.30 percent in Region 3 to 15.78 percent in Region 2.

¹ Section 20.315(1), Florida Statutes.

² Chapter 2018-9, Laws of Florida.

³ Section 943.13, Florida Statutes (2018).

⁴ Effective July 1, 2019, Chapter 2019-113, Laws of Florida, reduced the minimum age for COs to 18 years of age.

⁵ Pursuant to Section 943.12, Florida Statutes, the CJSTC is responsible for establishing uniform minimum training standards for officers in various criminal justice disciplines.

Table 1
Correctional Officer Vacancy Rates by Region
As of February 2019

Region	Correctional Institutions	Vacancy Rate
Region 1	Apalachee, Calhoun, Century, Franklin, Gadsden Re-Entry, Gulf, Holmes, Jackson, Jefferson, Liberty, Northwest Florida Reception Center, Okaloosa, Santa Rosa, Wakulla, Walton	12.89%
Region 2	Baker, Columbia, Cross City, Florida State Prison, Hamilton, Lancaster, Lawtey, Madison, Mayo, New River, Putnam, Reception and Medical Center, Suwannee, Taylor, Tomoka, Union	15.78%
Region 3	Avon Park, Central Florida Reception Center, Desoto, Florida Women’s Reception Center, Hardee, Hernando, Lake, Lowell, Marion, Polk, Sumter, Zephyrhills	5.30%
Region 4	Charlotte, Dade, Everglades, Homestead, Martin, Okeechobee, South Florida Reception Center	10.37%

Source: Department records.

If critical need exists, State law⁶ authorizes the Department to employ non-certified COs on a temporary basis. COs who are not certified are considered trainees and are placed in Temporary Employment Authorization (TEA) status. CO trainees must begin basic recruit training within 180 days of hire, successfully complete basic recruit training within 18 months of beginning training and fulfill the CO certification exam requirement within 180 days of completing training.

COs were required to successfully complete 40 hours of in-service training per State fiscal year. Mandatory topics included firearms, first aid (including cardiopulmonary resuscitation (CPR)), defensive tactics, inmate relations, Americans with Disabilities Act compliance, and diversity training. Specific assignments, such as corrections emergency response teams and close management unit security, had additional training requirements.

The Department used the Employee Training Records and Instruction Network (E-Train) to track employee training information. Online training events were conducted through E-Train and the results of completed in-classroom events were recorded in E-Train.

Finding 1: Special Operations Team Training

The Department has established a variety of special operations teams whose mission is to seek positive resolution of crisis events, gain the safe release of hostages, preserve life, and protect the general public while providing for the safety and security of staff, inmates, and visitors. The Department’s special operations teams include Corrections Emergency Response Teams (CERTs),⁷ Crisis Negotiation Teams

⁶ Section 943.131, Florida Statutes.

⁷ A CERT is an emergency response team consisting of staff trained in special tactics, including the use of lethal force, for the intervention and resolution of life-threatening crisis events.

(CNTs),⁸ and Rapid Response Teams (RRTs).⁹ The specific mission of each team is to be accomplished by utilizing highly trained and dedicated staff and, accordingly, Department policies and procedures¹⁰ required that:

- CERT members complete an initial 80-hour CERT Academy within a calendar year of placement on the team and 24 hours of monthly training as a team. Additionally, designated CERT members were to complete other mission-critical training.
- CNT members complete an initial 80-hour Crisis Negotiation Training Academy within a calendar year of placement on the team and complete a minimum of 8 hours per month of crisis negotiation training.
- RRT members complete 96 hours of RRT training each calendar year. In addition, RRT members must be trained and certified in the use of handheld electronic restraint devices (stun guns) and stun shields.
- CERT and RRT members pass an annual physical assessment.

In addition to this training, all special operations team members must receive 40 hours of in-service training annually in accordance with the Department's Master Training Plan.

According to Department records, the Department assigned 53 staff to CERTs, 123 staff to CNTs, and 822 staff to RRTs during the period July 2017 through March 2019. As part of our audit, we performed inquiries of Department management and examined Department training records for 25 CERT members, 40 CNT members, and 40 RRT members. Our audit procedures disclosed that:

- Although we requested, the Department was unable to provide a complete listing of the Department staff who served on a CERT, CNT, or RRT during the period July 2017 through March 2019. While the Department was able to provide quarterly special operations teams rosters for some Department institutions, Department management indicated that not all rosters were available because the Department's retention schedule did not require rosters to be retained after each quarterly update.
- Department records did not always evidence that special operations team members completed required training. Specifically, Department records did not evidence that:
 - 1 CERT and 7 CNT members had completed Academy training.
 - 24 CERT and 32 CNT members had completed the required monthly team and crisis negotiation training, respectively, and 1 RRT member had not completed the required annual team training.
 - 3 CERT, 2 CNT, and 5 RRT members completed all required in-service training. For example, Department records for one CERT member did not evidence that the member completed any of the required in-service training courses during the 2017-18 fiscal year.
 - 4 RRT members had completed required stun gun and stun-shield training.
 - 2 CERT members had completed certain mission-critical training. To avoid the possibility of revealing Department training procedures, we are not disclosing in this report specific details

⁸ A CNT is an emergency team trained in hostage negotiations and crisis intervention. The purpose of the CNT is to accomplish non-forcible intervention for: hostage situations, barricaded subjects, or suicide intervention crisis events. CNT members, unlike members of other special operations teams, are not required to be COs certified by the CJSTC.

⁹ An RRT includes COs specially trained in less lethal and lethal munitions, chemical munitions, crowd control, and riot suppression.

¹⁰ Department Procedure 602.022, *Special Operations Teams*.

related to these two individuals' training. However, we have notified Department management of the specific details.

According to Department management, high turnover among local staff responsible for maintaining training records limited the Department's ability to provide records evidencing the completion of required training. Department management also indicated that, although CERT and CNT members are required to attend their respective academies within a calendar year of appointment to the teams, the total number of team vacancies frequently exceeds the total number of available seats in the annual training academies.

Absent record of all special operations team members, the Department's ability to ensure and demonstrate that team members complete required training is limited. Additionally, documentation demonstrating that all special operations team members complete required training would provide assurance that team members receive the training delineated in Department policy as necessary to carry out each team's respective mission.

Recommendation: We recommend that Department management enhance records retention controls to ensure that Department records identify all Department staff assigned to a special operations team and evidence the completion of each team member's required training. In addition, we recommend that Department management consider expanding training opportunities to help ensure that all team members timely receive required training.

Finding 2: CPR Instructor Certification

Department of Law Enforcement (DLE) rules¹¹ require first aid instructors providing training for criminal justice disciplines, including corrections, to possess and maintain an active CPR instructor certification from an approved entity. If an instructor's CPR certification expires, the instructor is not permitted to teach first aid courses until the certification is renewed.

As part of our audit, we examined Department records for 29 Department instructors who taught one or more CPR classes during the period July 2017 through January 2019 to determine whether the instructors possessed and maintained an active CPR instructor certification. Our examination disclosed that Department records for 12 instructors did not evidence that the instructors possessed an active CPR certification during the times certain CPR classes were taught.

In response to our audit inquiry, Department management indicated that Department policies and procedures did not require previous or expired CPR instructor certification records to be maintained. In addition, Department management indicated that some instructors had moved between Department training centers, which prevented the Department from detecting instructors whose certifications had expired.

Absent documentation demonstrating that Department first aid instructors possess and maintain an active CPR certification in accordance with DLE rules, the Department has limited assurance that the staff responsible for providing CPR training are appropriately certified.

¹¹ DLE Rule 11B-20.0014(2)(d)5., Florida Administrative Code.

Recommendation: We recommend that Department management enhance controls to ensure that first aid instructors possess and maintain an active CPR certification in accordance with DLE rules and that evidence of such certification is appropriately documented in Department records.

Finding 3: Drug and Alcohol Tester Training

State law¹² requires the Department to establish programs for random and reasonable suspicion drug and alcohol testing for inmates to identify inmates abusing drugs, alcohol, or both. Department policies and procedures¹³ required inmate drug tests to be conducted by a CO who had completed an online training course from the on-site testing device manufacturer and who received hands-on training from a Department-approved trainer.

We examined Department records for 40 COs who administered inmate drug tests at 12 correctional institutions on selected dates during the period July 2017 through January 2019 to determine whether the COs had completed the training required to administer drug tests to inmates. We noted that Department records did not evidence that 15 of the COs had completed the manufacturer's online training course for utilizing the on-site testing device or that 25 of the COs had received the required hands-on training. According to Department management, the requested documentation was not available due to several reasons, including a lack of communication regarding records retention requirements and training information not being entered into E-Train.

Proper training for COs performing inmate drug tests better ensures that the COs appropriately administer and interpret the results of on-site tests.

Recommendation: We recommend that Department management enhance training information entry and retention controls to ensure that Department records evidence that COs complete the manufacturer and Department training for utilizing on-site drug tests prior to performing tests.

Finding 4: Supervision of Correctional Officer Trainees

Department controls are intended to ensure, among other things, the appropriate supervision of CO trainees. Our audit disclosed that certain Department controls related to the supervision of CO trainees need improvement. We are not disclosing the specific details of the issues in this report to avoid the possibility of revealing Department controls. However, we have notified appropriate Department management of the specific issues.

Without adequate Department controls related to the supervision of CO trainees, risks to CO trainee and inmate safety and wellness are increased.

Recommendation: We recommend that Department management strengthen certain controls related to the supervision of CO trainees.

¹² Section 944.473, Florida Statutes.

¹³ Department Procedure 602.010, *Drug Testing of Inmates*.

Finding 5: Hiring Bonuses

For the 2017-18, 2018-19, and 2019-20 fiscal years, State law¹⁴ authorized the Department to award a one-time \$1,000 hiring bonus to newly hired COs at correctional institutions with a CO vacancy rate greater than 10 percent in the preceding calendar quarter. The bonus was payable at the later of the CO's hire date or date of CJSTC certification. Pursuant to State law, the Department required applicants applying for CO positions to sign an agreement to reimburse the Department for the hiring bonus received in the event that the CO voluntarily resigned prior to the end of their 2-year obligation period.¹⁵

Upon employment separation, the Department was to deduct amounts owed¹⁶ by a CO to the Department from the CO's final salary and leave payments. If such deductions were not made, or were insufficient, Department policies and procedures¹⁷ required the Department to notify the former employee in writing of: the reimbursement amount owed to the Department, the amount deducted from the employee's salary or leave payments, reimbursement options, and actions to be taken by the Department if reimbursement was not made. If no response was received within 30 calendar days of the initial written notification, the Department was to submit a second written notification to the former employee. Amounts not reimbursed within 60 days of receipt of the first written notification were to be sent to the Department of Financial Services (DFS) for collection in accordance with State law.¹⁸

According to Department records, during the period July 2017 through January 2019, the Department awarded 1,000 CO hiring bonuses totaling \$1,000,000. As part of our audit, we examined Department records for 25 COs who received hiring bonuses and voluntarily resigned their employment within the 2-year obligation period to determine whether the Department made reasonable efforts to timely recover hiring bonuses owed to the Department. Our examination disclosed that the Department had not made reasonable efforts to timely recover from 22 former COs hiring bonus amounts totaling \$21,578.¹⁹ Specifically, the Department took 34 to 472 days (an average of 190 days) after the COs' separation dates to send the initial written notification to the COs, and 19 of the notifications were sent subsequent to our audit inquiry. Additionally, as of March 31, 2019, the Department had not collected any of the \$21,578 owed or referred the delinquent accounts to the DFS for collection. In response to our audit inquiry, Department management indicated that appropriate Department staff were unaware of the hiring bonus repayment obligation requirement.

Delays in pursuing the collection of hiring bonuses owed to the Department increases the risk that owed amounts will not be collected.

Recommendation: We recommend that Department management enhance controls to ensure that:

- **Hiring bonus amounts owed to the Department are deducted from employees' final salary or leave payments.**

¹⁴ Chapters 2017-88, 2018-9, and 2019-115 Laws of Florida.

¹⁵ The obligation period begins on the date the CO is certified by the CJSTC and ends 2 years from the date of certification.

¹⁶ Such amounts may also include costs incurred by the Department for the CO's training per Section 943.16(2), Florida Statutes.

¹⁷ Department Procedure 208.017, *Reimbursement for Basic Recruit Training and Related Expenses*.

¹⁸ Section 17.20, Florida Statutes.

¹⁹ The Department recouped nominal amounts of the total bonus amounts owed by 2 of the COs through their final paychecks.

- **Former COs are timely notified of hiring bonus amounts owed to the Department.**
- **Amounts owed to the Department are timely referred to the DFS for collection in accordance with State law and Department policies and procedures.**

Finding 6: E-Train IT Access Privilege Controls

Information technology (IT) access privilege controls are intended to ensure the timely disabling of employee access to IT resources when access is no longer required. Our audit disclosed that Department controls related to the timely disabling of access privileges to E-Train when access is no longer required need improvement. We are not disclosing the specific details of the issues in this report to avoid the possibility of compromising Department data and IT resources. However, we have notified appropriate Department management of the specific issues.

Without adequate IT access privilege controls, the risk that access privileges may be misused is increased.

Recommendation: We recommend that Department management strengthen controls related to the timely disabling of E-Train IT access privileges.

SELECTED ADMINISTRATIVE ACTIVITIES

As part of our audit, we also evaluated selected Department administrative activities and controls, including those related to Florida Accounting and Information Resource Subsystem (FLAIR) access privileges, the collection and use of social security numbers, the retention of text messages, and mobile devices.²⁰

Finding 7: FLAIR Access Controls

Effective access controls include measures that restrict user access privileges to data and IT resources to only those functions that promote an appropriate separation of duties and are necessary for the user's assigned job duties. Agency for State Technology (AST)²¹ rules²² require all users be granted access to agency IT resources based on the principles of least privilege and a need to know determination and State agencies establish various access control measures, including requiring unique user identification for all computing devices.

The Department utilizes FLAIR to authorize the payment of Department obligations and to record and report financial transactions. Controls over employee access to FLAIR are necessary to help prevent and detect any improper or unauthorized use of FLAIR access privileges. Our examination of FLAIR access records for 358 user accounts active as of January 2019 and assigned to 347 Department

²⁰ Mobile devices are portable devices, such as laptop computers, smartphones, and tablets, that allow storage and transmittal of entity data.

²¹ Effective July 1, 2019, Chapter 2019-118, Laws of Florida, created the Division of State Technology within the Department of Management Services (DMS) and transferred the existing powers, duties, functions, personnel, records, property, and funds of the AST to the Division of State Technology.

²² AST Rule 74.2003(1)(a)1. and (d), Florida Administrative Code. Effective July 1, 2019, AST Rules, Chapter 74-2, Florida Administrative Code, were transferred to DMS Rules, Chapter 60GG-2, Florida Administrative Code. AST Rules, Chapter 74-2, Florida Administrative Code, were in effect during our audit period (July 2017 through January 2019).

employees disclosed that employees performing financial management functions had been granted update capabilities to incompatible functions in FLAIR and some employees shared user accounts. Specifically, we noted that:

- 28 user accounts had update capabilities to both the accounts payable and disbursement functions.
- 12 user accounts had update capabilities to both the accounts receivable and cash receipts functions.
- 13 user accounts had update capabilities to both the cash receipts and disbursement functions.
- 2 user accounts had update capabilities to both the disbursement and vendor Statewide functions.
- 10 user accounts had update capabilities to both the fixed asset custodial and fixed asset accounting functions.
- 1 access control custodian account was shared by 4 employees.

Additionally, we noted that, to mitigate the risk associated with providing certain employees update access privileges to both cash disbursements and the Statewide vendor setup functions, the Department processed for staff review reports of cash disbursements created by a user account to vendors created by the same user account. However, as several Department employees had access to multiple user accounts, the effectiveness of this control was limited. According to Department management, the incompatible access privileges noted on audit were necessary for the users to perform their assigned job duties.

The effective separation of incompatible financial management duties and use of unique user identification reduces the risk of unauthorized disclosure, modification, and destruction of Department data and better affixes responsibility for system activity to an individual.

Recommendation: We recommend that Department management limit user access privileges to FLAIR to promote an appropriate separation of duties and require that, where incompatible access privileges are necessary, effective compensating controls be established and documented. We also recommend that Department management enhance controls to ensure that all FLAIR activity is associated with a unique user account.

Follow-Up to Management's Response

Department management indicated in their written response that the Department concurs in part, and disagrees in part, with the audit finding. However, the Department's response also indicated that corrective actions would be taken to address the cited deficiencies or that corrective actions were not necessary because the incompatible access privileges no longer existed. Consequently, the finding and related recommendation stand as presented.

Finding 8: Collection of Social Security Numbers

The Legislature has acknowledged in State law²³ that a person's social security number (SSN) was never intended to be used for business purposes. However, over time the SSN has been used extensively for identity verification and other legitimate consensual purposes.

²³ Section 119.071(5)(a)1.a., Florida Statutes.

Recognizing that an SSN can be used to perpetrate fraud against an individual and acquire sensitive personal, financial, medical, and familial information, the Legislature specified²⁴ that State agencies may not collect an individual's SSN unless the agency is authorized by law to do so or it is imperative for the performance of that agency's duties and responsibilities as prescribed by law. Additionally, State agencies are required to provide each individual whose SSN is collected written notification regarding the purpose for collecting the number, including the specific Federal or State law governing the collection, use, or release of the SSN. The SSNs collected may not be used by the agency for any purpose other than the purposes provided in the written notification. State law further provides that SSNs held by an agency are confidential and exempt from public inspection and requires each agency to review its SSN collection activities to ensure the agency's compliance with the requirements of State law and to immediately discontinue SSN collection upon discovery of noncompliance.

We noted that the Department had not established policies and procedures for reviewing the collection and use of SSNs to ensure compliance with State law. Additionally, we examined the Department's electronic Security Access Request (SAR) network screen, used to request, remove, or change access to Department IT resources, including E-Train, and noted that the SAR network screen did not provide individuals the purpose for collecting their SSNs or the specific Federal or State law governing the collection, use, or release of the SSNs. According to Department management, the application used by the Department to process SARs required the collection of SSNs. Additionally, Department management indicated that Department policies and procedures and associated forms are reviewed at least annually and revised when necessary.

Effective controls, including policies and procedures addressing, in writing, the Department's review of the collection and use of individuals' SSNs for compliance with State law, would better ensure and demonstrate Department compliance with statutory requirements and reduce the risk that SSNs may be unnecessarily collected or utilized for unauthorized purposes.

Recommendation: We recommend that Department management establish policies and procedures for reviewing the collection and use of individuals' SSNs and take appropriate steps, including proper notification regarding the purpose for collecting SSNs, to demonstrate compliance with applicable statutory requirements for the collection and use of SSNs.

Finding 9: Retention of Text Messages

State law²⁵ requires the Department to maintain public records in accordance with the records retention schedule²⁶ established by the Department of State, Division of Library and Information Services. The schedule specifies that the retention period for electronic communications, including text messages, are based on the content, nature, and purpose of the messages. Some of the purposes include administrative correspondence (3 fiscal years), program and policy development correspondence (5 fiscal years), and transitory messages, which are to be maintained until obsolete, superseded, or administrative value is lost.

²⁴ Section 119.071(5)(a)2.a., Florida Statutes.

²⁵ Section 119.021(2)(b), Florida Statutes.

²⁶ State of Florida *General Records Schedule GS1-SL for State and Local Government Agencies*.

Department policies and procedures²⁷ prohibited the personal use of all Department-owned cellular telephones, except in the case of an emergency. As part of our audit, we evaluated the effectiveness of Department controls for the assignment and use of Department mobile devices, including cellular telephones. Our audit disclosed that Department controls for retaining text messages in accordance with the State records retention schedule need improvement. Specifically, according to Department management, the cellular providers utilized by the Department did not retain text messages and we noted that the Department had not otherwise established procedures to retain text messages in accordance with the State records retention schedule. Our examination of Department records for 25 selected Department-owned cellular telephones disclosed that, during the period January 2, 2019, through February 1, 2019, 2,538 text messages were sent from 13 of the 25 telephones, including 2 telephones used by a CO Major and a Correctional Probation Senior Officer to send 1,071 and 1,034 text messages, respectively.

In response to our audit inquiry, Department management indicated that the Department did not support text messaging except in emergencies when the only communications the Department may have at affected institutions is text messaging. Additionally, Department management indicated that the Department was searching for an affordable system or service that would capture and log all incoming and outgoing text messages from Department-owned mobile devices.

Absent the retention of text messages in accordance with State law, the Department's ability to provide access to public records is diminished.

Recommendation: We recommend that Department management establish procedures to ensure that text messages are retained in accordance with State law.

Finding 10: Mobile Devices

AST rules²⁸ require employees to verify in writing that they will comply with agency IT security policies and procedures prior to accessing IT resources. Department policies and procedures²⁹ required that, upon receipt of any mobile computing equipment,³⁰ employees complete a *Mobile Communication Equipment Log (Log)*³¹ acknowledging that the Department-owned mobile computing equipment had been assigned to the employee to conduct Department business and that the employee had read and understood Department policies and procedures related to the use of mobile computing equipment and the protection of sensitive data.

According to Department records, as of March 2019, the Department was responsible for 6,347 mobile devices. As part of our audit, we requested the completed *Logs* for 25 mobile devices (13 smart phones, 10 cellular telephones, and 2 tablets) issued to Department staff. In response to our audit inquiry, Department management indicated that the requested *Logs* could not be provided as they are generally

²⁷ Department Procedure 203.017, *Cellular Device Attestation*.

²⁸ AST Rule 74-2.003(3)(f), Florida Administrative Code.

²⁹ Department Procedure 206.002, *Mobile Computing Equipment and Wireless Communication*.

³⁰ Department Procedure 206.002 defined mobile computing equipment as Department computer equipment, such as cellular telephones, smart phones, and pagers, that had paging or wireless capabilities and were designed to be portable and easily moved around multiple locations.

³¹ Department form DC2-5013.

not retained once the relevant information about the device and user is input into vendor tracking Web sites. Notwithstanding Department management's response, while mobile device and user information was maintained on vendor tracking Web sites, although we requested, Department records were not provided to evidence that the employees assigned the mobile devices had read and understood Department policies and procedures related to the use of mobile computing equipment and the protection of sensitive data.

Absent the maintenance of completed *Logs*, the Department cannot demonstrate that mobile device usage requirements have been communicated to employees.

Recommendation: We recommend that Department management strengthen controls to ensure that completed *Logs* are retained for all mobile devices assigned to employees to conduct Department business.

Follow-Up to Management's Response

Department management indicated in their written response that, while they concurred with the audit finding, all recipients of a mobile communication device are aware of the usage requirements via language in the Department's employee handbook, the handbook is agreed to and accepted annually by all Department staff, and the use of mobile computing equipment is included in the handbook and employee signature acknowledges that Department staff have read, accept, and understand all policies in the handbook. However, documentation evidencing this process was not provided in response to our audit request.

PRIOR AUDIT FOLLOW-UP

The Department had taken corrective actions for the finding included in our report No. 2018-082 and applicable findings included in our report No. 2016-179.

OBJECTIVES, SCOPE, AND METHODOLOGY

The Auditor General conducts operational audits of governmental entities to provide the Legislature, Florida's citizens, public entity management, and other stakeholders unbiased, timely, and relevant information for use in promoting government accountability and stewardship and improving government operations.

We conducted this operational audit from February 2019 through October 2019 in accordance with 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 findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

This operational audit of the Department of Corrections (Department) focused on correctional officer recruitment, certification, and training. The overall objectives of the audit were:

- To evaluate management's performance in establishing and maintaining internal controls, including controls designed to prevent and detect fraud, waste, and abuse, and in administering

assigned responsibilities in accordance with applicable laws, administrative rules, contracts, grant agreements, and other guidelines.

- To examine internal controls designed and placed in operation to promote and encourage the achievement of management's control objectives in the categories of compliance, economic and efficient operations, the reliability of records and reports, and the safeguarding of assets, and identify weaknesses in those internal controls.
- To identify statutory and fiscal changes that may be recommended to the Legislature pursuant to Section 11.45(7)(h), Florida Statutes.

Our audit also included steps to determine whether management had corrected, or was in the process of correcting, the deficiency noted in our report No. 2018-082 and all applicable deficiencies noted in our report No. 2016-179 (Findings 2 through 7).

This audit was designed to identify, for those programs, activities, or functions included within the scope of the audit, deficiencies in management's internal controls, instances of noncompliance with applicable governing laws, rules, or contracts, and instances of inefficient or ineffective operational policies, procedures, or practices. The focus of this audit was to identify problems so that they may be corrected in such a way as to improve government accountability and efficiency and the stewardship of management. Professional judgment has been used in determining significance and audit risk and in selecting the particular transactions, legal compliance matters, records, and controls considered.

As described in more detail below, for those programs, activities, and functions included within the scope of our audit, our audit work included, but was not limited to, communicating to management and those charged with governance the scope, objectives, timing, overall methodology, and reporting of our audit; obtaining an understanding of the program, activity, or function; exercising professional judgment in considering significance and audit risk in the design and execution of the research, interviews, tests, analyses, and other procedures included in the audit methodology; obtaining reasonable assurance of the overall sufficiency and appropriateness of the evidence gathered in support of our audit's findings and conclusions; and reporting on the results of the audit as required by governing laws and auditing standards.

Our audit included the selection and examination of transactions and records. Unless otherwise indicated in this report, these transactions and records were not selected with the intent of statistically projecting the results, although we have presented for perspective, where practicable, information concerning relevant population value or size and quantifications relative to the items selected for examination.

An audit by its nature, does not include a review of all records and actions of agency management, staff, and vendors, and as a consequence, cannot be relied upon to identify all instances of noncompliance, fraud, abuse, or inefficiency.

In conducting our audit, we:

- Reviewed applicable laws, rules, Department policies and procedures, and other guidelines, and interviewed Department personnel to obtain an understanding of correctional officer recruitment, certification, and training processes.
- Obtained an understanding of selected Department information technology (IT) controls, assessed the risks related to those controls, evaluated whether selected general and application

IT controls for the Employee Training Records and Instruction Network (E-Train) were in place, and tested the effectiveness of the selected controls.

- From the population of 6,684 correctional officers (COs) hired during the period July 2017 through January 2019, examined Department records for 65 selected COs to determine whether the COs met the minimum qualifications for employment and were trained in accordance with State law, applicable rules, and Department policies and procedures.
- From the population of 9,910 COs who had been employed with the Department for 30 months or more as of January 31, 2019, examined Department records for 45 selected COs to determine whether the COs met the minimum qualifications for employment and were trained in accordance with State law and Department rules and policies and procedures. In addition, we examined Department records for 15 additional selected COs assigned to institutions housing close management inmates to determine whether the COs were trained in suicide prevention and other mental health topics in accordance with Department policies and procedures.
- From the population of 6,888 CO trainees who were on temporary employment authorization status at any point during the period July 2017 through January 2019, examined Department records for 40 selected CO trainees to determine whether the CO trainees met the minimum qualifications for employment and were trained and supervised in accordance with State law and Department policies and procedures. In addition, we examined Department records for 30 additional selected CO trainees to determine whether the CO trainees had been appropriately supervised in accordance with Section 943.131, Florida Statutes, and Department policies and procedures.
- From the population of 3,055 COs who voluntarily separated from Department employment during the period July 2017 through January 2019 and either had less than 2 years of continuous service upon separation or no discernible continuous service dates in People First, examined Department records for 50 selected COs (40 from the 2,934 COs with less than 2 years of continuous service and 10 from the 121 COs with no discernible continuous service dates) to determine whether the Department had recovered or made reasonable attempts to recover any reimbursements of training costs owed by the COs to the Department in accordance with State law and Department policies and procedures.
- From the population of 111 COs who received hiring bonuses totaling \$111,000 from the Department and subsequently voluntarily separated from Department employment during the period July 2017 through January 2019, examined Department records for 25 selected COs to determine whether the Department had recovered or made reasonable attempts to recover the hiring bonuses owed by the COs to the Department in accordance with State law and Department policies and procedures.
- From the population of 50 COs who administered drug tests at 12 correctional institutions during the period July 2017 through January 2019, examined Department records for 40 selected COs to determine whether the COs had completed the training required to administer drug tests to inmates in accordance with Department policies and procedures.
- From the population of 2,359 instructors who provided training to Department COs during the period July 2017 through January 2019, examined Department records for 40 selected instructors who taught high-liability courses (i.e., firearms, defensive tactics, first aid/CPR, or emergency vehicle operations) to determine whether the instructors were certified as general instructors by the Criminal Justice Standards and Training Commission and were certified to teach the high-liability courses in accordance with Department of Law Enforcement Rules, Chapter 11B-20, Florida Administrative Code, and Department policies and procedures.
- From the population of 27,286 classroom training courses (19,676 firearms training courses, 4,756 use of force training courses, and 2,854 CPR basics training courses) held during the period July 2017 through January 2019, examined Department records for 40 selected training courses

(20 firearms training courses, 10 use of force training courses, and 10 CPR basics training courses) to determine whether Department E-Train records were supported by appropriate documentation such as course rosters and student evaluations.

- From the population of 53 COs who, according to available Department records, served on a Corrections Emergency Response Team (CERT) during the period July 2017 through March 2019, examined Department records for 25 selected CERT members to determine whether the members completed CERT training in accordance with Department policies and procedures.
- From the population of 123 Department staff who, according to available Department records, served on a Crisis Negotiation Team (CNT) during the period July 2017 through March 2019, examined Department records for 40 selected CNT members to determine whether the members completed CNT training in accordance with Department policies and procedures.
- From the population of 822 COs who, according to available Department records, served on a Rapid Response Team (RRT) during the period July 2017 through March 2019, examined Department records for 40 selected RRT members to determine whether the members completed RRT training in accordance with Department policies and procedures.
- Evaluated Department actions to correct Findings 2 through 7 in our report No. 2016-179 and the finding noted in our report No. 2018-082. Specifically, we:
 - Performed inquiries of Department management and examined records related to Department monitoring of the inmate health care services provider contracts performed during the period July 2017 through June 2018 to determine whether the Department timely monitored the delivery of inmate health care services.
 - From the population of 65 Department on-site monitoring visits conducted during the period July 2017 through April 2018 at facilities served by the inmate health care services provider, and where a corrective action plan was required for deficiencies noted, examined Department records for 15 selected on-site monitoring visits to determine whether the Department timely followed up on deficiencies identified during monitoring and took timely and appropriate actions if the provider failed to correct deficiencies.
 - Performed inquiries of Department management and examined Department records to determine whether the Department submitted written reports in accordance with Section 287.057(13), Florida Statutes.
 - From the population of 7 monthly reports of non-formulary pharmaceuticals dispensed under the Department's inmate health care provider services contracts during the period July 2018 through January 2019, examined Department records for 3 selected reports to determine whether the Department was reducing the provider's maximum compensation for the cost of non-formulary pharmaceuticals in accordance with the terms of the contracts.
 - Performed inquiries of Department management and examined Department records related to the Department's inmate health care provider services contracts to determine whether the Department recovered the costs of certain goods and services incurred, including costs associated with radiotherapy services, on-site ambulatory surgery and other hospital services, telephone, facsimile, and EKG lines, re-accreditation, and medical supply inventory, in accordance with the terms of the contracts.
 - Performed inquiries of Department management and examined Department records related to the Department's inmate health care provider services contracts to determine whether contract monitoring costs were recovered in accordance with the terms of the contracts.
 - Examined the Department's 2016-17 and 2017-18 fiscal year annual reports to determine whether the reports included the information required by Sections 20.315(5) and 945.041, Florida Statutes.

- Reviewed applicable laws, rules, and other State guidelines to obtain an understanding of the legal framework governing Department operations.
- Performed inquiries of Department management, examined Department forms, and evaluated Department compliance with applicable statutory requirements for collecting and utilizing individuals' social security numbers.
- Observed, documented, and evaluated the effectiveness of selected Department processes and procedures for:
 - Managing Florida Accounting Information Resource Subsystem access privileges, settlement agreements, fixed capital outlay, and financial reconciliations.
 - The administration of purchasing cards in accordance with applicable guidelines. As of February 2019, the Department had 1,065 active purchasing cards. In addition, from the population of 1,560 purchasing card charges, totaling \$391,992, made during the period July 2017 through June 2018 with a specific vendor, we examined Department records for 40 selected purchasing card charges, totaling \$21,848, to assess the reasonableness and appropriateness of the charges.
 - The assignment and use of mobile devices with related costs totaling \$3,077,091 during the period July 2017 through January 2019. In addition, from the population of 6,347 mobile devices in the Department's inventory as of March 2019, requested Department records for 25 selected mobile devices issued to Department staff to determine whether employees completed a *Mobile Communication Equipment Log* acknowledging that they had read and understood Department policies and procedures related to the use of mobile computing equipment and the protection of sensitive computer data.
- Communicated on an interim basis with applicable officials to ensure the timely resolution of issues involving controls and noncompliance.
- Performed various other auditing procedures, including analytical procedures, as necessary, to accomplish the objectives of the audit.
- Prepared and submitted for management response the findings and recommendations that are included in this report and which describe the matters requiring corrective actions. Management's response is included in this report under the heading **MANAGEMENT'S RESPONSE**.

AUTHORITY

Section 11.45, Florida Statutes, requires that the Auditor General conduct an operational audit of each State agency on a periodic basis. Pursuant to the provisions of Section 11.45, Florida Statutes, I have directed that this report be prepared to present the results of our operational audit.



Sherrill F. Norman, CPA
Auditor General

MANAGEMENT'S RESPONSE



FLORIDA
DEPARTMENT of
CORRECTIONS

Governor
RON DESANTIS
Secretary
MARK S. INCH

501 South Calhoun Street, Tallahassee, FL 32399-2500

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March 20, 2020

Ms. Sherrill F. Norman
Office of the Auditor General
G74 Claude Pepper Building
111 West Madison Street
Tallahassee, Florida 32399-1450

Dear Ms. Norman:

In accordance with Section 11.45(4)(d), Florida Statutes, I am enclosing the Department's response to the preliminary and tentative finding and recommendation contained in the operational audit of the Department of Corrections, Correctional Officer Recruitment, Certification, and Training and Selected Administrative Activities. This response reflects the specific action taken or contemplated to address the finding cited in your report.

Thank you for the opportunity to review and provide comments. If you have any questions or need additional information, please contact Paul Strickland, Chief Internal Auditor, at (850) 717-3408.

Sincerely,

Mark S. Inch
Secretary

Enclosure

★INSPIRING SUCCESS BY TRANSFORMING ONE LIFE AT A TIME ★

**RESPONSE TO PRELIMINARY AND TENTATIVE AUDIT FINDINGS
CORRECTIONAL OFFICER RECRUITMENT, CERTIFICATION AND TRAINING AND
SELECTED ADMINISTRATIVE ACTIVITIES**

Finding 1: Department records did not evidence that all staff who served on a special operations team during the period July 2017 through March 2019 completed required training.

Recommendation: We recommend that Department management enhance records retention controls to ensure that Department records identify all Department staff assigned to a special operations team and evidence the completion of each team member's required training. In addition, we recommend that Department management consider expanding training opportunities to help ensure that all team members timely receive required training.

Agency Response: The Department concurs with the audit finding.

The department will complete the following:

- *Establish a retention schedule for DC6-2040, Special Operations Teams Quarterly Roster/Information Sheet. The Special Operations Teams Coordinator in Security Operations will be the custodian for archiving of historical records by institutions/year/quarter. (similar training records have a 25-CY retention schedule)*
- *Draft procedure language for an exemption for those staff unable to train due to: Military leave, FMLA, Extended Illness, or Alternate Duty status.*
- *Update the form DC6-2040 to include:*
 - *Canine section of academy training and staff rank.*

Finding 2: Department records for some first aid instructors did not evidence that the instructors possessed an active CPR certification during the times certain CPR classes were taught.

Recommendation: We recommend that Department management enhance controls to ensure that first aid instructors possess and maintain an active CPR certification in accordance with DLE rules and that evidence of such certification is appropriately documented in Department records.

Agency Response: The Department concurs with the audit finding.

The department will compose a new FDC procedure with specific language that will maintain the instructor certification and CPR card for five years.

Finding 3: Department records did not always evidence that correctional officers completed required training prior to administering drug and alcohol tests at Department institutions.

Recommendation: We recommend that Department management enhance training information entry and retention controls to ensure that Department records evidence that COs complete the manufacturer and Department training for utilizing on-site drug tests prior to performing tests.

Agency Response: The Department concurs with the audit finding.

The Department will:

- *Collaborate with Professional Development to establish a standard E-train class code for "end-user"*

- Hands-on Drug & Alcohol Tester training.*
- *Initiate retraining of Drug & Alcohol Testing for staff who cannot produce their original training records (online & sign-in sheets). These records will be entered in E-train. A copy of the online training certificate and e-train record will be forwarded to the Inmate Drug Testing Coordinator in Security Operations who will be the custodian for archiving of historical records by institution & year.*
 - *Generate a quarterly report reconciling staff training at a Regional and Institutional level.*

Finding 4: Certain Department controls related to the supervision of correctional officer trainees need improvement.

Recommendation: We recommend that Department management strengthen certain controls related to the supervision of CO trainees.

Agency Response: The Department concurs with the audit finding.

The Department concurs with the audit finding and will strengthen certain controls related to the supervision of CO trainees.

Finding 5: Department processes for recovering correctional officer hiring bonuses from employees who did not meet their service obligation to the Department need improvement.

Recommendation: We recommend that Department management enhance controls to ensure that:

- Hiring bonus amounts owed to the Department are deducted from employees' final salary or leave payments.
- Former COs are timely notified of hiring bonus amounts owed to the Department.
- Amounts owed to the Department are timely referred to the DFS for collection in accordance with State law and Department policies and procedures.

Agency Response: The Department concurs with the audit finding.

- *OHR has transitioned from the Department's CO TEA excel spreadsheet to a SharePoint Log utilized to track employees hired as trainees to include tracking of the hiring bonus from eligible employees. This allows the Payroll Representative to be notified upon the employee's separation.*
- *Former CO's who owe the Department for the hiring bonus will receive their first reimbursement notice within 15 days from their date of separation. Second notices will be sent 30 days after the first reimbursement notice. Former CO's who have not reimbursed the Department in full for the hiring bonus within 60 days of separation from the Department will be forwarded to Finance & Accounting for referral to DFS for collection.*

Finding 6: Department controls for timely disabling access privileges to the Employee Training Records and Instruction Network need enhancement.

Recommendation: We recommend that Department management strengthen controls related to the timely disabling of E-Train IT access privileges.

Agency Response: The Department concurs with the audit finding.

Currently the FDC Office of Information Technology (OIT) has a department procedure with instruction for the removal of access. The instruction states that staff will complete the Security Access Request

(SAR) within 3 business days. Currently OIT is in the process of developing a new SAR system to strengthen response and controls.

Finding 7: Department controls over employee access to the Florida Accounting Information Resource Subsystem need improvement to better affix responsibility for system activity to an individual and to reduce the risk of unauthorized disclosure, modification, or destruction of Department data.

Recommendation: We recommend that Department management limit user access privileges to FLAIR to promote an appropriate separation of duties and require that, where incompatible access privileges are necessary, effective compensating controls be established and documented. We also recommend that Department management enhance controls to ensure that all FLAIR activity is associated with a unique user account.

Agency Response: *The Department concurs in part, and disagrees in part, with the audit finding.*

As a result of the audit process, FLAIR Access Control improvements were identified and made prior to this response. Department management remains unclear on how a user could benefit or cause harm based upon the information provided. Please note below our responses to your findings as well as an update on the actions taken.

28 user accounts had update capabilities to both the accounts payable and disbursement functions. *The Department disagrees that this should be a finding. To make any disbursement, a valid vendor id is required. With cash disbursements update access, users can process transactions with or without a connection to the subsidiary file for encumbrances or payables. Processing the transaction from a payable does not add any additional legitimacy to the payment nor does it allow the payment to proceed without a valid vendor id. Further, DMS recently issued a document to all agencies going on the STMS system titled FLAIR T9 Access Controls that states FLAIR Access Control accounts with site code "T9" should be set up with both DB and AP (attached). However, no users currently have AP access with the exception of the custodian account. Users requiring AP access to establish payables will temporarily have their DB access disabled.*

12 user accounts had update capabilities to both the accounts receivable and cash receipts functions. *The Department disagrees that this finding creates a less reliable system. A user with cash receipts access could still record a receipt incorrectly regardless of whether there is an associated receivable. The bank reconciliation would identify any variance in either case. Regardless, the Department will split the six Revenue users into four CR users and two AR users. If a shortage of users arises due to leave or vacancies, users may temporarily have one access type disabled and the other made active.*

13 user accounts had update capabilities to both the cash receipts and disbursement functions. *The Department disagrees that this process creates a less reliable system. A cash receipt variance would be identified in the bank reconciliation and the disbursement would have to be made to a valid vendor id. The disbursement would be summarized on a voucher schedule. All our voucher numbers are accounted for and all line items on a voucher require support documentation which, for a disbursement is generally a vendor invoice. The vouchers are further reviewed by a team leader or supervisor in each disbursement unit. However, no users currently have CR & DB access with the exception of the custodian account.*

2 user accounts had update capabilities to both the disbursement and vendor Statewide functions. *The Department disagrees that this is a proper finding. DFS Agency Addressed No. 26, 2012-2013 (attached) allows for users to be assigned both roles and DFS monitors and reports on any inappropriate activity. No inappropriate activity has ever been reported. However, no users currently have both DB & VS.*

10 user accounts had update capabilities to both the fixed asset custodial and fixed asset accounting functions. The Department disagrees that this is a proper finding. The users do not have access to control ordering of items or scheduling delivery. For the record to show in the fixed asset custodial module, a separate user with DB access would have had to have recorded payment and their process for payment includes matching the invoice to purchase order and obtaining confirmation of receipt from the receiver authorized to complete receipt by the purchase order. Regardless, the Department will split the four Property users into two FC users and two FA users. If a shortage of users arises due to leave or vacancies, users may temporarily have one access type disabled and the other made active.

1 access control custodian account was shared by 4 employees. The Department disagrees with this finding. The custodian account is necessary to grant access to FLAIR users and requires update access to all fields not limited/prohibited by DFS (Prohibited functions - A&A - Custodian, MV – Minority Vendor, SW – SWFS, RE – Recurring Paymts) and (Inquiry Only functions - CI – Contract Info, VS – Vendor Statewide, ET – EFT Authorization, PW – Paid Warrant Index, TR – Detail Transaction, SA – Account Balance, VA – Vchr Audit Summary, TH – Employee Travel Hist, VH – Vendor History. However, an additional custodial account has been created. The two custodial accounts will not be shared.

Finding 8: The Department had not established policies and procedures for reviewing the collection and use of social security numbers (SSNs) to ensure compliance with State law. In addition, the Department did not always provide employees the purpose for collecting their SSN or the specific Federal or State law governing the collection, use, or release of the SSNs.

Recommendation: We recommend that Department management establish policies and procedures for reviewing the collection and use of individuals' SSNs and take appropriate steps, including proper notification regarding the purpose for collecting SSNs, to demonstrate compliance with applicable statutory requirements for the collection and use of SSNs.

Agency Response: *The Department concurs with the audit finding.*

The department will be drafting language for inclusion in agency procedure 101.001 Section (9)(d) to state as follows:

Solicitation of Social Security Numbers: *in accordance with section 119.071 (5)(a)2.a. Florida Statutes, each FDC form that includes the social security number of an employee, contractor, volunteer, visitor, or inmate will be reviewed during the annual procedure review process to ensure the necessity for the continued solicitation/use of the social security number. This review will ensure that the collection of a Social Security Number is either specifically authorized by law if it is imperative for the Department's duties and responsibilities as required by law.*

Finding 9: Department procedures had not been established to ensure that text messages are retained in accordance with State law.

Recommendation: We recommend that Department management establish procedures to ensure that text messages are retained in accordance with State law.

Agency Response: *The Department concurs with the audit finding.*

The Office of Information Technology (OIT) previously responded that verification had been received from vendors currently being utilized that they do not keep text message content. The Office of Information Technology will research possible tools and procedures in an effort to comply with state law. Additionally, the Department will create procedures regarding the use of and retention of text messages.

Finding 10: Department records did not evidence that employees assigned mobile devices had read and understood Department policies and procedures related to the use of mobile devices and the protection of sensitive data.

Recommendation: We recommend that Department management strengthen controls to ensure that completed *Logs* are retained for all mobile devices assigned to employees to conduct Department business.

Agency Response: *The Department concurs with the audit finding.*

The Office of Information Technology provided response that all recipients who are in receipt of a mobile communication device are aware of the usage requirements due to language in the FDC Employee Handbook. The handbook is agreed to and accepted annually by all FDC staff. The use of mobile computing equipment is included in the handbook and employee signature acknowledges that FDC staff have read, accept and understand all policies in the handbook. It should be noted that the FDC form #DC2-5013 previously required a signature but is no longer needed due to the signature acknowledgement of the FDC Employee Handbook containing the mobile computing equipment language. In addition, the FDC Office of Administration will be contacting the Department of State to inquire as to the appropriate retention schedule of mobile computing logs as noted and requested in this finding.