

**SUBMITTAL TO THE BOARD OF SUPERVISORS
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**



ITEM: 2.13
(ID # 30693)

MEETING DATE:
Tuesday, June 23, 2026

FROM : AUDITOR CONTROLLER

SUBJECT: AUDITOR-CONTROLLER: Internal Audit Report 2026-308: Riverside County Department of Animal Services, Follow-up Audit, [District: All]; [\$0]

RECOMMENDED MOTION: That the Board of Supervisors:

1. Receive and file Internal Audit Report 2026-308: Riverside County Department of Animal Services, Follow-up Audit.


ACTION:Consent


Ben J. Benoit, COUNTY AUDITOR-CONTROLLER 6/11/2026

MINUTES OF THE BOARD OF SUPERVISORS

On motion of Supervisor Perez, seconded by Supervisor Gutierrez and duly carried by unanimous vote, IT WAS ORDERED that the above matter is received and filed as recommended.

Ayes: Medina, Spiegel, Washington, Perez, and Gutierrez
Nays: None
Absent: None
Date: June 23, 2026
xc: Auditor

Kimberly A. Rector
Clerk of the Board
By: 
Deputy

**SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE,
STATE OF CALIFORNIA**

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost
COST	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
NET COUNTY COST	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
SOURCE OF FUNDS: N/A			Budget Adjustment:	No
			For Fiscal Year:	n/a

C.E.O. RECOMMENDATION: Approve

BACKGROUND:

Summary

We completed a follow-up audit of the Riverside County Department of Animal Services. Our audit was limited to reviewing actions taken as of February 27, 2026, to correct findings noted in our original audit report 2025-006 dated June 24, 2025. The original audit report contained 22 recommendations, all of which required implementation to help correct the reported findings.

Based on the results of our audit, we found that of the 22 recommendations:

- 9 of the recommendations were implemented.
- 2 of the recommendations were partially implemented.
- 11 of the recommendations were not implemented.

A summary of the conditions from the original audit and the results of our review on the status of the implementation of the recommendations are provided in this report. For an in-depth understanding of the original audit, please refer to Internal Audit Report 2025-006 included as "Attachment A" of this audit report along with your department status letter as "Attachment B." You can also find the original audit report at <https://auditorcontroller.org/divisions/internal-audit/reports>.

Impact on Citizens and Businesses

Provide an assessment of internal controls over the audited areas.

SUPPLEMENTAL:

Additional Fiscal Information

Not applicable

ATTACHMENTS:

A: Riverside County Auditor-Controller - Internal Audit Report 2026-308: Riverside County Department of Animal Services, Follow-up Audit.



Office of Ben J. Benoit
Riverside County Auditor-Controller

Internal Audit Report

2026-308

Follow-up

22 Recommendations

- ✓ 9 Implemented
- ▶ 2 Partially Implemented
- ✗ 11 Not Implemented



COUNTY OF RIVERSIDE

**Riverside County
Department of Animal Services,
Follow-up Audit**

June 23, 2026



COUNTY OF RIVERSIDE
OFFICE OF THE AUDITOR-CONTROLLER

BEN J. BENOIT
AUDITOR-CONTROLLER

TANYA S. HARRIS, DPA, CPA | JON JENSEN, CPP
ASSISTANT AUDITOR-CONTROLLER



June 23, 2026

Mary Martin
Director of Animal Services
Riverside County Department of Animal Services
6851 Van Buren Blvd.
Jurupa, CA 92509

**Subject: Internal Audit Report 2026-308: Riverside County Department of Animal Services,
Follow-up Audit**

Dear Ms. Martin:

We completed the follow-up audit of the Riverside County Department of Animal Services. Our audit was limited to reviewing actions taken as of February 27, 2026, to help correct the findings noted in our original audit report 2025-006 dated June 24, 2025.

We conducted our audit in accordance with the Global Internal Audit Standards. These standards require that we plan and perform the audit to obtain reasonable assurance that our objective, as described in the preceding paragraph, is achieved. Additionally, the standards require that we conduct the audit to provide sufficient, reliable, and relevant evidence to achieve the audit objectives. We believe the audit provides a reasonable basis for our conclusion.

The original audit report contained 22 recommendations, all of which required implementation to help correct the reported findings. Based on the results of our audit, we found that of the 22 recommendations:

- 9 of the recommendations were implemented.
- 2 of the recommendations were partially implemented.
- 11 of the recommendations were not implemented.



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Follow-up Audit**

A summary of the conditions from the original audit and the results of our review on the status of the implementation of the recommendations are provided in this report. For an in-depth understanding of the original audit, please refer to Internal Audit Report 2025-006 included as "Attachment A" of this audit report along with your department status letter as "Attachment B." You can also find the original audit report at <https://auditorcontroller.org/divisions/internal-audit/reports>.

We thank you and your staff for the help and cooperation. The assistance provided contributed significantly to the successful completion of this audit.



Ben J. Benoit

Ben J. Benoit
Riverside County Auditor-Controller



By: René Casillas, CPA, CRMA
Deputy Auditor-Controller

cc: Board of Supervisors
Jeff A. Van Wagenen, County Executive Officer
Juan Perez, Chief Operating Officer
Don Kent, Chief Finance Officer
Charissa Leach, Assistant County Executive Officer
Grand Jury



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System Access and Data Management Processes

Finding 1: Animal Documentation

Condition

“Our review of 100 (out of a population of 32,044) randomly selected impound records identified the following inconsistencies in supporting documentation:

- One impound record was missing the Owner Surrender Euthanasia Request Form, which is necessary for documenting the owner's certification of ownership and authorization for euthanasia.
- One impound record with an outcome of ‘missing’ did not include a witness or police report as required by policy.
- The pre-euthanasia list was not documented or retained for any euthanasia events as required by department policy. This process was not being performed, which creates gaps between department policy and practice, specifically in documentation and accountability.”

Criteria

“The County of Riverside Records Retention Schedule Code DAS_SHS150 requires records for each animal, including admission and condition data, to be retained for ‘CY+3’ years. Similarly, the Food and Agriculture Code 32003 mandates that all public and private shelters maintain accurate records for every animal taken up, medically treated, or impounded. Additionally, the *Chameleon Kennel Window 00-03* policy requires a direct report reference and police report after 24 hours for animals with a ‘missing’ outcome, and the department's Standard Operating Procedure for Euthanasia specifies that the verifier must collect and deliver all pre-euthanasia paperwork to the Supervising Registered Veterinary Technician to ensure proper accountability. These standards establish the necessary framework for maintaining accurate and complete records to ensure compliance and accountability.”

Impact to the Operation as a Result of the Condition

“The record-keeping anomalies identified during our review can compromise the department's ability to comply with regulatory and department policies and procedures, increasing the risk of liabilities and reputational damage. Furthermore, these gaps in documentation for a department like Animal Services can cloud the department’s intention of being accountable and transparent with its operations, leading to an erosion of public trust. They also create challenges for future investigations or audits related to animal welfare practices, as incomplete or inaccurate records limit the department’s ability to demonstrate its compliance and operational effectiveness.”



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Root Cause of the Condition

“The anomalies in record-keeping resulted from a combination of inconsistent staff training on documentation protocols, insufficient oversight and monitoring of record-keeping processes, and gaps in the department’s policies and procedures that help ensure complete and accurate documentation. Addressing these root causes is essential to improving the department’s record-keeping practices and achieving compliance with policies and procedures.”

Recommendation 1.1

“Update existing policies and procedures to include the current procedures related to the Owner Surrender Euthanasia Request, Missing Report, and Pre-Euthanasia List. Maintain documentation acknowledging staff have reviewed and understood the policies which are easily accessible to all relevant staff.”

Current Status 1.1: Not Implemented

At the time of our review (April 2026), Animal Services did not update policies or procedures to include Missing Reports and Pre-Euthanasia.

Management’s Response

“The Department is working with Outcomes for Pets in updating and formalizing policies and procedures to clearly define requirements to Owner Surrender Euthanasia Request Forms, Missing Reports and Pre-Euthanasia documentation. These updates will ensure all required documentation is consistently completed, retained and aligned with County and regulatory requirements. DAS will implement standardized staff training and require acknowledgement of policy review to ensure staff, and supervisory oversight will be strengthened to monitor compliance.”

Recommendation 1.2

“Develop a process that includes an effective strategy for reviews ensuring that outcomes—such as missing and non-live outcomes (e.g., dead, euthanized, or disposal of animals)—are recorded and retained with evidence of reviews.”

Current Status 1.2: Implemented



Finding 2: Animal Disposition Records

Condition

“Our review of 100 (out of a population of 32,044) randomly selected impound records revealed the following inconsistencies in the documentation of staff initials and approvals:

- Five impound records were missing management approval for euthanasia with no evidence of comments and initials.
- Six impound records included personal identification numbers (system generated numbers) in the ‘in-by/out-by’ sections, but the associated staff members could not be confirmed as personal identification numbers are reassigned to different staff.
- Fourteen impound records were missing the initials of the staff responsible for finalizing the outcome.
- Eighteen impound records contained only one set of initials, despite multiple staff members being involved, which per policy, would require at least two sets of initials. The exception to this is emergency euthanasia outcomes; however, the documentation reviewed did not indicate emergency euthanasia was performed.”

Criteria

“The Food and Agriculture Code 32003 requires public and private shelters to keep accurate records on each animal, including the final disposition and the name of the individual who treated or euthanized the animal. The department’s Standard Operating Procedure for *Euthanasia* specifies that all euthanasia teams must document their assigned roles and actions unless exceptions apply, such as owner-requested or emergency euthanasia. Policies establish clear expectations for documenting staff involvement to ensure accountability, regulatory compliance, and ethical treatment of animals.”

Impact to the Operation as a Result of the Condition

“Inconsistent documentation of staff initials and approvals weakens accountability, undermines regulatory compliance, and exposes the department to potential legal and reputational risks. These documentation gaps can lead to difficulties in defending the department’s practices during investigations or audits, compromising its credibility and potentially resulting in penalties or public criticism. Strengthening these practices will reinforce transparency, build public trust, and aid in the department’s ability to secure funding and maintain operational integrity.”



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Root Cause of the Condition

“The discrepancies in documenting staff initials and approvals arise from varying interpretations of policies, opportunities to enhance training on documentation protocols, and the need for stronger oversight of record-keeping practices. Additionally, the absence of a robust system to track and manage personal identification numbers and recycling what should be unique identification numbers contributes to inefficiencies and affects accountability.”

Recommendation 2.1

“Revise existing policies and procedures to clearly define the requirements for documenting staff initials and approvals, including detailed protocols for emergency situations and scenarios involving multi-staff collaboration.”

Current Status 2.1: Not Implemented

Animal Services has not updated policies or procedures to clearly define the requirements for documenting staff initials and approvals, including detailed protocols for emergency situations and scenarios involving multi-staff collaboration.

Management’s Response

“The Department is working with Outcomes for Pets to update policies and procedures to clearly define requirements for documenting staff initials and approvals, including guidance for multi-staff involvement and emergency situations. Training and oversight will be reinforced to ensure consistent compliance, and system limitations related to staff identification tracking will be evaluated to improve accountability. In addition, the Business & Process Analyst will assist with developing processes to verify required signatures and approvals are completed, identify and flag missing documentation, and support workflow improvements to strengthen record accuracy and accountability.”

Recommendation 2.2

“Develop a process for regular reviews of euthanasia records with documented evidence of the review, to ensure compliance with documentation requirements and identify discrepancies promptly.”

Current Status 2.2: Implemented



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Recommendation 2.3

“Track staff documentation errors and establish a program of regular retraining and evaluation across all department locations, to emphasize the importance of accurate and consistent record-keeping and compliance with department policies.”

Current Status 2.3: Implemented

Recommendation 2.4

“Implement a system to track the issuance and reassignment of personal identification numbers to ensure accountability and facilitate tracking of staff actions.”

Current Status 2.4: Implemented

Finding 3: Duplicate Impound Records

Condition

“Our review of 143 impound records found during our audit period were duplicate records, with each having a corresponding duplicate Animal ID and outcomes such as disposal, euthanasia, and died.”

Criteria

“The Food and Agriculture Code 32003 mandates that all public and private shelters maintain accurate records for every animal taken up, medically treated, or impounded. As such, all records need to accurately reflect the disposition of each animal to support compliance with regulatory and reporting standards.”

Impact to the Operation as a Result of the Condition

“Duplicate impound records compromise the accuracy of public records, potentially leading to inaccurate statistics that can damage public trust, and impact regulatory compliance and decision-making. For example, inflated euthanasia figures may create public relations challenges, while under-reported numbers can affect budgeting and service planning. Discrepancies in records may also result in resource misallocation, non-compliance penalties, and operational inefficiencies, ultimately undermining the department to carry out its operational objectives efficiently and effectively.”



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Root Cause of the Condition

“The occurrence of duplicate impound records is attributed to data entry errors, creation of duplicate records to issue a second dose of euthanasia solution, lack of requests for the deletion of duplicate records, insufficient oversight in the record-keeping process, and the absence of system controls designed to identify and prevent duplicates. These gaps highlight the need for enhanced data validation protocols and clarified procedures to address duplicates effectively.”

Recommendation 3.1

“Develop a system process to flag duplicate impound records that share the same non-live outcomes during the internal data validation process.”

Current Status 3.1: Not Implemented

The implementation of this recommendation has been delayed. Animal Services is currently developing automated PostMaster job notifications and is expected to be implemented by May 31, 2026.

Management’s Response

“The department has developed and is in the process of implementing automated PostMaster job notifications within the Chameleon system. These notifications are designed to flag potential duplicate impound records specifically cases where animals with an intake condition of ‘DEAD’ are entered under multiple impound numbers within a defined timeframe. When triggered, the system generates a data validation alert identifying the responsible user, affected records, and required corrective action. This allows for timely review, correction, and improved data accuracy during the internal validation process.”

Recommendation 3.2

“Update policies and procedures to clearly define the process for applying outcomes only to the correct impound records, while ensuring identified duplicate records are removed appropriately and efficiently.”

Current Status 3.2: Not Implemented

The implementation of this recommendation has been delayed. Animal Services is currently developing automated PostMaster job notifications and is expected to be implemented by May 31, 2026.



Management's Response

"The department is developing and formalizing procedures that clearly define the process for reviewing alerts, verifying the correct impound record, applying outcomes appropriately, and resolving duplicate records in a consistent and controlled manner. In addition, Animal Services has implemented automated PostMaster job notifications within the Chameleon system to support this process. These notifications are issued up to four times to the responsible user and supervisory staff to ensure timely review and correction. If the identified issue is resolved, the notification cycle is discontinued, providing confirmation that corrective action has been completed. As an additional layer of oversight, a Business Analyst will conduct a quarterly review of flagged records and corrective actions to ensure issues were properly resolved and to validate ongoing compliance. This process establishes both a standardized corrective procedure and automated monitoring controls to ensure duplicate records are reviewed, corrected, and validated in a timely manner."

Finding 4: Euthanasia Types Classification

Condition

"Our review of 100 (out of a population of 32,044) randomly selected impound records identified six instances where animals euthanized were incorrectly classified. Specifically, instances were labeled as 'Too Young' in the 'Out-Condition' field or comments field, the animals were assigned the 'Euthanized-Treatable Medical' subtype instead of the correct 'Euthanized-Too Young' subtype. Additionally, on the department's website, animals euthanized as 'Too Young' are not disclosed as a separate category. This inconsistency leads to misunderstandings about the number of animals euthanized, impacting compliance with mandates."

Criteria

"Policy Number 000-03, *Completion of the Chameleon Kennel Window*, requires that when the outcome type is 'Euthanasia,' the corresponding subtype must strictly adhere to predefined categories such as Abatement, Owner Request, Rabies Test, Too Young, Treatable Behavior, Treatable Medical, Untreatable Behavior, Untreatable Medical, Adoptable, or Shot. Accurate subtype classification ensures consistency, compliance, and clear communication with stakeholders.

Additionally, The Food and Agriculture Code 17006 permits euthanasia of newborn animals needing maternal care without holding them for owner redemption or adoption."



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Impact to the Operation as a Result of the Condition

“Misclassifying animals in critical categories such as ‘Euthanized Treatable,’ which is published on the department’s website, can lead to reputational damage, and loss of trust in the department’s operations. Incorrect data could also mislead stakeholders dependent on correct data, affecting decision-making, funding, community engagement, and compliance with policies. Ensuring accurate subtype classification is essential to achieving operational objectives.”

Root Cause of the Condition

“The misclassification of euthanasia subtypes arises from differing interpretations of policies across divisions, opportunities to enhance staff retraining on the correct use of subtypes, and the need for stronger supervisory oversight to ensure the accuracy of classifications.”

Recommendation 4.1

“Ensure staff select the correct subtype before finalizing records, particularly for outcomes such as ‘Euthanized’ and subtypes like ‘Too Young.’”

Current Status 4.1: Not Implemented

The implementation of this recommendation has been delayed. Animal Services is developing SOPs and standardized Chameleon templates, with staff training and oversight to support accurate and complete record documentation. Implementation is expected by May 31, 2026.

Management’s Response

“The Department is currently working with Outcomes for Pets to update Standard Operating Procedures (SOPs) and policies to ensure clear guidance on accurate euthanasia subtype classification, including distinctions such as ‘Too Young’ and ‘Treatable Medical.’ In addition, the Department will provide staff training and reinforce supervisory oversight to ensure proper selection of subtypes prior to finalizing records. These efforts are intended to promote consistency, improve data accuracy, and ensure compliance with policy and reporting requirements.”

Recommendation 4.2

“Provide regular staff training and refreshers on the correct interpretation and use of euthanasia subtypes to ensure consistent application across all divisions.”



Current Status 4.2: Not Implemented

Animal Services is currently reviewing euthanasia policies to align with updated procedures and documentation requirements, and is expected to be implemented by the fourth quarter of 2026.

Management’s Response

“The Department is working with Outcomes for Pets to update euthanasia-related SOPs and policies to ensure clear and consistent guidance across all divisions. Upon completion, staff will receive regular training and refresher sessions to reinforce proper interpretation and use of euthanasia subtypes and ensure ongoing compliance.”

Recommendation 4.3

“Develop and implement standardized policies and procedures to ensure consistent supervisory reviews for outcomes documented.”

Current Status 4.3: Implemented

Finding 5: Euthanasia Requests by Animal Owners

Condition

“We noted that the euthanasia category requested by the owner is not consistently published across different reports on the website. Animal Services system separately records the category ‘Euthanasia Requested by the Owner’ but it is made part of their total Euthanized outcome numbers posted on department website for yearly statistics. Please see the yearly table below extracted from the department website that provides Euthanized Treatable/untreatable without specifying the euthanasia requested by the owner category that is included in impound and outcome statistics.”

**Outcome Statistics
January 1, 2023, to December 31, 2023**

Riverside County Department Outcomes

	DOG	CAT	OTHERS	Total
ADOPTION	6,007	3,256	248	9,511
TRANSFER ADOPTION PARTNER	3,264	614	359	4,237
TRANSFER TO OTHER AGENCY	189	88	18	295
RETURNED TO OWNER	2,174	137	107	2,418
IN FOSTER HOME	753	1,657	22	2,432



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EUTHANIZED TREATABLE	1,647	1,633	27	3,307
EUTHANIZED UNTREATABLE	1,461	3,671	521	5,653
DIED	118	227	40	385
RCDAS COMMUNITY CAT PROGRAM	0	1,823	0	1,823
Total	15,613	13,106	1,342	30,061

**Intake Statistics
January 1, 2023, to December 31, 2023**

Riverside County Impounds

	DOG	CAT	BIRD	LIVESTOCK	OTHERS	Total
STRAY	11,538	10,312	535	94	590	23,069
STRAY-ABANDONED	38	133	0	0	8	179
STRAY-KNOWN WAIT	1,043	73	5	2	1	1,124
STRAY-DEAD	1,226	2,628	355	131	1,358	5,698
OWNER SUR	715	341	153	16	36	1,261
CONFISCATE	837	238	130	50	64	1,319
ADOPTION RETURN	627	189	1	0	2	819
FOSTER RETURN	612	1,686	0	0	5	2,303
DISPO REQ	476	150	16	30	31	703
TRANSFER FROM ANOTHER AGENCY	57	5	0	0	0	62
Total	17,169	15,755	1,195	323	2,095	36,537

Criteria

“The Food and Agriculture Code 32003 mandates that all public and private shelters maintain accurate records for every animal taken up, medically treated, or impounded. As such, all records need to accurately reflect the disposition of each animal to support compliance with regulatory and reporting standards.”

Impact to the Operation as a Result of the Condition

“Inconsistent reporting of ‘Euthanasia Requested by Owner’ creates challenges as all the euthanasia reported in statistics falls into department responsibility, leading to public concern and affecting the department's reputation. Ensuring clarity and consistency in reporting supports transparency, ensures compliance with legislative mandates, aids in making informed decisions, and fosters public trust.”



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Root Cause of the Condition

“The inconsistency stems from a departmental change in reporting format during 2023, which resulted in ‘Euthanasia Requested by Owner’ being included in monthly statistics but omitted from yearly statistics. This highlights an opportunity to align reporting practices and develop standardized guidelines for presenting data consistently across different reporting periods.”

Recommendation 5.1

“Implement consistent documentation and reporting across all statistical reports published on the department’s website, ensuring all categories are included in both monthly and yearly statistics.”

Current Status 5.1: Implemented

Recommendation 5.2

“Develop standardized guidelines for reporting formats to ensure alignment and consistency in how data is presented across different timeframes in compliance with Food and Agriculture Code 32003.”

Current Status 5.2: Implemented

Recommendation 5.3

“Conduct consistent reviews of published reports to verify compliance with Food and Agriculture Code 32003 requirements and ensure accurate representation of all reporting categories.”

Current Status 5.3: Partially Implemented

Animal Services has taken steps to improve reporting consistency through a new format developed in collaboration with Outcomes for Pets. However, consistent reviews of published reports were not yet formalized through written guidance or supported by retained documentation identifying the reviewer and review date.

Management’s Response

“Animal Services is currently working with Outcomes for Pets and the Business & Process Analyst to standardize reporting review procedures and improve consistency across published reports. Animal Services has also begun implementing reporting enhancements, including the addition of a separate ‘Owner Intended Euthanasia’ reporting category within published statistics to improve transparency and provide clearer distinction within euthanasia reporting categories. Planned



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enhancements further include the implementation of formalized review documentation, reviewer tracking, data validation procedures, and standardized reporting formats to ensure reporting categories are accurately and consistently represented within public statistical reporting.”

Finding 6: Euthanasia Training Compliance and Consistency

Condition

“Our review revealed that 17 staff members, across 25 impound records, performed euthanasia, however, evidence of staff training was not available. Records of training hours and proof of completion are often incomplete or found missing.”

Criteria

- “California Code of Regulations, *Title 16, 2039* mandates at least eight hours of euthanasia training for non-veterinarian staff involved in administering sodium pentobarbital, including five hours of hands-on training.
- California Business and Professions Code 4827(d) states Shelter Animal Services employees can perform euthanasia without a veterinarian present, provided they meet the training requirements.
- Animal Services SOP: *Creating and Tracking Employee Training Attendance in Chameleon*, ‘It is expected that supervisors and managers scan a copy of the proof of attendance to the employee’s personal identification record’ in the system.”

Impact to the Operation as a Result of the Condition

“Ensuring all staff meet euthanasia training requirements is critical to minimizing legal risk. Properly trained staff performing euthanasia helps safeguard animal welfare and maintain compliance with state regulations. Strengthening documentation practices for training will enhance the department's ability to demonstrate compliance with legal requirements, support public trust, and reduce the risk of penalties or operational challenges.”

Root Cause of the Condition

“The gaps in training and documentation are due to decentralized re-training initiatives without tracking and monitoring of staff training hours, and outdated training policy to support ongoing compliance with state-mandated certification standards.”



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Recommendation 6.1

“Develop policies and procedures to establish review and approval processes for verifying and regularly updating staff training records. Ensure these processes include tracking the completion of euthanasia certification training and retraining requirements.”

Current Status 6.1: Not Implemented

Animal Services has not developed policies and procedures to review, approve, and track staff training records, including euthanasia certification and retraining.

Management’s Response

“Animal Services is currently coordinating euthanasia training compliance courses planned for June and July 2026 to support staff certification and retraining requirements. Final scheduling and training dates are anticipated to be finalized following departmental review on May 12, 2026. In conjunction with this training, the Department is developing and implementing policies and procedures for reviewing, approving, and tracking euthanasia training records, including certification completion, retraining requirements, and proof of attendance documentation. Training records and supporting documentation will continue to be maintained within the Chameleon system until Laserfiche implementation is fully completed. Oversight and monitoring processes are also being reinforced to ensure staff training records are consistently maintained and updated in compliance with state regulations and departmental procedures.”

Recommendation 6.2

“Establish a process to ensure euthanasia is restricted to staff who have completed the mandated eight-hour certification course.”

Current Status 6.2: Not Implemented

The implementation of this recommendation has been delayed. Animal Services is currently updating policies to formalize an ongoing certification verification process.

Management’s Response

“Animal Services is currently updating policies and implementing a certification verification process to ensure euthanasia procedures are restricted to staff who have completed the mandated eight-hour certification course and any required retraining. The Department is coordinating upcoming euthanasia compliance training sessions and developing oversight procedures to verify certifications prior to assigning staff to euthanasia-related duties. Supporting documentation and training records will continue to be maintained within the Chameleon system



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until Laserfiche implementation is fully completed to support ongoing compliance and accountability.”

Recommendation 6.3

“Implement a supplementary tool to monitor and document training attendance, certification, and retraining requirements. Ensure supervisors are accountable for updating training records in real-time.”

Current Status 6.3: Not Implemented

Animal Services has not implemented a tool to monitor and document training attendance, certification, and retraining, or to ensure supervisors update records in real time.

Management’s Response

“Animal Services is currently developing supplemental tracking processes to monitor euthanasia training attendance, certification status, and proof of completion. The Department is evaluating methods to improve real-time tracking and supervisory accountability for maintaining training records, including standardized documentation and monitoring procedures. Training records and supporting documentation will continue to be maintained within the Chameleon system until Laserfiche implementation is officially completed, at which time records will transition to Laserfiche for long-term tracking and retention. These efforts are intended to improve consistency, accountability, and ongoing compliance with state training requirements.”

Finding 7: Data Validation for Impound Records

Condition

“Our review of 100 (out of a population of 32,044) impound records identified several data entry errors and system shortcomings:

- Three impound records in the system contained incorrect impound dates and were missing documentation of the individual who brought the animal to the shelter.
- Twelve impound records were missing comments about the outcomes, including euthanasia, overpopulation, and lack of foster interest.

The discrepancy report is generated by the department to identify discrepancies in the Animal Services application system, including records of all changes made during the review period, is not tracked per individual staff to use for training and staff evaluation purposes.”



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Criteria

“The Food and Agriculture Code 32003 requires public shelters to maintain accurate and complete records for each animal taken up, medically treated, euthanized, or impounded. Records must include the circumstances of impoundment, personnel names, medical treatments, and final disposition. These records must be retained for at least three years and must be accurate to ensure compliance with regulatory standards and support the achievement of operational objectives.”

Impact to the Operation as a Result of the Condition

“The absence of data validation controls and tracking mechanisms compromises the accuracy and reliability of impound records. Errors such as incomplete fields, incorrect dates, and missing comments leads to non-compliance with regulatory standards. Inaccurate data affects decision-making, resource allocation, and reporting, increasing the administrative burden for corrections and reducing overall operational efficiency.”

Root Cause of the Condition

“The identified issues present opportunities to enhance data validation rules in the system application, establish tracking and oversight mechanisms for system changes, and strengthen staff training on data entry protocols. Addressing these areas will help ensure records are complete and accurate, reducing errors and inconsistencies in impound records.”

Recommendation 7

“Work with the system vendor to develop a comprehensive discrepancy report or implement a supplementary tool to track discrepancies by the employee. Track the discrepancies linked to individual employees and incorporate the findings into targeted training and evaluation programs.”

Current Status 7: Partially Implemented

Monitoring and reporting enhancements are in progress in collaboration with the system vendor. At the time of our review, a comprehensive discrepancy reporting and tracking process had not yet been established.

Management’s Response

“Animal Services is currently working with the system vendor and internal Business Process Analyst staff to enhance discrepancy monitoring and data validation processes within the Chameleon system. Automated monitoring jobs are being developed to identify missing



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documentation, date validation errors, duplicate records, missing outcome comments, training deficiencies, and access review concerns. These enhancements are intended to strengthen record accuracy, oversight, and targeted staff training efforts. At the time of review, the comprehensive discrepancy tracking process tied to individual staff had not yet been fully implemented; however, development and testing are actively in progress.”

Finding 8: Animal Inventory Records

Condition

“The department does not consistently maintain records of daily kennel inventory counts, including documentation of communication such as emails or other recorded proof, as required by the Kennel Inventory Standard Operating Procedure.”

Criteria

“The Kennel Inventory Standard Operating Procedures mandates that inventory counts be completed twice daily—once before opening for business in the morning and again at the end of the day after all animals have been kenneled. These counts are necessary to ensure accountability for animals impounded at the shelter, which are classified as county assets. Accurate and timely records are essential for reconciling animal counts and maintaining transparency in shelter operations.”

Impact to the Operation as a Result of the Condition

“The absence of daily inventory records reduces inventory accuracy, accountability and transparency, increasing the risk of mismanagement of county assets and liability exposure. Without accurate documentation, the department cannot effectively track the welfare and status of animals, which leads to operational inefficiencies and negative perceptions of the shelter’s effectiveness.”

Root Cause of the Condition

“The opportunity to improve the documentation and performance of inventory counts stems from areas where staff training can be enhanced, oversight of inventory processes strengthened, and adherence to established policies and procedures reinforced. Addressing these areas will support consistent adherence to the Kennel Inventory Standard Operating Procedures and foster greater accountability in daily operations.”



Internal Audit Report 2026-308: Riverside County Department of Animal Services, Follow-up Audit

Recommendation 8.1

“Update Inventory management policies for staff with emphasis on the importance of completing and documenting daily inventory counts in accordance with the existing procedure to Include clear guidelines for reconciling discrepancies.”

Current Status 8.1: Implemented

Recommendation 8.2

“Strengthen supervisory oversight by implementing a review process for inventory counts to ensure records are accurate, complete, and reconciled consistently.”

Current Status 8.2: Implemented

Finding 9: Access Right Approvals

Condition

“Our review of 33 randomly selected personnel records identified 12 instances where evidence of approval for access rights was unavailable and an incorrect incident workflow was selected in the helpdesk resolution, leading to incomplete documentation. Additionally, six cases were noted where the system roles assigned to Cashiers did not match the staff designation of Animal Care Technicians, as the Cashier role is typically assigned to front desk Animal Service Representatives.”

Criteria

“The Standard Practice Manual, 1001, *Internal Control Authorization and Approval* requires transactions to be authorized by personnel with assigned approval authority. Additionally, the Riverside County Information Security Standard V2.0, *Least Privilege*, Section 4.1.6, mandates adherence to the principle of least privilege, granting users only the minimum access necessary to complete their assigned tasks. Compliance with these standards ensures accountability, protects sensitive information, and prevents unauthorized system access.”

Impact to the Operation as a Result of the Condition

“Oversight in documenting approval of access rights and assigning incorrect system roles poses significant risks to system security and accountability. Unauthorized access can lead to data breaches, inaccurate records, and diminished trust in the department’s ability to safeguard sensitive information. These gaps could also hinder compliance with internal policies and expose the department to liabilities.”



Internal Audit Report 2026-308: Riverside County Department of Animal Services, Follow-up Audit

Root Cause of the Condition

“Department policies and procedures regarding the Animal Application system need improvement to standardize initiating of requests, processing of requests, and granting approval for access rights.”

Recommendation 9.1

“Develop policies and procedures to document the authorization of staff access rights consistently. Ensure that these policies include clear guidelines for approval processes, role assignment, and oversight responsibilities.”

Current Status 9.1: Not Implemented

Animal Services has not developed policies and procedures to consistently document authorization of staff access rights, including approval processes, role assignments, and oversight responsibilities.

Management’s Response

“The Department is developing and implementing standardized processes requiring all system access requests to be submitted through ServiceNow and assigned based on approved job functions and operational needs. Standard system roles are assigned according to employee designation by the Chameleon Administrator based on the information submitted within the ServiceNow request. Requests for additional or elevated access will require documented supervisory or management approval prior to being granted. Animal Services is currently reviewing existing access rights within the Chameleon system and has drafted a Standard Operating Procedure (SOP) to formalize access request procedures, approvals, role assignments, and oversight responsibilities to strengthen compliance and accountability.”

Recommendation 9.2

“Conduct periodic reviews of system roles and access rights and documents to verify alignment with staff designations and ensure compliance with the principle of least privilege. Include supervisory signoffs to confirm proper role assignments.”

Current Status 9.2: Not Implemented

Animal Services has not conducted periodic reviews of system roles and access rights to verify alignment with staff designations, least privilege, and supervisory signoff of role assignments.



Internal Audit Report 2026-308: Riverside County Department of Animal Services, Follow-up Audit

Management's Response

“The Department is developing and implementing standardized processes requiring all system access requests to be submitted through ServiceNow and assigned based on approved job functions and operational needs. Standard system roles are assigned according to employee designation, while requests for additional or elevated access will require documented supervisory or management approval prior to being granted by the Chameleon Administrator. Animal Services is currently reviewing existing access rights and has drafted a Standard Operating Procedure (SOP) to formalize access request procedures, approvals, role assignments, periodic reviews, and oversight responsibilities to strengthen compliance and accountability.”

Attachment A



Office of Ben J. Benoit
Riverside County Auditor-Controller

Number of Findings & Recommendations

High Risk

9 Findings
• **22 Recommendations**

Medium Risk

0 Findings

Low Risk

0 Findings

* Please refer to Appendix A for a classification of the priority levels.

Internal Audit Report

2025-006

Riverside County
Department of Animal Services Audit

June 24, 2025



**COUNTY OF RIVERSIDE
OFFICE OF THE AUDITOR-CONTROLLER**

Ben J. Benoit, Auditor-Controller
Tanya S. Harris, DPA, CPA, Assistant Auditor-Controller

4080 Lemon Street, 6th Floor
P.O. Box 1326
Riverside, CA 92502-1326
951-955-3800



June 24, 2025

Mary Martin
Kimberly Youngberg
Director of Animal Services
Riverside County Department of Animal Services
6851 Van Burren Blvd,
Riverside, CA 92509

Subject: Internal Audit Report 2025-006: Riverside County Department of Animal Services Audit

Dear Ms. Martin & Ms. Youngberg,

At the request of your department, and in accordance with Board of Supervisors Resolution 83-338, we audited the Riverside County Department of Animal Services to provide your management and the Board of Supervisors with an independent assessment of internal controls over system access and data management processes within the application used to manage department operations.

We conducted our audit in accordance with the International Standards for the Professional Practice of Internal Auditing. These standards require that we plan and perform the audit to obtain sufficient, reliable, relevant and useful information to provide reasonable assurance that our objective as described above is achieved. An internal audit includes the systematic analysis of information to evaluate and improve the effectiveness of internal controls. We believe this audit provides a reasonable basis for our conclusion.

Internal controls are processes designed to provide management reasonable assurance of achieving efficiency of operations, compliance with laws and regulations, and reliability of non-financial information. Management is responsible for establishing and maintaining adequate internal controls. Our responsibility is to evaluate the internal controls.

Our conclusion and details of our audit are documented in the body of this audit report.



Internal Audit Report 2025-006: Riverside County Department of Animal Services Audit

As requested, in accordance with paragraph III.C of the Board of Supervisors Resolution 83-338, management responded to each reported condition and recommendation contained in our report. Management's responses are included in the report. We will follow-up to verify that management implemented the corrective actions.

We thank you and your staff for the help and cooperation. The assistance provided contributed significantly to the successful completion of this audit.

Ben J. Benoit
Riverside County Auditor-Controller

By: René Casillas, CPA, CRMA
Deputy Auditor-Controller

cc: Board of Supervisors
Jeff A. Van Wagenen, Jr., County Executive Officer
Juan Perez, Chief Operating Officer
Grand Jury



Internal Audit Report 2025-006: Riverside County Department of Animal Services Audit

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Internal Audit Report 2025-006: Riverside County Department of Animal Services Audit

Executive Summary

Overview

At the request of the Riverside County Department of Animal Services (Animal Services), we collaborated with the department to perform an independent review of their internal controls over system access and data management processes within the application used to manage Animal Services Operations. This engagement was conducted to assist the department in assessing its operational effectiveness and ensuring alignment with best practices, the Hayden Act, and Food and Agriculture Ordinance 32003.

Animal Services is dedicated to promoting responsible pet ownership through progressive animal welfare initiatives, community outreach, and humane education within a culture of compassion, creativity, and integrity. Animal Services provides animal care and control for unincorporated areas of Riverside County and 16 contract cities. The department serves the community through sheltering stray or lost animals, rabies control, public safety, emergency response, animal cruelty investigations, animal law enforcement, veterinary care, and programs that support Riverside County residents and their animals.

Animal Services has an adopted budget of \$34.4 million for FY 2024-25 and 214 adopted positions. *County of Riverside, Fiscal Year 2024-25 Adopted Budget Volume 1, 273.*

Audit Objective

Our objective is to provide management and the Board of Supervisors with an independent assessment of the adequacy and effectiveness of internal controls over system access and data management processes within the application used to manage department operations. Internal controls are processes designed to provide management reasonable assurance of achieving efficiency of operations, compliance with laws and regulations, and reliability of financial and non-

AUDIT HIGHLIGHTS

- Improve processes for recording staff initials, daily animal counts, and euthanasia details to strengthen accountability and transparency.
- Align training, access approvals, and role assignments with policy standards to maintain compliance and staff competency.
- Strengthen validation rules, supervisory reviews, and duplicate record management to ensure reliable and accurate reporting.
- Separate euthanasia categories like "Euthanasia Requested by Owner" in published statistics to build public trust.



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financial information. Reasonable assurance recognizes internal controls have inherent limitations, including cost, mistakes, and intentional efforts to bypass internal controls.

Audit Scope and Methodology

We conducted the audit from June 24, 2024, through October 17, 2024, for operations from July 1, 2022, through August 31, 2024. Using a risk-based approach, our scope included system access and data management processes within the application used to manage department operations.

Audit Conclusion

Based on the results of our audit, we identified significant opportunities for improvement in the internal controls and data management processes within the application used to manage Animal Services operations. These areas include system access, data integrity, consistency, record validation, reporting clarity, documentary evidence, user access rights, staff accountability, training, and evaluations. Specific instances requiring improvement are outlined in detail in the report, which reflects the scope of our review: an independent assessment of internal controls, system access, and data management processes.



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System Access and Data Management Processes

Background

The Animal Services application system, Chameleon, is a customizable software platform that supports the department's critical services, including animal impound, outcome, adoption processing, and health record management. It enables shelters to maintain accurate information, streamline workflows, and enhance decision-making to support the department's operational goals.

This system is widely used in animal shelter operations and provides features such as data entry, record management, and reporting. Staff use the system to create, and update detailed impound records, capturing fields like animal type, weight, and source city, with updates logged by multiple team members throughout an animal's care. These functionalities ensure accountability, promote data integrity, and reduce errors during operations.

The system categorizes animals for reporting purposes such as type, condition, and outcome, generating monthly and yearly statistics published on the department's website. These reports play a vital role in public transparency and demonstrate compliance with regulatory standards such as the Hayden Act (1997) and Food and Agriculture Ordinance 32003.

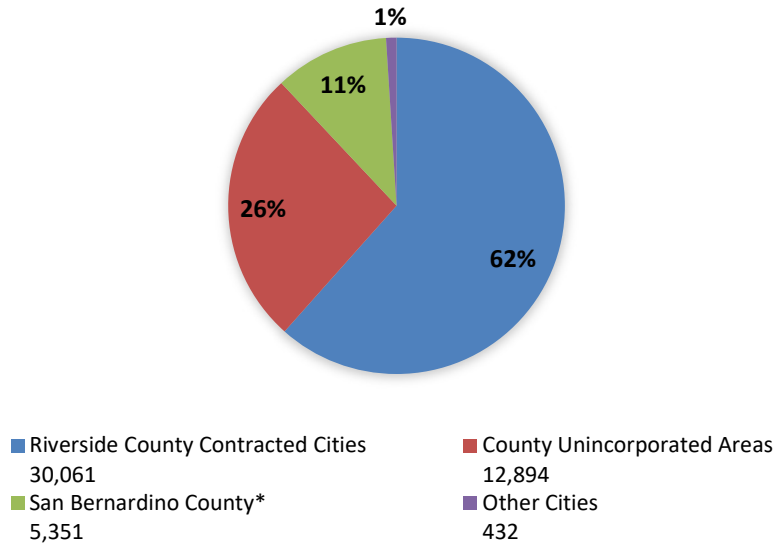
Effective controls over system access, data validation, and reporting processes are critical to maintaining data accuracy and operational consistency. Preventive measures, such as validation rules, reduce errors at the point of entry, while detective controls, like exception reporting and supervisor reviews, help identify anomalies. Together, these controls strengthen the department's ability to meet its objectives, safeguard sensitive information, and ensure compliance.

Animal Services provided shelter services to Riverside County contracted cities, county unincorporated areas, and contracted cities of San Bernardino County such as Grand Terrace, Colton, Rialto, and Fontana. The contract with the cities of San Bernardino County mostly ended in June 2024. Animal services also received impounds from other cities (non-contracted) under an open-administration policy. Animal Services extended support to San Bernardino County (Grand Terrace, Colton, Rialto, and Fontana) and other cities, which together accounted for 12% of the total population served. The contracted cities of San Bernardino and open administration policy enabled access to shelter services across a broad demographic but introduced challenges related to resource allocation and capacity management. See Chart A, which illustrates where the animal intake for services comes from.



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Chart A: Intake Jurisdiction Percentage, Fiscal Year, June 30, 2024.



*Consists of contracted cities of Grand Terrace, Colton, Rialto, and Fontana

Objective

To verify the existence and adequacy of internal controls system access and data management processes within the application used to manage operations within Animal Services.

Audit Methodology

To accomplish these objectives, we:

- Obtained and reviewed relevant regulations and criteria applicable to Animal Services, including:
 - California Food and Agricultural Code Section 32003 and 17006
 - Hayden Act 1997
 - California Code Regulations, Title 16, 2039
 - California Business and Profession Code 4827
 - The Standard Practice Manual, 1001, Internal Control Authorization and Approval
 - Riverside County Information Security Standard V2.0, Least Privilege, Section 4.1.6
 - County of Riverside Records Retention Schedule
 - Animal Services System Standard operating procedures
 - Duties of Staff 100-02, 03
 - Kennel Inventory Standard Operating Procedure



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- Conducted interviews and performed walk-throughs with department personnel responsible for application controls to obtain an understanding of processes and procedures.
- Performed research to identify additional concerns related to Animal Services, documenting items for further evaluation.
- Verified whether adequate segregation of duties was in place for tasks associated with system access and application controls.
- Selected a sample of impound records from the population of 32,044¹ and independently evaluated application controls that included input process controls, processing detail of animals, assigning outcomes, system logs, and existence and adequacy of internal controls over data management to ensure the data is recorded, processed, stored and reported accurately in the Animal Services System.
- Worked with the department to obtain a system-generated listing of animal intakes and outcomes, and independently verified the data for accuracy, completeness, validation, and adequate supporting documentation in compliance with policies and applicable mandates.
- Obtained a listing of Animal Services employees during the audit review period and independently assessed whether employees had appropriate training, system access, and proper authorization.
- Analyzed twelve months of system output reports and independently verified data accuracy, identified discrepancies, and confirmed alignment between internal system reports and published records.
- Reviewed the department's data accuracy report to independently verify whether errors were identified and tracked for evaluation and training purposes.
- Collaborated with the department to obtain key performance indicators and actual statistics, verifying whether the department has adequate key performance indicators to evaluate its performance effectively.
- Obtained and verified the inventory records of animals, assessing whether inventory counts were consistently documented, performed in compliance with standards, and whether

¹The total animal records during the audit period July 1, 2022, through August 31, 2024, was 96,818, including Riverside County, Contract Cities, and Non-Contracted Cities, which is narrowed down to 32,044 for the following higher-risk categories, "died," "disposal," "euthanasia," and "missing," including dogs and cats only.



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discrepancies were highlighted and resolved. Reviewed the evidence of the data entry terminal log-ons to confirm whether adequate credential restrictions and access controls were enforced.

- Independently reviewed the system’s database triggers to verify whether discrepancies were communicated and resolved promptly.
- Reviewed the vendor master agreement to confirm approval by management and assess whether the agreement included terms and conditions for audit and indemnification purposes.
- Obtained and reviewed the department’s business continuity plan to verify the adequacy of system backups, documentation, and retention protocols.

Operational Insight 1

Animal Services is responsible for managing records of all animals that enter and leave their care. This includes ensuring compliance with state laws and county policies related to animal welfare, treatment, and euthanasia. Within its operations, the department handles impound records, each requiring detailed documentation to track outcomes, ownership, and compliance with applicable mandates. The accuracy of these records helps support the department’s operational integrity and also serves as evidence of compliance with regulatory standards and department policies and procedures. Effective record-keeping is critical to maintaining accountability, ensuring transparency, and fostering public trust in the department’s practices.

Finding 1: Animal Documentation

Priority Level: 1²

Condition

Our review of 100 (out of a population of 32,044³) randomly selected impound records identified the following inconsistencies in supporting documentation:

- One impound record was missing the Owner Surrender Euthanasia Request Form, which is necessary for documenting the owner's certification of ownership and authorization for euthanasia.
- One impound record with an outcome of “missing” did not include a witness or police report as required by policy.

² Please see Appendix A (page 31) for a description of the finding priority level classifications.

³ The total animal records during the audit period was 96,818, including Riverside County, Contract Cities, and Non-Contracted Cities, which is narrowed down to 32,044 for the following higher-risk categories, “died,” “disposal,” “euthanasia,” and “missing,” including dogs and cats only.



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- The pre-euthanasia list was not documented or retained for any euthanasia events as required by department policy. This process was not being performed, which creates gaps between department policy and practice, specifically in documentation and accountability.

Criteria

The County of Riverside Records Retention Schedule Code DAS_SHS150 requires records for each animal, including admission and condition data, to be retained for "CY+3" years. Similarly, the Food and Agriculture Code 32003 mandates that all public and private shelters maintain accurate records for every animal taken up, medically treated, or impounded. Additionally, the *Chameleon Kennel Window 00-03* policy requires a direct report reference and police report after 24 hours for animals with a "missing" outcome, and the department's Standard Operating Procedure for Euthanasia specifies that the verifier must collect and deliver all pre-euthanasia paperwork to the Supervising Registered Veterinary Technician to ensure proper accountability. These standards establish the necessary framework for maintaining accurate and complete records to ensure compliance and accountability.

Impact to the Operation as a Result of the Condition

The record-keeping anomalies identified during our review can compromise the department's ability to comply with regulatory and department policies and procedures, increasing the risk of liabilities and reputational damage. Furthermore, these gaps in documentation for a department like Animal Services can cloud the department's intention of being accountable and transparent with its operations, leading to an erosion of public trust. They also create challenges for future investigations or audits related to animal welfare practices, as incomplete or inaccurate records limit the department's ability to demonstrate its compliance and operational effectiveness.

Root Cause of the Condition

The anomalies in record-keeping resulted from a combination of inconsistent staff training on documentation protocols, insufficient oversight and monitoring of record-keeping processes, and gaps in the department's policies and procedures that help ensure complete and accurate documentation. Addressing these root causes is essential to improving the department's record-keeping practices and achieving compliance with policies and procedures.

Recommendation 1.1

Update existing policies and procedures to include the current procedures related to the Owner Surrender Euthanasia Request, Missing Report, and Pre-Euthanasia List. Maintain documentation acknowledging staff have reviewed and understood the policies which are easily accessible to all relevant staff.



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Management's Response

“**Concur.** The Department’s current standard is to scan all Owner Turn In (OTI) request forms and attach them to the animal’s ID number in the Department’s record keeping system, Chameleon. However, the Department will update the relevant policies and Standard Operating Procedures (SOPs) to formally document this process in writing. Additionally, the euthanasia policy will be updated to accurately reflect the current paperless process and practices.”

Actual/estimated Date of Corrective Action: May 31, 2025

Recommendation 1.2

Develop a process that includes an effective strategy for reviews ensuring that outcomes—such as missing and non-live outcomes (e.g., dead, euthanized, or disposal of animals)—are recorded and retained with evidence of reviews.

Management's Response

“**Concur.** As part of a current department-wide strategic improvement initiative, working with consultants, Outcomes for Pets, the Department is working to update processes for reviewing and recording outcomes, including missing and non-live outcomes (e.g., deceased, euthanized, or disposed animals). To support this initiative, the Department is in the process of recruiting a Business and Process Analyst. This position will play a critical role in strengthening internal controls by conducting regular audits of impound records, ensuring that all outcomes are accurately documented and retained with appropriate evidence of review.”

Actual/estimated Date of Corrective Action: May 31, 2025



Operational Insight 2

Animal Services’ operational practices are designed to ensure euthanasia procedures are performed ethically, transparently, and in compliance with regulatory standards. Each euthanasia case the department handles requires detailed documentation of staff involvement, approval processes, and outcomes. Maintaining accurate and complete records is crucial to demonstrating accountability, protecting the department’s reputation, and ensuring compliance with policies, laws, and regulations. The proper use of staff initials and personal identification numbers is critical to upholding these standards, promoting public trust, and minimizing operational risks.



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Finding 2: Animal Disposition Records

Priority Level: 1⁴

Condition

Our review of 100 (out of a population of 32,044⁵) randomly selected impound records revealed the following inconsistencies in the documentation of staff initials and approvals:

- Five impound records were missing management approval for euthanasia with no evidence of comments and initials.
- Six impound records included personal identification numbers (system generated numbers) in the “in-by/out-by” sections, but the associated staff members could not be confirmed as personal identification numbers are reassigned to different staff.
- Fourteen impound records were missing the initials of the staff responsible for finalizing the outcome.
- Eighteen impound records contained only one set of initials, despite multiple staff members being involved, which per policy, would require at least two sets of initials. The exception to this is emergency euthanasia outcomes; however, the documentation reviewed did not indicate emergency euthanasia was performed.

Criteria

The Food and Agriculture Code 32003 requires public and private shelters to keep accurate records on each animal, including the final disposition and the name of the individual who treated or euthanized the animal. The department’s Standard Operating Procedure for *Euthanasia* specifies that all euthanasia teams must document their assigned roles and actions unless exceptions apply, such as owner-requested or emergency euthanasia. Policies establish clear expectations for documenting staff involvement to ensure accountability, regulatory compliance, and ethical treatment of animals.

Impact to the Operation as a Result of the Condition

Inconsistent documentation of staff initials and approvals weakens accountability, undermines regulatory compliance, and exposes the department to potential legal and reputational risks. These documentation gaps can lead to difficulties in defending the department’s practices during

⁴ Please see Appendix A (page 31) for a description of the finding priority level classifications.

⁵ The total animal records during the audit period was 96,818, including Riverside County, Contract Cities, and Non-Contracted Cities, which is narrowed down to 32,044 for the following higher-risk categories, “died,” “disposal,” “euthanasia,” and “missing,” including dogs and cats only.



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investigations or audits, compromising its credibility and potentially resulting in penalties or public criticism. Strengthening these practices will reinforce transparency, build public trust, and aid in the department's ability to secure funding and maintain operational integrity.

Root Cause of the Condition

The discrepancies in documenting staff initials and approvals arise from varying interpretations of policies, opportunities to enhance training on documentation protocols, and the need for stronger oversight of record-keeping practices. Additionally, the absence of a robust system to track and manage personal identification numbers and recycling what should be unique identification numbers contributes to inefficiencies and affects accountability.

Recommendation 2.1

Revise existing policies and procedures to clearly define the requirements for documenting staff initials and approvals, including detailed protocols for emergency situations and scenarios involving multi-staff collaboration.

Management's Response

"Food and Agriculture Code 32003 is an unfunded mandate and it therefore does not impose any obligations on the Department. However, Concur. The Department recognizes the importance of clearly defining documentation requirements for staff initials and approvals. As part of a current department-wide strategic improvement initiative, working with consultants, Outcomes for Pets, the Department is actively updating existing policies and procedures to align with current operational standards and best practices. The updated policies will provide detailed protocols for documenting staff approvals, including specific guidance on emergency situations and scenarios involving multi-staff collaboration. This will ensure consistency, accountability, and compliance with relevant processes and training will be provided to ensure staff adherence to the revised procedures."

Actual/estimated Date of Corrective Action: May 31, 2025

Recommendation 2.2

Develop a process for regular reviews of euthanasia records with documented evidence of the review, to ensure compliance with documentation requirements and identify discrepancies promptly.



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Management's Response

“Concur. As part of a current department-wide strategic improvement initiative, working with consultants, Outcomes for Pets, the Department is working to update and enhance processes for reviewing records. To support this initiative, the Department is in the process of hiring a Business and Process Analyst. This position will play a critical role in strengthening internal controls by conducting regular audits of records.”

Actual/estimated Date of Corrective Action: May 31, 2025

Recommendation 2.3

Track staff documentation errors and establish a program of regular retraining and evaluation across all department locations, to emphasize the importance of accurate and consistent record-keeping and compliance with department policies.

Management's Response

“Concur. As part of a current department-wide strategic improvement initiative, working with consultants, Outcomes for Pets, the Department is working to update/enhance DAS processes for tracking documentation. To support this initiative, the Department is in the process of hiring a Business and Process Analyst. to assist with tracking staff data entry errors and coordinating regular retraining in compliance with Department policies.”

Actual/estimated Date of Corrective Action: May 31, 2025

Recommendation 2.4

Implement a system to track the issuance and reassignment of personal identification numbers to ensure accountability and facilitate tracking of staff actions.

Management's Response

“Concur. The Department recognizes the importance of accountability and is in the process of creating a tracking spreadsheet to be updated as needed and maintained by a Field Services Administrative Lieutenant.”

Actual/estimated Date of Corrective Action: May 31, 2025



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Operational Insight 3

Accurate record-keeping is vital to the operations of Animal Services. These records track critical outcomes which must be documented precisely to comply with regulatory standards, support resource allocation, and maintain public trust. Data entry errors resulting in duplicate records not only risk misrepresentation of animal care outcomes but also create inefficiencies in operations, leading to challenges in budgeting, reporting, and maintaining transparency with stakeholders.

Finding 3: Duplicate Impound Records

Priority Level: 1⁶

Condition

Our review of 143 impound records found during our audit period were duplicate records, with each having a corresponding duplicate Animal ID and outcomes such as disposal, euthanasia, and died.

Criteria

The Food and Agriculture Code 32003 mandates that all public and private shelters maintain accurate records for every animal taken up, medically treated, or impounded. As such, all records need to accurately reflect the disposition of each animal to support compliance with regulatory and reporting standards.

Impact to the Operation as a Result of the Condition

Duplicate impound records compromise the accuracy of public records, potentially leading to inaccurate statistics that can damage public trust, and impact regulatory compliance and decision-making. For example, inflated euthanasia figures may create public relations challenges, while under-reported numbers can affect budgeting and service planning. Discrepancies in records may also result in resource misallocation, non-compliance penalties, and operational inefficiencies, ultimately undermining the department to carry out its operational objectives efficiently and effectively.

Root Cause of the Condition

The occurrence of duplicate impound records is attributed to data entry errors, creation of duplicate records to issue a second dose of euthanasia solution, lack of requests for the deletion of duplicate records, insufficient oversight in the record-keeping process, and the absence of

⁶ Please see Appendix A (page 31) for a description of the finding priority level classifications.



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system controls designed to identify and prevent duplicates. These gaps highlight the need for enhanced data validation protocols and clarified procedures to address duplicates effectively.

Recommendation 3.1

Develop a system process to flag duplicate impound records that share the same non-live outcomes during the internal data validation process.

Management's Response

"Food and Agriculture Code 32003 is an unfunded mandate and it therefore does not impose any obligations on the Department. However, Concur. The Department has initiated discussions with the Chameleon database vendor to develop an error reporting system that will flag duplicate impound records."

Actual/estimated Date of Corrective Action: May 31, 2025

Recommendation 3.2

Update policies and procedures to clearly define the process for applying outcomes only to the correct impound records, while ensuring identified duplicate records are removed appropriately and efficiently.

Management's Response

"Concur. To ensure that outcomes are applied only to the correct impound records and that duplicate records are identified and removed efficiently, the Department will develop a Standard Operating Procedure (SOP). This SOP will clearly define the process for identifying and submitting duplicate records for correction. The Department will also provide training and guidance to relevant staff to ensure consistent implementation of the updated procedures."

Actual/estimated Date of Corrective Action: May 31, 2025

Operational Insight 4

Animal Services must ensure that every animal's disposition is consistently classified in accordance with department policy. Subtype classifications, such as those for euthanasia outcomes, help ensure transparency and consistency in reporting animal outcomes. These records help inform the public and reporting agencies, supporting transparency, compliance and accountability. Inconsistencies not only risk non-compliance with regulatory requirements but also undermine the public trust and create operational inefficiencies.



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Finding 4: Euthanasia Types Classification

Priority Level: 1⁷

Condition

Our review of 100 (out of a population of 32,044⁸) randomly selected impound records identified six instances where animals euthanized were incorrectly classified. Specifically, instances were labeled as “Too Young” in the “Out-Condition” field or comments field, the animals were assigned the “Euthanized-Treatable Medical” subtype instead of the correct “Euthanized-Too Young” subtype. Additionally, on the department’s website, animals euthanized as “Too Young” are not disclosed as a separate category. This inconsistency leads to misunderstandings about the number of animals euthanized, impacting compliance with mandates.

Criteria

Policy Number 000-03, *Completion of the Chameleon Kennel Window*, requires that when the outcome type is “Euthanasia,” the corresponding subtype must strictly adhere to predefined categories such as Abatement, Owner Request, Rabies Test, Too Young, Treatable Behavior, Treatable Medical, Untreatable Behavior, Untreatable Medical, Adoptable, or Shot. Accurate subtype classification ensures consistency, compliance, and clear communication with stakeholders.

Additionally, The Food and Agriculture Code 17006 permits euthanasia of newborn animals needing maternal care without holding them for owner redemption or adoption.

Impact to the Operation as a Result of the Condition

Misclassifying animals in critical categories such as “Euthanized Treatable,” which is published on the department’s website, can lead to reputational damage, and loss of trust in the department’s operations. Incorrect data could also mislead stakeholders dependent on correct data, affecting decision-making, funding, community engagement, and compliance with policies. Ensuring accurate subtype classification is essential to achieving operational objectives.

Root Cause of the Condition

The misclassification of euthanasia subtypes arises from differing interpretations of policies across divisions, opportunities to enhance staff retraining on the correct use of subtypes, and the need for stronger supervisory oversight to ensure the accuracy of classifications.

⁷ Please see Appendix A (page 31) for a description of the finding priority level classifications.

⁸ The total animal records during the audit period was 96,818, including Riverside County, Contract Cities, and Non-Contracted Cities, which is narrowed down to 32,044 for the following higher-risk categories, “died,” “disposal,” “euthanasia,” and “missing,” including dogs and cats only.



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Recommendation 4.1

Ensure staff select the correct subtype before finalizing records, particularly for outcomes such as “Euthanized” and subtypes like “Too Young.”

Management’s Response

“**Concur.** The Department acknowledges the importance of accurate data entry, particularly in selecting the correct subtype before finalizing records. To address this, the Department will implement mechanisms to review data entry for consistency and to minimize errors in reporting. These mechanisms will include enhanced staff training, regular audits of recorded data, and system validations to prompt correct subtype selection. Additionally, the Department will be establishing a review process to identify and correct discrepancies in outcomes.”

Actual/estimated Date of Corrective Action: May 31, 2025

Recommendation 4.2

Provide regular staff training and refreshers on the correct interpretation and use of euthanasia subtypes to ensure consistent application across all divisions.

Management’s Response

“**Concur.** The Department recognizes the importance of ensuring staff have a clear and consistent understanding of euthanasia subtypes. To address this, the Department will implement regular (annually) training sessions and regular refresher courses to reinforce proper interpretation and application across all divisions. Training materials will be updated as needed to reflect any changes in policy or best practices, and participation will be tracked to ensure compliance.”

Actual/estimated Date of Corrective Action: May 31, 2025

Recommendation 4.3

Develop and implement standardized policies and procedures to ensure consistent supervisory reviews for outcomes documented.

Management’s Response

“**Concur.** As part of a current department-wide strategic improvement initiative, working with consultants, Outcomes for Pets, the Department is actively working to enhance processes for



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tracking documentation. To support this initiative, the Department is in the process of hiring a Business and Process Analyst. to conduct regular audits of impound and outcome records.”

Actual/Estimated Date of Corrective Action: May 31, 2025



Operational Insight 5

Published statistics on the department's website serve as a critical tool for building trust with the community. Particularly categories such as “euthanasia” hold significance, as they highlight sensitive outcomes that require clear and accurate communication. Consistency of categories in reporting formats across all timeframes—monthly and yearly—avoids public confusion or concern.

Finding 5: Euthanasia Requests by Animal Owners

Priority Level: 1⁹

Condition

We noted that the euthanasia category requested by the owner is not consistently published across different reports on the website. Animal Services system separately records the category “Euthanasia Requested by the Owner” but it is made part of their total Euthanized outcome numbers posted on department website for yearly statistics. Please see the yearly table below extracted from the department website that provides Euthanized Treatable/untreatable without specifying the euthanasia requested by the owner category that is included in impound and outcome statistics.

⁹ Please see Appendix A (page 31) for a description of the finding priority level classifications.



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Outcome Statistics¹⁰

January 1, 2023, to December 31, 2023

Riverside County Department Outcomes

	DOG	CAT	OTHERS¹¹	Total
ADOPTION	6,007	3,256	248	9,511
TRANSFER ADOPTION PARTNER	3,264	614	359	4,237
TRANSFER TO OTHER AGENCY	189	88	18	295
RETURNED TO OWNER	2,174	137	107	2,418
IN FOSTER HOME	753	1,657	22	2,432
EUTHANIZED TREATABLE	1,647	1,633	27	3,307
EUTHANIZED UNTREATABLE	1,461	3,671	521	5,653
DIED	118	227	40	385
RCDAS COMMUNITY CAT PROGRAM	0	1,823	0	1,823
Total	15,613	13,106	1,342	30,061

Intake Statistics¹⁰

January 1, 2023, to December 31, 2023

Riverside County Impounds

	DOG	CAT	BIRD	LIVESTOCK	OTHERS	Total
STRAY	11,538	10,312	535	94	590	23,069
STRAY-ABANDONED	38	133	0	0	8	179
STRAY-KNOWN WAIT	1,043	73	5	2	1	1,124
STRAY-DEAD	1,226	2,628	355	131	1,358	5,698
OWNER SUR	715	341	153	16	36	1,261
CONFISCATE	837	238	130	50	64	1,319
ADOPTION RETURN	627	189	1	0	2	819
FOSTER RETURN	612	1,686	0	0	5	2,303
DISPO REQ	476	150	16	30	31	703
TRANSFER FROM ANOTHER AGENCY	57	5	0	0	0	62
Total	17,169	15,755	1,195	323	2,095	36,537

Criteria

The Food and Agriculture Code 32003 mandates that all public and private shelters maintain accurate records for every animal taken up, medically treated, or impounded. As such, all records

¹⁰ Department of Animal Services Riverside County Previous Yearly Statistics.
<https://rcdas.org/statistics>

¹¹ Others include livestock, reptiles, birds, etc.



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need to accurately reflect the disposition of each animal to support compliance with regulatory and reporting standards.

Impact to the Operation as a Result of the Condition

Inconsistent reporting of “Euthanasia Requested by Owner” creates challenges as all the euthanasia reported in statistics falls into department responsibility, leading to public concern and affecting the department's reputation. Ensuring clarity and consistency in reporting supports transparency, ensures compliance with legislative mandates, aids in making informed decisions, and fosters public trust.

Root Cause of the Condition

The inconsistency stems from a departmental change in reporting format during 2023, which resulted in “Euthanasia Requested by Owner” being included in monthly statistics but omitted from yearly statistics. This highlights an opportunity to align reporting practices and develop standardized guidelines for presenting data consistently across different reporting periods.

Recommendation 5.1

Implement consistent documentation and reporting across all statistical reports published on the department's website, ensuring all categories are included in both monthly and yearly statistics.

Management's Response

“Food and Agriculture Code 32003 is an unfunded mandate and it therefore does not impose any obligations on the Department. However, Concur. As part of the current department-wide strategic improvement initiative, the Department is working with consultants, Outcomes for Pets, to standardize reporting across all statistical reports published on the DAS website. This effort will ensure consistency in documentation and the inclusion of all relevant categories in both monthly and yearly statistics.”

Actual/estimated Date of Corrective Action: May 31, 2025

Recommendation 5.2

Develop standardized guidelines for reporting formats to ensure alignment and consistency in how data is presented across different timeframes in compliance with Food and Agriculture Code 32003.



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Management's Response

“Food and Agriculture Code 32003 is an unfunded mandate and it therefore does not impose any obligations on the Department. However, Concur. The Department agrees with the need for standardized guidelines to ensure consistency in data reporting across different timeframes. Currently, the Department is collaborating with consultants, Outcomes for Pets, to develop new standardized reporting formats. The result of this effort will enhance data accuracy, alignment, and compliance.”

Actual/estimated Date of Corrective Action: May 31, 2025

Recommendation 5.3

Conduct consistent reviews of published reports to verify compliance with Food and Agriculture Code 32003 requirements and ensure accurate representation of all reporting categories.

Management's Response

“Food and Agriculture Code 32003 is an unfunded mandate and it therefore does not impose any obligations on the Department. However, Concur. The Department is evaluating current reporting practices to identify areas for improvement and enhance transparency. Additionally, working with Outcomes for Pets, the Department is standardizing reporting processes, including implementing consistent review procedures for published reports to verify accuracy and proper categorization of all reporting elements. As part of this effort, the Department is also developing guidelines and reviewing protocols to ensure that reports accurately reflect all required reporting categories.”

Actual/estimated Date of Corrective Action: May 31, 2025

Operational Insight 6

The humane and safe performance of euthanasia is a critical responsibility of Animal Services, requiring well-trained staff and strict adherence to state-mandated regulations. Proper training in sodium pentobarbital administration ensures the welfare of animals, safeguards staff, maintains compliance with respective laws, and ensures best practices are followed. Accurate tracking and documentation of training hours and certification are essential to demonstrating compliance and protecting the department from legal or regulatory risks. Reliable documentation practices also enable the department to effectively monitor staff competency and address gaps in training.



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Finding 6: Euthanasia Training Compliance and Consistency

Priority Level: 1¹²

Condition

Our review revealed that 17 staff members, across 25 impound records, performed euthanasia, however, evidence of staff training was not available. Records of training hours and proof of completion are often incomplete or found missing.

Criteria

- California Code of Regulations, *Title 16, 2039* mandates at least eight hours of euthanasia training for non-veterinarian staff involved in administering sodium pentobarbital, including five hours of hands-on training.
- California Business and Professions Code 4827(d) states Shelter Animal Services employees can perform euthanasia without a veterinarian present, provided they meet the training requirements.
- Animal Services SOP: *Creating and Tracking Employee Training Attendance in Chameleon*, “It is expected that supervisors and managers scan a copy of the proof of attendance to the employee’s personal identification record” in the system.

Impact to the Operation as a Result of the Condition

Ensuring all staff meet euthanasia training requirements is critical to minimizing legal risk. Properly trained staff performing euthanasia helps safeguard animal welfare and maintain compliance with state regulations. Strengthening documentation practices for training will enhance the department's ability to demonstrate compliance with legal requirements, support public trust, and reduce the risk of penalties or operational challenges.

Root Cause of the Condition

The gaps in training and documentation are due to decentralized re-training initiatives without tracking and monitoring of staff training hours, and outdated training policy to support ongoing compliance with state-mandated certification standards.

¹² Please see Appendix A (page 31) for a description of the finding priority level classifications.



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Recommendation 6.1

Develop policies and procedures to establish review and approval processes for verifying and regularly updating staff training records. Ensure these processes include tracking the completion of euthanasia certification training and retraining requirements.

Management's Response

"Concur. The Department is currently in the process of establishing a records repository and digital file management (Laserfiche) for proper tracking of staff training."

Actual/estimated Date of Corrective Action: May 31, 2025

Recommendation 6.2

Establish a process to ensure euthanasia is restricted to staff who have completed the mandated eight-hour certification course.

Management's Response

"Partially Concur. The Department currently ensures that only certified staff are allowed to perform euthanasia. However, the Department will update policies to create a procedure that will allow for more readily available verification of certification status."

Actual/Estimated Date of Corrective Action: May 31, 2025

Recommendation 6.3

Implement a supplementary tool to monitor and document training attendance, certification, and retraining requirements. Ensure supervisors are accountable for updating training records in real-time.

Management's Response

"Concur. The Department will be implementing new tracking software (Laserfiche) to monitor and document training requirements. The Department will also update the standard operating procedure (SOP – Creating and Tracking Employee Training Attendance in Chameleon)."

Actual/estimated Date of Corrective Action: May 31, 2025



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Operational Insight 7

Accurate and complete data entry is critical for maintaining reliable animal impound records. These records document the circumstances, personnel, and outcomes associated with animal impoundments and serve as a vital resource for audits, reporting, and decision-making. Robust system controls and staff training are essential to prevent errors and ensure the consistency and integrity of data.

Finding 7: Data Validation for Impound Records

Priority Level: 1¹³

Condition

Our review of 100 (out of a population of 32,044¹⁴) impound records identified several data entry errors and system shortcomings:

- Three impound records in the system contained incorrect impound dates and were missing documentation of the individual who brought the animal to the shelter.
- Twelve impound records were missing comments about the outcomes, including euthanasia, overpopulation, and lack of foster interest.

The discrepancy report is generated by the department to identify discrepancies in the Animal Services application system, including records of all changes made during the review period, is not tracked per individual staff to use for training and staff evaluation purposes.

Criteria

The Food and Agriculture Code 32003 requires public shelters to maintain accurate and complete records for each animal taken up, medically treated, euthanized, or impounded. Records must include the circumstances of impoundment, personnel names, medical treatments, and final disposition. These records must be retained for at least three years and must be accurate to ensure compliance with regulatory standards and support the achievement of operational objectives.

¹³ Please see Appendix A (page 31) for a description of the finding priority level classifications.

¹⁴ The total animal records during the audit period was 96,818, including Riverside County, Contract Cities, and Non-Contracted Cities, which is narrowed down to 32,044 for the following higher-risk categories, “died,” “disposal,” “euthanasia,” and “missing,” including dogs and cats only.



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Impact to the Operation as a Result of the Condition

The absence of data validation controls and tracking mechanisms compromises the accuracy and reliability of impound records. Errors such as incomplete fields, incorrect dates, and missing comments leads to non-compliance with regulatory standards. Inaccurate data affects decision-making, resource allocation, and reporting, increasing the administrative burden for corrections and reducing overall operational efficiency.

Root Cause of the Condition

The identified issues present opportunities to enhance data validation rules in the system application, establish tracking and oversight mechanisms for system changes, and strengthen staff training on data entry protocols. Addressing these areas will help ensure records are complete and accurate, reducing errors and inconsistencies in impound records.

Recommendation 7

Work with the system vendor to develop a comprehensive discrepancy report or implement a supplementary tool to track discrepancies by the employee. Track the discrepancies linked to individual employees and incorporate the findings into targeted training and evaluation programs.

Management's Response

"Food and Agriculture Code 32003 is an unfunded mandate and it therefore does not impose any obligations on the Department. However, *Concur*. The Department will partner with the Chameleon vendor to determine possibilities of implementation."

Actual/Estimated Date of Corrective Action: May 31, 2025

Operational Insight 8

Animal Services is responsible for managing animals impounded at the four different shelters. Conducting daily inventory counts of animals in the department's care ensures that Chameleon records accurately reflect their current location and status. These counts serve as a critical control to ensure accountability, track movements within the shelter, and promptly address discrepancies.



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Finding 8: Animal Inventory Records

Priority Level: 1¹⁵

Condition

The department does not consistently maintain records of daily kennel inventory counts, including documentation of communication such as emails or other recorded proof, as required by the Kennel Inventory Standard Operating Procedure.

Criteria

The Kennel Inventory Standard Operating Procedures mandates that inventory counts be completed twice daily—once before opening for business in the morning and again at the end of the day after all animals have been kenneled. These counts are necessary to ensure accountability for animals impounded at the shelter, which are classified as county assets. Accurate and timely records are essential for reconciling animal counts and maintaining transparency in shelter operations.

Impact to the Operation as a Result of the Condition

The absence of daily inventory records reduces inventory accuracy, accountability and transparency, increasing the risk of mismanagement of county assets and liability exposure. Without accurate documentation, the department cannot effectively track the welfare and status of animals, which leads to operational inefficiencies and negative perceptions of the shelter's effectiveness.

Root Cause of the Condition

The opportunity to improve the documentation and performance of inventory counts stems from areas where staff training can be enhanced, oversight of inventory processes strengthened, and adherence to established policies and procedures reinforced. Addressing these areas will support consistent adherence to the Kennel Inventory Standard Operating Procedures and foster greater accountability in daily operations.

Recommendation 8.1

Update Inventory management policies for staff with emphasis on the importance of completing and documenting daily inventory counts in accordance with the existing procedure to include clear guidelines for reconciling discrepancies.

¹⁵ Please see Appendix A (page 31) for a description of the finding priority level classifications.



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Management’s Response

“**Concur.** The Department will update inventory management policies and Standard Operating Procedures (SOPs) to emphasize the importance of completing and documenting daily inventory counts in accordance with existing procedures. The updated policies will include clear guidelines for reconciling discrepancies to ensure accuracy and accountability. These revisions will align with current inventory practices and reinforce staff compliance with established protocols.”

Actual/Estimated Date of Corrective Action: May 31, 2025

Recommendation 8.2

Strengthen supervisory oversight by implementing a review process for inventory counts to ensure records are accurate, complete, and reconciled consistently.

Management’s Response

“**Concur.** The Department is currently in the process of hiring a new Business and Process Analyst to assist in ensuring accurate recordkeeping of inventory to ensure records are accurate, complete, and reconciled consistently.”

Actual/Estimated Date of Corrective Action: May 31, 2025

Operational Insight 9

Authorization and approval processes are foundational to maintaining internal controls and safeguarding system security within Animal Services. Properly documenting that system roles and access rights align with staff training and duties helps mitigate risks and ensures operational integrity.

Finding 9: Access Right Approvals	Priority Level: 1¹⁶
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Condition

Our review of 33 randomly selected personnel records identified 12 instances where evidence of approval for access rights was unavailable and an incorrect incident workflow was selected in the helpdesk resolution, leading to incomplete documentation. Additionally, six cases were noted where the system roles assigned to Cashiers did not match the staff designation of Animal Care Technicians, as the Cashier role is typically assigned to front desk Animal Service Representatives.

¹⁶ Please see Appendix A (page 31) for a description of the finding priority level classifications.



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Criteria

The Standard Practice Manual, 1001, *Internal Control Authorization and Approval* requires transactions to be authorized by personnel with assigned approval authority. Additionally, the Riverside County Information Security Standard V2.0, *Least Privilege*, Section 4.1.6, mandates adherence to the principle of least privilege, granting users only the minimum access necessary to complete their assigned tasks. Compliance with these standards ensures accountability, protects sensitive information, and prevents unauthorized system access.

Impact to the Operation as a Result of the Condition

Oversight in documenting approval of access rights and assigning incorrect system roles poses significant risks to system security and accountability. Unauthorized access can lead to data breaches, inaccurate records, and diminished trust in the department's ability to safeguard sensitive information. These gaps could also hinder compliance with internal policies and expose the department to liabilities.

Root Cause of the Condition

Department policies and procedures regarding the Animal Application system need improvement to standardize initiating of requests, processing of requests, and granting approval for access rights.

Recommendation 9.1

Develop policies and procedures to document the authorization of staff access rights consistently. Ensure that these policies include clear guidelines for approval processes, role assignment, and oversight responsibilities.

Management's Response

"Concur. The Department understands the importance of proper authorization of access rights and roles. A standard operating procedure (SOP) will be created, to establish clear guidelines and oversight of access rights."

Actual/Estimated Date of Corrective Action: May 31, 2025



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Recommendation 9.2

Conduct periodic reviews of system roles and access rights and documents to verify alignment with staff designations and ensure compliance with the principle of least privilege. Include supervisory signoffs to confirm proper role assignments.

Management's Response

“Concur. The Department understands the importance of monitoring access rights and roles. A standard operating procedure (SOP) will be created to establish clear guidelines and oversight of access rights, including supervisory signoffs to confirming proper role assignments.”

Actual/Estimated Date of Corrective Action: May 31, 2025



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Appendix A: Finding Priority Level Classification

Priority Level 1	Priority Level 2	Priority Level 3
<p>These are audit findings that represent the most critical issues that require immediate attention and pose a significant risk to the department's objectives, compliance, security, financial health, or reputation. They may indicate serious control failures, non-compliance with laws or regulations, significant financial errors, or vulnerabilities with severe potential impact. Immediate corrective measures are necessary to mitigate the risks associated with these findings.</p>	<p>These are audit findings that are important and require timely resolution, but their impact is not as severe as Priority Level 1. They may highlight moderate control weaknesses, areas of non-compliance with internal policies and procedures, or financial discrepancies that are significant but are not critical. While they might not pose an immediate threat, they should be addressed promptly to prevent further escalation or potential negative consequences.</p>	<p>These are audit findings that are less critical and generally have a lower impact on the department's objectives, compliance, or operations. They may include minor control deficiencies, procedural deviations with minimal impact, or non-critical administrative errors. While they may not require immediate attention, they should still be acknowledged and addressed within a reasonable timeframe to ensure ongoing improvement and prevent potential accumulation of minor issues.</p>
<p><u>Expected Implementation Date of Recommendation*</u> One to three months</p>	<p><u>Expected Implementation Date of Recommendation *</u> Three to six months</p>	<p><u>Expected Implementation Date of Recommendation *</u> Six to twelve months</p>

* Expected completion to implement recommendation date begins after issuance of final audit report.



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Appendix B: List of Definitions for Animal Services

Term	Definition
Died	Animals that died while in the shelter.
Disposal	Final Disposition for deceased animals brought to the shelter as stray-dead or disposal requested.
Euthanasia Requested	Euthanasia of pet whose owner brought the pet to the shelter with the intent of accessing euthanasia services.
Euthanized	Shelter euthanasia.
Missing	Lost in care, animals who escaped.
Personal Identification Number (PID)	A unique number generated by Chameleon and assigned to individuals.



Attachment B

Department of Animal Services

*Mary Martin, Director for Animal Services
Kimberly Youngberg, DrPH, MPH
Assistant Director*

The following are the current status of the reported findings and planned corrective actions contained in Internal Audit Report 2025-006 Riverside County Department of Animal Services Audit.

2/27/26

Authorized Signature

Date

Finding 1: Animal Documentation

“Condition

Our review of 100 (out of a population of 32,044) randomly selected impound records identified the following inconsistencies in supporting documentation:

- One impound record was missing the Owner Surrender Euthanasia Request Form, which is necessary for documenting the owner's certification of ownership and authorization for euthanasia.
- One impound record with an outcome of “missing” did not include a witness or police report as required by policy.
- The pre-euthanasia list was not documented or retained for any euthanasia events as required by department policy. This process was not being performed, which creates gaps between department policy and practice, specifically in documentation and accountability.

Criteria

The County of Riverside Records Retention Schedule Code DAS_SHS150 requires records for each animal, including admission and condition data, to be retained for ‘CY+3’ years. Similarly, the Food and Agriculture Code 32003 mandates that all public and private shelters maintain accurate records for every animal taken up, medically treated, or impounded. Additionally, the Chameleon Kennel Window 00-03 policy requires a direct report reference and police report after 24 hours for animals with a ‘missing’ outcome, and the department's Standard Operating Procedure for Euthanasia specifies that the verifier must collect and deliver all pre-euthanasia paperwork to



the Supervising Registered Veterinary Technician to ensure proper accountability. These standards establish the necessary framework for maintaining accurate and complete records to ensure compliance and accountability.

Impact to the Operation as a Result of the Condition

The record-keeping anomalies identified during our review can compromise the department's ability to comply with regulatory and department policies and procedures, increasing the risk of liabilities and reputational damage. Furthermore, these gaps in documentation for a department like Animal Services can cloud the department's intention of being accountable and transparent with its operations, leading to an erosion of public trust. They also create challenges for future investigations or audits related to animal welfare practices, as incomplete or inaccurate records limit the department's ability to demonstrate its compliance and operational effectiveness.

Root Cause of the Condition

The anomalies in record-keeping resulted from a combination of inconsistent staff training on documentation protocols, insufficient oversight and monitoring of record-keeping processes, and gaps in the department's policies and procedures that help ensure complete and accurate documentation. Addressing these root causes is essential to improving the department's record-keeping practices and achieving compliance with policies and procedures."

Current Status

Reported Finding Corrected? Yes No

This task has been assigned to the newly hired Business Analyst, who is currently completing training. Full implementation is projected for completion by August 31, 2026.

Recommendation 1.1

"Update existing policies and procedures to include the current procedures related to the Owner Surrender Euthanasia Request, Missing Report, and Pre-Euthanasia List. Maintain documentation acknowledging staff have reviewed and understood the policies which are easily accessible to all relevant staff."

Management Reply

"**Concur.** The Department's current standard is to scan all Owner Turn In (OTI) request forms and attach them to the animal's ID number in the Department's record keeping system, Chameleon. However, the Department will update the relevant policies and Standard Operating Procedures (SOPs) to formally document this process in writing. Additionally, the euthanasia policy will be updated to accurately reflect the current paperless process and practices."



Actual/estimated Date of Corrective Action: May 31, 2025

Current Status

Corrective Action: Fully Implemented Partially Implemented Not Implemented

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

This task has been assigned to the newly hired Business Analyst, who is currently completing training. Full implementation is projected for completion by August 31, 2026.

Recommendation 1.2

“Develop a process that includes an effective strategy for reviews ensuring that outcomes—such as missing and non-live outcomes (e.g., dead, euthanized, or disposal of animals)—are recorded and retained with evidence of reviews.”

Management Reply

“Concur. As part of a current department-wide strategic improvement initiative, working with consultants, Outcomes for Pets, the Department is working to update processes for reviewing and recording outcomes, including missing and non-live outcomes (e.g., deceased, euthanized, or disposed animals). To support this initiative, the Department is in the process of recruiting a Business and Process Analyst. This position will play a critical role in strengthening internal controls by conducting regular audits of impound records, ensuring that all outcomes are accurately documented and retained with appropriate evidence of review.”

Actual/estimated Date of Corrective Action: May 31, 2025

Current Status

Corrective Action: Fully Implemented Partially Implemented Not Implemented

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

The Department has been working in collaboration with Outcomes for Pets Consulting, to strengthen processes for reviewing and documenting animal outcomes including missing and non-live outcomes. This has included enhanced data analysis review of outcome classifications, and identification of process improvements to ensure proper documentation and retention. To support ongoing oversight and internal controls, the department hired a Business Process Analyst on October 2, 2025, and is currently in training. Full implementation is expected by May 31, 2026. See attached.

Finding 2: Animal Disposition Records

“Condition



Department of Animal Services

Mary Martin, Director for Animal Services
Kimberly Youngberg, DrPH, MPH
Assistant Director

Our review of 100 (out of a population of 32,044) randomly selected impound records revealed the following inconsistencies in the documentation of staff initials and approvals:

- Five impound records were missing management approval for euthanasia with no evidence of comments and initials.
- Six impound records included personal identification numbers (system generated numbers) in the “in-by/out-by” sections, but the associated staff members could not be confirmed as personal identification numbers are reassigned to different staff.
- Fourteen impound records were missing the initials of the staff responsible for finalizing the outcome.
- Eighteen impound records contained only one set of initials, despite multiple staff members being involved, which per policy, would require at least two sets of initials. The exception to this is emergency euthanasia outcomes; however, the documentation reviewed did not indicate emergency euthanasia was performed.

Criteria

The Food and Agriculture Code 32003 requires public and private shelters to keep accurate records on each animal, including the final disposition and the name of the individual who treated or euthanized the animal. The department’s Standard Operating Procedure for *Euthanasia* specifies that all euthanasia teams must document their assigned roles and actions unless exceptions apply, such as owner-requested or emergency euthanasia. Policies establish clear expectations for documenting staff involvement to ensure accountability, regulatory compliance, and ethical treatment of animals.

Impact to the Operation as a Result of the Condition

Inconsistent documentation of staff initials and approvals weakens accountability, undermines regulatory compliance, and exposes the department to potential legal and reputational risks. These documentation gaps can lead to difficulties in defending the department’s practices during investigations or audits, compromising its credibility and potentially resulting in penalties or public criticism. Strengthening these practices will reinforce transparency, build public trust, and aid in the department’s ability to secure funding and maintain operational integrity.

Root Cause of the Condition

The discrepancies in documenting staff initials and approvals arise from varying interpretations of policies, opportunities to enhance training on documentation protocols, and the need for stronger oversight of record-keeping practices. Additionally, the absence of a robust system to



track and manage personal identification numbers and recycling what should be unique identification numbers contributes to inefficiencies and affects accountability.”

Current Status

Reported Finding Corrected? Yes No

Standard Operating Procedures (SOPs) specific to documentation requirements within the Chameleon system are being developed and implemented to clearly define expectations for staff initials and approvals. In conjunction with these SOPs, standardized Chameleon documentation templates are being created that include designated fields for staff initials to ensure consistent and complete documentation.

Recommendation 2.1

“Revise existing policies and procedures to clearly define the requirements for documenting staff initials and approvals, including detailed protocols for emergency situations and scenarios involving multi-staff collaboration.”

Management Reply

“Food and Agriculture Code 32003 is an unfunded mandate and it therefore does not impose any obligations on the Department. However, *Concur*. The Department recognizes the importance of clearly defining documentation requirements for staff initials and approvals. As part of a current department-wide strategic improvement initiative, working with consultants, Outcomes for Pets, the Department is actively updating existing policies and procedures to align with current operational standards and best practices. The updated policies will provide detailed protocols for documenting staff approvals, including specific guidance on emergency situations and scenarios involving multi-staff collaboration. This will ensure consistency, accountability, and compliance with relevant processes and training will be provided to ensure staff adherence to the revised procedures.”

Actual/estimated Date of Corrective Action: May 31, 2025

Current Status

Corrective Action: Fully Implemented Partially Implemented Not Implemented

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

Standard Operating Procedures (SOPs) specific to documentation requirements within the Chameleon system are being developed and implemented to clearly define expectations for staff initials and approvals. In conjunction with these SOPs, standardized Chameleon documentation templates are being created that include designated fields for staff initials to ensure consistent and complete documentation. These templates are designed to support scenarios involving routine operations, emergency situations, and multi-staff collaboration, reducing the risk of omitted initials or approvals. Staff will be trained on the updated SOPs and the use of the new templates to reinforce compliance and accountability. Ongoing oversight and quality checks will be incorporated to ensure staff consistently include their initials as required.
Estimated date of Corrective: May 31, 2026



Recommendation 2.2

“Develop a process for regular reviews of euthanasia records with documented evidence of the review, to ensure compliance with documentation requirements and identify discrepancies promptly.”

Management Reply

“**Concur.** As part of a current department-wide strategic improvement initiative, working with consultants, Outcomes for Pets, the Department is working to update and enhance processes for reviewing records. To support this initiative, the Department is in the process of hiring a Business and Process Analyst. This position will play a critical role in strengthening internal controls by conducting regular audits of records.”

Actual/estimated Date of Corrective Action: May 31, 2025

Current Status

Corrective Action: Fully Implemented Partially Implemented Not Implemented

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

Partially Implemented. A Business and Process Analyst was hired on October 2, 2025, and is currently in training. Full implementation is expected by May 31, 2026.

Recommendation 2.3

“Track staff documentation errors and establish a program of regular retraining and evaluation across all department locations, to emphasize the importance of accurate and consistent record-keeping and compliance with department policies.”

Management Reply

“**Concur.** As part of a current department-wide strategic improvement initiative, working with consultants, Outcomes for Pets, the Department is working to update/enhance DAS processes for tracking documentation. To support this initiative, the Department is in the process of hiring a Business and Process Analyst. to assist with tracking staff data entry errors and coordinating regular retraining in compliance with Department policies.”

Actual/estimated Date of Corrective Action: May 31, 2025

Current Status

Corrective Action: Fully Implemented Partially Implemented Not Implemented



Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

The Department is working with Outcomes for Pets Consulting, LLC as part of a department-wide strategic improvement initiative to enhance processes for tracking staff documentation errors and strengthening record-keeping practices. This includes evaluating current data entry procedures, identifying recurring documentation issues, and developing improved tracking mechanisms.

To support ongoing oversight and internal controls, the department hired a Business Process Analyst on October 2, 2025, and is currently in training. Full implementation is expected by May 31, 2026. See attached.

Recommendation 2.4

“Implement a system to track the issuance and reassignment of personal identification numbers to ensure accountability and facilitate tracking of staff actions.”

Management Reply

“**Concur.** The Department recognizes the importance of accountability and is in the process of creating a tracking spreadsheet to be updated as needed and maintained by a Field Services Administrative Lieutenant.”

Actual/estimated Date of Corrective Action: May 31, 2025

Current Status

Corrective Action: Fully Implemented Partially Implemented Not Implemented

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

Crystal Report has been created in Chameleon that shows history of use each Officer ID number tracking back to 2015. The Creating PIDs for staff process was formally implemented on August 18, 2025. Oversight and ongoing monitoring of the report is assigned to designated supervisory staff to ensure continued compliance with tracking requirements.

Finding 3: Duplicate Impound Records

“Condition

Our review of 143 impound records found during our audit period were duplicate records, with each having a corresponding duplicate Animal ID and outcomes such as disposal, euthanasia, and died.

Criteria



The Food and Agriculture Code 32003 mandates that all public and private shelters maintain accurate records for every animal taken up, medically treated, or impounded. As such, all records need to accurately reflect the disposition of each animal to support compliance with regulatory and reporting standards.

Impact to the Operation as a Result of the Condition

Duplicate impound records compromise the accuracy of public records, potentially leading to inaccurate statistics that can damage public trust, and impact regulatory compliance and decision-making. For example, inflated euthanasia figures may create public relations challenges, while under-reported numbers can affect budgeting and service planning. Discrepancies in records may also result in resource misallocation, non-compliance penalties, and operational inefficiencies, ultimately undermining the department to carry out its operational objectives efficiently and effectively.

Root Cause of the Condition

The occurrence of duplicate impound records is attributed to data entry errors, creation of duplicate records to issue a second dose of euthanasia solution, lack of requests for the deletion of duplicate records, insufficient oversight in the record-keeping process, and the absence of system controls designed to identify and prevent duplicates. These gaps highlight the need for enhanced data validation protocols and clarified procedures to address duplicates effectively.”

Current Status

Reported Finding Corrected? Yes No

Partially Implemented— Reports are being generated and provided to Outcomes for Pets for monthly review to support improved oversight and data accuracy. A Business and Process Analyst was hired on October 2, 2025, and is currently in training. Full implementation is expected by May 31, 2026.

Recommendation 3.1

“Develop a system process to flag duplicate impound records that share the same non-live outcomes during the internal data validation process.”

Management Reply

“Food and Agriculture Code 32003 is an unfunded mandate and it therefore does not impose any obligations on the Department. However, *Concur*. The Department has initiated discussions with the Chameleon database vendor to develop an error reporting system that will flag duplicate impound records.”



Department of Animal Services

*Mary Martin, Director for Animal Services
Kimberly Youngberg, DrPH, MPH
Assistant Director*

Actual/estimated Date of Corrective Action: May 31, 2025

Current Status

Corrective Action: Fully Implemented Partially Implemented Not Implemented

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

Not Implemented. The Department is in the process of developing and implementing PostMaster automated job notifications to alert staff when system errors occur. A Business and Process Analyst was hired on October 2, 2025, and is currently in training. Full implementation is expected by May 31, 2026.

Recommendation 3.2

Update policies and procedures to clearly define the process for applying outcomes only to the correct impound records, while ensuring identified duplicate records are removed appropriately and efficiently.”

Management Reply

“**Concur.** To ensure that outcomes are applied only to the correct impound records and that duplicate records are identified and removed efficiently, the Department will develop a Standard Operating Procedure (SOP). This SOP will clearly define the process for identifying and submitting duplicate records for correction. The Department will also provide training and guidance to relevant staff to ensure consistent implementation of the updated procedures.”

Actual/estimated Date of Corrective Action: May 31, 2025

Current Status

Corrective Action: Fully Implemented Partially Implemented Not Implemented

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

Not Implemented. The Department is in the process of developing and implementing PostMaster automated job notifications to alert staff when system errors occur. A Business and Process Analyst was hired on October 2, 2025, and is currently in training. Full implementation is expected by May 31, 2026.



Finding 4: Euthanasia Types Classification

“Condition

Our review of 100 (out of a population of 32,044) randomly selected impound records identified six instances where animals euthanized were incorrectly classified. Specifically, instances were labeled as “Too Young” in the “Out-Condition” field or comments field, the animals were assigned the “Euthanized-Treatable Medical” subtype instead of the correct ‘Euthanized-Too Young’ subtype. Additionally, on the department's website, animals euthanized as ‘Too Young’ are not disclosed as a separate category. This inconsistency leads to misunderstandings about the number of animals euthanized, impacting compliance with mandates.

Criteria

Policy Number 000-03, *Completion of the Chameleon Kennel Window*, requires that when the outcome type is ‘Euthanasia,’ the corresponding subtype must strictly adhere to predefined categories such as Abatement, Owner Request, Rabies Test, Too Young, Treatable Behavior, Treatable Medical, Untreatable Behavior, Untreatable Medical, Adoptable, or Shot. Accurate subtype classification ensures consistency, compliance, and clear communication with stakeholders.

Additionally, The Food and Agriculture Code 17006 permits euthanasia of newborn animals needing maternal care without holding them for owner redemption or adoption.

Impact to the Operation as a Result of the Condition

Misclassifying animals in critical categories such as ‘Euthanized Treatable,’ which is published on the department's website, can lead to reputational damage, and loss of trust in the department’s operations. Incorrect data could also mislead stakeholders dependent on correct data, affecting decision-making, funding, community engagement, and compliance with policies. Ensuring accurate subtype classification is essential to achieving operational objectives.

Root Cause of the Condition

The misclassification of euthanasia subtypes arises from differing interpretations of policies across divisions, opportunities to enhance staff retraining on the correct use of subtypes, and the need for stronger supervisory oversight to ensure the accuracy of classifications.”

Current Status

Reported Finding Corrected? Yes No



Standard Operating Procedures (SOPs) specific to documentation requirements within the Chameleon system are being developed and implemented to clearly define expectations for staff initials and approvals. In conjunction with these SOPs, standardized Chameleon documentation templates are being created that include designated fields for staff initials to ensure consistent and complete documentation. These templates are designed to support scenarios involving routine operations, emergency situations, and multi-staff collaboration, reducing the risk of omitted initials or approvals. Staff will be trained on the updated SOPs and the use of the new templates to reinforce compliance and accountability. Ongoing oversight and quality checks will be incorporated to ensure staff consistently include their initials as required. A Business and Process Analyst was hired on October 2, 2025, and is currently in training. Full implementation is expected by May 31, 2026.

Recommendation 4.1

“Ensure staff select the correct subtype before finalizing records, particularly for outcomes such as ‘Euthanized’ and subtypes like ‘Too Young.’”

Management Reply

“**Concur.** The Department acknowledges the importance of accurate data entry, particularly in selecting the correct subtype before finalizing records. To address this, the Department will implement mechanisms to review data entry for consistency and to minimize errors in reporting. These mechanisms will include enhanced staff training, regular audits of recorded data, and system validations to prompt correct subtype selection. Additionally, the Department will be establishing a review process to identify and correct discrepancies in outcomes.”

Actual/estimated Date of Corrective Action: May 31, 2025

Current Status

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

Standard Operating Procedures (SOPs) specific to documentation requirements within the Chameleon system are being developed and implemented to clearly define expectations for staff initials and approvals. In conjunction with these SOPs, standardized Chameleon documentation templates are being created that include designated fields for staff initials to ensure consistent and complete documentation. These templates are designed to support scenarios involving routine operations, emergency situations, and multi-staff collaboration, reducing the risk of omitted initials or approvals. Staff will be trained on the updated SOPs and the use of the new templates to reinforce compliance and accountability. Ongoing oversight and quality checks will be incorporated to ensure staff consistently include their initials as required. A Business and Process Analyst was hired on October 2, 2025, and is currently in training. Full implementation is expected by May 31, 2026.

Recommendation 4.2

“Provide regular staff training and refreshers on the correct interpretation and use of euthanasia subtypes to ensure consistent application across all divisions.”

Management Reply



Department of Animal Services

*Mary Martin, Director for Animal Services
Kimberly Youngberg, DrPH, MPH
Assistant Director*

“Concur. The Department recognizes the importance of ensuring staff have a clear and consistent understanding of euthanasia subtypes. To address this, the Department will implement regular (annually) training sessions and regular refresher courses to reinforce proper interpretation and application across all divisions. Training materials will be updated as needed to reflect any changes in policy or best practices, and participation will be tracked to ensure compliance.”

Actual/estimated Date of Corrective Action: May 31, 2025

Current Status

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

Department wide training on euthanasia subtypes was conducted on July 8, 2025 (see attached). The Euthanasia Policy is currently under review to align with updated procedures and documentation requirements, with final approval anticipated by the fourth quarter of 2026.

Recommendation 4.3

“Develop and implement standardized policies and procedures to ensure consistent supervisory reviews for outcomes documented.”

Management Reply

“Concur. As part of a current department-wide strategic improvement initiative, working with consultants, Outcomes for Pets, the Department is actively working to enhance processes for tracking documentation. To support this initiative, the Department is in the process of hiring a Business and Process Analyst. to conduct regular audits of impound and outcome records.”

Actual/Estimated Date of Corrective Action: May 31, 2025

Current Status

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

Partially Implemented. A Business and Process Analyst was hired on October 2, 2025, and is currently in training. Full implementation is expected by the fourth quarter of 2026.

Finding 5: Euthanasia Requests by Animal Owners

“Condition



We noted that the euthanasia category requested by the owner is not consistently published across different reports on the website. Animal Services system separately records the category 'Euthanasia Requested by the Owner' but it is made part of their total Euthanized outcome numbers posted on department website for yearly statistics. Please see the yearly table below extracted from the department website that provides Euthanized Treatable/untreatable without specifying the euthanasia requested by the owner category that is included in impound and outcome statistics.

Outcome Statistics

January 1, 2023, to December 31, 2023

Riverside County Department Outcomes

	DOG	CAT	OTHERS	Total
ADOPTION	6,007	3,256	248	9,511
TRANSFER ADOPTION PARTNER	3,264	614	359	4,237
TRANSFER TO OTHER AGENCY	189	88	18	295
RETURNED TO OWNER	2,174	137	107	2,418
IN FOSTER HOME	753	1,657	22	2,432
EUTHANIZED TREATABLE	1,647	1,633	27	3,307
EUTHANIZED UNTREATABLE	1,461	3,671	521	5,653
DIED	118	227	40	385
RCDAS COMMUNITY CAT PROGRAM	0	1,823	0	1,823
Total	15,613	13,106	1,342	30,061

Intake Statistics

January 1, 2023, to December 31, 2023

Riverside County Impounds

	DOG	CAT	BIRD	LIVESTOCK	OTHERS	Total
STRAY	11,538	10,312	535	94	590	23,069
STRAY-ABANDONED	38	133	0	0	8	179
STRAY-KNOWN WAIT	1,043	73	5	2	1	1,124
STRAY-DEAD	1,226	2,628	355	131	1,358	5,698
OWNER SUR	715	341	153	16	36	1,261
CONFISCATE	837	238	130	50	64	1,319
ADOPTION RETURN	627	189	1	0	2	819
FOSTER RETURN	612	1,686	0	0	5	2,303
DISPO REQ	476	150	16	30	31	703
TRANSFER FROM ANOTHER AGENCY	57	5	0	0	0	62



Total	17,169	15,755	1,195	323	2,095	36,537
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Criteria

The Food and Agriculture Code 32003 mandates that all public and private shelters maintain accurate records for every animal taken up, medically treated, or impounded. As such, all records need to accurately reflect the disposition of each animal to support compliance with regulatory and reporting standards.

Impact to the Operation as a Result of the Condition

Inconsistent reporting of ‘Euthanasia Requested by Owner’ creates challenges as all the euthanasia reported in statistics falls into department responsibility, leading to public concern and affecting the department’s reputation. Ensuring clarity and consistency in reporting supports transparency, ensures compliance with legislative mandates, aids in making informed decisions, and fosters public trust.

Root Cause of the Condition

The inconsistency stems from a departmental change in reporting format during 2023, which resulted in “Euthanasia Requested by Owner” being included in monthly statistics but omitted from yearly statistics. This highlights an opportunity to align reporting practices and develop standardized guidelines for presenting data consistently across different reporting periods.”

Current Status

Reported Finding Corrected? Yes No

A new statistical reporting format has been implemented in collaboration with Outcomes for Pets to standardize reporting categories and improve consistency across published reports. The “Monthly Shelter Summary – Daily Report Cards” has been implemented (see attached), with ongoing review to ensure full alignment between monthly and annual statistics.

Recommendation 5.1

“Implement consistent documentation and reporting across all statistical reports published on the department’s website, ensuring all categories are included in both monthly and yearly statistics.”

Management Reply

“Food and Agriculture Code 32003 is an unfunded mandate and it therefore does not impose any obligations on the Department. However, Concur. As part of the current department-wide strategic improvement initiative, the Department is working with consultants, Outcomes for Pets, to standardize reporting across all statistical reports published on the DAS website. This effort



Department of Animal Services

Mary Martin, Director for Animal Services
Kimberly Youngberg, DrPH, MPH
Assistant Director

will ensure consistency in documentation and the inclusion of all relevant categories in both monthly and yearly statistics.”

Actual/estimated Date of Corrective Action: May 31, 2025

Current Status

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

A new statistical reporting format has been implemented in collaboration with Outcomes for Pets to standardize reporting categories and improve consistency across published reports. The “Monthly Shelter Summary and Daily Report Cards” has been implemented (see attached), with ongoing review to ensure full alignment between monthly and annual statistics.

“Develop standardized guidelines for reporting formats to ensure alignment and consistency in how data is presented across different timeframes in compliance with Food and Agriculture Code 32003.”

Management Reply

“Food and Agriculture Code 32003 is an unfunded mandate and it therefore does not impose any obligations on the Department. However, *Concur*. The Department agrees with the need for standardized guidelines to ensure consistency in data reporting across different timeframes. Currently, the Department is collaborating with consultants, Outcomes for Pets, to develop new standardized reporting formats. The result of this effort will enhance data accuracy, alignment, and compliance.”

Actual/estimated Date of Corrective Action: May 31, 2025

Current Status

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

A new statistical reporting format has been implemented in collaboration with Outcomes for Pets to standardize reporting categories and improve consistency across published reports. The “Monthly Shelter Summary and Daily Report Cards” has been implemented (see attached), with ongoing review to ensure full alignment between monthly and annual statistics.

Recommendation 5.3

“Conduct consistent reviews of published reports to verify compliance with Food and Agriculture Code 32003 requirements and ensure accurate representation of all reporting categories.”



Management Reply

“Food and Agriculture Code 32003 is an unfunded mandate and it therefore does not impose any obligations on the Department. However, Concur. The Department is evaluating current reporting practices to identify areas for improvement and enhance transparency. Additionally, working with Outcomes for Pets, the Department is standardizing reporting processes, including implementing consistent review procedures for published reports to verify accuracy and proper categorization of all reporting elements. As part of this effort, the Department is also developing guidelines and reviewing protocols to ensure that reports accurately reflect all required reporting categories.”

Actual/estimated Date of Corrective Action: May 31, 2025

Current Status

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

A new statistical reporting format has been implemented in collaboration with Outcomes for Pets to standardize reporting categories and improve consistency across published reports. The “Monthly Shelter Summary and Daily Report Cards” has been implemented, with ongoing review to ensure full alignment between monthly and annual statistics.

Finding 6: Euthanasia Training Compliance and Consistency

“Condition

Our review revealed that 17 staff members, across 25 impound records, performed euthanasia, however, evidence of staff training was not available. Records of training hours and proof of completion are often incomplete or found missing.

Criteria

- California Code of Regulations, *Title 16, 2039* mandates at least eight hours of euthanasia training for non-veterinarian staff involved in administering sodium pentobarbital, including five hours of hands-on training.
- California Business and Professions Code 4827(d) states Shelter Animal Services employees can perform euthanasia without a veterinarian present, provided they meet the training requirements.
- Animal Services SOP: *Creating and Tracking Employee Training Attendance in Chameleon*, “It is expected that supervisors and managers scan a copy of the proof of attendance to the employee’s personal identification record” in the system.



Department of Animal Services

*Mary Martin, Director for Animal Services
Kimberly Youngberg, DrPH, MPH
Assistant Director*

Impact to the Operation as a Result of the Condition

Ensuring all staff meet euthanasia training requirements is critical to minimizing legal risk. Properly trained staff performing euthanasia helps safeguard animal welfare and maintain compliance with state regulations. Strengthening documentation practices for training will enhance the department's ability to demonstrate compliance with legal requirements, support public trust, and reduce the risk of penalties or operational challenges.

Root Cause of the Condition

The gaps in training and documentation are due to decentralized re-training initiatives without tracking and monitoring of staff training hours, and outdated training policy to support ongoing compliance with state-mandated certification standards.”

Current Status

Reported Finding Corrected? Yes No

Euthanasia trainings have been conducted by Veterinary Services, (see attached Recommendation 4.2). Updates and procedural changes were reinforced during these trainings. The Department is compiling training records and evaluating implementation of a centralized training log to track participation and certification status.

Recommendation 6.1

“Develop policies and procedures to establish review and approval processes for verifying and regularly updating staff training records. Ensure these processes include tracking the completion of euthanasia certification training and retraining requirements.”

Management Reply

“**Concur.** The Department is currently in the process of establishing a records repository and digital file management (Laserfiche) for proper tracking of staff training.”

Actual/estimated Date of Corrective Action: May 31, 2025

Current Status

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

Partially Implemented. The Department is developing a centralized training records repository within Laserfiche to support supervisory review and tracking of euthanasia certification and retraining requirements. Implementation is approximately 10% complete, with full implementation expected by the fourth quarter of 2026.



Recommendation 6.2

“Establish a process to ensure euthanasia is restricted to staff who have completed the mandated eight-hour certification course.”

Management Reply

“**Partially Concur.** The Department currently ensures that only certified staff are allowed to perform euthanasia. However, the Department will update policies to create a procedure that will allow for more readily available verification of certification status.”

Actual/Estimated Date of Corrective Action: May 31, 2025

Current Status

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

Euthanasia procedures are currently limited to Registered Veterinary Technicians (RVTs) while the Department verifies and updates the roster of staff who have completed the mandated certification. Policies are being updated to formalize an ongoing certification verification with process.

Recommendation 6.3

“Implement a supplementary tool to monitor and document training attendance, certification, and retraining requirements. Ensure supervisors are accountable for updating training records in real-time.”

Management Reply

“**Concur.** The Department will be implementing new tracking software (Laserfiche) to monitor and document training requirements. The Department will also update the standard operating procedure (SOP – Creating and Tracking Employee Training Attendance in Chameleon).”

Actual/estimated Date of Corrective Action: May 31, 2025

Current Status

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

Partially Implemented. The Department is developing a centralized training records repository within Laserfiche to support supervisory review and tracking of euthanasia certification and retraining requirements. Implementation is approximately 10% complete, with full implementation expected by the fourth quarter of 2026.

Finding 7: Data Validation for Impound Records



“Condition

Our review of 100 (out of a population of 32,044) impound records identified several data entry errors and system shortcomings:

- Three impound records in the system contained incorrect impound dates and were missing documentation of the individual who brought the animal to the shelter.
- Twelve impound records were missing comments about the outcomes, including euthanasia, overpopulation, and lack of foster interest.

The discrepancy report is generated by the department to identify discrepancies in the Animal Services application system, including records of all changes made during the review period, is not tracked per individual staff to use for training and staff evaluation purposes.

Criteria

The Food and Agriculture Code 32003 requires public shelters to maintain accurate and complete records for each animal taken up, medically treated, euthanized, or impounded. Records must include the circumstances of impoundment, personnel names, medical treatments, and final disposition. These records must be retained for at least three years and must be accurate to ensure compliance with regulatory standards and support the achievement of operational objectives.

Impact to the Operation as a Result of the Condition

The absence of data validation controls and tracking mechanisms compromises the accuracy and reliability of impound records. Errors such as incomplete fields, incorrect dates, and missing comments leads to non-compliance with regulatory standards. Inaccurate data affects decision-making, resource allocation, and reporting, increasing the administrative burden for corrections and reducing overall operational efficiency.

Root Cause of the Condition

The identified issues present opportunities to enhance data validation rules in the system application, establish tracking and oversight mechanisms for system changes, and strengthen staff training on data entry protocols. Addressing these areas will help ensure records are complete and accurate, reducing errors and inconsistencies in impound records.”

Current Status

Reported Finding Corrected? Yes No



Implemented. The Department conducted a comprehensive review of impound record data and corrected identified discrepancies in December 2026. All affected records were reviewed, updated, and validated to ensure accuracy and completeness in compliance with regulatory and departmental requirements.

Recommendation 7

“Work with the system vendor to develop a comprehensive discrepancy report or implement a supplementary tool to track discrepancies by the employee. Track the discrepancies linked to individual employees and incorporate the findings into targeted training and evaluation programs.”

Management Reply

“Food and Agriculture Code 32003 is an unfunded mandate and it therefore does not impose any obligations on the Department. However, *Concur*. The Department will partner with the Chameleon vendor to determine possibilities of implementation.”

Actual/Estimated Date of Corrective Action: May 31, 2025

Current Status

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

The Department is developing PostMaster automated error notifications and working with the Chameleon vendor to enhance discrepancy reporting capabilities. A Business and Process Analyst, hired on October 2, 2025, is currently in training and will support discrepancy tracking and data validation efforts. Full implementation is expected by May 31, 2026.

Finding 8: Animal Inventory Records

“Condition

The department does not consistently maintain records of daily kennel inventory counts, including documentation of communication such as emails or other recorded proof, as required by the Kennel Inventory Standard Operating Procedure.

Criteria

The Kennel Inventory Standard Operating Procedures mandates that inventory counts be completed twice daily—once before opening for business in the morning and again at the end of the day after all animals have been kenneled. These counts are necessary to ensure accountability for animals impounded at the shelter, which are classified as county assets.



Accurate and timely records are essential for reconciling animal counts and maintaining transparency in shelter operations.

Impact to the Operation as a Result of the Condition

The absence of daily inventory records reduces inventory accuracy, accountability and transparency, increasing the risk of mismanagement of county assets and liability exposure. Without accurate documentation, the department cannot effectively track the welfare and status of animals, which leads to operational inefficiencies and negative perceptions of the shelter's effectiveness.

Root Cause of the Condition

The opportunity to improve the documentation and performance of inventory counts stems from areas where staff training can be enhanced, oversight of inventory processes strengthened, and adherence to established policies and procedures reinforced. Addressing these areas will support consistent adherence to the Kennel Inventory Standard Operating Procedures and foster greater accountability in daily operations."

Current Status

Reported Finding Corrected? Yes No

The Department is in the process of reviewing and updating the Kennel Inventory Standard Operating Procedure (SOP) to establish a consistent process across all shelters. Implantation is currently approximately 50% complete, with full implementation anticipated by the end of February 28.2026.

Recommendation 8.1

"Update Inventory management policies for staff with emphasis on the importance of completing and documenting daily inventory counts in accordance with the existing procedure to Include clear guidelines for reconciling discrepancies."

Management Reply

"**Concur.** The Department will update inventory management policies and Standard Operating Procedures (SOPs) to emphasize the importance of completing and documenting daily inventory counts in accordance with existing procedures. The updated policies will include clear guidelines for reconciling discrepancies to ensure accuracy and accountability. These revisions will align with current inventory practices and reinforce staff compliance with established protocols."

Actual/Estimated Date of Corrective Action: May 31, 2025



Current Status

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

The Department is in the process of reviewing and updating the Kennel Inventory Standard Operating Procedure (SOP) to establish a consistent process across all shelters. Implantation is currently approximately 50% complete, with full implementation anticipated by the end of February 28, 2026.

Recommendation 8.2

“Strengthen supervisory oversight by implementing a review process for inventory counts to ensure records are accurate, complete, and reconciled consistently.”

Management Reply

“**Concur.** The Department is currently in the process of hiring a new Business and Process Analyst to assist in ensuring accurate recordkeeping of inventory to ensure records are accurate, complete, and reconciled consistently.”

Actual/Estimated Date of Corrective Action: May 31, 2025

Current Status

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

Partially Implemented. The Department hired a Business and Process Analyst on October 2, 2025. Review and formalization of inventory recordkeeping procedures are pending completion, with full implementation anticipated by the fourth quarter of 2026.

Finding 9: Access Right Approvals

“Condition

Our review of 33 randomly selected personnel records identified 12 instances where evidence of approval for access rights was unavailable and an incorrect incident workflow was selected in the helpdesk resolution, leading to incomplete documentation. Additionally, six cases were noted where the system roles assigned to Cashiers did not match the staff designation of Animal Care Technicians, as the Cashier role is typically assigned to front desk Animal Service Representatives.

Criteria

The Standard Practice Manual, 1001, *Internal Control Authorization and Approval* requires transactions to be authorized by personnel with assigned approval authority. Additionally, the Riverside County Information Security Standard V2.0, *Least Privilege*, Section 4.1.6, mandates



adherence to the principle of least privilege, granting users only the minimum access necessary to complete their assigned tasks. Compliance with these standards ensures accountability, protects sensitive information, and prevents unauthorized system access.

Impact to the Operation as a Result of the Condition

Oversight in documenting approval of access rights and assigning incorrect system roles poses significant risks to system security and accountability. Unauthorized access can lead to data breaches, inaccurate records, and diminished trust in the department’s ability to safeguard sensitive information. These gaps could also hinder compliance with internal policies and expose the department to liabilities.

Root Cause of the Condition

Department policies and procedures regarding the Animal Application system need improvement to standardize initiating of requests, processing of requests, and granting approval for access rights.

Current Status

Reported Finding Corrected? Yes No

Not implemented - Under Review

Recommendation 9.1

“Develop policies and procedures to document the authorization of staff access rights consistently. Ensure that these policies include clear guidelines for approval processes, role assignment, and oversight responsibilities.”

Management Reply

“**Concur.** The Department understands the importance of proper authorization of access rights and roles. A standard operating procedure (SOP) will be created, to establish clear guidelines and oversight of access rights.”

Actual/Estimated Date of Corrective Action: May 31, 2025

Current Status

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).



Department of Animal Services

*Mary Martin, Director for Animal Services
Kimberly Youngberg, DrPH, MPH
Assistant Director*

Not implemented - Under Review

Recommendation 9.2

“Conduct periodic reviews of system roles and access rights and documents to verify alignment with staff designations and ensure compliance with the principle of least privilege. Include supervisory signoffs to confirm proper role assignments.”

Management Reply

“**Concur.** The Department understands the importance of monitoring access rights and roles. A standard operating procedure (SOP) will be created to establish clear guidelines and oversight of access rights, including supervisory signoffs to confirming proper role assignments.”

Actual/Estimated Date of Corrective Action: May 31, 2025

Current Status

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

Not implemented - Under Review



Department of Animal Services

Mary Martin, Director for Animal Services
Kimberly Youngberg, DrPH, MPH
Assistant Director

The following are the current status of the reported findings and planned corrective actions contained in Internal Audit Report 2025-006: Riverside County Department of Animal Services Audit.

Authorized Signature

8-30-26

Date

Finding 4: Euthanasia Types Classification

“Condition

Our review of 100 (out of a population of 32,044) randomly selected impound records identified six instances where animals euthanized were incorrectly classified. Specifically, instances were labeled as ‘Too Young’ in the ‘Out-Condition’ field or comments field, the animals were assigned the ‘Euthanized-Treatable Medical’ subtype instead of the correct ‘Euthanized-Too Young’ subtype. Additionally, on the department's website, animals euthanized as ‘Too Young’ are not disclosed as a separate category. This inconsistency leads to misunderstandings about the number of animals euthanized, impacting compliance with mandates.

Criteria

Policy Number 000-03, *Completion of the Chameleon Kennel Window*, requires that when the outcome type is ‘Euthanasia,’ the corresponding subtype must strictly adhere to predefined categories such as Abatement, Owner Request, Rabies Test, Too Young, Treatable Behavior, Treatable Medical, Untreatable Behavior, Untreatable Medical, Adoptable, or Shot. Accurate subtype classification ensures consistency, compliance, and clear communication with stakeholders.

Additionally, The Food and Agriculture Code 17006 permits euthanasia of newborn animals needing maternal care without holding them for owner redemption or adoption.

Impact to the Operation as a Result of the Condition

Misclassifying animals in critical categories such as ‘Euthanized Treatable,’ which is published on the department's website, can lead to reputational damage, and loss of trust in the department’s operations. Incorrect data could also mislead stakeholders dependent on correct data, affecting decision-making, funding, community engagement, and compliance with policies. Ensuring accurate subtype classification is essential to achieving operational objectives.

Root Cause of the Condition



The misclassification of euthanasia subtypes arises from differing interpretations of policies across divisions, opportunities to enhance staff retraining on the correct use of subtypes, and the need for stronger supervisory oversight to ensure the accuracy of classifications.”

Recommendation 4.1

“Ensure staff select the correct subtype before finalizing records, particularly for outcomes such as ‘Euthanized’ and subtypes like ‘Too Young.’”

Management Reply

“Concur. The Department acknowledges the importance of accurate data entry, particularly in selecting the correct subtype before finalizing records. To address this, the Department will implement mechanisms to review data entry for consistency and to minimize errors in reporting. These mechanisms will include enhanced staff training, regular audits of recorded data, and system validations to prompt correct subtype selection. Additionally, the Department will be establishing a review process to identify and correct discrepancies in outcomes.”

Actual/estimated Date of Corrective Action: May 31, 2025

Current Status

Corrective Action: Fully Implemented Partially Implemented Not Implemented

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

“Standard Operating Procedures (SOPs) specific to documentation requirements within the Chameleon system are being developed and implemented to clearly define expectations for staff initials and approvals. In conjunction with these SOPs, standardized Chameleon documentation templates are being created that include designated fields for staff initials to ensure consistent and complete documentation. These templates are designed to support scenarios involving routine operations, emergency situations, and multi-staff collaboration, reducing the risk of omitted initials or approvals. Staff will be trained on the updated SOPs and the use of the new templates to reinforce compliance and accountability. Ongoing oversight and quality checks will be incorporated to ensure staff consistently include their initials as required. A Business and Process Analyst was hired on October 2, 2025, and is currently in training. Full implementation is expected by May 31, 2026.”

Recommendation 4.2

“Provide regular staff training and refreshers on the correct interpretation and use of euthanasia subtypes to ensure consistent application across all divisions.”

Management Reply



“Concur. The Department recognizes the importance of ensuring staff have a clear and consistent understanding of euthanasia subtypes. To address this, the Department will implement regular (annually) training sessions and regular refresher courses to reinforce proper interpretation and application across all divisions. Training materials will be updated as needed to reflect any changes in policy or best practices, and participation will be tracked to ensure compliance.”

Actual/estimated Date of Corrective Action: May 31, 2025

Current Status

Corrective Action: Fully Implemented Partially Implemented Not Implemented

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

“Department wide training on euthanasia subtypes was conducted on July 8, 2025 (see attached). The Euthanasia Policy is currently under review to align with updated procedures and documentation requirements, with final approval anticipated by the fourth quarter of 2026.”

Finding 6: Euthanasia Training Compliance and Consistency

“Condition

Our review revealed that 17 staff members, across 25 impound records, performed euthanasia, however, evidence of staff training was not available. Records of training hours and proof of completion are often incomplete or found missing.

Criteria

- California Code of Regulations, *Title 16, 2039* mandates at least eight hours of euthanasia training for non-veterinarian staff involved in administering sodium pentobarbital, including five hours of hands-on training.
- California Business and Professions Code 4827(d) states Shelter Animal Services employees can perform euthanasia without a veterinarian present, provided they meet the training requirements.
- Animal Services SOP: *Creating and Tracking Employee Training Attendance in Chameleon*, 'It is expected that supervisors and managers scan a copy of the proof of attendance to the employee’s personal identification record’ in the system.

Impact to the Operation as a Result of the Condition



Ensuring all staff meet euthanasia training requirements is critical to minimizing legal risk. Properly trained staff performing euthanasia helps safeguard animal welfare and maintain compliance with state regulations. Strengthening documentation practices for training will enhance the department's ability to demonstrate compliance with legal requirements, support public trust, and reduce the risk of penalties or operational challenges.

Root Cause of the Condition

The gaps in training and documentation are due to decentralized re-training initiatives without tracking and monitoring of staff training hours, and outdated training policy to support ongoing compliance with state-mandated certification standards.”

Recommendation 6.2

“Establish a process to ensure euthanasia is restricted to staff who have completed the mandated eight-hour certification course.”

Management Reply

“**Partially Concur.** The Department currently ensures that only certified staff are allowed to perform euthanasia. However, the Department will update policies to create a procedure that will allow for more readily available verification of certification status.”

Actual/Estimated Date of Corrective Action: May 31, 2025

Current Status

Corrective Action: Fully Implemented Partially Implemented Not Implemented

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

“Euthanasia procedures are currently limited to Registered Veterinary Technicians (RVTs) while the Department verifies and updates the roster of staff who have completed the mandated certification. Policies are being updated to formalize an ongoing certification verification with process.”

Finding 7: Data Validation for Impound Records

“Condition

Our review of 100 (out of a population of 32,044) impound records identified several data entry errors and system shortcomings:



Department of Animal Services

*Mary Martin, Director for Animal Services
Kimberly Youngberg, DrPH, MPH
Assistant Director*

- Three impound records in the system contained incorrect impound dates and were missing documentation of the individual who brought the animal to the shelter.
- Twelve impound records were missing comments about the outcomes, including euthanasia, overpopulation, and lack of foster interest.

The discrepancy report is generated by the department to identify discrepancies in the Animal Services application system, including records of all changes made during the review period, is not tracked per individual staff to use for training and staff evaluation purposes.

Criteria

The Food and Agriculture Code 32003 requires public shelters to maintain accurate and complete records for each animal taken up, medically treated, euthanized, or impounded. Records must include the circumstances of impoundment, personnel names, medical treatments, and final disposition. These records must be retained for at least three years and must be accurate to ensure compliance with regulatory standards and support the achievement of operational objectives.

Impact to the Operation as a Result of the Condition

The absence of data validation controls and tracking mechanisms compromises the accuracy and reliability of impound records. Errors such as incomplete fields, incorrect dates, and missing comments leads to non-compliance with regulatory standards. Inaccurate data affects decision-making, resource allocation, and reporting, increasing the administrative burden for corrections and reducing overall operational efficiency.

Root Cause of the Condition

The identified issues present opportunities to enhance data validation rules in the system application, establish tracking and oversight mechanisms for system changes, and strengthen staff training on data entry protocols. Addressing these areas will help ensure records are complete and accurate, reducing errors and inconsistencies in impound records.”

Recommendation 7

“Work with the system vendor to develop a comprehensive discrepancy report or implement a supplementary tool to track discrepancies by the employee. Track the discrepancies linked to



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Assistant Director

individual employees and incorporate the findings into targeted training and evaluation programs.”

Management Reply

“Food and Agriculture Code 32003 is an unfunded mandate and it therefore does not impose any obligations on the Department. However, *Concur*. The Department will partner with the Chameleon vendor to determine possibilities of implementation.”

Actual/Estimated Date of Corrective Action: May 31, 2025

Current Status

Corrective Action: Fully Implemented Partially Implemented Not Implemented

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

“The Department is developing PostMaster automated error notifications and working with the Chameleon vendor to enhance discrepancy reporting capabilities. A Business and Process Analyst, hired on October 2, 2025, is currently in training and will support discrepancy tracking and data validation efforts. Full implementation is expected by May 31, 2026.”

Finding 8: Animal Inventory Records

“Condition

The department does not consistently maintain records of daily kennel inventory counts, including documentation of communication such as emails or other recorded proof, as required by the Kennel Inventory Standard Operating Procedure.

Criteria

The Kennel Inventory Standard Operating Procedures mandates that inventory counts be completed twice daily—once before opening for business in the morning and again at the end of the day after all animals have been kenneled. These counts are necessary to ensure accountability for animals impounded at the shelter, which are classified as county assets. Accurate and timely records are essential for reconciling animal counts and maintaining transparency in shelter operations.

Impact to the Operation as a Result of the Condition

The absence of daily inventory records reduces inventory accuracy, accountability and transparency, increasing the risk of mismanagement of county assets and liability exposure. Without accurate documentation, the department cannot effectively track the welfare and status



of animals, which leads to operational inefficiencies and negative perceptions of the shelter's effectiveness.

Root Cause of the Condition

The opportunity to improve the documentation and performance of inventory counts stems from areas where staff training can be enhanced, oversight of inventory processes strengthened, and adherence to established policies and procedures reinforced. Addressing these areas will support consistent adherence to the Kennel Inventory Standard Operating Procedures and foster greater accountability in daily operations."

Recommendation 8.1

"Update Inventory management policies for staff with emphasis on the importance of completing and documenting daily inventory counts in accordance with the existing procedure to include clear guidelines for reconciling discrepancies."

Management Reply

"Concur. The Department will update inventory management policies and Standard Operating Procedures (SOPs) to emphasize the importance of completing and documenting daily inventory counts in accordance with existing procedures. The updated policies will include clear guidelines for reconciling discrepancies to ensure accuracy and accountability. These revisions will align with current inventory practices and reinforce staff compliance with established protocols."

Actual/Estimated Date of Corrective Action: May 31, 2025

Current Status

Corrective Action: Fully Implemented Partially Implemented Not Implemented

Description of the corrective action taken (or pending action and estimated date of completion for planned corrective action that is partially or not implemented).

"The Department is in the process of reviewing and updating the Kennel Inventory Standard Operating Procedure (SOP) to establish a consistent process across all shelters. Implantation is currently approximately 50% complete, with full implementation anticipated by the end of February 28, 2026."