



**DEPARTMENT OF CORRECTIONS**  
**Institutions**



<b>Title:</b>	<b>Operations Division Peer Audits</b>	<b>DOC Policy: 40.1.4</b>
<b>Effective:</b>	<b>4/1/06</b>	<b>Supercedes: 2/1/03</b>
<b>Applicability: Institutions</b>		
<b>Directives Cross-Reference: None</b>		
<b>Attachments: None</b>		

**I. PURPOSE**

To provide guidelines related to the Operations Division Peer audits that are used to measure facility security and operational standards on a department-wide level.

**II. DEFINITIONS**

- A. Operations Division Audit Instrument: A printed document that acts as an aid to security auditors during the course of an audit to define standards, relate issues to specific policy statements, and record observation/notes of the auditor.
- B. Peer Audit Team Leader: An Institution Security Manager or Assistant Superintendent of Security designated by the Chief of Security directing activities at a Department of Corrections facility.
- C. Peer Auditor: A DOC security management employee trained in auditing according to designed, approved curriculum, who acts as a participant in a DOC Operations Division Peer audit, and is responsible for the final audit document.
- D. Security and Operational Standard: A type or degree of requirement in operations which implies the highest form of excellence in security and operational practices. Standards are found in policy or mutually acceptable practices in the profession.
- E. Internal Audit: A process in which each facility continuously monitors throughout the audit year the state of facility readiness for any scheduled or unannounced audit.

**III. POLICY**

The Department of Corrections shall provide a high level of safety and control through quality security and operational standards and methods to measure compliance.

**A. Audit Philosophy and Goals**

1. Provide a non-threatening, valuable management service to each facility administration.
2. Provide each facility a measurement of compliance with departmental policy.
3. Provide a forum of constructive, proactive approach among peers in the profession in search for more effective and efficient methods of operating security and operational programs.
4. Provide professional development activity for staff.
5. Provide a pathway for the expression of ideas for improvement in department policy.
6. Provide consistency and standardization of security, operations, equipment, policy, and procedures.

**B. Provision of Auditors and Audit Coordinators**

1. Auditors may be any DOC security management employee who has been trained in peer audit procedures.
2. Audit Team Leaders will be any DOC Institution Security Manager or Assistant Superintendent of Security with experience as a peer auditor. Audit Team Leaders will be designated by the Chief of Security and identified on the audit schedule.
3. A schedule of peer audits shall be created by the Chief of Security and communicated to the Director and Assistant Director for Operations. Operation Division Peer audits shall be performed annually. The schedule shall include the dates and locations of the audits, list the names of the audit team leaders, and the auditors for the team. The Chief of Security shall maintain the master schedule and provide timely adjustments.

**C. Audit Process**

1. Facilities will be notified of the audit time frame and team members in advance through publication of the audit schedule. It will be the responsibility of the facilities and team members to notify the Chief of Security of any problems or issues related to the schedule in order to allow for timely adjustments.
2. Facilities will provide the audit team with a set of policy procedures, post order manuals and a copy of last years audit results and any variances granted. These and other documents will be reviewed during the audit process. A room will be made available to the team

at the audit site. Staff will be available to facilitate access to any/all areas of the facility and to answer specific operational questions. The internal audit preparation is designed to support a quality audit result and to follow-up on the previous years after-action plan.

3. An entrance and exit interview will be schedule with the audit team and the facility management team.

**D. Audit Reporting**

1. All conclusions of auditors shall be indicated in the report. The audit report shall be compiled from the audit instrument and observations of the audit team, which are verbally communicated to administration during the out briefing at that conclusion of the site visit. The audit report will be due to the Chief of Security, and superintendent within 30 days of site visit.
2. Within 30 days of receipt of the audit report, the facility shall address discrepancies, make recommendations, and complete an after-action plan. The after-action plan will be submitted to the Chief of Security.

**E. Training**

1. Operations Division Peer audits will be proceeded by training review.
2. Training shall address DOC peer audit philosophy, goals, the role of auditors, the benefits of security auditing, and the overall process. Classroom training shall be accompanied by hands-on auditing experience.

**III. IMPLEMENTATION**

This policy will be adopted immediately without further modification.