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**INTERNAL AUDIT DEPARTMENT**

Audit Report  
on

**Staffing and Coverage**

May 2006

## **Staffing and Coverage**

### **Audit Team**

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## INTERNAL AUDIT DEPARTMENT

TO: Texas Youth Commission Board Members  
Pete Alfaro, TYC Board Chair  
Nicholas T. Serafy, Jr., TYC Board Vice Chair  
Patsy Reed Guest, TYC Board Member  
Don Bethel, TYC Board Member  
Bill Mahomes, Jr., TYC Board Member  
Gogi Dickson, Ph.D., TYC Board Member  
Juan Sanchez Munoz, TYC Board Member

Dwight Harris, Executive Director, Texas Youth Commission

FROM: Karin Hill, Internal Audit Director

DATE: May 18, 2006

RE: Results of the Staffing and Coverage Audit

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Attached for your approval is our report on the Texas Youth Commission's (TYC's) audit of Staffing and Coverage. The objectives of this audit were to: evaluate the relationship of key factors and determine their impact on coverage; and to determine whether Case Manager caseloads are commensurate with staffing levels.

Staffing and coverage levels are a key factor in the agency maintaining the safety of the youth as well as a therapeutic environment that allows them to progress toward rehabilitation. The agency's direct-care staff, its Juvenile Correctional Officers (JCOs) and Case Managers, bear the primary responsibility for ensuring the safe operation of the facilities and the rehabilitation of the youth in TYC's care. Without sufficient JCO staff levels, youth may not feel safe enough to actively participate in treatment. Without sufficient Case Management staff, youth may not receive the time and attention necessary for them to progress through the Resocialization program.

The agency's expectations cannot be met with current staffing levels. For both JCO staff and Case Managers, a variety of factors result in decreased staff availability to supervise and provide services to the youth. This results in higher JCO to youth ratios and a decreased ability to provide case management services, both of which can impact youth progress through Resocialization.

Generally accepted staffing ratios cannot be achieved with the JCO staff available. For most facilities, the agency considers acceptable JCO-to-youth ratios to be 1 to 12 on the morning shift, 1 to 8 on the afternoon shift, and 1 to 16 on the overnight shift. With the amount of time JCO positions are unavailable for coverage due to leave, training, the time it takes to fill vacancies, and other factors, most institutions are unable to meet these ratios.

## **Audit of Staffing and Coverage**

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The relief factor was developed to determine the number of staff needed to provide adequate coverage for the agency's 24-hour, 7-day-a-week operations, taking the above factors into consideration. However, the current relief factor is based on outdated leave benefits and fewer training requirements. In addition, it does not account for the impact of JCO vacancies on the ability to provide coverage. An updated relief factor that reflects current operations would allow management to determine how many staff are needed to provide adequate JCO-to-youth ratios and maintain a safe and secure environment.

To better manage JCO coverage, agency management needs information on actual coverage ratios. JCO staff have a variety of additional job duties that take them away from dorm coverage, including transporting youth off campus and escorting them on trips to various specialists on campus. While these staff are still supervising a small number of youth, they are not providing coverage for the larger number of youth back on their dorm, diluting the actual coverage. The agency tracks coverage at the global level and therefore does not capture the impacts of these additional job duties. Unless actual coverage ratios are tracked, management cannot determine how actual ratios compare to what should be possible given the number of JCOs assigned to a facility.

Due to large caseloads and additional duties, it is difficult for Case Managers to meet agency expectations. As with the JCO staff, a number of factors result in Case Managers being unavailable to complete their primary job responsibilities. As a result, Case Managers do not have enough time to complete their work in accordance with the Case Management Standards. While it is estimated that Case Managers should be able to meet the Standards with a caseload of 16 or fewer youth, 65 percent of Case Managers have caseloads that exceed 16.

Management concurs with the results of our work and has provided responses to the recommendations, which are included in the report. We appreciate the cooperation and assistance provided to us during our work.

cc: Linda Reyes, Ph.D., Deputy Executive Director

Staffing and Coverage levels are a key factor in the agency maintaining the safety of the youth as well as a therapeutic environment that allows them to progress toward rehabilitation. The agency's direct-care staff, its Juvenile Correctional Officers (JCOs) and Case Managers, bear the primary responsibility for ensuring the safe operation of the facilities and the rehabilitation of the youth in TYC's care. Without sufficient JCO staff levels, youth may not feel safe enough to actively participate in treatment. Without sufficient Case Management staff, youth may not receive the time and attention necessary for them to progress through the Resocialization program.

Concerns over Case Managers' caseload sizes were raised as a part of the Case Management audit released in May 2005. Whether JCO staffing levels are adequate for safety is an ongoing agency concern.

This report presents the results of our audit of Staffing and Coverage. The objectives of this audit were to: evaluate the relationship of key factors and determine their impact on coverage; and to determine whether Case Manager caseloads are commensurate with staffing levels.

To accomplish these objectives we: interviewed and surveyed staff in Central Office and the field; calculated the impact of various types of leave, training and vacancies on the hours staff are available to do their job; reviewed the assumptions the agency uses in determining the number of JCO staff needed to operate its facilities; and conducted a time study of Case Managers. Data on leave, training and vacancies covered FY 2005. The Case Manager time study was conducted during December 2005 and January 2006.

The Al Price State Juvenile Correctional Facility was removed from the data used for this work. Hurricane Rita forced the evacuation and subsequent repairs of this institution making it difficult to obtain staffing information needed to complete the audit work. In addition, while halfway houses experience the same challenges as institutions in regards to staffing and coverage, they were excluded from this audit due to their size. The audit work focused on JCO I-Vs and Case Managers in the institutions.

This audit was conducted in accordance with the *International Standards for the Professional Practice of Internal Auditing* and with *Generally Accepted Government Auditing Standards*.

### **The relief factor does not accurately reflect current operations.**

Because TYC facilities operate 24 hours a day seven days a week, it is necessary to determine the number of staff needed to cover 'round the clock operations considering that some JCO staff will inevitably be unavailable to work for a variety of reasons including leave, training, and meetings. To account for the time JCO staff are unavailable, the agency developed what is known as the "relief factor". Given that staff do not work the 2080 hours budgeted to each Full Time Equivalent (FTE), the relief factor attempts to quantify the amount of time each JCO will actually be available to

provide coverage during the course of the year based on a set of assumptions regarding the things that take JCO staff away from work and for how much time. The current relief factor was developed approximately 20 years ago and has not been updated since to reflect changes in the agency’s operational environment.

**There are several areas where the information in the relief factor is outdated.** Since the origination of the relief factor, a number of components have changed. Some of these are due to changes in agency operations and others to changes in State benefits.

- **Leave** - Three types of leave play a major part in the current relief factor – annual, sick and holiday – all of which have changed since the establishment of the relief factor. Staff accrue annual leave based on their tenure with the state, ranging from seven to 19 hours per month, with a median JCO accrual of nine hours. Staff also earn eight hours of sick leave per month and potentially 17 holidays throughout the year. The current relief factor does not include these types of leave at the amounts JCO staff actually accrue; therefore underestimating the time JCO staff are potentially unavailable for dorm coverage.

<b>Leave accruals for JCOs</b>		
	<b><u>In current relief factor</u></b>	<b><u>Accrual</u></b>
Annual Leave	96 hrs	108 hrs
Holiday Leave	120 hrs	136 hrs
Sick Leave	60 hrs	96 hrs
Source: Internal Audit analysis		

- **Training** - Increases in agency training requirements also contribute to the relief factor not accurately reflecting the time staff are unavailable. The annual training requirement for every JCO has increased five hours. More significant is the change in Pre-Service training requirements. Pre-Service is the initial training required for new direct-care staff and therefore its impact varies based on the turnover rate. Since the development of the relief factor, the Pre-Service requirement has increased from 40 hours to 73. In addition, 25 hours of Resocialization training for new staff has been added.

How training is included in the relief factor needs to be re-examined as training requirements continue to evolve and change. For instance, the agency is currently working to implement the Professional Development Academy (PDA) for training new staff. The PDA curriculum will cover what is currently included in Pre-Service as well as Resocialization. For JCO staff this will represent a change from the current 97 hours of Pre-Service and Resocialization to 280 hours – almost a three-fold increase in upfront training.

The amount of time new staff are out for initial training also needs to be examined in light of the agency’s turnover rate. Currently, the relief factor accounts for a 35 percent turnover rate. However, since the relief factor was created, the Legislature has

included JCO turnover rate as one of the agency's performance measures with a target rate of 25 percent. In FY 2005, the actual turnover rate for JCOs was significantly higher than this target - approximately 41 percent. While increases in turnover do not have a significant impact on the time staff are in training under the current training requirements, when initial training is expanded to 280 hours, the impact of increases or decreases in turnover will be larger.

- **Other** - Dorm meetings are the vehicle used to communicate policy changes and provide informal training to JCO staff. The agency's expectation for these meetings has changed since the creation of the relief factor. Rather than weekly meetings, JCO staff now attend one two-hour long dorm meeting per month. While the time required has been reduced, the longer meeting allows for more thorough review and discussion.

**Changes in law and agency policy have increased the amount of time JCO staff are not available for coverage.** In addition to the changes discussed above, additional categories of leave need to be added to the relief factor so that it more accurately reflects the time JCO staff are not available for dorm coverage. The most significant of these is Family and Medical Leave Act (FMLA) leave. The Family and Medical Leave Act was passed into law in 1993. The Act allows staff that have been with the agency at least 12 months to take up to 12 weeks of leave for: the birth or adoption of a child, to care for a spouse, child or parent with a serious health condition, or because of a serious health condition that makes the employee unable to perform one or more of the essential functions of their job. Additionally, the agency also created two similar types of leave called Non-FMLA and parental leave, giving the same type of benefits to some TYC employees who are not yet eligible for FMLA Leave. Collectively these three types of leave result in each JCO position being unavailable approximately 62 hours per year.

As long as the agency struggles with turnover, excessive vacancies will impact coverage. While turnover reflects the number of staff who leave TYC, vacancies are the amount of time it takes to fill vacated positions. While vacancies have a significant impact on JCO available time, an allowance for vacancies is not included in the current relief factor. While many institutions have applicant pools of potential JCO staff, it still takes time to fill a vacant JCO position. The high turnover rate for JCO staff contributes to a corresponding high amount of time these positions are vacant. After leave, the hours JCO positions are vacant account for the second largest percentage of JCO time unavailable – approximately 110 hours per year per JCO FTE. In FY 2005 JCO positions were vacant for 439,632 hours - 211 FTEs. Including vacancies in the relief factor is necessary to ensure that it reflects the impact they have on coverage.

The configuration of some of the agency's newer dorms has requirements that impact the availability of staff to assist in coverage. Many of TYC's institutions have dorms that are laid out in open bays with a central control picket where staff can monitor the bays through windows and security cameras. Some TYC facilities use dorm JCO staff to cover these dorm pickets while other facilities use other staff, usually Security staff. When JCO staff are used to cover the pickets they cannot be counted in coverage as they are not

allowed to leave the picket except in extreme emergency situations. While this does not affect all facilities, for those that it does affect this time spent on picket duty can account for a significant amount of time JCO staff are unavailable to provide coverage – as much as 23 percent.

Finally, the agency has allocated a set number of Alternate Work Assignments (AWAs) at each institution based on the total number of staff assigned. These positions can be used when JCO staff are injured on the job and are able to work, but are not physically ready to provide dorm coverage. While the impact of AWAs is limited at about one workday per JCO per year, it should be included in the relief calculation along with the other factors listed above to ensure the relief factor accurately reflects the time JCO staff are unavailable for coverage.

### **Generally accepted staffing ratios cannot be achieved.**

While TYC does not have target staff-to-youth ratios established in policy, there is a generally accepted staffing pattern that is considered the minimum to ensure safety at most facilities. This pattern sets a JCO to youth ratio of 1 to 12 on the morning shift while youth are awake and primarily in school, taking into account that while the youth are in school there are also teachers present to help with maintaining safety; 1 JCO to 8 youth for the afternoon shift when youth are on the dorm for most of this shift and more JCO staff are required to maintain a safe environment; and 1 JCO to 16 youth on the overnight shift while the youth are generally sleeping. However, for youth in the agency's Mental Health Treatment Program and Anger Management Program richer JCO staffing is required and the agency has allocated more JCO positions to these facilities to ensure a lower number of youth per JCO staff.

**Based on actual staff and youth data, there are not enough JCO staff to operate at the agency's acceptable level for most institutions.** Due to turnover and vacancies, institutions often operate with fewer staff than they are budgeted for, which results in JCO staff having to cover more youth than anticipated. In FY 2005, the agency's residential treatment center for youth with high mental health needs had the richest achievable staffing ratio of 1 JCO to 8.37 youth. For the remaining institutions, the average ratio of JCOs to youth per shift using actual staff and youth data ranged from 1 JCO to 11.8 youth to 1 JCO to 16.39 youth, with most institutions having average ratios higher than the generally accepted staffing ratio. To operate the institutions closer to the accepted ratios, JCO staff work overtime. In FY 2005, JCO staff worked 86,355 hours of overtime – the equivalent of 41.5 FTEs.

Actual average daily population (ADP) for FY 2005 was significantly different from the expected ADP agency-wide. Half of the institutions had ADP lower than anticipated and half had ADP higher. This impacted the achievable ratios for each institution. Different institutions operate under different circumstances in terms of vacancy, overpopulation, and other factors that impact JCO availability. Accordingly their achievable staffing

ratios differ from the agency-wide number. Individually, nine of the 13 institutions reviewed did not have enough staff to run the 1:12, 1:8, 1:16 staffing pattern.

**Most institutions are not budgeted enough staff to meet the generally acceptable ratios.** The agency allocates each institution a fixed number of JCO positions. Based on the budgeted JCOs and projected ADP (provided by the Legislative Budget Board), the achievable ratio agency-wide varied among the institutions. The agency's facility for youth with high mental health needs was budgeted for the richest staffing ratio – 1 JCO to 8.17 youth. The remaining institutions had ratios ranging from 1 JCO to 10.37 youth to 1 JCO to 14.88 youth. Individually, seven of the 13 institutions reviewed were not budgeted enough JCOs to meet the 1:12, 1:8, 1:16 staffing pattern for the number of youth they expected to serve during FY 2005.

While overall ADP was lower than projected in FY 2005, many institutions experienced overpopulation throughout the year. This further stressed their coverage ratios and most institutions were not able to operate at the agency's generally accepted staffing pattern.

**Management needs more information on how other routine JCO duties dilute dorm coverage.**

Additional duties are assigned to JCO staff that can impact dorm coverage on a moment-to-moment basis, but are not reflected in overall coverage. There are times when JCO staff are on campus and available for work, but they are performing job duties that take them away from actual dorm coverage. While these staff may be providing coverage for some youth, it is at the expense of the coverage ratio over the larger group on the dorm.

**A variety of additional tasks take JCOs away from dorm coverage.** Juvenile Corrections staff, both in the Central Office and the field, report that JCOs are often assigned to transport youth off campus, both locally and on out-of-town trips, as well as on campus to take small numbers of youth to the infirmary or to appointments with various specialists. While these staff are technically providing coverage for one or two youth, the coverage ratio back on their dorm is negatively impacted.

**While routine JCO duties may dilute dorm coverage, it is difficult for them to rise to the level where they impact overall coverage ratios.** To change the achievable staff-to-youth ratio by one (i.e. from 1:12 to 1:13) requires decreasing the available time per JCO by approximately 120 hours per year. Among the components recommended for inclusion in the relief factor, only annual leave, holiday leave, sick leave, and vacancies are close to having that kind of individual impact.

However, while it is difficult for these additional duties to rise to the level where they impact the overall staffing level for the institution, for that time when the JCO staff is actually pulled away from the dorm it can significantly impact the actual staff-to-youth ratio on that dorm. This further stresses the importance of fully understanding the level of these additional requirements.

**The agency does not currently track actual JCO-to-youth ratios.** While the achievable ratios throughout this report are based on actual data, and do include many of the things that take JCO staff away from dorm coverage, circumstances at a facility or dorm may result in an actual coverage ratio that is different from what can ideally be achieved. While the agency currently tracks JCO-to-youth ratios at a high level, management does not get information on actual JCO-to-youth ratios and therefore cannot demonstrate the impact various activities have on actual coverage.

Knowing actual coverage ratio data would enable agency management to compare actual ratios to achievable ratios and identify facilities that may be in need of assistance in managing the factors that impact dorm coverage.

### **It is difficult for Case Managers to meet agency expectations with current resources.**

In FY 2004, Rehabilitation Services implemented revised Case Management Standards (the Standards), which detail how case management activities should be conducted, provide guidance on completing the required documentation, and provide valuable references and accountability information. In May 2005, the Internal Audit Department completed an audit on Case Management, which identified that the Standards were not being met. The large size of Case Manager caseloads and time spent on non-case management duties were raised in that audit as potential factors that prevented Case Managers from completing work that meets the Standards.

**Leave, training requirements, and vacancies impact the time Case Managers have available to complete case management duties.** While each budgeted FTE equals 2080 hours per year, staff are not available to work for all of those hours due to a variety of factors. For example, staff take leave and attend training, taking them away from their primary job duties. Additionally, when a position is vacant due to turnover, it reduces the amount of time that FTE is available for providing case management services to the youth. An analysis of the factors that result in Case Managers being unavailable to work, identified that in FY 2005 agency-wide, each institutional Case Manager FTE was unavailable 655 of the 2080 hours – approximately one-third of the time.

The factors that impact Case Manager availability are similar to those described for the JCO staff with some differences. Case Managers have a slightly longer median tenure and accrue 10 hours of annual leave per month rather than the nine accrued at the median JCO tenure. Case Managers are also currently required to complete more Resocialization training than JCOs – 44 hours within their first 60 days on the job. Finally, Case Manager positions are impacted more by vacancy. Case Manager positions can be harder to fill due to the job requirements. A college degree is required for Case Managers and for some specialized treatment programs additional certifications are required as well. It can be difficult to find qualified applicants for these positions, particularly applicants who either already live or are willing to relocate to the rural areas where many TYC facilities are

located. In FY 2005, it took a median of 43 working days to fill vacant Case Manager positions due to the difficulties of hiring Case Managers and, in some cases, the necessity of meeting the agency's lapse requirement.

**Current caseloads are often higher than can be accomplished.** When the factors listed above are taken into consideration, Case Managers have on average 27 hours of available time each week; significantly less than a 40-hour work week. Based on data provided by Rehabilitation Services staff on the time requirements per youth to meet the Case Management Standards for general caseloads, this translates into an achievable caseload of 1 Case Manager to 17 youth if all available time is spent on case management duties. While this achievable caseload of 1 to 17 is lower than the agency's average caseload of 1 to 19 for general caseloads, caseloads can be as high as 1 to 30 depending on vacancies and other factors. The achievable caseload of 17 youth is consistent with what was reported in the Case Management audit where Rehabilitation Services staff noted that when general caseloads exceed 16 youth it becomes more difficult for the case Manager to meet the Standards. Agency-wide, 57 percent of Case Managers have a caseload higher than the achievable caseload of 17 and 65 percent have a caseload greater than 16.

Case Managers in the agency's specialized treatment programs generally have smaller caseloads than those on general dorms. However, the Case Management Standards include more requirements for these caseloads, including additional counseling and extra group sessions that require Case Manager time to conduct and document. With these additional requirements, specialized treatment Case Managers are in the same situation as those with general caseloads – they often do not have enough time to meet all of the case management requirements for all of their youth. Achievable caseload sizes for specialized treatment vary by treatment type, with a range from 1 Case Manager to 7 youth achievable on some Chemical Dependency (CD) treatment dorms to 1 Case Manager to 12 youth for the Capital and Serious Violent Offender program (CSVOTP).

**Case Manager job requirements include some non-case management duties.** Time spent on non-case management duties has an additional impact on the time Case Managers have available to complete their primary case management responsibilities. The achievable ratios discussed above assume that all time is spent on case management duties. In actuality Case Managers are assigned a variety of non-case management responsibilities which can include: providing coverage in visitation, the cafeteria, or on the dorm; transporting youth; conducting youth due process hearings; being a member of the Special Tactics And Response (STAR) team; and working as the Security Unit Case Manager.

To collect information on Case Manager activities, Case Managers at seven institutions were asked to participate in a time study. This study collected information on the amount of time Case Managers spent on various activities over a four week period in December 2005 and January 2006. Case Managers who participated in the time study reported that they spent a median of 4.75 hours per week on non-case management duties. While this does not appear to be a significant amount of time, it represents 17 percent of the 27 hours Case Managers have available each week. When this time on non-case

management responsibilities is taken into consideration, the time available for Case Management duties is reduced to just under 23 hours, which reduces the achievable caseload size to 1 Case Manager to 13 youth for general caseloads and between 1 Case Manager to 5 youth to 1 Case Manager to 9 youth for specialized treatment caseloads.

Some of these non-case management duties, such as providing coverage or working in the gatehouse, could potentially be assigned to other institutional staff. However, for some of these duties the institutions may not have other staff that could perform them. For instance, participating in youth due process hearings or working as the Security Unit Case Manager requires the knowledge of a Case Manager. Approximately half the time reported as non-case management in the time study was spent on duties that could be assigned to other staff. If these duties were removed from the Case Managers' responsibilities, the achievable caseload agency-wide would increase to 1 Case Manager to 15 youth for general caseloads and would range between 1 Case Manager to 6 to 11 youth depending on the type of specialized treatment. However, if non-case management duties are taken from the Case Managers, they must be completed by other staff. Therefore, the impact these duties would have on other staffs' ability to complete their job duties must also be considered.

**Case Management Standards are not being met.** The Case Management audit published in May 2005 reviewed the quality of case management documentation. That audit identified that the Case Management Standards were not being met. Specifically, Case Managers were not including complete information in chronological entries and Individual Case Plans did not provide sufficient information on youth progress and goals. Most of the documentation reviewed for the Case Management audit did not meet the Standards and few of the Case Managers who had files reviewed had consistently high-quality documentation. As stated earlier, large caseload sizes and time spent on non-case management were identified as potential causes for staff not meeting the Standards.

To follow up on the concerns from the Case Management audit, staff were asked in the time study if they completed some of the key case management requirements each week – individual counseling, core groups, and documentation. Overall, Case Managers reported that they were generally not able to meet the Standards with staff reporting they completed the required groups 60 percent of the time and required counseling and paperwork 40 percent of the time. This further supports the results of the Case Management audit that youth may not be receiving the services they need to progress through the Resocialization program.

When institutions are unable to meet the Case Management Standards due to local issues such as high Case Manager vacancies, the agency has put in place a system for requesting waivers whereby some of the Case Management Standards are eased for a limited period of time. To receive a waiver, institutions are required to submit a corrective action plan outlining how they intend to address the issues to ensure that they can comply with the Standards at the end of the waiver period. As reported in the Case Management audit, institutions are not making use of the waiver process. Since the Case Management audit was released, five institutions have requested waivers, four of which have been granted.

These waivers have been granted for limited time periods ranging from three to six months. The waivers granted to date have had some impact on achievable caseload size. The time savings from the waivers resulted in Case Managers on general caseloads being able to increase their achievable caseload by one youth.

**Case Managers reported working more hours than are being recorded on their timesheets.** The Federal Fair Labor Standards Act (FLSA) prohibits certain categories of staff from working in excess of 40 hours per week without compensation. TYC's Case Managers are classified FLSA non-exempt – meaning they fall into the category of employees who must be credited with overtime when they work more than 40 hours in a week.

Central Office management has explicitly directed non-exempt staff, in writing, that they are not allowed to take work home or work overtime “off the books”. At the same time, due to budgetary constraints, accrual of overtime is discouraged for Case Managers. Many of the Case Managers who participated in the time study reported working more than 40 hours per week. Additional analysis and comparison of the time study information to timesheets identified that nearly 23 percent of the time Case Managers recorded more hours on the time study than they did on their timesheet for that week. While the time not reported on the time sheet averaged just under six hours, it is estimated that between 173 and 250 hours of time was reported as worked on the time study that was not recorded by staff on their timesheet. By working hours that they do not report on their timesheet, staff put the agency at risk for violating Federal Labor law.

There may be a variety of reasons why Case Managers are working unrecorded overtime, including professional pride and pressure to complete all the case management duties and paperwork. Case Managers are professionals and work with the difficult population served by TYC for many reasons, with the goal of making a difference. They are placed in a situation where they sometimes do not have enough time in the regular work week to complete their work in accordance with the Standards and are not allowed to work extra time to meet the requirements, but are still held accountable if they do not. As long as expectations and resources remain at their current levels, the agency can expect this issue to persist.

**Audit of Staffing and Coverage**

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<b>RECOMMENDATION</b>	<b>MGT RESPONSE CURRENT STATUS PROJ. COMPLETION DATE</b>
1. To improve the agency's planning abilities and better identify resource needs, the Assistant Deputy Executive Directors for Finance and Juvenile Corrections should collaborate to update the relief factor.	<p style="text-align: center;"><b>CONCUR UNDERWAY July 31, 2006</b></p> <p>Management concurs with the recommendation under the assumption that the relief factor will continue to be essential for calculating the youth-to-staff ratio. The elements of the relief factor will be reviewed every spring and approved annually in July with approval of the agency's appropriations request in even-numbered years and approval of the operating budget in odd-numbered years. Finance Division staff will coordinate the review process; Research Department staff will participate to monitor impacts on the agency's performance measures; Human Resources staff will participate to ensure compliance with technical definitions of the different types of authorized employee leave; Juvenile Corrections staff will participate to validate and verify the operational accuracy of the agreed relief factor. The update is underway and will be officially complete in July 2006 with LAR approval.</p>
2. To provide management with data on actual time JCO staff are not available, the Assistant Deputy Executive Director for Human Resources should develop an annual report of actual leave taken and training hours attended for direct-care staff.	<p style="text-align: center;"><b>CONCUR UNDERWAY September 1, 2006</b></p> <p>The agency's leave accounting system currently tracks employee's leave and a report can be designed to provide leave information. A training tracking system is currently under development with a target implementation date of 9/1/2006 that will be able to provide the training hours attended for direct care.</p>

PLANNED: Management concurs with the recommendation but actual implementation of the recommendation has not begun.

UNDERWAY: The implementation process of the recommendation has been started.

IMPLEMENTED: All new procedures, policies, systems, processes, related documents, and other elements relevant to the audit recommendation have been prepared, approved, and put into operation.

UNABLE TO IMPLEMENT: Management concurs with the recommendation; however, due to resource constraints and competing priorities is not able to implement or can only partially implement the recommendation.

<b>RECOMMENDATION</b>	<b>MGT RESPONSE CURRENT STATUS PROJ. COMPLETION DATE</b>
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<p>3. To improve the agency’s capability to manage JCO duties, the Assistant Deputy Executive Director for Juvenile Corrections should collaborate with the Assistant Deputy Executive Director for Finance to develop a procedure to periodically check actual coverage at the dorm level against information in Schedule Soft and the achievable ratio (based on the number of staff and youth) to determine where management assistance may be needed.</p>	<p style="text-align: center;"><b>CONCUR PLANNED July 31, 2006</b></p> <p>Management concurs with the recommendation. The Assistant Deputy Executive Director for Juvenile Corrections will develop and implement a policy for the Institutions Manual to ensure a reliable procedure for comparing ScheduleSoft data against actual staffing coverage at the dorm level. The procedures will include how the analysis is used by Juvenile Corrections Directors and superintendents for the most effective staffing patterns at each facility.</p>
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<p>4. To ensure that Case Managers are able to complete their job duties in the time available to them, the Assistant Deputy Executive Directors for Rehabilitation Services and Juvenile Corrections should review the case management and non-case management responsibilities for Case Managers and collaborate to ensure that agency expectations can be met with the resources available.</p>	<p style="text-align: center;"><b>CONCUR UNDERWAY August 31, 2006</b></p> <p>The Assistant Deputy Executive Directors for Juvenile Corrections and Rehabilitation Services concur with the audit findings. Current caseload sizes, added training, and non-case management duties result in insufficient time to meet Case Management Standards (Standards). The Assistant Deputy Executive Director for Rehabilitation Services will review areas for streamlining case management requirements to allow Case Managers increased time for quality case management and individual counseling. While the Standards, as designed, are consistent with best practices, the agency simply does not have the resources available to achieve them. Hence, a best practices case management system cannot be implemented with existing resource limitations. The challenge faced by the agency is to identify areas of efficiency that, if implemented, would not compromise the quality of services to youth or Resocialization outcomes. The essential elements of a “best practices” case management system can be implemented within existing resources, but the agency will need to review areas for</p>
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 UNDERWAY: The implementation process of the recommendation has been started.  
 IMPLEMENTED: All new procedures, policies, systems, processes, related documents, and other elements relevant to the audit recommendation have been prepared, approved, and put into operation.  
 UNABLE TO IMPLEMENT: Management concurs with the recommendation; however, due to resource constraints and competing priorities is not able to implement or can only partially implement the recommendation.

**Audit of Staffing and Coverage**

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<b>RECOMMENDATION</b>	<b>MGT RESPONSE CURRENT STATUS PROJ. COMPLETION DATE</b>
	reduction to achieve the Standards. Given vacancies in other positions and an outdated JCO relief factor to operate safe, secure, therapeutic institutions, Case Managers across the agency perform non-case management duties. To address this, a system will be developed by the Assistant Deputy Executive Directors of Juvenile Corrections and Rehabilitation Services to request approval for the utilization of Case managers for non-case management duties as a routine procedure. Such practices are currently unreported to Executive Management; hence, the impact on case management cannot currently be assessed.

PLANNED: Management concurs with the recommendation but actual implementation of the recommendation has not begun.

UNDERWAY: The implementation process of the recommendation has been started.

IMPLEMENTED: All new procedures, policies, systems, processes, related documents, and other elements relevant to the audit recommendation have been prepared, approved, and put into operation.

UNABLE TO IMPLEMENT: Management concurs with the recommendation; however, due to resource constraints and competing priorities is not able to implement or can only partially implement the recommendation.