



Florida Department of TRANSPORTATION

Office of Inspector General
Kristofer B. Sullivan, Inspector General

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Audit Report No. 19P-1002
Procedure Review Process and System

June 21, 2019

What We Did

The purpose of this engagement was to evaluate the compliance and effectiveness of the Florida Department of Transportation's (department) procedure review process and system. To achieve this purpose, we reviewed the applicable Florida Statutes (F.S.), reviewed the department's policies and procedures, mapped the process flow and system use, analyzed all documents currently housed within the system, and interviewed department staff in Central Office. In addition, we surveyed internal system customers from Fiscal Year (FY) 2017/2018 to provide details on ease of use and satisfaction.

What We Found

We determined the Procedure Review Process and system is compliant with Florida Statutes. Policy and Procedure Management Unit (PPMU) staff are compliant with the responsibilities outlined in the Standard Operating System (SOS) policy and most documents within the system are in alignment with the six required format elements/sections outlined in the SOS.

However, we determined the tracking system used to ensure compliance of the SOS review requirements is not functioning as designed. A total of 52.6 percent of the department's documents had not been reviewed or updated (as of the date analyzed) in accordance with department policy and therefore may not contain the most current information.

What We Recommend

We recommend the Organizational Development Manager ensure staff and responsible offices comply with the review period requirements stated within the SOS department policy.

We also recommend the Organizational Development Manager create a desk procedure to track and escalate areas in which review responses are not provided by the responsible office(s) per the SOS time period requirements to include

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documentation of any follow-up. We recommend monthly updates by the Organizational Development Manager to the Director of Administration of any items not timely addressed and that the Director of Administration provide quarterly updates to the appropriate Assistant Secretary if items need escalation to other management areas for resolution. Updates to management should include the document name and number, responsible office, contact person, and date of last revision.

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BACKGROUND AND INTRODUCTION

The Policy and Procedure Management Office’s mission is to support internal and external customers through the management of policies and procedures, forms, and special initiatives. Pursuant to Section 334.048(3), F.S., the department is required to provide policy management through the adoption of policies, rules, procedures, and standards which are necessary for the department to function properly, including establishing accountability for all aspects of the department’s operations.

The department’s Standard Operating System (SOS) policy establishes a uniform system for developing, maintaining, and providing access to the department’s procedural documents (policies, procedures, directives, and manuals). These documents are necessary to ensure consistent, predictable, and repeatable department programs. The Policy and Procedure Management Unit (PPMU) is responsible for maintaining the current status of procedural documents in the procedures tracking system and for reviewing procedural documents to ensure compliance with the established format.

As part of this audit, we researched the number of audit findings for all engagements performed by the Office of Inspector General (OIG) from FY 2015/2016 through FY 2017/2018. We found a significant portion of audit findings involved policies, procedures, and desk processes which were inaccurate, out-of-date, or not followed by the respective program areas.

Table 1 – Percentage of Document Related Findings by Fiscal Year

Fiscal Year (FY)	Percentage of Audit Findings Related to Policy, Procedure, or Desk Processes
FY 2015/2016	10.0%
FY 2016/2017	26.6%
FY 2017/2018	13.6%

Source: Recommendation and Action Management System (RAMS)

Maintaining current, up-to-date policy and procedural documents is a key element to effective departmental process internal controls that reduce the risk of fraud, waste, or abuse to the department.

RESULTS OF REVIEW

Review of Procedural Documents

As part of the audit, we compiled a list of all active procedure documents, applied a random table to the list, and tested a sample of twenty-five (25%) percent of department procedures for the SOS policy required formatting elements/sections to ensure compliance, user-friendliness, and document consistency. The results are displayed and analyzed in Table 2 of Finding 1. In addition, we performed an analysis of all (100%) policies, procedures, and manuals included on the Forms and Procedures Office website as of November 2, 2018, to evaluate adherence to the annual (for policies) and bi-annual (for Chapter 1 of manuals and all procedures) document review period requirements. A listing of procedures and policies found not in compliance as of November 2, 2018, are provided in Attachments 1 and 2 at the end of this report and further details on this testing are provided in Finding 2.

Finding 1 – Statutory Compliance

We determined the Procedure Review Process and system is compliant with Florida Statutes.

Section 20.23(3)(a), F.S., states “central office shall establish and monitor departmental policies, rules, procedures, and standards to ensure uniform compliance and quality performance” and Section 334.048(3), F.S., outlines the “authority of central office to adopt policies, rules, procedures, and standards which are necessary for the department to function properly, including establishing accountability for all aspects of the department’s operations.”

The department’s SOS policy contains appropriate criteria and guidelines to ensure the department’s procedural documents are consistent in format and ensure quality performance in program implementation. PPMU staff are compliant with the responsibilities outlined in the SOS policy and most documents within the system include the required formatting elements/sections detailed below.

There are six main sections/elements required within each department procedure, per the SOS policy, to ensure user-friendliness and document consistency. We tested a random sample of 45 (25%) procedural documents against these requirements and determined the department to be in compliance - see Table 2. Please note that although all documents tested contained both the Authority and Policy Statement elements, we found they were not always in the order prescribed by the SOS policy. The PPMU staff advised that as documents came up for review, they were correcting this sequence.

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Table 2 – Compliance with SOS Policy of Formatting Elements

Element	Authority	Policy Statement	Scope	Procedure	Training	Forms
Number of compliant documents	45	44	42	45	44	44
Percent of compliant documents	100%	98%	93%	100%	98%	98%

Source: Testing results of sample documents to SOS format criteria

Finding 2 – Review Period Requirements

We determined department policies, procedures, and manuals (Chapter 1) are not compliant with the SOS policy’s review period requirements.

Department policies, procedures, and manuals are required by the SOS policy to be reviewed on a regular periodic basis. Procedures and Chapter 1 of technical manuals should be reviewed biennially, and policies and directives should be reviewed annually. The remaining chapters of technical manuals are reviewed and updated at the discretion of the responsible office as necessity dictates.

We performed testing and analysis of all procedural documents included on the Forms and Procedures Office website as of November 2, 2018. We determined 8 manuals, 43 policies, and 89 procedures were not reviewed or updated in accordance with the SOS policy (see Table 3).

Table 3 – Department Procedural Documents as of November 2, 2018

Document Type	Total number of documents	Total number of documents not reviewed as scheduled	Percentage of documents not reviewed
Directives or Guidelines	6 ¹	N/A	N/A
Manuals	33	8	24.2%
Policies	49	43	87.8%
Procedures	178	89	50.0%
Document total	266	140	52.6%

Source: Testing results of document compliance to review criteria

Please note corrective action has been initiated regarding 2 of the policies above and 19 of the procedures, placing them in a “in review” status at the time of reporting. Management has indicated they will follow up on all out-of-date documents upon receipt of this report.

¹ There are no set review criteria for department guidelines.

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The OIG completed an audit on the review status of the department's documents in November 2009, when the process was still completed manually. The results of the prior audit testing of documents (reference Table 4) identified 27.8 percent were not in compliance with the SOS review period requirements.

Table 4 – Number of Department Procedural Documents as of November 10, 2009

Document Type	Total number of documents	Total number of documents not updated as scheduled	Percentage of documents not updated
Directives	6	0	0%
Guidelines ²	5	N/A	N/A
Manuals	32	10	31.3%
Policies	58	3	5.2%
Procedures	226	78	34.5%
Document total	327	91	27.8%

Source: Testing results of document compliance to review criteria

Comparison of Tables 3 and 4 demonstrates an increase in out-of-date documents in the last nine years even though the process was semi-automated in an effort to improve efficiency. Out-of-date policies increased from 5.2 percent to 87.8 percent and procedures from 34.5 percent to 50.0 percent. The percentage of out-of-date manuals decreased from 31.3 percent to 24.2 percent; however, it should be noted that in 2009 the review requirement for manuals was not restricted to Chapter 1, but included review of the entire manual, which may account for the decrease in manuals out of review compliance as only Chapter 1 is now required to be reviewed bi-annually, resulting in less time by program areas for the review process.

Depending on the type of department document, each review is comprised of different stages. These stages can include the preliminary review, legal review, management review, and executive online review. Stages of review do not have set time periods for completion, with the exception of the preliminary review which has a two-week period for reviewers to submit their comments or suggestions for the improvement or revision of the document.

One benefit we observed regarding the semi-automated system currently in place is that a history is retained of all changes and iterations of documents which complete the review process. This ensures information is not lost and that comments and changes on documents in review are reviewed at multiple stages by the responsible office and the PPMU team, prior to the legal and upper management review stages. Within the Procedure Information Management System (PIMS) you can also obtain information on the status, effective date, next scheduled review date, and the responsible office in charge of the review.

² There were no review requirements for guidelines in 2009.

The PPMU has several internal controls in place for document review which are performing as designed:

- document change history;
- comments and changes on documents in review are reviewed at multiple stages of the process by the PPMU team, prior to the legal and executive review stages; and
- all documents are checked for compliance to the SOS format requirements prior to the document being reviewed at the legal stage.

The evaluation of the Department Procedure Review Process identified control weaknesses regarding the review stages and periods. Based on these weaknesses, **we recommend** the Policy and Procedure Management Supervisor:

- Open a dialogue with the appropriate personnel in charge of each stage/level of review to narrow the acceptable review time periods to promote efficient, timely, and consistent review; and
- Revise the SOS policy to add a section/element requiring each document to contain an effective date and a last reviewed/revised date to effectively capture those documents which have been reviewed but had no changes.

In addition, **we recommend** the Organizational Development Manager ensure staff and responsible offices comply with the required review periods in the SOS department policy by ensuring all their area's documents begin the review process on time.

Finding 3 – Evaluation of Document Tracking Process

We determined the current process to track documents to be insufficient to ensure program areas review and update documents per the SOS review period policy. Current system limitations can result in a document falling off system generated review reports if no response is received from the responsible office after system generated reminders are sent. These inaccurate reports then hinder appropriate follow up by the PPMU staff with the functional area or responsible office to keep documents from becoming out-of-date. In addition, we found significant delays occurred in the later review stages/levels which also hampered document movement and tracking through the process. Lack of accurate document tracking contributed to the decrease in review period compliance as was discussed in detail in Finding 2 above.

It was observed that once a document is successfully entered into the review process/system, the current system is adequate to continue movement of the document through the various stages to final approval. It should be noted manual tracking is still required to track progress in the later review levels to final approval and, if required, the Secretary signing. Due to the current system's limitations described above, we determined the following actions would improve document tracking and movement until a more accurate system can be put in place.

We recommend the Organizational Development Manager develop a desk procedure which outlines an alternate tracking system to be used to follow-up on documents that do not receive a response from the responsible office in the initial system notification period. Program areas should be contacted first, to ensure lack of response is not attributable to system errors or personnel changes.

We also recommend the Organizational Development Manager provide monthly updates to the Director of Administration on procedural documents that did not receive a response to ensure proper escalation of review requirements to responsible office management. The monthly updates should include the document name and identifying number, responsible office, recorded contact person, and date of last revision documented. Escalation should continue until a resolution can be achieved to keep documents in compliance. If resolution is not found at this level, the Director of Administration should provide a quarterly report to the appropriate Assistant Secretary to report any non-compliance to policy.

Procedure Review Process Survey

The OIG distributed a Procedure Review Process Survey to the twenty-six individuals in Central Office who completed or were in the process of completing a document review during FY 2017/2018.³ Seven of the twenty-six (27%) that responded indicated the system was adequate for their needs and believed their program areas properly maintained documents in accordance with policy. However, due to the low response rate, no conclusions regarding the effectiveness of the system for customers could be determined.

³ The survey was open for five days and reminder emails were sent to respondents prior to the survey close; however, the response rate was low.

APPENDIX A – Purpose, Scope, and Methodology

The **purpose** of this engagement was to evaluate the functionality and effectiveness of the department's procedure review process and system.

The **scope** of this audit was the assessment of the department's procedure review process and system.

The **methodology** included:

- reviewing applicable Florida Statutes and department policies, procedures, and manuals;
- creating a flowchart to map the review process and system use;
- reviewing all internal documents within the system;
- interviewing relevant department staff in Central Office;
- preparing and disseminating a survey for internal customers of the system; and
- analyzing the survey results.

APPENDIX B – Management Response

The Organizational Development Manager, Bridgette Kornbroke, provided the following responses by email on June 14, 2019:

Finding 1 – Statutory Compliance

Finding: We determined the Procedure Review Process and system is compliant with Florida Statutes.

Recommendation: No recommendation; found to be in compliance.

Response to Finding: We concur with the finding and recommendation.

Finding 2 – Review Period Requirements

Finding: We determined department policies, procedures, and manuals (Chapter 1) are not compliant with the SOS policy's review period requirements.

Recommendation: We recommend the Policy and Procedure Management Supervisor:

- Open a dialogue with the appropriate personnel in charge of each stage/level of review to narrow the acceptable review time periods to promote efficient, timely, and consistent review; and
- Revise the SOS policy to add a section/element requiring each document to contain an effective date and a last reviewed/revised date to effectively capture those documents which have been reviewed but had no changes.

In addition, we recommend the Organizational Development Manager ensure staff and responsible offices comply with the required review periods in the SOS department policy by ensuring all their area's documents begin the review process on time.

- This additional recommendation will be resolved based on actions taken in finding #3.

Response to Finding: We concur with the finding; however, an alternative correction will be taken.

Corrective Action:

Bullet 1 – We concur and recommend that this communication come from the Assistant Secretary of Finance & Administration. This will provide the appropriate level of authority. The Organizational Development Office (ODO) will update the Assistant Secretary when action is necessary.

Bullet 2 – Once SOS policy and procedure in review is approved, we will be meeting this recommendation.

Estimated Completion Date: August 1, 2019

Finding 3 – Evaluation of Document Tracking Process

Finding: We determined the current process to track documents to be insufficient to ensure program areas review and update documents per the SOS review period policy.

Recommendation: We recommend the Organizational Development Manager develop a desk procedure which outlines an alternate tracking system to be used to follow-up on documents that do not receive a response from the responsible office in the initial system notification period.

We also recommend the Organizational Development Manager provide monthly updates to the Director of Administration on procedural documents that did not receive a response to ensure proper escalation of review requirements to responsible office management.

Response to Finding: We concur with the finding and recommendation.

Corrective Action: Due to Secretary Thibault's initiative, the PPMU office has created a document identifying last reviewed dates and current reviews of all policies and procedures. Language was crafted to prompt all Directors to begin a thorough review of all procedural documents in their purview. This document will be used to create a procedural document tracking system so that we may pull reports monthly for the Director of Administration.

Estimated Completion Date: August 1, 2019

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DISTRIBUTION

Responsible Manager:

Stephanie Iliff, Director of Administration
Bridgette Kornbroke, Organizational Development Manager

Internal Distribution:

Kevin J. Thibault, P.E., Secretary, Department of Transportation
Torey L. Alston, Chief of Staff
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PROJECT TEAM

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Approved by:
Kristofer B. Sullivan, Inspector General

STATEMENT OF ACCORDANCE

The department's mission is to provide a safe transportation system that ensures the mobility of people and goods, enhances economic prosperity, and preserves the quality of our environment and communities.

The Office of Inspector General's mission is to promote integrity, accountability, and process improvement in the Department of Transportation by providing objective, fact-based assessments to the DOT team.

This work product was prepared pursuant to section 20.055, Florida Statutes, in accordance with the Association of Inspectors General *Principles and Standards for Offices of Inspector General*, and conforms with The Institute of Internal Auditors' *International Standards for the Professional Practice of Internal Auditing*.

Please address inquiries regarding this report to the department's Office of Inspector General at (850) 410-5800.

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ATTACHMENT 1 – Procedures Not in Compliance

The table below contains the department’s 70 procedures that have not been reviewed in accordance with the SOS as of November 2, 2018. Each responsible office of the documents listed below was notified by the review system that the document was due for review.

Responsible Office	Document Number	Title	Date of Last Review
Documents three years or more past review date			
Transit	725-030-001	Public Transportation Vehicle Leasing	3/14/2009
Transit	725-030-002	Park and Ride Lot Program	5/1/2007
Transit	725-030-003	Transit Corridor Program	5/1/2008
Transit	725-030-005	Public Transit Service Development Program	11/1/2012
Transit	725-030-008	Commuter Assistance Program	7/22/2008
Transit	725-030-009	Bus Transit System Safety Program	1/1/2011
Transit	725-030-025	Transit Vehicle Inventory Management	12/1/2008
Transit	725-030-030	Public Transit Block Grant Program	12/1/2010
Transit	725-030-040	Section 5303 Program	2/1/2011
Specifications & Estimates	600-010-005	Development & Review of the 5 Year Work Program Construction Cost Estimates	8/1/2011
Specifications & Estimates	625-030-005	Cost Savings Initiative Proposal	4/1/2011
Specifications & Estimates	630-020-001	Transportation Product Evaluation	2/1/2013
Traffic Engineering & Operations	750-040-002	Motorist Aid Call Box System Microwave Radio and Fixed Site Equipment Maintenance Responsibility	1/1/2011
Traffic Engineering & Operations	750-030-020	Rapid Incident Scene Clearance (RISC)	9/1/2008
Traffic Engineering & Operations	750-000-001	Roadway Characteristic Inventory Traffic Operations Data	2/1/2009
Traffic Engineering & Operations	750-030-002	Signalization Pre-emption Design Standards	12/1/2006
Traffic Engineering & Operations	750-040-001	Statewide Radio Communications System Site or Equipment Modification	12/30/1999
Maintenance	850-000-005	Maintenance Responsibilities on Construction Projects	4/1/2009

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Responsible Office	Document Number	Title	Date of Last Review
Documents three years or more past review date			
Maintenance	850-005-001	Reporting Incidents and Management of Damage Repair	5/1/2006
Utilities	710-010-130	Utility Invoicing	10/27/2011
Utilities	710-020-050	Utility Work Agreements and Certification Process	2/1/2009
Utilities	710-030-010	Department and Utility Agency/Owners Liaison	5/1/2009
Systems Planning	525-030-155	Assignment of Access Management Classification to the State Highway	12/1/2010
Systems Planning	625-010-021	Median Opening and Access Management	2/1/2013
Turnpike Enterprise	825-040-001	Closing of Tolls	5/1/2007
Turnpike Enterprise	800-TPE-007	Employee Recognition Program for Florida's Turnpike Enterprise	12/30/1999
Design	425-020-001	Building Code Compliance - Plans Review, Permits and Inspections	7/1/2010
Director of Administration	010-000-025	Leadership Achieving New Heights Guidelines	10/30/2006
General Counsel	225-085-001	General Liability Claims	9/1/2012
Policy Planning	525-010-014	District Review of Conformity Determinations	5/1/2009
Procurement	375-030-010	Amendments and Task Work Orders for Professional Services Agreements	6/28/2001
Right of Way	575-070-055	Vegetation Management at Outdoor Advertising Signs	7/1/2013
Safety	225-060-001	Release of Crash Data	11/1/2012
Transportation Data & Analytics	525-030-150	Traffic Monitoring	5/1/2013
Documents two years past review date			
Procurement	375-030-002	Acquisition for Professional Services	3/20/2013
Specifications	525-010-015	Administration of County Incentive Grant Program (CIGP)	9/1/2013
Work Program & Budget	360-010-001	Developing the Program and Resource Plan	6/25/2014
Comptroller	010-000-020	Property Insurance	2/1/2014

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Responsible Office	Document Number	Title	Date of Last Review
Documents two years past review date			
Specifications & Estimates	630-020-005	Proprietary Products Review and Certification	8/1/2014
Equal Opportunity Office	275-010-010	Title VI Program and Related Statutes - Implementation and Review	1/1/2014
Documents one year past review date			
Human Resources Office	250-025-001	Career Service Employee Grievance	10/1/2015
Construction	700-050-001	Computation Methods for Design, Construction & Final Estimates Handbook	5/1/2016
Procurement	375-030-006	Conflict of Interest Procedure for Department Contracts	8/1/2015
Emergency Management	956-060-001	Continuity of Operations Plan	7/1/2015
Emergency Management	956-010-001	Emergency Responder Toll Plan	11/1/2015
Human Resources Office	250-045-003	Employee Performance Improvement Plan	3/1/2015
Asst Secretary - Engineering & Operations	250-C09-001	Engineering & Operations Employee Recognition Program	11/1/2015
Construction	700-000-025	Innovative Contracting Techniques	10/1/2015
Procurement	375-030-001	Professional Services Consultant Qualification	2/2/2015
Rail	725-080-002	Rail Office Programs Handbook Adoption Procedure	9/1/2015
Transit	725-030-010	Section 5310 Program	10/1/2015
Transit	725-030-004	Section 5311 Program	10/1/2015
Utilities	710-030-005	Utility Work for Local Government Utilities	11/25/2014
Documents less than one year past review date			
Aviation	725-040-100	Airport Master Plans	10/19/2016
Safety	500-000-020	Automated External Defibrillator	3/10/2016
Comptroller	350-020-200	Contract Funds Management Funds Approval	10/19/2016
Design	650-050-005	Florida Scenic Highway Program	3/1/2016
Transportation Data & Analytics	525-020-310	General Interest Roadway Data	3/1/2016

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Responsible Office	Document Number	Title	Date of Last Review
Documents less than one year past review date			
Emergency Management	956-060-005	Infectious Disease Control, Annex to COOP	12/1/2015
Aviation	725-040-100	Airport Master Plans	10/19/2016
Design	010-000-050	Professional Engineer Training Program	9/28/2016
Comptroller	360-050-005	Project Cost Reporting	4/1/2016
Traffic Engineering & Operations	750-010-012	Responsibility for Permanent Highway Signing	6/24/2016
Maintenance	850-000-015	Roadway and Roadside Maintenance	2/1/2016
General Counsel	025-010-003	Rule Development and Adoption	9/1/2016
Materials	675-000-010	Safety Footwear for Materials Employees	4/1/2016
Systems Planning	525-030-260	SIS Highway Component Standards & Criteria	3/1/2016
Support Services	350-090-005	Surplus Property Disposal	3/9/2016
Human Resources Office	250-050-005	Tuition Payment for Educational Courses	5/15/2016
Human Resources Office	250-055-001	Violence-Free Workplace Environment	6/1/2016

Source: Internal auditor testing

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ATTACHMENT 2 – Policies Not in Compliance

The table below contains the department's 41 policies that have not been reviewed in accordance with the SOS as of November 2, 2018.

Responsible Office	Document Number	Title	Date of Last revision
Documents three years or more past review date			
Human Resources Office	250-000-010	Driver's Record Requirements	1/1/2012
Rail	000-725-003	South Florida Rail Corridor Clearance	9/1/2010
Procurement	001-375-025	Use of Department Space and Equipment by Outside Providers	3/1/2009
Documents two years or more past review date			
Design	000-650-011	Highway Beautification	8/1/2015
Transit	000-725-050	Transportation Demand Management Strategies	12/29/2015
Maintenance	000-956-030	Winter Weather Events	9/1/2015
Documents one year or more past review date			
Policy Planning	000-525-052	Performance Management Policy	7/15/2016
Director of Administration	001-010-015	Tobacco Use Policy	12/9/2016
Human Resources Office	001-250-011	Violence-Free Workplace Environment	6/1/2016
Documents less than one year past review date			
Support Services	001-400-005	Transporting Persons Other than State Officials and Employees in DOT Vehicles	5/1/2017
Support Services	001-425-060	Access Control	10/16/2017
Information Technology	001-325-062	Enterprise Technology Governance	4/17/2017
Information Technology	001-325-064	Data Governance	4/17/2017
Information Technology	001-325-063	Adherence to OIT Policies and Procedures	4/17/2017
Systems Planning	000-525-006	Level of Service Targets for the SHS	1/19/2017
Systems Planning	000-525-015	Approval of New or Modified Access to Limited Access Highways on the SHS	8/4/2017
Procurement	001-375-005	Confidential Information in MyFloridaMarketPlace	5/1/2017
Procurement	001-375-030	Compensation for Consultant Travel Time on Professional Services Agreements	3/10/2017
Design	000-525-060	U.S. Numbered Bicycle Routes	8/28/2017

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Responsible Office	Document Number	Title	Date of Last revision
Documents less than one year past review date			
Design	000-625-016	Practical Design	8/17/2017
Design	000-650-002	Context Sensitive Solutions	9/27/2017
Design	000-625-017	Complete Streets	8/28/2017
Inspector General	001-450-003	Integrity in Government	5/8/2017
Inspector General	001-450-002	Cooperations with Official Agency Investigations	5/8/2017
Turnpike Enterprise	000-350-011	Toll Facility Multi-Risk Insurance Processing	7/20/2017
Turnpike Enterprise	000-350-010	Debt Management Guidelines for the Turnpike System	7/20/2017
General Counsel	001-225-001	Pro Bono Legal Services	4/12/2017
General Counsel	001-010-020	Ethics Policy	9/1/2017
Policy Planning	000-525-026	Review of Growth Management Plans	6/6/2017
Policy Planning	000-525-050	Public Involvement	1/18/2017
Policy Planning	000-525-025	FDOT consultative Planning Process for Non-Metropolitan Areas	4/19/2017
Secretary of Transportation	001-075-003	FDOT Open Government Bill of Rights	5/1/2017
Public Information	001-075-005	FDOTTracker Policy	5/1/2017
Asst Secretary - Engineering & Operations	000-010-002	Geographic Information Systems	9/14/2017
Safety	000-500-003	Highway Safety Manual Implementation	9/1/2017
Transit	000-725-010	Major Urban Corridor Studies	8/3/2017
State Highway Engineer	001-375-020	Public Private Partnership (PPP) Conflicts of Interest Policy	5/1/2017
Organizational Development	001-260-030	Release of FDOT Employee Survey Data and Comments	8/1/2017
Organizational Development	001-260-001	Quality Management	5/31/2017
Traffic Engineering & Operations	000-750-001	Safe Mobility for Life Program	9/19/2017
Equal Opportunity Office	001-275-006	Title VI/Nondiscrimination Program	5/4/2017

Source: Internal auditor testing