August 3, 2017

Ron Nirenberg
Mayor

Rebecca J. Viagran
Councilwoman, District 3

Greg Brockhouse
Councilman, District 6

John Courage
Councilman, District 9

Roberto C. Treviño
Councilman, District 1

Rey Saldaña
Councilman, District 4

Ana E. Sandoval
Councilwoman, District 7

Clayton H. Perry
Councilman, District 10

William “Cruz” Shaw
Councilman, District 2

Shirley Gonzales
Councilwoman, District 5

Manny Peláez
Councilman, District 8

SUBJECT: Audit Report of Follow-Up Audit of San Antonio Police Department (SAPD)
Crisis Response Team

Mayor and Council Members:

We are pleased to send you the final report of the Follow-Up Audit of SAPD Crisis
Response Team. This audit began in April 2017 and concluded with an exit meeting with
department management in July 2017. Management’s verbatim response is included in
Appendix D of the report. The San Antonio Police Department management and staff
should be commended for their cooperation and assistance during this audit.

The Office of the City Auditor is available to discuss this report with you individually at your
convenience.

Respectfully Submitted,

Kevin W. Barthold, CPA, CIA, CISA
City Auditor
City of San Antonio
Distribution:
Sheryl L. Sculley, City Manager
Erik Walsh, Deputy City Manager
Ben Gorzell, Chief Financial Officer
William McManus, Chief of Police
Andrew Segovia, City Attorney
Leticia M. Vacek, City Clerk
Trey Jacobson, Chief of Staff, Office of the Mayor
John Peterek, Assistant to the City Manager, Office of the City Manager
Tom Nichta, Audit Committee Member
Follow-Up Audit of San Antonio Police Department

Crisis Response Team

Project No. AU17-F09

August 3, 2017

Kevin W. Barthold, CPA, CIA, CISA
City Auditor
Follow-Up Audit of SAPD Crisis Response Team

Executive Summary

As part of our annual Audit Plan approved by City Council, we conducted a follow-up audit of the recommendations made in the Audit of the San Antonio Police Department (SAPD) Crisis Response Team (CRT) dated September 26, 2016. The objective for this follow-up audit is:

**Determine if action plans made as a result of audit recommendations were effectively implemented.**

The San Antonio Police Department (SAPD) established effective controls to monitor compliance with guidance outlined in the CRT Standard Operating Procedures (SOP). Specifically:

- A process was established to ensure that responding officers provide domestic violence reports and 2089-TAs (threat assessments) to the CRT in a timely manner.

- CRT employees are tracking and reporting core essential training hours and maintain adequate support documentation to verify completion.

- The information to be included in the Record Management System (RMS) was defined to ensure adequate documentation of domestic violence cases.

- Activity types such as community outreach, which serve as performance measures, were defined to ensure consistent tracking for monthly activity reports by all CRT units.

- A process was implemented to periodically review user access in RMS for sworn SAPD employees.

No recommendations were made for this follow-up audit.

SAPD Management’s verbatim response is in Appendix D on page 9.
# Table of Contents

Executive Summary ........................................................................................................... i

Background ....................................................................................................................... 1

Audit Scope and Methodology .......................................................................................... 2

Management’s Action Plans and Status ........................................................................... 3
  A. Outlined policies and procedures are not being followed by staff ........ 3
  B. Activity types reported by the six CRT units are not consistent ............ 4
  C. Lack of user access review in the RMS application ......................... 4

Appendix A – Prior Audit Recommendations ................................................................. 6

Appendix B – CRT Activity Types .................................................................................. 7

Appendix C – Staff Acknowledgement .......................................................................... 8

Appendix D – Management Response .......................................................................... 9
Background

In September 2016, the Office of the City Auditor completed an audit of the San Antonio Police Department (SAPD) Crisis Response Team (CRT). The objective of the audit was as follows:

Determine if CRT operations are in compliance with policies and procedures and are effective in meeting the needs of the community.

The Office of the City Auditor concluded that the SAPD CRT has established guidelines that could serve as internal controls to ensure operations are on track to meet program goals and objectives. However, the CRT units do not always comply with the guidelines. Additionally, policies and procedures should be better defined to provide specific guidance for certain processes such as definitions of activities reported.

We identified control deficiencies in the following areas:

- Staff is not complying with policies and procedures in areas related to case documentation, core essential training, and monitoring of community outreach efforts.

- Types of activities reported by the six CRT units are inconsistent, making it difficult to measure performance and effectiveness of the CRT operations.

- A periodic review of user access to the RMS application is not performed to ensure only authorized and approved users have access.

SAPD management agreed with the conclusions and developed action plans to address the audit recommendations.
Audit Scope and Methodology

The audit scope was limited to the recommendations and corrective action plans made in the original report for the time frame from January to March 2017.

The audit methodology included interviews with the CRT units to obtain an understanding of newly implemented controls. We reviewed source documents such as monthly activity reports, employee files, and case documentation. Our testing criteria included the CRT Standard Operating Procedures (SOP) that were updated in November 2016.

We tested a random sample of 48 out of 3,328 domestic violence cases assigned to CRT caseworkers to determine if the cases in RMS (Record Management System) were adequately documented and if response times have improved for contacting victims. We reviewed employee files for all CRT staff to verify required training was completed. Additionally, we reviewed monthly activity reports for all CRT units to ensure consistency and completeness. Lastly, we reviewed terminated CRT employees to determine if their user access in RMS was requested for removal in a timely manner.

We performed limited procedures to test general controls of RMS. Our reliance was based on performing direct tests on the data rather than evaluating the system’s general and application controls. Our direct testing included reviewing user access for all CRT staff. We do not believe that the absence of testing general and application controls had an effect on the results of our audit.

We conducted this performance audit 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.
Management’s Action Plans and Status

A. Outlined policies and procedures are not being followed by staff

A1. Management’s Action Plan:

The department will enforce compliance with the CRT SOP by developing an audit mechanism to identify responding officers that fail to comply with providing domestic violence reports and 2089-TAs to CRT as required by the SOP. The initial audit mechanism will be an electronic report of the domestic violence cases approved into the Record Management System (RMS). Once deployed, it is believed Column Technologies case management solution will provide a more efficient and effective audit mechanism. CRT personnel will review the audit report from the RMS or information from Column case management. Any personnel discovered to be out of compliance with the SOP will be identified to CRT supervisory personnel. CRT supervisors will address the non-compliance via the chain of command. Supervisory personnel will engage in training, coaching, counseling and other supervisory functions to ensure compliance.

A2. Management’s Action Plan:

The department will enforce compliance with the CRT SOP and require CRT personnel to complete core essential training as soon as practical. Additionally, CRT Supervisors will ensure personnel training documentation and completion certificates are placed in the employee’s personnel file. Training hours completed by CRT personnel will be reported in the CRT standardized monthly activity report.

A3. Management’s Action Plan:

The department will amend the CRT SOP to identify community outreach goals for CRT personnel. Additionally, the standardized monthly CRT activity report will quantify the number of community outreach activities CRT personnel participated in and the approximate number of attendees.

A4. Management’s Action Plan:

The department will amend the CRT SOP to identify and define the types of information that are included in case management system records. Additionally, the SOP will be amended to identify where the information is documented within case management system. Supervisors will be assigned to periodically review CRT personnel case management documentation to ensure compliance.

Status: Implemented
CRT management has established an effective process to identify responding officers that fail to comply with providing domestic violence reports and 2089-TAs to CRT. Our testing of domestic violence cases in RMS verified the new process has increased response time for CRT’s initial contact with victims.

We verified training hours are tracked and reported monthly to ensure all staff complete core essential training as required by the SOP. Adequate support documentation is maintained on file to verify completion.

We reviewed the SOP and verified it was updated to identify community outreach goals for CRT staff which is also reported in the monthly activity reports.

Lastly, we verified the SOP was amended to define the types of information that must be included in RMS case documentation records. Our testing of cases in RMS verified documentation is adequate and in compliance with the SOP.

Our review concluded that the internal controls are working effectively to ensure CRT staff follow policies and procedures.

B. Activity types reported by the six CRT units are not consistent

Management’s Action Plan:

The department will amend the CRT SOP to establish, define, and standardize the specific activity types to serve as performance measures for all CRT. This amendment will identify the minimum activity types to be collected by each CRT unit and reported in the CRT standardized monthly activity report. However, Service Area Commanders will retain the authority to require additional activity types based upon identified Service Area needs.

Status: Implemented

The SOP was updated to define specific activity types, including unit of measurement, which serve as performance measures (see Appendix B for required activity types). We reviewed monthly activity reports from January through March 2017 and verified all CRT units are consistently tracking the activities and submitting reports to supervisors, as required by the SOP.

C. Lack of user access review in the RMS application

Management’s Action Plan:

The department will amend the SOP to require supervisors to ensure employees severing from positions within the department, which no longer require RMS
access, have RMS access disabled upon separation. Additionally, the department will require staff to perform a review of personnel with RMS access on a quarterly basis to ensure current access is appropriate for each identified authorized user.

**Status: Implemented**

SAPD’s Quality Assurance team implemented a process to review RMS user access on a quarterly basis, for sworn SAPD employees. The process currently does not include SAPD civilian employees. Although civilian employee access was not being reviewed, our test work indicated that access was removed appropriately for all SAPD CRT employees. We discussed with management the need to review SAPD Civilian Employees going forward and they concurred.
Appendix A – Prior Audit Recommendations

<table>
<thead>
<tr>
<th>A. Outlined policies and procedures are not being followed by staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Police Chief should:</td>
</tr>
<tr>
<td>• Enforce compliance with the SOP to require responding officers to provide timely domestic violence reports and 2089-TAs to their respective CRT unit.</td>
</tr>
<tr>
<td>• Enforce compliance with the SOP and require core essential training be completed by all CRT members. Additionally, evidence of completion and tracking of training should be placed in their respective personnel file.</td>
</tr>
<tr>
<td>• Establish goals and standard quantifiable measures to monitor the effectiveness of community outreach efforts. Additionally, ensure the CRT units are consistently tracking their outreach efforts.</td>
</tr>
<tr>
<td>• Specifically define in the SOP what type of information should be considered when documenting a case in RMS, and ensure supervisors review for compliance</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Activity types reported by the six CRT units are not consistent</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Police Chief should establish and define (i.e. unit of measurement) specific activity types that will serve as performance measures for all CRT units.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Lack of user access review in the RMS application</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Police Chief should develop procedures and perform periodic reviews of user access in RMS at least annually to ensure all user access is appropriate. Additionally, any noted issues from the access reviews should be resolved in a timely manner.</td>
</tr>
</tbody>
</table>
## Appendix B – CRT Activity Types

<table>
<thead>
<tr>
<th>#</th>
<th>Activity</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Misdemeanor Cases Assigned</td>
<td>Total number of SAPD CRT misdemeanor cases assigned.</td>
</tr>
<tr>
<td>2</td>
<td>Felony Cases Assigned</td>
<td>Total number of SAPD CRT felony cases assigned.</td>
</tr>
<tr>
<td>3</td>
<td>Other Cases Assigned</td>
<td>Total Number of Non-Intimate/Information/CFS Cases/Out of jurisdiction cases.</td>
</tr>
<tr>
<td>4</td>
<td>Cases Opened</td>
<td>Total number of cases &quot;opened&quot;. &quot;Open case&quot; means any contact between the CRT member and either the Victim or Suspect. This should NOT include cases from other jurisdictions or incident/disturbance reports. Mailing a letter or speaking to the victim's or suspect's family member or friend does not count as an &quot;open&quot; case.</td>
</tr>
<tr>
<td>5</td>
<td>Suspect Contact</td>
<td>Total number of contacts between CRT member and a suspect.</td>
</tr>
<tr>
<td>6</td>
<td>Evidence Collected</td>
<td>Evidence includes ANY evidence collected including DV2089, photos or any type of written or electronic communication.</td>
</tr>
<tr>
<td>7</td>
<td>Home Visits</td>
<td>Total number of home visits /&quot;call outs&quot; made. The home visit is counted by the person assigned that case.</td>
</tr>
<tr>
<td>8</td>
<td>Warrants Walked</td>
<td>Total number of Family Violence warrants obtained by a CRT officer.</td>
</tr>
<tr>
<td>9</td>
<td>Walk-Ins</td>
<td>Total number of &quot;walk-ins&quot; where any type of assistance is provided by a CRT member to an individual(s) physically present at a substation.</td>
</tr>
<tr>
<td>10</td>
<td>Incoming Phone Calls</td>
<td>Total number of calls fielded of any sort.</td>
</tr>
<tr>
<td>11</td>
<td>Hours of Training</td>
<td>Total number of hours spent in training. This can include a CRT luncheon where training was given and the CRT member signed in on the attendance sheet.</td>
</tr>
<tr>
<td>12</td>
<td>Number of Presentations</td>
<td>Total number of community outreach activities CRT members participated in or hosted</td>
</tr>
<tr>
<td>13</td>
<td>Number of Attendees</td>
<td>Number of attendees at the community outreach activities or presentations (approximate number of community attendees present).</td>
</tr>
<tr>
<td>14</td>
<td>Agency Contact</td>
<td>Total number of contacts with an agency regardless of who initiates contact.</td>
</tr>
</tbody>
</table>

Source: Standard Operating Procedure 104.00
Appendix C – Staff Acknowledgement

Sandra Paiz, CFE, Audit Manager
Holly Williams, CISA, CRISC, Auditor in Charge
Appendix D – Management Response

July 11, 2017

Kevin W. Barthold, CPA, CIA, CISA
City Auditor
San Antonio, Texas

RE: Management’s Acknowledgement of its Review of the San Antonio Police Department Crisis Response Team Follow-Up Audit

San Antonio Police Department has reviewed the audit report and provided its comments to the auditors. As there are no recommendations for management, no management responses are required.

San Antonio Police Department:

☐ Fully Agrees

☐ Does Not Agree (provide detailed comments)

Sincerely,

[Signature]
William McManus
Chief of Police
San Antonio Police Department

[Signature]
Erk Walsh
Deputy City Manager
City Manager’s Office

18 July 17
17/20/17

City of San Antonio, Office of the City Auditor