



State of New Mexico Office of the State Auditor

May 20, 2026

Doña Ana County Board of County Commissioners
Doña Ana County Sheriff
Elected County Officers
County Manager
Doña Ana County
845 N. Motel Blvd.
Las Cruces, New Mexico 88007

Re: Serious Governance, Operational, and Financial Control Failures Identified in Doña Ana County Special Audit

Commissioners, County Sheriff, Elected Officials, and County Manager:

This letter is issued as an open expression of grave concern by the Office of the State Auditor regarding the documented and systemic failures in governance, operational effectiveness, internal controls, and fiduciary responsibility within Doña Ana County (the “County”), as detailed in the attached Special Audit Report performed at my direction. The findings set forth in this report—covering virtually every aspect of County operations, including governance, financial management, procurement, human resources, legal compliance, and public safety functions for the period July 1, 2021, through April 15, 2025—demonstrate a sustained and widening breakdown in accountability, coordination, and organizational structure. This letter is not procedural, ceremonial, nor informational in nature; it is issued to state clearly, directly, and without equivocation that the conditions identified in this audit, reflected in forty-two (42) significant findings, represent serious and systemic failures by County leadership to maintain effective internal controls, uphold fiduciary obligations, and ensure a functioning and accountable system of government for the public they serve.

The circumstances that gave rise to this audit—most notably the direct and public conflict between the County Sheriff’s Office and County Administration—are not isolated disagreements, but rather symptomatic of deeper systemic failures confirmed through this comprehensive review. The Sheriff raised concerns regarding Human Resources’ interference in law enforcement operations, improper handling of personnel actions, delayed and incomplete equal employment opportunity (EEO) investigations, inconsistencies in disciplinary and compensation practices, and concerns regarding transparency, procurement, and use of funds. At the same time, the County Manager identified concerns regarding noncompliance with Inspection of Public Records Act (IPRA), lack of cooperation with administrative processes, increased litigation exposure, and operational and accountability concerns within the Sheriff’s Office.

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The executive summary and detailed findings of the special audit validate that these concerns—while presented from differing perspectives—are not mutually exclusive. Rather, they are the predictable outcome of systemic failures in governance, internal controls, and organizational structure across the County as a whole. The audit confirms that deficiencies in policy clarity, enforcement, oversight, and interdepartmental coordination have created an environment in which conflict escalates, accountability is inconsistent, and internal systems fail to function as intended.

Specifically, the audit identified the following findings that correspond directly to concerns raised by the Sheriff:

- Human Resources' overreach into operational authority, including inappropriate influence over hiring and psychological suitability determinations for law enforcement personnel
- Significant delays and inconsistencies in EEO complaint processing, with incomplete investigations and lack of timely resolution
- Lack of standardized disciplinary procedures and inconsistent application of personnel actions across departments
- Deficiencies in coordination between Human Resources, Legal, and operational departments, contributing to confusion, delays, and adverse outcomes
- Inadequate handling and tracking of complaints and investigations, resulting in increased risk of litigation
- Weak internal controls over procurement and contract approval processes, including delays and lack of transparency in approvals
- Inconsistent application of public records processes, including delays, incomplete responses, and lack of centralized oversight

These findings validate that many of the operational and administrative concerns identified by the Sheriff are not isolated grievances but reflect broader structural deficiencies affecting multiple County functions.

Similarly, the audit confirms findings that align with concerns raised by the County Manager:

- Elevated levels of litigation, complaints, and formal disputes involving the Sheriff's Office and other departments
- Breakdowns in IPRA compliance, including delayed responses, incomplete records, and decentralized handling processes
- Inconsistent documentation and recordkeeping practices across departments, impairing accountability and transparency
- Communication failures and lack of responsiveness between departments, contributing to operational delays and conflict
- Incomplete compliance with policies, procedures, and statutory requirements in multiple operational areas

- Fragmented authority and lack of oversight mechanisms necessary to ensure consistent adherence to established policies

These findings demonstrate that concerns regarding compliance, accountability, and operational discipline are not limited to a single office but are part of a broader breakdown in County-wide systems and governance practices.

The executive summary underscores that the County is not experiencing isolated operational challenges, but rather a systemic failure characterized by weak internal controls, inconsistent policy implementation, lack of clear authority, and a deteriorating organizational culture. These deficiencies have resulted in increased legal exposure, operational inefficiencies, financial risk, and erosion of both public and employee trust.

Of particular concern is the pervasive breakdown in internal controls and governance systems that should, under normal circumstances, prevent the escalation of routine operational issues into formal grievances and litigation. Instead, the County has developed an environment in which internal mechanisms for resolution are ineffective, leading to increased reliance on external processes that consume public resources and expose the County to avoidable liability.

The audit further makes clear that organizational culture has significantly deteriorated. Employees report fear of retaliation, perceptions of favoritism, lack of fairness, and diminished trust in leadership and internal processes. These conditions directly undermine the County's ability to deliver services effectively and equitably, and they reinforce the cycle of complaints, disputes, and litigation identified by both the Sheriff and County Manager.

At the core of these issues is a fundamental lack of clarity in governance and authority. The audit confirms that the roles and responsibilities of the Board of County Commissioners (the "Board"), the County Manager, and independently elected officials—including the Sheriff—are not consistently defined or applied. This lack of clarity has directly contributed to the disputes outlined in the correspondence to this Office, including conflicts over hiring authority, disciplinary actions, contract approvals, and compliance responsibilities.

As the governing body and elected leadership of the County, you bear ultimate responsibility for correcting these deficiencies. This responsibility is fiduciary in nature and requires the exercise of sound judgment, oversight, and accountability in the stewardship of public resources and the administration of government. The findings in this report demonstrate that these obligations have not been fully met.

The urgency of corrective action cannot be overstated. The County must act immediately to implement the recommendations set forth in this report, including strengthening internal controls, establishing clear governance structures, standardizing policies and procedures, improving financial oversight, and ensuring consistent and lawful administration across all

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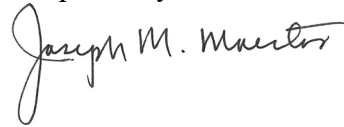
departments and offices. These actions must be undertaken collectively and in coordination among the Board, County Administration, the Sheriff's Office, and all elected officials.

Failure to act will result in continued escalation of financial, legal, and operational risks. The County will remain vulnerable to mismanagement, noncompliance, and further litigation. Public trust will continue to erode, and workforce instability will worsen, ultimately impairing the County's ability to fulfill its obligations to the community. In the absence of meaningful reform, the likelihood of increased external oversight or intervention will become significantly heightened.

Restoring trust—both with the public and with County employees—will require more than procedural changes. It will require leadership, accountability, and a demonstrated commitment to fairness, transparency, and consistent governance. The people of Doña Ana County are entitled to a government that operates with integrity and competence, and the employees who serve them are entitled to a workplace grounded in fairness and accountability.

This Office will continue to monitor the County's progress closely and expects prompt, measurable, and sustained action to address the deficiencies identified in this report.

Respectfully,

A handwritten signature in cursive script that reads "Joseph M. Maestas". The signature is written in dark ink and is positioned above the printed name.

Joseph M. Maestas, PE, CFE
New Mexico State Auditor



REPORT OF INDEPENDENT ACCOUNTANT'S SPECIAL AUDIT CONSULTING PROCEDURES

MARCH 31, 2026



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REPORT OF INDEPENDENT ACCOUNTANT'S CONSULTING PROCEDURES

To the Dona Ana County

The Honorable Elected Officials, Board of Commissioners, the Audit Committee, and the Manager
Las Cruces, New Mexico and

The Honorable Joseph Maestas, P.E., CFE, State Auditor
Santa Fe, New Mexico

Dona Ana County Special Audit Report

To Whom It May Concern:

We appreciate the opportunity to assist Dona Ana County ("DAC" or "County") and the New Mexico Office of the State Auditor (OSA) in completing this engagement for the County. This report outlines the procedures we performed, along with our findings and recommendations, in response to concerns regarding potential financial and compliance irregularities at the County. Our special audit procedures, conducted in accordance with the scope agreed upon by both the County and OSA, were designed to evaluate, document, and assess the County's internal controls and compliance practices in specific areas of concern as outlined herein. The period under review was July 1, 2021 through April 15, 2025 (the "Period").

This special audit engagement was conducted in accordance with the Audit Act Sections 12-6-1 through 12-6-14 NMSA 1978, the Audit Rule 2.2.2 NMAC Requirements for Contracting and Conducting Audits of State Agencies, specifically Section 2.2.2.15 NMAC and the Standards for Consulting Services established by the American Institute of Certified Public Accountants (AICPA). The scope of this engagement is outlined in the body of our report. The sufficiency of these procedures is solely the responsibility of those parties specified in this report. Consequently, we make no representation regarding the sufficiency of the consulting procedures described below either for the purpose for which this report has been requested or for any other purpose. The County remains responsible for their accounting records, operations, funds, fraud prevention and detection, compliance, and for maintaining effective internal controls over the financial statements and compliance.

EXECUTIVE SUMMARY

Jaramillo Accounting Group, LLC (JAG) was engaged to perform a special audit of Doña Ana County following designation by the New Mexico State Auditor on April 14, 2025. The County entered into a contract for the special audit on June 23, 2025 and testing began from client prepared records in August. In December, the special audit scope was expanded to address additional risks identified during our procedures in the fall. JAG performed this work on behalf of the New Mexico State Auditor in accordance with the New Mexico State Audit Act¹, Audit Rule², AICPA Consulting Standards, terms of the special audit contract and engagement letter. The audit covered activities, transactions, and operations occurring during the period July 1, 2021 through April 15, 2025.

The special audit originated from significant governance and operational disputes between County Administration (CMO) and the Doña Ana County Sheriff's Office (DASO). These disputes culminated in the County Manager initiating legal action in the form of a writ of mandamus³ related to the commissioning of law enforcement cadets. The underlying issues involved Human Resources, operating under the supervision of the County Manager, recommending that certain cadets not be hired due to risks they saw, while at the same time the County Legal staff asserting that the Sheriff was required to commission the graduating cadets and stating the Sheriff did not have the authority to decline this or reverse prior commissioning decisions. These actions reflect a direct conflict regarding hiring authority, commissioning authority⁴, and the extent of administrative control over an independently elected Sheriff. The Board of County Commissioners (BOCC) then wisely requested an external audit. Both the County Manager and the Sheriff wrote to the State Auditor and he designated the County for special audit with scope items requested from both sides included.

¹ Audit Act, Sections 12-6-1 through 12-6-15 NMSA 1978.

² Audit Rule, 2.2.2 NMAC.

³ D-307-CV-2025-00411.

⁴ Pursuant to § 4-41-5 NMSA 1978, the Sheriff has the authority to appoint deputies, who exercise the powers of the Sheriff. The Sheriff's operational decisions for public safety include removing her powers to act on her behalf using her judgment. This authority is distinct from law enforcement certification requirements under Section 29-7-6 NMSA 1978 and from administrative HR processes managed through County policies under a merit system to demote and discharge deputies.

While DASO-related matters were central to the initiation of this engagement, additional long standing conflicts involving other elected offices, including but not limited to the Doña Ana County Assessor's Office (DACA0), were also identified during the course of our procedures. Our analysis included activities across multiple functional areas, including governance, financial management, procurement, personnel practices, complaint handling, interdepartmental coordination, and law enforcement operations. Procedures consisted of over 100 interviews, thousands of transactions and documents tested or reviewed, law and policy analysis, and evaluation of internal controls and administrative processes⁵.

A total of 42 findings were identified and reported in **Exhibit 1**. These findings will be added to the County's fiscal year (FY) 2025 external audit report and then tested and tracked each subsequent year during the annual audit by the County's independent external auditor. Each year, the external audit findings and these special audit findings will be either cleared or repeated in the public annual audit report depending on the County's progress on corrective actions. New Mexico's governmental audits may be found on OSA's website.⁶

The work performed was guided by our commitment to provide *Clarity From Complexity* and to deliver *Truth and Answers to Government Leaders and Stakeholders*. This engagement was conducted with the objective of presenting independent, non-political, transparent, and actionable information to support informed decision-making. We hope this is valuable roadmap for the County moving forward.

Overall Observations

Based on County information provided and procedures performed, the issues identified during this audit are not isolated to a single office, department, or function. We noted that the issues reflect broader challenges related to long-standing troubles concerning power and roles, organizational culture, and policy application and accountability across the County, including interactions between

⁵ Section 4-41-6 NMSA 1978, "Counties authorized to establish merit systems for deputies and personnel in the county sheriff's office. Each county is authorized and empowered to establish by ordinance a merit system for the hiring, promotion, discharge and general regulation of the deputies and the employees of the county sheriff's office. The ordinance may, in the discretion of the board of county commissioners, provide for the classification of deputies and other employees and their probationary periods, service ratings, pay scales and ranges, the number of hours of work per week and the methods of employment, promotion, demotion and discharge of such deputies and employees within the limits provided by law."

⁶ <https://osaconnect.osa.nm.gov/auditReportSearch.html>.

County Administration and multiple elected offices and departments.

It was reported to us, and we observed in testing, that former administrations held very strong defensive and offensive legal and administrative stands that appeared to contribute to conflict, fear of retaliation, competitiveness, and siloing. It is likely this organizational culture, including discord between the DASO and CMO, has existed beyond all recent administrations. Our analysis identified unprofessional behavior by the Sheriff, Administrators, and other County employees that has contributed to workplace and operational challenges, complaints, and lawsuits during the Period and beyond. We observed a pervasive focus on assigning fault and competing assertions of authority and correctness. It will take time to foster a culture of collaboration, cooperation, grace, and trust.

A central theme observed throughout the special audit involves roles, responsibilities, and authority, including ongoing tension and competing assertions of control between CMO and independently elected officials. Differences in how authority is exercised (particularly in personnel decisions, procurement processes, operational control, and oversight) have resulted in conflict, inconsistent application of policies, and inefficiencies in decision-making and operations, especially in personnel matters. In some instances, administrative oversight extended into operational areas traditionally within the authority of elected officials, while in other instances, coordination and compliance by offices with County administrative processes were limited or contested. These conditions reflect a lack of alignment regarding authority and have contributed to the ongoing disputes affecting coordination, consistency, and overall effectiveness.

The special audit also identified concerns related to organizational culture, including allegations and perceptions of retaliation and favoritism. Variability in how complaints are handled, how disciplinary actions are applied, and how personnel decisions are documented has contributed to these concerns along with a need to improve processes and communication throughout the County. Inconsistent processes and delays in addressing workplace issues and complaints timely increase the likelihood of disputes and reduce confidence in the fairness and transparency of decision-making.

In addition, the results of our procedures indicate a need for improved consistency in policy implementation and compliance. Instances were identified where policies were not followed as written, were applied differently across departments, or were not sufficiently defined to support consistent execution. These conditions affect multiple operational areas, including procurement,

financial management, personnel administration, and reporting requirements.

Oversight and Compliance

We identified challenges related to governance structure and oversight, particularly in the relationship between County Administration and elected offices, including DACO, DASO, and DACAO. Differences in interpretation of authority, roles, and responsibilities contributed to inconsistencies in how policies and administrative processes were applied. County oversight practices, while intended to provide accountability and reduce risk, were not consistently defined or applied. In some instances, administrative involvement extended into operational areas without clearly established boundaries, while in other instances, oversight and monitoring activities were merited due to office or department risks.

The audit identified instances of noncompliance with state laws, regulatory requirements, and County policies. These included but were not limited to issues related to procurement practices, financial reporting, public transparency requirements, and statutory reporting obligations. In addition, inconsistencies were identified in the application of County policies, including those governing personnel actions, procurement, and administrative processes.

Employment Practices and Workplace Environment

Procedures performed identified variability in employment practices, including hiring processes, background screening, disciplinary actions, and complaint handling. Documentation supporting personnel decisions was not always complete or consistent across departments. Delays and inconsistencies in the investigation and resolution of complaints were also identified, increasing the likelihood of disputes and potential legal exposure.

Communication and Coordination

Communication and coordination challenges were observed across departments, particularly in interactions involving DASO, DACAO, and CMO. These challenges included delays in responding to requests, lack of clarity regarding responsibilities, and inconsistent documentation of decisions and actions. In many instances, communication gaps and attacks (overtly and covertly) contributed to misunderstandings, delays in resolving issues, and escalation of concerns which perpetuates mistrust. Communication was also one of the top areas of concerns reported in our Anonymous Employee Survey as shown in **Exhibit 11**.

Financial Management and Procurement

There were weaknesses in procurement processes and financial controls, including deficiencies in documentation, approvals, and contract oversight. Additional testing performed through expanded scope procedures identified similar issues within DAFR operations and other departments. Concerns related to the use of restricted funds, conflicts of interest, financial reporting, and internal controls were also evaluated. These conditions increase the risk of noncompliance with applicable requirements and may affect the County's ability to effectively manage public resources.

Scope Expansion and Additional Testing

During the course of the audit, additional procedures were performed to address identified risks and concerns. Expanded testing included targeted review of DASO, FIN, and DAFR, in specific areas such as procurement, grants, inventory, and conflicts of interest. This additional work resulted in 4 additional findings for the County to remedy with corrective actions.

Executive Summary Conclusion

The results of this special audit indicate that Doña Ana County faces ongoing challenges with workplace culture (mainly with fear of retaliation and favoritism) and with timely and cooperative collaboration and communication across departments and elected offices. The conditions identified reflect unresolved issues related to authority and accountability.

Addressing these challenges will require clearer definition of roles and responsibilities, improved alignment between County Administration and Elected Officials, and consistent implementation of policies supported by effective internal controls and accountability. Improvements in these areas will support more consistent operations, strengthen accountability, and enhance the County's ability to effectively manage resources and comply with applicable requirements.

ENGAGEMENT BACKGROUND AND OBJECTIVES

Background

Doña Ana County is a political subdivision of the State of New Mexico governed by a Board of County Commissioners (BOCC). County operations are administered through the County Manager's Office (CMO) and include centralized administrative departments, operational departments, joint ventures

and agreements, as well as independently elected offices.

Independently elected officials, including the DAC Offices of Probate Judge, Sheriff, Clerk, Assessor, and Treasurer operate within the County structure pursuant to statutory authority. Administrative services such as Human Resources, Finance, Procurement, Information Technology, and Legal/Risk are provided at the County level and support both County departments and elected offices. See **EXHIBIT 2**.

Objective, Scope, and Methodology

The objective of the special audit is to determine risks of financial fraud, waste or abuse in government, associated with the systematic issues cooperatively identified by Doña Ana County Governance and Administration and by the Doña Ana County Sheriff's Office Administration (DASO), impacting the organizational working relationship between the County and DASO. The engagement incorporates compliance and performance-based elements with the need for specific recommendations for County Governance and Administrative Management, as well as DASO Leadership and Administration.

Procedures were performed across multiple functional areas, including governance, financial management, procurement, personnel practices, compliance areas, and operational activities within County departments and elected offices. Sampling procedures performed included, but were not limited to:

- testing of County policies, procedures, ordinances, and directives
- examination of financial records, transactions, and supporting documentation
- evaluation of procurement and contracting processes
- review of personnel files, hiring practices, and disciplinary actions
- analysis of complaint investigations and related documentation
- interviews with County personnel and officials
- review of internal controls and administrative processes

We spent significant time and effort attempting to obtain complete populations of records and supporting documentation from the County; however, completeness was dependent on the information made available during the course of the engagement. Where populations were available, samples were selected and tested using professional judgment based on risk, materiality, and

relevance to the objectives of the engagement. In certain areas, additional procedures were performed based on risks identified during the course of the engagement. These procedures included expanded testing of selected departments, transactions, and operational processes.

Procedures performed were determined based on the objectives of the engagement and do not represent all procedures that would be performed in a financial statement audit conducted in accordance with generally accepted auditing standards. Accordingly, no opinion on the County's financial statements is expressed. The procedures were also limited to the information and documentation made available during the course of the engagement. The results of this report are based on procedures performed and information obtained during the audit period. Had additional information been available, other matters may have been identified and additional findings or conclusions may have been reached.

FINDINGS

This report presents the results of procedures performed to achieve the objectives of the engagement. The findings identified reflect conditions related to governance, internal controls, compliance with applicable laws and policies, and administrative practices across Doña Ana County. The matters identified vary in nature and significance and include both County-wide considerations and issues specific to individual departments and operational areas. In certain instances, additional findings were identified through expanded procedures performed in response to risks observed during the course of the engagement.

Detailed descriptions of each finding, including criteria, condition, cause, effect, and recommendations, are presented in **Exhibit 1 – Schedule of Findings and Responses**. Management responses are presented as provided, except to remove names and to format, and we make no representations as to their accuracy. In certain instances, there are two management responses, one from the Elected Office and one from the Board/Administration since collaboration will be necessary for corrective action to be successful. The procedures performed were limited to the information and documentation made available during the course of the engagement. Had additional information been available, other matters may have been identified and additional findings or conclusions may have been reached.

DEFINITIONS

Acronyms

	Board / Office / Department Key
DAC	Doña Ana County
BOCC	Board of County Commissioners
CMO	County Administration's Office of the County Manager and Assistant County Managers
FIN	Financial Services Department
HR	Human Resources Department
LEG	Legal/Risk Department
HHS	Health and Human Services Department
IA	Internal Audit Department
DACDC	Doña Ana Detention Center
DAFR	Doña Ana Fire Rescue
DASO	Doña Ana Sheriff's Office
DAAO	Doña Ana Assessor's Office
DATO	Doña Ana Treasurer's Office
DACO	Doña Ana Clerk's Office

Fraud

Fraud means obtaining something of value through willful misrepresentations. This includes, but is not limited to, fraudulent financial reporting, misappropriation of assets, corruption, and use of public funds for activities prohibited by the constitution or laws of the State of New Mexico. Fraudulent financial reporting means intentional misstatements or omissions of amounts or disclosures in the financial statements to deceive financial statement users, which may include intentional alteration of accounting records, misrepresentation of transactions, or intentional misapplication of accounting principles.⁷

⁷ NM State Audit Rule 2024 2.2.2.7 F(3).

Misappropriation of Assets

Theft of an agency's or local public body's assets, including theft of property, embezzlement of receipts, or fraudulent payments. Corruption means bribery and other illegal acts.⁸

Waste

Waste includes, but is not limited to, the act of using or expending resources carelessly, extravagantly, or to no purpose. Importantly, waste can include activities that do not include abuse. Rather, waste relates primarily to mismanagement, inappropriate actions, and inadequate oversight.⁹

Abuse

Abuse includes, but is not limited to, behavior that is deficient or improper when compared with behavior that a prudent person would consider reasonable and necessary operational business practice given the facts and circumstances but excludes fraud and noncompliance with provisions of laws, regulations, contracts, and grant agreements. Abuse also includes the misuse of authority or position for personal gain or for the benefit of another or those of an immediate or close family member or business associate. Waste and abuse do not necessarily involve fraud or illegal acts. However, they may be an indication of potential fraud or illegal acts, internal control weaknesses, or non-compliance, and may still impact the achievement of defined objectives.¹⁰

Internal Controls

Effective internal controls require independent and ethical oversight, integrity, accountability, and ongoing risk assessment to provide reliable indicators of an entity's performance. The Committee of Sponsoring Organizations of the Treadway Commission (COSO) defines internal control as a process effected by an entity's governing body, management, and other personnel, designed to provide reasonable assurance regarding the achievement of objectives related to operations, reporting, and compliance. Similarly, the U.S. Government Accountability Office (GAO), in Section OV1.01 of the *Standards for Internal Control in the Federal Government* (Green Book), defines internal control as a process effected by an entity's oversight body, management, and other personnel that provides reasonable assurance that the objectives of an entity will be achieved.

⁸ NM State Audit Rule 2024 2.2.2.7 F(3); GAO-14-704G federal internal control standards paragraph 8.02.

⁹ NM State Audit Rule 2024 2.2.2.7 (W); GAO-14- 704G federal internal control standards paragraph 8.03.

¹⁰ NM State Audit Rule 2024 2.2.2.7 (A)(3); GAO-14-704G federal internal control standards paragraph 8.03.

The COSO framework serves as the foundational model for internal control systems across all sectors, while the GAO Green Book adapts these principles for governmental entities, particularly those administering federal funds. Without properly designed and implemented internal controls aligned with these frameworks, entities face an increased risk of fraud, waste, and abuse. JAG recommends that the District adopt an internal control framework aligned with COSO principles and consistent with the GAO Green Book. This integrated approach should guide the continued development of policies and procedures that promote transparency, incorporate regular risk assessments, and establish effective monitoring processes.

Auditing Standards

Auditing standards establish that it is management's responsibility to design, implement, and maintain a sound system of internal control to ensure effective operations, reliable financial reporting, and compliance with applicable laws and regulations. Statement of Auditing Standards (SAS) Codification (AU) Section 110, paragraph .03 explains that it is management's responsibility to adopt sound accounting policies and to establish and maintain internal control that will, among other things, initiate, authorize, record, process, and report transactions (as well as events and conditions) consistent with management's assertions embodied in the financial statements. SAS AU 316 paragraph .04 states that "Management, along with those charged with governance, should set the proper tone; create and maintain a culture of honesty and high ethical standards; and establish appropriate controls to prevent, deter, and detect fraud. When management and those charged with governance fulfill those responsibilities, the opportunities to commit fraud can be reduced significantly."

Statement on Auditing Standard AU Section 325 paragraph 3 provides that "internal control is a process, effected by those charged with governance, management, and other personnel, designed to provide reasonable assurance about the achievement of the entity's objectives with regard to reliability of financial reporting, effectiveness and efficiency of operations, and compliance with applicable laws and regulations." An agency, local public body, or IPA shall notify the State Auditor immediately upon discovery of any apparent violation of a criminal statute in connection with financial affairs.¹¹ If an agency or IPA has already made a report to law enforcement, that fact shall be included in the notification. If not immediately known, a follow-up notification shall include an

¹¹ NMSA 1978 Section 12-6-6.

estimate of the dollar amount involved, if known or estimable, and a description of the apparent violation, including names of persons involved and any action taken or planned.¹²

Each agency should evaluate the internal controls by reviewing and testing internal controls to ensure they are properly designed and implemented. Any violation of law or good accounting practice including instances of non-compliance or internal control weaknesses must be reported as an audit finding.¹³ Pursuant to standards, “Auditors should communicate in the report on internal control over financial reporting and compliance, based upon the work performed: significant deficiencies and material weaknesses in internal control; instances of fraud and non-compliance with provisions of laws or regulations that have a material effect on the audit and any other instances that warrant the attention of those charged with governance; non-compliance with provisions of contracts or grant agreements that has a material effect on the audit; and abuse that has a material effect on the audit.”¹⁴

DETAILED AREAS OF RISK AND TESTING (BY SCOPE OF WORK)

A. COMPLIANCE WITH APPLICABLE LAWS AND REGULATIONS

Procedures performed in this area were designed to evaluate Doña Ana County’s compliance with relevant New Mexico state and local laws and regulations governing public administration, financial reporting, procurement, personnel management, public transparency, and law enforcement operations. In performing this work, we evaluated County Administration departments, specifically the County Administrative Office (CMO), which includes Financial Services Department (FIN), Human Resources (HR), and Legal/Risk Department (LEG), as well as the Doña Ana County Sheriff’s Office (DASO).

¹² NM State Audit Rule 2024 2.2.2.10 (N)(2).

¹³ NMSA 1978 Section 12-6-5.

¹⁴ GAGAS (Generally Accepted Government Auditing Standards), also known as the Yellow Book, Section 4.23 (from the 2021 revision) addresses professional skepticism and is part of the Fundamental Ethical Principles for auditors.

We sampled transactions and tested, reviewed policies and procedures, examined personnel and procurement records, analyzed complaints and legal actions, and evaluated compliance with statutory reporting requirements. The County's activities were evaluated against key New Mexico statutes and regulatory requirements, including:

- Governmental Conduct Act (§10-16 NMSA 1978)
- Whistleblower Protection Act (§10-16C NMSA 1978)
- Inspection of Public Records Act (IPRA) (§14-2 NMSA 1978)
- Procurement Code (§13-1 NMSA 1978)
- Peace Officer Employer-Employee Relations Act (§29-14 NMSA 1978)
- Law Enforcement Training Act (§29-7 NMSA 1978)
- New Mexico Law Enforcement Academy Standards (10.29.9 NMAC)

These statutes formed the legal benchmark we used to evaluate whether County and DASO actions, including operational decisions, financial transactions, and personnel activities, were conducted in accordance with state law. Additional criteria included the New Mexico State Audit Rule (2.2.2 NMAC), particularly requirements related to immediately reporting fraud, waste, and abuse to the Office of the State Auditor. Based on procedures performed, we identified breakdowns in compliance with state laws and regulatory requirements across multiple County functions. These issues were not isolated, but reflect broader weaknesses in governance, internal controls, and compliance oversight. The most significant areas of noncompliance include:

- failure to comply with statutory reporting requirements for fraud, waste, and abuse
- breakdowns in transparency requirements, including Inspection of Public Records Act (IPRA) and Open Meetings Act (OMA) compliance
- noncompliance with laws governing procurement, financial reporting, and the use of public funds
- conflicts affecting the consistent application of statutory authority
- delays in investigations and accountability for employee actions or failure to act
- gaps in law enforcement regulatory compliance and required reporting

These conditions create significant risk to the County. Based on our work, these risks include exposure to statutory violations and regulatory noncompliance, particularly in areas related to mandatory fraud

reporting, public transparency, employment decisions, and financial management. Failures in these areas increase the likelihood that noncompliance, fraud, waste, or abuse may not be reported and remedied timely.

We also noted increased legal exposure resulting from governance conflicts and confused application of statutory authority, as well as financial risk associated with deficiencies in procurement, accounting, and the administration of public funds. Operational impacts were also observed, particularly within DASO, where compliance gaps, gossip, and unprofessional behavior may affect law enforcement functions. Additionally, weaknesses in transparency and records-related processes contribute to reputational risk and erosion of public trust. Collectively, these conditions indicate material internal control weaknesses including insufficient internal controls over compliance.

The compliance deficiencies identified in this section are supported by multiple reportable findings demonstrating noncompliance with applicable state statutes, regulatory requirements, and the New Mexico State Audit Rule. These findings collectively reflect necessary improvements in statutory reporting, transparency, public finance, and governance.

We noted detailed findings such as noncompliance with statutory reporting and transparency requirements includes the County's failure to notify the Office of the State Auditor of potential fraud, waste, or abuse as required by §12-6-6 NMSA 1978 (**Finding 2026-011S**), noncompliance with the Inspection of Public Records Act (**Finding 2026-012S**), and violations of the Open Meetings Act (**Finding 2026-039S**).

Noncompliance with statutory and constitutional requirements governing the use of public funds and procurement activities includes the handling of donations outside the County treasury resulting in potential Anti-Donation Clause violations (**Finding 2026-010S**), as well as weaknesses in procurement documentation, approvals, and contract review controls and noncompliance with

Employee Survey Quotes (edited)

"Complaints and lawsuits are from lack of oversight by head CMO and HR, different answers or unfair treatment, complaints not being followed up."

"County has slow timelines and lack of responsiveness to anyone who has concerns or questions."

"Complaints arise from favoritism, mistreatment, unethical behavior, and unfair compensation."

financial reporting requirements under the New Mexico Administrative Code (**Findings 2026-021S, 2026-026S, and 2026-027S**).

Weaknesses in compliance with the Governmental Conduct Act and related conflict-of-interest requirements were also identified, including deficiencies in monitoring and enforcement of disclosure requirements and authorization controls (**Findings 2026-016S and 2026-022S**).

Compliance issues within law enforcement operations include gaps in training and oversight required under applicable statutes and failures to submit required statutory reports (**Findings 2026-005S and 2026-008S**).

Governance-related compliance risks include the absence of clearly defined and agreed upon policies aligning statutory authority between County Administration and the Sheriff, as well as the lack of clear procedures governing litigation and conflict counsel (**Findings 2026-036S and 2026-038S**). The absence of a formal records retention framework further contributes to compliance risk (**Finding 2026-040S**), particularly in relation to statutory requirements for transparency and documentation. A complete listing of all findings, including detailed descriptions, criteria, causes, effects, and management responses, is presented in **Exhibit 1 – Schedule of Findings and Responses**.

B. COUNTY CODES, ORDINANCES, POLICIES, AND CONTRACTS

As laid out in the designated scope of work, procedures performed in this area were designed to evaluate Doña Ana County Administration's compliance with its internal governance framework, including County codes, ordinances, resolutions, administrative directives, policies, procedures, and contractual obligations. This evaluation focused on the County Administrative Office, including the Office of the County Manager and Assistant County Managers (CMO), which oversees Financial Services Department (FIN), Human Resources (HR), and Legal/Risk Department (LEG).

We reviewed County policies, BOCC ordinances and resolutions, and administrative directives issued by the County Manager, and compared those requirements to actual practices. We also examined contracts, ordinances, resolutions, and internal procedures to determine whether CMO operated in accordance with its established requirements. As part of this evaluation, our testing was limited to documentation made available to us during the course of the engagement. Specifically, we reviewed

twelve (12) County Manager administrative directives, approximately eight hundred (800) ordinances and resolutions adopted by the Board of County Commissioners (BOCC), as provided for review, and numerous policies, procedures, contracts, and agreements. Only certain relevant contracts to the scope of work were reviewed. Our conclusions are based on the records made available and do not extend to directives, contracts, ordinances, resolutions, or other documents that may exist but were not provided to us. The County's activities were evaluated against its internal governance framework, including:

- Doña Ana County Code and adopted ordinances issued by the Board of County Commissioners (BOCC)
- Resolutions adopted by the BOCC
- Administrative directives and procedures issued by the County Manager
- County-wide policies, including financial, procurement, and personnel policies
- Contractual agreements, including procured contracts and intergovernmental agreements

These authorities reflect the County's governance and administrative structure, in which the BOCC establishes legislative policy through ordinances and resolutions, and the County Manager, as the Administrative Assistant to the BOCC, is responsible for implementing those policies through administrative directives and procedures. Together, these sources establish the County's internal requirements for decision-making, financial management, personnel administration, and operational oversight. We identified inconsistencies between established County policies, ordinances, and administrative directives and the manner in which those requirements were implemented across departments. County Internal Audit reports have also indicated that compliance requirements are not applied uniformly or enforced consistently, along with a lack of accountability. The most significant issues observed include:

- failure to consistently follow established and best practice procurement, public records, and contract review procedures
- deviations from County financial policies and reporting requirements
- inconsistent application of personnel policies and administrative procedures
- lack of clearly defined or documented procedures in key operational areas
- breakdowns in adherence to BOCC resolutions and County Manager directives
- noncompliance with complaint timelines and lack of internal controls over tracking and

Employee Survey Quotes (edited)

If you don't agree with upper management (County or Department), you are not in favor and become a target."

"If you are in good with County Management you are protected by them."

"Discipline is influenced by picking and choosing when to use policy."

"There is a culture of no accountability or no consequences for performing poorly or below the standard."

resolution

- delays with administrative support functions and communication
- other observations as listed in other sections of the scope of work

Risk exists that County operations may not be conducted in a consistent, transparent, or controlled manner with a good organizational work environment. The County is exposed to inconsistent decision-making, operational inefficiencies, employee turnover, complaints, lawsuits, and an increased risk of noncompliance with applicable laws and regulations. We also noted that weak adherence to internal policies increases the likelihood of control failures in key areas such as procurement, financial reporting, and personnel administration. These conditions may contribute to errors, disputes, and increased legal or financial exposure.

We noted deficiencies in procurement and contract-related processes, including weaknesses in documentation, approvals, and contract review controls (**Finding 2026-021S**). We also noted instances where County financial policies and reporting requirements were not consistently followed, including noncompliance with internal administrative and reporting requirements (**Findings 2026-026S and 2026-027S**).

Gaps in policy clarity and implementation were identified, including the absence of clearly defined procedures governing key governance functions such as litigation authorization and conflict counsel (**Finding 2026-036S**), as well as the lack of formalized guidance defining the relationship between County personnel systems and the Sheriff's statutory authority (**Finding 2026-038S**). Certain policies and procedures require updating or more consistent implementation to ensure effective governance and oversight (**Finding 2026-037S**). Weaknesses in records management and the absence of a formal records retention policy (**Finding 2026-040S**) also contribute to inconsistent compliance with internal requirements.

Again, a complete listing of all findings is presented in **Exhibit 1 – Schedule of Findings and Responses**.

C. DASO COMPLIANCE WITH APPLICABLE LAWS AND REGULATIONS

Procedures performed in this area were designed to evaluate DASO's compliance with applicable County codes, ordinances, administrative rules, policies, procedures, and contractual requirements during the audit period which includes those in section A. above. As reported above, we reviewed those applicable to DASO operations and compared those requirements to DASO practices during the audit period. We also examined selected personnel actions, procurement activities, complaint handling processes, and administrative interactions. DASO operations were evaluated against County-level governance requirements, including:

- Doña Ana County Code, ordinances, and applicable BOCC resolutions
- County Manager administrative directives and procedures
- County-wide policies, including human resources, procurement, and financial policies
- Relevant contractual obligations and intergovernmental agreements
- DASO internal policies and procedures, such as Commission on Accreditation for Law enforcement Agencies (CALEA)

There were very few direct directives, ordinances, and resolutions provided that apply to DASO, therefore, for relevance and impact, the focus of our work regarded compliance with CALEA. We addressed certain areas for both best practices¹⁵ and best evidence based practices¹⁶.

DASO adopted the CALEA Office Policy on February 22, 2022 and revised these policies on June 28, 2023. The adoption of CALEA was presented by the Sheriff to the BOCC and a resolution¹⁷ was passed

¹⁵ Best practice is a widely accepted method or technique that has proven effective in real-world use, often based on practitioner consensus, experience, and organizational learning.

¹⁶ Evidence-based practice (EBP) is a decision framework that explicitly integrates the best available research evidence, practitioner expertise, and stakeholder (or community) values to select and apply interventions; EBP requires systematic appraisal and reproducible results.

¹⁷ Resolution No. 2022-16, executed 22 February 2022

to enact and require the Sheriff's Office to implement CALEA Accreditation. This expanded the 21-year-old policy (which had only minor changes throughout its tenure) from approximately 52 to 147 policies.

There has been no definitive statistical evidence that CALEA reduces tort claims; however, available research does indicate indirect reductions in risk. This indirect reduction may be attributed to improved policies, documentation, and training. While reduction of liability is critical, one of the challenges associated with a 963-page policy is the expectation that law enforcement personnel can read, understand, and retain that volume of information, in addition to statutes, local policies, and ordinances. Interviews with DASO personnel reflected that the policy is difficult to understand, as different aspects of policies are located in multiple areas. Additionally, it can be difficult at times to locate specific policies, especially as changes are made.

After reviewing the policy and performing a comprehensive review of policy violations since the inception of CALEA at DASO, we noted a substantial increase in progressive discipline for minor issues. This increase has, for the most part, remained consistent through April 15, 2025. Over time, as DASO personnel become more familiar with policy requirements, violations may decrease as organizational culture and working knowledge improve.

DASO's CALEA policy was last revised on June 28, 2023, although certain policies have been revised since that date. Each time the policy is revised, an email is sent to deputies, command staff, and civilian staff; however, tracking these changes is difficult. During interviews, it was reported that at times emails failed to reach certain staff, or not all affected personnel received notification of changes. This places the burden of tracking policy updates on staff, which presents a challenge given the volume of existing policy requirements.

The most recent CALEA audit (December 2025) identified 35 discrepancies. Most of these were addressed immediately and were minor in nature. We noted certain risks during our review:

- Lack of a dedicated CALEA Program Manager may pose a risk and increase potential liabilities. There is disagreement between DASO and Human Resources regarding the need for this position.
- DASO currently has a Document Technician performing the duties of a CALEA Program

Manager. Although this individual appears competent and capable of performing the role, the ongoing demands associated with maintaining compliance may impact overall operations.

- Capacity risk of additional duties may affect the timeliness and thoroughness of policy updates and corrective actions.
- If the Document Technician is reassigned, promoted, or leaves the position, there may be a gap in CALEA-related responsibilities, which could create a backlog and delay or disrupt CALEA certification.

We recommend considering:

- Reclassifying the current Document Technician as a Program Manager with clearly defined responsibilities.
 - This should be implemented promptly to reduce potential liability and support continued CALEA certification. Although a request for this position was submitted by DASO and denied by Human Resources, the current Document Technician should be provided an opportunity for advancement through appropriate personnel processes.
- As an alternative to full reliance on CALEA (best practice model), DASO could consider revising policies using evidence-based practices, which may reduce operational strain on the Sheriff's Office and patrol personnel.
- Implementing one-page standard operating procedures (SOPs) for higher-risk policies, or at a minimum grouping related policies together.

DASO is in full compliance with New Mexico state policies and procedures and is substantially in compliance with CALEA standards, with only minor discrepancies as identified in the most recent CALEA audit conducted in December 2025.

Differences in interpretation and application of State law and County policies may contribute to conflict between DASO and County Administration, particularly in areas involving personnel actions, administrative oversight, and decision-making authority. These conditions may increase legal exposure and complicate the County's ability to ensure consistent and compliant operations across departments. Additionally, where policies are not clearly defined or consistently applied,

accountability may be reduced and the effectiveness of internal controls may be diminished.

Example findings related to personnel and employment processes, including compliance with hiring requirements and background check procedures (**Findings 2026-002S and 2026-009S**), as well as findings addressing the handling of complaints and investigations, including delays and deficiencies in documentation and monitoring (**Findings 2026-017S and 2026-018S**).

We also identified broader governance-related findings reflecting the absence of clearly defined policies governing the interaction between DASO operations and County administrative processes, including the relationship between the County's merit system and the Sheriff's authority (**Finding 2026-038S**).

D. ORGANIZATIONAL CULTURE, ACCOUNTABILITY

In accordance with the scope of work, procedures performed in this area were designed to assess organizational culture and accountability across DAC, including DASO, other individual County departments, and other County Elected Officials and Departments.

In performing this work, we analyzed complaints, personnel actions, legal matters, and internal communications, and evaluated how policies and procedures were applied in practice. We also reviewed documentation related to disciplinary actions, grievance processes, and management decisions to assess whether accountability mechanisms were functioning effectively. We sent an anonymous employee survey out to all DAC employees. Organizational culture and accountability were evaluated against:

- Certain County policies and procedures governing employee conduct, discipline, and performance management
- Standards of professionalism and ethical conduct reflected in relevant County policies and the Governmental Conduct Act
- Expectations for transparency, fairness, and consistency in decision-making
- Internal control principles related to accountability, oversight, and monitoring

These criteria establish expectations that County operations should be conducted in a manner that promotes integrity, consistency, and accountability across departments. The most significant issues observed include:

- inconsistencies in the application of disciplinary actions and personnel decisions
- variations in how complaints and grievances were handled and resolved
- fear of retaliation due in part to a culture of legalism
- significant delays in addressing employee concerns and allegations
- complaints of inner circle and favoritism particularly for employees who do not meet qualifications and are hired or promoted regardless

In addition, we observed that differing interpretations of roles, responsibilities, and authority contributed to inconsistent decision-making and, in some cases, conflict between departments. These conditions indicate that accountability mechanisms are not functioning uniformly and that expectations for conduct and performance are not consistently reinforced. The conditions identified above create risk that the County's operations may not reflect a consistent standard of professionalism, fairness, and accountability. Inconsistent application of policies and procedures increases the likelihood of employee dissatisfaction, disputes, and formal complaints.

We also noted that weaknesses in accountability and oversight may contribute to an environment in which issues are not addressed in a timely or consistent manner, increasing the potential for escalation into legal actions or operational conflicts. These conditions may also affect employee morale, retention, and overall organizational effectiveness.

Employee Survey Quotes (edited)

"Some department heads use retaliation and intimidation."

"Failure to address conflicts early."

"There are opportunistic individuals attempting to profit off the County."

"It makes me sad since when I started at the County it was a great place to work but now it is not and we have a bad reputation of how employees are treated."

"Retaliation is a real thing here and until you take care of that, this will repeat itself over and over."

"I have full trust in my department leadership and issues are very well communicated."

"To increase trust leadership actions must be transparent, honest, competent, with better communication."

"Please help and correct the issues occurring in Dona Ana County."

Confidential Employee Survey

As part of our procedures to assess organizational culture and accountability, we distributed an anonymous employee survey to all DAC employees. The survey was designed to obtain employee perspectives regarding interdepartmental cooperation, timeliness of issue resolution, willingness to

Employee Survey Quotes (edited)

"[Barriers to correcting concerns or misconduct] favoritism and fear of retaliation for reporting."

"Misconduct is not reported."

"I have not witnessed any misconduct since I've been here."

"Egos, lack of empathy, lack of ability to accept constructive criticism or guidance. Lack of broader knowledge to bring new ideas and more efficient processes."

"[To improve fairness and accountability] Outsource HR services. HR staff naturally has biases and when working here long enough, will dig into those biases."

"Incorporate merit into pay decisions."

"Little has changed. The culture is bullying and vindictive so good employees become minimal performers at best or leave. They do not want any controversy so no decision making, no commitment to the cause, no enthusiasm for serving the public actually exists."

raise concerns, perceived retaliation, complaint and investigation processes, discipline, accountability, hiring and promotion practices, and overall trust in County leadership. Survey responses reflect employee perceptions and experiences and, while not independently verified in every instance, provide relevant insight into how County processes and culture are experienced in practice.

Overall, survey responses reflected recurring concerns regarding communication, consistency, trust, and accountability across the County. A significant number of respondents described communication breakdowns, siloed operations, lack of follow through, and delays when matters required coordination across departments. Employees frequently reported that issues become more difficult once they require management level review, approvals, or HR involvement, and several responses described processes as unclear, inconsistent, or dependent on the individuals involved.

Survey responses also reflected substantial concern regarding organizational culture. Employees repeatedly described a lack of trust in leadership, fear

of retaliation for raising concerns, and skepticism that reporting issues would result in timely or fair resolution. Responses indicated that some employees perceive a culture in which speaking up may result in adverse treatment, being ignored, or becoming a target, while others expressed the belief that concerns are allowed to linger until they escalate or are effectively abandoned. These perceptions

were not limited to a single question, but instead appeared repeatedly across questions addressing concern reporting, retaliation, complaint escalation, and barriers to correcting misconduct. The survey confirmed the existence of issues underlying the scope of work.

Another major theme reflected in the survey was the perception that accountability mechanisms are not applied uniformly. Respondents described inconsistent discipline, differing outcomes for similarly situated employees, and a belief that favoritism, personal relationships, or political influence may affect hiring, promotions, investigations, and other personnel decisions. Comments also reflected employee concern that some positions or advancement opportunities were not competitively posted, that qualifications were not always applied consistently, and that certain employees or groups were perceived as protected from consequences.

Survey responses further reflected concern regarding the handling of complaints, investigations, and disciplinary matters. Employees described delays in complaint review, lack of visibility into investigative status or outcomes, concerns regarding objectivity and independence, and dissatisfaction with how HR and management respond to workplace concerns. Several responses indicated that prolonged delays, inconsistent follow through, or perceived lack of fairness contribute to employee decisions to formalize concerns through grievances, complaints, or legal action.

The anonymous survey also reflected broader concerns regarding County structure and leadership. Respondents cited lack of clear direction, insufficient written procedures, too many approval layers, limited training, unclear roles and responsibilities, and weak coordination between departments. Numerous comments connected organizational problems to broader issues of leadership accountability, including lack of transparency, lack of ownership over problems, and perceived inability or unwillingness to hold both management and elected officials accountable to consistent standards.

Importantly, we note that the survey was not uniformly negative. A small number of respondents indicated that these concerns were not their experience, that some departments work well together, or that certain issues were not county wide. In addition, a few comments criticized the framing of portions of the survey as overly negative or assumption based. Accordingly, the survey results should be understood as reflecting substantial employee concern in multiple areas, but not necessarily a 100% uniform experience across all departments or all employees.

Despite that limitation, the consistency of themes across multiple questions is noted. The same concerns related to communication failures, fear of retaliation, favoritism, inconsistent application of policy, weak follow through, and lack of transparency appeared repeatedly in responses addressing cooperation, timeliness, reporting concerns, investigations, discipline, accountability, complaints and lawsuits, and barriers to correcting misconduct. Likewise, when asked what would improve fairness and accountability, respondents most often called for clearer and consistently applied policies, transparent hiring and promotion practices, improved communication, stronger leadership accountability, better training, and more timely and objective complaint resolution.

In our view, the survey results are consistent with other procedures performed during this engagement and further support concerns regarding organizational culture, accountability, consistency in personnel processes, and the perception of retaliation and favoritism in certain areas of County operations. These conditions create risk that employee concerns will go unreported or unresolved, that confidence in management processes will continue to erode, and that disputes may escalate into further employee turnover, formal complaints, grievances, or litigation. See **Exhibit 11**.

Organizational Conflict, Perceived Inequity, and Related Risk

The County is experiencing organizational conditions in which employee complaints, personnel disputes, litigation, and allegations of unfair treatment have been arising across multiple departments or offices. When such concerns occur repeatedly rather than as isolated incidents, governing bodies are often confronted with competing interpretations of organizational conditions. Some employees and stakeholders may view conflict as resistance to accountability or performance management, while others interpret the same circumstances as evidence of favoritism, political influence, or inequitable treatment.

Employee Survey Quotes (edited)

"I think cooperation between departments is typically effective and rarely ineffective. When something falls through, it usually has to do with a communication breakdown."

"All departments I work with are great."

"I believe most supervisors are trying to do their best for their employees."

"I have not witnessed anything of this sort."

"N/A"

"No clue."

"Not sure."

"I don't know."

"Thank you for taking the time to listen and collect information and input from the workforce."

In researching organizational psychology and public administration, we see environments characterized by sustained grievance activity rarely develop from a single cause. They normally emerge when employees and leadership no longer share confidence in how employment decisions are made, communicated, or applied across the institution. At that point, identical administrative actions may be interpreted differently depending upon departmental affiliation, prior experience, or perceived organizational power relationships.

We note that the existence of lawsuits or complaints does not independently establish wrongdoing or systemic mistreatment. However, persistent patterns across departments represent an important governance signal indicating potential erosion of institutional legitimacy. See **Exhibit 9** for more analysis of complaints, which indicates the most troublesome department is the Detention Center (DACDC) which also had the greatest number of employees.

Employee acceptance of difficult personnel decisions depends heavily upon confidence that processes are consistent, impartial, and stable across leadership transitions. And since the County operates within complex institutional structures, each unique, each with different leadership, authority is frequently distributed among elected officials, appointed administrators, professional departments, and statutory offices possessing varying degrees of operational autonomy. Personnel authority, political accountability, and administrative responsibility exist concurrently but are not always centralized. *Roles and powers must be respected while collaboration is sought.*

Within such environments, disagreement regarding employment decisions may extend beyond individual disputes and reflect broader uncertainty concerning how authority is exercised. Hiring, promotion, discipline, reassignment, or termination decisions increasingly become interpreted through perceptions of departmental influence, leadership alignment, or interpersonal relationships rather than administrative judgment alone. Organizational science recognizes these environments as conditions involving weakened institutional legitimacy, defined as diminished shared belief that organizational processes operate neutrally and predictably. The presence of numerous grievances or allegations should be understood as potential indicators of systemic perception challenges in addition to any definitive evidence of either misconduct or employee dissatisfaction alone.

Psychological Safety and Organizational Disclosure

Psychological safety, which is the belief that individuals may raise concerns without reputational harm,

has been repeatedly validated as essential to organizational transparency. In example research on workplace learning, high-performing hospital teams reported more operational errors than lower-performing teams because employees felt safe acknowledging mistakes without fear of punishment.¹⁸ Meta-analytic research confirms that perceived punitive or politically risky environments suppress employee communication and reporting behavior.¹⁹ The research similarly identified fear of blame as a primary barrier preventing disclosure of organizational problems across U.S. institutions.²⁰

In governmental workplaces experiencing conflict, reduced psychological safety increases the likelihood that routine supervisory actions are interpreted defensively, contributing to escalation of grievance activity. While the survey started from a position of negative issues reported to us and as obvious from special audit designation, it also disclosed valuable insights confirming this research.

Organizational Justice and Fairness Perception

Organizational Justice Theory provides additional explanation for persistent personnel disputes. Employee acceptance of workplace outcomes depends primarily upon perceived fairness of decision-making processes rather than outcome favorability.²¹ When employees cannot clearly observe consistent criteria governing employment decisions, they infer explanations based upon observable relationships or departmental dynamics. In another example, research showed that insufficient explanation alone significantly increases perceptions of inequity even when outcomes remain unchanged.²²

Variation in supervisory practices across departments, which is common and even necessary within decentralized governments, may unintentionally create perceptions of unequal treatment. Psychological attribution processes further intensify disagreement. Individuals commonly attribute adverse outcomes to external unfairness while attributing others' outcomes to personal characteristics, a phenomenon described as the fundamental attribution error. Consequently, corrective management action may simultaneously be viewed as necessary accountability by supervisors and as inequitable targeting by employees.

¹⁸ Edmondson, *Administrative Science Quarterly*, 1999.

¹⁹ Newman, Donohue & Eva, *Human Resource Management Review*, 2017.

²⁰ *Sentinel Event Alert*, 2017.

²¹ Colquitt et al., *Journal of Applied Psychology*, 2001

²² *Organizational Behavior and Human Decision Processes*, 1990

Employee or Interdepartmental Power Competition in Local Government

Power competition between employees, offices, or departments represents a significant contributor to organizational conflict in public institutions. Local governments frequently contain operational silos shaped by statutory authority, professional specialization, or historical governance practices. For example, it has been reported many times that the County has experienced a long-standing feud between past County Managers and Sheriffs. Research on perceived organizational politics demonstrates strong correlation between political environments and employee distrust, grievance activity, and workplace stress.²³ Personnel decisions undertaken within one department may therefore be interpreted elsewhere as attempts to expand institutional influence rather than address performance concerns. Employees increasingly associate fairness with departmental alignment rather than organizational policy, reinforcing siloed division across the workforce.

Litigation Density and Institutional Meaning

Public-sector dispute research indicates that litigation frequency often reflects weakened confidence in internal resolution mechanisms rather than prevalence of unlawful conduct.²⁴ Repeated legal disputes signal to employees that conflicts are resolved externally rather than internally, reinforcing adversarial interpretations of organizational decision-making.

Leadership responses emphasizing investigation, documentation, or legal/HR review while at times necessary may unintentionally reinforce perceptions that organizational relationships have become adversarial rather than collaborative and supportive. Once narratives regarding favoritism or inequity emerge, subsequent decisions are interpreted through those expectations. Organizational reality becomes contested between leadership explanation and workforce perception, allowing conflict cycles to persist independent of individual personnel outcomes. Persistent personnel conflict presents measurable governance risk regardless of the validity of individual allegations. High-reliability organization research demonstrates that distrust environments reduce information flow necessary for effective decision-making.²⁵

In local government settings, institutional risk may manifest through slowed decision-making, inconsistent enforcement of workplace standards, supervisory reluctance to address performance

²³ Ferris et al., *Journal of Management*, 2002.

²⁴ Bingham, *Public Administration Review*, 2004.

²⁵ Weick & Sutcliffe, *Managing the Unexpected*, 2007.

concerns, increased employee turnover, and growing reliance on external complaint mechanisms. Administrative attention may gradually shift from public service delivery toward conflict management and liability control. We noted this concern particularly within HR, as they sense a significant responsibility to limit risk and liability; however, there must be a balance with allowing operations to proceed recognizing it cannot all be alleviated.

The central governance concern arises when employees no longer distinguish between legitimate managerial discretion and perceived personal or political motivation. Authority becomes contested, increasing operational, reputational, and financial exposure for the governmental entity. As we have discussed earlier, persistent personnel conflict frequently demonstrates recurring institutional patterns over multiple past and current administrations. Disagreement regarding application of personnel standards across departments may emerge, accompanied by perceptions that outcomes differ depending upon supervisory authority or departmental affiliation. Employees increasingly bypass internal supervisory channels in favor of formal complaints or external remedies when neutrality of internal processes is questioned.

Supervisors may demonstrate hesitation in enforcing performance expectations due to anticipated grievance activity, producing uneven accountability. Informal communication networks may replace official communication as employees inherently seek *explanations* for organizational actions. Turnover among experienced personnel may increase where advancement pathways appear unpredictable. The cumulative presence of such conditions represents heightened institutional risk because shared confidence in procedural fairness weakens across the organization.

The relevant analytical question is not whether individual complaints are correct or incorrect but whether institutional systems demonstrate consistent neutrality across departments, offices, and leadership transitions. Tone at the top from the Elected Officials makes a significant difference in the functions under them. It helps to maintain stable administrative processes capable of functioning independently of political change. Employees serving under evolving leadership structures rely upon predictable procedures to maintain confidence in institutional fairness.

Strengthening procedural clarity, supervisory consistency, transparent documentation, and impartial review mechanisms has been shown to improve acceptance of personnel decisions even when outcomes remain unfavorable. Organizational stability improves when governance focuses on

institutional systems *rather than attribution of individual fault*. As noted, the culture of insulating and positioning and deeming who is right or wrong may be perpetuating competition, defensiveness, aggressiveness, withdrawal, and fears.

This report does not determine whether any individual complaint, lawsuit, or allegation is substantiated or unsubstantiated. Evaluation of specific claims requires investigative and legal processes beyond organizational analysis. The report does not conclude that unlawful discrimination, retaliation, favoritism, or misconduct *has* occurred. Nor does it conclude that employee grievances are inherently accurate or inaccurate representations of organizational conditions.

The special audit does not discourage legitimate performance management or supervisory accountability, in fact it encourages accountability, and it does not recommend specific personnel action involving any employee or official. Organizational conditions described herein reflect institutional dynamics that develop cumulatively rather than actions attributable to any single administration or department. The purpose of this analysis is to assist the County in understanding organizational risk factors so that oversight efforts may strengthen institutional processes and public trust.

Example findings address deficiencies in the handling and monitoring of workplace complaints and investigations, including delays in investigation and inadequate systems for tracking and resolving misconduct (**Findings 2026-017S and 2026-018S**). We also noted findings related to the need for updates and consistent implementation of Human Resources policies and procedures (**Finding 2026-037S**). Findings related to governance and authority, including the lack of clearly defined policies governing decision-making and oversight, contribute to the conditions described in this section (**Finding 2026-038S**).

The results of the anonymous employee survey we conducted, as shown in **Exhibit 11**, are particularly illuminating for insight for the County's leaders in addressing culture and accountability remedies.

E. COMMUNICATION, TIMELINESS, AND RESPONSIVENESS

As requested, we also evaluated the timeliness of inter-departmental communications, response times to action requests, completion of mandatory duties, and adherence to deadlines between DASO, County Administration's Office of the County Manager and Assistant County Managers (CMO), FIN, HR, LEG, other individual County Departments, and other County Elected Officials and Departments. This assessment focused on whether communication processes supported efficient operations, timely decision-making, and consistent implementation of County policies and procedures.

In performing this work, we sampled internal communications, including emails and correspondence, as well as documentation related to personnel actions, complaints, procurement activities, and legal matters. We also evaluated the timeliness of responses and actions taken by departments in relation to established processes and expectations. Based on procedures performed, we identified inconsistencies in communication practices and delays in the execution of key administrative and operational processes across departments. These issues were observed in interactions between DASO and County Administration, as well as among County departments.

Along with other sections reported, the most significant issues observed include:

- delays in processing and responding to personnel actions, complaints, and administrative requests both on HR side and Departments or Offices side
- inconsistent communication and cooperation between departments regarding roles, responsibilities, and required actions
- lack of complete documentation supporting the timing and sequence of decisions
- breakdowns in coordination between DASO and CMO and DACAO and CMO in key operational areas
- instances where communication gaps or aggressiveness (both active and passive) contributed to misunderstandings or conflicting actions
- anonymous employee survey results show approximately 66% of respondents were prevented from moving forward on their work at least monthly due to lack of responsiveness both from within their department/office and within the County overall.

We did observe that County operations have been delayed, inefficient, or even not executed. Delays in communication and action may contribute to unresolved issues, increased employee dissatisfaction, and escalation of conflicts or complaints. We also noted that ineffective communication and coordination may contribute to governance challenges, particularly where departments rely on timely information to carry out their responsibilities. Inconsistent communication may result in duplicated efforts, conflicting actions, or failure to complete processes.

Employee Survey Quotes (edited)

"We ask for something to do our job and it takes months to get it."

"Lack of standard operating procedures, lack of knowledge, or understanding of statutory requirements."

"HR sitting on items; it has been better lately."

"People are afraid to make decisions; many department heads lack management skills."

"DASO at this time runs by the good old boys club. So, if you are part of this group, they will either drag their feet to try to miss timelines or sweep things under the rug."

"Lack of man power and budget."

"Many times departments put up walls and get offended when other departments are asking questions or seeking information. Then, some complain to the ACMs...they don't have the experience or expertise to manage assigned departments...some cases are going in different directions or in sync with each other or the County Manager."

"Communication – people not reading correspondence."

Cooperation and communication breakdowns between DASO, DACAO, and County Administration may exacerbate existing tensions related to authority and oversight, increasing the risk of operational disruption and legal exposure. The conditions identified in this section are supported by findings related to delays, documentation gaps, and coordination issues across departments. See **Exhibit 5** for the sample item, which demonstrates this in detail for the Sex Offender Registration Coordinator (SORC), which has remained an open position since July 6, 2024.

These include findings addressing delays in the investigation of complaints and allegations, as well as deficiencies in systems used to document and track workplace issues (**Findings 2026-017S** and **2026-018S**). We also noted findings related to timeliness and consistency in personnel processes (**Finding 2026-002S**) and related to governance and authority, including the lack of clearly defined roles between DASO and County Administration, and the lack of DACAO property reassessments in compliance with state law (**Finding 2026-028S**), contribute to the communication challenges described in this section (**Finding 2026-038S**).

F. DASO OPERATIONS, TRAINING, POLICIES, AND PROCEDURES

Procedures performed in this area were designed to evaluate the DASO Administration's compliance with legal duties and operational requirements associated with the Office of the Sheriff as set forth in sections A. and C. above and duties within the NM County Sheriff's Handbook²⁶. This included responsibilities related to court orders, legal proceedings, employment-related matters, public records, and other statutory and administrative obligations.

In performing this work, we reviewed documentation related to writs of mandamus, litigation, employment actions, complaints, and public records requests. We also evaluated DASO's coordination with County Administration, including the Office of the County Manager (CMO), Human Resources (HR), and Legal/Risk Department (LRD), in fulfilling these responsibilities.

DASO operations were evaluated against applicable legal and operational requirements, including:

- New Mexico statutes and legal cases governing the authority and duties of the Sheriff, including Section 4-41 NMSA 1978
- Court orders and legal directives, including writs of mandamus and related judicial actions
- Applicable employment laws and administrative requirements related to personnel actions
- Inspection of Public Records Act (IPRA) requirements for handling public records requests
- Certain County policies and procedures governing coordination with HR, Legal/Risk, and County Administration

The following sections from the New Mexico EDGE Sheriff Handbook (November 2022 Edition) serve as the primary framework for evaluating the Sheriff's actions and for assessing factors that may have contributed to strained communication between DASO and other County departments. Additionally,

²⁶ THE NEW MEXICO COUNTY SHERIFF, A Reference Handbook and Practical Guide, November 2022, 10th Revised Edition.

the following New Mexico statutes and regulations were utilized: Article 7, Law Enforcement Training Act²⁷; Article 14, Peace Officer's Employer-Employee Relations Act²⁸; New Mexico Law Enforcement Academy Standards²⁹; applicable County ordinances, resolutions, administrative policies, and DASO policies and procedures. Observations focus on the defined scope Period of this special audit (July 1, 2021 through April 15, 2025). Limited exceptions were made when earlier or later information was necessary to establish context, identify patterns, or explain the origin of issues.

Over the course of this audit, interviews of over 100 County employees were conducted. These interviews, along with email documentation, memoranda, review of EEO complaints, grievances, and applicable policies, were used to inform the observations and conclusions. The scope includes assessment of adherence to:

- DASO compliance with statutory requirements, policies, procedures, and professional standards
- Actions, decisions, and communication practices that may have influenced or strained relationships between the Sheriff and other departments
- Matters directly related to communication failures or interdepartmental impacts
- Interactions between DASO and Human Resources, Legal, and County Management

Background

Overall, DASO appears to operate effectively in several areas, including improvements in morale, acquisition of equipment such as vehicles and weapons, and implementation of a wellness program for sworn and civilian staff. However, how the Sheriff at times relates to subordinates and County government officials (and vice versa) may fall under the premise of ethics and professionalism.

Upon arrival and throughout the course of this engagement, DASO personnel, including the Sheriff and Undersheriff, were consistently respectful, cooperative, and promptly responsive to all requests. Employees provided access to requested information and participated openly in the audit process. In general, a distinct difference in engagement was observed between DASO and certain other departments and offices within the County. DASO personnel were consistently transparent, friendly,

²⁷ Section 29-7-1 NMSA 1978.

²⁸ Section 29-14-1 NMSA 1978.

²⁹ 10.29.9 NMAC.

and readily available throughout the engagement. While the designated special audit liaisons were also friendly, cooperative, and responsive, interactions with others were less responsive and less accessible, such as the County Manager, Commissioners, and Assessor. This is not to say these individuals were not friendly or professional, just that they were altogether non-responsive or their responses were delayed.

Through reviewing documentation, including email correspondence, we noted certain conditions contributing to strained communication originating from events *preceding the audit period*. Specifically, in 2016, the Sheriff, in her former position as an employee, prevailed in litigation involving Doña Ana County Administration, including Human Resources and Legal. As part of the settlement agreement, it was established that the Sheriff could not be considered an employee of Doña Ana County in the future. While this distinction applies to employment status, the Sheriff, as an elected official, derives authority from the electorate and does not serve in a traditional employee-employer relationship with the County. This distinction appears to have contributed to differing interpretations regarding authority, oversight, and administrative processes.

As Sheriff-elect, documentation reviewed indicates that County leadership, including the then County Manager and Human Resources Director, informed and/or threatened the Sheriff that efforts would continue until she was removed from office. At the same time, documentation reflects that the Sheriff in return informed and/or threatened that she would seek removal of those individuals from their positions. Allegedly, the County Manager tried to interfere with her choice of judge to swear her into office. While the full communication cannot be definitively established, this documentation supports that these interactions occurred and contributed to an early breakdown in the working relationship.

As a result, it was reported that a defensive posture developed, and communication between DASO and the then County Manager, HR Director, and Legal became strained. These conditions may have contributed to operational bottlenecks and placed County employees assigned to these functions in a position of attempting to perform their duties while navigating conflicting expectations and direction from leadership.

Delays in processing personnel and administrative matters were attributed to multiple factors. In addition to the conditions described above, it was reported and we observed that Human Resources processes seemed *excessively controlled* and often required routing through supervisory channels

Employee Survey Quotes (edited)

"Actions from HR and CMO feel targeted towards employees. If you are not on the good list tasks drag, receive no support, and hit roadblocks."

"HR and County Management are not fair when it comes to EEO complaints and they get brushed off."

"What happened to the Compliance Office? It just loudly and suddenly disappeared. Next thing we know the single person to run this key, hard-fought-for Office is in a completely different job and nothing more was ever communicated about it."

"The County HR department is the ONLY department allowed to miss deadlines or targets."

"Just look at everyone that has received a promotion, reclassification, a higher position or more pay, within the last 2 years without having to compete for it."

"Issues pertaining to the promotion of employees without postings and elevating employees to positions of responsibility that are not qualified to be in that role."

"Things get held up in HR and or Legal."

prior to further review by the Assistant HR Director and subsequently the HR Director. Responses were then provided following review and direction and were more directive than supportive. Depending on workload and availability, this process could take several days to several weeks or longer. Based on our review, this process was not consistently efficient and existed through turnover in HR, indicating a systemic problem not a problem with any one person.

It was further reported that requests involving senior leadership, such as the Assistant County Manager or County Manager, were at times expedited and completed within a shorter timeframe. This included promoting employees who did not have the prerequisite requirements to fulfill the roles, leaving others who were qualified out of the process. While prioritization may be appropriate in certain circumstances, the variation in processing times contributed to perceptions of inconsistency. It is unclear whether expedited handling in these instances was due to operational necessity or other factors such as favoritism; however, consistent application of processes and policies would improve transparency, efficiency, and morale.

Professional Conduct

Based on interviews, documentation, and direct review in one instance, concerns were identified regarding professional conduct and communication practices within DASO. It is important to note that many interviews indicated that employees reported positive working relationships with the Sheriff and did not identify issues related to disrespect or unprofessional conduct.

It was reported to us and we observed that the Sheriff, at times, communicated with employees and/or CMO personnel in a manner perceived as unprofessional, including the use of dismissive or demeaning language, sarcasm, and confrontational interactions. In one instance reviewed directly through an audio recording, the Sheriff spoke to a subordinate in an elevated tone that was perceived as intimidating. Additional communications indicated that the Sheriff at times exhibited knee-jerk reactions, responding in an unprofessional manner either verbally or through written communication.

There are formal allegations against DASO and CMO, as some employees felt targeted or subject to increased scrutiny for minor infractions or unfair treatment, especially in relation to promotions or disciplinary actions. Some employees reported feeling discouraged from returning to certain work locations or engaging in communication due to concerns about potential disciplinary action, retaliation, or being targeted. In some instances, employees indicated that questioning direction or raising concerns resulted in adverse treatment. These conditions have led to the filing of complaints and litigation.

The DASO work environment was also reported to include the use of profanity. While such language may be more common within certain law enforcement settings, its use is not necessary and may contribute to an unprofessional work environment if not appropriately managed.

We noted that, on certain occasions, the Sheriff declined to engage with County Administration, Human Resources, or Legal depending on the circumstances. In some instances, this manifested as the Sheriff withdrawing from communication or decision-making processes such as meetings. The Sheriff also reported becoming frustrated with ongoing pushbacks, lack of support, and delays from the County Manager's Office and, at times, disengaging from participation due to that frustration and exhaustion. Similarly, it was observed that other departments at times responded in a comparable unprofessional manner,

Employee Survey Quotes (edited)

"Everyone disagrees with everyone. Sheriff does everything to make things hard for the County Administration and vice versa. The employees are caught in the crossfire."

"Cooperation between departments does not work effectively due to poor communication, lack of follow through, personality conflicts."

"The County hates the Sheriff's Office and the Sheriff."

"Elected officials don't want to follow County policies."

"Bad working relationship between the County and Sheriff's Office."

although more passive aggressive than aggressive, contributing to mutual breakdowns in communication and coordination. We noted in email communications that there were basic operational things withheld from the Sheriff by CMO, such as an investigation assignment to a Detective in her own Office and timely status updates/requests of Legal or HR matters.

These observations are evaluated in the context of the New Mexico EDGE Sheriff Handbook, Chapter 3 (Ethics and Professionalism in the Public Sector). The conduct described above reflects concerns related to professionalism, workplace environment, and adherence to expected standards of conduct for public officials and employees. At the same time, it is important to note that many employees interviewed did not report negative experiences and indicated that they were able to work effectively with the Sheriff, reflecting that these concerns were not uniformly experienced across DASO or CMO.

Litigation Matters and Related Observations

Based on information obtained through court records and documentation provided, multiple civil matters were identified involving the Sheriff, Doña Ana County, and/or DASO. The listing below reflects matters identified during the course of this engagement.

- **Prior Civil Matter (2011, 1 case)** – Pre-dating the current audit period and related to prior litigation involving the Sheriff.³⁰
- **Civil Complaints (2022, 2 cases)** – Filed during the audit period involving DASO/County operations and similar allegations.³¹
- **Writs of Mandamus (3 cases)** – Filed during the audit period involving disputes between County Administration, the District Attorney's Office, and DASO regarding authority, records, and performance of duties. These include matters related to the production of records associated with a death investigation, the commissioning of law enforcement cadets, and the Sheriff's cooperation with the District Attorney in the prosecution of criminal cases.³²
- **Civil Complaints (2024, 4 cases)** – Filed during the audit period involving DASO/County operations and similar allegations.³³
- **Civil Complaints (2025, 2 cases)** – Filed during the audit period involving DASO/County

³⁰ D-307-CV-2011-02101.

³¹ D-307-CV-2022-00894; D-307-CV-2022-02442.

³² D-101-CV-2022-01695; D-307-CV-2022-00894; D-307-CV-2025-00411.

³³ D-307-CV-2024-00043; D-307-CV-2024-00054; D-307-CV-2024-00524; D-307-CV-2024-01023.

operations and similar allegations.³⁴

Additional matters were identified based on information provided by the Sheriff, including:

- **Civil Matters (2 cases)** – Reported as filed against the Sheriff individually.
- **Tort Claim Notices (3 matters, 2026)** – Reported as recently filed involving current DASO employees and described as substantially similar in nature to prior complaints. These matters fall outside the scope period of this special audit but are noted for awareness.

In accordance with the scope of work, we requested documentation of any complaints or legal actions against the Sheriff related to compliance with the Inspection of Public Records Act (IPRA). Based on information provided, one matter was identified, *which is included in the list above*:

- **IPRA-Related Civil Matter (2022, 1 case)** – According to Legal, this matter was dismissed for lack of prosecution in mid-2025 and subsequently re-opened in October 2025.³⁵

The Sheriff reported having no knowledge of this matter and indicated that IPRA requests of this nature are typically handled administratively within DASO and routed through County systems, including Legal, without direct involvement. The Sheriff stated she is not routinely advised of lawsuits, tort claims, or related legal activity and expressed that she believes she should be routinely informed by Human Resources and Legal of such matters. Certain matters may be subject to amendment or removal to federal court for civil rights claims. Certain matters may be in the process of dismissal based on information obtained during depositions. One matter involved a prior use-of-force incident resulting in the death of an individual following an attempt on the Sheriff's life which was appealed; lower Court decisions in the County's favor were upheld on appeal in 2025.

Based on procedures performed, we noted that the Sheriff is not consistently kept informed of complaints, tort claim notices, or lawsuits involving herself or DASO personnel. This lack of consistent communication may impact awareness, coordination, and the ability to respond to legal matters in a timely and informed manner. This also impacts her ability to operate DASO in an effective and safe manner, as elements may impact deployment, tasks, and compliance with laws, regulations, and policies.

³⁴ D-307-CV-2025-00188; D-307-CV-2025-00529.

³⁵ D-307-CV-2022-02442.

Based on procedures performed, we identified instances where DASO's execution of legal duties and operational responsibilities was affected by inconsistencies in process, coordination, and interpretation of authority. These conditions were most evident in areas involving legal proceedings, personnel actions, and interactions with CMO. The most significant issues observed include:

- challenges in coordinating legal actions and responses involving DASO and CMO
- inconsistencies in processes related to employment actions and associated legal considerations
- variability in the handling of public records requests and compliance-related matters
- instances where legal or operational decisions were influenced by differing interpretations of authority between DASO and CMO
- lack of clearly defined procedures governing how DASO should execute certain legal responsibilities within the County framework while protecting Elected Official powers

The conditions we noted create risk that DASO and CMO may not consistently fulfill its legal and operational responsibilities in a manner that is coordinated, timely, or fully aligned with County and statutory requirements. Inconsistent processes and unclear authority may increase the likelihood of errors, delays, or disputes in legal and administrative matters.

We also noted that communication challenges in coordinating legal actions between DASO and CMO may contribute to increased legal exposure, including litigation risk and potential challenges in defending County actions. Differences in interpretation of authority, old grudges, and passive and aggressive communications may further complicate decision-making and increase the potential for conflict. Where processes are not clearly defined or consistently followed, accountability may be reduced and the effectiveness of internal controls over legal and administrative functions may be diminished.

Example findings address the need for clearly defined procedures governing litigation and the use of conflict counsel (**Finding 2026-036S**), as well as findings related to the lack of formalized guidance defining the relationship between County personnel processes and the Sheriff's authority (**Finding 2026-038S**). We also noted findings related to compliance with reporting requirements and legal obligations associated with DASO operations, including the failure to submit required statutory reports (**Finding 2026-008S**).

G. HUMAN RESOURCES AND PERSONNEL ADMINISTRATION

Scope steps in this area were designed to evaluate County Administration's compliance and adherence to written policies, procedures, ordinances, and relevant statutes for employment of staff, managing personnel records, including medical and psychological evaluations pertaining to DASO employees. This assessment included the Office of the County Manager and Assistant County Managers (CMO), Human Resources (HR), Legal/Risk Department (LRD), and DASO.

In performing this work, we reviewed personnel files, documentation related to hiring and separation processes, and records containing sensitive information, including medical and psychological evaluations. We also evaluated processes for storing, accessing, and transmitting sensitive employee data. Personnel records and sensitive information were evaluated against:

- Certain County policies governing personnel records, confidentiality, and employee privacy
- Applicable policies related to personnel records and background screening
- Requirements for evaluating medical and psychological information
- Internal control principles related to data security, access controls, and confidentiality
- Standards for documentation, retention, and proper handling of sensitive information

Based on procedures performed, we identified weaknesses in the management, documentation, and protection of personnel records and sensitive employee information. These issues were observed across departments responsible for maintaining and accessing employee records. The most significant issues observed include:

- inconsistencies in the completeness and organization of personnel files
- variability in documentation, processes, and authority in supporting hiring, screening, and separation decisions
- lack of standardized processes for managing and evaluating sensitive records, including medical and psychological information
- weaknesses in controls governing access to and transmission of sensitive employee data

- reliance on manual processes and multiple systems for maintaining personnel records

In addition, we observed that sensitive information, including personally identifiable information, was not always handled in a manner consistent with established data protection practices. Risk exists that sensitive employee information may be improperly accessed, disclosed, or mishandled. Weaknesses in documentation, tracking systems, and recordkeeping also increase the likelihood of incomplete or unsupported personnel decisions, which may result in disputes, grievances, or legal challenges.

As mentioned, the catalyst for the special audit was conflict between DASO, HR, and Legal over Commissioning of law enforcement Cadets in the law enforcement academy. We reviewed all documentation provided as well as statutes, Doña Ana Codes, Doña Ana HR policies, CALEA policy and Resolutions (2024-82, June 2024), and NMSA 10.29.1.10. We understand the overarching goal for DASO and the County is to ensure the highest caliber candidates are considered.

Human Resources has a legitimate role in mitigating County risk through its involvement in hires, demotions, and terminations under the merit-based system. However, in the matters reviewed here, HR's suggestions appear to have evolved into directives, which has the practical effect of prohibiting the Sheriff from properly conducting operations and exercising statutory authority. The issue is not whether HR can participate in employment processes; it is whether that participation has expanded beyond administrative and merit-based functions into operational authority reserved to the Sheriff. This analysis concerns 8 Cadets whom HR was not "allowing" to be hired, even though those Cadets were already in the law enforcement academy and were only a few weeks away from graduation. The timing of HR's position is significant because these were not outside applicants in an early screening phase; they were academy participants nearing completion of required training.

Legal, with permission from the County Manager but not the BOCC, then went to Court to compel the Sheriff to commission Cadets, including some Cadets HR had stated the Sheriff could not hire, at graduation itself. This created a direct operational and governance conflict. There is no specific day or time at which the Sheriff must commission Cadets. The Sheriff had legitimate concerns about commissioning half of the class in front of families and attendees, while not commissioning the other half who were being denied by HR and whose appeal processes were still ongoing. That concern implicated fairness, morale, operational judgment, and public perception.

It is at the Sheriff's discretion whether she commissions or decommissions a deputy. It is also at the Sheriff's discretion at what time/day they desire to commission a Cadet. This allows a Sheriff to have full ability to conduct business as needed and best deploy the deputies and/or Cadets (for Field Training) under the FTO program.

Pursuant to Section 4-41-5 NMSA 1978, the Sheriff has the authority to appoint deputies who exercise the powers of the Sheriff. However, commissioning is a separate power and act from hiring a County employee. The Sheriff's operational decisions for public safety must include removing her powers to act on her behalf using her judgment. In this instance, the deputy would remain a County employee until such time other actions such as investigation, reassignment, or termination through progressive discipline occurred. This authority is distinct from law enforcement certification requirements under Section 29-7-6 NMSA 1978 and from administrative HR processes managed through County policies under a merit system to demote and discharge employees.

After reviewing Doña Ana County Resolution 2024-82 as it pertains to deficiencies in psychological reports and/or background for cadets, the following concerns were noted.

Psychological Report

The Resolution does not define or state who determines a deficiency in the psychological report or what qualifies as a deficiency. This lack of definition is material because it creates room for non-clinical personnel to make what are effectively clinical determinations.

- The resolution does not define/state who defines a deficiency in the psychological report or what qualifies as a deficiency.
 - If a trained psychologist considers all factors and determines that a cadet is qualified, then to have someone state otherwise it would take another qualified psychologist. Or at least an individual with similar qualifications. To do so would open DAC to a potential tort.
 - This also begs the question of whether HR has the right to override a psychologist when they recommend a candidate, then it gives to reason HR can then do the exact opposite is also true, HR can approve a candidate that the psychologist does not recommend.

Physical Fitness / Agility Test

The Resolution also fails to define when or at what time the physical fitness/agility test is to be performed. This omission is significant because overregulation in this area can become micromanagement of department operations.

- The resolution does not clearly define when or at what time the physical fitness/agility test is to be performed. At times too much oversight is micromanagement. The Sheriff, Fire Chief or Detention Director should have an opportunity to determine when, where and how this test is administered. Each in accordance with their respective statutes and policies/procedures.

Deficiency Does Not Mean Unacceptable

The review also identified a significant concern with how psychological “deficiencies” are being interpreted. Based on consultation with certified psychologists, a deficiency does not necessarily mean a candidate is unacceptable.

- A noted deficiency in the psychologist report should not be considered a deficiency for the purpose of Resolution 2024-82. After speaking with 2 of 3 Psychologists certified to conduct both pre-hire and fit for duty psychology examinations in New Mexico, both agreed that a deficiency does not mean unacceptable. Thus, Human Resources is misreading the psychological reports. Both experts agree that the reports should be read as a whole and not be pieced out.

See **EXHIBIT 6** for our detailed testing analysis of selected examples.

Across all candidates, HR repeatedly overrides the licensed psychologist’s statutory authority by treating isolated MMPI 3 sub scores as disqualifying, ignoring 16PF (Protective Service Reports, PSR) even when the psychologist recommends each applicant without reservation. HR consistently interprets *predictive* psychological tendencies as if they were documented behaviors, despite background investigations showing honesty, reliability, and no disqualifying conduct. HR also selectively highlights negative information while omitting strong references, clean criminal histories, and full disclosure documented in both the background and psychological interviews. A positive outcome is fully supportable: the totality of evidence across all cases, psychological

recommendations, clean backgrounds, and consistent reference support, seem to demonstrate that these candidates met suitability standards and should not have been referred, requiring the appeal process.

Risk Assessment

The repeated overriding of the licensed psychologist's statutory authority under NMAC 10.29.9.12, which explicitly assigns psychological suitability determinations to the evaluating psychologist, not HR, creates material legal and operational risk. HR directly goes against the NMAC, which has the potential to create due-process or discrimination concerns, or at the very least creates an environment with poor hiring and retention practices.

The practices observed include:

- Selective use of negative information
- Ignoring mitigating evidence
- Treating predictive MMPI 3 statements as factual behavior
- Creating circular reasoning ("defensiveness")
- Applying inconsistent standards

The above noted practices could create a strong basis for potential tort claims, for example:

- disparate treatment,
- negligence in the hiring evaluation process, and
- improper reliance on non-validated interpretation of psychological testing/reports.

This could affect several operational areas such as vacancy rates, mandatory overtime, burnout among existing staff, reduced operational readiness, and morale. The Sheriff's Office has qualified recruiters and the best knowledge of who will hopefully make a great deputy for the County. Overriding the judgment of the Sheriff and psychologists is risky and appears to overstep authority.

Recommendations

The review supports the following recommendations:

- Provide HR staff and leadership with proper instruction on how to read/understand psychological reports. They are to be read as a whole, not singled out.

- If any questions exist, provide HR staff with the tools needed to reach out to licensed psychologists (the experts in the field) in order to clarify any misconceptions in reports.
- Implements a neutral totality of the circumstances review.
- Clarify/define deficiency in Resolution #2024-82, keeping in mind that a deficiency is not necessarily unacceptable for the purpose of psychological reports.
- Maintain open communication with all DAC department heads and elected officials keeping in mind all are working toward the same goal.

The Sheriff should be afforded to use his or her judgment and authority to bestow or remove their powers from deputies. Trust is critical with the constitutional powers provided and must be used judiciously. If there is a reason to mistrust someone, for example, decommissioning is not something that should be restricted. The County Manager would still hold the trump card on demotions, due process, and discharging employees under a merit system.

In discussions with the Association and other counties, we noted that HR is normally in a supportive role. Risks should be pointed out and minimized, but normally deference is given to the Sheriff and overriding operational decisions such as this should be rare.

During our procedures, we also noted that inadequate controls over sensitive information may expose the County to data privacy risks, including unauthorized disclosure of personally identifiable information. These risks may result in legal liability, reputational harm, and potential noncompliance with applicable privacy and employment laws. Additionally, inconsistent recordkeeping and lack of standardized processes may reduce the County's ability to effectively monitor personnel actions and ensure timely compliance with internal policies and legal requirements.

These include findings addressing weaknesses in hiring and background screening processes, including compliance with applicable requirements (**Finding 2026-009S**), as well as findings related to deficiencies in documentation and monitoring of personnel actions and complaints (**Findings 2026-017S and 2026-018S**). We also identified significant control weaknesses related to the transmission of sensitive information, including the presence of Social Security numbers and other protected data in email communications without adequate safeguards (**Finding 2026-034S**).

H. COMPLAINTS, LAWSUITS, AND CULTURE OF RESPECT/FAIRNESS

Procedures performed in this area were designed to evaluate the underlying causes of complaints, grievances, and legal actions involving Doña Ana County, including those related to the Doña Ana County Sheriff's Office (DASO) and County Administration. This assessment focused on identifying patterns and contributing factors affecting workplace culture, fairness, and respect.

In performing this work, we reviewed complaint records, grievance documentation, investigative files, and legal matters, including lawsuits and administrative complaints. We also analyzed how complaints were received, documented, investigated, and resolved, and evaluated whether processes were applied consistently across departments.

The handling of complaints and the promotion of a culture of fairness and respect were evaluated against:

- County policies governing employee conduct, workplace behavior, and disciplinary procedures
- Procedures for receiving, documenting, investigating, and resolving complaints and grievances
- Expectations for fairness, consistency, and impartiality in personnel-related decisions
- Standards for maintaining a respectful and professional work environment
- Internal control principles related to oversight, accountability, and monitoring of complaints

Employee concerns should be addressed in a timely, consistent, and well-documented manner, and that workplace conduct should reflect professionalism and respect. Based on procedures performed, we identified patterns indicating that complaints, grievances, and workplace concerns are not consistently handled in a timely, documented, or uniform manner across the County. These conditions contribute to variability in how employee concerns are addressed and resolved. The most significant issues observed include:

- delays in initiating and completing investigations of complaints and allegations

- inconsistencies in how complaints are documented, tracked, and monitored
- lack of centralized systems or standardized processes for managing complaints across departments
- variability in the application of disciplinary actions and resolution of employee concerns
- instances where complaints escalated due to lack of timely response or clear communication
- Lack of respect or professionalism as discussed in other sections of the report

In addition, we observed that differing interpretations of policies, roles, and authority contributed to inconsistent handling of complaints, particularly in matters involving DASO and County Administration. The processes for managing complaints are not consistently structured or enforced. The conditions identified above create risk that employee concerns may not be addressed in a fair, timely, or consistent manner.

Delays and inconsistencies in handling complaints increase the likelihood of escalation, including formal grievances, administrative complaints, and litigation. We also noted that weaknesses in complaint handling processes may contribute to perceptions of unfairness or lack of transparency, which may affect employee morale and trust in leadership. Inconsistent documentation and tracking further limit the County's ability to monitor trends, identify systemic issues, and take corrective action.

Where complaints are not effectively managed, the County may be exposed to increased legal risk, including claims related to employment practices, workplace conduct, and administrative decision-making. The conditions identified in this section are supported by findings related to the handling, documentation, and investigation of complaints and workplace concerns. These include findings addressing delays in the investigation of complaints and allegations (**Finding 2026-017S**), as well as deficiencies in systems used to document, track, and monitor workplace misconduct and related issues (**Finding 2026-018S**). We also noted findings related to inconsistencies in the application and implementation of HR policies and procedures (**Finding 2026-037S**), which contribute to variability in how complaints and personnel actions are managed and findings related to communication and coordination challenges between departments, as well as governance and authority considerations, which contribute to the escalation and complexity of complaints (**Finding 2026-038S**).

I. EMPLOYMENT PRACTICES, EEO, INVESTIGATIONS, AND DISCIPLINE

Procedures performed in this area were designed to evaluate Doña Ana County's employment practices and compliance with applicable equal employment opportunity (EEO) requirements. This assessment included hiring, screening, disciplinary actions, investigations, and other personnel-related processes across County departments, including the Doña Ana County Sheriff's Office (DASO). In performing this work, we reviewed personnel files, hiring documentation, background screening processes, disciplinary records, and investigative files. We also evaluated the consistency and documentation of employment decisions and the extent to which County policies and applicable requirements were followed.

Employment practices were evaluated against:

- County policies and procedures governing hiring, discipline, and personnel actions
- Applicable federal and state employment laws, including equal employment opportunity requirements
- Requirements for background checks and screening processes
- Standards for documentation and consistency in employment-related decisions
- Internal control principles related to oversight, fairness, and accountability in personnel actions

These criteria establish expectations that employment decisions should be fair, consistent, properly documented, and compliant with applicable laws and County policies. Based on procedures performed, we identified inconsistencies in the application and documentation of employment practices across departments. These conditions indicate that employment-related processes are not consistently applied or supported by complete and standardized documentation.

The most significant issues observed include:

- variability in hiring processes, including timeliness and documentation of employment decisions
- inconsistencies in background screening procedures and compliance with applicable

requirements

- lack of standardized documentation supporting disciplinary actions and investigative outcomes
- differences in how employment-related policies are interpreted and applied across departments
- reliance on manual or decentralized processes for managing personnel actions

Employment practices are not consistently structured or implemented across the County, which may affect the transparency and defensibility of personnel decisions. The risk is that employment decisions may not be consistently applied or adequately supported by documentation. Inconsistent hiring, screening, and disciplinary processes increase the likelihood of disputes, grievances, and potential legal challenges.

We also noted that weaknesses in documentation and process consistency may limit the County's ability to demonstrate compliance with EEO requirements and defend employment-related decisions. These risks may result in increased legal exposure, including claims related to hiring practices, disciplinary actions, or workplace treatment. Additionally, inconsistent application of employment policies may contribute to perceptions of unfairness and undermine confidence in personnel processes and organizational leadership.

The conditions identified in this section are supported by findings related to employment practices, hiring processes, and compliance with screening and documentation requirements. These include findings addressing timeliness and consistency in hiring and employment decisions (**Finding 2026-002S**), as well as compliance with background screening requirements, including adherence to applicable federal requirements (**Finding 2026-009S**). We also noted findings related to deficiencies in documentation and monitoring of complaints and investigations, which affect the consistency and supportability of employment-related decisions (**Findings 2026-017S and 2026-018S**). In addition, findings related to the need for updates and consistent implementation of Human Resources policies and procedures contribute to the conditions described in this section (**Finding 2026-037S**).

J. JOINT POWERS AGREEMENTS, BOCC DIRECTIVES, AND REGULATIONS

Procedures performed in this area were designed to evaluate the Doña Ana County Sheriff's Office (DASO) compliance with Joint Powers Agreements (JPAs), Board of County Commissioners (BOCC) resolutions, and the extent of County oversight and support provided to DASO. This assessment also considered the alignment between DASO operations and County governance expectations.

In performing this work, we reviewed selected Joint Powers Agreements and BOCC resolutions applicable to DASO operations from what was provided or found in public records. We also evaluated coordination between DASO and County Administration, including the Office of the County Manager (CMO), Financial Services Department (FSD), Human Resources (HR), and Legal/Risk Department (LRD), to determine whether oversight and support functions were clearly defined and effectively implemented.

We were not provided documentation identifying formal BOCC directives or JPAs applicable to DASO operations during the audit period; therefore, our evaluation of County direction in this area is based on resolutions, agreements, and administrative practices reflected in the records made available.

- Joint Powers Agreements governing intergovernmental relationships and service delivery
- BOCC resolutions applicable to Finance operations
- County Manager administrative directives and oversight responsibilities
- County policies governing financial management, personnel administration, and operational support
- Requirements for coordination and accountability between County departments and elected offices

Based on procedures performed, we identified inconsistencies in the alignment between Finance operations, County governance expectations, and the oversight framework exercised by County Administration. These conditions reflect challenges in coordination, interpretation of authority, and implementation of agreements and policies. The most significant issues observed include:

- lack of clearly defined processes for implementing and monitoring compliance with Joint Powers Agreements
- inconsistencies in how BOCC resolutions and County policies are applied to Finance operations
- limited documentation demonstrating consistent oversight or monitoring of DASO compliance
- complaints outside the scope of work that DASO did not appropriately staff the Metro JPA
- variations in the level and consistency of administrative support provided to DASO
- differing interpretations of authority and responsibility affecting operational decision-making

There is risk that Finance operations may not be consistently aligned with County-approved agreements and governance expectations. Inconsistent implementation and oversight may result in gaps in accountability, inefficiencies in service delivery, and increased potential for disputes between parties and County Administration. Unclear or inconsistently applied governance structures may contribute to legal and operational risk, particularly where roles, responsibilities, and authority are not clearly defined. These conditions may increase the likelihood of conflict, delay decision-making, and affect the County's ability to effectively support and oversee CMO operations.

The conditions identified in this section are supported by findings related to governance, oversight, and the implementation of County agreements and policies. These include findings addressing noncompliance with Joint Powers Agreement disclosure and reporting requirements (**Finding 2026-027S**), as well as findings related to the need for clearly defined procedures governing County litigation and the use of conflict counsel (**Finding 2026-036S**). We also noted findings related to the lack of formalized guidance governing the relationship between County administrative processes and the Sheriff's authority (**Finding 2026-038S**), which directly affects oversight, coordination, and implementation of County policies.

K. MARCH 2025 CORRESPONDENCE TO THE OFFICE OF THE STATE AUDITOR

Procedures performed in this area were designed to evaluate matters identified in communications

submitted to the Office of the State Auditor (OSA) in March 2025 by both the Doña Ana County Sheriff's Office (DASO) and the Doña Ana County Manager (CMO). These communications outlined concerns related to governance, operational authority, employment practices, procurement, compliance with County policies, and adherence to applicable laws and regulations.

In performing this work, we reviewed the March 13, 2025 communication submitted by the Sheriff and the subsequent March 31, 2025 communication submitted by the County Manager, along with supporting documentation, policies, personnel records, and other relevant materials. We also considered actions taken by DASO and County Administration in response to the concerns raised. Our review was guided by:

- The concerns and representations outlined in the March 2025 communications submitted to the OSA
- County policies and procedures governing personnel actions, investigations, procurement, and administrative processes
- Applicable laws and regulations related to employment practices, public records, and governance
- Standards for documentation, consistency, and accountability in addressing concerns raised through formal communications

These criteria establish expectations that matters raised to the OSA should be supported by documentation and addressed through processes that are consistent, transparent, and aligned with applicable requirements. Based on procedures performed, the March 2025 communications reflect differing perspectives regarding governance, authority, and compliance between DASO and County Administration.

The March 13, 2025 communication submitted by the Sheriff to the OSA describes concerns related to County Administration's involvement in DASO operations. These concerns include perceived interference in personnel processes, delays in human resources and EEO-related activities, procurement and contract approval practices, access to financial resources, and the level of administrative and legal support provided to DASO. The communication also raises questions regarding the consistency and fairness of disciplinary actions and the impact of administrative processes on DASO operations.

The March 31, 2025 communication submitted by the County Manager outlines concerns regarding DASO's compliance with County policies, applicable laws, and administrative requirements. These concerns include adherence to personnel policies, procurement and financial practices, public records requirements, and other administrative processes. The communication also reflects the County's decision to pursue an independent review of DASO operations and compliance.

Review of supporting documentation indicates that the matters raised in these communications align with issues identified through other audit procedures, including governance considerations affecting coordination, inconsistencies in employment practices, communication gaps between departments, and variation in administrative processes. Documentation also reflects that actions were taken by both DASO and County Administration in response to the concerns raised. However, those actions were not always supported by clearly defined or consistently applied processes.

The matters identified in the March 2025 communications present risk that differences in interpretation of authority and application of policies may lead to continued operational and governance challenges. Where roles, responsibilities, and processes are not clearly defined, disputes and delays are more likely to occur. Concerns raised without a structured process for review and resolution may escalate into formal complaints, administrative actions, or legal proceedings. Inconsistent documentation and varying approaches to decision-making further increase this risk. These conditions may also affect coordination between DASO and County Administration and limit the County's ability to ensure consistent application of policies and compliance with applicable requirements.

We determined the following in our procedures:

- The letters from CMO and DASO wholly reflect the organizational culture of “who is right and who is wrong” unhealthy pattern and the long-standing grudges and feuds between the two offices.
- Our testing did identify IPRA irregularities, as reported in the findings, and one lawsuit filed against DASO and the County.
- DASO is not the only department with litigation and is not the department with the greatest number of complaints, which is the Detention Center.

- There are compliance violations in DASO, CMO, and other Offices and Departments.
- Interdepartmental communications and actions were not always timely.
- Best practices were not followed regarding medical and psychological evaluations and protection of personally identifiable information.
- The Assessor's Office is not in compliance with the requirement to reappraise properties and the County has used the 1% fund for operational expenditures without linking it to the reappraisal program. The DACAO funds will need to be budgeted and utilized properly.
- Employees and other audits report and procedures confirmed some HR interference and delays into operations while they try to mitigate risk and being blamed.
- Certain EEO investigations and complaints have not been completed timely in accordance with policies or fully tracked.
- Independent counsel was not always provided to the Sheriff when there were adverse interests.
- Certain letters written by HR had errors and certain medical reports provided to HR by DASO were compiled incorrectly.
- Access to Workday ERP system job descriptions and salaries were not provided to Office and Department heads.
- It was reported to us, but we were unable to independently confirm, that HR and Legal provided legal advice to employees to file actions against DASO and BOCC.
- Although not part of our testing, ARPA funds were reported to us to be used appropriately and there were no external audit findings relating to COVID funds.
- Procurement processes and cash disbursements were tested with findings reported.
- Anonymous feedback from employees, interviews, and procedures confirmed there are serious organizational culture problems which does not always foster a culture of respect, fairness, and accountability throughout the County. More comments related to CMO and HR than DASO.
- We identified and discussed in this report, during interviews and meetings, the systemic issues, leadership behaviors, and gaps in accountability that contribute to the concerns outlined in the objectives.

See **EXHIBIT 1** Findings. The matters described above correspond with findings presented in other sections of this report, particularly those addressing complaint handling, employment practices, and

governance. **Findings 2026-017S and 2026-018S** address delays and gaps in the investigation and documentation of complaints. **Findings 2026-002S and 2026-009S** relate to hiring practices and background screening requirements. **Finding 2026-038S** addresses the absence of clearly defined guidance regarding authority and coordination between DASO and County Administration. Additional findings related to procurement, financial controls, and administrative processes provide further context for the concerns raised in the communications.

L. ADDITIONAL MATTERS IDENTIFIED DURING THE AUDIT

The special audit scope allows modifications to address additional matters identified during the course of the special audit. In December 2025, the BOCC approved a scope expansion to address risk areas identified during our testing.

In performing this work, we considered information obtained through interviews, document review, and testing across all areas of the audit. As additional risks and concerns were identified, procedures were expanded to evaluate specific transactions, departments, and operational areas. Additional procedures were performed in accordance with:

- The New Mexico State Audit Rule (2.2.2 NMAC), including requirements related to identifying and reporting fraud, waste, and abuse
- The terms of the special audit contract and subsequent amendments
- Professional judgment in determining the nature, timing, and extent of additional procedures necessary to address identified risks

Amendment No. 1 expanded the scope of work to include additional testing focused on the Sheriff's Office, Finance, and Fire Departments, specifically in the areas of procurement, grants, budgeting, training, and inventory. Amendment No. 2 further extended the timeframe for completion of the audit in accordance with County Resolution 2026-41.

We addressed identified risks and performed additional procedures necessary to evaluate areas of concern. Based on procedures performed, additional matters were identified and evaluated beyond

the initial scope areas. These included risks and concerns identified during audit procedures across multiple departments. Expanded testing included review and analysis of:

- procurement and contracting practices across departments
- use of restricted and designated funds, including the Property Valuation Fund
- financial reporting and internal control processes
- operational practices within DASO, Finance, and Fire Departments
- inventory, training, and grant-related activities

These areas were incorporated into the audit through expanded procedures and are reflected in the findings presented throughout this report.

Where additional concerns were identified, those matters were evaluated and incorporated into the overall assessment of internal controls, compliance, and operational effectiveness. The results of expanded procedures are reflected in specific findings identified through additional testing in targeted operational areas. These include findings related to Fire Rescue operations, including equipment accountability and inventory management deficiencies (**Finding 2026-029S**), procurement compliance and contract oversight deficiencies in fire apparatus acquisitions (**Finding 2026-030S**), and weaknesses in pharmaceutical inventory controls and chain-of-custody processes (**Finding 2026-031S**).

Additional findings identified through expanded procedures include conflict-of-interest risk and authorization control weaknesses within the Emergency Rental Assistance Program (ERAP) (**Finding 2026-022S**), as well as procurement-related deficiencies involving documentation, approvals, and contract review controls (**Finding 2026-021S**).

In addition, during the course of our work, other matters came to our attention that were outside the defined scope of this engagement. These matters were not subject to detailed audit procedures and are not included as findings within this report. However, we will provide separate communication regarding these items to the County for consideration and appropriate follow-up by the relevant offices and departments.

The following sections of this special audit report present observations organized by County office and department to provide additional operational context and alignment with the scope areas described above. While the preceding sections address specific areas of risk and testing, these sections are intended to reflect how those issues manifested within individual departments and elected offices.

OFFICE AND DEPARTMENT-BASED OBSERVATIONS

M. BOARD OF COUNTY COMMISSIONERS (BOCC)

Governance and the Exercise of Authority Across Elected Offices

The Board of County Commissioners (BOCC) serves as the governing body of Doña Ana County and exercises the powers of the County as provided under New Mexico law. The BOCC establishes the legal and policy framework for County operations through ordinances and resolutions, approves budgets, and conducts official actions in accordance with the Open Meetings Act. Administrative responsibility for implementing these actions is carried out through the County Manager (Chief Administrative Officer) and County staff. The County Manager operates under the authority delegated by the BOCC and is responsible for implementing, but not redefining, policies, ordinances, resolutions, and directives established by the Board.

As reflected in NMSA 1978, § 4-38-1, “the powers of a county as a body politic and corporate shall be exercised by a board of county commissioners.” Counties are further authorized to adopt ordinances necessary to provide for the safety, health, prosperity, and general welfare of their inhabitants pursuant to NMSA 1978, § 4-37-1. The Board conducts its business in public sessions and may adopt rules for the transaction of its affairs in accordance with NMSA 1978, § 4-38-12. Additionally, pursuant to NMSA 1978, § 4-38-13, “the board of county commissioners shall have power to manage, control and supervise all county property and the interests of the county in such property,” and under NMSA 1978, § 4-38-18, the Board represents the County and manages its interests where no other provision of law applies. In legal proceedings, the County acts through the Board of County Commissioners, as provided in NMSA 1978, § 4-46-1. The Board may employ a County Manager to act as its administrative assistant pursuant to NMSA 1978, § 4-38-19(B), with responsibility for carrying out the directives of the BOCC and administering County operations in support of the Board’s authority.

Procedures performed during the special audit identified several areas in which the exercise of BOCC authority, the supporting governance oversight, and the policy framework established by the Board intersect with administrative execution, all while respectfully protecting the BOCC members' peers, the other Elected Officials throughout the County.

In matters involving the formal exercise of Board authority, audit procedures identified instances in which actions within the authority of the BOCC were not consistently carried out through formal, documented Board processes, including actions that were not clearly tied to formal Board authorization or documented delegation of authority. These included circumstances in which decisions or actions proceeded through administrative channels without prior formal Board consideration, as well as situations in which matters typically requiring deliberation in a public setting were addressed outside of a properly noticed meeting. These conditions affect the transparency and formality with which Board authority is exercised and also affect the public's ability to observe and understand how decisions are made, as contemplated under the Open Meetings Act.

The audit also identified areas in which governance structures associated with BOCC oversight could benefit from clarification or strengthening. The County has established an Internal Audit function and advisory committee; however, the respective roles of the BOCC, the advisory committee, and executive management in overseeing Internal Audit activities, approving audit plans, and monitoring results are not fully defined, including whether oversight functions are appropriately aligned with the BOCC as the governing body, in accordance with Institute of Internal Auditors (IIA) standards. In addition, processes for tracking and reporting the implementation of Internal Audit recommendations were not consistently centralized or documented, limiting visibility into the status of corrective actions.

The audit further identified that allegations of misconduct, retaliation, fraud, and other concerns are reported through multiple independent and uncoordinated channels across the County, including Human Resources, Internal Audit, Legal Department, supervisory structures, and other administrative functions. These processes operate without a centralized investigative authority responsible for coordinating, tracking, and ensuring consistency in the handling of complaints. As a result, investigative responsibility may vary depending on where a complaint is reported, and there is no single function with defined independence and authority to oversee such matters across the organization.

This structure reflects a reliance on administrative processes without a corresponding independent oversight mechanism. Establishing a centralized and independent investigative function, such as an Inspector General reporting to the BOCC, is a recognized best practice in public-sector governance and is critical to ensuring consistent, transparent, and independent handling of complaints. Comparable governmental entities, including the City of Las Cruces, have implemented such functions to provide independent oversight and strengthen accountability. Any such function should be established in alignment with the principles and standards of the Association of Inspectors General (AIG), including independence, objectivity, and clearly defined authority.

The establishment of an Inspector General function would introduce a clearly defined mechanism for coordinating investigations, monitoring outcomes, and ensuring that allegations of misconduct or retaliation are addressed consistently and with appropriate independence from administrative influence. While other models, such as external monitors, may be used in limited or temporary circumstances, those approaches do not provide the same level of continuous, independent governance oversight as a formally established Inspector General function. A permanent structure aligned with the BOCC is essential to maintaining effective checks and balances, enhancing public trust, and ensuring that governance oversight is not solely dependent on the same administrative processes subject to review.

The policy framework governing County operations was also identified as an area requiring continued development and clarification. Policies and procedures addressing hiring practices, merit system relationships, and documentation standards for candidate evaluation were noted as requiring updating or more consistent application. While these functions are administered through the County Manager and Human Resources, the structure and authority for these processes originate from BOCC-adopted ordinances and policies.

In addition, audit procedures identified a lack of clearly defined policy guidance governing the relationship between the County's merit system personnel authority and the Sheriff's statutory authority to appoint, commission, de-commission, deploy, and manage deputies. This includes the Sheriff's authority over hiring, assignment, discipline, demotion, and removal of personnel necessary to carry out law enforcement operations. The absence of clear distinction between administrative personnel processes and the operational authority of the Sheriff resulted in differing interpretations among County administration, Human Resources, and the Sheriff's Office regarding how and when administrative hiring determinations apply to commissioned positions.

During this process, conflicting positions developed between administrative personnel processes and the Sheriff's exercise of authority. Human Resources had issued recommendations that certain candidates do not proceed in the hiring process, while County Administration sought action related to those same individuals. Actions taken in response to this disagreement proceeded through administrative channels without prior formal consideration by the BOCC, resulting in the matter being brought before the court. The court dismissed the immediate issue presented which had been resolved, but did not rule on the broader governance question regarding the respective roles and authority of the merit system, County administration, and the Sheriff's Office.

Discussions conducted during the audit with representatives of the New Mexico Sheriffs' Association and other County officials indicated that, as a general practice, personnel decisions within elected offices are typically left to the discretion of the elected official, with human resources and administrative review functions serving in a supporting role rather than acting as a constraint on the official's ability to operate their office. Intervention by centralized administrative functions is generally limited to specific rare circumstances requiring compliance or risk mitigation and should not create bottlenecks. This understanding is consistent with New Mexico legal authority, including case law, recognizing that Elected Officials retain authority over the management and operation of their offices and that administrative personnel systems should not be applied in a manner that materially interfere with that authority.

Audit procedures also identified matters related to the Assessor's statutory responsibility to maintain current and accurate property valuations through a structured valuation program. The Assessor is required to present a property valuation maintenance plan for consideration by the BOCC and has. The effectiveness of that program is dependent on BOCC appropriate funding and alignment between the plan and approved expenditures. The audit identified that the 1% fund revenues intended to support property valuation activities have, in practice, been used primarily for ongoing operational expenditures, which has been limiting the County's ability to support comprehensive reappraisal and valuation initiatives.

As the governing body responsible for approving both the valuation program and associated funding, the BOCC plays a critical role in ensuring that budgetary decisions align with statutory requirements and enable Elected Officials to carry out their duties. Clear alignment between approved plans, funding allocations, and operational execution is necessary to support the Assessor's ability to maintain accurate and current property values. According to one case reviewed, the Assessor has full statutory authority to hire a contractor to assist with accomplishing the goal of current property

values. These matters collectively reflect the importance of clearly defining the relationship between BOCC-adopted policy, administrative processes, and the statutory authority of Elected Officials.

Additional matters identified during the audit relate to administrative processes that support transparency and accountability. These include completeness of official records associated with Board actions and the absence of a formal records retention policy. Responsibility for these processes, after BOCC creation and setting of policy, resides within the administrative structure; they directly affect the ability to document, support, and provide transparency into actions taken under BOCC authority.

Taken together, the results of audit procedures indicate that the BOCC has established governance through formal policy and legislative action, and that administrative responsibility for execution is clearly delegated. However, in practice, the connection between Board authority, policy direction, and administrative implementation was not consistently supported by formalized procedures, clearly defined governance roles, or documentation practices that ensure actions are traceable to Board approval, adopted policy, or clearly defined delegated authority. Variability in how these processes are applied across departments further limits consistency in governance execution.

This does not reflect an absence of governance, but rather highlights the importance of clearly defined local laws and policies that ensure:

- actions within the authority of the BOCC are carried out through formal Board action in open meetings;
- governance oversight functions (such as independent Internal Audit and Inspector General authority directly aligned with the BOCC) are structured with clearly defined roles, reporting relationships, transparency, and accountability; and
- policies adopted by the BOCC provide sufficient clarity and direction to guide administrative implementation while preserving the powers and duties of Elected Officials and maintaining accountability to the public, particularly in areas involving overlapping authority between Elected Officials and delegated administrative functions.

We have observed the Commission Members in their oversight function properly questioning and challenging management, and we recognize the former Chair and Commission for requesting the special audit. Implementing stronger safeguards to allow Elected Officials to perform their duties as they represent The People who elected them should help reduce power struggles and operational

bottlenecks over time. Clearly defining and reinforcing the boundaries between BOCC authority, administrative execution, and the independent authority of Elected Officials is necessary to ensure that decisions are made through proper governing processes and supported by formal Board action and clear, enforceable policy.

N. COUNTY ADMINISTRATIVE OFFICE (CMO)

Administrative Role and Organizational Structure

Procedures performed in this area were designed to evaluate County Administration's compliance with applicable state laws, County ordinances, policies, administrative directives, and contractual obligations, as well as the effectiveness of administrative processes supporting personnel, financial, and operational functions.

The County Manager serves as the administrative head of Doña Ana County and operates under the authority delegated by the Board of County Commissioners (BOCC). Pursuant to Section 4-38-19(B), NMSA 1978, the County Manager functions as the administrative assistant to the Board and is responsible for carrying out the directives of the BOCC and overseeing the day-to-day operations of County government. The County Manager's Office is responsible for executing, but not establishing, policy.

The County Manager oversees a broad range of administrative and operational functions through a centralized structure. Directly under the County Manager are Emergency Management, the Detention Center, Finance, Legal and Risk Management, Community and Constituent Services, and Internal Audit.

Administrative functions are further coordinated through the Assistant County Manager for Administration, including Human Resources, Public Information, Health and Human Services, Information Technology, and Animal Control. Operational functions are managed through the Assistant County Manager for Operations, including Engineering and Roads, Utilities, Fleet, Facilities and Parks, Fire and Rescue Services, Community Development, and the County's Jetport.

This structure places a wide range of County administrative and operational functions under centralized administrative direction. The County Manager's Office serves as the primary

coordinating point for those departments and functions that report through the County's administrative structure but does not govern the independent elected offices.

Administrative Oversight and Execution of County Functions

The County Manager's Office provides administrative oversight and coordination for key County functions, including Internal Audit, Human Resources, Legal and Risk Management, Financial Services, and Information Technology, as well as operational departments such as Fire and Rescue Services, the Detention Center, and Community Development. This oversight applies to departments and functions within the County's administrative structure and does not extend to the independent elected offices, except where interaction is required through County-wide policies, legal obligations, budget processes, or other formally established points of coordination.

As these functions operate under centralized administrative direction within the County's administrative structure, the effectiveness of County operations depends on how consistently policies, procedures, and compliance activities are implemented and monitored.

Audit procedures identified that administrative processes are centralized but lack clearly defined procedures, controls, and oversight mechanisms in several key areas. These include compliance with the Inspection of Public Records Act (IPRA), Sections 14-2-1 and 14-2-8, NMSA 1978; reporting requirements for potential fraud, waste, or abuse under Section 12-6-6(C), NMSA 1978 and 2.2.2.10 NMAC; employment-related processes; and implementation of administrative systems. Administrative oversight also includes responsibility for ensuring that departments follow County codes, ordinances, regulations, policies, contracts, and applicable requirements under Chapter 13, Article 1, NMSA 1978.

Specific audit findings identified breakdowns in key administrative control functions. These included instances in which the County did not consistently comply with statutory requirements for reporting potential fraud, waste, or abuse to the Office of the State Auditor. Section 12-6-6(C), NMSA 1978 requires that "any violation of a criminal statute... shall be reported immediately to the state auditor," and 2.2.2.10 NMAC requires that such instances be reported "immediately in writing." Audit procedures identified situations in which issues were known but not reported in accordance with these requirements.

Audit procedures also identified noncompliance with IPRA, including untimely responses, incomplete documentation, and inconsistent processing of requests. These issues indicate gaps in

administrative processes designed to ensure compliance with statutory requirements and proper documentation of County actions.

Audit findings within Financial Services further identified deficiencies in financial statement preparation, review processes, account reconciliations, and supporting documentation. These findings indicate that key financial controls were not uniformly implemented or monitored, reflecting gaps in administrative oversight of financial reporting functions.

Audit findings within Human Resources similarly identified deficiencies in personnel administration processes, including inconsistencies in hiring practices, documentation of employment actions, and maintenance of personnel records. These findings further indicate that administrative controls over personnel-related functions were not consistently applied across departments.

The County Manager's Office is also responsible for implementing and ensuring compliance with directives issued by the Board of County Commissioners; however, audit procedures identified that such directives were not consistently tracked, communicated, or enforced across departments.

In addition, responsibilities established through administrative directives were not consistently enforced or clearly communicated. Audit procedures identified one County Manager directive requiring written reporting by County employees appointed by the BOCC to serve on external boards. During the audit, current administration indicated that this directive had been rescinded; however, documentation supporting the rescission was not available for review. As a result, it was not clear whether the directive remained in effect or how it was communicated, and the County did not maintain documentation demonstrating compliance with the reporting expectations.

These conditions indicate gaps in communication, documentation, and administrative tracking of directives, limiting the County's ability to ensure that requirements are clearly understood and applied.

Interdepartmental Coordination and Administrative Processes

The centralized structure of the County Manager's Office requires coordination across multiple departments to carry out County functions, including financial administration, personnel management, legal review, and operational execution within the County's administrative structure.

Audit procedures identified that coordination between departments lacked defined procedures, resulting in delays, incomplete information, and inconsistent application of administrative processes.

These conditions were observed in areas including procurement, reporting, complaint handling, implementation of administrative directives, and coordination between Human Resources and departments regarding hiring, disciplinary actions, and other personnel-related processes.

These coordination challenges extend to financial processes requiring interaction between departments and Financial Services, including budgeting, expenditure tracking, and financial reporting. Audit findings identified inconsistencies in how financial information was prepared, reviewed, and communicated, contributing to delays and reduced reliability of financial data used for decision-making.

Administrative systems intended to support County operations were also identified as an area requiring improvement. The implementation of the County's Workday enterprise system was associated with operational challenges, including insufficient training, manual workarounds, and difficulty locating and verifying financial documentation within the system.

These conditions affected multiple departments and contributed to inefficiencies in financial processing, increased reliance on manual processes, and inconsistencies in how transactions were documented and reviewed.

Personnel Practices and Organizational Environment

Administrative oversight of personnel-related processes, including hiring decisions, employee records, evaluation practices, and disciplinary coordination, was not supported by consistently applied procedures across departments. This contributed to variation in how employment actions were documented, reviewed, and implemented.

Results of the independent confidential employee survey conducted as part of the Special Audit provide additional context regarding organizational conditions. Survey responses reflected low levels of confidence in leadership, including the County Manager's Office, as well as concerns regarding transparency and fairness in employment decisions. A significant percentage of respondents indicated that promotions and compensation decisions were not perceived to be based on effectiveness, and many respondents reported awareness of potential conflicts of interest, favoritism, nepotism, or political influence in employment practices.

Employees also identified fear of retaliation and lack of follow-through as primary reasons for not reporting concerns, along with communication breakdowns and delays in leadership decision-making.

Audit observations are consistent with these survey results, including concerns related to hiring and promotion practices not consistently following established procedures or providing equal consideration to qualified candidates. Audit findings within Human Resources also identified deficiencies in personnel record management, documentation of employment decisions, and consistency in applying hiring and disciplinary procedures.

These observations are also relevant to Chapter 10, Article 16, NMSA 1978, governing standards of conduct for public officers and employees, and the Whistleblower Protection Act, including Section 10-16C-3, NMSA 1978, which provides protections relating to retaliatory action following reports of improper governmental action.

Authority Boundaries and Administrative Decision-Making

Audit procedures identified instances in which administrative decision-making occurred without clear alignment to formal Board authorization or established governance processes. This included matters involving litigation and interactions with elected officials.

These situations highlight the importance of maintaining clear boundaries between administrative execution and governing authority, particularly in matters involving legal action, personnel decisions, and operational control.

The relationship between centralized administrative functions and the authority of elected officials was also identified as an area requiring clearer definition. In particular, interactions between human resources processes and the authority of elected officials to manage their offices resulted in differing interpretations and operational conflict.

Audit findings further identified that County personnel policies and administrative practices do not clearly define how the County's merit system, administered by the County Manager's Office, interacts with the statutory authority of independently elected officials. This lack of clarity contributed to disputes involving personnel decisions that escalated beyond administrative resolution. Where those disputes involved the Sheriff's Office, the issues intersected with the legal framework governing law enforcement authority, including Chapter 29, Article 14, NMSA 1978 and 10.29.9 NMAC.

In addition, audit observations and survey results indicate that personnel actions, including promotions and compensation adjustments, were not consistently perceived to be based on merit.

These observations suggest that while a merit-based system exists in policy, its application in practice is not consistently implemented or understood.

External Context and Root Cause Considerations

External information reviewed during the audit period reflects that the conditions identified were also evident in interactions between County administration and elected officials. Publicly available information associated with the initiation of the State Auditor's special audit referenced concerns related to breakdowns in communication, potential noncompliance with applicable laws, and exposure to legal risk.

The matters identified during the audit are consistent with issues raised in correspondence submitted to the Office of the State Auditor in March 2025 by both the Sheriff and County administrative leadership. These communications raised concerns related to employment practices, disciplinary processes, compliance with legal obligations, and the administration of County operations.

Audit procedures, including expanded testing in personnel, financial, and operational areas, identified conditions that align with these concerns, including variability in administrative processes, limited oversight mechanisms, and challenges in clearly defining administrative and elected authority.

Findings across Human Resources and Financial Services further demonstrate that these issues are systemic and reflect broader administrative control weaknesses rather than isolated departmental deficiencies.

Summary of Administrative Conditions

The County Manager's Office plays a central role in translating BOCC authority into operational action across departments and functions within the County's administrative structure, excluding the independent elected offices. However, the processes governing how that authority is exercised lack clearly defined procedures and consistent oversight. Strengthening administrative procedures, compliance monitoring, and authority boundaries would improve execution of County responsibilities and confidence in administrative operations.

O. FINANCIAL SERVICES DEPARTMENT (FIN)

Overview

This section addresses procedures related to the Financial Services Department, including financial reporting, procurement documentation and approvals, contract review controls, administration of the Emergency Rental Assistance Program (ERAP), Governmental Accounting Standards Board (GASB) reporting determinations, and compliance with New Mexico Audit Rule supplementary disclosure requirements. The discussion below is based on financial statement analysis, procurement-file testing, ordinance and resolution review, case-file inspection, and interviews conducted during the special audit.

During the audit period and the year preceding report issuance, the Department experienced turnover and organizational restructuring that affected staffing continuity and role clarity. These changes corresponded with delays in retrieving information, gaps in institutional knowledge, and inconsistency in maintaining accounting processes and documentation.

Overall, the work performed revealed recurring weaknesses in financial reporting oversight, procurement controls, fund accounting, and disclosure practices. The issues identified extended beyond individual transactions and point to breakdowns in underlying financial management processes, including technical accounting capacity, documentation standards, review practices, and coordination between Finance and other County functions responsible for ordinances, agreements, procurement actions, and financial statement preparation. These conditions collectively reflect a breakdown in core financial management functions, including accounting, reporting, and oversight responsibilities that are fundamental to reliable financial administration.

The procedures performed within this section address multiple components of the approved special audit scope applicable to County Administration and Financial Services. Specifically, work performed aligns with Scope Steps A.1, A.3, and A.4, which require evaluation of compliance with applicable state laws, administrative rules, and financial management requirements, including procurement and public fund administration. Testing of procurement documentation, contract approvals, and financial reporting practices also addresses Scope Step B.1, which requires compliance with County ordinances, policies, and contractual requirements.

In addition, the conditions identified relate to Scope Steps D.1 through D.3 and E.1 through E.6, which include evaluation of organizational accountability, interdepartmental coordination, and timeliness

of responses. Deficiencies in financial reporting, capital asset tracking, procurement oversight, and information accessibility demonstrate breakdowns in these performance areas.

The analysis of reporting entity determinations, Joint Powers Agreements, and financial disclosures addresses Scope Steps J.1 and J.2, which require compliance with BOCC directives and intergovernmental agreements. Financial reporting and disclosure deficiencies, including omissions of required agreements and obligations, also fall within Scope Step K.1, which includes evaluation of legal and funding obligations identified through communications with the Office of the State Auditor.

Financial Reporting Capacity and Technical Accounting Oversight

Work over financial close, capital asset reporting, and financial statement preparation demonstrated that the Finance Department did not consistently exhibit the technical proficiency, system familiarity, or staffing stability necessary to independently evaluate and apply significant governmental accounting standards. Timely reconciliation and maintenance of capital asset records is a fundamental accounting control necessary to support reliable financial reporting.

Requests for capital asset inventory information during audit procedures were not fulfilled in a timely or reliable manner. Department personnel indicated that no individual was readily able to access or operate the capital assets module. A recently hired employee assigned to capital assets was without system access or formal training and was unable to retrieve requested data. Consequently, capital asset records were not readily available for audit review.

The Department also relied on an external contractor to support implementation and analysis of GASB Statements No. 87 and No. 96. Even with this assistance, capital asset records and related accounting information were not maintained in an audit-ready condition for fiscal year 2025, despite our procedures occurring months after year end. This condition reflects that capital asset tracking, recordkeeping, and reconciliations were not consistently maintained during the fiscal period.

In addition, no documented analysis of GASB Statements No. 14 and No. 61 was performed by the County prior to auditor recommendation, and management subsequently engaged a national accounting firm to complete the reporting-entity evaluation. Review of financial reporting practices further indicated that Finance did not independently prepare or sufficiently review financial statements in accordance with generally accepted accounting principles, including assessment of reporting-entity relationships and required disclosures.

These conditions appear attributable to turnover, limited training, lack of system access, reliance on external parties for technical accounting determinations, and insufficient internal processes for maintaining capital asset records and financial reporting documentation throughout the fiscal year. No evidence was identified that management independently evaluated the completeness or accuracy of work performed by external consultants or auditors. Under Generally Accepted Government Auditing Standards (GAGAS), external auditors cannot be considered part of an entity's internal control system, and management must designate personnel with appropriate skills, knowledge, and experience to oversee and accept responsibility for non-audit services, including financial statement preparation. The procedures performed indicate that this level of oversight was not consistently demonstrated.

This situation increases the likelihood of material misstatement, incomplete or inaccurate capital asset reporting, omitted disclosures, and delays in audit readiness. Capital asset records were not maintained in a condition that supported ongoing reconciliation or timely audit support, indicating that controls were not operating effectively during the period. Given the scope and pervasiveness of these deficiencies, they represent material weaknesses in internal control over financial reporting. These responsibilities reside with the Financial Services Department as part of its role in maintaining the County's accounting records and preparing financial statements in accordance with applicable standards. The inability to access and produce capital asset information during audit procedures further indicates that the County did not maintain control over its capital asset records throughout the fiscal year.

Reporting Entity, Joint Venture, and Restricted Fund Presentation

Evaluation of reporting-entity determinations and financial statement presentation showed that the County had not completed a comprehensive analysis of its financial, governance, and participatory relationships with legally separate entities. Following audit recommendation, an external accounting firm was engaged to apply GASB Statement No. 14, as amended by Statement No. 61. That analysis determined that the County holds a legally enforceable claim to the net resources of the Camino Real Regional Utility Authority upon dissolution; however, no corresponding joint venture investment or equity interest had been recorded in the County's financial statements.

Further review identified that proceeds from the County's 40-year lease agreement with Memorial Medical Center were reported in the General Fund, even though governing documentation restricted those proceeds to health-related programs and capital projects. Proper presentation would require accounting within a restricted special revenue fund.

Additional testing of the County's GASB 14/61 evaluation process showed that the analysis was incomplete. Not all amended Joint Powers Agreements were provided to the external CPA firm, certain related organizations were omitted, and completeness of the analysis was not verified against ordinances, resolutions, and financial records. For example, the Mesilla Valley Metropolitan Planning Organization was excluded from evaluation despite appearing in County schedules, and FY2024 financial statements omitted disclosure of the County's accountability relationship with the Animal Services Center of the Mesilla Valley even though disclosure criteria were met.

Taken together, these results reflect that Finance did not maintain a comprehensive inventory of related organizations and governing agreements requiring evaluation and did not ensure that identified disclosures were incorporated into the financial statements. A centralized listing of related entities and agreements was not maintained. The impact includes reduced transparency, incomplete component-unit analysis, omission of required disclosures, and inaccurate presentation of restricted resources and joint-venture interests. Accurate identification and reporting of these relationships is necessary to ensure that financial statements reflect the full scope of the County's financial obligations and governance involvement.

Procurement Documentation, Approvals, and Contract Review Controls

Review of procurement transactions demonstrated significant weaknesses in documentation, approvals, and contract review practices. As the central administrative function responsible for financial oversight and procurement processing, Finance is expected to ensure that procurement documentation, approvals, and contract review requirements are complete and compliant prior to payment and recordation. In a sample of 245 transactions, 165 (approximately 67 percent) lacked required documentation, approvals, or supporting records.

Exceptions included missing RFP or ITB documentation (10 instances), absence of advertisement documentation (6 instances), missing bid tabulations (12 instances), lack of pricing support (2 instances), a professional services contract exceeding \$60,000 without an RFP (1 instance), and unsupported emergency or sole-source justification (1 instance). Additional issues included unsigned pricing-agreement quotes (11 instances), missing required signatures (30 instances), absence of BOCC approval minutes (37 instances), lack of documented legal review (53 instances), and one instance of inconsistent vendor naming.

The consistency and volume of these exceptions demonstrate that procurement activities were processed without verifying that required documentation, approvals, and legal review had been

obtained and retained. This pattern reflects systemic control deficiencies rather than isolated errors. Contributing factors include absence of standardized file-completeness checklists, limited supervisory review, inconsistent enforcement of legal review requirements, and unclear accountability for contract oversight. While procurement activities originate within departments, Finance plays a critical role in processing, reviewing, and recording these transactions, and therefore serves as a key control point for ensuring compliance.

As a result, the County's ability to demonstrate compliance with the New Mexico Procurement Code is impaired. Incomplete records limit the ability to substantiate vendor selection, pricing evaluation, and governing-body approval. Lack of legal review documentation also increases exposure to unfavorable contract terms and potential enforceability concerns. These procurement control deficiencies are consistent with patterns identified in departmental-level testing, including Fire & Rescue procurement activities, indicating that the issues are not confined to a single department but reflect broader County-wide control weaknesses.

ERAP Administration and Conflict-of-Interest Controls

Examination of ERAP case files revealed weaknesses in conflict-of-interest review and payment authorization controls. Federal grant programs require documented internal controls over eligibility, authorization, and conflict-of-interest review. Instances were identified in which rental assistance payments were issued to a landlord who was also involved in assisting with ERAP program administration and tenant interactions. Supporting documentation confirmed that this individual received payments as a landlord.

Review of authorization records further showed that some Direct Pay Expenditure forms lacked required approval signatures, despite payments having been processed.

No documentation was identified demonstrating that a conflict-of-interest review was performed or that independent supervisory approval addressed the dual-role circumstance. These conditions indicate that control procedures were not consistently designed or implemented to address higher-risk scenarios involving overlapping roles and responsibilities. This indicates that program administration and Finance did not maintain sufficiently formalized procedures to identify, evaluate, document, and mitigate potential conflicts of interest or consistently enforce authorization requirements.

These conditions elevate the risk of both actual and perceived conflicts of interest, weaken assurance over payment authorization, and reduce the ability to demonstrate impartial administration of

federal funds. They also increase the likelihood of noncompliance with federal grant requirements, including conflict-of-interest provisions and internal control expectations over federal awards. These conditions also increase the risk that program funds may not have been administered in accordance with intended program objectives or eligibility requirements.

Financial Statement Disclosure Compliance and Supplementary Information

Comparison of ordinances, agreements, and financial statements identified multiple disclosure deficiencies affecting note disclosures and supplementary schedules. These disclosures are required components of the County's audited financial statements under applicable accounting standards and the New Mexico Audit Rule.

Review of conduit debt, tax-abatement, and related disclosure requirements identified numerous material transactions, agreements, and reporting elements that were omitted from or not properly reflected in the financial statements and related disclosures. These included examples such as approximately \$180 million in industrial revenue bonds for Hecate Energy Santa Teresa LLC; approximately \$50 million for La Mesa PV I, LLC; approximately \$340 million, plus an additional approximately \$240 million authorization, for Milagro Solar I, LLC; and approximately \$16 million in multifamily housing revenue bonds for an affordable housing project. Testing also identified twelve tax-abatement agreements associated with industrial revenue bond authorizations and related County incentive programs that were potentially not disclosed as required under GASB Statement No. 77.

Additional financial statement and disclosure omissions identified during testing included Las Colonias infrastructure funding of approximately \$800,000 and a related \$80,000 loan that were not identified in the FY2023 financial statements; omission of a Parkhill contract totaling approximately \$780,000 from South Central Solid Waste Authority construction commitments; exclusion of the El Paso Electric right-of-way franchise agreement from FY2024 disclosures despite its recurring revenue impact; and other note and schedule deficiencies identified across the financial reporting findings. Considered together with the omitted conduit debt disclosures, tax-abatement disclosures, unestablished Project Revenue Funds, missing legislative special appropriations, omitted Joint Powers Agreement disclosures, incomplete reporting-entity analysis, unrecorded joint venture interest, and improper presentation of restricted lease proceeds, the quantity and magnitude of unreported or improperly reported items were substantial and materially affected the completeness of the County's financial statements and related disclosures.

Required Project Revenue Funds were not established for certain economic development projects, including Integrated Maquila Solutions / TECMA and Oro, LLC. As a result, related revenues and expenditures may have been commingled rather than accounted for in restricted funds.

Testing compliance with the New Mexico Audit Rule also identified missing disclosures in required supplementary schedules, including legislative appropriations for multiple entities and omission of the Joint Powers Agreement with the South Central Solid Waste Authority.

These results demonstrate that Finance did not consistently reconcile governing documents to required financial statement disclosures or maintain procedures to ensure completeness of reporting. The impact is diminished transparency and reduced reliability of financial reporting. Users of the financial statements may not have had sufficient information to fully evaluate the County's financial position, commitments, and economic development activities. The absence of these disclosures also limits comparability with prior periods and with other governmental entities. The cumulative effect of these omissions reduces the reliability of the financial statements as a whole.

Summary

The Financial Services Department exhibited significant control deficiencies across financial reporting, procurement administration, grant oversight, and disclosure processes. The work performed demonstrated limited technical accounting capacity, incomplete reporting-entity evaluations, improper fund presentation, widespread procurement documentation gaps, insufficient conflict-of-interest controls, and repeated disclosure omissions.

The issues identified extended beyond individual transactions and point to breakdowns in underlying financial management processes, including review practices, coordination across County functions, documentation completeness, and management oversight of financial reporting responsibilities. These conditions are consistent with broader control and oversight weaknesses identified across other operational areas within the County. Effective financial reporting and disclosure also depends on coordination between Finance and departments responsible for originating ordinances, agreements, and financial transactions.

Collectively, these deficiencies increase the risk of inaccurate financial reporting, reduce transparency of procurement and financial activities, elevate exposure to compliance findings, and impair the County's ability to demonstrate adherence to accounting standards, procurement requirements, grant conditions, and State reporting rules. Based on their scope and impact, these deficiencies constitute material weaknesses in internal control over financial reporting and

compliance. Without significant improvement in financial management capacity, oversight, and control execution, these conditions are likely to persist.

P. HUMAN RESOURCES DEPARTMENT (HR)

Role and Administrative Function

The Human Resources Department operates within the County's administrative structure under the direction of the County Manager's Office and is responsible for administering personnel-related processes across County departments. These responsibilities include recruitment and hiring, personnel records management, classification and compensation, employee relations, and implementation of the County's merit system.

Human Resources also serves a coordinating role between departments and offices, including elected officials, in applying County personnel policies and procedures. As a centralized administrative function, Human Resources is responsible for establishing consistent procedures, documentation standards, and coordination protocols across departments. Audit procedures also evaluated whether personnel-related processes were performed in accordance with County policies, administrative procedures, and applicable personnel ordinances.

Although the County maintains a formal merit-based human resources framework under Chapter 45, including administration of the merit system by the Human Resources Director under the supervision of the County Manager, audit procedures identified that the practical application of those authorities was not always supported by clearly defined procedures, timelines, or documentation standards.

Audit procedures also considered Human Resources' role in administering personnel-related policies involving hiring, promotion, compensation, workplace conduct, complaint handling, and employee screening. This included review of the County's merit system framework, employment screening practices, conflict-of-interest disclosures maintained within Human Resources records, and the Department's role in supporting compliance with workplace conduct and complaint procedures.

Prior reviews of the County's Human Resources function identified process and documentation improvement opportunities in areas including recruitment consistency, personnel file completeness, compliance training expectations, and standardized procedures, indicating that some of the conditions observed during this Special Audit are not new.

Hiring Processes and Timeliness of Employment Actions

Audit procedures identified that hiring processes were not supported by clearly defined procedures, timelines, or assigned responsibilities across departments. Responsibilities for key steps in the hiring process were shared between Human Resources and departments, resulting in variability in how recruitment activities were initiated, coordinated, and completed.

Analysis of Human Resources time-to-hire data identified extended hiring timelines across multiple departments and position types. Examples included positions requiring more than 140 to 170 days to fill, including both public safety and non-public safety roles. In addition to extended timelines, the data reflected significant variation across departments, indicating that hiring processes lacked a standardized structure and consistent implementation.

These conditions reflect the absence of standardized procedures, clearly defined responsibilities, and established service-level expectations. The absence of structured processes contributed to delays, inconsistent communication between Human Resources and departments, and variability in how hiring actions were completed.

These observations are also consistent with the County's 2025 Human Resources assessment, which reported that time-to-hire was a source of significant frustration among departments and that the existing recruitment model contributed to process bottlenecks and delays.

In addition to delays in recruitment, audit procedures identified related concerns involving classification reviews, compensation adjustments, and other employment actions requiring coordination between Human Resources and departments. Employees seeking pay increases or reclassification were required to undergo a desk-audit process, and interviews indicated that delays in these reviews affected employee morale and, in some cases, retention.

County Administration acknowledges that recruitment activities involve shared responsibilities between Human Resources and departments and that decentralized processes can contribute to delays and inconsistent application of policies. Management has recently implemented structural changes, including the establishment of a centralized Talent and Culture Division, development of standard operating procedures, and implementation of tracking systems to improve coordination and transparency.

Public Safety Hiring and Candidate Evaluation Processes

Audit procedures identified that processes governing the evaluation of public safety candidates were not supported by clearly defined policies, documentation standards, and decision-making procedures. While County policies and applicable State regulations establish general authority and requirements for law enforcement hiring, the County did not maintain internal procedures defining how those requirements are applied, interpreted, and documented in practice. This lack of defined internal procedures limited the County's ability to ensure consistent, documented application of hiring requirements across cases.

Specifically, documentation standards for evaluating candidate suitability, including psychological evaluations and background investigations, were not clearly defined. As a result, the basis for determining candidate suitability was not consistently documented, and expectations regarding what constitutes a disqualifying or negative finding were not formally established.

Audit procedures also identified that roles and responsibilities related to evaluating candidate suitability were not clearly defined in practice, particularly in situations involving differing interpretations between Human Resources and public safety departments. Formal procedures for resolving such disagreements were not established, contributing to inconsistent application of evaluation criteria and escalation of disputes.

Although State regulations provide requirements for law enforcement hiring, reliance on those standards without corresponding internal procedures resulted in inconsistent application and documentation of candidate evaluation requirements.

Audit procedures also identified internal control concerns regarding documentation of employment screening practices more broadly, including whether required disclosures, authorizations, and adverse-action procedures were consistently retained when consumer reports or background screening information were used for employment-related decisions. These conditions increase legal and compliance risk in positions involving access to County facilities, systems, records, or inmate populations.

The County has indicated that updated standard operating procedures, documentation standards, and appeal processes will be implemented to address these issues. These planned actions further demonstrate that existing processes did not include clearly defined procedures or documentation standards for candidate evaluation.

Personnel Administration and Documentation Practices

Audit procedures identified that personnel administration processes lacked standardized documentation requirements across departments. This included variability in how employment actions were documented, maintained, and reviewed within personnel records.

Audit procedures also identified concerns regarding the timeliness and completeness of employee-related investigations, including EEO matters. Review of available records indicated that final investigation reports were not consistently present in personnel files, and in certain instances, investigations were not completed within timeframes consistent with expectations for prompt and timely resolution of employee complaints.

These documentation weaknesses were also reflected in the County's broader complaint-investigation records. Audit procedures identified significant inconsistencies between complaint files maintained by Human Resources, the Internal Auditor, and Legal, as well as files containing only initial complaints, incomplete files, and the absence of centralized monitoring to identify recurring patterns of discrimination, retaliation, or workplace misconduct across Departments.

Audit procedures also identified that processes for documenting and supporting disciplinary actions and personnel investigations were not consistently structured or applied, contributing to variability in how such matters were handled and recorded. In certain instances, deficiencies in documentation and adherence to established procedures contributed to unfavorable outcomes in disciplinary proceedings.

Audit findings within Human Resources identified deficiencies in personnel record management and documentation of employment decisions, including hiring, classification, and disciplinary actions. These conditions indicate that documentation practices were not standardized, increasing the risk of incomplete records, inconsistent application of policies, and limited auditability of personnel decisions.

In addition to standardization concerns, audit procedures identified instances where the quality and clarity of documentation supporting employment actions were insufficient, increasing the risk of inconsistent interpretation and adverse outcomes.

Human Resources also maintained employee conflict-of-interest disclosure forms in paper files; however, audit procedures identified that the disclosures were not maintained in a centralized or electronically accessible system that could be readily used by management or other Departments

responsible for procurement, contracting, outside-employment review, or financial oversight. As a result, disclosure information retained in Human Resources files was not functioning as an effective organization-wide compliance control.

Chapter 45 of the County's Code further provides that dispute resolution and grievance processes are to resolve complaints in a prompt and efficient manner and be conducted with respect for the dignity of individuals and without retaliation, reinforcing the expectation for timely and well-documented handling of employee-related matters.

Coordination Between Human Resources and Departments

Audit procedures identified that coordination between Human Resources and departments lacked clearly defined responsibilities and communication protocols. Processes requiring coordination, including hiring, disciplinary actions, training approvals, and personnel changes, were subject to delays and inconsistent application due to unclear expectations.

These conditions contributed to confusion regarding responsibilities at different stages of the process and variability in how personnel policies were applied.

Management's response acknowledges that decentralized recruitment activities increase the risk of inconsistent application of policies and documentation standards and indicates that further centralization of recruitment functions is being evaluated to improve consistency and oversight.

Audit procedures and supporting documentation identified challenges in coordination between Human Resources and the Sheriff's Office related to personnel decisions, including hiring, discipline, and operational deployment. These challenges were driven, in part, by differences in interpretation of roles and responsibilities, as well as delays in personnel processes, which affected the timely execution of the Sheriff's authority.

Audit procedures further identified that decentralized responsibilities and inconsistent coordination affected complaint handling and other personnel actions across Departments, contributing to differing interpretations, delays, and reduced transparency regarding the status of personnel matters.

Organizational Environment and Employee Perception

Results of the independent confidential employee survey conducted as part of the Special Audit provide additional context regarding Human Resources processes and organizational conditions.

Survey responses reflected concerns regarding transparency, fairness, and consistency in employment decisions.

A significant percentage of respondents indicated that promotions and compensation decisions were not perceived to be based on effectiveness, and many respondents reported awareness of potential conflicts of interest, favoritism, nepotism, or political influence affecting employment decisions. These observations are inconsistent with the merit-based principles established in Chapter 45 governing hiring, promotion, and compensation decisions.

Employees also identified fear of retaliation and lack of follow-through as primary reasons for not reporting concerns, along with communication breakdowns and delays in leadership decision-making. These findings are consistent with survey results indicating low confidence that employee concerns are handled objectively and low trust in leadership.

Audit procedures also identified noncompliance with County policy prohibiting unauthorized recording of workplace conversations without appropriate authorization. While this issue extends beyond Human Resources alone, it reflects broader employee-relations concerns and challenges in enforcing workplace conduct policies.

These perceptions align with audit observations regarding gaps in documentation, process consistency, and coordination. Audit procedures also identified concerns related to the consistency and transparency of certain compensation-related decisions, which align with employee perceptions regarding fairness and merit-based practices.

Additional context is provided by the County's 2025 Human Resources assessment, which reported that Human Resources staff described challenges related to workplace interactions and communication, including instances of conflict when policies or procedures were enforced, indicating that breakdowns in trust and communication affected both employees and HR staff.

These conditions are relevant to the County's obligations under Chapter 10, Article 16, NMSA 1978, governing standards of conduct for public officers and employees, and the Whistleblower Protection Act, including Section 10-16C-3, NMSA 1978.

Root Cause and Systemic Considerations

The conditions identified reflect deficiencies in process standardization, documentation, and coordination within personnel-related functions. Contributing factors include decentralized

responsibilities, lack of clearly defined procedures, absence of standardized documentation requirements, and inconsistent coordination between Human Resources and departments.

This conclusion is also consistent with the County's 2025 Human Resources Policies and Practices Assessment, which identified a lack of clearly defined strategic direction, fragmented processes, inconsistent communication, and bottlenecks in decision-making affecting service delivery across HR functions.

These conditions are consistent with observations in other administrative functions, including Financial Services and County Administration, indicating that the issues identified are systemic rather than isolated to a single department.

Management has initiated corrective actions, including restructuring Human Resources functions, developing standard operating procedures, and implementing tracking and reporting tools. While these actions are expected to improve consistency and oversight, they also indicate that prior processes required formalization to support effective administration of personnel functions.

Summary of Human Resources Conditions

The Human Resources Department plays a central role in administering personnel processes across the County. However, audit procedures identified that key processes, including hiring, candidate evaluation, documentation, complaint handling, and coordination with departments, were not supported by clearly defined procedures or consistently applied standards. Establishing clearly defined procedures, documentation standards, and coordination mechanisms would improve consistency, transparency, and accountability in personnel-related functions.

Q. LEGAL AND RISK MANAGEMENT (LEG)

Role and Administrative Function

The Legal and Risk Management function supports the County by providing legal advice, oversight of litigation and claims, review of contracts and agreements, and guidance on compliance with applicable laws, regulations, and County policies. This function also supports departments in matters involving employment, procurement, public records, and administrative actions, and plays a role in managing legal risk exposure across County operations.

Audit procedures evaluated the Legal and Risk Management function's role in supporting compliance with applicable statutes and regulations, including Chapter 10, Article 16 NMSA 1978 (Governmental Conduct Act), Chapter 14 NMSA 1978 (Inspection of Public Records Act), Chapter 13 NMSA 1978 (Procurement Code), and other statutory provisions applicable to employment, law enforcement, and County administration.

The Legal and Risk Management function operates within a broader framework of public sector expectations for governance, compliance, and risk mitigation. Effective execution of this role depends on clearly defined processes, consistent documentation, and coordination with administrative departments, including Human Resources, Financial Services, and operational departments.

Legal Oversight and Authority

The Legal and Risk Management function is responsible for advising the Board of County Commissioners, the County Manager's Office, and departments on legal authority, interpretation of statutes and ordinances, and compliance with applicable laws and regulations. This includes review of contracts, agreements, policies, and administrative actions.

Audit procedures identified that legal oversight activities were performed across multiple areas; however, the processes through which legal review and guidance were requested, documented, and applied were not consistently structured across departments. As a result, the timing, documentation, and communication of legal guidance varied depending on the nature of the issue and the departments involved.

These conditions contributed to differences in interpretation of requirements, delays in decision-making, and variability in how legal considerations were incorporated into operational and administrative actions.

Complaint Handling and Investigations

The Legal and Risk Management function plays a role in supporting the review, investigation, and resolution of employee complaints, workplace concerns, and other matters with potential legal implications. This function operates in coordination with Human Resources and other departments responsible for personnel administration.

Audit procedures identified that complaint handling and investigation processes were not consistently supported by clearly defined procedures, centralized tracking, or complete

documentation. Records of complaints and investigations were maintained across multiple functions, including Human Resources, Legal, and Internal Audit, without a reconciled or centralized system to track status, outcomes, or trends.

Audit procedures also identified inconsistencies in the completeness of investigation files, including instances where only initial complaints were retained, supporting documentation was incomplete, or final reports were not present. These conditions limited the County's ability to demonstrate that complaints were consistently investigated, resolved, and documented.

As a result of Special Audit procedures, Legal identified that, upon review of files maintained within the former County Attorney's office and comparison to the Gold Form Log, certain EEO complaint files had not been logged. This condition indicates that complaint tracking was not consistently centralized and that not all matters were captured within the tracking process. The maintenance of complaint files outside of the centralized tracking process limits the County's ability to ensure that all complaints are consistently monitored, investigated, and resolved.

Audit procedures also identified specific instances in which complaints were documented but not reflected in centralized tracking or investigation records. For example, documentation maintained within the former County Attorney's office included a complaint originating in 2022 by an elected official involving alleged violations of County Code provisions related to standards of conduct, including Resolution 2013-81, Section 14-5, Responsibilities of Public Service, which requires that elected officials and employees treat each other and the public with respect, decorum, and fairness at all times. This complaint was not logged into the Gold Form Log.

Further review of Internal Affairs records indicated that the matter was not assigned to an investigator, and no documentation was identified to indicate that an investigation was initiated or completed, or to explain why no investigation occurred.

Audit procedures also included analysis of EEO complaint data across County departments during the audit period in relation to employee population. This analysis identified approximately 125 EEO-related matters over the period July 1, 2021 through April 30, 2025, representing an average of approximately 34 complaints per year across an employee population of approximately 904 employees. See **EXHIBIT 9**.

When evaluated relative to department size, certain administrative and leadership functions exhibited higher rates of complaints, including Human Resources and Commission-related functions

(each approximately 40 percent), Finance (approximately 32 percent), the County Assessor (approximately 31 percent), and the County Manager's Office (approximately 25 percent). These rates were notably higher than those observed in larger operational departments, such as Detention (approximately 16 percent) and the Sheriff's Office (approximately 12 percent).

In addition to distribution by department, a significant portion of complaints involved allegations related to sex (45 cases) and discrimination (33 cases), which represent areas of elevated legal and regulatory risk.

Given the volume of complaints over the audit period and the concentration of higher complaint rates within certain administrative and leadership functions, effective legal oversight requires consistent tracking, documentation, and coordination to ensure that matters are appropriately monitored, investigated, and resolved.

The absence of a centralized and complete tracking process also limits the County's ability to identify patterns or trends in complaints, including recurring issues involving departments, personnel, or types of allegations.

These conditions are relevant to the County's obligations under Chapter 10, Article 16 NMSA 1978 and applicable employment laws requiring fair, consistent, and non-retaliatory handling of employee concerns.

Compliance with Public Records Requirements (IPRA)

The Legal and Risk Management function supports the County's compliance with the Inspection of Public Records Act (IPRA), including advising departments on responses to public records requests and applicable legal requirements.

Section 14-2-5 NMSA 1978 provides that "all persons are entitled to the greatest possible information regarding the affairs of government and the official acts of public officers and employees."

County policy further requires that all IPRA requests be managed through a centralized system (RecordBook) and establishes responsibilities for primary and secondary departments to ensure timely responses, including issuance of 3-day and 15-day communications and ongoing status updates to requestors.

The directive further provides that the Legal Department is available to assist departments in drafting responses and addressing questions that arise during the IPRA process, reflecting a support role rather than centralized control of responses.

Recent amendments to the Inspection of Public Records Act, including changes enacted in 2023, expanded the disclosure requirements for law enforcement records while requiring detailed redaction of protected information, including personal identifiers, victim and witness information, and sensitive visual or audio content. These changes significantly increased the complexity of responding to public safety-related IPRA requests.

As a result, effective compliance with IPRA, particularly for law enforcement and detention-related records, requires specialized training and expertise to ensure that records are properly reviewed and redacted in accordance with statutory requirements.

Audit procedures identified that processes related to responding to information requests and coordinating responses across departments were not consistently structured or centralized in practice. Variability in communication, documentation, and coordination increased the risk of delayed or inconsistent responses to public records requests.

The directive also states that the County does not maintain a records retention policy for text messages or personal emails, despite recognizing that such communications may constitute public records when used for County business, creating additional challenges for compliance and record management.

Risk Management and Liability Exposure

The Legal and Risk Management function is responsible for managing legal risk, including oversight of claims, litigation, and potential liability exposure arising from County operations. This includes matters related to employment, procurement, contracts, and operational activities.

County policy explicitly recognizes the legal risk associated with noncompliance with IPRA, including that the County may be subject to litigation for violations and that there is limited insurance coverage available for defending such claims, placing increased importance on timely and accurate responses.

Audit procedures identified that conditions observed in other areas of County operations, including hiring delays, documentation deficiencies, inconsistent complaint handling, and coordination challenges, contribute to increased legal and liability exposure. These conditions affect the County's ability to effectively manage claims, defend personnel actions, and demonstrate compliance with applicable requirements.

Additionally, these conditions limit the County's ability to demonstrate that actions taken in response to complaints and personnel matters were consistent, appropriately supported, and defensible.

Coordination with County Departments

The Legal and Risk Management function operates in coordination with multiple departments, including Human Resources, Financial Services, the County Manager's Office, and operational departments such as the Sheriff's Office.

Audit procedures identified that coordination between Legal and other departments was not consistently supported by clearly defined roles, responsibilities, or communication protocols. This included coordination related to complaint handling, disciplinary actions, contract review, IPRA responses, and administrative decision-making.

Because the Legal and Risk Management function relies on departments to provide complete and timely information, the absence of clearly defined coordination processes further increases the risk of incomplete or delayed responses.

County policy requires coordination between primary and secondary departments in gathering, reviewing, redacting, and producing records, as well as ongoing communication with requestors, reinforcing the need for clearly defined roles and timely interdepartmental coordination.

These conditions contributed to differences in interpretation of legal requirements, delays in obtaining or applying legal guidance, and variability in how legal considerations were incorporated into departmental processes.

Audit procedures also identified that coordination challenges between Human Resources, Legal, and operational departments affected the handling of employment-related matters, including discipline, investigations, and personnel decisions, particularly where responsibilities were shared or not clearly defined.

March 2025 Letters and Legal Context

The scope of the Special Audit includes matters raised in March 2025 correspondence to the Office of the State Auditor, including concerns related to employment practices, EEO matters, disciplinary actions, and legal and funding obligations.

Audit procedures identified that the issues raised in this correspondence are consistent with conditions observed during the audit, including challenges in complaint handling, documentation, coordination, and application of policies and procedures. These conditions have implications for the County's legal compliance and risk exposure.

Root Cause and Systemic Considerations

The conditions identified reflect deficiencies in process standardization, documentation, and coordination within legal and risk management activities. Contributing factors include decentralized responsibilities, lack of clearly defined procedures for requesting, documenting, and tracking legal review, absence of centralized tracking for complaints and investigations, and inconsistent communication between departments.

These conditions are consistent with observations in Human Resources, Financial Services, and County Administration, indicating that the issues identified are systemic rather than isolated to the Legal and Risk Management function. The increasing complexity of statutory requirements, including recent changes to public records laws, further reinforces the need for clearly defined processes, specialized training, and coordinated oversight to ensure compliance.

Summary of Legal and Risk Conditions

The Legal and Risk Management function plays a critical role in supporting compliance, managing risk, and providing legal guidance across County operations. However, audit procedures identified that key processes, including complaint handling, investigation documentation, IPRA coordination, and interdepartmental communication, were not supported by clearly defined procedures or consistently applied standards. Strengthening process definition, documentation practices, coordination mechanisms, and specialized training would improve compliance, reduce risk, and enhance the County's ability to manage legal exposure.

Post-Audit Developments

Subsequent to the audit period, the Board of County Commissioners approved additional legal staffing resources to support IPRA compliance, reflecting recognition of the complexity and workload associated with responding to public records requests, particularly those involving public safety records.

R. DETENTION CENTER (DACDC)

Detention Center – Operational and Administrative Analysis (DC)

Work related to the Detention Center focused on hiring practices, workforce trends, inventory management, and oversight activities. This included examination of an internal audit of recruitment

processes, analysis of time-to-hire data specific to Detention Center positions, review of inventory tracking methods, and interviews with personnel involved in operational and administrative functions. The evaluation addresses areas of the approved special audit scope concerning efficiency, accountability, and adherence to established procedures.

An internal audit of recruitment activities identified significant inefficiencies in the hiring process, including substantial variation in the time required to complete individual steps. Activities expected to occur within days routinely extended to several weeks, and total hiring timelines ranged from approximately one month to more than six months. Applicant attrition was also pronounced, with as many as 96 percent of candidates no longer available by the time an offer was extended.

The internal audit further concluded that the causes of these delays were “indeterminate,” reflecting that underlying drivers had not been identified or evaluated. Without a clear understanding of the factors contributing to extended timelines, management lacks the ability to implement corrective measures, assign responsibility, or assess whether delays are avoidable. The pattern of delay spans multiple stages of the process, including screening, interview coordination, background investigation, and final approval, indicating that inefficiencies are embedded throughout the hiring workflow rather than isolated to a single phase.

Time-to-hire data for Detention Center positions reflects the same inconsistency. Hiring durations varied widely, with certain Detention Officer Trainee and supervisory roles requiring more than 200 days to complete, including examples of approximately 224, 231, and 288 days. Other positions were filled in less than 50 days. This level of variation for comparable roles demonstrates that hiring timelines are not governed by consistent expectations or actively managed to achieve timely outcomes. Extended hiring timelines and high levels of applicant attrition increase the likelihood that vacant positions remain unfilled for prolonged periods, limiting the Department’s ability to maintain consistent staffing levels.

Workforce data further demonstrates the operational impact of these conditions. Turnover within the Detention Center remained consistently elevated for more than a decade, ranging from approximately 15 percent to over 30 percent annually from 2010 through 2022, and remaining above 25 percent as recently as 2021 and 2022. A decline is observed beginning in 2023, with turnover decreasing to approximately 10 percent in 2023 and 6 percent in 2024. However, this reduction follows an extended period of sustained workforce instability and does not correspond with improvements in hiring efficiency, which continues to reflect prolonged timelines and significant

applicant attrition. As a result, the decrease in turnover does not necessarily indicate improved workforce stability, as underlying staffing challenges persist.

Inventory practices exhibit similar characteristics of inconsistency. Tracking is performed across multiple systems, including manual spreadsheets, departmental tools, and Workday for certain assets. While items selected for testing could be located, the absence of an integrated system increases the likelihood of incomplete or inconsistent records. In addition, no department-specific standard operating procedures governing inventory management were identified, and staff reported reliance on general County policies that do not provide detailed guidance for day-to-day execution.

Across these areas, a consistent theme emerges of processes that exist in form but lack disciplined execution and oversight. Variability in hiring timelines, prolonged periods of elevated turnover, reliance on multiple inventory systems, and absence of clearly defined procedures reflect gaps in coordination and accountability at the operational level.

Oversight activities appear to be largely reactive. Although County leadership has conducted site visits and engaged in discussions regarding Detention Center operations, there is limited evidence of structured, ongoing monitoring of key performance indicators such as hiring timelines, staffing levels, or inventory controls.

Taken together, these conditions point to weaknesses in operational management and control execution within the Detention Center. Prolonged hiring timelines in a historically high-turnover environment create ongoing risk to staffing levels, while fragmented inventory practices introduce potential control gaps over equipment and assets. Without clearly defined expectations, consistent oversight, and active monitoring of performance, these issues are likely to continue affecting the Department's ability to operate effectively.

S. FIRE AND RESCUE SERVICES (DAFR)

Overview

This section integrates results from prior internal audit work, external HR company analysis, and procedures performed during the special audit over DAC Fire & Rescue Operations. Collectively, these sources provide corroborated evidence of systemic control deficiencies affecting Fire & Rescue

operations over multiple audit periods. The matters described below are based on records reviewed, data analysis performed, and interviews conducted during the engagement.

From interviews conducted and procedures performed during the special audit, additional concerns were brought to our attention, including potential conflicts of interest and allegations of wasteful spending. These matters fall outside the scope period of the special audit and, accordingly, were not tested as part of this engagement. Such concerns have been communicated to the Office of the State Auditor for consideration in future testing or special audit work.

The issues identified are not isolated incidents. Rather, they reflect recurring deficiencies in governance, process standardization, documentation, and operational execution that have persisted despite prior audit recommendations.

Systemic Control Environment

Procedures performed during the special audit, when considered together with prior internal audit work and external HR consulting analysis, identified consistent deficiencies in process standardization, documentation, and timeliness within Fire & Rescue operations. Internal audit analysis of the hiring process (2023) identified delays, lack of standardized timelines, inefficient manual processes, and extended processing times across multiple hiring phases. External analysis similarly identified extended hiring timelines, indicating that these conditions existed prior to the audit period and were not fully remediated.

In addition, procedures specific to Fire & Rescue operations identified deficiencies in inventory accountability, procurement practices, and vendor utilization. Testing identified inconsistencies between inventory records and physical observations, frequent use of change orders within procurement activities, and concentration of vendor utilization among a limited number of suppliers.

We further observed that prior recommendations related to process standardization, documentation, and timeliness were not fully implemented. As a result, similar conditions continued to exist during the period under review. These conditions are consistent with control deficiencies identified in other operational areas of the County during the special audit.

Hiring Process

Procedures performed included review of hiring data, process timelines, supporting documentation, and interviews with personnel involved in recruitment and hiring activities. The criteria for

evaluation included applicable County policies, established hiring procedures, and prior audit recommendations.

Testing identified significant variability and delays across multiple phases of the hiring process, including delays in job posting, candidate screening, background investigations, and compensation approvals. In several instances, hiring processes extended well beyond expected operational timeframes.

The cause of these conditions is attributable to the absence of defined accountability for monitoring and enforcing compliance with hiring timelines and procedures, including lack of designated personnel responsible for tracking process performance, limited use of performance metrics, and failure to establish or enforce required timeframes within Standard Operating Procedures.

The effect of these conditions includes loss of qualified candidates during the hiring process, extended time-to-hire for external applicants, and increased risk to operational readiness due to staffing delays. Procedures performed during the special audit identified that prior recommendations to address these issues were not fully implemented, and similar conditions continued to be observed.

Inventory and Equipment Accountability

In addition to the deficiencies identified through testing, concerns were raised during interviews and procedures performed regarding whether certain equipment and apparatus acquired were fully aligned with operational needs. These concerns included instances in which equipment obtained did not appear to meet intended functional requirements for fire personnel.

Procedures performed included review of inventory records by fiscal period, list-to-floor and floor-to-list inventory testing at multiple fire stations, comparison of inventory observations to actual assets, and evaluation of vehicle and apparatus movement practices.

Testing identified deficiencies in both the completeness of inventory records and the reliability of physical verification procedures. Inventories at various fire stations were being conducted by fire volunteers and not being followed up on consistently by DAFR administration. Items identified as missing from inventory records during testing were subsequently added by Department personnel following audit inquiry, indicating that inventory records were not current or complete at the time of testing. During floor-to-ceiling testing of sensitive equipment items, two of eight items selected were not listed in the Department's inventory records at the time of inspection. Department

personnel indicated that those items were subsequently added to the inventory after the audit review. In addition, inventory observation procedures identified instances in which inventory checklists had been completed without actual physical verification of equipment. In one instance, an item was marked as present on an inventory checklist; however, when that item was independently verified during audit procedures, it was not present.

Interviews with fire personnel further indicated that equipment expected to be maintained on fire apparatus was not consistently available on the apparatus during certain periods. Personnel also reported that, in some instances, the only operational fire apparatus assigned to a station had been relocated to another location without a documented transfer process or formal notification, resulting in situations where a station may have been left without an available unit to respond to emergencies. These conditions increase operational risk because apparatus readiness depends not only on the availability of the vehicle itself, but also on the presence of the required tools and equipment assigned to that apparatus. These conditions also increase the risk that apparatus acquired may not fully meet operational or safety requirements, affecting firefighter effectiveness and safety during emergency response.

The Department currently relies on multiple systems to track equipment and assets, including an Excel spreadsheet used as the master inventory record, departmental inventory software, and the County's Workday system used for financial reporting of certain assets. Testing identified that inventory records were not consistently updated in a timely manner to reflect equipment movement, acquisition, or reassignment, resulting in discrepancies between recorded and actual equipment locations. These systems are not fully integrated and require manual reconciliation. As a result, the Department's inventory records remain vulnerable to inconsistency, omission, and delayed updates when equipment is acquired, transferred, removed from service, or reassigned between stations.

We also noted that the Department did not maintain a consolidated inventory policy and procedures manual governing inventory management, equipment accountability, and asset tracking practices. In the absence of a single standardized policy framework, inventory practices appear to have depended heavily on individual personnel, station-level practices, and manual processes rather than a consistently enforced Department-wide control structure.

The cause of these conditions is attributable to inadequate verification procedures, fragmented inventory systems, lack of standardized written protocols, and insufficient centralized oversight of asset movement and accountability.

The effect includes reduced reliability of inventory records, diminished accountability over emergency-response equipment, increased risk that equipment may be misplaced or unavailable when needed, and increased risk that fire apparatus may be deployed without required equipment to respond effectively to emergency situations.

Procurement and Fire Apparatus Acquisitions

Procedures performed included testing of fire apparatus procurements, review of procurement files and related purchasing documentation, comparison of original procurement documentation to final contract and invoice information, and analysis of contract modifications and change orders during apparatus construction.

Testing identified deficiencies in procurement documentation and contract oversight related to fire apparatus acquisitions. Procurement files did not consistently contain documentation demonstrating compliance with required purchasing procedures or evidence supporting vendor selection. Within the six fire apparatus procurements reviewed, two did not contain documentation demonstrating legal review and approval of contracts prior to execution.

Procurement files also did not consistently contain documentation demonstrating competitive procurement activity, vendor evaluation, or justification supporting vendor selection for apparatus acquisitions exceeding applicable purchasing thresholds. Procurement files also did not consistently include documentation supporting the basis for vendor selection, including evaluation criteria, comparative analysis, or justification for selecting the awarded vendor. Records provided for review did not consistently show that competing vendors were evaluated or that bids were solicited from multiple vendors. Procurement records did not consistently demonstrate that alternative vendors were considered or that competitive pricing or proposals were obtained prior to vendor selection. As a result, the procurement files did not consistently demonstrate that apparatus acquisitions were supported by complete documentation of competitive procurement procedures, vendor evaluation, and required approvals.

Testing further identified repeated use of change orders during apparatus construction. For example, Contract No. 22-122, with an original contract value of \$3,842,676, included several scope-expansion change orders totaling \$358,810 during the construction process. Additional change orders totaling \$34,079 and \$7,632 were identified on other apparatus contracts reviewed. These contract modifications included adjustments or additions to apparatus components and equipment during the build process.

Further analysis identified patterns in which original procurements were followed by change orders adding components, equipment, or customizations that could have been anticipated during the initial procurement process and more clearly reflected in original specifications. This pattern increases the risk that the initial procurement documentation did not fully capture the full scope of the intended purchase at the time of award and is consistent with concerns that initial procurement documentation may not have fully reflected the intended scope of equipment, resulting in reliance on post-award modifications.

A broader review of Department purchasing activity during the audit period identified that, from July 1, 2024 through April 15, 2025, the Department issued 103 purchase orders exceeding \$10,000, of which 32, or approximately 31 percent, were change orders. During the same period, countywide purchasing activity reflected 184 change orders out of 930 purchase orders over \$10,000, or approximately 20 percent. This indicates that the frequency of change orders within Fire & Rescue procurement was materially higher than the County-wide average. Change orders also appeared to recur across multiple vendors and time periods, including contracts initiated prior to the audit period.

The cause of these conditions is attributable to weaknesses in procurement planning, incomplete specification development, inconsistent documentation of competitive processes, and lack of consistent contract oversight and legal review controls.

The effect includes reduced transparency in procurement activities, increased acquisition costs through post-award modifications, diminished ability to demonstrate compliance with purchasing requirements, and increased risk that competitive procurement requirements were not fully achieved.

Vendor Utilization and Procurement Practices

Procedures performed included analysis of vendor utilization, review of procurement history across fire apparatus acquisitions, evaluation of purchase-order activity, and review of procurement methods used for major acquisitions.

Testing identified that fire apparatus procurements were concentrated among a limited number of vendors. In certain periods, these vendors appeared to represent the primary, and in some cases the only, vendors utilized for fire apparatus acquisitions. A review of purchasing activity during the audit period indicated that the majority of fire apparatus acquisitions were made through vendors affiliated with one main vendor, including two subsidiaries. Analysis of vendor activity further

indicated that apparatus procurements were repeatedly sourced from the same vendor relationships and that each apparatus purchase from one of the subsidiaries included at least one associated change order.

The procedures also identified that procurements were frequently executed using exemptions, cooperative purchasing agreements, or pricing agreements rather than standalone competitive solicitations. Documentation reviewed did not consistently include evidence of independent County-level competitive bidding, evaluation of multiple vendors, or documented justification for reliance on these procurement methods. In several instances, procurement files reflected use of pre-established purchasing methods without clear support demonstrating that such methods provided the most advantageous terms or that alternative vendors were adequately considered.

Taken together, these conditions indicate that Fire & Rescue operations had effectively defaulted to reliance on specific vendors for apparatus purchases rather than consistently demonstrating vendor comparison, competition, or contemporaneous justification for the procurement method selected.

We further observed circumstances that create an appearance of potential conflicts of interest and self-dealing risk within vendor relationships, including concentration of procurement activity with specific vendors and contextual factors identified during testing and interviews, including transitions between County leadership roles and vendor affiliations. While certain relationship-related factors were identified, not all elements of those relationships were within the scope of detailed testing during this engagement. Interviews also raised concerns regarding relationships between County leadership and external entities, including dual-role responsibilities and affiliations that contributed to a perceived lack of independence in certain decision-making processes. Interviewees indicated that these factors contributed to diminished trust in leadership, although no direct evidence of impropriety was identified during audit procedures since the activities were outside the scope and not a focus of our procedures.

The cause of these conditions is attributable to limited vendor competition, repeated reliance on specific suppliers, incomplete procurement-file support, and insufficient documentation of the basis for procurement decisions. The effect includes reduced assurance of fair and open competition, increased reliance on a limited vendor pool for critical apparatus purchases, diminished transparency in vendor selection, and elevated risk of impropriety or perceived impropriety in vendor relationships.

Emergency Medical Services (EMS) Medications – Chain-of-Custody and Recordkeeping

Procedures performed included evaluation of pharmaceutical inventory records, review of supporting documentation related to medication receipt, storage, issuance, and replenishment, and comparison of Department practices to applicable Standard Operating Procedures and regulatory requirements.

Testing identified that the Department was unable to provide pharmaceutical inventory records for the EMS pharmacy program for the period approximately July 1, 2023 through December 2024. Inventory documentation was available beginning in approximately 2025 when the current inventory technician assumed responsibility for pharmaceutical inventory management; however, historical records for the earlier period were unfortunately not available for review.

Department personnel responsible for inventory management indicated they were unable to determine whether pharmaceutical inventory records for prior periods existed, and no additional records were provided following the audit request. The Department was also unable to provide logs documenting monitoring of medication expiration dates or documentation of drug-box exchanges and replenishment of medications following use.

Because these records were not available, procedures could not reconcile pharmaceutical purchases, inventory balances, and medications administered during the period reviewed. Due to the absence of historical records, it could not be determined whether these deficiencies were limited to the period reviewed or existed in prior periods. As a result, the County could not demonstrate that pharmaceuticals were consistently tracked, reconciled, or subject to documented chain-of-custody controls during that period. For EMS medications, which are sensitive items requiring strict accountability, the absence of inventory records, expiration monitoring logs, and exchange or replenishment documentation materially limits the Department's ability to demonstrate that medications were properly received, stored, issued, administered, and disposed of during the period reviewed.

These conditions indicate that chain-of-custody controls over EMS medications were not consistently implemented in accordance with Department Standard Operating Procedures and applicable regulatory requirements. The absence of pharmaceutical inventory documentation spans multiple fiscal periods and prevented the special audit from determining whether the lack of inventory accountability was confined to the specific period tested or may have existed during earlier periods as well.

The cause of these conditions is attributable to failure to maintain required records, lack of centralized record retention, dependence on individual personnel rather than a structured system of documented controls, and insufficient oversight of pharmaceutical inventory procedures.

The effect includes reduced accountability over controlled and sensitive medications, inability to verify quantities received, issued, administered, or disposed of, lack of a reliable audit trail for EMS pharmaceutical inventory, increased risk of loss, diversion, expiration, or improper use without detection, and inability to demonstrate compliance with regulatory and internal documentation requirements.

Implementation of Prior Recommendations

Procedures performed included comparison of prior internal audit recommendations to current practices observed during the special audit.

Testing identified that prior recommendations related to SOP updates, timeline enforcement, process standardization, and system improvements were not fully implemented. Conditions identified in prior audits were observed to persist during the audit period.

The cause of this condition is lack of effective follow-up and accountability for implementation of corrective actions. The effect is the continuation of known deficiencies across multiple audit cycles, indicating a systemic control weakness rather than isolated operational issues causing non-compliance and risk of fraud, waste, or abuse of public funds.

Summary

Based on procedures performed, Fire & Rescue operations are affected by longstanding and unresolved control deficiencies across multiple functional areas, including hiring processes, equipment accountability, fire apparatus procurement, vendor utilization, and EMS pharmaceutical controls.

The special audit identified that inventory records and verification procedures did not consistently ensure accountability over emergency-response equipment; apparatus and equipment movement between stations was not consistently documented; inventory tracking was fragmented across multiple non-integrated systems; and the Department lacked a consolidated policy framework governing inventory and equipment accountability. The special audit also identified that fire apparatus procurement files did not consistently demonstrate competitive procurement activity, vendor evaluation, legal review, or complete supporting documentation, and that repeated change

orders increased the cost and reduced the transparency of apparatus acquisitions. In addition, vendor utilization patterns reflected repeated reliance on a limited number of vendors and procurement methods that did not consistently demonstrate open competition or documented justification for the methods used.

Procedures over EMS pharmaceutical controls further identified that required inventory records, expiration-monitoring logs, and drug-box exchange or replenishment documentation were not maintained for a substantial portion of the audit period, preventing reconciliation of pharmaceutical purchases, balances, and medications administered. As a result, the County could not demonstrate that EMS medications were consistently subject to documented chain-of-custody controls during that period.

These operational and compliance deficiencies were observed in an environment where prior recommendations related to process standardization, documentation, timeliness, and system improvements were not fully implemented. While certain corrective actions have been initiated, those actions have not fully addressed the underlying control environment.

While certain processes and controls were in place within Fire & Rescue operations, and some corrective actions have been initiated during or subsequent to the audit period, procedures performed identified that these controls were not consistently implemented or enforced and were not sufficient to prevent or detect the deficiencies identified.

Taken together, these conditions represent systemic control weaknesses that increase operational risk, weaken accountability over critical public safety equipment and medications, reduce confidence in procurement integrity, and affect the County's ability to ensure readiness and effective stewardship of Fire & Rescue resources.

T. CLERK'S OFFICE (DACO)

Official Records and Legislative Documentation

The County Clerk serves as the custodian of the official record of the Board of County Commissioners (BOCC), including ordinances, resolutions, and the proceedings of the Board. In this role, the Clerk is responsible for maintaining the official legislative record that reflects actions taken by the governing body.

Pursuant to Section 4-38-1 NMSA 1978, the County Clerk is required to “keep the records and seal of the board of county commissioners and record all proceedings of the board.” These records serve as the official documentation of the Board’s actions and are relied upon by the public, County personnel, and other entities to understand and implement those actions.

During the audit, the County was unable to provide a complete listing of active ordinances, resolutions, policies, agreements, and directives, and responses to requests for this information were delayed. As a result, testing was limited to items enacted during the audit period. The absence of a maintained listing, either centrally or at the department level, limits the County’s ability to identify which actions remain in effect and where responsibility for implementation resides.

Review of resolutions and ordinances maintained by the Clerk’s Office identified instances where documents referenced within adopted actions were not included as part of the official record. In several cases, exhibits or agreements referenced in the body of a resolution or ordinance were not attached, were incomplete, or were not executed within the official record. In other instances, documentation within the official record reflected inconsistencies, including duplicate ordinances or referenced materials that could not be located.

Resolutions and ordinances represent formal legislative actions of the BOCC. Exhibits, agreements, and supporting documentation referenced within those actions form part of what was presented to and approved by the Board. When those materials are not maintained together, the official record does not fully reflect the action taken.

The completeness of the official record is dependent not only on the Clerk’s Office, but also on the departments and offices that prepare and submit agenda items and supporting documentation. Materials originate outside of the Clerk’s Office, and the final record reflects the information provided at the time of Board consideration. In this context, the Clerk’s role includes maintaining the record and supporting the integrity of that record during meetings, including raising questions when documentation appears incomplete or unclear.

When supporting materials are not included in the official record, members of the public may not be able to determine the full content of the action approved by the BOCC without obtaining documents from other sources. This can require additional requests and creates uncertainty as to whether the version obtained reflects the final form approved by the Board. It also introduces the potential for multiple versions of agreements or exhibits to exist without a clear, consolidated record.

The lack of a maintained inventory of active ordinances, resolutions, policies, and agreements further compounds this issue. Without a clear listing of what is currently in effect, it is difficult to determine which requirements apply, how responsibilities are assigned, and whether those requirements are being followed.

The audit indicates that while the Clerk maintains the official record as required, the processes governing how that record is quality controlled, assembled, and maintained are not consistently defined or applied. Establishing clearer expectations for submission of complete materials and maintaining a current listing of active County actions would improve the reliability and usability of the County's official legislative record.

U. SHERIFF'S OFFICE (DASO)

The Doña Ana County Sheriff's Office (DASO) is responsible for providing law enforcement services within the County, including enforcement of state laws, execution of court orders, and administration of public safety functions. The Sheriff is an elected official with statutory authority under New Mexico law, including the authority to appoint and commission deputies, and operates within a structure that requires coordination with County Administration, Human Resources, and Legal/Risk for administrative, financial, and personnel-related matters.

Procedures performed included review of DASO operations, training and certification records, inventory and equipment tracking, compliance-related reporting, personnel processes, and coordination with County departments. This work also considered procedures performed in earlier sections of this report related to DASO compliance with applicable laws and regulations, employment practices, governance, and interdepartmental coordination.

Based on procedures performed, DASO operations reflect established law enforcement functions; however, recurring issues were identified in several administrative, compliance, and governance areas. These include training compliance and tracking, inventory and equipment accountability, required reporting obligations, personnel-related processes, and coordination with County administrative departments. These same areas were identified throughout earlier sections of the report, particularly where DASO functions intersect with County systems and oversight structures.

Training activities were occurring during the audit period; however, supporting documentation was inconsistent. Records reviewed showed variation in how training completion, certification status, and policy acknowledgment were tracked and maintained, and a centralized or consistently maintained tracking mechanism was not evident. Without reliable documentation, DASO may have difficulty demonstrating that training requirements have been met in accordance with applicable standards.

Inventory and equipment accountability presented similar issues. Documentation supporting asset assignment, verification, and reconciliation was not consistently maintained and, in some instances, did not align with physical observations or supporting records. These conditions limit the ability to demonstrate accountability for County assets and indicate that inventory practices were not applied consistently across the department.

Required compliance reporting was not consistently completed or supported by documentation. In several instances, reports required under applicable statutes or regulatory frameworks were not submitted within expected timeframes or could not be readily supported. This limits DASO's ability to demonstrate compliance with reporting obligations.

In addition, inconsistencies were noted in the coordination and documentation of certain personnel-related processes, including background screening and compliance with applicable federal requirements. As discussed in earlier sections related to employment practices, variability in documentation and process execution was observed across departments. Within DASO, these issues arise in part where responsibilities overlap with Human Resources and Legal/Risk and are not always clearly defined in practice.

Procedures performed and information reviewed in earlier sections of this report also identified concerns related to workplace conduct, complaint handling, and employee relations within DASO. Documentation and interviews reflected allegations of unprofessional conduct, including the use of confrontational or demeaning communication styles, as well as instances where employees perceived interactions as intimidating. In certain cases, employees reported that raising concerns or questioning direction resulted in adverse treatment or increased scrutiny.

At the same time, interviews indicated that these experiences were not uniform across the department, and some employees reported positive working relationships and effective operations within their units.

Documentation and procedures also identified ongoing challenges in communication and coordination between DASO and County Administration, including the Office of the County Manager (CMO), Human Resources, and Legal/Risk. These challenges include delays in processing personnel and administrative matters, inconsistent responsiveness, and differing interpretations of authority and responsibility. In some instances, communication breakdowns were attributed to both DASO and County departments, resulting in a pattern of delayed responses, non-cooperation, or disengagement that affected the timely handling of operational and administrative matters.

Historical factors also contributed to these conditions. Documentation reviewed indicates that prior litigation and disputes between the Sheriff and County leadership contributed to an early breakdown in working relationships, resulting in a more defensive posture and ongoing communication challenges during the audit period.

Governance challenges were further reflected in disputes regarding the commissioning and decommissioning of deputies. Under New Mexico law, the Sheriff holds authority to commission deputies, while County personnel processes govern employment-related actions under the merit system. County policies do not clearly define how these authorities interact, resulting in differing interpretations between DASO and County Administration regarding hiring, discipline, and the operational authority of deputies. As identified in the Schedule of Findings, this lack of clarity contributed to disputes, delays, and litigation related to the commissioning of deputies and the Sheriff's ability to remove or limit commissions when necessary.

Procedures also identified instances in which funds or donations associated with DASO activities were handled outside established County financial systems. These funds were not consistently processed through standard County oversight structures, raising concerns regarding transparency, accountability, and compliance with applicable constitutional and statutory requirements governing the use of public funds.

Additional observations include the Sheriff's limited participation in Board of County Commissioners (BOCC) meetings unless specific agenda items were present. While this practice was described as consistent with prior expectations, state statute requires attendance and such absence may limit opportunities for coordination between the Sheriff's Office and the governing body on matters affecting operations and public safety.

Of greater concern, the conditions described above are not isolated. Across the areas reviewed such as training, inventory, reporting, personnel processes, workplace conduct, and governance, the same

pattern is evident where DASO operations intersect with County administrative systems. In these areas, responsibilities and authority are not always clearly defined, and administrative processes are applied in a manner that does not consistently reflect or account for the Sheriff's statutory authority and operational responsibilities.

In particular, the absence of clear policy guidance regarding the interaction between the County's merit system and the Sheriff's authority to appoint, commission, and decommission deputies has contributed to ongoing disputes, delays, and litigation. These conditions reflect a broader governance issue involving the relationship between County administrative functions and the statutory authority of an elected official.

Without clearer definition of roles and alignment between administrative processes and statutory authority, there is increased risk of continued operational conflict, inconsistent application of policies, and exposure to legal and governance challenges affecting the County's ability to effectively support law enforcement operations and maintain public trust.

V. ASSESSOR'S OFFICE (DACAO)

The Assessor's Office is responsible for the valuation of real and personal property within the County and the maintenance of accurate and equitable property values for taxation purposes. This function includes administration of the Property Valuation Fund, which is funded through a statutory administrative fee of up to one percent and is restricted for use in support of valuation activities conducted pursuant to an approved valuation program.

Procedures performed included review of the Assessor's use of the Property Valuation Fund, related financial activity, and alignment of expenditures with statutory requirements governing property valuation functions. This work was conducted in accordance with the Special Audit scope related to the expenditure of public funds, compliance with applicable state laws, and evaluation of County elected officials and departments.

Based on procedures performed, it was observed that the Property Valuation Fund, which generates approximately \$1.5 million to \$1.7 million annually, has been used primarily to support personnel and routine operating costs within the Assessor's Office. In addition, certain expenditures reviewed included items such as car washes and employee-related purchases (e.g., boots, water), which were

not clearly supported as directly tied to valuation program activities. While some operational costs may be permissible when appropriately linked to valuation functions, documentation demonstrating a clear and consistent relationship between expenditures and an approved valuation program was limited.

Of greater concern, no comprehensive countywide reappraisal has been conducted since approximately 2008. Sections 7-36-16 and 7-38-38.1 NMSA 1978 require the Assessor to maintain current and accurate property valuations and to utilize the Property Valuation Fund in support of a defined valuation program approved by the Board of County Commissioners. The absence of a countywide reappraisal over an extended period of approximately 15 years represents a significant gap in fulfilling this core statutory responsibility. This extended lapse is also inconsistent with established professional practices for assessor functions in New Mexico, which emphasize ongoing revaluation planning, alignment of funding with valuation activities, and maintenance of current property values.

Without periodic reappraisal, there is an increased risk that assessed property values may not reflect current market conditions, resulting in potential inequities among taxpayers and challenges in maintaining a uniform and accurate tax base. This condition also limits the County's ability to demonstrate that it is meeting statutory requirements related to valuation maintenance and accuracy, particularly in the absence of a documented, long-term revaluation plan.

Despite the ongoing accumulation of valuation fund revenues, there was no documented long-term funding strategy or formal plan identifying how these resources would be reserved or deployed to support future reappraisal efforts or broader valuation program needs. During the audit period, the Assessor's Office presented information several times to the Board of County Commissioners related to valuation planning and/or use of valuation resources. In November 2025 the Board requested additional information and clarification regarding the plan as presented, indicating that further detail and support were necessary for evaluation and consideration.

The use of the Property Valuation Fund to support ongoing operational expenditures, without a clearly defined and approved valuation program, also raises broader funding considerations. To the extent that valuation fund resources are not demonstrably aligned with statutorily allowable valuation activities, the County may be required to rely more heavily on the general fund to support routine Assessor operations. This would shift the financial burden of personnel and administrative costs to the Assessor's general operating budget and may require the Board of County Commissioners

to reassess funding allocations to ensure both compliance with statutory restrictions and the sustainability of Assessor operations. This shift would represent a material change in how the Assessor's Office is funded.

The absence of a documented valuation program, including defined funding strategies and supporting allocation methodologies, limits the County's ability to demonstrate that expenditures from the Property Valuation Fund are fully aligned with statutory requirements under Section 7-36-16 NMSA 1978. State law requires the maintenance of accurate property valuations and restricts the use of valuation funds to activities conducted pursuant to an approved valuation program. This includes maintaining documentation and planning processes that demonstrate how valuation resources are applied to support assessment functions.

Procedures also identified operational challenges involving coordination between the Assessor's Office and Human Resources related to employee discipline and personnel actions. These challenges included delays and differences in interpretation regarding appropriate hiring and disciplinary processes, which affected the timeliness and consistency of employment-related decisions within the Assessor's Office. While Human Resources maintains responsibility for personnel administration support, the lack of clearly aligned processes and timely resolution of issues impacted operational efficiency.

The combination of extended gaps in reappraisal activity, limited documentation supporting fund usage, absence of long-term valuation planning, and operational coordination challenges increases the risk that the County may not be adequately positioned to demonstrate compliance with statutory requirements, maintain equitable property valuations, or effectively manage both financial and personnel-related functions within the Assessor's Office.

CORRECTIVE ACTIONS TO DATE

The County took corrective actions since the start of the special audit including, but not limited to:

- ✓ Engaged an external independent auditor to perform these special audit consulting procedures after the OSA designated the County for a special audit to assess the County's compliance with applicable laws, regulations, policies, and procedures.
- ✓ Implemented certain new policies and procedures.

- ✓ A resolution (2024-78) approving revisions to the internal audit advisory committee charter (June 2024).
- ✓ The BOCC approved contract for Workday Reimplementation services (April 2026).
- ✓ RFI for a Countywide Property Reappraisal Plan was published (March 2026).
- ✓ The BOCC approved an Information Security Engineer position to manage and support the County's information security program (March 2026)
- ✓ Hired a new County Manager (October 2024)
- ✓ Created a new division in Human Resources (Talent & Culture) to address hiring and culture issues that had been identified (October 2025)
- ✓ Approved a new HR Policies Manual (January 2026)
- ✓ Hired an external consultant to conduct a review of all potential component units for GASB compliance (January 2026)
- ✓ Requested Open Meetings Act training from NM Attorney General (April 2026)
- ✓ Requested Inspection of Public Records Act training from NM Attorney General (April 2026)

CONCLUSION

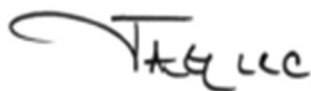
We were not engaged to, and did not conduct an audit examination, the objective of which would be the expression of an opinion on the accounting records of the County under attestation standards. Accordingly, we provide no opinion, attestation, or other form of assurance with respect to our work or the information upon which our work is based. The procedures performed do not constitute an examination in accordance with generally accepted auditing or attestation standards. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

We reserve the right to amend or supplement our findings should additional relevant information become available. This engagement does not warrant the accuracy, completeness, or timeliness of information obtained from third-party sources beyond our control, and we accept no liability for any loss or harm resulting from reliance on such information or the unavailability of such.

This report is intended solely for the information of the parties specified above, County management, and parties identified by the County's management and their designated legal counsel, and law enforcement agencies. This report should not be relied upon by any other party. JAG accepts no

responsibility to any other party to whom this report may be shown or who may otherwise gain access to this report.

We appreciate the opportunity to assist you in your assessment of these activities. JAG would like to sincerely thank the County's Elected Officials, Internal Audit Committee, Audit Liaisons, Manager, Administrators and other employees for their support in assisting us with our procedures.



Jaramillo Accounting Group LLC (JAG)
Albuquerque, New Mexico

EXIT CONFERENCE

The contents of this report were discussed on April 14, 2026 at the County offices in an Executive Closed Session meeting in accordance with the State Audit Rule. The following individuals were in attendance:

Doña Ana County, New Mexico

Manuel Sanchez, Commission Chair
Susie Kimble, Commissioner
Gloria Gameros, Commission Vice-Chair
Susana Chaparro, Commissioner
Christopher Schaljo-Hernandez, Commissioner (remotely)

Eric L. Rodriguez, Chief Deputy Treasurer
Judith Ann Baca, Probate Judge
Eugenia Montoya Ortega (Gina), Assessor

Ernest Budden, Internal Auditor
Jim Barentine, Internal Audit Advisory Committee
Robert Steinkamp, Internal Audit Advisory Committee Secretary
John Frye, Internal Audit Advisory Committee Vice-Chair

Scott Andrews, County Manager
Deborah Weir, Assistant County Manager
Stephen Lopez, Assistant County Manager
Lucio Luttrell, Interim Deputy County Manager
Cari Neill, County Attorney

Asma Dawood, Financial Services Director
Mireya Hernandez, Accounting Manager
Michael Perez, CPO Purchasing Manager
Lisa Collins, Payroll and A/P Manager
Marly Love, Financial Controller
Anne Blackburn, Purchasing Assistant
Crystal Baca, Budget Specialist

Kent English, IT Director
Meg Haines, HR Director
Ashley M. Suniga, Assistant HR Director Talent & Culture
Denisse Carter, Economic Development Director

Ben Mendoza, Detention Center Captain
Sean Heck, Interim Fire Chief

EXIT CONFERENCE (continued)

Doña Ana County Sheriff's Office (DASO)

Kim Stewart, Sheriff
Robert C. Parra, Undersheriff
Alfred Sanchez, Major
Michael Hinojosa, Patrol Captain
Abel Rodriguez, Captain
Joe Medina, Captain
Richard Drake, Captain
Jose R. Pacheco, Lieutenant
Milton Duran, Financial Consultant

Office of the State Auditor

Donna Trujillo, CPA, CISA, Deputy State Auditor (remotely)
Shawn Beck, CFE, CGFM, Special Investigations Director

Jaramillo Accounting Group LLC (JAG)

Audrey J. Jaramillo, JM, CPA, CFE, CFA, CMO, Managing Partner

	Board / Office / Department Key
DAC	Doña Ana County
BOCC	Board of County Commissioners
CMO	County Administration's Office of the County Manager and Assistant County Managers
FIN	Financial Services Department
HR	Human Resources Department
LEG	Legal/Risk Department
HHS	Health and Human Services Department
IA	Internal Audit Department
DACDC	Doña Ana Detention Center
DAFR	Doña Ana Fire Rescue
DASO	Doña Ana Sheriff's Office
DAAO	Doña Ana Assessor's Office
DATO	Doña Ana Treasurer's Office
DACO	Doña Ana Clerk's Office

Finding #	Finding Description (Material Weaknesses)
2026-001S	Independent Confidential Employee Survey Results Reflect Employee Concerns Regarding Organizational Conditions (DAC)
2026-002S	Timeliness of Hiring and Other Employment Decisions (DAC)
2026-003S	Noncompliance with County Policy Prohibiting Unauthorized Recording of Workplace Conversations (DAC)
2026-004S	Nonattendance of the Sheriff at Certain Board of County Commission Meetings (DASO)
2026-005S	Gaps in Law Enforcement Training Compliance and Training Program Oversight (DASO)
2026-006S	Discrepancies in Compliance with CALEA Policy Requirements and Accreditation Oversight (DASO)
2026-007S	Exceptions in DASO Inventory Documentation and Asset Accountability (DASO)
2026-008S	Failure to Submit Required Annual Electronic Communications Privacy Act Reports (DASO)
2026-009S	Controls Over Compliance with Fair Credit Reporting Act Requirements for Employment and Contractor Screening (DASO/HR)
2026-010S	Donations Received and Disbursed Outside County Treasury, Financial Controls, and DFA Reporting Requirements Resulting in Potential Anti-Donation Clause Violations (DASO/DATO/FIN)
2026-011S	NMSA 1978 Section 12-6-6 Potential Fraud, Waste, or Abuse Notifications to NM Office of the State Auditor (CMO)
2026-012S	Noncompliance with the New Mexico Inspection of Public Records Act (CMO)
2026-013S	Decentralized Complaint Investigation Structure and Absence of Inspector General Oversight (CMO)
2026-014S	Noncompliance with County Manager Directive Requiring Reporting by BOCC-Appointed Board Representatives (CMO)
2026-015S	Operational Challenges and User Readiness Issues Associated with Implementation of the County's Workday Enterprise System (CMO)
2026-016S	Internal Controls Over Monitoring and Use of Conflict-of-Interest Disclosures for Compliance with the New Mexico Governmental Conduct Act (CMO/FIN)
2026-017S	Untimely Investigation of Fraud Allegation and Other Complaints (LEG)
2026-018S	Inadequate Systems to Document and Monitor Workplace Misconduct Complaints (HR/LEG)
2026-019S	Internal Control Weakness Over Financial Reporting and GASB Technical Analysis (FIN)
2026-020S	Improper Accounting of CRRUA Joint Venture and Memorial Medical Center Restricted Funds (FIN)
2026-021S	Weaknesses in Procurement Documentation, Approvals, and Contract Review Controls (FIN)

2026-022S	Conflict-of-Interest Risk and Inadequate Authorization Controls Over Emergency Rental Assistance Program (ERAP)
2026-023S	Opportunities to Strengthen Controls Over Disbursements and Bank Account Changes (FIN/DATO)
2026-024S	Noncompliance with GASB Disclosure Requirements for Conduit Debt Obligations and Tax Abatement Agreements and Other Financial Reporting Issues (FIN)
2026-025S	Project Revenue Funds Required by Ordinance Were Not Established or Reported (FIN)
2026-026S	Non-Compliance with 2.2.2.10 NMAC Requirements for Other Supplementary Information in the Audited Financial Statements (FIN)
2026-027S	Non-Compliance with 2.2.2.10 NMAC Requirements For Joint Powers Agreement Disclosures in the Audited Financial Statements (FIN)
2026-028S	Use of the Statutory County Property Valuation Fund Primarily for Operational Expenditures Rather Than Long-Term Valuation Program Funding (DAAO/BOCC)
2026-029S	Equipment Accountability and Inventory Management Deficiencies Affecting Fire Rescue Operations (DAFR)
2026-030S	Procurement Compliance and Contract Oversight Deficiencies in Fire Apparatus Acquisitions (DAFR)
2026-031S	Failure to Maintain Pharmaceutical Inventory Records and Chain-of-Custody Controls for EMS Medications (DAFR)
2026-032S	Strengthening Monitoring and Completeness of Official Records for the County's Local Laws, Policies, and Agreements (DAC/DACO)
2026-033S	Lack of Detention Center Form Inventory Procedures and Fragmented Inventory Tracking Systems (DACDC)
2026-034S	Inadequate Controls Over Transmission of Sensitive Information Via Email (CMO)
2026-035S	Lack of Clear Policy Guidance and Documentation Standards for Public-Safety Candidate Evaluation (BOCC/DASO/HR)
2026-036S	Need for Clear Authorization Procedures for County Litigation and Conflict-Counsel Protocols in Matters Involving Adverse County Officials (BOCC/CMO)
2026-037S	Human Resources Policies and Procedures Require Updating and Consistent Implementation (BOCC/HR)
2026-038S	Need for Clear Policy Guidance Governing the Relationship Between County Merit System Authority and the Sheriff's Authority to Appoint, Commission, and De-Commission Deputies (BOCC/DASO/CMO)
2026-039S	Violation of Open Meetings Act (OMA) – Determination Regarding Evidentiary Hearing Made Outside a Public Meeting (BOCC/CMO)
2026-040S	Absence of a Formal Records Retention Policy (BOCC/CMO)
2026-041S	Clarification and Strengthening of Internal Audit Governance and Charter Provisions (BOCC/IA)
2026-042S	Strengthening Monitoring and Accountability Processes for Internal Audit Recommendations (BOCC/IA)

2026-001S INDEPENDENT CONFIDENTIAL EMPLOYEE SURVEY RESULTS REFLECT EMPLOYEE CONCERNS REGARDING ORGANIZATIONAL CONDITIONS (DAC)

Condition

As part of the Special Audit procedures, the audit team sought to obtain employee perspectives regarding organizational transparency, accountability, internal reporting conditions, and operational effectiveness. To encourage candid feedback and protect employee confidentiality, the independent Special Auditor distributed a confidential employee survey and compiled the results anonymously.

The Confidential DAC Employee Survey received 328 responses, and most core questions received between 293 and 321 responses, approximately 37% participation.

Survey results identified several organizational areas needing improvement. Examples of survey results include the following, which reflect employee perceptions reported through the confidential survey.

On the question evaluating confidence that employee concerns are handled objectively, the average score was 40 out of 100. Trust in leadership was also limited, with average scores of 53% for their Office or Department leadership, 42% for the County Manager Office leadership team, and 38% for the Board of County Commissioners.

Responses also reflected concerns regarding transparency and accountability in workplace decisions. The average score for whether promotions or pay increases are based on effectiveness and results was 25 out of 100. In addition, 39% of respondents reported awareness of situations in which conflicts of interest, family relationships, nepotism, or political influence may have affected employment decisions.

Operational and reporting concerns were also identified. 49.5% of respondents ranked the belief that “nothing will change” as the primary reason employees may avoid raising concerns, and 42.7% ranked fear of retaliation as the primary reason. Employees also identified communication not occurring or not being followed up (44.8%) and delayed leadership decisions (40.5%) as primary contributors to unresolved issues and breakdowns in cooperation between Departments.

Overall, the survey responses indicate opportunities to strengthen organizational transparency, accountability, internal reporting processes, and communication across Departments.

Criteria

Effective internal control environments in local governments require transparency, accountability, and clearly defined authority to ensure the proper stewardship of public resources and compliance with laws and regulations. The Committee of Sponsoring Organizations of the Treadway Commission (COSO) Internal Control Integrated Framework, originally issued in 1992 and refreshed in 2013 (ICIF-2013 or Framework), provides widely accepted guidance used by public sector entities, including local governments, to design, implement, and evaluate internal controls. In accordance with COSO (2013), Control Environment Principles 1–17 require integrity and ethical values, independent oversight, clearly defined authority, competent personnel, and accountability, all of which are critical to promoting effective governance, preventing misuse of public funds, and maintaining public trust.

Internal Control Component	COSO Principles
Control Environment	1. Demonstrates commitment to integrity and values 2. Demonstrates independence and exercises oversight responsibility

	3. Establishes structure, authority and responsibility 4. Demonstrates commitment to attracting, developing and retaining competent staff 5. Enforces accountability
Risk Assessment	6. Specifies suitable, specific objectives 7. Identifies and analyzes risks 8. Assesses fraud risk 9. Identifies and analyzes significant changes
Control Activities	10. Selects and develops control activities that help mitigate risks 11. Selects and develops general controls over technology 12. Bases controls on thorough policies and procedures
Information and Communication	13. Uses relevant, high-quality information 14. Communicates internally to support controls 15. Communicates externally
Monitoring	16. Conducts ongoing and/or separate evaluations 17. Evaluates and communicates deficiencies

An effective control environment is not achieved solely through the establishment of policies and structures, but through their consistent application and enforcement. Collectively, the COSO principles emphasize that organizations must foster a culture of integrity, maintain clear lines of authority and responsibility, and ensure that personnel are held accountable for their roles in the system of internal control. This includes creating an environment in which employees understand expectations, are supported by competent leadership, and are empowered to communicate concerns. A well-functioning control environment further requires that issues raised are evaluated objectively, addressed in a timely manner, and resolved in a consistent and transparent manner. When these elements are not present, the effectiveness of the overall internal control system is diminished, increasing the risk of errors, misconduct, and noncompliance with applicable requirements.

Cause Employee responses suggest that concerns regarding transparency, accountability, and internal reporting conditions may be influenced by perceptions that decision-making processes are not consistently communicated and that responsibility for addressing concerns or operational issues is not always clearly defined. Survey responses also indicate that employees may be discouraged from reporting concerns due to a belief that issues will not be resolved or due to concerns about potential retaliation. In addition, responses identifying communication breakdowns and delayed leadership decisions suggest that organizational processes for resolving issues and coordinating across Departments may not always function effectively.

Effect When employees lack confidence in transparency, accountability, and internal reporting processes, the effectiveness of the organization's control environment may be reduced. Employees may be less likely to report concerns internally and more likely to elevate issues through formal complaints, external oversight entities, or legal channels. In addition, communication breakdowns and delays in resolving issues may contribute to operational inefficiencies, recurring problems, and reduced coordination between Departments. Over time, these conditions may increase organizational risk and reduce confidence in leadership's ability to address concerns and implement corrective actions.

Recommendation Leadership should review the anonymous summary of survey results, compiled by the independent Special Auditor to protect employee confidentiality, and consider actions to

strengthen organizational transparency, accountability, internal reporting processes, and communication across Departments. This may include reviewing existing policies and procedures related to decision-making, complaint reporting, and issue resolutions to determine whether additional clarification, communication, or oversight mechanisms are needed.

Management should review its current system of internal control against the COSO Internal Control Integrated Framework (2013) and ensure that all components and principles are appropriately implemented and functioning as intended. This includes evaluating roles and responsibilities, strengthening communication and oversight, conducting regular risk assessments, and monitoring controls to confirm they are operating effectively. Management should also provide training and hold employees accountable for adhering to established policies and procedures. Consistent alignment with the COSO framework will improve transparency, accountability, and overall governance.

Leadership may also consider assessing whether employees clearly understand organizational reporting channels, authority structures, and expectations for addressing concerns, and whether processes for resolving reported issues and coordinating across Departments are functioning effectively.

The BOCC and Elected Office leaderships should consider collaborating to engage an independent third-party firm with expertise in organizational culture and workplace assessments to conduct a comprehensive employee survey by Office and Department. Utilizing an external provider will help ensure a more scientifically designed methodology, promote full anonymity, and ensure employee confidence in the integrity of the process. Another independent assessment can provide additional reliable insights and actionable recommendations to support meaningful improvements in workplace culture and organizational effectiveness.

**Management
Response**

Corrective Action:

- County Management agrees with the importance of promoting a safe and productive workplace for employees, ensuring transparency and accountability, and providing them with a safe way to report issues or concerns. The survey conducted in the Special Audit did not have the ability to link respondents to their departments, which limits the ability to conduct in-depth assessment of particular responses. For example, in the data presented above, knowing whether or not the respondent is working in an Elected department or under the County administration would be extremely helpful in identifying strategies to address the underlying problems.
- In pursuit of the ideals identified in this item, County Management commits to hiring an outside firm (one that currently has no ties to the County and that specializes in workplace culture measurement) to conduct a culture survey. Survey questions will be provided to the Board of County Commissioners for feedback prior to the survey being sent out in order to ensure areas of concern are being measured. An initial survey will be conducted by the date indicated below.

Due Dates of Completion: Company hired by August 15, 2026; Draft survey questions to the BOCC by October 15, 2026; Survey sent to employees by November 15, 2026; results provided to BOCC and County Management by December 15, 2026.

Responsible Party: Assistant Director of Human Resources

2026-002S

TIMELINESS OF HIRING AND OTHER EMPLOYMENT DECISIONS (DAC)

Condition

The County is experiencing delays in hiring and other employment-related decisions, which have contributed to elevated vacancy levels and operational challenges in several Departments and offices. Analysis of Human Resources (HR) recruitment data indicates that the median time from vacancy to employee start date was approximately 108 days, or about three and one-half months. Vacancy levels also increased substantially during the same period. Position control reports show that the number of vacant positions increased from approximately 24 vacancies in FY2021 to more than 100 vacancies by FY2023, indicating a significant increase in recruitment workload.

Workforce and recruitment data further indicate that the number of active recruitments processed simultaneously increased significantly during this period. Prior to FY2022, the County typically managed fewer than ten active recruits at one time. Beginning in FY2022, the number of concurrent recruitments increased substantially, reaching approximately 50 simultaneous recruitments during the surge period. These trends indicate increasing pressure on the County's hiring process.

Interviews with Department and office leadership indicated widespread frustration regarding the timeliness of HR processes, including recruitment, classification reviews, and compensation adjustments. Department and office leaders reported that the hiring process often requires multiple rounds of information requests and follow-up communications with Human Resources (HR), and in some cases additional requirements were introduced after initial submissions had been completed. These concerns were further attributed to a lack of clear, consistently applied policies and procedures governing HR processes, resulting in uncertainty regarding expectations and requirements. Additionally, the current structure centralizes significant authority within the HR function and Director, with limited formal checks beyond supervision by the County Manager, which may contribute to delays and inconsistent application of requirements.

During audit procedures, it was also noted that information requested from HR was sometimes delayed or not provided until multiple follow-up requests were made, and in some cases the information provided was incomplete. These issues limited the ability to obtain documentation efficiently and understand the status of certain personnel actions.

The data also indicates that responsibility for delays is shared between HR and Departments and offices. HR is responsible for coordinating recruitment activities, ensuring compliance with personnel policies, and processing employment actions. However, Departments and offices are responsible for several key steps in the hiring process, including preparing recruitment materials, developing interview questions, scheduling interview panels, and selecting candidates. Analysis of the hiring workflow indicates that Department- and office-controlled steps account for approximately half of the total hiring timeline, particularly the time required to prepare interview materials and schedule interview panels.

Additionally, employees seeking pay increases or position reclassification must undergo a "desk audit," which is a review of job duties used to determine whether a position should be reclassified or receive a salary adjustment. Interviews indicated that some employees perceived this process as slow to resolve, and in some cases, employees left County employment when opportunities for advancement or compensation adjustments were not realized in a timely manner.

Overall, the combination of high vacancy levels, complex procedural requirements, delayed information exchange, and shared responsibilities between HR and Departments and offices has contributed to extended timelines for hiring and other employment-related decisions.

Criteria	The County's personnel policies and procedures establish the responsibilities of Human Resources and Departments and offices in administering recruitment, classification, and compensation processes. The Doña Ana County Ordinance 235-[20]08 and within the County's Code adopted through Ordinance 235-2011, with local legislation through 06-24-2025, Chapter 45, Human Resources, Section 8 A provides, "The Human Resources Director, with approval from the County Manager and the Board of County Commissioners by resolution, shall establish, maintain, and publish Human Resources Policies to facilitate implementation and maintenance of, and compliance with, the policies expressed within the ordinance. The Human Resources Policies will be reviewed periodically and may be modified or discontinued at any time by the Board of Commissioners by resolution. The Human Resources Policies shall not constitute a contract of employment." Section 8 B provides, "The procedures authorized to be implemented include, but are not limited to: the classification of all County positions based on the duties, authority and responsibilities of each position; provisions for reclassification, assignment, transfer, and layoff of any person whenever warranted by changed circumstances; methods for determining the qualifications of candidates for appointment or promotion; policies and procedures regulating corrective action, up to and including termination, of employees; the hours of work and attendance; regulation and provisions for benefits; policies regarding training and other programs; and other practices and procedures including interpretation of applicable provisions of the ordinance necessary to administer same." Section 8 C states, "Elected Officials and Department Directors are authorized to promulgate operational policies and procedures specific to their department functions, subject to the review and approval by the County Manager and provided such policies and procedures do not conflict with the terms of this Ordinance or the Human Resources Policies." The Doña Ana County Human Resources Policies and Procedures, Amended 2019, Section 3-1 Recruitment, further provides, "Recruitment efforts shall be planned and carried out in a manner that assures open competition based on merit principles. Development and implementation of recruitment plans shall be a cooperative venture between Departments and the Human Resources Department and shall be based on projected workforce needs and labor market conditions."
Cause	The delays in hiring and other employment-related decisions appear to result from a combination of increased workforce turnover, higher recruitment workload, and multi-step personnel processes requiring coordination between multiple parties. Workforce data indicates that the County experienced a surge in employee separations beginning in FY2022, which resulted in a substantial increase in vacant positions. Position control reports show vacancies increasing from approximately 24 positions in FY2021 to more than 100 positions by FY2023, creating a significantly higher recruitment workload for both HR and Departments and offices. The initial increase in vacancies appears to have been driven by employee separations, while the extended time required to fill positions contributed to vacancies remaining elevated in subsequent years. At the same time, the number of active recruitments increased substantially. Analysis of recruitment activity indicates that the County moved from managing fewer than ten concurrent recruitments prior to FY2022 to approximately fifty active recruitments during the surge period. As vacancy levels and recruitment workload increased, positions remained open longer while recruitment activities were completed. The County's hiring process involves several sequential steps requiring coordination between HR and Departments and offices, including requisition preparation, recruitment posting,

development of interview questions, scheduling of interview panels, candidate selection, background checks, and final employment processing. While multiple parties participate in the hiring process, delays occurring at any stage of the process can extend the overall hiring timeline.

In addition, personnel actions such as position reclassifications and compensation adjustments require a desk audit process, which involves documentation review and coordination between HR and Departments and offices. The absence of clearly defined timelines or service-level expectations for these processes may contribute to delays in initiating or completing these reviews.

Finally, the County recently transitioned to a new human resources information system, which has required adjustments to workflows and procedures as the system continues to be implemented and optimized. During this transition period, some processes may still be evolving, which can contribute to additional processing time.

Effect

Delays in hiring and other employment-related decisions contribute to prolonged vacancies across Departments and offices, increasing workload pressures on remaining employees and limiting the ability of organizational units to maintain optimal staffing levels. As positions remain unfilled for extended periods, duties must be redistributed among existing staff, which can result in operational inefficiencies, reduced service capacity, and increased risk of employee fatigue or burnout.

Extended timelines for personnel actions such as classification reviews and compensation adjustments may also negatively affect employee morale and retention. Interviews indicated that some employees perceived limited opportunities for timely advancement or compensation adjustments, and exit interview data shows that employees frequently cited better opportunities and higher compensation elsewhere as reasons for leaving County employment.

Prolonged vacancies may also affect recruitment efforts, as Departments and offices must balance operational responsibilities while participating in the hiring process. These conditions can make it more difficult for the County to recruit and retain qualified employees in a competitive labor market.

Recommendation

The County should evaluate and streamline its hiring and personnel action processes to improve timeliness and transparency. This evaluation should include a review of recruitment workflows, classification review procedures, and compensation adjustment processes to identify opportunities to reduce unnecessary steps, clarify responsibilities between HR and Departments and offices, and improve the efficiency of information exchange.

Specifically, the County should consider the following actions to improve coordination between HR and Departments and offices:

1. Establish clear service-level expectations for key HR processes, including recruitment processing, desk audits, and other personnel actions, so that organizational units have a clear understanding of expected timelines.
2. Clarify process ownership and responsibilities for each stage of the hiring process, including requisition preparation, interview panel scheduling, candidate selection, and employment processing.
3. Implement workflow tracking and status reporting within the County's HR information systems, including Workday, to provide greater visibility into the status of recruitments and other personnel actions. A dashboard available to all Departments may be helpful.

4. Evaluate the current recruitment workflow to identify opportunities to streamline documentation requirements and reduce repeated information requests, while maintaining compliance with personnel policies and applicable regulations.
5. Monitor key workforce metrics, including vacancy rates, time-to-hire, and recruitment workload, to help identify emerging staffing pressures and support more effective workforce planning.
6. Continue performing exit interviews and analysis to assist in determining causes of turnover trends.

Improving process clarity, transparency, and workflow management would help reduce delays, support more timely hiring decisions, and improve communication regarding the status of personnel actions.

**Management
Response**

Corrective Action:

- County management agrees that hiring and personnel actions are shared responsibilities between Human Resources (HR) and Departments and offices, and with the audit recommendations. The vacancy rate in FY 2021 was unusually low due to the COVID-19 pandemic. When work-from-home was lifted, the vacancy rates returned to the ~100 vacancies per year level. With that said, there was also significant workload placed on the HR team during this timeframe due to the high school summer intern program, resulting in significant strain on personnel. (NOTE: As of Summer 2026, the State has taken over many aspects of the summer intern program, thereby significantly reducing the HR burden.)
- The County has already implemented structural and operational improvements to address these challenges. The Human Resources Department has reorganized to establish a centralized Talent and Culture (T&C) Division responsible for recruitment functions. This change was designed to improve consistency, accountability, and service delivery across departments. As a result of these efforts:
 - The County has achieved a 49% improvement in overall time-to-hire
 - A centralized HR ticketing system has been implemented to improve communication and transparency
 - Standard Operating Procedures (SOPs), job aids, and Workday Learning training are being developed to clarify roles and expectations
 - A data analyst position has been added to monitor workforce metrics and trends
 - Compensation and Classification reclassification processes have been more closely aligned with departments to improve turnaround times
 - Recent internal data further demonstrates improvement in personnel action timelines. Analysis of compensation and classification for reclassification actions shows:
 - 67-day average turnaround time (7/29/2024 – 12/30/2025)
 - 15-day average turnaround time (1/5/2026 – 2/26/2026)
 - This reflects a substantial reduction in processing time following process improvements and organizational changes.
 - Management also clarifies that job descriptions are reviewed prior to posting to ensure they are current and accurate. A formal “desk audit” is not required in all cases but is conducted when changes in duties or scope warrant reclassification under County policy.
 - Management notes that public safety hiring timelines are not directly comparable to general workforce benchmarks due to additional requirements such as background investigations, psychological evaluations, medical clearances, and physical testing. External benchmarks support this distinction:

- SHRM Public sector average time-to-fill: 119-132 days (western U.S.)
- ICMA guidance for public safety hiring: 120–180 days
- Based on these benchmarks, public safety hiring timelines are consistent with industry norms and reflect the rigor required for safety-sensitive positions.
- While departments play an essential role in candidate selection and operational input, management recognizes that decentralized recruitment activities can increase the risk of inconsistent application of policies and documentation standards. Accordingly, the County will continue evaluating opportunities to further align recruitment functions under the Talent and Culture Division to ensure consistency, compliance, and accountability.
- Corrective Action Plan
- The County will implement the following actions to address the audit findings:
- Standardize and clarify hiring procedures
- Update and formalize SOPs for both public safety and non-public safety recruitment processes
- Engage subject matter experts (SMEs), as appropriate, to support development of specialized procedures
- Deliverable: Updated and published SOPs for recruitment processes
- Define roles, responsibilities, and expectations
- Clearly document responsibilities at each stage of the hiring and personnel action process
- Provide training to supervisors and hiring managers, including legal requirements and process expectations
- Deliverable: Documented roles and responsibilities and completed training materials
- Establish service-level expectations
- Define target timelines for key HR processes, including recruitment, reclassification reviews, and compensation actions
- Deliverable: Published service-level expectations for HR processes
- Enhance system tracking and transparency
- Expand Workday utilization to improve workflow tracking, reporting, and visibility
- Develop dashboards accessible to departments to monitor recruitment and personnel action status
- Deliverable: Workday workflow enhancements and departmental dashboards implemented
- Streamline workflows and reduce inefficiencies
- Evaluate recruitment and personnel action workflows to eliminate redundant steps and reduce repeated information requests
- Deliverable: Documented workflow improvements and updated process maps
- Strengthen workforce analytics and reporting
- Provide regular reporting to County leadership on vacancy rates, time-to-hire, and exit interview trends
- Continue leveraging data analytics to identify bottlenecks and improve decision-making
- Deliverable: Standardized workforce metrics reports and annual reporting process established

Due Dates of Completion:

- Standardize and clarify hiring procedures: May 31, 2026
- Define roles, responsibilities, and expectations: May 31, 2026
- Establish service-level expectations: May 31, 2026
- Enhance system tracking and transparency: April 30, 2026

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- Streamline workflows and reduce inefficiencies: July 31, 2026
 - Strengthen workforce analytics and reporting: June 30, 2026
-

Responsible Parties: Assistant HR Director (Talent and Culture), Assistant County Manager

2026-003S	NONCOMPLIANCE WITH COUNTY POLICY PROHIBITING UNAUTHORIZED RECORDING OF WORKPLACE CONVERSATIONS (DAC)
Condition	During the course of audit procedures and employee interviews, we identified that employees recorded conversations with individuals in their supervisory chain of command. These recordings were made without express written authorization from the County Manager. Such recordings are not consistent with the requirements of the County's Human Resources Policies and Procedures Manual. Based on information obtained during the audit, the recordings did not appear to fall within any of the limited exceptions permitted under County policy.
Criteria	The Doña Ana County Human Resources Policies and Procedures Manual, Section 6-32, Recording of Conversation, states, "Video and/or audio recording of conversations or other activities in the workplace is prohibited unless express written permission has been given by the County Manager except where required by law or contractual agreement with a collective bargaining unit, with the exception of required recordings for internal affair's investigative interviews and predetermination hearings." DASO CALEA Policy 100-034, Section F, Restrictions, "Recording devices shall not be used to record any of the following: 1. Encounters with undercover personnel or confidential informants. 2. Any court proceeding, unless court security officers or deputies are required to act to control persons interrupting the court room environment. 3. Personal activities or private conversations of DASO personnel that do not involve a law enforcement or investigative encounter. 4. Conversations between DASO personnel, without all parties knowing the encounter is being recorded, or unless authorized by the Sheriff as part of an internal affairs investigation. 5. Daily briefings or conversations between DASO personnel that involve intelligence dissemination, case strategy, or tactics.
Cause	Employees recorded workplace conversations without obtaining the required written authorization from the County Manager as required by County policy. In addition, the County did not appear to have sufficient controls to ensure consistent communication, monitoring, and enforcement of the policy. Information obtained through employee interviews and survey responses also indicated concerns related to communication, trust, and workplace culture in certain areas of County operations, which may contribute to employees recording conversations with supervisors or other employees.
Effect	Unauthorized recordings of workplace conversations may undermine supervisory authority and internal workplace policies intended to protect employee privacy and maintain professional workplace conduct. Such actions may contribute to workplace disputes, increase the likelihood of personnel grievances or litigation, and complicate the County's ability to address employee performance, disciplinary matters, and workplace concerns in a structured and consistent manner.
Recommendation	Management should reinforce the requirements of Section 6-32 of the County's Human Resources Policies and Procedures Manual and ensure employees clearly understand that recording workplace conversations without written authorization from the County Manager is prohibited except in the limited circumstances identified in the policy. The County should also ensure consistent enforcement of workplace conduct policies and consider incorporating this requirement into employee training, supervisory training, and employee acknowledgements of County policies to promote compliance and accountability. In addition, the County may wish to review Section 6-32 to determine whether revisions or clarifications are appropriate to address workplace concerns while maintaining appropriate protections for employee privacy and

workplace conduct, including consideration of whether the policy should clarify the treatment of recordings associated with legally protected activities or lawful reporting of misconduct.

**Management
Response**

Corrective Action:

- County management agrees with the need to enforce policies in a consistent manner. As a result of the Special Audit, County management has also discussed the potential value in allowing recordings in certain situations in order to ensure transparency and fairness. This may broaden the allowances, such as allowing an employee to record interviews and disciplinary meetings with supervisors as long as notice of the recording is provided. At the same time, there is a need to protect confidentiality of information in a number of circumstances, as well as a need to consider external requirements like state statutes regarding body cameras and CALEA accreditation of DASO that need to be taken into consideration.
- County management will review a possible change to the policy by June 30, 2026, and if necessary seek Board of County Commissioner approval. Either way, County management will direct Human Resources to schedule regular policy reminders to all staff of key policies, including this one.

Due Date of Completion: June 30, 2026

Responsible Party: Asst. Director of Human Resources – Talent & Culture

2026-004S	NONATTENDANCE OF THE SHERIFF AT CERTAIN BOARD OF COUNTY COMMISSION MEETINGS (DASO)
Condition	During our audit procedures, we noted that the Sheriff does not routinely attend meetings of the Board of County Commissioners unless the Sheriff has an agenda item or matter to present. During inquiry, the Sheriff indicated that attendance at commission meetings has not historically been expected unless the Sheriff had business before the Commission and most of the elected officials, including herself, watch the live stream from their respective Offices. The Sheriff further indicated that she had not previously been advised of the statutory requirement to attend commission meetings and that training on applicable New Mexico laws for newly elected sheriffs was not provided following her election. This observation is not intended to question the independence of the Office of the Sheriff, but rather to note the statutory duty established under New Mexico law and to promote awareness of responsibilities intended to facilitate coordination between elected officials and the governing body of the County.
Criteria	NMSA 1978 § 4-41-16(C) states: “The sheriff shall attend the meetings of the board of county commissioners.” State statutes establish duties and responsibilities of county officials to ensure coordination between elected offices and the governing body of the county. Attendance of the Sheriff at commission meetings provides an opportunity for coordination between the Sheriff’s Office and the governing body of the County regarding law enforcement operations, public safety matters, and budgetary or policy decisions affecting the Sheriff’s Office.
Cause	The Sheriff indicated that the statutory requirement for attendance at commission meetings had not previously been communicated and that training regarding New Mexico statutory responsibilities for newly elected sheriffs was not provided following her election.
Effect	When the Sheriff does not routinely attend meetings of the Board of County Commissioners as referenced in statute, the County may not be fully complying with statutory provisions governing the duties of the sheriff. In addition, the absence of the Sheriff at commission meetings may limit opportunities for communication and coordination between the Sheriff’s Office and the governing body on matters affecting law enforcement operations, budgeting, and public safety.
Recommendation	The Sheriff’s Office and County administration should review statutory responsibilities applicable to the office of sheriff to ensure awareness of requirements established under New Mexico law. The Sheriff should attend meetings of the Board of County Commissioners in accordance with NMSA 1978 § 4-41-16(C), unless otherwise excused by the Commission. If the Sheriff is unable to attend a commission meeting, a representative from the Sheriff’s Office could attend on behalf of the office. Additionally, the County may consider providing guidance or training for newly elected officials regarding statutory responsibilities applicable to their offices to promote awareness and compliance with state law.
Management Response	Corrective Action: • The statute 4-41-16 (c) requires the Sheriff to attend BOCC meetings and further provides additional attendance compensation for the Sheriff from general funds. • The Sheriff reviewed the findings and then became aware of the requirements. She received no information about this from the New Mexico Association of Counties orientation for newly elected county officials when attended in December 2018. This was the only state training or orientation ever received after being elected twice. • In the future, the Sheriff will be attending BOCC meetings. Attendance will start in April 2026. It appears the Sheriff’s presence at these meetings will have had a positive financial impact on improving communications.

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- The Sheriff or her designee will be present at the April BOCC meetings. The Sheriff expects to attend both BOCC meetings in May 2026.
 - County management agrees with the recommendation. In the past, training for elected officials has been left up to the specific affiliate sections of the New Mexico Association of Counties. County management will establish a formal onboarding process for elected officials via the HR Talent & Culture division.
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Due Dates of Completion: April 2026 / January 2, 2027

Responsible Parties: Sheriff / Assistant Director of Human Resources – Talent & Culture Division

2026-0055 GAPS IN LAW ENFORCEMENT TRAINING COMPLIANCE AND TRAINING PROGRAM OVERSIGHT (DASO)
Condition

Approximately 40% of active Doña Ana County Sheriff's Office (DASO) personnel training files were reviewed, consisting of 54 personnel files selected at random by the Auditor with no influence by any personnel employed by Doña Ana County, to evaluate compliance with mandatory in-service training requirements and related training documentation practices.

As of October 2025, DASO employed approximately 155 deputies and 33 reserve deputies. Training records reviewed were compared between DASO electronic tracking spreadsheets, ACADIS training records, and hard-copy personnel files.

A total of 99 discrepancies were identified within the 54 personnel files tested, including instances in which required training was not completed within required timeframes or training certificates were not maintained within personnel training files or electronic tracking records.

DASO demonstrates strong compliance in several mandatory training areas, including Use of Force training and firearms qualifications. However, gaps were identified within core statutory training categories including Safe Pursuit, Domestic Violence, Hate Crimes, DWI enforcement, and Child Abuse/Safety training.

Results identified from personnel files reviewed are summarized below:

Training Category	Result Identified During Testing
Verification of Law Enforcement Officer Certification	One certification missing from a lateral transfer file
Safe Pursuit Training	Eight deputies lacked required training; overdue approximately one to four months
Domestic Violence Training	Twelve deputies lacked mandatory training; most two to three months past due with one approximately six months past due
Hate Crimes Training	Two deputies deficient or certificates not filed in training file
DWI / SFST Refresher / ARIDE	Eight deputies deficient or certificates not filed in training file
Child Abuse / Safety Training	Ten deputies deficient or certificates not filed in training file
Use of Force Training	Four deputies deficient or certificates not filed in training file; one greater than six months past due
Day/Night Firearms Qualifications	All files reviewed reflected deputies fully qualified and well documented
Interactions with Persons with Mental Impairments	Four deputies deficient or certificates not filed in training file
Trauma / Tourniquet / First Aid	Four deputies deficient or certificates not filed in training file

Based on testing performed, overall mandatory training compliance among personnel files reviewed was reported as 87.5%, reflecting 12.5% non-compliance.

Recommended training was also identified as incomplete across personnel reviewed, creating opportunities to strengthen readiness in crisis response, duty-to-intervene expectations, and medical-aid responsibilities. Training areas identified as incomplete or lacking documentation

	included defensive tactics training, TASER training, naloxone training, and specialized training participation. These training areas are not minimum statutory requirements but were included in testing as areas supporting operational readiness and risk reduction. Specialized training was identified as lacking documentation for several deputies. The report notes that specialized training allows law enforcement officers to advance in areas of specific professional interest and may reduce operational risk while improving personnel morale. The report further notes that subsequent completion of training or addition of certificates after the review period may increase overall compliance levels.
Criteria	Per NMSA 1978, Section 29-7-7.1(A), "To maintain certification as a police officer, in-service law enforcement training is required. In-service law enforcement training consists of a minimum of forty hours of academic instruction approved by the council for each certified police officer during each twenty-four month period of employment or service with a state or local law enforcement agency. The first required in-service law enforcement training period shall commence no later than twelve months after graduation from an approved basic law enforcement training program." Section 10.29.7.8 A of the New Mexico Administrative Code (NMAC) provides, "All New Mexico certified law enforcement officers shall receive a minimum of 40 hours of training bi-annually (every other year)." Mandatory annual and biennial training requirements for certified law enforcement officers are established under 10.29.9 NMAC as well, including safe pursuit training, domestic violence training, hate crimes training, DWI enforcement training, child abuse training, use of force training, and interactions with persons with mental impairments.
Cause	Observed clusters of overdue training items indicate insufficient supervisory follow-through, lack of automated reminders or centralized tracking, and potential normalization of overdue training requirements.
Effect	Incomplete completion or documentation of mandatory training requirements may jeopardize officer certification status, affect case integrity, increase legal exposure during law enforcement operations, and impact agency standing during audits or litigation. Incomplete participation in recommended training areas may further limit preparedness related to crisis response, intervention responsibilities, and provision of medical aid.
Recommendation	The Doña Ana County Sheriff's Office should strengthen supervisory monitoring and training tracking practices to ensure required in-service training is completed and documented within required timeframes. The County should also continue developing structured training tracking procedures, consider implementation of automated training tracking software with notification capabilities, and require supervisory personnel to conduct periodic training audits to ensure required training is completed and properly documented.
Management Response	Corrective Action: - The department has placed an experienced Advanced Training Sgt. as supervisor at the academy. This should stabilize leadership in the area. The Sgt. has held these duties and has past expertise in the field and will monitor the spreadsheet that identifies the documents and requirements of each deputy/sworn personnel. - The deficiencies on the training records have been corrected and updated. - In addition, the New Mexico training portal, Acadis, has been noted as having updating delays. We will continue to monitor Acadis for pending updates. As of March 20, 2026, a new directive is in place that requires sworn personnel to be held responsible for their respective requirements.

- A new directive is also now in place that requires sworn personnel to be held responsible for their respective requirements.
- From: TA Major
- Sent: Friday, March 20, 2026 1:40 PM
- To: DASO-LE <DASO-LE@donaana.gov>
- Cc: Sheriff; Undersheriff
- Subject: Biennium training requirements

Greetings,

As we begin the new year and our biennium training cycle, we would like to take a moment to outline the updated training process, expectations, and timelines for all personnel.

PoliceOne trainings will be opening soon. All required PoliceOne courses must be completed no later than July 31, 2026, with no exceptions. Personnel are encouraged to begin these courses as soon as they become available and to make steady progress to avoid falling behind as the deadline approaches.

In addition to online training, in-person training sessions will be scheduled throughout the year. These trainings are mandatory, and all personnel are expected to attend and successfully complete them prior to the end of the calendar year. More information regarding dates, times, and locations will be provided as schedules are finalized.

Effective immediately, failure to complete assigned training within the designated deadlines will result in progressive disciplinary action. It is each individual's responsibility to ensure all required training is completed on time and documented properly.

If you have any questions or anticipate any issues meeting these requirements, please notify your supervisor as soon as possible so accommodations can be reviewed.

Thank you for your cooperation, professionalism, and continued commitment to meeting training standards.

TA Major
Patrol Division
Office (575)386-4321

- As of Jan 5, 2026, corrective action was initiated. A general directive issued on March 20, 2026, regarding self-monitoring of training requirements. As of April 1, 2026, personnel files are updated, and exceptions are being addressed.
- County management agrees with the recommendation, and will explore automated credential tracking for DASO and other departments, to include requirements for renewal or recertification for licensure or certification and automated notifications and reminders.

Due Dates of Completion: April 2026 / January 2, 2027

Responsible Parties: Major / Assistant Director of Human Resources – Talent & Culture Division

2026-006S	DISCREPANCIES IN COMPLIANCE WITH CALEA POLICY REQUIREMENTS AND ACCREDITATION OVERSIGHT (DASO)
Condition	A review of the Doña Ana County Sheriff's Office (DASO) CALEA policy framework, personnel interviews, and the December 2025 CALEA assessment identified recommended improvements related to compliance with accreditation standards and internal controls over policy management and accreditation oversight. Despite these exceptions, DASO remains in compliance with New Mexico state policies and procedures and substantially compliant with CALEA standards. The issues identified represent minor discrepancies noted during the most recent CALEA audit conducted in December 2025. • Biased Policing Directive (CALEA Standard 1.2.9): The agency's written directive limited biased policing training requirements to sworn personnel rather than including all affected personnel as required by the CALEA standard. • Continuity of Operations Plan (COOP) Training (CALEA Standard 46.1.13): The Sheriff's Office did not complete or document required Continuity of Operations Plan exercise training. The lack of documented training had also been identified during a prior CALEA assessment and remained unresolved at the time of the December 2025 review. • Evidence Audit Procedures (CALEA Standard 84.1.6): The Sheriff's Office conducted the required annual evidence audit simultaneously with a change-of-custodian audit rather than conducting the audits separately as required by CALEA standards. In addition, the sampling methodology used for high-risk property during the change-of-custodian audit did not meet the applicable standard requirements. • Policy Communication and Accessibility Controls: Policy revisions are communicated primarily through email notifications. Personnel reported that some staff may not consistently receive policy update notifications, and the Sheriff's Office does not maintain a centralized system requiring personnel to acknowledge receipt or review of policy changes. • Accreditation Program Management Structure: The Sheriff's Office does not maintain a dedicated CALEA Program Manager responsible for coordinating accreditation compliance, monitoring policy updates, maintaining documentation, and ensuring corrective actions are implemented. Their request went excessively back and forth with Human Resources and the job description was never finalized. Accreditation responsibilities are currently performed by a Document Technician (DOC TECH) in addition to other assigned duties. • Operational Guidance for Expanded Policy Framework: The Sheriff's Office maintains approximately 147 policies totaling approximately 963 pages under the CALEA framework. Personnel reported difficulty locating and interpreting policies within the manual, and the agency has not implemented simplified operational guidance such as condensed standard operating procedures or one-page summaries for higher-risk policies.
Criteria	The Commission on Accreditation for Law Enforcement Agencies (CALEA) establishes standards requiring agencies to maintain compliant written directives, conduct required training and exercises and follow prescribed procedures for inspections and evidence audits. CALEA Standard 1.2.9, Biased Policing, Agency directives must address biased policing and ensure training requirements apply to all affected personnel. CALEA Standard 46.1.13, Continuity of Operations Plan (COOP), Agencies must maintain a Continuity of Operations Plan and conduct periodic training or exercises to ensure personnel are prepared to implement the plan.

	CALEA Standard 84.1.6, Inspections and Reports, Agencies must conduct inspections and audits of property and evidence in accordance with established procedures, including separate audits for annual inspections and change-of-custodian events as required by applicable appendices. Additionally, effective internal control practices require agencies to establish administrative oversight, ensure policies are clearly communicated to personnel, and assign responsibility for monitoring compliance with accreditation and policy requirements.
Cause	The deficiencies appear to be attributable to the expansion of policies following adoption of the CALEA accreditation framework, limited administrative capacity dedicated to accreditation oversight, and the absence of a centralized system to track policy updates, staff acknowledgments, and required training exercises.
Effect	Without improvements to policy management and accreditation oversight processes, the Sheriff's Office may face increased risk of continued policy discrepancies, inconsistent implementation of CALEA standards, delayed corrective actions, and potential impacts to maintaining CALEA accreditation.
Recommendation	We recommend DASO strengthen internal controls over CALEA accreditation compliance and policy administration. Specifically, the office should: 1. Establish a dedicated CALEA Accreditation Manager position responsible for coordinating accreditation compliance, maintaining documentation, monitoring policy updates, and overseeing corrective actions. This should be implemented immediately, to reduce potential liability and to continue CALEA Certification; although a request for this was requested by DASO, it was stalled in red tape – the current Doc Tech should be given the same opportunity to promote either by T/A or PDP. 2. Evaluate opportunities to incorporate evidence-based practices into policy development and implementation to reduce operational burden while maintaining effective policy controls. 3. Develop concise operational guidance, such as one-page standard operating procedures or summaries for higher-risk policies, to assist personnel in navigating the expanded policy framework. 4. Implement procedures to ensure all affected personnel receive, review, and acknowledge policy updates and that required training and exercises, including COOP training, are completed and documented.
Management Response	Corrective Action: • Will develop a program to include all personnel as required by CALEA and to be conducted during calendar year 2026. • The COOP training is a multi-jurisdictional initiative. It currently does not exist. We designate points of contact within our agency to be responsive if the plan is implemented. • In the event of a change in personnel, an evidence audit will be conducted. We will follow this procedure of audits of personnel change and annual audits as required by CALEA. • The past three (3) year we have tried to create a new position CALEA manager. We will renew efforts to work with HR to fulfil this. It is our opinion that we have sufficient funds to accommodate this request. • At every briefing, additional policy training will be completed on how to maneuver through Power DMS . • On the last Wednesday of each month, the supervisors will access Power DMS and acknowledge any policy changes, directives and acknowledgements of training attendance. Supervisors will be held responsible for any pending issues. Monthly audits will be completed by the Major designate. • Our policy, although considerably long, is mandated to maintain CALEA accreditation.

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- On the last Wednesday of each month, the supervisors will access Power DMS and acknowledge any policy changes, directives and acknowledgements of training attendance. Supervisors will be held responsible for any pending issues. Monthly audits will be completed by the Major's, designate for the Sheriff's review.
 - County management will support a request for either allocation of a vacant position or a new position to the position of Accreditation Manager, and work with DASO to establish the job description and requirements for the position. It is not known if the current Doc Tech meets the requirements for such position or not, but if not, the County will work with DASO to explore a Professional Development Plan. This is consistent with the guidance provided to the Sheriff in an e-mail on November 20, 2024, which provided options on how to create/fill a CALEA Manager position.
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Due Dates of Completion: Beginning April 1, 2026 / January 2, 2027

Responsible Parties: Professional Development Service Lt. / Assistant Director of Human Resources – Talent & Culture Division

2026-007S	EXCEPTIONS IN DASO INVENTORY DOCUMENTATION AND ASSET ACCOUNTABILITY (DASO)
Condition	While this finding appears to be County-wide, the audit identified specific deficiencies in DASO inventories and capital assets. We did note that since taking office, the Doña Ana County Sheriff has taken certain steps to improve inventory accountability within the agency. DASO has made significant progress since 2021 and now reports inventory annually to County Finance as required. In 2021, the Sheriff established dedicated inventory positions after determining the agency did not have reliable records of what equipment it possessed or should possess. An inventory technician was hired in 2021 and a second technician was hired shortly thereafter to strengthen inventory oversight and improve compliance with inventory management requirements. Despite these improvements, the following exceptions were identified during the review of DASO inventory records and asset accountability procedures: • In September 2025, a lieutenant returned a trailer containing multiple items of specialized County equipment that were not recorded in any DASO inventory system or inventory records. The lieutenant retired shortly after returning the trailer. • Bomb squad inventory did not have documented inventory control records, and documentation of the most recent inspection was not available for review. • One obsolete Toughbook laptop that had been dismantled since approximately 2011 did not have supporting destruction or disposal documentation. • Inventory and capital asset records are maintained across multiple systems including an Excel spreadsheet, LERMS, Skills, and Workday. These systems are not integrated and require manual updates across platforms, increasing the risk of incomplete or inconsistent inventory records. • Vehicle values recorded in inventory continue to reflect original purchase values and are not depreciated, which may result in inventory records overstating the value of agency assets.
Criteria	NMAC 2.20.1.16, Annual Inventory, "A. At the end of the fiscal year, each agency shall conduct a physical inventory of its fixed assets consisting of those with a historical cost of five thousand dollars (\$5000) or more, under the control of the governing authority. B. This inventory shall include all property procured through the capital projects fund which are assigned to the agency designated by the director of the property control division as the user agency. C. All passenger vehicles must be included in the inventory process. This includes all vehicles leased from the transportation services division of the general services department as required by the "auditor's rule" Paragraph (8) of Subsection A of Section 2.2.2.12 NMAC. D. The inventory process shall produce a list of the property and the date and cost of acquisition. The annual physical inventory checks against losses not previously revealed and brings to light errors in records of accountability, but more importantly, a systematic physical inventory of fixed assets provides an opportunity for surveying their physical condition, with respect to their need for repairs, maintenance or replacement. E. The results of the physical inventory shall be recorded in a written inventory report, certified as to correctness and signed by the governing authority of the agency. In the process of conducting their fieldwork, the state auditor or independent public accountant under a contract approved by the state auditor may test the correctness of the inventory by generally accepted auditing procedures (Section 12-6-10A NMSA 1978)." DASO Policy 200.014 (H) (CALEA Standard 17.5.2), Inventory Control, "1. Inventory and control of DASO property is regulated by Doña Ana County policy. The Doña Ana County policy addresses managing and accounting for fixed assets, acquisitions, dispositions, tagging, physical inventory, accounting for fixed asset additions, and accounting for fixed asset disposals. 2. The DASO Asset Supervisor, Fleet Coordinator, Armorer, and Inventory Technician will maintain an inventory of issued Doña Ana County property. These individuals will complete inventory on an annual basis and the Sheriff or designee will be responsible for signing the inventory report. Inventory will be

	under the Department Manager's span of control. These individuals will keep stored items in a state of operational readiness and be responsible for overall maintenance. 3. The individual (or unit) to whom property is assigned will be responsible for ensuring that the items are in good operating condition, satisfactorily maintained per the item's specifications, and not expired by date or availability of use. If the individual or unit discovers that equipment or property is not in a state of operational readiness or not able to support operations, they will be responsible for bringing the matter to the attention of their immediate supervisor for further action."
Cause	These conditions appear to be the result of historical weaknesses in inventory tracking practices and the continued use of multiple non-integrated systems for maintaining inventory records. Manual data entry and reconciliation across systems increases the risk that items may not be consistently recorded or updated.
Effect	As a result, DASO may not have complete and reliable inventory records for all agency assets. This increases the risk that equipment may not be properly tracked, inspected, or disposed of and may result in inaccurate reporting of asset values.
Recommendation	We recommend DASO strengthen internal controls over inventory management by ensuring that all equipment is recorded in official inventory records, maintaining documentation for inspections and disposals, and improving reconciliation procedures between inventory systems to ensure records remain complete and accurate.
Management Response	Corrective Action: - We acknowledge that there was insufficient inventory in specialized county equipment. This is a remedy. Upon learning the deficiency. In addition, we will initiate efforts with IT and DAC to improve the operations of the County wide inventory through an acceptable program. We acknowledge that the current DAC systems are inefficient and duplicative. - We will immediately initiate efforts with IT and DAC to improve the operations of the County wide inventory system. An effective and operational acceptable program within a year is a goal. - County management agrees with the recommendation for better inventory control by all departments, especially those involving public safety. The County will continue to implement asset management using the Workday system to meet these needs.
Due Dates of Completion: April 1, 2026 and continuous / January 2, 2027	
Responsible Parties: DASO Budget Specialist/ Director – Financial Services	

2026-008S	FAILURE TO SUBMIT REQUIRED ANNUAL ELECTRONIC COMMUNICATIONS PRIVACY ACT REPORTS (DASO)
Condition	The Entity did not submit the annual reporting required pursuant to Section 10-16F-6 NMSA 1978 to the New Mexico Attorney General for calendar years 2021, 2022, and 2024. Required annual Electronic Communications Privacy Act (ECPA) reports were therefore not filed on or before the statutory deadline of February 1 for those reporting years.
Criteria	NMSA 1978, Section 10-16F-6(A) states: "A government entity that obtains electronic communication information under the Electronic Communications Privacy Act shall report to the attorney general beginning in 2021 and every year thereafter on or before February 1."
Cause	Management did not establish procedures or assign responsibility to ensure annual ECPA reporting requirements were tracked, prepared, and submitted in accordance with statutory deadlines.
Effect	Failure to submit required annual reports results in noncompliance with state law and reduces transparency and statutory oversight intended by the Electronic Communications Privacy Act. Required statewide monitoring by the Office of the Attorney General cannot occur when mandated reporting is not performed.
Recommendation	Management should implement formal compliance controls to ensure annual ECPA reporting is prepared, reviewed, and submitted to the Office of the Attorney General on or before February 1 each year, including assignment of responsible personnel and documented annual compliance verification.
Management Response	Corrective Action: - A consistent point of contact will be provided to the attorney general to ensure notice of compliance is acted on. In the past, the changes and turnover in personnel caused the email notice to be lost for action. This will ensure a timely response to any communications. - We have notified the Attorney General that the Office of the County Sheriff shall be the consistent point of contact for receiving all official communications from the Attorney General. The Sheriff shall assign the appropriate personnel to act on the requests.. - County management agrees with the recommendation and will evaluate software system opportunities to support tracking and automated reminders/notifications regarding this area.
Due Dates of Completion: April 2026 / January 2, 2027	
Responsible Parties: Sheriff / Director – Financial Services	

2026-009S	CONTROLS OVER COMPLIANCE WITH FAIR CREDIT REPORTING ACT REQUIREMENTS FOR EMPLOYMENT AND CONTRACTOR SCREENING (DASO/HR)
Condition	During our testing, we received information indicating that County practices involving background investigations and consumer reports obtained for employment or contractor screening purposes may not have fully complied with requirements of the Fair Credit Reporting Act (FCRA). Documentation was not consistently available demonstrating that required standalone disclosures, written authorizations, or adverse action procedures were performed or retained when consumer reports were obtained or relied upon for employment-related decisions. The County did not demonstrate that policies, supervisory review, or monitoring controls were in place to ensure compliance with federal requirements governing the procurement and use of consumer reports. Positions subject to background screening included roles with access to County facilities, systems, records, or inmate populations, increasing the importance of compliance with federally required employment screening safeguards.
Criteria	15 U.S.C. § 1681b(b)(2)(A), "A person may not procure a consumer report, or cause a consumer report to be procured, for employment purposes with respect to any consumer, unless (i) a clear and conspicuous disclosure has been made in writing to the consumer at any time before the report is procured or caused to be procured, in a document that consists solely of the disclosure, that a consumer report may be obtained for employment purposes; and (ii) the consumer has authorized in writing... the procurement of the report." 15 U.S.C. § 1681b(b)(3)(A), "...in using a consumer report for employment purposes, before taking any adverse action based in whole or in part on the report, the person intending to take such adverse action shall provide to the consumer to whom the report relates (i) a copy of the report; and (ii) a description in writing of the rights of the consumer under this subchapter." 15 U.S.C. § 1681m(a), "If any person takes any adverse action with respect to any consumer that is based in whole or in part on any information contained in a consumer report, the person shall (1) provide oral, written, or electronic notice of the adverse action to the consumer." Government Auditing Standards (GAGAS), paragraphs 6.03–6.04, Management of the audited entity is responsible for designing, implementing, and maintaining effective internal control...Internal control is a process...that provides reasonable assurance... of compliance with applicable laws and regulations.
Cause	The County did not establish formalized procedures or monitoring controls to ensure Fair Credit Reporting Act requirements were consistently applied and documented when consumer reports were obtained through third-party background screening providers.
Effect	Failure to comply with Fair Credit Reporting Act requirements exposes the County to increased risk of federal civil liability, statutory damages, employment disputes, and regulatory enforcement actions. Noncompliance involving positions with access to secure facilities, inmate populations, financial systems, or sensitive information increases governance and operational risk and may undermine confidence in County hiring and contractor screening practices.
Recommendation	The County should strengthen internal controls over employment and contractor screening processes by: 1. Implementing written policies addressing Fair Credit Reporting Act compliance; 2. Requiring standalone disclosure and written authorization prior to obtaining consumer reports; 3. Documenting pre-adverse and adverse action notification procedures; 4. Maintaining compliance documentation within personnel or contractor files; and

	5. Monitoring third-party background screening vendors for compliance with federal requirements.
Management Response	Corrective Action: - We will make concerted efforts to work with HR to ensure compliance with Fair Credit Reporting Act as external contracts are used. One of the goals is to standardize the cause for disqualification for employment. - We have communicated with HR to suggest a meeting time to address the findings and respond to the Auditor's recommendations and develop corrective actions and related timelines. - County management agrees with the recommendations. The HR Talent & Culture Division is already working on hiring process improvements (noted in other findings), and this will be incorporated, to include: - Review the SOP for FCRA compliance to ensure that it is up to date. - All recruitment activities should be overseen by the Human Resources Talent & Culture Division. Recruitment responsibilities in Fire & Rescue have already been transitioned to the Talent & Culture Division, and County management will be moving recruitment functions for the Detention Center in the near future. The Talent & Culture Division will work with DASO on developing a recruiting plan that meets the needs of DASO while realizing the benefits from a centralized recruiting effort (such as avoidance of the FCRA issues noted above). - Training will be provided to personnel involved in the recruitment and screening processes to ensure understanding and consistent application of FCRA requirements. - Human Resources Benefits & Compliance will implement periodic audits and documentation reviews to ensure compliance with FCRA requirements. - The County will continue to evaluate third-party background screening vendors to ensure compliance with federal requirements and County policies. Due Dates of Completion: April 2026 / January 2, 2027 Responsible Parties: Recruitment Coordinator, Major / Director of Human Resources, Assistant Director of Human Resources – Talent & Culture Division

2026-010S	DONATIONS RECEIVED AND DISBURSED OUTSIDE COUNTY TREASURY, FINANCIAL CONTROLS, AND DFA REPORTING REQUIREMENTS RESULTING IN POTENTIAL ANTI-DONATION CLAUSE VIOLATIONS (DASO/DATO/FIN)
Condition	The Doña Ana County Sheriff's Office received and disbursed donations through a bank account maintained outside the County Treasurer and Finance Department, resulting in the funds not being deposited through the County Treasurer, recorded in the County's accounting system, or included in financial reports submitted to the Department of Finance and Administration Local Government Division. Review of the Doña Ana County Code of Ordinances determined that the County has not established a policy governing the acceptance, deposit, or administration of donations by county Departments. Sheriff's Office personnel indicated the account was used to administer the Doña Ana Response Team (DART) emergency pass program, which provides temporary assistance such as hotel accommodations and basic necessities to victims of violent crimes. Because county employees received and disbursed the donations in their official capacities for a county-related purpose, the funds were subject to public-money requirements. Disbursements from the account for hotel accommodations and other necessities to or for the benefit of private individuals constituted violations of the New Mexico Constitution, Article IX, Section 14 (Anti-Donation Clause). Review of bank records from FirstLight Federal Credit Union showed the account maintained balances ranging from approximately \$4,800 to \$5,760 during the period reviewed. Transactions included payments for hotel accommodations, retail purchases for basic necessities, fuel purchases, and occasional ATM withdrawals used to provide emergency assistance to individuals.
Criteria	NMSA 1978 § 4-43-2, County Treasurer Duties, "The county treasurer shall keep: A. account of all money received and disbursed; B. regular accounts of all checks and warrants drawn on the treasury and paid; and C. the books, papers and money pertaining to his office ready for inspection by the board of county commissioners at all times." NMSA 1978 § 6-6-3, "Every local public body shall: A. keep all the books, records and accounts in their respective offices in the form prescribed by the local government division; B. make all reports as may be required by the local government division; and C. conform to the rules and regulations adopted by the local government division." NMSA 1978 § 6-6-2, "J. supervise the disbursement of funds to the end that expenditures will not be made in excess of budgeted items or for items not budgeted and that there will not be illegal expenditures; K. prescribe the form for all budgets, books, records and accounts for local public bodies; and L. with the approval of the secretary of finance and administration, make rules relating to budgets, records, reports, handling and disbursement of public funds or in any manner relating to the financial affairs of the local public bodies." 3.6.50.9 NMAC, Financial Reports, Local public bodies must submit quarterly financial reports to the Department of Finance and Administration Local Government Division through the Local Government Budget Management System. "F. The treasurer's office should work cooperatively with the county managers office or county finance department to ensure that reports are submitted accurately and timely."

	New Mexico Constitution, Article IX, Section 14 (Anti-Donation Clause), Neither the state nor any county, school district or municipality shall directly or indirectly make any donation to or in aid of any person, association or corporation except as otherwise permitted by law.
Cause	Sheriff's Office personnel established and administered the donation account to provide assistance to victims of domestic violence without coordinating with the County Treasurer or Finance Department, resulting in donations being received and disbursed outside the County's established financial controls and reporting processes.
Effect	Funds maintained outside the County Treasurer and Finance Department were not subject to the County's established internal controls, reconciliation procedures, procurement requirements, or oversight by the Board of County Commissioners. In addition, the activity was not included in financial reports submitted to the Department of Finance and Administration Local Government Division, resulting in incomplete financial reporting and reduced transparency of county-related financial activities.
Recommendation	The County should establish procedures requiring that all funds received by county personnel in their official capacity be deposited with the County Treasurer and recorded in the County's accounting system to ensure compliance with applicable financial controls, reporting requirements, and oversight by the Board of County Commissioners. The County should also develop written policies prohibiting Departments from establishing independent bank accounts and providing guidance on how donations intended for county-related purposes should be accepted, deposited, recorded, and disbursed. To facilitate continued support for victims in emergency situations, the County may consider coordinating with a qualified local nonprofit organization to receive and administer charitable donations intended for victim assistance. Utilizing a nonprofit entity to manage such donations can allow funds to be earmarked for victim support while avoiding conflicts with public finance requirements, procurement procedures, and constitutional restrictions related to the expenditure of public funds. In addition, the County may consider referring victims to the New Mexico Crime Victims Reparation Commission (CVRC), which administers statutorily authorized compensation programs that provide financial assistance to victims of violent crime for eligible expenses such as temporary lodging, medical care, counseling, and other emergency needs. Referrals to CVRC are commonly used by law enforcement agencies and victim advocates to connect victims with available financial assistance resources. The County may also evaluate whether victim assistance efforts currently associated with the Doña Ana Response Team (DART) program could be supported through partnerships with nonprofit victim advocacy organizations or through referrals to CVRC, allowing victims to receive emergency assistance while ensuring compliance with public finance and constitutional requirements.
Management Response	Corrective Action: - We concur and will send out directives on how staff must process monetary donations. Retrospectively, the funds were appropriately used and documented. A directive will be issued to ensure monetary funds are deposited to the Treasury Department for its intended use. - The Sheriff has issued a general directive for all staff to adhere to the requirements of the Anti-Donation requirements. Annually during the first staff meeting this topic will be reviewed as part of the general staff training sessions.

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- County Management agrees with the recommendations, and is committed to strengthening financial controls over funds received by County departments. There are multiple areas of the County where donations might be made, to include not only DASO, but also Fire Rescue and the new affordable housing project. County Management will evaluate Resolution 2017-53 for possible amendment or rescission/replacement to include all departments, and will draft and seek board approval of two resolutions outlining Bank Account Authorizations and Control Policy, and a Donations Policy. The long-term corrective plan is to update and produce financial policies that will incorporate both of these resolutions. The Office of Emergency Management has already established a partnership with the Community Foundation of Southern New Mexico for the purpose of supporting disaster victims, and the County will work with the Community Foundation to explore the possibility of their handling victims assistance funds, as well.
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Due Dates of Completion: March 20, 2026 / Near term Policy Resolutions and Discussion with Community Foundation of SNM – 6/30/2026

Financial Policies & Procedures Update – 6/30/2027

Responsible Parties: Major / Director – Financial Services, Treasurer

2026-0115	NMSA 1978 SECTION 12-6-6 POTENTIAL FRAUD, WASTE, OR ABUSE NOTIFICATIONS TO NM OFFICE OF THE STATE AUDITOR (CMO)
Condition	The County received complaints of potential fraud, waste, and/or abuse involving public funds and did not immediately notify the New Mexico Office of the State Auditor (OSA) as required. During the Special Audit, it was identified that County legal counsel had been notified in 2022 of an apparent misappropriation involving inmate trust fund accounts at the Doña Ana County Detention Center (DACDC). However, the County did not immediately notify the Office of the State Auditor of this apparent violation of a criminal statute in connection with financial affairs as required. Notification to OSA was not submitted until the issue was identified during the Special Audit, at which time the County subsequently submitted the required notification. Additionally, based on issues identified during the Special Audit related to the County's tracking, documentation, and follow-through of complaints and allegations, it appears the County may not consistently ensure that complaints involving potential fraud, waste, abuse, or other apparent violations of criminal statutes in connection with financial affairs are evaluated and reported to the Office of the State Auditor as required.
Criteria	Pursuant to Section 12-6-6 NMSA 1978 and 2.2.2.10(N)(2) NMAC Audit Rule, agencies are required to notify the Office of the State Auditor immediately upon discovery of an apparent violation of a criminal statute in connection with financial affairs. Section 12-6-6 NMSA 1978 states, "An agency shall notify the state auditor immediately, in writing, upon discovery of any violation of a criminal statute in connection with financial affairs." Per 2.2.2.10(N)(2) NMAC, "Pursuant to Section 12-6-6 NMSA 1978 (criminal violations), an agency, LPB, or IPA shall notify the state auditor immediately upon discovery of any apparent violation of a criminal statute in connection with financial affairs. If an agency or IPA has already made a report to law enforcement that fact shall be included in the notification. If not immediately known, a follow-up notification shall include an estimate of the dollar amount involved, if known or estimable, and a description of the apparent violation, including names of persons involved and any action taken or planned."
Cause	The County does not have clearly defined procedures to ensure complaints or allegations involving potential fraud, waste, abuse, or other apparent violations of criminal statutes in connection with financial affairs are promptly evaluated and reported to the Office of the State Auditor as required by Section 12-6-6 NMSA 1978 and the Audit Rule.
Effect	OSA may not be aware of these situations and therefore cannot properly perform its statutorily required oversight role. The County may not have accountability for corrective action if complaints or allegations of fraud, waste, abuse, or other apparent violations involving financial matters are not reported in accordance with statutory requirements. Failure to report such matters also increases the risk that potential violations of criminal statutes involving public funds may not be investigated or addressed in a timely manner.
Recommendation	We recommend the County develop and implement procedures to ensure compliance with Section 12-6-6 NMSA 1978 and 2.2.2.10(N)(2) NMAC requiring immediate notification to the Office of the State Auditor upon discovery of an apparent violation of a criminal statute in connection with financial affairs. Procedures should include clear responsibility for evaluating complaints and allegations, documenting actions taken, and ensuring that required notifications are submitted promptly.

**Management
Response**

Corrective Action:

- The County agrees with the importance of timely reporting and compliance with Section 12-6-6 NMSA 1978 and 2.2.2.10(N)(2) NMAC regarding the notification of the Office of the State Auditor upon discovery of any apparent violation of a criminal statute related to financial affairs. In reference to this incident, senior level management, the financial services department and the internal auditor were not made aware of the matter in a timely manner but reported it to the Office of the State Auditor upon discovery.
- While this issue was a lack of communication within and between county offices, the County is aware of reporting requirements and has reported fraudulent incidents to Office of the State Auditor upon discovery in the past. To strengthen controls, the County will develop and implement formal written procedures to ensure compliance with these requirements. These procedures will establish clear roles and responsibilities for evaluating complaints and allegations, including the designation of responsible personnel to assess potential violations, communication to senior management, Financial Services, and Internal Auditor. Additionally, the procedures require thorough documentation of all complaints received, actions taken, and conclusions reached.
- The County will also implement controls to ensure that any reportable incidents are communicated promptly to the Office of the State Auditor, including defined timelines for reporting and supervisory review to confirm compliance.

Due Date of Completion: June 30, 2026

Responsible Parties: County Manager, Internal Auditor, Director of Finance

2026-012S	NONCOMPLIANCE WITH THE NEW MEXICO INSPECTION OF PUBLIC RECORDS ACT (CMO)
Condition	During our audit procedures, we identified the instances listed below where the County did not fully comply with certain requirements of the New Mexico Inspection of Public Records Act (IPRA), NMSA 1978 §§ 14-2-1 through 14-2-12, including statutory response timelines and documentation of records provided. During testing of the County's responses to IPRA requests, we identified instances where responses were untimely, incomplete, inaccurately documented, or lacked sufficient documentation demonstrating fulfillment of the request. The County also has a lawsuit which was dismissed and re-opened in 2025 regarding alleged IPRA violations. Testing of approximately 130 IPRA requests identified the following exceptions. Of significant concern, we were unable to test approximately 20% of our sampled IPRA's. • Untimely Responses: 10 instances where responses did not meet statutory response timelines. • Incomplete or Inadequate Responses: 2 instances where responses did not clearly indicate whether all responsive records had been provided or whether additional responsive records existed. • Inaccurate or Misleading Response Documentation: 13 instances where the reason for closing the request was incorrectly recorded in the tracking system. In several cases, the response template indicated "All Response Documents Added," when the appropriate disposition would have indicated that no responsive records were available. • Lack of Documentation of Fulfillment: 16 instances where records were indicated as mailed or made available for pickup, but supporting documentation such as receipts or logbook confirmations could not be located to verify delivery. • Recordkeeping and Accessibility Issues: 8 instances where links to responsive records could not be opened, files were inaccessible, record log entries were incomplete, or staff were required to submit technical support tickets to retrieve emails or documents associated with the request. These conditions limited the County's ability to demonstrate that requests were fulfilled completely, accurately, and in accordance with IPRA requirements.
Criteria	NMSA 1978 § 14-2-1 provides, "Every person has a right to inspect public records of this state..." NMSA 1978 § 14-2-8(A), "Any person wishing to inspect public records may submit an oral or written request to the custodian. However, the procedures set forth in this section shall be in response to a written request. The failure to respond to an oral request shall not subject the custodian to any penalty." NMSA 1978 § 14-2-8(D), "A custodian receiving a written request shall permit the inspection immediately or as soon as is practicable under the circumstances, but not later than fifteen days after receiving a written request. If the inspection is not permitted within three business days, the custodian shall explain in writing when the records will be available for inspection or when the public body will respond to the request. The three-day period shall not begin until the written request is delivered to the office of the custodian." NMSA 1978 § 14-2-11(C), "A custodian who does not deliver or mail a written explanation of denial within fifteen days after receipt of a written request for inspection is subject to an action to enforce the provisions of the Inspection of Public Records Act and the requester may be awarded damages. Damages shall: (1) be awarded if the failure to provide a timely explanation of denial is determined to be unreasonable; (2) not exceed one hundred dollars (\$100) per day;

	(3) accrue from the day the public body is in noncompliance until a written denial is issued; and (4) be payable from the funds of the public body.” NMSA 1978 § 14-2-8(B), “If a written request has been denied, the custodian shall provide the requester with a written explanation of the denial. The written denial shall: (1) describe the records sought; (2) set forth the names and titles or positions of each person responsible for the denial; and (3) be delivered or mailed to the person requesting the records within fifteen days after the request for inspection was received.”
Cause	The issues identified appear to result from weaknesses in IPRA response procedures and documentation practices, including inconsistent use of response templates, incomplete documentation of fulfillment actions, and limited verification procedures to ensure response records accurately reflect the information provided to requestors.
Effect	Untimely responses, inaccurate response classifications, and incomplete documentation reduce the County’s ability to demonstrate compliance with the Inspection of Public Records Act. These conditions increase the risk of disputes regarding whether requests were fulfilled in accordance with statutory timelines and may expose the County to legal challenges, statutory penalties, or reduced public confidence in the transparency of County operations.
Recommendation	1. The County should strengthen internal controls over IPRA request management by: 2. Implementing standardized procedures for documenting fulfillment of requests, including maintaining receipts or confirmations for records mailed or picked up by requestors. 3. Ensuring response templates and closure codes accurately reflect the outcome of each request. 4. Implementing quality review procedures to verify that responses recorded in the tracking system match the records actually provided. 5. Providing training to staff responsible for IPRA responses regarding documentation requirements and statutory timelines. 6. Evaluating the current tracking system to ensure that records, attachments, and links associated with responses remain accessible and properly archived.
Management Response	Corrective Action: • County management agrees with strengthening controls and establishing robust practices related to handling of IPRA requests and disclosures. While not required by statute, County management understands the benefit of having robust documentation of responses and documents provided in order to demonstrate compliance to the NM Attorney General or a District Court judge, should there ever be a challenge. This is particularly true when 3rd party systems like Axon are utilized to meet a request, but no copy of the document is retained by the County. • The County has already approved the hiring of additional positions to support the centralization and standardization of IPRA requests and tracking. The County will request an in-person training from the NM Attorney General’s Office on IPRA (and Open Meetings Act) to help address any training gaps. The County will also implement standardized procedures for handling IPRA requests, to include handling of oversized documents/files. Finally, the County Manager will request an annual report on IPRA requests and compliance to ensure requests are being responded to in a reasonable amount of time. Due Dates of Completion: Request training from NMAG (schedule for FY2027) – 6/30/2026 Complete personnel hiring, conduct training, develop and implement procedures – 1/2/2027 Responsible Parties: County Manager, County Attorney

2026-0135	DECENTRALIZED COMPLAINT INVESTIGATION STRUCTURE AND ABSENCE OF INSPECTOR GENERAL OVERSIGHT (CMO)
Condition	During the course of Special Audit procedures and interviews, we observed that allegations of misconduct, policy violations, retaliation, fraud, abuse, and other concerns within the County are reported through numerous independent and uncoordinated channels. These channels include Department supervisors, Internal Audit, Internal Affairs, the County employee hotline, Human Resources, the County Compliance Officer position (when the position existed), the County Attorney’s Office, union grievance processes, and external complaints filed through courts or regulatory agencies. Because these reporting mechanisms operate independently and are housed within separate administrative structures, the County does not maintain a centralized investigative authority responsible for coordinating, tracking, and resolving allegations of wrongdoing. As a result, complaints may be investigated by different offices depending on where they are reported, and there is no centralized system to ensure consistency in investigative procedures, independence of review, or identification of patterns of misconduct across Departments. In governmental organizations where allegations of misconduct are reported through numerous independent channels, investigative responsibilities can become fragmented across Departments. When this occurs, governments frequently establish an independent Inspector General function to consolidate investigative oversight, ensure consistent investigative procedures, and provide a centralized authority responsible for coordinating investigations and identifying systemic issues. The absence of a centralized investigative authority increases the likelihood that complaints may be duplicated, inconsistently investigated, or insufficiently tracked across the organization.
Criteria	Best practices for governmental oversight recognize the importance of an independent investigative authority responsible for detecting and preventing fraud, waste, abuse, and misconduct. The Association of Inspectors General states in its Principles and Standards for Offices of Inspector General that Inspector General offices are established to provide independent and objective oversight to detect and prevent fraud, waste, abuse, corruption, and misconduct in governmental operations and to ensure allegations of wrongdoing are investigated through a consistent and impartial process. Several New Mexico municipalities have established Inspector General offices to consolidate investigative oversight and strengthen transparency and accountability. For example, the City of Albuquerque Code of Ordinances provides that: “The Office of Inspector General is created as an independent and non-partisan office of city government.” The Albuquerque Office of Inspector General is responsible for investigating allegations of fraud, waste, abuse, and mismanagement involving City operations. Similarly, the City of Las Cruces has established an Office of Inspector General through municipal ordinance with authority to receive complaints, investigate allegations involving City employees, officials, contractors, and vendors, and identify fraud, waste, abuse, or misconduct involving municipal operations.

Guidance from the Association of Inspectors General further provides that effective Inspector General offices should maintain:

- Structural independence from operational management
- Authority to receive complaints from employees and the public
- Authority to conduct or coordinate investigations involving fraud, abuse, misconduct, or retaliation
- Authority to identify systemic internal control weaknesses
- Authority to report investigative findings to governing officials

Cause

The County currently relies on a decentralized structure in which investigative responsibilities are dispersed across multiple Departments rather than coordinated through a single independent oversight authority.

Effect

Without a centralized Inspector General function:

- Allegations of misconduct may be investigated inconsistently depending on the reporting channel.
- Complaints may be duplicated, overlooked, or insufficiently tracked across Departments.
- Patterns of misconduct or systemic internal control failures may not be identified.
- Employees and members of the public may lack clarity regarding where to report allegations of wrongdoing.
- Investigative independence may be compromised when complaints involve individuals within the reporting chain.
- Employees may be reluctant to report misconduct if they believe complaints will be handled within the same management structure involved in the allegations.

These conditions increase the risk that fraud, waste, abuse, retaliation, or violations of County policy may not be detected or addressed in a consistent, transparent, and independent manner.

Recommendation

We recommend the Board of County Commissioners consider adopting an ordinance establishing an independent County Office of Inspector General (OIG).

The Office of Inspector General should be designed to coordinate investigative oversight across the County rather than replace existing functions such as Internal Audit, Human Resources investigations, Internal Affairs, or legal review. Instead, the OIG would serve as a centralized authority responsible for receiving complaints, determining the appropriate investigative pathway, and ensuring that investigations are conducted consistently and independently.

To ensure credibility and effectiveness, the Office of Inspector General should be structured to maintain organizational independence from County management. Structural safeguards commonly included in Inspector General ordinances include:

- Direct reporting authority to the Board of County Commissioners or an independent oversight body rather than to operational Departments.
- Clear appointment and removal procedures designed to protect the independence of the Inspector General and prevent retaliation resulting from investigative findings.
- Authority to access County records, employees, and other information necessary to conduct investigations.
- Maintenance of a centralized complaint intake and case tracking system.

- Explicit protections prohibiting retaliation against employees or other individuals who report concerns or cooperate with investigations.

Establishing an independent Office of Inspector General would strengthen the County's oversight framework by providing a transparent and impartial mechanism for receiving complaints, coordinating investigations, identifying systemic weaknesses, and improving accountability across County government operations.

**Management
Response**
Corrective Action:

- County Management agrees with the benefits of an independent office to receive and track complaints, and has already had an independent reporting system (the EthicsPoint Hotline) in place for years. This system is operated by a third party vendor, and overseen by the Internal Auditor. It offers completely anonymous reporting, thereby ensuring no retaliation is possible should an employee or other individual fear such. However, this system is not inclusive of all complaints received, and County management agrees with the need to have a single tracking system for all complaints that can be segmented by area to protect confidentiality.
- Implementation of an Inspector General function could be beneficial to the County, but it could also unintentionally circumvent supervisory responsibilities and authority if not properly structured. Elimination of grievance processes with collective bargaining units would also have to be negotiated and agreed upon. Further, hiring of an employee to serve as an Inspector General can leave a significant gap should the employee leave before a replacement is in office. As a result, it might be advantageous to consider using an outside firm/company to perform this function, rather than hiring a County employee. The County Manager will schedule a BOCC Work Session agenda item to discuss the best path(s) forward.

Due Date of Completion: Have BOCC Work Session by January 2027

Responsible Party: Financial Services Director

2026-014S	NONCOMPLIANCE WITH COUNTY MANAGER DIRECTIVE REQUIRING REPORTING BY BOCC-APPOINTED BOARD REPRESENTATIVES (CMO)
Condition	The audit identified that reporting requirements established for County employees appointed by the Board of County Commissioners (BOCC) to serve on external boards and committees were not consistently followed. County employees appointed by the BOCC to represent the County on boards are required to provide written reports summarizing board meetings and activities. Documentation demonstrating that these reports were consistently prepared and submitted during the audit period was not available.
Criteria	A County Manager Directive issued on September 18, 2024 established reporting requirements for County employees appointed by the BOCC to serve on external boards. The directive states: “Within one week of each board meeting, the County employee shall send an e-mail to the BOCC and County Manager containing a brief summary of the items discussed and actions taken.” The directive further requires that employees provide a semi-annual written report to the BOCC and County Manager summarizing board activities, including: • Number of meetings held by the board • Number of meetings attended by the County employee • Major topics discussed during the board meetings • Major actions taken during the board meetings • Any items of significant importance that the BOCC should be aware of These requirements establish that County employees representing the County on BOCC-appointed boards are expected to provide written reports to ensure that County leadership remains informed about board activities and actions.
Cause	Procedures were not established to ensure that reporting requirements for County employees serving on BOCC-appointed boards were consistently implemented or monitored. As a result, the County did not maintain a process to confirm that required reports were submitted.
Effect	Without documentation of board attendance reports, the County cannot demonstrate that BOCC-appointed representatives consistently communicated board activities and decisions to County leadership. The absence of these reports reduces transparency regarding actions taken by boards on which County employees serve and limits the County’s ability to maintain awareness of issues that may affect County operations, policy decisions, or matters of public interest.
Recommendation	The County should establish procedures to ensure that reporting requirements for employees appointed to serve on boards or committees are consistently implemented and documented. This may include re-implementing or updating the prior reporting requirement to ensure that written summaries of board meetings attended by County employees are provided to the BOCC and County Manager and retained in a centralized location for reference.
Management Response	Corrective Action: • When the new HR Policy Manual was approved by the BOCC in early 2026, it superseded County Manager directives. With that said, there has not been adequate analysis by the County to ensure all CM directives were either captured, or intentionally left out. The County Manager’s Office will conduct a review of all CM directives issued since 2019 to determine if the material they addressed is adequately covered in the new HR Policy Manual, or if additions are needed.

Due Date of Completion: August 1, 2026

Responsible Party: Office Manager – County Manager’s Office

2026-0155	OPERATIONAL CHALLENGES AND USER READINESS ISSUES ASSOCIATED WITH IMPLEMENTATION OF THE COUNTY'S WORKDAY ENTERPRISE SYSTEM (CMO)
Condition	During our Special Audit procedures and interviews with County personnel, multiple employees reported operational challenges associated with the County's implementation of the Workday enterprise resource planning (ERP) system, which became operational on July 1, 2024. The County initiated communication regarding the system implementation in October 2023 and provided training opportunities prior to system go-live, including both in-person and virtual training options. Training completion data indicates that a substantial number of employees participated in foundational training; however, completion levels varied across functional areas and user roles. Despite these efforts, personnel across several Departments reported that the system implementation and training process did not fully prepare staff for the transition from the County's prior financial management system at the time of implementation. Employees reported that user access roles frequently had to be created or modified following implementation, including the development of "read-only" access roles. Certain staff also reported that the system does not integrate effectively with certain existing County processes or external systems, resulting in additional manual steps and increased paper-based documentation in some financial processes. Employees responsible for financial processing reported difficulty locating approved invoices and purchase order documentation within the system. In some instances, invoices appeared to be linked to different purchase orders, creating confusion regarding document tracking and approval verification. Accounting personnel indicated that the system has a significant learning curve and that completing certain financial transactions requires more complex procedures than under the County's prior system. Personnel also reported that additional training and system support were needed following implementation to effectively perform their duties. Additionally, personnel from certain operational Departments reported that Workday does not currently support some Departmental needs, including the ability to effectively manage or track grants and certain inventory and capital assets activities. Overall, while training and communication efforts were conducted prior to implementation, employees interviewed during the audit consistently reported that the implementation timeline, system configuration, and user readiness activities did not fully prepare staff to efficiently utilize the system at the time of system go-live.
Criteria	The Government Finance Officers Association (GFOA) recommends that governments implementing enterprise resource planning (ERP) systems establish comprehensive implementation planning processes that include adequate system testing, user training, change management, and post-implementation support to ensure that personnel are prepared to effectively utilize the system. The Committee of Sponsoring Organizations of the Treadway Commission (COSO) Internal Control Framework states that information systems should support the organization's ability to carry out financial and operational responsibilities and provide personnel with the information necessary to perform their duties effectively. Government Auditing Standards (GAGAS), paragraphs 6.03–6.04, Management of the audited entity is responsible for designing, implementing, and maintaining effective internal control...Internal control is a process...that provides reasonable assurance... of compliance with applicable laws and regulations. Effective internal control environments require management to

	ensure that personnel are adequately trained and that information systems are configured to support reliable financial reporting and operational efficiency.
Cause	The County implemented a new enterprise system affecting financial, payroll, and administrative functions within a limited implementation and training timeframe. Although communication and training activities were conducted prior to system implementation, system configuration, user readiness, and role-based training activities were not fully completed or matured prior to the July 1, 2024 system launch. In addition, the transition to new system processes, including revised roles and separation of duties, required adjustments by personnel that were still being addressed following implementation.
Effect	Operational challenges associated with the system's implementation may reduce efficiency in financial processing, increase reliance on manual workarounds, and create delays in locating or verifying financial documentation within the system. In addition, insufficient training and system configuration challenges may limit staff's ability to fully utilize system functionality and could increase the risk of processing errors or inefficiencies in financial and administrative activities.
Recommendation	We recommend that the County conduct a formal post-implementation review of the Workday system to identify operational challenges experienced by users across Departments. Management should evaluate opportunities to improve system configuration, integration with other systems, and user access controls where appropriate. Additionally, the County should consider expanding training opportunities for staff, including role-specific training for accounting, finance, payroll, procurement, and operational personnel. Establishing ongoing user support resources and periodic training sessions may help improve staff proficiency and increase the effectiveness of the system in supporting County operations. Continued development of targeted training for specific functional areas, such as grants and capital assets, should also be incorporated into the County's ongoing system support efforts. In order to reduce manual interfaces, the County should consider creating interface software to eliminate manual processes from Workday to other systems. Management should also evaluate the County's ERP implementation governance processes to ensure that future system upgrades, modules, or technology implementations include adequate change management, user readiness assessments, and structured training programs.
Management Response	Corrective Action: - County management agrees with the recommendations. The following are the steps and timelines to be implemented: Due Dates of Completion: - Implement upgrades to Workday to fix issues and allow for full adoption – Phase 1: December 31, 2026 - Provide "Update" training on Workday for staff, to include Phase 1 and current system: March 31, 2027 - Implement upgrades to Workday to fix issues and allow for full adoption – Phase 2: December 31, 2027 - Provide "Update" training on Workday for staff, to include all phases and processes: June 30, 2028 Responsible Parties: Financial Services Director, Information Technology Director, Human Resources Director

2026-016S	INTERNAL CONTROLS OVER MONITORING AND USE OF CONFLICT-OF-INTEREST DISCLOSURES FOR COMPLIANCE WITH THE NEW MEXICO GOVERNMENTAL CONDUCT ACT (CMO/FIN)
Condition	The County maintains employee conflict-of-interest disclosure forms; however, the disclosures are maintained in paper format within Human Resources files and are not maintained in a centralized or electronically accessible system that can be readily reviewed by management or Departments responsible for procurement, contracting, or financial oversight. As a result, the disclosure information is not integrated into the County's procurement, contract administration, or financial review processes and may not be readily available when evaluating potential conflicts of interest involving vendors, contractors, or other financial transactions. Maintaining disclosure forms in Human Resources files alone does not provide an effective internal control if the information is not accessible to or used by Departments responsible for procurement, contract administration, or financial approvals. During our audit procedures, we noted that the County had not established sufficient internal controls to ensure that conflict-of-interest disclosures are actively used to monitor compliance with the New Mexico Governmental Conduct Act (GCA). While disclosure forms are collected and retained in Human Resources records, there is no formal process in place to periodically review the disclosures, electronically track the information, or compare disclosed interests with procurement activities, vendor relationships, or payment approvals. In addition, the County did not demonstrate that formal procedures are in place to evaluate or approve outside employment or "moonlighting" activities reported by employees to ensure that such activities do not conflict with County responsibilities or interfere with employees' ability to perform their official duties. Because the County operates through numerous Departments, offices, and operational divisions, maintaining conflict-of-interest disclosures solely in Human Resources files limits their usefulness as an internal control. Departments responsible for procurement, contract administration, and financial approvals may not have practical access to the information when evaluating potential vendor relationships, outside employment disclosures, or other financial interests that could create conflicts with County duties. The Governmental Conduct Act addresses multiple areas of ethical conduct for public officials and employees, including restrictions related to conflicts of interest, acceptance of gifts or honoraria, sales to subordinates, outside employment or relationships with vendors or contractors, political activities, and the prohibition against using one's public position for personal gain. The County did not demonstrate that employees receive periodic training addressing the full scope of ethical requirements contained in the Act. Without clear policies and training addressing these provisions, employees may not have sufficient awareness of applicable ethical requirements or of situations that could create potential conflicts with their public responsibilities.
Criteria	The New Mexico Governmental Conduct Act (NMSA 1978, Sections 10-16-1 through 10-16-18) establishes ethical standards for public officers and employees and is intended to ensure that public officials and employees perform their duties in a manner that promotes the public interest and maintains public confidence in government. The Act includes provisions addressing conflicts of interest, financial interests, honoraria, outside employment, political activity, and the use of public office for personal benefit. These provisions require public officials and employees to avoid actions that may result in personal gain or create conflicts with their public responsibilities.

Section 10-16-3 of the Act requires public officers and employees to treat their governmental positions as a public trust and to conduct themselves in a manner that protects the integrity of government and maintains public confidence in governmental institutions.

Effective internal control practices require governmental entities to establish policies, training, and monitoring procedures that allow management to identify, evaluate, and address potential conflicts of interest and other ethical considerations in procurement, contracting, and operational decision-making processes.

The Committee of Sponsoring Organizations of the Treadway Commission (COSO) Internal Control Framework states that management is responsible for establishing a control environment that promotes integrity, ethical values, and accountability. Effective internal control systems include policies, training, and monitoring mechanisms designed to ensure that employees understand ethical expectations and that potential conflicts of interest are identified and addressed in operational and financial decision-making.

Examples from another New Mexico Class A County, "OUTSIDE EMPLOYMENT. Employees may obtain part-time outside employment if there is no conflict in working hours, the employee's efficiency is not reduced, and outside employment does not cause a conflict of interest. If an employee's outside work interferes with the performance of his or her position with the County, the employee will be required to terminate the outside employment immediately. Before beginning any outside employment, an employee shall complete a Request for Outside Employment Form and forward it to the Department Director and Human Resources Director for consideration....

"SERVICE ON BOARDS/COMMISSIONS/COMMITTEES/GROUPS. An employee must receive prior County approval to serve on a board, commission, committee or group for which membership is not a required duty of the employee's position, and which interferes with the employee's regular work schedule. To request approval, an employee shall complete and submit an Intention to Serve/Participate on a Board, Commission, Committee, or Group Form. The form shall be submitted to the Human Resources Division prior to the intended start date. The request must be approved by the immediate supervisor, Division Director, Department Director, the Human Resources Director, and the County Manager prior to the employee's participation. If the request is approved, the employee may attend meetings or transact business during the employee's regular working hours only when on approved leave. If being a member conflicts with the employee's position, the request will be disapproved."

Cause

The County has not implemented centralized procedures or electronic systems to track and monitor conflict-of-interest disclosures across Departments. Disclosure forms are maintained in paper format within Human Resources files, and processes have not been established to electronically track disclosures, review outside employment for potential conflicts, or integrate disclosure information into procurement, contracting, and financial oversight activities across the County's Departments.

Effect

Maintaining conflict-of-interest disclosures only in paper form within Human Resources limits the County's ability to use the information as an effective internal control. Without centralized tracking or review procedures, Departments responsible for procurement, contracting, and financial approvals may not have access to information necessary to evaluate potential conflicts of interest involving employees or officials.

As a result, potential conflicts involving procurement decisions, vendor relationships, contract oversight, or payment approvals may not be identified or evaluated in a timely manner.

Because conflict-of-interest disclosures are not centrally tracked or compared against procurement or payment activities, the County may be unable to readily identify situations where

employees involved in purchasing, contract administration, or payment approvals have outside financial interests or relationships with vendors conducting business with the County. Without procedures to perform these comparisons, potential conflicts involving procurement decisions, vendor selection, or contract oversight may not be identified or evaluated in a timely manner.

Weaknesses in monitoring and enforcing ethical compliance requirements may also affect public confidence in County operations. Governmental entities are expected to maintain strong ethical standards to ensure that public decisions are made objectively and in the best interest of the public. When procedures are not in place to actively monitor conflicts of interest or educate employees regarding ethical requirements, the County may face increased risk of perceived or actual conflicts that could undermine transparency and public trust.

Recommendation The County should strengthen internal controls to promote compliance with the New Mexico Governmental Conduct Act and improve the monitoring and use of conflict-of-interest disclosures across Departments. Specifically, the County should consider implementing the following control improvements:

1. Centralized Tracking and Accessibility

Maintain conflict-of-interest disclosure information in a centralized electronic system that allows appropriate management personnel to review disclosures when evaluating procurement, contracting, or financial transactions.

Establish procedures to periodically review conflict-of-interest disclosures and compare them with procurement activities, vendor relationships, and payment approvals.

2. Monitoring Outside Employment and Service

Develop procedures requiring management review of outside service or employment or “moonlighting” disclosures to ensure such activities do not conflict with County responsibilities or interfere with employees’ ability to perform their official duties.

3. Training and Compliance Monitoring

Implement training or guidance for employees and officials regarding ethical requirements and conflict-of-interest provisions under the Governmental Conduct Act.

Establish monitoring procedures to periodically assess compliance with Governmental Conduct Act provisions and document review of potential conflicts when they arise.

4. Procurement and Vendor Oversight Controls

Implement periodic vendor and employee cross-check procedures to identify potential conflicts of interest. The County should consider periodically comparing employee names and disclosed outside interests with vendor names, contractor ownership information, and payment records maintained in the County’s financial system.

Require conflict-of-interest certifications for employees involved in procurement activities, including proposal evaluation committees, vendor selection processes, contract administration, or payment approvals. These certifications should be completed prior to participating in vendor evaluations or approving procurement transactions and maintained as part of the procurement file.

5. Implementing these controls would help the County better utilize existing disclosure information, strengthen ethical oversight, and improve transparency in procurement and financial decision-making.

**Management
Response****Corrective Action:**

County management agrees with the recommendations. The Conflict of Interest forms will be incorporated into Workday, and they will be required to be completed as part of the annual employee performance evaluation. This will also include a review of outside employment and any adverse impacts on an employee's performance. Human Resources will track for compliance, and the HR Talent & Culture Division will develop and implement training on the Governmental Conduct Act, relevant County policies/procedures, and the disclosure and update requirements. The Purchasing Office will also develop procedures for checking of Conflict of Interest forms for any County staff involved in procurement ratings or decisions.

Due Date of Completion: July 31, 2026

Responsible Parties: Financial Services Director, Human Resources Director, Asst. Director HR – Talent & Culture

2026-017S	UNTIMELY INVESTIGATION OF FRAUD ALLEGATION AND OTHER COMPLAINTS (LEG)
Condition	The County did not investigate an internal complaint and allegation of fraud in a timely manner. During audit procedures, we noted an allegation involving potential fraud related to inmate funds that was initially reported to the County's Legal Department in 2022. The same allegation was reported again in July 2025, when the Special Audit began, without evidence that a formal investigation had been completed. After the Special Audit procedures requested outstanding complaints, Internal Audit performed follow-up procedures in September 2025, and subsequently, in late 2025, an external investigator was finally engaged to investigate the alleged fraud of over \$65,000. The Special Audit is ongoing at the time of this report. During the period between the original complaint and initiation of the investigation the vendor associated with the allegation became a County employee and continued working for approximately three years. The individual maintained access to County systems, records, and assets during this time, increasing exposure to potential fraud, waste, abuse, and misuse of public and federal funds. Additionally, we noted during our review of other complaints that the County had not retained sufficient documentation to prove that EEO and other complaints were addressed and resolved in a timely manner. In one list provided of 123 cases, there were 4 lacking a final report, 1 that had been removed and reassigned with no conclusion, and 1 case from over a year ago for which the investigation had not been provided for procedures and remained in open status.
Criteria	Government Auditing Standards (GAGAS), paragraphs 6.03–6.04, Management of the audited entity is responsible for designing, implementing, and maintaining effective internal control...Internal control is a process...that provides reasonable assurance... of compliance with applicable laws and regulations. Standards for Internal Control in the Federal Government (GAO Green Book), Principle 16, Management should establish and operate monitoring activities to monitor the internal control system and evaluate the results. Standards for Internal Control in the Federal Government (GAO Green Book), Paragraph 16.05, Management should remediate identified internal control deficiencies on a timely basis. Doña Ana County Human Resources Policies and Procedures, Section 2-3 (O), Discrimination and Harassment Procedures, - Investigation initiation requirement, "The investigation shall begin within ten (10) work days of the investigator being notified of any unlawful discrimination, harassment or retaliation complaint from the Human Resources Department." - Investigation completion timeframe, "...and shall be completed as soon as practicable with the target being forty-five (45) work days of the initiation of the investigation." - Extension requirement, "The Investigator will notify the complainant in writing of the need for any extensions beyond forty-five (45) days of the initiation of the investigation." - Expedited investigations for harassment/hostile work environment, "In cases of complaints alleging unlawful harassment or an unlawful hostile work environment, the investigation will be expedited so as to be concluded as quickly as practicable..."
Cause	The County lacked formal procedures requiring timely investigation, escalation, and resolution of reported fraud and other allegations and did not ensure accountability for initiating investigative action once complaints were received.

Effect	Failure to timely investigate allegations of fraud or other complaints increases the risk that fraudulent, illegal, or improper activity may continue undetected and unaddressed. Additionally, allowing an individual associated with unresolved fraud allegations to become and remain a County employee with access to County assets and records exposed the County to increased risk of fraud, waste, abuse, and potential misuse of public and federal funds.
Recommendation	The County should establish and enforce formal investigative protocols requiring: 1. Prompt documentation and tracking of all fraud allegations; 2. Defined timelines for investigation initiation and resolution; 3. Immediate risk assessment when allegations involve access to funds or sensitive systems; 4. Interim safeguards, including restriction of access where appropriate; 5. Oversight monitoring by management or those charged with governance to ensure timely resolution. 6. Assignment of an investigator to each complaint within established timeframes to ensure investigations are initiated promptly; 7. Completion of investigations with a formal written report documenting the procedures performed, findings, and conclusions; 8. Implementation of a centralized tracking mechanism to monitor complaint status, key milestones, and resolution timelines; 9. Retention of complete investigative files sufficient to demonstrate that complaints were addressed and resolved in accordance with County policy; and 10. Periodic supervisory review of complaint files to ensure investigations are timely, properly documented, and brought to a formal conclusion.
Management Response	Corrective Action: • As to finding, regarding a \$65,000.00 reported theft by a DACDC contractor, the Sheriff learned on March 20, 2026, for the first time, that this alleged theft had been reported to DASO by DAC Legal Department in about August 2024. • At that time, the former Major assigned it to a DASO detective without informing the Administration. Upon learning this case was in DASO's purview, Administration took over. • After a few calls with the company's point of contact (their attorney), it was determined that this was mishandled by the Legal Department in 2022 and only re-surfaced to the Legal Department's attention through the State Audit in the fall of 2025. • The company's position, as of this date, is to reconsider their initial complaint and re-contact DASO if necessary. Should the company fail to re-contact DASO administration by the end of April 2026, this investigation will be closed due to no further leads. • County management agrees with the recommendations. County management was made aware of the allegation of fraud via an employee of the Detention Center, and quickly notified the Special Auditor, the Office of the State Auditor, and the NM State Police. It was subsequently discovered that a report of the fraud had come into the County Attorney's Office circa 2022, and been reported to an employee in DASO for investigation. No documentation of said report coming into the County Attorney's Office could be located, nor was there any indication that notification had been made

in 2022 to the Internal Auditor's Office. There is also no indication that the incident was reported to the State Auditor.

- Pursuant to the findings, County management will:
- Work with Internal Audit, Legal, and Human Resources to identify and implement (in conjunction with IT) a centralized system for recording and tracking of complaints. This system shall allow for overall segmenting of complaint information to protect confidentiality, but provide a "dashboard" view of status that County Management can review for oversight.
- Any department involved in handling of complaints will develop procedures for monitoring both internal and external investigations to ensure timely handling, as well as to ensure proper follow-through with collective bargaining requirements, policy limitations, and employee rights.
- The Internal Auditor will perform an annual assessment and submit a report to the County Manager and the BOCC on compliance with investigative timelines, completeness of files, and any identified areas needing improvement.

Due Dates of Completion: December 31, 2026

Responsible Parties: County Attorney, Internal Auditor, Director of Human Resources

2026-018S	INADEQUATE SYSTEMS TO DOCUMENT AND MONITOR WORKPLACE MISCONDUCT COMPLAINTS (HR/LEG)
Condition	The County does not maintain complete and reliable records of Equal Employment Opportunity (EEO) complaints and does not perform centralized monitoring of complaint activity to identify patterns of workplace misconduct, discrimination, or retaliation across Departments. Review of complaint records identified significant inconsistencies and documentation deficiencies. For the audit scope period of July 1, 2021 through April 15, 2025, Human Resources reported 43 EEO complaint files, while review of records obtained from the Internal Auditor identified 88 complaint files, and the Legal Department's tracking system reflected 136 complaint records for the same period. In addition, eight complaint files were discovered outside of the formal tracking systems within the County Attorney's office with dates ranging from 2010 through 2023. Examination of complaint files also revealed incomplete documentation. Several files contained only the initial complaint with no evidence of investigative activity or final determination. One electronic complaint folder contained no documents, and other files lacked sufficient documentation to determine whether investigations were conducted or whether timelines required by policy were met. Review of Internal Affairs investigative records further identified more than 700 misconduct investigations conducted between 2009 and 2026, with a substantial portion occurring within public safety Departments. Despite the volume of investigations and complaints, the County does not maintain a process to periodically review or analyze complaint activity across Departments to identify recurring issues, repeated allegations, or systemic patterns of workplace misconduct. While individual Departments may have conducted investigations related to some complaints, the absence of complete and reconciled complaint records prevents the County from demonstrating that all complaints were investigated, documented, and resolved in accordance with County policy. Without reliable documentation and centralized monitoring, the County cannot verify whether investigative procedures and required timelines were consistently followed. The maintenance of complete complaint records and the periodic review of complaint activity are fundamental elements of an effective internal control framework, enabling management to monitor compliance with policies, identify operational risks, and address patterns of misconduct in a timely manner. Evidence identified during the audit included the following: - Human Resources reported 43 EEO complaint files, while other records identified 88 complaint files and 136 complaint records for the same audit period. 8 complaint files were located outside of the formal tracking systems within the County Attorney's office. 16 complaint files contained only the initial complaint with no evidence of investigative activity or determination. 1 electronic complaint folder contained no documentation. - Review of Internal Affairs records identified more than 700 misconduct investigations between 2009 and 2026, yet the County does not perform centralized monitoring or trend analysis of complaint activity.

	Additionally, HR does not retain settlement documents and is not always properly notified when a case is settled or resolved. This is important so the document holds can be released per the County's document retention schedule.
Criteria	NMAC Section 11.2.21.9, Doña Ana County Code Section 45-5, and Doña Ana County Human Resources Policy Chapter II, Section 2.3 (Discrimination and Harassment Procedures) require discrimination and harassment complaints to be documented, investigated, and resolved in accordance with established procedures. These requirements establish that the County must maintain adequate records demonstrating that complaints are received, investigated, and resolved in accordance with County policy.
Cause	The deficiencies result from the absence of formal procedures and accountability requiring complaint investigations to be documented and reconciled across Departments, and the lack of management controls to ensure complaint records are complete, consistently maintained, and periodically reviewed for trends or recurring issues.
Effect	Because complaint records are incomplete and complaint activity is not centrally monitored, the County cannot reliably determine the total number of complaints received or verify that all complaints were investigated and resolved in accordance with County policy. The absence of complete investigative documentation limits the County's ability to demonstrate that required investigative procedures and timelines were consistently followed. Additionally, without centralized monitoring or periodic review of complaint activity, management may be unable to identify recurring issues, repeated allegations, or patterns of discrimination, retaliation, or other workplace misconduct across Departments. When complaint investigations are not consistently documented and complaint activity is not analyzed across the organization, the County may have difficulty demonstrating that workplace complaints were appropriately addressed, which may increase exposure to employment-related claims and hinder the County's ability to defend its actions in administrative or judicial proceedings.
Recommendation	The County should establish formal procedures and management controls to ensure workplace complaints are consistently documented and monitored across Departments. At a minimum, the County should: 1. Implement a standardized case file structure for all complaint investigations that includes the complaint intake, investigative steps, findings, and determination documentation. 2. Require Departments responsible for complaint investigations, including Human Resources, Legal, Internal Affairs, and other investigative functions, to maintain complete investigative records. 3. Establish procedures to periodically reconcile complaint records across Departments to ensure all complaints are accounted for. 4. Implement periodic management review of complaint activity to identify recurring allegations, trends, or Departments experiencing elevated levels of complaints. 5. Provide periodic reporting of complaint activity and identified patterns of misconduct to County leadership to support corrective actions and strengthen internal controls. 6. Ensure notifications are occurring to HR when complaints are resolved so documents may be released from holds.

Management Response	Corrective Action: - County management agrees with the recommendations, and will incorporate actions with the prior findings, and expand where needed. This includes: - Work with Internal Audit, Legal, and Human Resources to identify and implement (in conjunction with IT) a centralized system for recording and tracking of complaints. This system shall allow for overall segmenting of complaint information to protect confidentiality, but provide a “dashboard” view of status that County Management can review for oversight. - Any department involved in handling of complaints will develop procedures for monitoring both internal and external investigations to ensure timely handling, as well as to ensure proper follow-through with collective bargaining requirements, policy limitations, and employee rights. - Whenever a case is resolved or settled, the County Attorney’s Office shall notify the Director of Human Resources so the files can be appropriately marked to allow for disposition pursuant to the County’s record retention schedule. - The Director of Human Resources will conduct an annual review of all EEO complaints and develop a summary of findings for the County Manager, to include identification of any patterns. The overall report will be provided to the BOCC in a public meeting.
	Due Date of Completion: December 31, 2026
	Responsible Parties: Director of Human Resources, County Attorney

2026-019S	INTERNAL CONTROL WEAKNESS OVER FINANCIAL REPORTING AND GASB TECHNICAL ANALYSIS (FIN)
Condition	The County's Finance Department lacked sufficient technical knowledge, skills, and experience to evaluate, implement, and apply Governmental Accounting Standards Board (GASB) requirements across multiple areas of financial reporting, including but not limited to GASB Statements No. 14, 34, 61, 77, 87, 91, and 96. Deficiencies identified across these standards indicate a systemic internal control weakness over the County's ability to prepare financial statements in accordance with generally accepted accounting principles (GAAP). The County's Finance Department lacked sufficient technical knowledge, skills, and experience to evaluate and determine the applicability of Governmental Accounting Standards Board (GASB) requirements, specifically GASB Statements No. 14 and No. 61 related to the financial reporting entity. No documented analysis of GASB Statement No. 14 or GASB Statement No. 61 was performed by the County prior to auditor recommendation. Management subsequently contracted with a national accounting firm to perform the required reporting entity evaluation. As part of the Special Audit scope, we requested documentation supporting the County's determination of component units under GASB Statement No. 14, as amended by GASB Statement No. 61. During our inquiry, Finance indicated that the County's external financial statement auditor performs the component unit determination as part of the annual financial statement audit. Because management is responsible for identifying the reporting entity and evaluating component units, we requested that the County perform or document its own GASB 14/61 analysis. Management subsequently began preparing a component unit evaluation using a GASB 14/61 checklist. Based on the results of our procedures, we noted the evaluation criteria were misunderstood, the answers were incorrect, and the County did not include all related organizations and governing agreements and full analysis of the relationships and financial data. Following our recommendation, the County engaged another CPA firm with governmental accounting experience to perform the GASB 14/61 reporting entity analysis. However, our review identified the evaluation remained incomplete and certain required disclosures had not been reflected in the financial statements. Specifically, we noted the following: <u>Incomplete governing agreements provided for analysis</u> The CPA firm was not provided the most recent Joint Powers Agreements (JPAs) related to certain entities. For example, the County did not provide the First Amendment or the Second Amended Joint Powers Agreement for the Animal Services Center of the Mesilla Valley (Resolution 2023-94). Only the original Joint Powers Agreement dated November 3, 2008 was provided for evaluation. Without the most recent governing agreements, the analysis may not fully reflect the current governance structure and financial accountability relationships required to be evaluated under GASB reporting entity standards. <u>Omission of related organizations from the evaluation</u> The Mesilla Valley Metropolitan Planning Organization, which was subject to Resolution 2024-135A amending its Joint Powers Agreement, was not provided to the CPA firm and therefore was not included in the GASB 14/61 component unit analysis. <u>Completeness of the analysis was not verified against the financial statements</u> It appears the CPA firm relied on the entities and documentation provided by management and did not independently verify completeness by reviewing related organizations referenced in the

County's audited financial statements, ordinances, and resolutions. Another relevant source for verification is the listing of Board of County Commissioners' appointments to boards and organizations. For example, the Mesilla Valley Metropolitan Planning Organization is listed in the schedule of joint powers agreements included in the County's audited financial statements; however, it was not included in the component unit evaluation. As a result, the GASB reporting entity analysis did not appear to include all organizations associated with the County.

Required disclosure was not included in the financial statements

The GASB 14/61 checklist prepared by the CPA firm indicates that the Animal Services Center of the Mesilla Valley met the criteria described in Question 25 of the reporting entity evaluation. The FY2024 financial statement notes did not include a disclosure describing the County's accountability relationship with the Animal Services Center of the Mesilla Valley, despite the checklist indicating that the criteria for disclosure were met.

In addition, the County did not demonstrate the ability to independently prepare or adequately review financial statements in accordance with GAAP, including evaluation of GASB applicability. Management relied extensively on external auditors and third parties for financial reporting determinations that are management responsibilities. External auditors cannot be part of the County's internal control system over financial close and reporting.

Management further lacked sufficient expertise to oversee the external auditor's work related to financial statement preparation and reporting entity determinations, creating an internal control weakness over financial close and reporting and impairing safeguards necessary to maintain auditor independence under Government Auditing Standards.

Additional deficiencies in the County's implementation and understanding of GASB standards were identified, including GASB Statements No. 77 and No. 91, which are addressed in separate findings. In addition, the County relies on external consultants for implementation of GASB Statements No. 87 (Leases) and No. 96 (Subscription-Based Information Technology Arrangements), which are newly implemented and complex standards, and does not demonstrate sufficient in-house technical knowledge of these standards. These conditions further indicate a pattern of inadequate technical capacity and ineffective internal control over financial reporting.

While the use of external consultants to assist with complex accounting standards is appropriate and often advisable, the County must ensure that it retains personnel with suitable skill, knowledge, and experience to oversee non-audit services and accept responsibility for the results in accordance with Government Auditing Standards.

Criteria

Government Auditing Standards (2024 Revision):

Paragraph 3.73 – Management is responsible for the preparation and fair presentation of financial statements.

Paragraph 3.79 – Management is responsible for establishing and maintaining effective internal control.

Paragraph 3.88 – Management must possess suitable skill, knowledge, or experience to oversee nonattest services.

Paragraph 3.89 – Management is responsible for evaluating and accepting responsibility for such services.

GASB Reporting Entity Requirements:

GASB Statement No. 14, Paragraph 8 – Financial statements must include all organizations that are part of the reporting entity.

GASB Statement No. 61, Paragraph 4 – The financial reporting entity consists of the primary government and organizations for which the primary government is financially accountable.

GASB Statement No. 14, Paragraph 68 provides, “If primary government officials appoint some, or all, governing body members of an organization that is not included as a component unit in the primary government’s reporting entity, the primary government should disclose, in the notes to its financial statements, the nature of its accountability for the related organization.”

Generally Accepted Accounting Principles (GAAP), Require management to evaluate reporting entity determinations and ensure that financial statement disclosures accurately reflect the government’s relationships with related organizations.

Cause

The County’s Finance Department has experienced turnover and does not have individuals with adequate skills, knowledge, and experience to oversee the external auditor’s work and to ensure proper implementation of GASB standards. The County historically relied on external auditors and consultants for technical accounting determinations and did not maintain personnel with sufficient governmental GAAP expertise across multiple complex accounting areas. The County also did not maintain a complete inventory of related organizations and governing agreements requiring evaluation under GASB reporting entity standards. In addition, procedures were not in place to ensure the completeness of the reporting entity evaluation or to verify that disclosures identified through the GASB 14/61 evaluation process had been incorporated into the financial statement notes in the past, which would have identified findings and recommendations in the report.

Effect

The lack of internal technical competency and ineffective financial reporting controls resulted in:

- Increased risk of material misstatement in financial statements
- Incomplete or inaccurate implementation of multiple GASB standards
- Omission of required disclosures, including reporting entity relationships
- Reduced transparency regarding the County’s financial accountability
- Noncompliance with GAAP and GASB requirements
- Impairment of auditor independence due to overreliance on external auditors
- Systemic weakness in internal control over financial reporting

Failure to properly evaluate and disclose relationships with related organizations may result in incomplete identification of component units and missing disclosures required under GASB reporting entity standards. This may reduce transparency regarding the County’s governance relationships and financial accountability with related organizations.

Excessive reliance on the external auditor for financial reporting functions creates threats to auditor independence prohibited under Government Auditing Standards and further weakens internal control over financial reporting.

These deficiencies, occurring across multiple GASB standards, indicate a systemic risk that the County’s financial statements may not be prepared in accordance with GAAP.

Recommendation

The County should implement a comprehensive approach to strengthening internal control over financial reporting and GASB compliance by ensuring finance personnel possess sufficient governmental accounting expertise to:

1. Evaluate applicability of new and existing GASB standards;
2. Prepare and review GAAP-based financial statements;
3. Independently assess reporting entity determinations;

4. Provide informed oversight of external auditors consistent with Government Auditing Standards independence requirements;

The County should also strengthen procedures related to GASB reporting entity determinations by:

5. Maintaining a comprehensive inventory of all related organizations, including joint powers agreements (including all amendments), authorities, boards, affiliated entities, and any supporting entities such as non-profits;
6. Ensuring that all governing agreements and amendments are provided for evaluation during the component unit determination process;
7. Verifying the completeness of GASB reporting entity analyses by reconciling evaluated entities with organizations referenced in the County's financial statements and governing documents;
8. Ensuring that disclosures identified through the GASB 14/61 evaluation process are appropriately included in the notes to the financial statements and schedules;

Additionally, the County should:

9. Train and perform and document independent technical analyses for all applicable GASB pronouncements;
10. Verify financial statement disclosures are consistent with technical evaluations performed.

**Management
Response**

Corrective Action:

The County recognizes its responsibility to maintain sufficient internal expertise to oversee financial reporting and ensure auditor independence in compliance with Government Auditing Standards.

To address the specific condition noted, the County has contracted a qualified firm to conduct a comprehensive evaluation of its financial reporting entity under GASB Statements No. 14 and No. 61. To ensure the County retains primary responsibility for all reporting determinations, a formal review process will be established for all third-party technical evaluations, requiring documented reviews and management approvals.

Furthermore, the County will strengthen internal controls by providing finance personnel with ongoing professional development opportunities to sustain a high level of accounting proficiency. The County is also committed to reviewing and updating its Financial Policies and Procedures, explicitly incorporating relevant GASB statements as a core component of its regulatory framework.

Due Date of Completion: Financial Policies & Procedures - June 30, 2027

Responsible Party: Financial Services Director

2026-020S	IMPROPER ACCOUNTING OF CRRUA JOINT VENTURE AND MEMORIAL MEDICAL CENTER RESTRICTED FUNDS (FIN)
Condition	During Special Audit procedures over financial close and financial reporting, it was identified that the County had not performed an accurate and complete analysis of its financial, governance, and participatory relationships with legally separate entities for purposes of applying applicable Governmental Accounting Standards Board (GASB) reporting requirements. We recommended that the County obtain external technical assistance to evaluate reporting entity relationships and related financial reporting requirements, and the County subsequently engaged an external accounting firm to analyze application of GASB Statement No. 14, <i>The Financial Reporting Entity</i>, as amended by GASB Statement No. 61, and related financial statement presentation requirements. Based upon review of the Joint Powers Agreement establishing the Camino Real Regional Utility Authority (CRRUA), the external analysis determined that the County maintains a legally enforceable claim to the net resources of the jointly created entity upon dissolution. Despite the existence of this ongoing financial interest, the County had not recorded a joint venture investment or equity interest within its financial statements to reflect participation in the jointly governed organization. In addition, review of the County's financial statements identified that proceeds received from the 40-year lease agreement with Memorial Medical Center were recorded within the General Fund. Documentation associated with the lease indicates that proceeds are reserved for use on health-related programs and health-related capital projects. Although these resources are restricted for specified purposes, the County did not report the activity within a special revenue fund or otherwise present the restricted nature of the resources within governmental fund financial statements. Appropriate financial statement presentation and tracking of these restricted lease proceeds would require accounting within a special revenue fund rather than the General Fund in order to properly demonstrate restriction and intended use of resources.
Criteria	<i>Joint Venture Accounting</i> GASB Statement No. 14, paragraph 69, as amended by GASB Statement No. 61, A joint venture is a legal entity or other organization that results from a contractual arrangement and that is owned, operated, or governed by two or more participants as a separate and specific activity subject to joint control. <i>Financial Statement Presentation of Restricted Resources</i> GASB Statement No. 34, paragraphs 115–116 require governments to report and disclose investments in joint ventures and the nature of participation within the financial statements. GASB Statement No. 54, paragraph 30, Special revenue funds are used to account for and report the proceeds of specific revenue sources that are restricted or committed to expenditure for specified purposes other than debt service or capital projects. Because Memorial Medical Center lease proceeds are restricted for health-related programs and capital purposes, GASB standards require accounting and presentation within an appropriate special revenue fund rather than unrestricted reporting within the General Fund.
Cause	The County had not established procedures to perform periodic technical evaluation of GASB reporting entity relationships or governmental fund classification requirements during financial statement preparation and financial close.

Effect	Improper application of GASB reporting requirements resulted in: • omission of the County's investment in the CRRUA joint venture, • improper accounting and presentation of restricted lease proceeds within the General Fund, • reduced transparency regarding restricted resource utilization, and • increased risk that the County's financial statements were not presented in conformity with generally accepted accounting principles applicable to state and local governments.
Recommendation	The County should perform and document periodic evaluations of financial reporting entity relationships in accordance with GASB Statement No. 14, as amended by GASB Statement No. 61, record its equity interest in the Camino Real Regional Utility Authority using the equity method, and establish an appropriate special revenue fund to account for Memorial Medical Center lease proceeds restricted for health-related programs and capital projects in accordance with GASB Statements No. 34 and No. 54.
Management Response	Corrective Action: The County acknowledges the finding and is committed to enhancing financial reporting framework to ensure full compliance with GASB standards. The Finance Department will ensure formal annual review processes to evaluate all potential component units and joint ventures are documented in accordance with GASB Statement No. 14 and No. 61 to ensure the reporting entity remains accurately defined. Management will transition accounting treatment for its interest in CRRUA to the equity method to accurately report the County's investment and share of changes in net position. The County has reviewed the Memorial Medical Center Lease Proceeds and determined that a portion of the proceeds are restricted in nature. The County will establish a special revenue fund for the proceeds, referred to by the County as the Province Healthcare Grant, that are restricted and will maintain sufficient documentation related to this determination. Due Date of Completion: December 31, 2026 Responsible Party: Financial Services Director

2026-021S	WEAKNESSES IN PROCUREMENT DOCUMENTATION, APPROVALS, AND CONTRACT REVIEW CONTROLS (FIN)
Condition	During our review of a sample of 245 procurement transactions, 101 transactions lacked required procurement documentation, approvals, or supporting records in the procurement files, representing a deficiency rate of approximately 41% of the transactions reviewed. These deficiencies indicate systemic weaknesses in procurement documentation, record retention, contract approval, and legal review procedures. The following exceptions were identified in our sample: <u>Competitive Procurement Documentation Not Provided</u> • 3 - RFP/ITB documentation was not maintained through contract renewals <u>Approval and Signature Documentation Missing</u> • 26 – Authorized signatures on the pricing agreement quotes (or alternate Service Agreements) • 13 - By party when that party’s signature was required • 1 - Board of County Commissioners meeting minutes showing approval <u>Contract and Legal Review Documentation</u> • 58 – No supporting documentation service agreement/contract was reviewed by Legal Department The volume and nature of these exceptions indicate that procurement transactions were routinely processed without ensuring that required documentation, approvals, and legal review were obtained and retained in the procurement files. In one instance reviewed, a vendor listed a County official as a reference while that same individual also served on the evaluation committee. While no verifiable conflict was identified through our review, the circumstances create a potential perception risk. Requiring vendors to provide independent, external references alongside any internal knowledge of vendor past performance would strengthen confidence in the procurement process. In this same instance, while not required by policy, a standardized, formula-based methodology for scoring cost proposals was not utilized in the Request for Proposal (RFP) reviewed. The absence of a consistent cost evaluation formula in this instance may allow for subjective variability in scoring and could impact the comparability of proposals. Although our review indicates that the selected vendor would likely have been awarded the contract regardless of scoring methodology or potential skewing by committee members, the implementation of a structured, points-based cost evaluation formula would enhance consistency, fairness, and defensibility in future procurement decisions.
Criteria	NMSA 1978, Section 13-1-28, establishes the Procurement Code. NMSA 1978, Section 13-1-120, requires that, except as otherwise provided in the Procurement Code, all professional services contracts be awarded on the basis of competitive sealed proposals. NMSA 1978, Section 13-1-126, provides that a contract may be awarded without competitive sealed bids or proposals when a written determination is made that there is only one source for the required service, construction, or item of tangible personal property.

NMSA 1978, Section 13-1-127, provides that emergency procurements may be made when there exists a threat to public health, welfare, or safety, and requires a written determination stating the basis for the emergency and the selection of the contractor.

NMSA 1978, Section 13-1-128, requires that a central purchasing office maintain a procurement file for each procurement containing the basis on which the award is made.

1.4.1.57 and 64 NMAC, requires that the central purchasing office maintain a record of each sole source procurement and of each emergency procurement.

NMSA 1978, Section 14-2-1, Inspection of Public Records Act, establishes that public records are subject to inspection except as otherwise provided by law.

Doña Ana County Resolution No. 2024-13, Purchasing Policies and Procedures,

- Purchases shall be made at the best possible prices and in accordance with established procedures.
- Requests involving dollar amounts not exceeding \$20,000 may be processed without formal written quotations; however, such purchases should be procured at the best obtainable price, and the department shall for auditor's inspection maintain records of such purchases.
- Requests involving dollar amounts exceeding \$20,000 but not exceeding \$60,000 shall be processed with three formal written quotations. Written quotations must be obtained from vendors and submitted to the Purchasing Department.
- Purchases exceeding \$60,000 require competitive sealed bids or requests for proposal and shall be processed and executed by the Purchasing Department in accordance with the New Mexico Procurement Code.
- The Board of County Commissioners shall award bids or requests for proposal exceeding \$25,000.
- The County Manager has authority to award bids or requests for proposal not exceeding \$25,000, provided funds have been approved and the purchase is completed within the fiscal year.
- The bidding process may be waived only in cases where a vendor has an existing State Purchasing Contract, General Services Administration contract, or other cooperative purchasing agreement consistent with state statutes.
- For professional services not exceeding \$60,000, user departments are encouraged to contact at least three businesses for written or verbal offers prior to selecting a contractor, and the Purchasing Department shall negotiate contracts at a fair and reasonable price.
- Professional services exceeding \$60,000 require a competitive request for proposal and shall be processed and executed by the Purchasing Department.

It is considered a best practice for prospective vendors to provide references external to the County to promote objectivity and avoid the appearance of bias in the evaluation process.

Cause

The deficiencies occurred because the County has not implemented adequate internal controls to ensure compliance with procurement documentation and approval requirements. Specifically, procurement staff did not consistently maintain required procurement files, and there was no formal checklist or supervisory review process to verify that procurement documentation, bid records, approval documentation, and required signatures were obtained and retained.

In addition, procedures requiring legal review of service agreements and contracts were not consistently enforced, and responsibility for ensuring legal review was not clearly assigned. As a

	result, procurement transactions were processed without ensuring that required documentation, approvals, and reviews were completed and retained.
Effect	Incomplete procurement records impair the County's ability to demonstrate that procurements were conducted fairly, competitively, and in compliance with statutory requirements. Without documentation supporting the procurement process, the County cannot substantiate that vendors were properly selected, that pricing was evaluated appropriately, or that governing body approvals were obtained when required. The absence of documented legal review also increases the risk that contracts may contain unfavorable terms, lack necessary protections for the County, or fail to comply with statutory requirements. These weaknesses increase the risk of procurement disputes, unauthorized commitments of public funds, and potential challenges to the validity or enforceability of executed contracts.
Recommendation	The County should strengthen internal controls over procurement and contract administration to ensure compliance with the New Mexico Procurement Code and applicable procurement regulations. At a minimum, management should: 1. Establish a standardized procurement file checklist identifying all documentation required to be retained in each procurement file, including solicitations, advertisements, bid tabulations, quotes, approvals, contract documents, and justification for noncompetitive procurements. 2. Require supervisory review of procurement files prior to contract execution or payment to verify that all required procurement documentation and approvals are complete and properly retained. 3. Implement procedures requiring documented legal review of service agreements and contracts when required prior to execution. 4. Ensure that Board of County Commissioners approvals are documented and retained in procurement files when governing body approval is required. 5. Require that all contracts and procurement documents contain the appropriate signatures and approvals prior to execution. 6. Provide training to procurement and Departmental staff regarding documentation requirements under the New Mexico Procurement Code and applicable procurement regulations. 7. Conduct periodic internal reviews of procurement files to monitor compliance with procurement documentation and record retention requirements. 8. Consider establishing guidelines requiring vendors to provide references external to the County, when feasible, to promote objectivity and reduce the risk or perception of bias in the evaluation process. 9. Consider implementing a standardized, formula-based methodology for scoring cost proposals in Requests for Proposals (RFPs) to enhance consistency, improve comparability of proposals, and reduce the risk of subjective variability or potential skewing in committee scoring.
Management Response	Corrective Action: County management agrees with the recommendations and remains committed to ensuring that all procurements are conducted in a fair, transparent, and compliant manner. The County does not always require review by the Legal Department for all contracts, especially those using templates built by the County, but acknowledges that implementation of

a standardized electronic “checklist” will provide a place where documentation of whether or not Legal review was needed can be made to create a clear audit trail. The County will also revisit Resolution #2024-13 for possible revision, as the signature authority of the County Manager was raised by a subsequent Resolution. A new resolution will be evaluated to replace both in order to ensure consistency.

The Director of Purchasing will establish procedures within the Workday system to address the listed recommendations.

Due Date of Completion: September 30, 2027

Responsible Party: Director of Purchasing

2026-0225	CONFLICT-OF-INTEREST RISK AND INADEQUATE AUTHORIZATION CONTROLS OVER EMERGENCY RENTAL ASSISTANCE PROGRAM (ERAP) PAYMENTS (FIN)
Condition	Our review of Emergency Rental Assistance Program (ERAP) case files identified weaknesses in internal controls related to conflict-of-interest oversight and payment authorization within the administration of the program. During our review of ERAP case files and supporting payment documentation, we identified instances in which ERAP payments were issued to two County employees. One was a landlord who was also associated with assisting in the administration of the ERAP program on behalf of the County. Specifically, the landlord receiving ERAP payments was also involved in assisting tenants participating in the ERAP program and interacting with tenants seeking rental assistance. This situation created a circumstance in which an individual associated with assisting tenants participating in the ERAP program was also in a position to receive ERAP rental payments as a landlord for tenants participating in the same County-administered program. Supporting documentation within the ERAP case file included Direct Pay Expenditure forms, draw vouchers, and payment records identifying the landlord as the payee for rent assistance payments issued under the program. Additionally, several payment authorization documents within the case file were incomplete. Specifically, certain Direct Pay Expenditure forms did not contain a completed approval signature in the section designated for the Department Head or Elected Official despite the payments being processed. The documentation reviewed did not include evidence that the County performed or documented a conflict-of-interest review or independent supervisory approval addressing the circumstance in which an individual associated with assisting tenants in the ERAP program also received ERAP payments as a landlord.
Criteria	The Emergency Rental Assistance Program (ERAP) was established under Section 501 of Division N of the Consolidated Appropriations Act, 2021 and Section 3201 of the American Rescue Plan Act of 2021. Funds were distributed to state and local governments through the U.S. Department of the Treasury and are subject to federal grant compliance and internal control requirements. The U.S. Department of the Treasury requires ERAP recipients to establish and maintain internal controls sufficient to ensure funds are administered in accordance with program requirements. Treasury guidance provides: “Recipients must establish and maintain effective internal controls that provide reasonable assurance that the award is being managed in compliance with applicable statutes, regulations, and the terms and conditions of the award.” In addition, 2 CFR §200.318(c)(1) provides: “The non-Federal entity must maintain written standards of conduct covering conflicts of interest and governing the performance of its employees engaged in the selection, award and administration of contracts. No employee, officer, or agent may participate in the selection, award, or administration of a contract supported by a Federal award if he or she has a real or apparent conflict of interest.” Further, the New Mexico Governmental Conduct Act, Section 10-16-3 NMSA 1978, provides in part:

“A public officer or employee shall treat the officer’s or employee’s governmental position as a public trust and shall use the powers and resources of public office only to advance the public interest and not to obtain personal benefits.”

These requirements establish that governmental entities administering federal programs must implement controls to prevent real or apparent conflicts of interest and ensure that individuals administering programs do not financially benefit from program activities.

Cause

The County did not establish or implement formal procedures within the ERAP program to identify, disclose, and evaluate potential conflicts of interest involving individuals participating in or assisting with the administration of the program. As a result, circumstances in which individuals associated with program activities could also receive ERAP payments as landlords were not subject to documented conflict-of-interest review or independent oversight.

Additionally, internal controls over ERAP payment documentation were not consistently enforced, including requirements for complete supervisory approval and documented review of payment authorization forms prior to processing.

Effect

The absence of documented conflict-of-interest review procedures and incomplete payment authorization documentation weakens the County’s internal control structure over the administration of the ERAP program.

When individuals associated with administering or assisting with a grant program also receive financial payments through the same program, the lack of documented oversight increases the risk of real or perceived conflicts of interest. Without documented safeguards, the County cannot demonstrate that ERAP payments were evaluated independently or that appropriate steps were taken to ensure the integrity and impartial administration of the program.

These conditions increase the risk that ERAP funds could be distributed in circumstances that create the appearance of preferential treatment, that payments may be issued without sufficient supervisory authorization, and that the County may be unable to fully demonstrate compliance with federal grant administration requirements.

In addition, inadequate documentation and oversight of potential conflicts of interest may increase the risk that payments issued under the program could be subject to additional review or questioned by federal oversight agencies if sufficient controls and supporting documentation are not maintained.

Recommendation

The County should strengthen internal controls over the administration of federally funded assistance programs, including the Emergency Rental Assistance Program (ERAP), to ensure that potential conflicts of interest are identified, documented, and appropriately reviewed.

Specifically, the County should:

1. Establish formal procedures requiring disclosure and review of potential conflicts of interest involving employees, contractors, or individuals assisting in the administration of grant-funded programs who may also participate in those programs as landlords, applicants, or beneficiaries.
2. Require documented independent supervisory review and approval when a County employee or program representative is associated with a payment or financial benefit issued through a County-administered grant program.
3. Ensure that all payment documentation includes complete approval signatures and supporting documentation prior to processing disbursements.

4. Implement standardized documentation checklists for grant case files to ensure eligibility determinations, approvals, and payment authorizations are properly documented and retained.
5. Provide training to employees involved in grant administration regarding federal grant compliance requirements, internal control expectations, and ethical standards applicable to public employees.

**Management
Response**
Corrective Action:

The ERAP program has sunset, but County management agrees with the value of ensuring potential conflicts of interest are identified and measures are put into place to avoid any actual conflict of interest in future programs, whether they are federal, state, or local. Central to this effort is the County's recently adopted Centralized Grant Unit, which will provide unified oversight for all grant-related data. This centralized approach ensures that all applications, awards, and compliance documents are housed in one area, creating visibility and accountability across departments.

The County will establish and distribute a formal Conflict of Interest Form specifically for grant-administration staff. This will require all employees and contractors to disclose any personal or financial interest in program benefits (e.g., as a landlord or applicant) prior to participating in the administration process.

The Department will implement a mandatory secondary review process. Any application or payment involving a County employee or known associate will be flagged for independent review and signed off by a Department Director or designated senior official. Financial staff will be instructed to reject any disbursement requests that lack complete approval signatures or required supporting documentation. This "zero-tolerance" approach ensures compliance before funds leave the County.

A Standardized Grant File Checklist will be integrated into the case management system. This ensures that every file contains the necessary eligibility determinations and authorizations before it is considered "complete" for audit purposes.

The County will provide continuous professional development opportunities to employees involved in grant administration regarding federal compliance requirements, internal control expectations, and ethical standards applicable to public employees.

Due Date of Completion: December 31, 2026

Responsible Parties: Director of Finance, Director of Performance & Budget

2026-0235	OPPORTUNITIES TO STRENGTHEN CONTROLS OVER DISBURSEMENTS AND BANK ACCOUNT CHANGES (FIN/DATO)
Condition	During our review of disbursement processing and procedures for changes to employee and vendor banking information, we identified opportunities to strengthen controls over authorization, use of signatures, and verification of banking changes. Check signatures are applied using facsimile signatures without documented evidence that authorized signatories review and approve each disbursement batch prior to issuance. The process does not require explicit approval prior to check printing, and signatures may be applied without documented confirmation that the signer reviewed the payments and supporting documents and or details included in the batch. As a result, the use of facsimile signatures functions in a manner similar to an auto pen process. Procedures may not always ensure that signatures, whether facsimile, stamped, or electronically applied, are used only with the knowledge and authorization of the authorized official. Controls over electronic signatures and agreements may not always ensure that only the authorized official executes documents. In one instance, an elected official indicated that they did not sign an agreement executed under their name, and it could not be determined whether the signature was applied by the official or by another individual. Controls over changes to employee and vendor banking information do not include independent verification procedures. Banking changes may be initiated through system workflows or submitted documentation without a clearly defined process to verify the validity of the request. Methods such as phone or email confirmation may not always be reliable, as contact information can be altered through unauthorized access and fraudsters may use impersonation techniques, including voice changing software. In person verification provides a more reliable method to confirm the legitimacy of banking changes.
Criteria	The Committee of Sponsoring Organizations of the Treadway Commission (COSO) Internal Control Framework states that management should design control activities to achieve objectives and respond to risks. COSO further provides that management should implement control activities through policies and procedures. Public Monies Act, Facsimile signatures, NMSA 1978, Section 6-9-2, provides: "Any authorized officer, after filing with the secretary of state his manual signature certified by him under oath, may execute or cause to be executed with a facsimile signature in lieu of his manual signature: A. any public security, provided that at least one signature required or permitted to be placed thereon by statute, charter or the ordinance, resolution or other official action authorizing the public security shall be manually subscribed; and B. any instrument of payment." Effective internal control practices require that disbursements be reviewed and approved by authorized officials prior to issuance and that controls be in place to prevent unauthorized use of signatures, including facsimile, stamped, or electronic signatures. Fraud schemes involving changes to banking information and payment instructions are common in governmental entities. A New Mexico county was recently defrauded of approximately two million dollars through an email phishing scheme involving fraudulent payment instructions. Another entity recently experienced a security breach of its Banner system, which allowed unauthorized access to submit forms and change contact information. These types of incidents demonstrate that similar risks could occur in other systems, such as the County's Workday system. These types of schemes demonstrate the importance of strong controls over payment authorization and verification of banking changes, in person whenever possible.

Cause	The County has not established formal procedures requiring documented approval by authorized signatories prior to the use of signatures for disbursements. In addition, controls over signature use, including facsimile, stamped, and electronic signatures, are not clearly defined or enforced with a clear audit trail. Procedures for banking changes rely on submitted documentation and internal workflows without requiring verification methods that sufficiently mitigate the risk of impersonation, unauthorized access, or system compromise.
Effect	Payments may be issued without documented authorization by the individuals whose signatures are applied. The use of facsimile, stamped, or electronic signatures without explicit approval and a clear audit trail increases the risk of unauthorized or improper disbursements. Weaknesses in controls over banking changes increase the risk of fraudulent diversion of funds through unauthorized changes to employee or vendor payment information, particularly in phishing, impersonation, or social engineering schemes. In addition, insufficient controls over electronic signatures increase the risk that agreements or payment authorizations may be executed without the knowledge or consent of the authorized official and without traceable evidence of approval.
Recommendation	The County should strengthen internal controls over disbursements, signature use, and banking changes to ensure payments are properly authorized and safeguarded against fraud. At a minimum, the County should: 1. Require documented approval by authorized signatories for each disbursement batch prior to the issuance of checks. 2. Require that signatories review detailed check registers or payment reports, including supporting documentation, prior to providing approval. 3. Ensure that facsimile signatures are not applied without explicit authorization for each batch of payments and are not used in an auto pen manner. 4. Establish controls over all forms of signatures, including facsimile stamps and electronic signature tools, to ensure signatures are applied only by or with the explicit authorization of the authorized official. 5. Implement a formal approval process, such as system based approval or equivalent, documenting that the signer reviewed and approved the disbursement batch prior to check issuance. 6. Strengthen controls over electronic signatures to ensure only authorized individuals execute documents and that signature activity is traceable and verifiable. 7. Require independent verification procedures for all changes to employee and vendor banking information, with an emphasis on in person verification where feasible, as it provides the most reliable method to confirm the legitimacy of requested changes.
Management Response	Corrective Action: County management agrees with the recommendation for signature management and registration. The County Manager will direct the Director of Finance and the Director of IT to work with the Treasurer to evaluate ways in which the recommendations can be implemented. In addition, they will evaluate the possibility of creating a system of file “matching” to ensure that any changes to bank account information match a dual factor authenticated employee request or vendor request. Due Date of Completion: December 31, 2026 Responsible Parties: Director of Finance, Director of Information Technologies, Treasurer

2026-024S	NONCOMPLIANCE WITH GASB DISCLOSURE REQUIREMENTS FOR CONDUIT DEBT OBLIGATIONS AND TAX ABATEMENT AGREEMENTS AND OTHER FINANCIAL REPORTING ISSUES (FIN)
Condition	During our review of County resolutions, ordinances, and related agreements authorizing industrial revenue bonds (IRBs), tax abatements, and other economic development incentives, we compared these actions to the County's audited financial statements and related note disclosures. This review identified instances where required financial statement disclosures were not presented. Some projects appear in more than one section below because the same agreement may require disclosure under multiple GASB standards. <u>Conduit Debt Obligations (GASB 91)</u> Testing identified three conduit debt transactions authorized by the County that were potentially not disclosed in the County's financial statement notes: • Resolution 2021-117 and Ordinances 325-2022 and 326-2022 authorizing approximately \$180,000,000 in IRBs for Hecate Energy Santa Teresa LLC • Ordinance 330-2022 and Resolution 2022-64 authorizing approximately \$50,000,000 in IRBs for La Mesa PV I, LLC • Ordinance 329-2022 and Resolution 2022-63 authorizing approximately \$340,000,000 in IRBs for Milagro Solar I, LLC, with additional authorization of approximately \$240,000,000 in Ordinance 356-2025 • Ordinance 338-2023 authorizing issuance of Multifamily Housing Revenue Bonds not to exceed \$16,000,000 for an affordable multifamily housing project within Doña Ana County <u>Tax Abatement Agreements (GASB 77)</u> Testing identified twelve tax abatement agreements associated with IRB authorizations that were possibly not disclosed as required under GASB Statement No. 77: • Resolution 2021-117 and Ordinances 325-2022 and 326-2022 authorizing approximately \$180,000,000 in IRBs for Hecate Energy Santa Teresa LLC • Ordinance 329-2022 and Resolution 2022-63 authorizing approximately \$340,000,000 in IRBs for Milagro Solar I, LLC, with additional authorization of approximately \$240,000,000 in Ordinance 356-2025 • Ordinance 330-2022 and Resolution 2022-64 authorizing approximately \$50,000,000 in IRBs for La Mesa PV I, LLC • Ordinance 2023-345 authorizing approximately \$10,000,000 in IRBs for INNOM Properties, LLC • Ordinance 2023-344 authorizing approximately \$4,500,000 in IRBs for Monti Incorporated • Ordinance 2023-343 authorizing approximately \$6,800,000 in IRBs for Oro Onions, LLC • Ordinance 2023-342 authorizing approximately \$23,000,000 in IRBs for BSREH LLC • Ordinance 2023-341 authorizing approximately \$25,000,000 in IRBs for Franklin Mountain Packaging, LLC • Resolution 2024-144 authorizing approximately \$213,000,000 in IRBs for Santa Teresa Solar, LLC • Ordinance 332-2023 related to the DAC Low Income Property Tax Rebate program • Ordinance 349-2024 related to County housing incentives Certain tax abatement agreements may also include payments in lieu of taxes (PILTs). To the extent such payments exist, they would also require disclosure under GASB Statement No. 77.

Other Financial Reporting Exceptions Identified

Additional financial reporting issues identified during testing include:

- Resolution 2022-54 related to Las Colonias Infrastructure totaling approximately \$800,000, and a related \$80,000 loan, were not identified in the FY2023 financial statements
- Resolution 2022-55 contained a typographical error in the financial statements referencing 2021 instead of 2022
- Resolution 2024-11 authorizing a contract with Parkhill for the Holman Road Transfer Station totaling approximately \$780,000 was not identified in the SCSWA financial statement construction commitments
- Ordinance 360-2024 established a Public Improvement District (PID). While disclosure was not required in the FY2024 financial statements, consideration could be given to including a financial statement note disclosure for transparency and reader information.
- Ordinance No. 346-2023 authorized a Right-of-Way Franchise Agreement with El Paso Electric Company granting the utility the right to access and utilize County public rights-of-way for the construction, operation, and maintenance of electric transmission and distribution infrastructure for a term of twenty-five (25) years beginning October 2023. Under the agreement, the Company is required to remit quarterly franchise fees to the County equal to 3% of gross revenues derived from electric service within the County. The existence and terms of this franchise agreement, which represents a long-term contractual arrangement generating recurring revenues to the County, were not disclosed in the notes to the June 30, 2024 audited financial statements. The County did not demonstrate that finance personnel formally identified, evaluated, or incorporated the agreement into financial reporting and year-end financial close procedures, and documented procedures were not maintained to monitor franchise fee calculations, track amounts collected, or verify compliance with the agreement provisions.

Criteria

GASB Statement No. 91, Conduit Debt Obligations, issuers of conduit debt obligations should disclose a general description of the issuer's conduit debt obligations, the limited and voluntary commitments, the legal authority and length of time, the aggregate outstanding principal amount of all conduit debt obligations, arrangements if any for recovering payments from the third party obligors, and a description of each type of commitment extended by the issuer.

GASB Statement No. 77, Tax Abatement Disclosures, this Statement requires governments that enter into tax abatement agreements to disclose the following information about the agreements...

- Brief descriptive information, such as the tax being abated, the authority under which tax abatements are provided, eligibility criteria, the mechanism by which taxes are abated, provisions for recapturing abated taxes, and the types of commitments made by tax abatement recipients;
- Commitments made by a government, other than to abate taxes, as part of a tax abatement agreement; and
- The gross dollar amount of taxes abated during the period.

Governments should organize those disclosures by major tax abatement program and may disclose information for individual tax abatement agreements within those programs.

Tax abatement agreements of other governments should be organized by the government that entered into the tax abatement agreement and the specific tax being abated. Governments may disclose information for individual tax abatement agreements of other governments within the

specific tax being abated. For those tax abatement agreements, a reporting government should disclose:

- The names of the governments that entered into the agreements;
- The specific taxes being abated; and
- The gross dollar amount of taxes abated during the period.

GASB Concepts Statement 1 (paragraph 30) identifies three groups as the primary users of general purpose external financial reports: “(a) those to whom government is primarily accountable (the citizenry), (b) those who directly represent the citizens (legislative and oversight bodies), and (c) those who lend or who participate in the lending process (investors and creditors).” In addition, that paragraph makes it clear that internal management may also use external financial reports: “Internal managers in the executive branch of government who have ready access to financial data through *internal* reporting are not considered *primary* users . . .; however, internal users also have many uses for external financial reports.”

GASB Concepts Statement No. 3, Communication Methods in General Purpose External Financial Reports, Standards setters help preparers fulfill their role in the communication process by studying the needs of users of financial reports, by identifying the types of information needed by users in making decisions and assessing accountability, and by requiring specific messages to be included in financial reports.

GASB Codification Section 2300, Notes to Financial Statements, “the notes form an integral part of the basic financial statements.” and “The notes to the financial statements should communicate information essential for fair presentation of the basic financial statements that is not displayed on the face of the financial statements.”

The Committee of Sponsoring Organizations of the Treadway Commission (COSO) Internal Control Framework, adopted for governmental financial reporting, requires management to design and implement internal controls to ensure reliable financial reporting and monitoring of significant agreements affecting financial activity.

Cause

Finance personnel demonstrated a lack of sufficient knowledge, skills, and experience related to Governmental Accounting Standards Board (GASB) financial reporting requirements, including GASB Statements No. 77 and No. 91. In addition, procedures were not in place to ensure that Finance evaluates ordinances, resolutions, and significant contractual agreements approved by the governing body for potential financial statement recognition and disclosure requirements. Management also did not establish formal internal control procedures requiring coordination between legal, administrative, and finance functions to identify executed agreements and evaluate their financial reporting, monitoring, and compliance implications.

Effect

Users of the County’s financial statements may not have complete information regarding the scale of conduit debt authorized by the County, the extent of tax abatements granted through economic development incentives, the existence of long-term franchise agreements generating revenues from County rights-of-way, and any related payments in lieu of taxes (PILTs). This may impair the ability of financial statement users to fully evaluate the County’s economic development commitments, contractual revenue arrangements, and their potential impact on future revenues and financial position.

Additionally, the absence of procedures to monitor agreements such as franchise arrangements increases the risk that revenues generated under those agreements may not be independently verified for accuracy or completeness and limits transparency regarding revenues generated from the use of public infrastructure.

Recommendation	The County should establish procedures to ensure that all ordinances, resolutions, franchise agreements, and other significant agreements authorizing industrial revenue bonds, tax abatements, and similar economic development or revenue-generating arrangements are evaluated by Finance for financial statement recognition and disclosure requirements under applicable GASB standards. Additionally, Finance personnel should receive training on GASB financial reporting requirements applicable to conduit debt, tax abatement agreements, and other contractual arrangements affecting financial reporting.
Management Response	Corrective Action: County management agrees with the recommendations. Policies and procedures will be developed to ensure routing includes the Director of Finance, and that there is a mechanism for capturing and reporting the potential impacts on the financial statements. The Director of Finance will also conduct an annual review on expected receivables from joint ventures, industrial revenue bonds, tax abatements, and similar revenue-generating arrangements to ensure they are being paid as required by the implementing ordinances or regulations. Finance Department will conduct an annual review of all potential component units and joint ventures, as well, to ensure the reporting entity is accurately defined/identified in financial statements. Furthermore, staff in the Finance Department will be provided with opportunities to obtain professional development in GASB standards and practices on an ongoing basis.
	Due Date of Completion: June 30, 2027
	Responsible Parties: Director of Finance, Director of Economic Development

2026-0255	PROJECT REVENUE FUNDS REQUIRED BY ORDINANCE WERE NOT ESTABLISHED OR REPORTED (FIN)
Condition	Doña Ana County ordinances approving certain economic development projects require the establishment of a Project Revenue Fund to account for revenues and expenditures related to those projects. Under GASB requirements, these restricted funds should be reported as a special revenue fund(s). During testing of economic development project ordinances and comparison to the County's FY2023 and FY2024 audited financial statements, we identified instances where funds required by ordinance were not reflected in the financial statements. Two examples identified during testing include the following: - Integrated Maquila Solutions, LLC / TECMA Economic Development Project Doña Ana County Ordinance No. 327-2022, adopted February 22, 2022, approved an economic development project that included a legislative appropriation of up to \$100,000. - Oro, LLC Economic Development Project Doña Ana County Ordinance No. 337-2023, adopted June 27, 2023, approved an economic development project that included a legislative appropriation of up to \$750,000. These items represent two examples identified during testing of economic development project ordinances. The County's current general ledger does not allow separate self-balancing trial balances, specifically the balance sheets, within one fund. Thus, the projects, cash, and accounting are commingled and recorded within the same fund in violation of the requirements.
Criteria	Doña Ana County Ordinances No. 327-2022 and No. 337-2023, Section 4 of each ordinance states: "The Project Revenue Fund (the 'Fund') is hereby established pursuant to the Economic Development Plan Ordinance. All revenue related in any way to the Project shall be deposited into the Fund and any such revenue deposited into the Fund shall be expended only for approved reimbursable expenses related to the Project..." Governmental Accounting Standards Board (GASB) Statement 34, "Special revenue funds are used to account for and report the proceeds of specific revenue sources that are restricted or committed to expenditure for specified purposes other than debt service or capital projects."
Cause	Finance personnel may not have been aware of the requirement to establish separate Project Revenue Funds because the ordinance and related project agreements establishing the funds were not reviewed by or communicated to Finance during implementation of the projects. Additionally, the County's general ledger has limitations which will require separate funds to avoid commingling.
Effect	Because the required funds were not established or reported in the financial statements, revenues and expenditures associated with these projects may be commingled with other County funds rather than accounted for within the specific funds required by ordinance. As a result, the County's financial reporting may not clearly demonstrate that project revenues and expenditures were tracked separately as required, reducing transparency and making it more difficult to monitor project-specific financial activity.
Recommendation	Doña Ana County should ensure that ordinances and agreements establishing project-specific funds are communicated to Finance and that required Project Revenue Funds are established and reported in the County's financial statements in accordance with the requirements of the governing ordinances and applicable GASB fund accounting standards.

**Management
Response**

Corrective Action: County management agrees with the recommendation. The County will strengthen internal communication protocols between departments and the Financial Services Department to ensure all ordinances and agreements are promptly identified. To ensure compliance with GASB fund accounting standards, the County will implement a formal review process where the Finance Department evaluates all new project-specific agreements to establish the required Project Revenue Funds and ensure accurate reporting within the County's financial statements.

Due Date of Completion: June 30, 2027

Responsible Party: Financial Services Director

2026-026S	NON-COMPLIANCE WITH 2.2.2.10 NMAC REQUIREMENTS FOR OTHER SUPPLEMENTARY INFORMATION IN THE AUDITED FINANCIAL STATEMENTS (FIN)															
Condition	During our review of the County’s audited financial statements and related supplementary schedules for compliance with the New Mexico Office of the State Auditor Audit Rule, we compared ordinances approved by the Board of County Commissioners to the Schedule of Legislative Special Appropriations presented in the audited financial statements. Our procedures identified legislative appropriations approved by ordinance that were not included in the required Schedule of Legislative Special Appropriations. Tracking all appropriations in this schedule assists Finance and County leadership to track funding and transparently disclose projects and funding to the public. Missing appropriations identified during our procedures include: <table><tr><th>Ordinance</th><th>Special Appropriation For</th><th>Amount</th></tr><tr><td>Ordinance 336-2023</td><td>Louisiana Pepper Exchange, LLC</td><td>\$500,000</td></tr><tr><td>Ordinance 337-2023</td><td>Oro, LLC</td><td>\$750,000</td></tr><tr><td>Ordinance 339-2023</td><td>Franklin Mountain Packaging</td><td>\$500,000</td></tr><tr><td>Ordinance 347-2024</td><td>Monti, Inc.</td><td>\$350,000</td></tr></table> These appropriations were approved by the NM State Legislature and then the Board of County Commissioners through formal ordinances during the audit scope period but were not included in the required schedule accompanying the audited financial statements.	Ordinance	Special Appropriation For	Amount	Ordinance 336-2023	Louisiana Pepper Exchange, LLC	\$500,000	Ordinance 337-2023	Oro, LLC	\$750,000	Ordinance 339-2023	Franklin Mountain Packaging	\$500,000	Ordinance 347-2024	Monti, Inc.	\$350,000
Ordinance	Special Appropriation For	Amount														
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Ordinance 337-2023	Oro, LLC	\$750,000														
Ordinance 339-2023	Franklin Mountain Packaging	\$500,000														
Ordinance 347-2024	Monti, Inc.	\$350,000														
Criteria	The New Mexico Office of the State Auditor Audit Rule establishes reporting requirements for audited financial statements. Section 2.2.2.10 R. (2) NMAC, “Special, deficiency, specific, and capital outlay appropriations: (a) Special, deficiency, specific, and capital outlay appropriations shall be disclosed in the notes to the financial statements. The original appropriation, the appropriation period, expenditures to date, outstanding encumbrances, unencumbered balances, and amounts reverted shall be shown in a SI schedule or in a note to the financial statements. The accounting treatment of any unexpended balances shall be fully explained in the SI schedule or in a note to the financial statements. This is a special requirement of the state auditor, and it does not apply to the statewide ACFR audit.”															
Cause	Procedures to identify and reconcile legislative appropriations approved by ordinance with the schedules required under the Audit Rule were not sufficient to ensure that all applicable appropriations were captured and reported in the audited financial statements.															
Effect	Legislative appropriations approved by the governing body were not fully disclosed in the Schedule of Legislative Special Appropriations required by the Audit Rule. As a result, the audited financial statements did not present complete information regarding legislative appropriations administered by the County, reducing transparency regarding the use and status of these appropriated funds.															
Recommendation	The County should implement procedures to ensure all legislative appropriations approved by ordinance or received from the State are identified and reconciled to the Schedule of Legislative Special Appropriations required under Section 2.2.2.10 NMAC. Coordination should occur between the Clerk’s Office, Finance Department, and personnel responsible for financial statement preparation to ensure all applicable appropriations are captured and properly reported in the audited financial statements.															

**Management
Response****Corrective Action:**

County management agrees with the recommendation. The County will strengthen internal communication protocols between departments and the Financial Services Department to ensure all legislative appropriations approved by ordinance and received from the State are identified.

Additionally, the County's recently adopted Centralized Grant Unit will provide unified oversight for all grant-related data, including legislative appropriations. This centralized approach ensures that all legislative appropriations and documents are housed in one area, creating visibility and accountability across departments.

To ensure compliance with accounting standards, the Finance Department will evaluate all new legislative appropriations to ensure they are accurately captured in accordance with Section 2.2.2.10 NMAC and are accurately reported in the audited financial statements.

Due Date of Completion: June 30, 2027

Responsible Party: Financial Services Director

2026-0275	NON-COMPLIANCE WITH 2.2.2.10 NMAC REQUIREMENTS FOR JOINT POWERS AGREEMENT DISCLOSURES IN THE AUDITED FINANCIAL STATEMENTS (FIN)
Condition	During our review of the County's audited financial statements and required supplementary schedules for compliance with the New Mexico Office of the State Auditor Audit Rule, we noted that the County participates in a Joint Powers Agreement (JPA) with the South Central Solid Waste Authority (SCSWA); however, this JPA was not disclosed in the required Joint Powers Agreement schedules accompanying the audited financial statements. The New Mexico Audit Rule requires disclosure of Joint Powers Agreements through specific schedules included as other supplementary information to the audited financial statements. The JPA between the County and SCSWA was not included in these required schedules. Additionally, the JPA relates to solid waste operations that involve post-closure landfill remediation obligations that remain with SCSWA, not the County. These obligations represent a significant long-term environmental liability associated with landfill closure and monitoring activities. Disclosure of the County's participation in the JPA and the associated responsibilities of SCSWA is important information for users of the financial statements, including the footnotes and schedules, in understanding the governance structure and potential long-term obligations related to landfill post-closure remediation.
Criteria	The New Mexico Office of the State Auditor Audit Rule requires disclosure of Joint Powers Agreements as part of the audited financial statements. Section 2.2.2.10 V. (1) NMAC, "Any joint powers agreement (JPA) shall be listed in a SI schedule in the audit report. The statewide ACFR schedule shall include JPAs that are significant to the state as a whole. The schedule shall include the following information for each JPA: participants; party responsible for operations; description; beginning and ending dates of the JPA; total estimated amount of project and portion applicable to the agency; amount the agency contributed in the current fiscal year; audit responsibility; fiscal agent if applicable; and name of the government agency where revenues and expenditures are reported."
Cause	Procedures used to identify and reconcile Joint Powers Agreements with the schedules required under the Audit Rule were not sufficient to ensure that all applicable agreements were captured and disclosed in the audited financial statements.
Effect	Failure to disclose the Joint Powers Agreement with SCSWA in the required financial statement schedules results in non-compliance with the Audit Rule reporting requirements and reduces transparency regarding the County's participation in the joint authority and the related solid waste operations and post-closure remediation responsibilities associated with landfill operations.
Recommendation	The County should implement procedures to ensure that all Joint Powers Agreements are identified and included in the Joint Powers Agreement schedules required under Section 2.2.2.10 NMAC as part of the audited financial statements. The schedules should disclose the parties to the agreement, the purpose of the agreement, the fiscal agent, and the financial responsibilities of each participating entity to ensure readers of the financial statements have a complete understanding of the County's participation in joint governmental arrangements.
Management Response	Corrective Action: County management agrees with the recommendation. The County will implement enhanced procedures to ensure all Joint Powers Agreements (JPAs) are identified and disclosed in accordance with Section 2.2.2.10 NMAC. The Finance Department will establish

a centralized tracking system and a year-end review process to ensure the audited financial statements' JPA schedules accurately disclose all participating parties, the purpose of each agreement, the designated fiscal agent, and the financial responsibilities of each entity. Furthermore, the County will update its contract intake protocols to immediately flag new JPAs upon execution, ensuring complete and transparent reporting of all joint governmental arrangements.

Due Date of Completion: June 30, 2027

Responsible Party: Financial Services Director

2026-0285	USE OF THE STATUTORY COUNTY PROPERTY VALUATION FUND PRIMARILY FOR OPERATIONAL EXPENDITURES RATHER THAN LONG-TERM VALUATION PROGRAM FUNDING (DAAO/BOCC)
Condition	The County Property Valuation Fund (Reappraisal Administrative Fees – Fund 25150) is presented in the FY2024 audited financial statements as a nonmajor special revenue fund established pursuant to §7-38-38.1 NMSA 1978 to account for revenues derived from the statutory 1% administrative fee on property tax collections. We reviewed activity recorded in the County Property Valuation Fund for fiscal years 2021 through 2025. Fiscal years 2021 through 2024 were reconciled to the County’s audited financial statements, while fiscal year 2025 activity was analyzed using Treasurer ledger records and other accounting reports available at the time of this review, as audited financial statements for FY2025 had not yet been issued. Our analysis of expenditures recorded in Fund 25150 indicates that the fund has been used primarily to support recurring personnel and operational expenditures of the Assessor’s Office that are typically funded through the County’s general operating resources rather than through the restricted special revenue fund created by §7-38-38.1 NMSA 1978 to support property valuation program activities. Based on the financial records reviewed, personnel costs represent the largest category of expenditures charged to the fund, followed by operating expenditures such as telecommunications services, printing and mailing services, professional services, aerial imagery, valuation system maintenance, training, and other administrative costs associated with property valuation activities. Capital expenditures represent a relatively small portion of the fund’s total expenditures during the period reviewed. The expenditure analysis prepared as part of this review (see Schedule of Expenditures by Vendor / Category and Fiscal Year) indicates that the majority of spending from the fund during the period examined was attributable to recurring personnel and operational costs rather than to large-scale valuation initiatives such as countywide reappraisal programs, major valuation system modernization efforts, or other significant valuation program investments. Section 7-38-38.1, NMSA 1978 further provides that expenditures from the county property valuation fund shall be made pursuant to a property valuation program presented by the county assessor and approved by the majority of the county commissioners, indicating that the fund is intended to support activities undertaken as part of an approved property valuation program. We also noted unusual expenditures such as large expenditures under employee names, water for employees, and car washes. To the extent that operational expenditures such as salaries, benefits, or administrative costs are charged to the restricted valuation fund, those expenditures should be supported by documentation demonstrating that the associated work activities or costs relate directly to property valuation program activities approved by the Board of County Commissioners as part of the Assessor’s property valuation program or reappraisal plan. In particular, when personnel costs are charged to the restricted fund, adequate supporting documentation—such as time allocations, activity reports, or other records—should demonstrate that the hours worked were attributable to the approved valuation program activities funded through the statutory valuation fund. County records reviewed during this engagement indicate that a countywide reappraisal program has not been conducted since approximately 2008. At the same time, the statutory 1% administrative fee has generated approximately \$1.5 million to \$1.7 million annually for the County Property Valuation Fund during the period reviewed. Because the majority of these

annual revenues have been used to support recurring operational expenditures of the Assessor's Office, limited resources have accumulated within the fund to support a future comprehensive countywide reappraisal program or other major valuation initiatives.

In addition, the County participates in economic development arrangements involving Industrial Revenue Bonds (IRBs) and related payments in lieu of taxes (PILT). While those arrangements are outside the direct control of the Assessor's Office, they may affect the County's long-term property tax base and therefore underscore the importance of clearly defining how the statutory valuation fund will be used, how reserves will be accumulated, and how future valuation program needs will be financed.

Criteria

Section 7-38-38.1, NMSA 1978 provides in relevant part, "The 'county property valuation fund' is created... Expenditures from the county property valuation fund shall be made pursuant to a property valuation program presented by the county assessor and approved by the majority of the county commissioners."

Section 7-36-16, NMSA 1978 requires the county assessor to maintain current and correct property values and to present an annual report with the budget request describing the status of the overall property valuation maintenance program and the assessor's plan for maintaining accurate property valuations.

The Annual Property Valuation Maintenance Plan prepared by the Assessor indicates that the report is intended to assist the Board of County Commissioners in determining whether the Assessor is operating an effective property valuation maintenance program and in determining the amount to be allocated to the Assessor for that function.

Because the County Property Valuation Fund is a restricted special revenue fund established by statute, expenditures charged to the fund should be directly attributable to activities conducted as part of the property valuation program approved by the Board of County Commissioners. When personnel or operational costs are charged to a restricted fund, sound governmental accounting practices and internal control principles require that sufficient documentation be maintained to demonstrate that the expenditures relate to the allowable activities for which the fund was established.

Cause

The County has historically used the Property Valuation Fund to support routine operational expenses of the Assessor's Office, including personnel and administrative expenditures. The County has not established a clearly defined long-term funding approach identifying how much of the annual 1% administrative fee revenue should be reserved for future reappraisal programs or other significant valuation maintenance initiatives.

In addition, the County has not established documentation standards sufficient to demonstrate that personnel and operational costs charged to the restricted valuation fund were directly attributable to activities performed under the Board of County Commissioners' approved property valuation program.

Effect

When a statutory valuation fund is used primarily to support ongoing operational expenditures without a clearly defined long-term funding approach for valuation maintenance activities, several risks may arise:

- The County may have limited ability to accumulate resources necessary to fund large-scale valuation initiatives such as countywide reappraisal programs or major valuation system modernization efforts.
- Future reappraisal activities may require additional appropriations or alternative funding sources if sufficient reserves are not available.

- Long-term planning for property valuation maintenance may be less coordinated between the Assessor's Office and County leadership.
- Changes in the County's long-term property tax base, including impacts associated with IRB/PILT arrangements, may further complicate the ability to plan and fund future valuation program needs.

Without adequate documentation demonstrating that personnel and operational costs charged to the restricted valuation fund relate directly to activities performed under the Board of County Commissioners' approved property valuation program, the County may be unable to demonstrate that expenditures from the statutory fund were allowable and consistent with the purposes for which the fund was established.

Recommendation

The County Commission and the County Assessor should work collaboratively to ensure that expenditures from the County Property Valuation Fund are clearly aligned with the statutory requirements of §7-36-16 and §7-38-38.1 NMSA 1978 and with the County's long-term valuation program needs.

As part of this process, the County should consider implementing the following measures:

1. Adopt a formal policy governing the use of the County Property Valuation Fund. The policy should define allowable uses of the restricted fund, identify the types of valuation program activities that may be charged to the fund, and clarify the circumstances under which personnel or operational expenditures may be allocated to the fund.
2. Ensure that expenditures from the fund are clearly tied to the Board of County Commissioners' approved property valuation program. Budget documents and financial records should clearly identify how expenditures charged to the fund support activities included in the Assessor's valuation maintenance plan or other valuation program initiatives approved by the Board.
3. Establish documentation requirements for personnel and operational costs charged to the fund. When salaries, benefits, or other operational expenditures are charged to the County Property Valuation Fund, the County should maintain adequate supporting documentation—such as time allocations, activity reports, or other records—demonstrating that the work performed or costs incurred relate directly to the approved property valuation program activities funded by the statutory valuation fund.
4. Develop a long-term funding approach for valuation program needs. The County should identify anticipated reappraisal activities, valuation technology needs, and other major valuation initiatives and determine how much of the annual 1% administrative fee should be reserved to support those future needs.
5. Improve transparency in budgeting and financial reporting for the valuation program. Annual budget requests and valuation maintenance plans presented to the Board of County Commissioners should clearly communicate how the statutory valuation fund will be used to support both ongoing valuation activities and any anticipated large-scale valuation initiatives, including consideration of long-term tax base factors that may affect future funding capacity.

Implementing these measures will help ensure that expenditures from the County Property Valuation Fund are clearly documented, aligned with the County's approved property valuation program, and consistent with the statutory purpose of the fund.

**Management
Response**

Corrective Action:

DACAO Response:

Valuation Fund Use & Structural Budget Compliance

The Assessor acknowledges and appreciates the audit finding regarding the use of the 1% valuation fund for salaries and operational expenses. These expenditures were approved by the Doña Ana County Board of County Commission, long before my time in office.

Over the past ten (10) years, the valuation fund revenue was approximately \$14,000,000 and due to the approved expenditure from the Doña Ana County Board of County Commission it's been depleted, which reflects a longstanding, approved budget structure—

The Assessor's Office has had to operate within approved budgets, and this current Assessor (Gina) Eugenia Montoya Ortega has consistently requested for the past three (3) years corrective action, requiring immediate structural correction to ensure compliance with NM State Statute.

The Assistant County Manager stated that integrating long-term goals into the budgeting process would provide the Doña Ana County Board of County Commission and the public with a transparent view of how funding supports both immediate operations and the long-term stability of the County tax base.

This Assessor's Office has consistently provided this level of transparency.

The Assessor has:

- Presented an annual report each year to the Doña Ana County Board of County Commission and the public
- Provided transparent valuation data in compliance with statutory requirements
- Communicated operational conditions, including funding limitations

The Assessor has communicated to the Doña Ana County Board of County Commission that reappraisal efforts are currently at zero capacity due to funding constraints.

The Doña Ana County Board of County Commission has expressed the expectation that a door-to-door reappraisal can be conducted in-house by the Assessor's Office.

It is important to clarify that the Assessor has a statutory obligation to maintain current and correct property values on an annual basis. The existing staff and resources of the Assessor's Office are fully allocated to meet the required yearly valuation duties.

The current staffing structure supports:

- Annual property valuation updates
- Processing of permits, sales, and ownership changes
- Protest management and statutory deadlines
- Ongoing compliance with State valuation requirements

The Assessor's Office does not have the staffing or resources necessary to conduct a countywide, door-to-door reappraisal in-house in addition to its required annual duties.

Attempting to do so without additional resources would:

- Compromise the ability to meet statutory annual valuation requirements
- Increase the risk of noncompliance
- Create delays in core operational functions
- Reduce overall valuation accuracy and equity

The current staff is structured to maintain the annual valuation cycle, not to absorb a full reappraisal effort without additional funding or external support.

- Reappraisal expectations have continued
- The funding structure required to support reappraisal has not been addressed

Transparency has been consistently provided; however, transparency alone does not resolve structural funding deficiencies without corresponding budget action.

The reference made by the Assistant County Manager tying corrective action to the end of the Assessor's first four-year term is not relevant to statutory budget authority or compliance requirements.

Assistant County Manager informed the auditor that corrections would be made on December 31st, 2026, rather than directing that the corrections begin immediately no later than June 30th, 2026. Delaying corrective action until the end of the calendar year only continues the problem and increases the risk of further misuse of funds. If the County has identified that valuation fund expenditures have been handled improperly, then corrective action should occur now, not months later.

The issue is not only the past use of the 1% valuation fund, but also the County's continued delay in addressing it once it was brought forward. The Assessor's Office has already raised concerns about the lack of funding and the need to properly move expenses into the General Fund. Waiting until December 31st to make corrections ignores the urgency of the issue and allows the same improper practice to continue.

This delay places the burden on the Assessor's Office for a problem that is beyond its authority to fix on its own. Budget transfers and funding corrections require action and approval from County leadership and the Doña Ana County Board of County Commission. For that reason, responsibility for the delay in correcting the issue does not rest solely with the Assessor, particularly where Doña Ana County Board of County Commission administration has acknowledged the problem but postponed corrective action.

Budget corrections must occur through the biennial budget approval process, which is the legally established mechanism for allocating and adjusting county funding.

"The appropriate time to correct this issue was during the biennial budget process, and those requests were made for the FY 2027–2028 budget."

The suggestion that long-term corrective actions be incorporated incrementally through the annual budget process is not aligned with the County's current transition to a biennial budget framework.

Implementing partial or delayed corrections under this approach would:

- Conflict with the structure of a biennial budget
- Delay full compliance with audit requirements
- Extend the existing funding misalignment for an additional two-year cycle or longer

In a biennial budgeting environment, failure to correct structural issues at the time of adoption effectively locks those issues in place for the duration of the budget period.

Corrective Action Plan

1. Immediate Discontinuation of Improper 1% Valuation Fund Use

- Cease use of the valuation fund for salaries and operational expenses

2. Reallocation and Correction of 1% Valuation Fund

The Assessor recommends that all of valuation fund expenditures that were applied to salaries and operational costs be corrected and be reallocated back to the 1% Valuation Fund, consistent with statutory intent and proper budget structure, as the Doña Ana County Board of County Commission is directing the Assessor's office to proceed with a reappraisal it is both reasonable and necessary that the funding to perform this function be restored.

Timeline: Immediate

2. Budget Realignment (Biennial Budget)

- Transition all Assessor operational costs to the General Fund:
 - o Salaries and benefits
 - o Operating expenses
 - o Systems and support

Timeline: FY 2027–2028 Biennial Budget Adoption

3. Restrict Valuation Fund Use

Limit valuation fund uses to:

- Reappraisal projects
- Temporary project staffing
- Data collection and field work
- Contracted appraisal services

Timeline: Within 60 days

BOCC/CMO Response:

County management agrees with the recommendation, and plans the following actions:

-
- County Management will coordinate with the Cabinet Secretary for Taxation and Revenue to seek assistance and direction related to property valuation plans and use of the “property valuation fund”, pursuant to the Secretary’s authority under § 7-35-3 NMSA 1978, et seq.
 - County Management will assist the Assessor, upon the Assessor’s request, with submitting a property valuation plan to the Board of County Commissioners for approval.

To ensure transparency, future budget documents and financial records will explicitly tie fund usage to the Board-approved property valuation program. Furthermore, the County will shift toward a long-term strategic funding approach to better manage the 1% administrative fee. This plan will identify future reappraisal cycles and technological needs, ensuring sufficient reserves are maintained for major valuation initiatives. By integrating these long-term goals into the annual budgeting process, the Assessor’s Office will provide the Commission and the public with a transparent view of how the fund supports both immediate operational needs and the long-term stability of the County’s tax base. This will align all expenditures with the statutory requirements of §7-36-16 and §7-38-38.1 NMSA 1978, specifically defining allowable personnel and operational costs.

Due Dates of Completion:

Request assistance and guidance from the Cabinet Secretary – June 30, 2026

Adopt a budget process aligned with an approved property valuation program – June 30, 2027

Responsible Parties: County Assessor, Board of County Commissioners, Office of Performance & Budget Director, Financial Services Director

2026-029S	EQUIPMENT ACCOUNTABILITY AND INVENTORY MANAGEMENT DEFICIENCIES AFFECTING FIRE RESCUE OPERATIONS (DAFR)
Condition	While this finding appears to be an issue County-wide, the audit identified specific deficiencies in inventory management and equipment accountability within the Fire & Emergency Services Department. Inventory records and procedures did not consistently ensure that equipment was properly tracked, verified, and recorded in Departmental inventory systems. Internal Audit also identified this issue with the Department. Inventory testing included both list-to-floor and floor-to-list procedures conducted at multiple fire stations. Ceiling-to-floor testing involved selecting equipment items from inventory records and verifying their physical existence at the station. Floor-to-ceiling testing involved selecting equipment observed at stations and verifying that those items were recorded in the Department's inventory records. During floor-to-ceiling testing of sensitive equipment items, two of eight items selected were not listed in the Department's inventory records at the time of inspection. Department personnel indicated that the items were subsequently added to the inventory following the audit review. In addition, inventory observation procedures identified instances in which inventory checklists were completed without physical verification of equipment. In one instance, an item was marked as present on an inventory checklist; however, when auditors verified the item independently, it was not present. Interviews with fire personnel also indicated that equipment required to be maintained on fire apparatus was not consistently present on the apparatus during certain periods. Personnel further indicated that, in some instances, the only operational fire apparatus assigned to a station had been relocated to another location without a documented transfer process or formal notification. The Department currently utilizes multiple systems to track equipment and assets, including an Excel spreadsheet used as the master inventory record, Departmental inventory software, and the County's Workday system used for financial reporting of certain assets. These systems are not fully integrated and require manual reconciliation, increasing the risk of data inconsistencies and incomplete inventory records. In addition, the Department does not maintain a consolidated policy and procedures manual governing inventory management, equipment accountability, and asset tracking practices.
Criteria	State and local regulations require governmental entities to maintain accurate records of equipment and assets. NMAC 2.20.1.16, Annual Inventory, "A. At the end of the fiscal year, each agency shall conduct a physical inventory of its fixed assets consisting of those with a historical cost of five thousand dollars (\$5000) or more, under the control of the governing authority. B. This inventory shall include all property procured through the capital projects fund which are assigned to the agency designated by the director of the property control division as the user agency. C. All passenger vehicles must be included in the inventory process. This includes all vehicles leased from the transportation services division of the general services department as required by the "auditor's rule" Paragraph (8) of Subsection A of Section 2.2.2.12 NMAC. D. The inventory process shall produce a list of the property and the date and cost of acquisition. The annual physical inventory checks against losses not previously revealed and brings to light errors in records of accountability, but more importantly, a systematic physical inventory of fixed assets provides an opportunity for surveying their physical condition, with respect to their need for repairs, maintenance or replacement. E. The results of the physical inventory shall be recorded in a written inventory report, certified as to correctness and signed by the governing authority of the agency. In the

	process of conducting their fieldwork, the state auditor or independent public accountant under a contract approved by the state auditor may test the correctness of the inventory by generally accepted auditing procedures (Section 12-6-10A NMSA 1978)." County code also establishes requirements for accountability and safeguarding of County property to ensure that assets are properly tracked, recorded, and protected from loss or misuse. These requirements establish the expectation that equipment maintained by the Fire & Emergency Services Department is recorded in inventory systems, periodically verified through physical inventory procedures, and supported by documentation sufficient to demonstrate accountability for County assets.
Cause	Inventory management procedures within the Fire & Emergency Services Department were not consistently formalized or centralized. Inventory records were historically maintained through a combination of manual tracking methods and multiple independent systems that were not fully integrated. Responsibility for inventory tracking also relied on individual personnel at station locations rather than a centralized inventory management process. In addition, the absence of a consolidated Departmental policy governing equipment accountability and inventory procedures contributed to inconsistent inventory practices across stations.
Effect	Incomplete or inconsistent inventory records reduce the Department's ability to demonstrate accountability over equipment and assets used in emergency response operations. When equipment is not consistently recorded in inventory systems or physically verified during inventory procedures, the risk increases that equipment may be misplaced, lost, or unavailable when needed for emergency response. In addition, the use of multiple independent inventory tracking systems increases the likelihood of discrepancies between inventory records and actual equipment maintained by the Department. These conditions may also increase the risk of inaccurate asset reporting and reduce the reliability of inventory information used for operational planning and financial reporting.
Recommendation	The Fire & Emergency Services Department should strengthen inventory management and equipment accountability procedures to ensure assets are consistently tracked and verified. To implement this control, the Department should: 1. Maintain a centralized inventory system that records all equipment and assets maintained by the Department; 2. Ensure inventory records are updated when equipment is acquired, transferred, or removed from service; 3. Implement documented procedures requiring physical verification of equipment during inventory observations; 4. Maintain documented movement logs when equipment or apparatus are relocated between stations; 5. Conduct periodic reconciliations between physical inventory and inventory records; 6. Develop and implement a consolidated Departmental policy governing inventory management and asset accountability procedures; and 7. Implement periodic supervisory review of inventory records and inventory reconciliation procedures.
Management Response	Corrective Action: County Management agrees with the recommendations. The external Interim Fire Chief identified the issues with inventory, and reported such to the Special Auditor and to County Management. This was passed on during the leadership transition to the current Interim Fire Chief. The current Interim Fire Chief has requested a new position for Fleet/Inventory Manager, and County Management has approved. The final budgetary approval will be made by the Board of

County Commissioners as they consider the FY27 budget. This new position will have the bandwidth necessary to conduct both annual and interim inspections and inventories of equipment. All points made in the recommendation will be included in the job duties of the new person.

In addition, during the review of this item, County Management identified that County Ordinance §31-9 needs to be updated/removed, as there are no longer “station chiefs” at any station. This Section was included in the Ordinance when there were volunteer fire stations, which no longer exist.

Due Dates of Completion:

BOCC approval of the budget – to include the requested position – should occur prior to July 31, 2026.

Fire Chief to conduct review of Ordinances and request revisions to BOCC by September 30, 2026.

Responsible Parties: Board of County Commissioners, Fire Chief

2026-030S	PROCUREMENT COMPLIANCE AND CONTRACT OVERSIGHT DEFICIENCIES IN FIRE APPARATUS ACQUISITIONS (DAFR)
Condition	The audit identified deficiencies in procurement documentation and contract oversight related to the acquisition of fire apparatus by the Fire & Emergency Services Department. Procurement files did not consistently contain documentation demonstrating compliance with required purchasing procedures or evidence supporting vendor selection. Procurement testing included a review of fire apparatus procurement files and related purchasing documentation maintained by the Fire & Emergency Services Department for the audit period. Procurement documentation maintained by the Department was reviewed to determine whether procurement transactions were supported by documentation demonstrating compliance with County purchasing policies and procedures. Testing of fire apparatus procurements identified that two of six procurements reviewed did not contain documentation demonstrating legal review and approval of contracts prior to execution. Procurement files reviewed during the audit did not consistently contain documentation demonstrating competitive procurement activity, vendor evaluation, or justification supporting the selection of vendors for apparatus acquisitions exceeding applicable purchasing thresholds. A review of purchasing activity during the audit period indicated that the majority of fire apparatus acquisitions were made through vendors affiliated with Municipal Emergency Services (MES), including Alexis Fire Equipment Company and Firefighter Trucks, Inc. Procurement records provided for review did not consistently contain documentation demonstrating that competing vendors were evaluated or that bids were solicited from multiple vendors. Testing also identified multiple contract modifications through change orders during apparatus construction. For example, Contract No. 22-122, with an original contract value of approximately \$3,842,676, included several scope expansion change orders totaling approximately \$358,810 during the construction process. Additional change orders totaling \$34,079 and \$7,632 were identified on other apparatus contracts reviewed. These modifications included adjustments or additions to apparatus components and equipment during the build process. A broader review of Departmental purchasing activity indicated that from July 1, 2024 through April 15, 2025, the Fire & Emergency Services Department issued 103 purchase orders exceeding \$10,000, of which 32 (31%) were change orders. During the same period, countywide purchasing activity reflected 184 change orders out of 930 purchase orders over \$10,000 (20%). This indicates that the frequency of change orders within the Fire & Emergency Services Department was higher than the countywide average. As a result, procurement files did not consistently demonstrate that apparatus acquisitions were supported by complete documentation of competitive procurement procedures, vendor evaluation, and required approvals.
Criteria	NMSA 1978, Section 13-1-28, establishes the Procurement Code. NMSA 1978, Section 13-1-120, requires that, except as otherwise provided in the Procurement Code, all professional services contracts be awarded on the basis of competitive sealed proposals.

NMSA 1978, Section 13-1-126, provides that a contract may be awarded without competitive sealed bids or proposals when a written determination is made that there is only one source for the required service, construction, or item of tangible personal property.

NMSA 1978, Section 13-1-127, provides that emergency procurements may be made when there exists a threat to public health, welfare, or safety, and requires a written determination stating the basis for the emergency and the selection of the contractor.

NMSA 1978, Section 13-1-128, requires that a central purchasing office maintain a procurement file for each procurement containing the basis on which the award is made.

1.4.1.57 and 64 NMAC, requires that the central purchasing office maintain a record of each sole source procurement and of each emergency procurement.

NMSA 1978, Section 14-2-1, Inspection of Public Records Act, establishes that public records are subject to inspection except as otherwise provided by law.

Doña Ana County Resolution No. 2024-13, Purchasing Policies and Procedures,

- Purchases shall be made at the best possible prices and in accordance with established procedures.
- Requests involving dollar amounts not exceeding \$20,000 may be processed without formal written quotations; however, such purchases should be procured at the best obtainable price, and the department shall for auditor's inspection maintain records of such purchases.
- Requests involving dollar amounts exceeding \$20,000 but not exceeding \$60,000 shall be processed with three formal written quotations. Written quotations must be obtained from vendors and submitted to the Purchasing Department.
- Purchases exceeding \$60,000 require competitive sealed bids or requests for proposal and shall be processed and executed by the Purchasing Department in accordance with the New Mexico Procurement Code.
- The Board of County Commissioners shall award bids or requests for proposal exceeding \$25,000.
- The County Manager has authority to award bids or requests for proposal not exceeding \$25,000, provided funds have been approved and the purchase is completed within the fiscal year.
- The bidding process may be waived only in cases where a vendor has an existing State Purchasing Contract, General Services Administration contract, or other cooperative purchasing agreement consistent with state statutes.
- For professional services not exceeding \$60,000, user departments are encouraged to contact at least three businesses for written or verbal offers prior to selecting a contractor, and the Purchasing Department shall negotiate contracts at a fair and reasonable price.

Professional services exceeding \$60,000 require a competitive request for proposal and shall be processed and executed by the Purchasing Department.

Cause

Procurement documentation and contract oversight procedures were not consistently implemented or maintained. Procurement files did not consistently include documentation demonstrating competitive vendor solicitation, bid evaluation, or legal review of contracts prior to execution. In addition, procurement oversight procedures did not consistently ensure that documentation supporting vendor selection decisions was retained in procurement files.

Effect

Incomplete procurement documentation reduces transparency in the purchasing process and limits the County's ability to demonstrate that vendor selection and contract execution

complied with established procurement procedures. Without documentation supporting competitive procurement and vendor evaluation, the County's ability to demonstrate that apparatus acquisitions were obtained through a competitive process and at the best obtainable price is reduced.

In addition, the use of change orders to add equipment or design elements during apparatus construction may increase overall acquisition costs if items that could have been included in the original procurement specifications are instead added through contract modifications.

Weaknesses in procurement documentation and contract oversight also increase the importance of maintaining strong asset accountability controls to ensure that equipment acquired through these procurements is properly tracked, recorded, and available for operational use.

Recommendation The Fire & Emergency Services Department should strengthen procurement oversight and documentation practices for fire apparatus acquisitions.

To implement this control, the Department should:

- Ensure procurement files contain complete documentation supporting competitive solicitation, vendor evaluation, and vendor selection decisions for purchases exceeding procurement thresholds
- Ensure contracts receive appropriate legal review and approval prior to execution in accordance with County policy
- Require procurement files to document the use of cooperative purchasing agreements or statewide contracts when such purchasing methods are utilized
- Establish procedures to ensure that apparatus specifications and required equipment are fully defined during the initial procurement process to minimize the need for contract change orders
- Implement periodic supervisory or internal review of procurement documentation for major apparatus acquisitions to verify compliance with County purchasing policies and documentation requirements

Management Response

Corrective Action:

County Management agrees with the findings in the Special Audit. The external Interim Fire Chief identified concerns related to apparatus purchases, and shared said concerns with the Special Auditor and County Management. This led to halting some purchases, and a review of processes. The following were also noted by the Interim Fire Chief and County Management as a result:

- There was no County policy that triggers a review of existing contracts and work orders when an employee leaves the County (for retirement or other reasons) and goes to work for a supplier or vendor that does business with the County. As such, there is currently no connectivity between the department, Human Resources, and Purchasing to ensure that the Government Conduct Act (specifically §10-16-8 NMSA 1978) is adhered to. This will require a new policy and procedures.
- The Apparatus/Equipment Review Committee was not being properly utilized by prior Fire Rescue administration, contrary to the intent of the Collective Bargaining Agreement with the Fire Union. This has already been rectified by the new Fire administration, to include the elimination of unreported change orders on apparatus.
- Many of the change orders were immediately after Fire Rescue employees made vendor-sponsored trips to manufacturing facilities. County Management and the current Fire Rescue administration are concerned that these trips are not about ensuring equipment is being

manufactured according to the specifications in the original purchase order, but rather are a way for the manufacturer(s) to “upsell” options that were not part of the original purchase order. While such visits have a benefit for ensuring equipment is manufactured according to specifications, they should be done by the County with intentionality and without any financial sponsorship by the vendor. County Management will work with the Purchasing Office to ensure future contracts do not include such visits in the terms of said contracts, and that any change orders are tracked and reported to Management if they exceed pre-designated thresholds (both monetary and frequency).

Due Date of Completion: County Management will have policy change recommendations to the Board of County Commissioners for consideration by September 30, 2026.

Responsible Parties: Fire Chief, Purchasing Director, Assistant County Manager

2026-031S	FAILURE TO MAINTAIN PHARMACEUTICAL INVENTORY RECORDS AND CHAIN-OF-CUSTODY CONTROLS FOR EMS MEDICATIONS (DAFR)
Condition	The Fire & Emergency Services Department was unable to provide pharmaceutical inventory records for the EMS pharmacy program for the period approximately July 1, 2023 through December 2024. As a result, the County cannot demonstrate that pharmaceuticals were consistently tracked, reconciled, or subject to documented chain-of-custody controls during that period. Because pharmaceuticals used in EMS operations are sensitive items requiring strict accountability, the absence of inventory documentation limits the County's ability to demonstrate that medications were properly received, stored, issued, administered, and disposed of during the period reviewed. Inventory documentation was available beginning in approximately 2025 when the current inventory technician assumed responsibility for pharmaceutical inventory management; however, historical records for the earlier period were not available for review. Department personnel responsible for inventory management indicated they were unable to determine whether pharmaceutical inventory records for prior periods existed, and no additional records were provided following the audit request. The Department was also unable to provide: • Logs documenting monitoring of medication expiration dates • Documentation of drug box exchanges or replenishment of medications following use Because these records were not available, auditors were unable to reconcile pharmaceutical purchases, inventory balances, and medications administered during the period reviewed. The absence of pharmaceutical inventory documentation spans multiple fiscal periods and prevents the County from demonstrating that consistent inventory accountability procedures were maintained for EMS medications during that time.
Criteria	The Fire & Emergency Services Department Pharmacy Standard Operating Guidelines establish documentation requirements for the management and control of EMS pharmaceutical inventory. The SOP provides an inventory log template and requires that medication inventory logs shall include the medication name, lot number, quantity, and expiration date. The SOP further indicates that pharmacy records should include documentation of medications issued, used, disposed of, and records of damaged or missing medications, establishing the Department's expectation that pharmaceuticals maintained within the EMS pharmacy program are tracked through documented inventory records. Additionally, NMAC 16.19.24.11 requires, "A. All dangerous drugs must be stored with appropriate security to limit access when authorized personnel are not present. Extra precautions shall be provided for security of controlled substances. B. Jump kits shall be kept in the possession of a licensed emergency practitioner or in a locked compartment of a mobile unit when not in use. C. Jump kits shall be stored in the facility if the mobile unit is parked outside of a secure vehicle bay. D. Drugs shall be stored in an area: providing proper ventilation, lighting, and temperature controls as specified by the drug manufacturer. E. Drugs that are outdated or which have been exposed to adverse conditions shall be segregated from the inventory and held for disposition by the consultant pharmacist." Internal control principles applicable to governmental entities require organizations to maintain documentation and accountability over sensitive assets and inventory to ensure that assets can be tracked, verified, and reconciled through appropriate documentation and recordkeeping. These requirements establish the expectation that pharmaceuticals maintained within the EMS pharmacy program are subject to documented inventory tracking, monitoring, and

	accountability procedures sufficient to verify the receipt, storage, issuance, administration, and disposal of medications.
Cause	Inventory documentation and record retention appear to have been dependent on individual personnel rather than a centralized system of recordkeeping with established retention and oversight procedures. When responsibility for pharmacy inventory changed, historical documentation was not retained or transferred. The absence of inventory records, expiration monitoring logs, and drug box exchange documentation indicates that pharmaceutical inventory management within the Department relied largely on informal practices and individual personnel knowledge rather than a structured system of documented controls and record retention procedures.
Effect	Because pharmaceutical inventory records and related logs were not available for review, auditors could not verify whether pharmaceuticals were consistently inventoried, monitored for expiration, or replenished following use during the period reviewed. The absence of pharmaceutical inventory records significantly limits accountability over sensitive medications and creates several risks, including: • Inability to verify the quantities of pharmaceuticals received, issued, administered, or disposed of • Lack of an audit trail for medications maintained within the EMS pharmacy program • Increased risk that medication losses, diversion, expiration, or improper use could occur without detection • Potential noncompliance with state pharmacy regulations governing EMS drug inventories In addition, incomplete pharmaceutical inventory records may impact patient safety oversight, as accurate tracking of medications is necessary to ensure medications are properly stored, within expiration, and administered in accordance with EMS protocols. The absence of required pharmaceutical inventory documentation may also expose the County to regulatory sanctions, including potential loss of pharmaceutical handling privileges, if regulatory agencies determine that required inventory accountability controls were not maintained. Because inventory documentation for prior periods was unavailable, auditors could not determine whether the absence of inventory controls was limited to the period reviewed or whether the condition may have existed during earlier periods.
Recommendation	The Fire & Emergency Services Department should establish and enforce formal inventory control and documentation procedures for EMS pharmaceuticals to ensure medications are consistently tracked, monitored, and reconciled. To implement this control, the Department should: 1. Maintain complete pharmaceutical inventory logs documenting medications received, issued, administered, transferred, and disposed of; 2. Maintain logs documenting medication expiration monitoring and periodic inspection of EMS drug inventories; 3. Maintain documentation of drug box exchanges and medication replenishment following use; 4. Conduct periodic reconciliations between physical pharmaceutical inventory and inventory records; 5. Implement centralized record retention for pharmacy documentation to ensure records remain available regardless of personnel changes;

6. Require periodic supervisory review and documented sign-off of pharmaceutical inventory reconciliations and monitoring logs; and
7. Implement periodic independent review of EMS pharmaceutical inventory records and reconciliation procedures to verify compliance with inventory tracking, monitoring, and record retention requirements.

**Management
Response**

Corrective Action: County Management agrees with the findings and recommendations. This issue was first reported to County Management in early 2025, and led to the County removing the then-Interim Fire Chief, and hiring an external Interim Fire Chief. The Deputy Chief who oversaw the EMS program is no longer with the Fire Rescue Department, and the Deputy Chief over Operations has been reassigned. The current Interim Fire Chief has already had staff working on developing the necessary policies and procedures to address the above, as well as the installation of appropriate secure and temperature-controlled equipment. County Facilities is currently working on having modifications to several fire stations made to accommodate the special equipment.

Due Dates of Completion: The modifications and implementation of the new equipment will occur by September 30, 2026. The new policies and procedures will be implemented by October 31, 2026.

Responsible Parties: Director of Facilities, Fire Chief

2026-032S

STRENGTHENING MONITORING AND COMPLETENESS OF OFFICIAL RECORDS FOR THE COUNTY'S LOCAL LAWS, POLICIES, AND AGREEMENTS (DAC/DACO)
Condition

Although the scope of work included testing County ordinances, resolutions, policies, directives, contracts, joint powers agreements, and memorandums of understanding, the County was unable to provide a complete listing of those that remain active (i.e., not rescinded, replaced, or amended) and providing information was delayed. As a result, our testing was limited to items enacted during the scope period. The County does not maintain a centralized or Departmental listing with readily accessible documentation identifying all ordinances, resolutions, policies, agreements, and directives for which the County is responsible for implementation, enforcement, or monitoring.

During our review of County resolutions and ordinances maintained by the County Clerk's Office for Fiscal Years 2022 through 2025, we also noted several instances where documents referenced within adopted resolutions or ordinances were not included within the official record maintained by the Clerk. We noted instances where documentation contained inconsistencies or incomplete supporting documentation within the official legislative record.

Specifically, the following examples were identified during our review:

- Resolution 2024-135A – The Joint Powers Agreement amendment referenced Exhibit A, which was not included in the official resolution record maintained by the County Clerk.
- Ordinances 347-2024 and 348-2024 – The ordinances appear to be substantively identical; however, both were recorded within the official ordinance record.
- Resolution 2024-25 – The list of assets being disposed of and submitted to the Office of the State Auditor (OSA) was referenced but was not attached as part of the official resolution record.
- Resolution 2023-22 – Exhibit A, a construction agreement valued at more than \$3 million, was referenced but was not included within the official resolution documentation.
- Resolution 2021-58 – The resolution referenced an attachment that was not included in the official record maintained by the Clerk.
- Resolution 2021-120 – The Joint Powers Agreement with the Mesilla Valley Metropolitan Planning Organization (MPO) was included but was not signed as part of the official record.

Resolutions and ordinances represent formal legislative actions of the Board of County Commissioners. Exhibits, agreements, attachments, and schedules referenced within those actions form part of the documentation supporting the Board's decision. When referenced materials are not maintained together with the resolution or ordinance, the official record maintained by the Clerk's Office may not fully document the action approved by the Board.

As a result, members of the public accessing the County's official records may not be able to determine the complete or final version of the document or agreement that was voted upon and approved by the Board of County Commissioners. Although supporting documents may be obtainable through an Inspection of Public Records Act (IPRA) request or through other County Departments, the need to reconstruct the full record in this manner reduces transparency and accessibility of the County's official legislative records.

Additionally, when attachments and final executed documents are not maintained together with the adopted resolution or ordinance, version control issues may arise, creating confusion regarding which version of an agreement, exhibit, or document represents the final version approved by the Board of County Commissioners.

Criteria	New Mexico law assigns responsibility to the County Clerk for maintaining the official record of the proceedings and actions of the Board of County Commissioners. Section 4-38-1 NMSA 1978, County Clerk; Duties, “The county clerk shall... keep the records and seal of the board of county commissioners and record all proceedings of the board.” The New Mexico County Clerk Handbook for NM EDGE’s Clerk training provides that “The county clerk serves as the ex-officio clerk for the board of county commissioners... and is responsible for recording all action taken by the BOCC and any supporting materials.” It further states that “The county clerk is responsible for recording all action taken by the BOCC and any supporting materials.” Additionally, the handbook notes, “The county clerk has significant recording, filing, and indexing duties as the repository for numerous documents required by law to be filed of record in the clerk’s office.” New Mexico law also requires governmental records documenting official decisions and transactions to be preserved. Section 14-3-15 NMSA 1978, Public Records; Preservation, “All public records made or received by any agency in pursuance of law or in connection with the transaction of public business shall be preserved... as evidence of the organization, functions, policies, decisions, procedures and essential transactions of the agency.” Additionally, the public policy of the State of New Mexico emphasizes transparency and public access to governmental actions. Section 14-2-1 NMSA 1978, Inspection of Public Records Act, “It is declared to be the public policy of this state that all persons are entitled to the greatest possible information regarding the affairs of government and the official acts of public officers and employees.” Maintaining resolutions and ordinances together with all referenced exhibits and attachments supports these statutory responsibilities by ensuring the official record of the governing body’s actions is complete and readily accessible. While the County Clerk is responsible for maintaining the official record of BOCC proceedings, the preparation and compilation of agenda materials and supporting documentation originate with County offices and departments. In addition, the County Clerk, as the ex-officio Clerk to the Board of County Commissioners, must attend meetings (or may designate a representative) and is integral to the documentation and maintenance of official actions. In this role, the Clerk supports the integrity of the official record, including the documentation of actions and associated materials presented and approved by the Board.
Cause	Procedures are not currently in place to maintain a comprehensive inventory of active ordinances, resolutions, policies, agreements, and directives across County Departments. In addition, procedures for compiling and maintaining the final official legislative record do not include a standardized process across County offices and departments to ensure that all exhibits, agreements, attachments, and supporting schedules referenced within adopted resolutions or ordinances are included in the official record maintained by the County Clerk’s Office.
Effect	Without a comprehensive listing of active ordinances, resolutions, policies, and directives, the County may have difficulty monitoring which requirements remain in effect, identifying responsibilities assigned to Departments, or ensuring ongoing compliance with adopted policies and legislative actions. Additionally, when referenced documents are not maintained together with the official resolution or ordinance, the County’s official legislative record may be incomplete. This can reduce transparency for members of the public seeking to understand the actions approved by

the Board of County Commissioners, require additional research or Inspection of Public Records Act (IPRA) requests to obtain documents that should be part of the official record, create potential version control issues regarding which version of a document represents the final version approved by the Board, and increase the risk that supporting documentation may be misplaced or difficult to locate in the future. Maintaining complete records with all referenced attachments also supports a clear audit trail for the County's official legislative actions.

Recommendation

The County should establish procedures to maintain a comprehensive listing of active ordinances, resolutions, policies, agreements, and directives for which the County is responsible for implementation, enforcement, or monitoring. This listing should be maintained in a centralized and Departmental format that allows County personnel to readily identify applicable requirements.

Additionally, procedures should be strengthened across County offices and departments to ensure that the official record of each resolution and ordinance includes all exhibits, agreements, and attachments referenced in the adopted action.

The responsibility for completeness of documentation resides with each originating department or office submitting items for Board consideration.

The County Clerk, as the ex-officio Clerk to the Board of County Commissioners, must attend meetings (or may designate a representative) and is integral to the documentation and maintenance of official actions. In this role, the Clerk, while sitting with the Commission during meetings, may ask clarifying questions or request additional information to ensure proper documentation and maintenance of the official record, particularly if information appears incorrect or incomplete, in support of the integrity of the official record.

Management Response

Corrective Action: County Management agrees with the recommendations. The County Manager will designate someone from the CM Office to work with the Clerk to identify ways in which these recommendations can be implemented.

Due Date of Completion: An implementation plan will be presented to the BOCC by September 30, 2026.

Responsible Parties: Clerk, CM designee

2026-033S	LACK OF DETENTION CENTER FORMAL INVENTORY PROCEDURES AND FRAGMENTED INVENTORY TRACKING SYSTEMS (DACDC)
Condition	While this finding appears to be County-wide, the audit identified specific deficiencies in inventory management and equipment accountability within the Doña Ana County Detention Center Department (DACDC). DACDC reports inventory annually to County Finance and assigns two inventory technicians to manage inventory and receiving processes. These personnel maintain records for detention equipment, uniforms, and grant-funded assets issued to detention officers. Responsibilities include documenting newly purchased equipment, maintaining inventory records, and coordinating the destruction or dismantling of obsolete items in accordance with NMAC and County Code requirements. Inventory records are maintained using three separate platforms: an Excel spreadsheet, DACDC internal software, and Workday. The Excel spreadsheet functions as the master inventory record and is maintained as a live document that is periodically updated outside of an integrated inventory management system. DACDC software is used to track officer-issued equipment, while Workday is used for county reporting and primarily tracks higher-value assets exceeding \$5,000. As a result, certain operational items such as phones, tasers, OC spray, vests, and uniforms are not captured within Workday. DACDC does not maintain a formal Departmental inventory policy or standard operating procedure governing inventory management. No Department-specific inventory procedures were provided during the audit.
Criteria	NMAC 2.20.1.16, Annual Inventory, "A. At the end of the fiscal year, each agency shall conduct a physical inventory of its fixed assets consisting of those with a historical cost of five thousand dollars (\$5000) or more, under the control of the governing authority. B. This inventory shall include all property procured through the capital projects fund which are assigned to the agency designated by the director of the property control division as the user agency. C. All passenger vehicles must be included in the inventory process. This includes all vehicles leased from the transportation services division of the general services department as required by the "auditor's rule" Paragraph (8) of Subsection A of Section 2.2.2.12 NMAC. D. The inventory process shall produce a list of the property and the date and cost of acquisition. The annual physical inventory checks against losses not previously revealed and brings to light errors in records of accountability, but more importantly, a systematic physical inventory of fixed assets provides an opportunity for surveying their physical condition, with respect to their need for repairs, maintenance or replacement. E. The results of the physical inventory shall be recorded in a written inventory report, certified as to correctness and signed by the governing authority of the agency. In the process of conducting their fieldwork, the state auditor or independent public accountant under a contract approved by the state auditor may test the correctness of the inventory by generally accepted auditing procedures (Section 12-6-10A NMSA 1978)."
Cause	DACDC relies primarily on general county policies rather than maintaining a Department-specific inventory procedure. In addition, inventory tracking has developed across multiple systems without integration or standardized processes.
Effect	Without formalized Departmental procedures, inventory practices may be applied inconsistently and staff may lack clear guidance regarding inventory management responsibilities. Maintaining inventory across multiple non-integrated systems also increases the risk of data inconsistencies, duplication of effort, and errors associated with manual entry or modification of spreadsheet records. Reliance on a live Excel spreadsheet as the primary inventory record increases the risk of accidental deletion, alteration, or loss of asset tracking information.

Recommendation	DACDC should develop and implement a formal inventory Standard Operating Procedure (SOP) consistent with NMAC requirements, Doña Ana County policies, and County Code. The SOP should define inventory tracking responsibilities, asset documentation requirements, procedures for additions and disposals, and reconciliation processes between inventory systems. Additionally, the County should evaluate opportunities to consolidate or better integrate inventory tracking systems to reduce duplication of effort and minimize the risk of data inconsistencies.
Management Response	Corrective Action: County Management agrees with the recommendations. The County Manager will review responsibilities for inventory control, evaluate the potential/need for a centralized inventory control office, and work with the Director of Finance to ensure policies and procedures are established to adequately track capital and sensitive equipment through its life cycle (from acquisition to disposal). The Doña Ana County Detention Center is in the final phases of establishing a Standard Operating Procedure for inventory procedures. The draft is being reviewed and we expect that it will be in place within a couple weeks. Additionally, we are actively migrating all assets into workday from the various programs that were previously utilized and this should be done within the next 2-3 weeks. Lastly, we are in the process of hiring an Asset Technician that will assist with inventory control and asset management to allow for an additional level of control. Due Date of Completion: June 30, 2026 Responsible Parties: County Manager, Director of Finance

2026-034S	INADEQUATE CONTROLS OVER TRANSMISSION OF SENSITIVE INFORMATION VIA EMAIL (CMO)
Condition	During testing of a sample of approximately 200,000 emails, we identified over 250 instances in which Social Security numbers (SSNs) were transmitted via email, as well as at least one instance in which a credit card number was provided through email communication. The volume and nature of this information indicate that the transmission of sensitive data via email is not isolated but occurs with some regularity. Information technology controls over the transmission of sensitive information include policies addressing acceptable use, privacy, and security awareness, employee cybersecurity training, and the use of data loss prevention (DLP) and monitoring tools. However, automated encryption for emails containing sensitive data has not been implemented, and encryption is dependent on user action. Additional controls, such as automated interception or enforcement mechanisms for sensitive data in email, are not currently in place. Based on testing performed, emails containing SSNs and at least one instance of credit card information were transmitted without evidence of automated safeguards preventing or securing such transmissions. While DLP tools are in use, the presence of these data elements in email suggests that such tools are either not configured to prevent transmission, not operating in a blocking or enforcement capacity, or not consistently effective. The lack of automated controls, combined with the continued presence of sensitive data in email, indicates that existing controls rely heavily on user behavior rather than enforced technical safeguards. Properly configured DLP systems are capable of identifying sensitive data such as SSNs and triggering alerts or preventative actions; however, such controls do not appear to be operating effectively in this instance.
Criteria	New Mexico Statutes Annotated § 57-12C-4, "Each agency that owns or licenses personal identifying information of a resident of New Mexico shall implement and maintain reasonable security procedures and practices appropriate to the nature of the information to protect the personal identifying information from unauthorized access, destruction, use, modification, or disclosure." PCI DSS v4.0.1, Requirement 4.2.2, "PAN [Cardholder data] is secured with strong cryptography whenever it is sent via end-user messaging technologies." NIST SP 800-53, SC-8 (Transmission Confidentiality and Integrity), "Implement cryptographic mechanisms to prevent unauthorized disclosure of information during transmission."
Cause	The condition appears to result from the reliance on policy and employee training rather than the implementation of automated technical controls to enforce those policies. Automated mechanisms to prevent or control the transmission of sensitive data in email have not been implemented, and controls rely on users to manually apply encryption or follow policy requirements, increasing the likelihood of noncompliance. Additionally, while DLP and monitoring tools are in place, these tools do not appear to be fully configured or operating in a manner that prevents or effectively detects and escalates the transmission of sensitive data. As a result, controls intended to safeguard SSNs and credit card information are dependent on user behavior and lack consistent automated enforcement.
Effect	The transmission of SSNs and credit card information through unencrypted or uncontrolled email channels increases the risk of unauthorized access, interception, or disclosure of sensitive information. Such exposure may result in identity theft risks to individuals and may subject the County to potential legal, regulatory, and reputational consequences.

Failure to implement effective safeguards over the transmission of sensitive data may also result in noncompliance with applicable legal and regulatory requirements, including requirements to maintain reasonable security procedures and to protect cardholder data. Additionally, the systemic nature of the issue, as evidenced by the volume of occurrences identified, indicates an increased likelihood that sensitive information could be exposed without detection or timely remediation.

Recommendation

1. Implement technical controls to prevent the transmission of sensitive data, including Social Security numbers and credit card information, through standard email channels unless appropriate safeguards are applied.
2. Configure data loss prevention tools to detect and automatically block or quarantine emails containing sensitive data transmitted in cleartext, and generate alerts for review and follow-up training.
3. Establish secure alternatives for transmitting sensitive information, such as encrypted document repositories or secure portals, and require their use in place of email whenever feasible.
4. Where transmission via email is necessary, require the use of approved secure methods, such as user-initiated encryption or other safeguards, in accordance with policy.
5. Perform periodic testing and validation of DLP and email security configurations to ensure controls are operating effectively and appropriately configured to detect sensitive data.
6. Update policies and procedures to clearly define acceptable methods for transmitting sensitive information and align those policies with enforceable technical controls.
7. Continue employee training while reinforcing that sensitive data should not be transmitted through standard email channels without appropriate safeguards and that violations may result in corrective action.

**Management
Response**

Corrective Action: County management agrees with the recommendations. The County will examine the current security software to determine if it has the capability of screening for social security numbers and credit card numbers. If so, settings will be examined to ensure screening is taking place. If not, evaluation of available products that can perform this function will be performed and a request to purchase and install the system will be made.

We are working to configure our tools to capture / block sending PII/PHI information out from the county. We also have recently completed a new training course to educate our employees on protecting sensitive information and instructing them to use encryption when there is a requirement to send this type of information. We are updating our policies and procedures along with required training to ensure compliance with our security practices.

We have created a policy that now automatically encrypts all outgoing emails that are detected containing (SSN, PCI, ABA) information. Incoming emails are currently being put on hold for review until we can create a similar policy to encrypt them as well. We also have reminded staff of the requirement to encrypt this type of information and made training available to guide them through the process.

Due Dates of Completion:

Evaluation of existing software and implementation of IT security policies – June 30, 2026
If needed, new software acquisition and implementation – June 30, 2027

Responsible Party: Director – Information Technologies

2026-0355	LACK OF CLEAR POLICY GUIDANCE AND DOCUMENTATION STANDARDS FOR PUBLIC-SAFETY CANDIDATE EVALUATION (BOCC/DASO/HR)
Condition	The Special Audit identified several areas in which County policies and procedures governing the evaluation of candidates for public-safety positions lack sufficient clarity, documentation standards, and operational guidance. Specifically, our procedures determined that: • County policies do not clearly define the authority responsible for determining whether a psychological evaluation contains a deficiency or how disagreements regarding psychological findings should be resolved. • Human Resources deficiency memoranda summarizing candidate background investigations did not consistently reflect the full context of the underlying investigative reports, including both favorable and unfavorable information contained in those reports. • Resolution 2024-82 references psychological evaluations and other hiring criteria but does not clearly establish procedures governing how those evaluations should be reviewed or integrated with background investigations and other hiring documentation. • Per discussions with the psychologists and other law enforcement experts regarding hiring practices, the psychological evaluations must be read and taken as a whole, instead of re-examining the expert's opinion on fitness to hire, to avoid increasing risk of circumventing state law and operations and increasing litigation. • County policy does not clearly define the timing or operational authority responsible for administering physical fitness or agility testing for public-safety candidates. Interviews conducted during this investigation also indicated that differing interpretations exist among Departments regarding the roles of Human Resources, operational leadership, and professional evaluators when reviewing candidate suitability information. Human Resources personnel described their role as reviewing the "totality of the packet," including psychological evaluations, background investigations, medical information, and personal history documentation, to identify inconsistencies or risk indicators relevant to hiring decisions. These interviews also indicated that differing assumptions existed regarding whether Human Resources should receive and review complete psychological evaluation reports as part of the hiring process. Human Resources personnel reported concerns regarding the integrity of some psychological reports received during hiring reviews, including instances where reports contained administrative errors such as incorrect names or misassembled pages. Taken together, these circumstances indicate that the County does not currently have a clearly documented and consistently applied framework governing how psychological evaluations, background investigations, and other suitability assessments are reviewed and incorporated into hiring decisions for public-safety positions. During our discussions with psychologists and other counties, we noted that generally, law enforcement practice is that HR is normally in a support role and Sheriff personnel recommendations are approved, except on rare occasions.
Criteria	New Mexico Administrative Code (NMAC) 10.29.9.12, Psychological Examination, "A. Procedure: (1) Prior to admission to training or certification as a law enforcement officer in the state of New Mexico, it shall be necessary for each applicant to be examined by a licensed/certified psychologist who shall certify to the individual's emotional and mental condition on a form prescribed by the director and entitled "mental examination certification" and "B. Screening process: (1) Purpose: The intent of these guidelines is to set minimally acceptable standards for pre-employment psychological testing of persons seeking certification as police officers in New

Mexico. (2) Examiner standard: Pre-employment psychological testing shall be conducted by a licensed/certified psychologist. In the event the psychologist does not have appropriate training in this area, he/she should seek supervision as per the guidelines of the American psychological association ethical standards and code of conduct.”

Doña Ana County Code Chapter 45-6, Administration of human resources system, “A. Under the supervision of the County Manager, the Human Resources Director will administer the Doña Ana County Merit System set forth in this chapter, consistent with the Human Resources Policies to be adopted in accordance herewith, and in accordance with all future approved directives and administrative instructions. B. The Human Resources Director will ensure that employment decisions, including, but not limited to, recruitment, selection, promotion, reassignment, corrective action, compensation and other conditions or privileges of employment, are based on the individual's ability to perform the essential functions of the job. C. The Human Resources Director, under the supervision of the County Manager, will continue to establish programs to develop, implement, and maintain procedures for the conditions of employment, evaluation of work performance, employee conduct, leave usage, and other aspects of human resources management for County employees, in compliance with applicable laws and policies. D. The Human Resources Director, under the supervision of the County Manager, will continue to establish programs to develop, implement, and maintain the County's compensation plan, including a salary schedule reflecting the pay ranges for each job classification and other pay policies.”

Cause

The Special Audit determined that County policies governing public-safety hiring do not clearly define the roles, responsibilities, and procedural boundaries of the Sheriff’s Office, Human Resources Department, and County administration with respect to the review, custody, and use of psychological evaluations, background investigations, and other candidate suitability documentation.

Resolution 2024-82 establishes standards related to background investigations and other hiring criteria for public-safety personnel but does not clearly define:

- who has authority to determine when a psychological evaluation should be considered deficient;
- how disagreements between professional evaluators and administrative personnel should be resolved;
- whether Human Resources must receive and maintain full psychological evaluation reports as part of the hiring record; or
- how psychological evaluations, background investigations, and other suitability assessments should be integrated when making hiring determinations.

Because these responsibilities are not clearly defined in written policy, Departments have developed differing interpretations regarding the scope of Human Resources review and the extent to which psychological evaluations and other background materials should be examined collectively when evaluating candidate suitability.

The absence of clearly defined procedures and documentation standards contributed to inconsistent practices among Departments and increased the likelihood of miscommunication regarding the appropriate process for reviewing and approving candidates for public-safety positions.

Effect

The absence of clearly defined procedures and documentation standards for evaluating public-safety candidates increases the risk that candidate suitability determinations may be conducted inconsistently or that relevant information contained in psychological evaluations, background investigations, and related records may not be fully considered when hiring decisions are made.

For safety-sensitive positions such as law enforcement, inconsistent evaluation practices may increase the County's exposure to negligent-hiring claims and other forms of civil liability if it cannot demonstrate that hiring decisions were based on a consistent, transparent, and defensible process.

The lack of clearly documented procedures may also create uncertainty among Departments regarding their respective roles in reviewing and relying upon candidate evaluation materials. When Departments apply differing interpretations of their responsibilities, disagreements regarding candidate eligibility may escalate into broader administrative disputes rather than being resolved through clearly established policy guidance.

In addition, the absence of consistent documentation standards may make it difficult for the County to demonstrate, during litigation or external review, that psychological evaluations, background investigations, and other suitability assessments were properly reviewed and considered before a hiring decision was made.

Recommendation Doña Ana County should revise its policies governing public-safety hiring and candidate evaluation to establish a clearly defined framework for reviewing and integrating psychological evaluations, background investigations, and other suitability assessments.

At a minimum, County policy should:

1. Clearly define the authority responsible for interpreting psychological evaluations and establish procedures for resolving disagreements regarding psychological findings.
2. Require that memoranda summarizing background investigations provide a balanced representation of both favorable and unfavorable investigative findings.
3. Establish written procedures governing how psychological evaluations, background investigations, and other suitability assessments must be reviewed as part of the hiring process.
4. Clearly identify the operational authority responsible for administering required physical fitness or agility testing and establish when such testing must occur during the hiring or academy process.
5. Provide training to Human Resources personnel and operational Departments regarding their respective roles in evaluating and documenting candidate suitability for public-safety positions.

Management Response

Corrective Action:

- We agree that policy must be written and documented in accordance with LEA. As to psychology reports, LEA requirement should be the sole determining factor in the employment process.
- We agree that mutual collaboration between HR and DASO for administering testing and background content is needed. The final determination should be acceptable to both parties. The hiring process steps must also be agreed upon to ensure compliance with LEA. We will work with HR and Legal departments to ensure statutes and LEA requirements are understood and complied with countywide.
- We have communicated with HR to suggest a meeting time to address the findings and respond to the Auditor's recommendations and develop joint corrective actions and related timelines.

County management agrees with the recommendations. County Management will implement the following Corrective Action Plan:

1. Policy Development and Role Clarification

Human Resources will update and implement a revised Public Safety Hiring Standard Operating Procedure (SOP) that:

- Clearly defines roles, responsibilities, and decision-making authority for Human Resources and Public Safety departments
- Establishes authority for interpreting psychological evaluations and background investigation results
- Includes procedures for resolving disagreements related to candidate suitability determinations

Deliverable: Approved and published Public Safety Hiring SOP

2. Standardized Documentation Requirements

Human Resources will establish and implement formal documentation standards that:

- Define and document what constitutes a negative finding in background investigations and psychological evaluations
- Standardize required documentation formats and review requirements

Deliverable: Written documentation standards and templates issued and implemented

3. Process Integration and Appeal Procedures

Human Resources will implement a formalized candidate evaluation process that:

- Integrates psychological evaluations, background investigations, and other suitability assessments into hiring decisions
- Establishes a formal appeal process, including defined steps, responsible parties, and required documentation
- Includes established timelines for appeals related to negative findings

Deliverable: Documented evaluation workflow and formal appeal procedure implemented

4. Training and Implementation

Human Resources will develop and deliver mandatory training to Human Resources staff and Public Safety departments covering:

- Updated SOP requirements
- Documentation standards
- Roles, responsibilities, and decision-making authority

Deliverable: Training completed and attendance documented

5. Centralization of Recruitment Oversight

The County will evaluate and implement further centralization of Public Safety recruitment functions under the Talent and Culture Division, where feasible, to:

- Strengthen compliance and consistency
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- Ensure adherence to established Human Resources policies and procedures
 - Improve oversight of candidate evaluation processes

Deliverable: Assessment completed and implementation plan executed (as applicable)

Due Dates of Completion: June 2026 / The draft policies will be provided to the Board for consideration by December 31, 2026.

Responsible Parties: DASO Recruiting Coordinator, Major / Director of Human Resources, Asst. Director of Human Resources – Talent & Culture Division

2026-036S	NEED FOR CLEAR AUTHORIZATION PROCEDURES FOR COUNTY LITIGATION AND CONFLICT-COUNSEL PROTOCOLS IN MATTERS INVOLVING ADVERSE COUNTY OFFICIALS (BOCC/CMO)
Condition	Special audit procedures identified that the Emergency Petition for Writ of Mandamus filed on February 14, 2025 was filed by the County Manager through the County Attorney's Office in litigation adverse to the elected Sheriff. Records reviewed during the Special Audit indicate that the Board of County Commissioners did not receive a presentation regarding the matter until February 25, 2025, after the petition had already been filed, the District Court had issued the writ, and the deputies had already been commissioned. The February 25 agenda item was presented for discussion and informational purposes, and no formal Board action was taken during that meeting. Audit procedures did not identify a written policy or documented county procedure requiring confirmation of Board authorization before initiating litigation on behalf of the County. Audit testing also did not identify a written policy establishing when independent or conflict counsel should be provided to elected officials when county interests become adverse or potentially adverse.
Criteria	NMSA 1978, Section 4-38-1, "The powers of a county as a body politic and corporate shall be exercised by a board of county commissioners." NMSA 1978, Section 4-46-1, "In all suits or proceedings by or against a county, the name in which the county shall sue or be sued shall be the board of county commissioners of the county....., but this provision does not prohibit county officers, when authorized by law, from suing in their name of office for the benefit of the county." NMSA 1978, Section 4-38-19(B), "A board of county commissioners may employ and set the salary of a county manager to conduct the business of the county ... and to act generally as the administrative assistant to the board, aiding and assisting it in the exercise of its duties and responsibilities." <i>Gallegos v. Bernalillo County Board of County Commissioners</i>, 272 F.Supp.3d 1256 (D.N.M. 2017). Lawsuit alleging claims against county detention center must name board of county commissioners as a defendant. Where plaintiff filed a lawsuit asserting claims against the Bernalillo county metropolitan detention center (BCMDC) for violations of the New Mexico Tort Claims Act (NMTCA) after plaintiff was remanded to BCMDC to participate in a methadone program to decrease his level of dependence so that he would not incur life endangering withdrawal symptoms, but nonetheless suffered life threatening withdrawal symptoms for approximately two months, BCMDC was not a suable entity under the NMTCA, because 4-46-1 NMSA 1978 provides a limitation on the NMTCA, requiring that the proper defendant in all suits against a county is the county's board of county commissioners. <i>Lamendola v. Taos County Sheriff's Office</i>, 338 F.Supp.3d 1244 (D. N.M. 2018). County sheriff lacks the capacity to be sued, even under federal statutes. Where former New Mexico county sheriff's office employee brought a court action against the Taos county sheriff's office alleging discrimination and retaliation in violation of the New Mexico Human Rights Act, the federal Americans with Disabilities Act, as well as a state law claim for retaliatory termination against public policy, and where defendant moved to dismiss plaintiff's complaint on the basis that the Taos county sheriff's office is not a suable entity, the federal district court granted defendant's motion because a straightforward application of this section suggests that plaintiff must name the board of county commissioners of Taos county, rather than the Taos county sheriff's office, as the defendant in this case. Moreover, despite the authority of elected officials such as the Taos county sheriff, the board of county commissioners, through the county manager, was authorized

and empowered to establish by ordinance a merit system for the hiring, promotion, discharge and general regulation of the deputies and the employees of the county sheriff's office.

New Mexico courts and Attorney General opinions also recognize that although counties may administer personnel systems, those systems cannot be applied in a manner that effectively removes or usurps the statutory authority of elected officials in the operation of their offices.

Cause

Special audit procedures determined that the County does not currently maintain a clearly defined written policy establishing the procedures required before litigation is initiated on behalf of the County in matters involving another elected county official. The statutory framework places the corporate powers of the county in the Board of County Commissioners while assigning the County Manager an administrative role assisting the Board in conducting county business. However, the County has not adopted internal procedures requiring confirmation of Board authorization, delegated authority, or emergency authorization before filing litigation of this nature.

In addition, audit procedures determined that the County lacks a documented conflict-management protocol addressing when separate legal counsel should be assigned when litigation or threatened litigation places county administration and an elected official in adversarial positions. The absence of these governance procedures contributed to miscommunication and uncertainty among Departments regarding what actions were authorized and how legal conflicts between county offices should be handled.

Effect

When litigation is initiated on behalf of the County without a clearly documented authorization process, the County risks uncertainty regarding the source of authority for the action and whether the action was undertaken consistent with the statutory role of the Board of County Commissioners. In matters involving adverse county officials, the absence of a formal conflict-counsel protocol may also create situations in which affected elected officials do not receive timely independent legal advice regarding their rights, obligations, and procedural options.

These conditions increase the risk of internal governance disputes, procedural challenges, and litigation concerning authority and due process. They may also undermine confidence that disputes between county Departments and elected officials are being handled through fair and transparent procedures.

Recommendation

Doña Ana County should adopt a written policy governing the initiation of litigation on behalf of the County and the management of legal conflicts involving county officials.

At a minimum, the policy should:

1. Require documented confirmation of the legal authority for any lawsuit filed on behalf of the County, including whether the action was authorized by the Board of County Commissioners, authorized pursuant to statute, or authorized under a written delegation previously approved by the Board.
2. Establish an emergency procedure for time-sensitive filings that requires prompt written notice to the Board and subsequent Board review when pre-filing consideration is not feasible.
3. Require that litigation files include documentation identifying the source of authority relied upon before the action was filed.
4. Establish a conflict-management protocol providing that when county administration and an elected official become adverse or potentially adverse in a legal matter, the County promptly evaluate whether separate conflicts counsel should be provided to ensure fair process and independent legal advice.

-
5. Provide training for county administration, elected officials, and Department leadership regarding the respective statutory roles of the Board of County Commissioners, County Manager, and elected officials when litigation or legal disputes arise.
-

**Management
Response**

Corrective Action: County management understand the recommendations, and will bring this topic up to the BOCC during a future work session in order to obtain guidance and direction related to policies on how and when lawsuits may be filed on behalf of the County. Effort will be made to keep a clear distinction between the rare situation covered in this instance, and the frequent filing of lawsuits against individuals pursuant to a County employee's assigned duties (e.g., filing a nuisance claim against a property owner). The County Attorney will also prepare guidance on how Elected Officials can request conflict counsel, and the HR Talent & Culture division will prepare training for elected officials, County management, and others on roles and responsibilities.

Due Date of Completion: September 30, 2026

Responsible Parties: County Attorney, Asst. Director of Human Resources – Talent & Culture

2026-037S	HUMAN RESOURCES POLICIES AND PROCEDURES REQUIRE UPDATING AND CONSISTENT IMPLEMENTATION (BOCC/HR)
Condition	During the period covered by the Special Audit scope, the County's Human Resources (HR) policies and procedures required updating. The County's HR Policies Ordinance 235-08 was passed in 2008. The County's HR Procedures Manual was last amended in 2019. The County's Code is based upon the Ordinance and indicates some amendments in 2011. During interviews conducted as part of audit procedures, multiple employees reported that HR policies were not consistently enforced or lacked sufficient clarity to support timely personnel actions. Employees indicated that inconsistencies or gaps in policy implementation contributed to delays in resolving personnel matters, including hiring actions, disciplinary proceedings, employee separations, and requests to establish or modify positions. The County did not demonstrate that HR policies had been periodically reviewed, updated, or uniformly applied across Departments during the audit period. Since that time, the County began an evaluation and update process and BOCC approved revised HR Policies and Procedures on January 27, 2026.
Criteria	Government Auditing Standards (GAGAS), paragraphs 6.03–6.04, Management of the audited entity is responsible for designing, implementing, and maintaining effective internal control...Internal control is a process...that provides reasonable assurance... of compliance with applicable laws and regulations. Effective internal control environments in local governments require transparency, accountability, and clearly defined authority to ensure the proper stewardship of public resources and compliance with laws and regulations. The Committee of Sponsoring Organizations of the Treadway Commission (COSO) Internal Control Integrated Framework, originally issued in 1992 and refreshed in 2013 (ICIF-2013 or Framework), provides widely accepted guidance used by public sector entities, including local governments, to design, implement, and evaluate internal controls. In accordance with COSO (2013), Control Environment Principles 1–17 require integrity and ethical values, independent oversight, clearly defined authority, competent personnel, and accountability, all of which are critical to promoting effective governance, preventing misuse of public funds, and maintaining public trust.
Cause	The County did not establish formal processes to ensure periodic review, updating, and consistent enforcement of Human Resources policies governing personnel administration.
Effect	Outdated or inconsistently applied HR policies increase the risk of delays in personnel actions, inconsistent treatment of employees, operational inefficiencies, and potential exposure to employee grievances or employment-related disputes. Lack of clear and consistently applied policies may also reduce management's ability to administer personnel matters in a timely and equitable manner.
Recommendation	The County should strengthen internal controls over personnel administration by performing periodic review and updating of HR policies and procedures, establishing formal approval and implementation timelines for policy updates, ensuring consistent application of HR policies across Departments, and providing training to supervisors and management regarding policy requirements and implementation.
Management Response	Corrective Action: The BOCC approved an updated HR Policy Manual in early 2026. Per other notations in the Special Audit, a review of the new Manual will be conducted, to include comparing it to County Manager directives. An annual review will be conducted of the Manual, and a formal process for recommending changes will be put into place. Due Date of Completion: December 31, 2026 Responsible Parties: County Manager, Director of Human Resources

2026-0385

NEED FOR CLEAR POLICY GUIDANCE GOVERNING THE RELATIONSHIP BETWEEN COUNTY MERIT SYSTEM AUTHORITY AND THE SHERIFF'S AUTHORITY TO APPOINT, COMMISSION, AND DE-COMMISSION DEPUTIES (BOCC/DASO/CMO)

Condition

Special audit procedures identified a lack of clearly defined policy guidance governing the relationship between the County's merit system personnel authority and the Sheriff's statutory authority to appoint, commission, and de-commission deputy sheriffs.

The issue became evident during the events surrounding the Emergency Petition for Writ of Mandamus filed on February 14, 2025, which sought to compel the Sheriff to commission certain deputy candidates. The dispute arose after Human Resources issued memoranda recommending that several candidates not proceed in the hiring process under the County's public-safety hiring standards, while the Sheriff asserted authority to determine whether and when those individuals would be commissioned as deputy sheriffs since there were still questions as to the hiring of half the law enforcement academy graduates.

Special audit procedures determined that County policies do not clearly distinguish between:

- employment status within the County merit system; and
- the Sheriff's authority to appoint, commission, and de-commission deputies who exercise the powers of the Sheriff.

As a result, differing interpretations developed among County administration, Human Resources personnel, and the Sheriff's Office regarding whether administrative hiring determinations could delay or prevent the commissioning of deputies.

Correspondence reviewed during the Special Audit also reflected concerns raised by the Sheriff regarding the operational ability to remove or de-commission deputies if circumstances required it. The Sheriff indicated that if personnel processes prevented the removal of a commission when necessary, it could limit the Sheriff's ability to control who exercises the law enforcement authority of the office.

These differing interpretations regarding hiring authority, commissioning authority, and the operational ability to remove commissions contributed to disagreement between County administration and the Sheriff's Office regarding the appropriate process for appointing deputies. The disagreement ultimately resulted in litigation seeking judicial intervention through the February 14, 2025 Emergency Petition for Writ of Mandamus.

Records reviewed during the Special Audit also indicate that the District Court's ruling in the mandamus proceeding addressed the immediate request presented to the court but did not resolve the broader governance question regarding the respective authority of County administration, the merit system personnel process, and the Sheriff's statutory authority to appoint and commission deputies. As a result, the underlying policy question regarding how County personnel procedures interact with the Sheriff's commissioning authority remains a matter of County governance and policy rather than a question definitively resolved through the mandamus litigation.

Special audit procedures also included discussions with representatives from other New Mexico counties and individuals familiar with law-enforcement administrative practices within the state. These discussions indicated that in counties operating under merit-based personnel systems, county personnel processes generally govern employment matters, while the authority to commission or de-commission deputies is typically treated as an operational function of the Sheriff.

	The Special Audit determined that the County does not currently maintain written policy guidance clearly defining how these two authorities—county employment authority and the Sheriff’s commissioning authority—interact within the County’s personnel framework.
Criteria	NMSA 1978, Section 4-41-2, “The sheriff shall be conservator of the peace within his county...” This statute establishes the Sheriff as the county’s primary law-enforcement officer responsible for maintaining the peace within the county. NMSA 1978, Section 4-41-5, “The sheriffs in all the counties of this state shall have power to appoint deputies, who shall remain in office at the pleasure of such sheriffs; except that in counties which have established a merit system by ordinance, the provisions of the ordinance shall control the demotion and discharge of deputies and other employees of the sheriff’s office, except for one under-sheriff and an executive secretary, both of whom shall hold exempt positions.” This statute establishes the Sheriff’s authority to appoint deputies and recognizes that deputies serve at the pleasure of the Sheriff while also acknowledging that merit systems may govern certain employment actions. Doña Ana County Code Chapter 45-6, Administration of human resources system, “A. Under the supervision of the County Manager, the Human Resources Director will administer the Doña Ana County Merit System set forth in this chapter, consistent with the Human Resources Policies to be adopted in accordance herewith, and in accordance with all future approved directives and administrative instructions. B. The Human Resources Director will ensure that employment decisions, including, but not limited to, recruitment, selection, promotion, reassignment, corrective action, compensation and other conditions or privileges of employment, are based on the individual’s ability to perform the essential functions of the job. C. The Human Resources Director, under the supervision of the County Manager, will continue to establish programs to develop, implement, and maintain procedures for the conditions of employment, evaluation of work performance, employee conduct, leave usage, and other aspects of human resources management for County employees, in compliance with applicable laws and policies. D. The Human Resources Director, under the supervision of the County Manager, will continue to establish programs to develop, implement, and maintain the County’s compensation plan, including a salary schedule reflecting the pay ranges for each job classification and other pay policies.”
Cause	Special audit procedures determined that County personnel policies and related administrative guidance do not clearly define how the Sheriff’s statutory authority to appoint deputies should interact with County employment procedures administered through the merit system. While the merit system establishes procedures governing employment actions such as hiring, discipline, and termination of county employees, County policy does not clearly address how those employment processes relate to the Sheriff’s authority to commission or de-commission deputies under state law. Under New Mexico law, the Board of County Commissioners exercises the corporate powers of the county and establishes county policy. The County Manager administers county operations and the personnel system under authority delegated by the Board of County Commissioners and serves as the administrative assistant to the Board. At the same time, the Sheriff is an independently elected official whose authority to appoint deputies and oversee law enforcement operations is established by state statute. Because County policies do not clearly define how these authorities interact when personnel processes affect the commissioning or operational authority of deputy sheriffs, differing interpretations developed regarding the scope of administrative authority and the operational authority of the Sheriff.

Effect	The absence of clearly defined policy guidance governing the relationship between county personnel authority and the Sheriff's statutory authority contributed to significant disagreement between County administration and the Sheriff's Office regarding the commissioning of deputies. In this instance, the disagreement escalated into litigation seeking judicial intervention in a matter involving internal county governance and statutory authority. Without clearly defined procedures, similar disputes may arise in the future regarding the respective authority of elected officials and county administrative Departments. Such disputes may result in unnecessary litigation, operational disruption, and uncertainty regarding the roles and responsibilities of county officials responsible for public safety operations.
Recommendation	Doña Ana County should develop written policy guidance clarifying how the County's merit system personnel processes interact with the Sheriff's statutory authority to appoint, commission, and de-commission deputy sheriffs. At a minimum, County policy should: 1. Clearly distinguish between employment status under the County merit system and the operational authority associated with the commissioning of deputy sheriffs. 2. Define the specific and respective roles of the Sheriff's Office, Human Resources Department, County Manager's Office, and the Board of County Commissioners in matters involving hiring, commissioning, discipline, and removal of deputy sheriffs in greater detail, respecting the operational powers of the Sheriff alongside the need to mitigate risk where possible. 3. Establish procedures for resolving disagreements between administrative personnel processes and the operational authority of elected officials before such disputes escalate into litigation. 4. Provide training tailored to DAC administration, Human Resources personnel, and elected officials regarding the statutory framework governing the appointment and employment of deputy sheriffs. 5. Consider developing a collaborative policy review process involving the Board of County Commissioners, County administration, Human Resources, and other elected officials whose statutory duties may be affected by County personnel policies. This process may include workshops or working groups and should allow for appropriate public input to ensure that governance policies reflect statutory responsibilities, operational needs, and community expectations.
Management Response	Corrective Action: • The Sheriff concurs with the collaborative effort with the County Administration to review the statutory duties of County Elected officials, including the Sheriff. This will ensure consistency with Statutory requirements. • We have communicated with HR to suggest a meeting time to address the findings and respond to the Auditor's recommendations and develop joint corrective actions and related timelines. County management understands the recommendations presented, and will bring these up to the BOCC during a future work session to discuss and obtain direction, as well as to provide an opportunity for the elected officials to share their perspective. As was obvious from the situation that brought forth the writ, the existing state statutes are less than ideal in helping handle situations where there is a merit system in place, but an elected official wishes to take action (or

inaction) outside of the merit system. Because the State Legislature could have a role, state legislators will be invited to provide input.

Due Dates of Completion: June 2026 / December 31, 2026

Responsible Parties: Sheriff/Major / County Manager, BOCC

2026-039S	VIOLATION OF OPEN MEETINGS ACT (OMA) – DETERMINATION REGARDING EVIDENTIARY HEARING MADE OUTSIDE A PUBLIC MEETING (BOCC/CMO)
Condition	During review of documentation and interviews related to a previous Code of Conduct complaint process, it was noted that members of the Board of County Commissioners were contacted individually regarding whether a scheduled Code of Conduct evidentiary hearing should proceed. Based on those communications, it was determined that the hearing would not be necessary and the hearing was subsequently vacated. These communications occurred outside of a publicly noticed meeting of the Board of County Commissioners. The information reviewed indicates that commissioners were contacted individually to obtain their positions regarding whether the hearing should proceed, which may constitute serial communications or polling of members outside of a public meeting. The determination regarding whether the evidentiary hearing would proceed involved discussing public business and taking action within the authority of the Board of County Commissioners; however, the matter was not addressed during a properly noticed public meeting consistent with the requirements of the New Mexico Open Meetings Act.
Criteria	Per the New Mexico Open Meetings Act (NMSA 1978, §10-15-1(B)), all meetings of a quorum of members of any board, commission, administrative adjudicatory body or other policymaking body of any state agency, any agency or authority of any county, municipality, district or political subdivision, held for the purpose of formulating public policy, discussing public business or for the purpose of taking any action within the authority of or the delegated authority of any board, commission or other policymaking body are declared to be public meetings open to the public at all times. Also, except as otherwise provided in the constitution of New Mexico or the Open Meetings Act, all meetings of a quorum of members of any board, commission, administrative adjudicatory body or other policymaking body of any state agency, any agency or authority of any county, municipality, district or political subdivision shall be held only after reasonable notice to the public.
Cause	At the time of the incident, the County Code of Conduct was interpreted by County management to apply to elected officials and appointed officials because County employees were subject to a separate employee code of conduct. However, the Code of Conduct in effect at that time did not clearly specify whether it applied to elected officials and appointees. As a result, the process for addressing the complaint and determining whether the evidentiary hearing should proceed was handled through individual communications with commissioners rather than through a publicly noticed meeting of the Board of County Commissioners consistent with the requirements of the New Mexico Open Meetings Act.
Effect	Addressing whether the evidentiary hearing should proceed through communications outside of a publicly noticed meeting is not consistent with the transparency requirements of the New Mexico Open Meetings Act. When public business is discussed or action is determined outside of a properly noticed public meeting, the public does not have the opportunity to observe the deliberations of the governing body as required by law. This may reduce transparency, diminish public confidence in the decision-making process, and increase the risk of disputes or complaints regarding how the matter was handled.
Recommendation	The County should ensure that matters within the authority of the Board of County Commissioners are addressed during properly noticed public meetings in accordance with the New Mexico Open Meetings Act. When determinations are required regarding proceedings such as evidentiary hearings, the matter should be placed on a publicly noticed agenda and addressed during an open meeting of the Board of County Commissioners, where the governing body may deliberate and take action through a motion, second, discussion, and vote. The

County should also provide periodic training to Commissioners and relevant staff regarding Open Meetings Act requirements to help ensure discussions and decisions involving public business are conducted in compliance with statutory transparency requirements. In addition, the County may wish to review and clarify the Code of Conduct to clearly specify its applicability to elected officials and appointed officials and to establish clear procedures for addressing complaints involving members of the governing body.

**Management
Response**

Corrective Action: County management understands the recommendation, and commits to asking the NM Attorney General to hold an in-person training session for Commissioners and County staff on the NM Open Meetings Act. Following the training session, the County Manager will bring the issue before the BOCC to receive direction on drafting of policies for the Board to approve related to issues surrounding the Open Meetings Act, to include notices of closed sessions and approvals of action from a closed session. This will include discussion on whether or not the Board wishes to adopt policy that goes beyond the minimum requirements set forth by the Open Meetings Act.

Due Date of Completion: September 30, 2026

Responsible Party: County Manager

2026-040S	ABSENCE OF A FORMAL RECORDS RETENTION POLICY (BOCC/CMO)
Condition	During the course of the engagement, we inquired about the County's records retention practices and requested a copy of the County's records retention policy. County management informed us that the County currently does not have a formal records retention policy in place. Management indicated that the County Attorney and Assistant County Manager are currently working to develop a policy addressing records retention and disposition.
Criteria	The New Mexico Local Government Records Retention and Disposition Schedules (LGRRDS), formerly codified at Title 1, Chapter 19 NMAC, historically established minimum retention periods for records maintained by local governments. The LGRRDS rule was repealed effective November 30, 2015. Following repeal of the statewide rule, local governments remain responsible for establishing internal policies and procedures governing the retention, protection, and disposition of public records in order to ensure compliance with applicable public records requirements, support financial and operational accountability, and preserve documentation necessary for audits, litigation, and public transparency. Sound internal control practices require governmental entities to adopt written records management policies that define retention periods, storage methods, responsibility for records custody, and procedures for lawful destruction of records.
Cause	The County has not formally adopted a records retention and disposition policy following the repeal of the statewide LGRRDS rule.
Effect	Without a formally adopted records retention policy, the County faces an increased risk that records may be retained inconsistently or destroyed prematurely. This could impair the County's ability to support financial reporting, respond to public records requests, comply with legal and regulatory requirements, or provide documentation needed for audits, litigation, or operational decision-making.
Recommendation	The County should formally adopt a comprehensive records retention and disposition policy. The policy should establish minimum retention periods for major record categories, identify responsible Departments for records management, define procedures for secure storage and lawful destruction of records, and incorporate applicable guidance from the New Mexico State Records Center and Archives or other recognized records management standards.
Management Response	Corrective Action: County Management agrees with the recommendations. A draft has already been completed and is in final review by the County Attorney. Due Date of Completion: The Records Retention and Disposition Policy will be presented to the Board of County Commissioners for consideration by July 31, 2026. Responsible Party: County Attorney

2026-041S	CLARIFICATION AND STRENGTHENING OF INTERNAL AUDIT GOVERNANCE AND CHARTER PROVISIONS (BOCC/IA)
Condition	The County has established an internal audit function and advisory committee and has conducted numerous internal audit engagements across multiple Departments intended to promote transparency, accountability, and operational improvement. The internal audit function has completed engagements addressing operational processes, compliance matters, and administrative practices across a range of County Departments, reflecting the County's commitment to maintaining an internal review capability and addressing operational issues identified through internal review activities. During our review of the County's internal audit governance structure and additional information provided by the Internal Auditor, we noted the County has a draft Internal Audit Department Charter that has not yet been formally adopted via BOCC resolution. The Internal Audit Advisory Committee Charter (adopted through Resolution 2024-78) and internal audit engagement practices we noted that the County has established a formal internal audit function supported by an advisory committee structure. However, several elements of the internal audit governance framework could benefit from additional clarification or strengthening in order to better align with commonly recognized internal audit governance practices for public-sector organizations. Many times, the internal audits are difficult to close out due to lack of responsiveness from Departments or offices and there is a lack of accountability for corrective actions. Examples include: • the respective roles of the Board of County Commissioners, the Internal Audit Advisory Committee, and executive management in reviewing and approving the annual risk-based internal audit plan • the functional reporting relationship of the internal auditor within the County's governance structure and the degree of independence from executive management when auditing Departments within the executive branch • the authority of the internal auditor to obtain unrestricted access to records, personnel, and physical property necessary to perform audit work • formal requirements for periodic internal and external quality assessments of the internal audit function documentation of a consistent process for monitoring and reporting on the status of internal audit recommendations. The charter establishes the Internal Audit Advisory Committee and assigns responsibilities related to reviewing internal audit activities; however, the charter generally describes the committee in an advisory capacity and could further clarify the committee's role in providing governance oversight of the internal audit function, including review of the risk-based audit plan and monitoring of internal audit activities. A review of internal audit engagement activity over multiple years also indicates that internal audit work has been concentrated in certain operational Departments, particularly public safety-related Departments, while some enterprise-level operational or administrative functions have received comparatively less audit coverage. While such concentration may reflect management requests, operational risk considerations, or emerging issues within those Departments, the charter does not currently describe a framework for periodically evaluating audit coverage across County functions or ensuring that internal audit resources are allocated based on a documented risk-based approach. The internal audit function appears to have completed a substantial number of engagements addressing operational and administrative topics across multiple Departments. Given the scope

of County operations and the range of potential audit subjects, establishing a structured risk-based planning approach within the charter that periodically reassesses audit coverage across major functional areas and enterprise risk areas may help ensure that internal audit resources are applied efficiently and that audit attention is balanced among Departments over time. Such an approach can help the governing body and advisory committee evaluate whether internal audit resources are appropriately aligned with areas of operational, financial, information technology, and compliance risk across the County.

Clear governance structures also help ensure that internal audit reports and significant audit matters are communicated directly to the governing body through established reporting channels, supporting transparency and informed oversight of County operations.

The County's draft Internal Audit Department Charter addresses many of these points and will be brought forward to the BOCC for review and approval.

Criteria

Professional guidance for internal audit functions in government organizations emphasizes the importance of clearly defined governance structures to support internal audit independence and effectiveness.

Per the Institute of Internal Auditors Standard 1110, Organizational Independence, the chief audit executive must report to a level within the organization that allows the internal audit activity to fulfill its responsibilities.

The Institute of Internal Auditors model internal audit charter further provides that internal audit should have full, free, and unrestricted access to all functions, records, property, and personnel pertinent to carrying out audit engagements.

Institute of Internal Auditors Standard 1312 recommends that external assessments of the internal audit function be conducted at least once every five years by a qualified, independent assessor.

Professional internal audit guidance also indicates that the chief audit executive should establish a risk-based internal audit plan and communicate that plan to senior management and the governing body for review and approval to ensure that internal audit priorities reflect organizational risks and that the governing body maintains oversight of internal audit activities.

Cause

These conditions appear to result primarily from the development of the County's internal audit program over time and the advisory structure of the Internal Audit Advisory Committee. As internal audit activities have evolved and expanded to address operational issues across multiple Departments, certain governance elements related to audit planning, oversight roles, and documentation of internal audit authority may not have been fully clarified or updated within the charter.

As a result, some responsibilities related to risk-based planning, approval of the audit plan, and oversight of special projects are not explicitly defined within the current charter framework.

Effect

When roles, authority, and oversight responsibilities related to internal audit are not clearly defined, the County may face:

- uncertainty regarding the respective responsibilities of the governing body, advisory committee, and management
- potential limitations on the perceived independence or authority of the internal audit function
- inconsistent practices for approving audit plans or monitoring recommendation status
- reduced clarity regarding expectations for periodic quality review of the internal audit function.

In addition, when governance roles and planning processes are not clearly defined, the County may have limited visibility into how internal audit resources are prioritized across Departments or how adjustments to the audit plan are evaluated.

Clear governance structures help ensure that the internal audit function can perform its work objectively and that audit results provide reliable information to the governing body regarding internal control and operational risks. Clearly defined governance structures, risk-based planning processes, and transparent oversight of internal audit activities also support effective monitoring of audit recommendations and reinforce management accountability for implementing internal control improvements identified through internal audit work.

Recommendation

The County should consider reviewing and updating the Internal Audit Advisory Committee Charter and related internal audit procedures to clarify and strengthen the governance framework for internal audit. Areas that may benefit from clarification include:

1. stating the County will follow the Institute of Internal Auditors (IIA) national standards;
2. clearly defining the respective roles of the Board of County Commissioners, the Internal Audit Advisory Committee, and executive management in reviewing and approving the annual risk-based internal audit plan;
3. reaffirming the functional independence of the internal audit function and clarifying reporting relationships;
4. explicitly stating the authority of the internal auditor to access records, personnel, and physical property necessary to perform audit work;
5. establishing requirements for periodic internal and external quality assessments of the internal audit function;
6. formalizing procedures for tracking and reporting the status of internal audit recommendations;
7. establishing a clear process within the charter for initiating targeted special projects, management-requested reviews, or complaint-driven inquiries, including appropriate review and acknowledgement by the Board of County Commissioners or the Internal Audit Advisory Committee when such projects materially affect the annual risk-based audit plan or require significant reallocation of internal audit resources;
8. maintain physical and electronic access to all areas of the County to ensure there are no scope limitations to their work;
9. ensure all Offices and Departments are timely in their responses and corrective actions, with accountability;
10. periodically reassessing audit coverage across major functional areas and enterprise risk areas as part of the County's risk-based internal audit planning process to help ensure that internal audit resources address both Departmental operational risks and broader countywide financial, operational, information technology, and compliance risks; and
11. requiring IA in conjunction with the Committee and the BOCC to follow up on special audit findings and ensure accountability for corrective actions.

**Management
Response**

Corrective Action:

The County concurs with the overall intent of the audit finding and appreciates the Auditor's recognition of the progress made in establishing and expanding the Internal Audit function and Advisory Committee. The County acknowledges that, as the internal audit function has

matured, certain governance elements—particularly those related to risk-based planning, oversight roles, audit authority, and follow-up procedures—require additional clarification and formalization. Management also recognizes the need to improve accountability and timeliness in the implementation of corrective actions across departments.

In reviewing the deficiencies noted in the current finding, the Internal Audit function notes that several of the elements identified as missing from the Internal Audit Advisory Committee Charter are addressed within the Internal Audit Department Charter (IADC). However, the IADC will require BOCC approval before implementation. To bring written guidance into conformity with audit recommendations, the County will ensure that the following elements are explicitly incorporated into the IADC, before submitting it for BOCC approval:

- Roles and responsibilities of the Board of County Commissioners, the Internal Audit Advisory Committee, and executive management will be clearly defined, particularly with respect to the development, review, oversight, and approval of the multi-year risk-based internal audit plan.
- The County will reaffirm and document the organizational independence of the internal audit function, including clarifying functional reporting relationships to ensure appropriate independence, when auditing departments within the executive branch.
- The updated charter will explicitly affirm the internal auditor's full, free, and unrestricted access to all records, personnel, and physical property necessary to perform audit work, within the bounds of applicable laws, regulations, and organizational policies.

This access will be exercised with due consideration for situations involving confidentiality or regulatory restrictions (e.g., attorney-client privileged data, active investigations, HIPPA, IT security restrictions, whistleblower protections, data privacy laws, etc.). In such cases, the internal audit function will coordinate with appropriate parties (e.g., Legal, Department Leadership, or HR) to obtain access in a manner that maintains independence while respecting required limitations.

- The County will review and update the Internal Audit Department Charter to enhance alignment with applicable guidance from the Institute of Internal Auditors where feasible, considering the structure and resources of the internal audit function. This will include budgeting time and finances as necessary to establish a periodic internal quality assessment and external quality review of the internal audit function, consistent with professional standards.
- A formal, standardized process will be implemented to track, monitor, and report the status of internal audit recommendations, including regular reporting to the Internal Audit Advisory Committee and the Board of County Commissioners.
- The County will establish formal procedures for initiating and approving special projects, management-requested reviews, and complaint-driven audits, including processes to evaluate and communicate any impact on the approved audit plan.
- A structured risk-based audit planning process will be developed and documented to ensure periodic reassessment of audit coverage across County Departments and enterprise risk areas, based upon an applicable documented risk assessment.
- The County will strengthen follow-up procedures to ensure timely implementation of corrective actions, including establishing accountability mechanisms for Departments and periodic status reporting to update governance bodies on significant audit matters.

Due Date of Completion: Management anticipates presenting the Internal Audit Department Charter to the Board of County Commissioners for review and approval by September 30, 2026, with implementation of revised processes to follow shortly thereafter.

Responsible Party: Internal Auditor: The County is committed to strengthening internal audit governance and ensuring that the internal audit function operates in accordance with recognized professional standards while continuing to provide value through independent oversight, risk-based assurance, and accountability across County operations. Thus, the internal auditor will be responsible for coordinating and following through on the corrective actions above.

2026-042S	STRENGTHENING MONITORING AND ACCOUNTABILITY PROCESSES FOR INTERNAL AUDIT RECOMMENDATIONS (BOCC/IA)
Condition	As discussed in the preceding finding regarding the governance structure of the internal audit function, effective internal audit oversight includes not only the performance of audits but also consistent monitoring of management’s corrective actions in response to audit recommendations. During our review of internal audit reports, follow-up reports, and related documentation, we observed that while internal audit findings and recommendations were issued to Departments, the County does not appear to maintain a centralized or consistently documented process for tracking the implementation status of internal audit recommendations across Departments. In several instances, the status of recommendations could only be determined through later follow-up audits or informal communications rather than through a structured recommendation tracking process. Additionally, internal audit reports and available documentation did not consistently reflect whether recommendations were fully implemented, partially implemented, or not implemented. While follow-up audits were conducted in some cases, these follow-ups appear to occur periodically rather than through a standardized monitoring process that regularly reports the status of corrective actions to County leadership or the governing body. Department responses were sometimes incomplete. In one example, the response was “The reason(s) for the large variances were indeterminate.” This is not a thorough root cause analysis needed for proper corrective action. We also did not observe a consistent framework linking the implementation of internal audit recommendations to Departmental management accountability mechanisms, such as documented corrective action plans, supervisory review processes, or other management practices intended to encourage timely implementation of recommendations or recognize effective corrective actions.
Criteria	Effective internal audit governance practices emphasize the importance of monitoring the implementation of audit recommendations to ensure that identified control improvements are addressed. Per the Institute of Internal Auditors Standard 2500, Monitoring Progress, the chief audit executive must establish and maintain a system to monitor the disposition of results communicated to management. Public-sector governance practices commonly include processes whereby management reports periodically to the governing body or audit committee regarding the status of audit recommendations and corrective actions.
Cause	These conditions appear to result primarily from the absence of a centralized and formally documented process for tracking internal audit recommendations and reporting implementation status across Departments. While internal audit periodically conducts follow-up engagements and Departments may address recommendations individually, the monitoring of corrective actions does not appear to be consistently consolidated into a structured tracking system or integrated into existing supervisory or management reporting processes.
Effect	When the implementation status of internal audit recommendations is not consistently tracked and management accountability processes are not clearly defined, the County may face: • reduced visibility for the governing body and senior leadership regarding whether recommended control improvements have been implemented • inconsistent monitoring of corrective actions across Departments • delays in addressing internal control improvements identified through internal audit work

- reliance on later follow-up audits to determine implementation status rather than ongoing monitoring.

Without a structured monitoring framework, it may also be more difficult for the County to demonstrate that internal control improvements identified through internal audit activities have been implemented consistently across Departments.

These conditions do not necessarily indicate that recommendations were not implemented; however, the absence of a structured monitoring and accountability framework may limit the County's ability to consistently demonstrate and verify the status of corrective actions.

Recommendation

The County should consider establishing a formal, centralized process for monitoring and reporting the status of internal audit recommendations and strengthening management accountability for implementing corrective actions. Such a process may include:

1. maintaining a centralized tracking system identifying internal audit recommendations, responsible Departments, and expected implementation timelines
2. periodically reporting the status of corrective actions to County leadership and the governing body or Internal Audit Advisory Committee
3. documenting whether recommendations are fully implemented, partially implemented, or remain open
4. coordinating follow-up procedures to verify corrective actions where appropriate
5. encouraging management to incorporate responsibility for implementing audit recommendations into supervisory and performance management processes where appropriate, including documentation of corrective actions and recognition of timely and effective implementation.

**Management
Response**

Corrective Action:

County management agrees with the recommendations. While the County has historically addressed audit recommendations through follow-up audits and Department-level efforts, management recognizes that the absence of a consistently documented tracking and reporting process limits visibility into implementation status and may affect the timeliness and consistency of corrective actions across Departments. Management also agrees that clearer documentation of corrective action plans is necessary to ensure a sustainable resolution of audit findings.

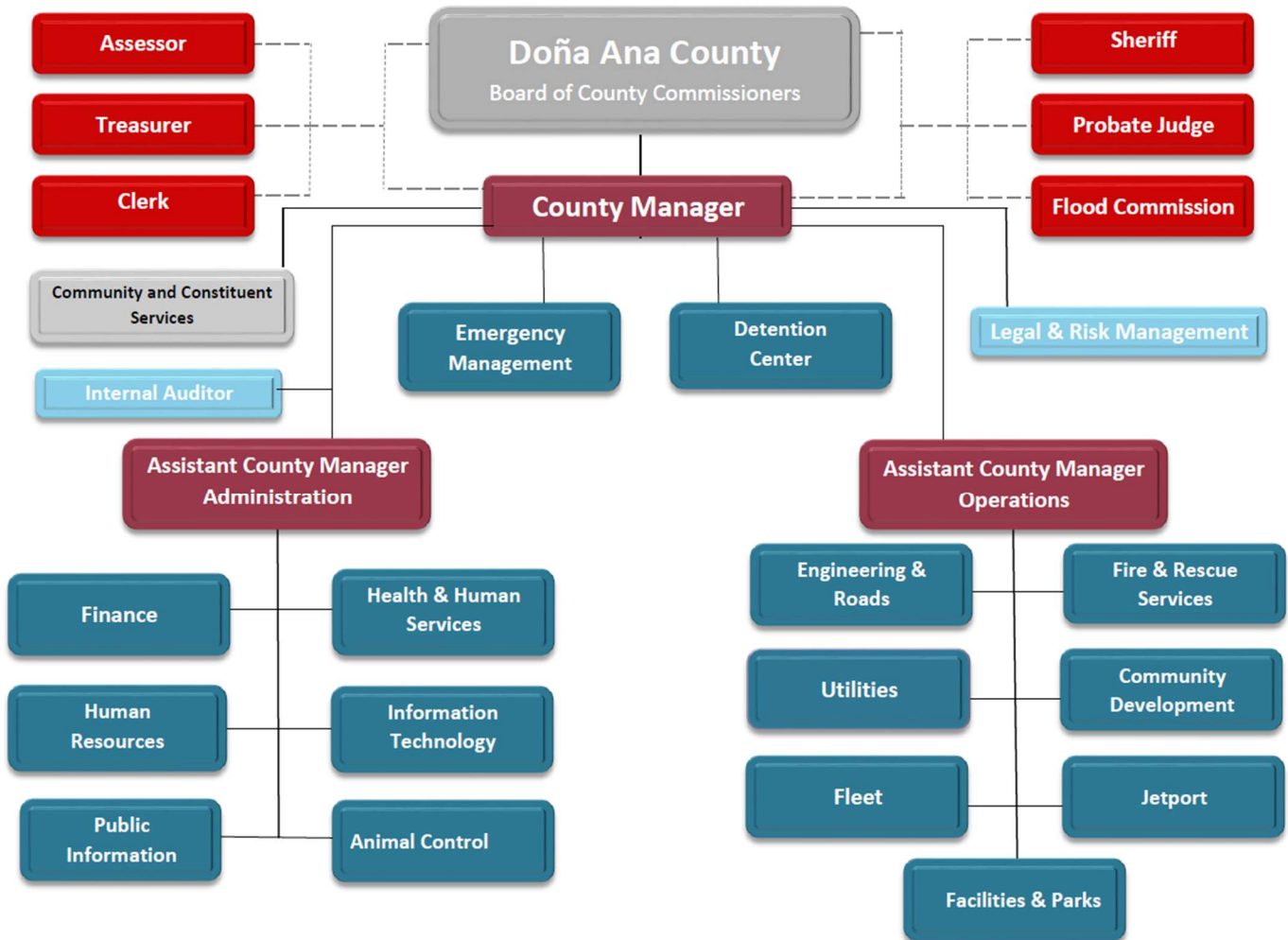
To address the issues identified, the County will implement the following corrective actions:

- The Internal Audit function will develop and implement an audit recommendation tracking system to document all internal audit findings, assigned responsible Departments, designated points of contact, and target completion dates.
- Standardized status categories (e.g., Open, In Progress, Partially Implemented, Fully Implemented, and Closed) will be established and consistently applied for all audit recommendations.
- Departments will be required to submit, in the Management Response sections of audit reports, formal corrective action plans for all audit findings, including responsible parties, and implementation timelines.
- The Internal Audit function will establish a structured follow-up process to periodically monitor and validate the status of corrective actions.

-
- Periodic status reports on outstanding and implemented audit recommendations will be provided to County leadership and the Internal Audit Advisory Committee, to enhance transparency and oversight. The Board of County Commissioners will receive such updates directly from the internal auditor during semi-annual presentations.
 - With each audit, Department management will be encouraged to work to incorporate accountability for implementation of audit recommendations into supervisory processes, including consideration within performance management practices where appropriate.
-

Due Date of Completion: Implementation of an official tracking system and standardized processes by September 30, 2026, with initial reporting to governance bodies to follow shortly thereafter.

Responsible Party: Internal Auditor



Doña Ana County Organizational Chart



FY 25

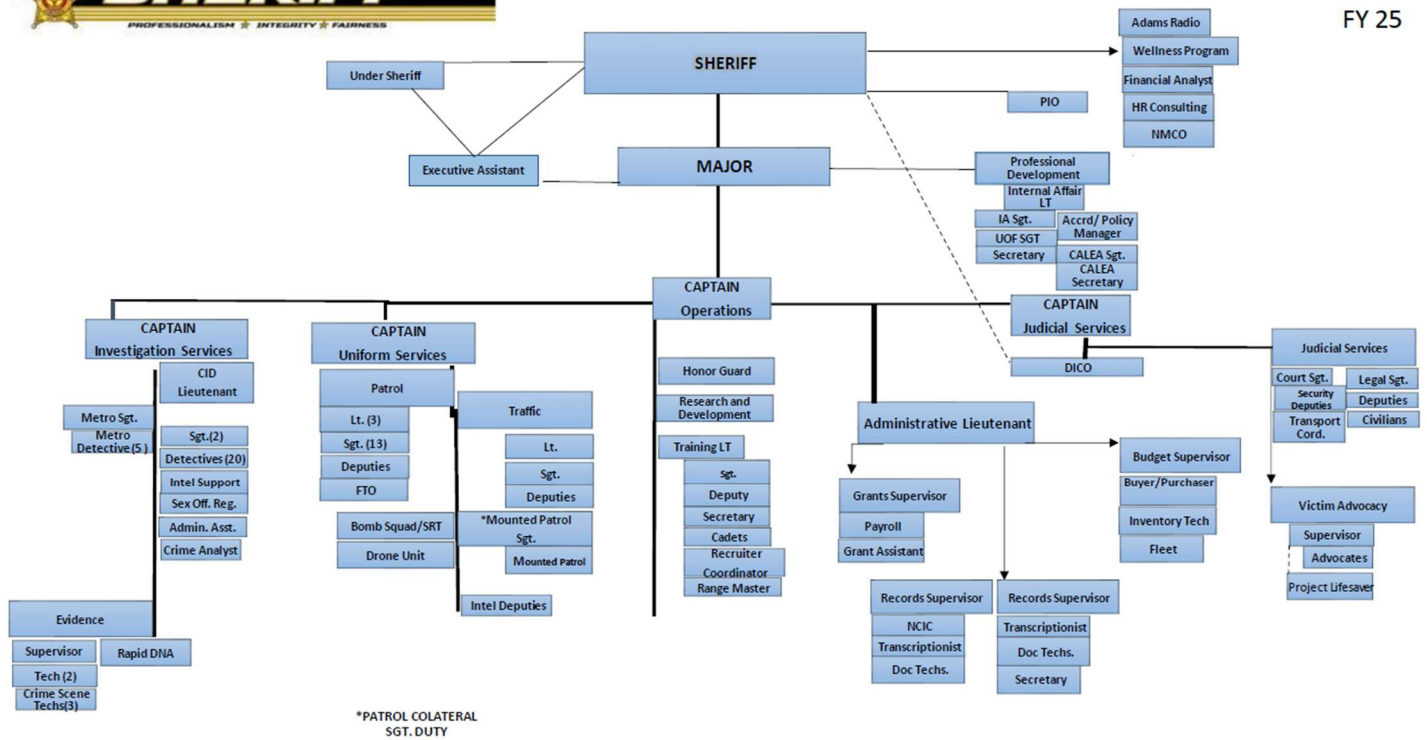


EXHIBIT 3

DONA ANA COUNTY SPECIAL AUDIT PROCEDURES

EMPLOYEE TURNOVER FOR THE PERIOD JULY 1, 2021 THROUGH APRIL 15, 2025

Employee Turnover 2018 - 2024

Dept	Avg. 2018 Employees	Total 2018 Departures	Turnover Rate 2018	Avg. 2019 Employees	Total 2019 Departures	Turnover Rate 2019	Avg. 2020 Employees	Total 2020 Departures	Turnover Rate 2020	Avg. 2021 Employees	Total 2021 Departures	Turnover Rate 2021	Avg. 2022 Employees	Total 2022 Departures	Turnover Rate 2022	Avg. 2023 Employees	Total 2023 Departures	Turnover Rate 2023	Avg. 2024 Employees	Total 2024 Departures	Turnover Rate 2024
Community Development	21	5	24%	21	3	14%	22	3	14%	23	4	17%	22	10	45%	28	1	4%	32	3	9%
County Assessor	45	7	16%	43	6	14%	42	2	5%	40	5	13%	38	4	11%	37	8	22%	39	5	13%
County Clerk	25	15	60%	26	5	19%	29	9	31%	32	8	25%	33	8	24%	35	2	6%	36	1	3%
County Manager	9	2	22%	7	3	43%	6	0	0%	5	2	40%	5	0	0%	8	1	13%	8	3	38%
County Treasurer	13	3	23%	13	2	15%	13	3	23%	14	2	14%	13	1	8%	13	2	15%	13	1	8%
DC	240	46	19%	221	45	20%	199	31	16%	181	52	29%	155	39	25%	174	17	10%	179	10	6%
Engineering	15	1	7%	16	0	0%	16	0	0%	16	3	19%	15	0	0%	45	3	7%	47	1	2%
Facilities & Parks	35	7	20%	34	5	15%	38	3	8%	37	7	19%	35	5	14%	34	6	18%	34	2	6%
Finance	17	1	6%	16	3	19%	15	0	0%	17	8	47%	22	3	14%	29	7	24%	28	3	11%
Fire Marshal	22	2	9%	24	1	4%	30	3	10%	36	1	3%	44	5	11%	61	6	10%	92	9	10%
Fleet	12	3	25%	12	3	25%	14	1	7%	12	2	17%	12	1	8%	12	2	17%	12	0	0%
Flood	11	2	18%	10	0	0%	11	1	9%	10	2	20%	10	1	10%	11	2	18%	10	1	10%
HHS	46	8	17%	49	6	12%	48	7	15%	49	9	18%	52	7	13%	55	10	18%	55	2	4%
HR	14	0	0%	14	1	7%	13	1	8%	13	2	15%	14	3	21%	14	3	21%	15	1	7%
IT	23	5	22%	22	2	9%	18	2	11%	18	2	11%	17	4	24%	21	4	19%	24	3	13%
Legal	7	0	0%	7	1	14%	7	0	0%	6	1	17%	7	1	14%	7	0	0%	7	0	0%
OEM	1	1	100%	3	2	67%	4	3	75%	2	2	100%	3	0	0%	4	0	0%	6	0	0%
PIO	5	0	0%	5	0	0%	7	2	29%	7	2	29%	8	1	13%	7	0	0%	6	0	0%
Probate	2	0	0%	2	0	0%	2	0	0%	2	0	0%	2	1	50%	2	0	0%	2	0	0%
Purchasing	5	0	0%	6	1	17%	7	0	0%	7	0	0%	7	0	0%	6	0	0%	6	0	0%
Risk	2	0	0%	2	0	0%	2	1	50%	2	0	0%	2	0	0%	2	0	0%	2	0	0%
Roads	37	2	5%	33	7	21%	29	2	7%	26	3	12%	25	3	12%						
Airport	2	0	0%	2	0	0%	2	0	0%	2	0	0%	2	0	0%	2	1	50%	3	0	0%
DASO	191	22	12%	186	20	11%	200	29	15%	200	22	11%	194	25	13%	195	17	9%	211	10	5%
Utilities	13	0	0%	13	0	0%	14	1	7%	13	2	15%	14	5	36%	12	0	0%	14	0	0%
Vector	2	0	0%	4	0	0%	4	0	0%	4	0	0%	4	0	0%	4	0	0%	4	0	0%
Codes/Animal Control	19	1	5%	20	5	25%	18	5	28%	16	4	25%	15	3	20%	13	0	0%	14	0	0%
Total	831	133	16%	811	121	15%	808	109	13%	791	145	18%	769	130	17%	829	92	11%	899	55	6%

SEE FOLLOWING PAGES

Note > This Exhibit is presented as DAC HR provided and has not been edited other than to hide less relevant columns.

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting/ Discussion with Department re: JD	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Qualified Applications Released to Department	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Reference Checks Received in HR	Background Check Initiated	Background d Check Completed	Compensation Calculated/ Emailed to Department	Offer Extended to Candidate	Start Date	Time to Hire Final	
Community Healthworker-AHL	Health & Human Services	1/7/1900	2/25/2022	2/25/2022	2/25/2022	2/25/2022	2/25/2022	2/28/2022	2/25/2022	2/25/2022	3/17/2022	3/17/2022	2/29/2022	3/15/2022	3/17/2022	3/17/2022	3/17/2022	6/9/2022	6/13/2022	6/14/2022	6/22/2022	7/18/2022	4/23/1900	
Assistant Director	Health & Human Services	5/20/2015	6/27/2022	6/27/2022	6/27/2022	6/28/2022	6/27/2022	6/29/2022	9/9/2022	9/9/2022	9/13/2022	9/13/2022	7/14/2022	7/27/2022	9/15/2022	9/16/2022	9/16/2022	9/16/2022	9/16/2022	9/16/2022	9/20/2022	10/4/2022	3/23/1900	
HR Representative	Human Resources	5/28/2016	9/12/2022	9/12/2022	9/12/2022	9/13/2022	9/12/2022	9/13/2022	9/29/2022	9/29/2022	9/29/2022	9/29/2022	9/21/2022	9/26/2022	10/5/2022	10/11/2022	10/11/2022	10/5/2022	10/5/2022	10/11/2022	10/13/2022	#####	1/30/1900	
Equipment Operator/Heavy Equipment Operator	Engineering & Roads	5/13/2017	3/3/2023	3/6/2023	3/6/2023	3/9/2023	3/6/2023	3/9/2023	3/3/2023	3/3/2023	4/17/2023	4/18/2023	3/26/2023	4/18/2023	5/3/2023	5/11/2023	5/11/2023	5/26/2023	5/26/2023	5/26/2023	6/5/2023	6/11/2023	3/28/1900	
Equipment Operator- Roads-**Bargaining Unit Position**	Engineering & Roads	6/24/2017	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022			12/7/2022	5/12/2022	6/2/2022	6/29/2022	6/29/2022	6/29/2022	6/29/2022			7/26/2022	8/14/2022	4/26/1900
Heavy Equipment Operator - ** Bargaining Unit Position**	Engineering & Roads	10/3/2017	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	5/20/2022	5/20/2022	5/20/2022	5/20/2022	1/6/2023	5/12/2022	6/2/2022	6/29/2022	6/29/2022	6/29/2022	6/29/2022	6/29/2022	6/29/2022	7/27/2022	8/15/2022	4/27/1900
Equipment Operator/Heavy Equipment Operator	Engineering & Roads	1/20/2018	3/23/2023	3/6/2023	3/6/2023	3/9/2023	3/6/2023	3/9/2023	3/3/2023	3/3/2023	4/17/2023	4/18/2023	3/26/2023	4/18/2023	5/3/2023	5/11/2023	5/11/2023	5/16/2023	5/30/2023	5/26/2023	6/5/2023	6/11/2023	3/28/1900	
Engineer Associate	Engineering & Roads	3/21/2018	12/29/2021	12/29/2021	12/29/2021	1/24/2022	2/22/2022	1/24/2022	2/22/2022	2/22/2022	6/30/2022	6/30/2022	2/22/2022	7/1/2022	7/14/2022	8/25/2022	8/25/2022	8/31/2022	9/20/2022	9/23/2022	9/29/2022	#####	9/4/1900	
Equipment Operator- Roads-**Bargaining Unit Position**	Engineering & Roads	8/17/2019	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	7/27/2022	7/27/2022	7/27/2022	7/27/2022	12/7/2022	7/6/2022	7/27/2022	8/10/2022	8/10/2022	8/31/2022	9/15/2022	8/18/2022	9/28/2022	#####	6/29/1900	
Animal Control Officer	Animal Control	9/28/2019	10/18/2022	10/28/2022	10/18/2022	10/27/2022	10/17/2022	10/28/2022	10/31/2022	10/31/2022	10/31/2022	10/31/2022	11/28/2022	11/1/2022	2/3/2023	2/6/2023	2/9/2023	2/10/2023	2/14/2023	2/14/2023	2/15/2023	3/20/2023	4/19/1900	
Equipment Operator/Heavy Equipment Operator	Engineering & Roads	11/9/2019	3/3/2023	3/6/2023	3/6/2023	3/9/2023	3/6/2023	3/9/2023	3/3/2023	3/3/2023	4/17/2023	4/18/2023	3/26/2023	4/18/2023	2/16/2023	2/22/2023	2/22/2023	2/28/2023	3/10/2023	3/23/2023	4/6/2023	4/24/2023	1/28/1900	
Heavy Equipment Operator - ** Bargaining Unit Position**	Engineering & Roads	11/24/2019	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	10/18/2022	10/21/2021	10/18/2022	10/21/2022	1/6/2023	5/12/2022	6/2/2022	6/14/2022	6/14/2022	7/6/2022	7/8/2022	7/22/2022	7/26/2022	8/15/2022	4/26/1900	
Animal Control Officer	Animal Control	4/25/2020	10/18/2022	10/28/2022	10/18/2022	10/27/2022	10/17/2022	10/28/2022	10/31/2022	10/31/2022	10/31/2022	10/31/2022	11/28/2022	11/1/2022	3/28/2023	3/30/2023	4/3/2023	4/4/2023	04/05/23	4/5/2023	4/12/2023	4/17/2023	6/14/1900	
Document Technician	Clerk's	5/3/2020	5/2/2022	5/22/2022	5/22/2022	5/3/2020	5/3/2020	5/3/2022	5/10/2022	5/10/2022	5/23/2022	5/23/2022	5/11/2022	5/29/2022	6/13/2022	6/14/2022	6/14/2022	6/14/2022	6/15/2022	6/16/2022	6/17/2022	7/3/2022	2/14/1900	
Document Technician	Treasurer's	5/9/2020	3/23/2022	3/23/2022	3/23/2022	3/23/2022	3/23/2022	3/23/2022	4/6/2022	4/6/2022	4/13/2022	4/13/2022	3/31/2022	3/30/2022	4/13/2022	4/26/2022	4/26/2022	4/26/2022	4/26/2022	4/25/2022	5/3/2022	5/8/2022	2/10/1900	
Equipment Operator/Heavy Equipment Operator	Engineering & Roads	8/1/2020	3/3/2023	3/6/2023	3/6/2023	3/9/2023	3/6/2023	3/9/2023	3/3/2023	3/3/2023	4/17/2023	4/18/2023	3/26/2023	4/18/2023	5/3/2023	5/11/2023	5/11/2023	5/16/2023	5/18/2023	5/26/2023	5/26/2023	6/18/2023	3/18/1900	
Animal Control Officer	Animal Control	12/19/2020	6/9/2022	6/9/2022	6/9/2022	2/23/2022	6/9/2022	2/23/2022	6/9/2022	6/9/2022	6/9/2022	6/10/2022	11/14/2022	7/18/2022	7/21/2022	7/21/2022	7/21/2022	7/21/2022	7/22/2022	7/25/2022	8/2/2022	8/14/2022	6/8/1900	
Deputy Manager	Office of Emergency Management	1/3/2021	12/12/2021	12/12/2021	12/12/2021	1/11/2022	12/15/2022	1/11/2022	2/24/2022	1/19/2022	2/24/2022	2/24/2022	1/19/2022	3/2/2022	3/17/2022	3/21/2022	3/17/2022	3/21/2022	3/21/2022	3/23/2022	3/24/2022	3/28/2022	3/12/1900	
Document Technician	Treasurer's	4/10/2021	3/23/2022	3/23/2022	3/23/2022	3/23/2022	3/23/2022	3/23/2022	4/6/2022	4/6/2022	4/13/2022	4/13/2022	3/31/2022	3/30/2022	4/13/2022	4/26/2022	4/26/2022	4/26/2022	4/26/2022	4/28/2022	5/3/2022	5/15/2022	2/10/1900	
Assistant County Manager-Administration	County Manager	5/22/2021	11/8/2022	11/8/2022	11/8/2022	11/8/2022	11/8/2022	11/8/2022	12/8/2022	12/8/2022	12/6/2022	12/6/2022	12/1/2022	12/2/2022	12/8/2022	12/12/2022	12/12/2022	12/12/2022	12/12/2022	12/12/2022	12/12/2022	2/26/2023	2/3/1900	
County Building Official/Assistant Director	Community Development	7/3/2021	3/2/2022	4/3/2022	3/2/2022	3/3/2022	3/2/2022	3/4/2022	5/16/2022	5/16/2022	5/16/2022	5/16/2022	5/2/2022	5/20/2022	6/7/2022	6/8/2022	6/8/2022			6/13/2022	6/21/2022	6/19/2022	4/18/1900	
Equipment Operator/Heavy Equipment Operator	Engineering & Roads	7/17/2021	3/3/2023	3/6/2023	3/6/2023	3/9/2023	3/6/2023	3/9/2023	3/3/2023	3/3/2023	4/17/2023	4/18/2023	3/26/2023	4/18/2023	5/3/2023	5/11/2023	5/11/2023	5/16/2023	5/19/2023	5/26/2023	6/5/2023	6/20/2023	3/28/1900	
Community Healthworker-AHL	Health & Human Services	8/26/2021	2/25/2022	2/25/2022	2/25/2022	2/25/2022	2/25/2022	2/28/2022	2/25/2022	2/25/2022	3/17/2022	3/17/2022	2/29/2022	3/15/2022	3/17/2022	3/17/2022	3/17/2022	3/17/2022	3/17/2022	3/17/2022	3/21/2022	3/27/2022	1/21/1900	
Animal Control Officer	Animal Control	8/28/2021	6/9/2022	6/9/2022	6/9/2022	2/23/2022	6/9/2022	2/23/2022	6/9/2022	6/9/2022	6/9/2022	6/10/2022	11/14/2022	6/10/2022	6/13/2022	6/15/2022	6/15/2022	6/22/2022	6/23/2022	6/22/2022	6/24/2022	6/27/2022	4/30/1900	
Surveying Associate	Engineering & Roads	8/28/2021	6/15/2022	12/6/2022	12/6/2022	8/9/2022	4/27/2022	8/9/2022	12/7/2022	12/7/2022	12/6/2022	12/7/2022	1/18/2023	12/8/2022	12/21/2022	1/10/2022	12/21/2022	12/30/2022	1/4/2023	1/12/2022	1/17/2023	1/30/2023	6/9/1900	
Heavy Equipment Mechanic	Fleet	9/11/2021	1/28/2022	1/28/2022	1/28/2022	2/1/2022	1/28/2022	2/1/2022	1/21/2022	1/21/2022	5/18/2022	5/18/2022	3/9/2022	3/11/2022	5/18/2022	7/8/2022	7/8/2022	6/28/2022	7/8/2022	7/14/2022	7/20/2022	8/15/2022	6/17/1900	
Facilities Maintenance Worker	Facilities and Parks	9/11/2021	2/8/2022	2/8/2022	2/8/2022	2/8/2022	2/8/2022	2/8/2022	3/4/2022	3/4/2022	3/4/2022	3/4/2022	2/23/2022	3/11/2022	4/14/2022	4/28/2022	4/28/2022	5/4/2022	5/19/2022	5/20/2022	6/2/2022	6/23/2022	4/23/1900	
Grounds Maintenance Worker	Facilities and Parks	10/17/2021	5/9/2022	5/9/2022	5/9/2022	5/10/2022	5/9/2022	5/11/2022	8/12/2022	8/12/2022	8/12/2022	8/12/2022	5/26/2022	6/30/2022	8/16/2022	8/23/2022	8/23/2022	9/12/2022	9/16/2022	9/12/2022	9/14/2022	9/19/2022	5/5/1900	
Community Health Worker- AHL	Health & Human Services	10/20/2021	10/22/2021	10/22/2021	10/22/2021	10/21/2021	10/21/2021	11/19/2021	11/17/2021	11/19/2021	11/18/2021	11/19/2021	6/24/2022	11/18/2021	11/30/2021	12/8/2021	12/15/2021	12/13/2021	12/16/2021	12/15/2021	12/17/2021	1/2/2022	1/28/1900	
Community Health Worker- AHL	Health & Human Services	10/20/2021	10/22/2021	10/22/2021	10/22/2021	10/21/2021	10/21/2021	11/19/2021	11/17/2021	11/19/2021	11/18/2021	11/19/2021	6/24/2022	11/18/2021	11/30/2021	1/10/2022	1/10/2022	1/12/2022	1/13/2022	1/14/2022	1/20/2022	2/7/2022	3/2/1900	
Community Health Worker- AHL	Health & Human Services	10/20/2021	10/22/2021	10/22/2021	10/22/2021	10/21/2021	10/21/2021	11/19/2021	11/17/2021	11/19/2021	11/18/2021	11/19/2021	6/24/2022	11/18/2021	11/30/2021	12/8/2021	12/8/2021	12/9/2021	12/10/2021	12/30/2021	12/17/2021	1/4/2022	1/28/1900	
Community Health Worker- AHL	Health & Human Services	10/20/2021	10/22/2021	10/22/2021	10/22/2021	10/21/2021	10/21/2021	11/19/2021	11/															

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting/ Discussion with Department re: JD	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Qualified Applications Released to Department	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Reference Checks Received in HR	Background Check Initiated	Background Check Completed	Compensation Calculated/ Emailed to Department	Offer Extended to Candidate	Start Date	Time to Hire Final
Community Health Worker- AHL	Health & Human Services	10/20/2021	10/22/2021	10/22/2021	10/22/2021	10/21/2021	10/21/2021	11/19/2021	11/17/2021	11/19/2021	11/18/2021	11/19/2021	6/24/2022	11/18/2021	2/10/2022	2/14/2022	2/14/2022	2/16/2022	3/2/2022	3/2/2022	3/10/2022	3/21/2022	4/20/1900
Community Health Worker- AHL	Health & Human Services	10/20/2021	10/22/2021	10/22/2021	10/22/2021	10/21/2021	10/21/2021	11/19/2021	11/17/2021	11/19/2021	11/18/2021	11/19/2021	6/24/2022	11/18/2021	11/30/2021	7/28/2022	7/28/2022	7/28/2022	8/1/2022	8/15/2022	8/23/2022	8/29/2022	10/3/1900
Prog & Contract Assistant	Health & Human Services	11/5/2021	1/10/2022	1/10/2022	1/10/2022	1/10/2022	1/10/2022	1/10/2022	2/9/2022	2/9/2022	2/9/2022	2/9/2022	1/25/2022	2/25/2022	3/15/2022	3/16/2022	3/16/2022	3/16/2022	3/16/2022	3/17/2022	3/21/2022	3/27/2022	3/10/1900
Construction Inspector	Engineering & Roads	11/30/2021	4/8/2022	4/8/2022	4/8/2022	4/12/2022	4/8/2022	4/13/2022	6/10/2022	6/10/2022	6/10/2022	6/10/2022		6/10/2022	7/22/2022	8/15/2022	8/15/2022	8/18/2022			8/30/2022	9/12/2022	5/18/1900
MultiMedia Specialist	PIO	12/24/2021	1/19/2022	1/19/2022	1/19/2022	1/24/2022	1/19/2022	1/24/2022	2/18/2022	2/18/2022	2/18/2022	2/18/2022	2/15/2022	2/17/2022	3/2/2022	3/10/2022	3/10/2022	3/4/2022	3/4/2022	3/4/2022	3/10/2022	3/10/2022	2/14/1900
Senior Planner	Community Development	1/1/2022	1/28/2022	1/28/2022	12/17/2021	2/11/2022	2/9/2022	2/11/2022	3/11/2022	3/11/2022	3/11/2022	3/11/2022	3/7/2022	3/21/2022	3/22/2022	3/24/2022	3/24/2022			3/24/2022	3/28/2022	3/28/2022	2/14/1900
Accounting Specialist	Utilities	1/1/2022	5/17/2022	5/17/2022	5/17/2022	6/14/2022	5/17/2022	6/14/2022	6/14/2022	6/14/2022	7/8/2022	7/8/2022	7/26/2022	7/8/2022	7/27/2022	7/29/2022	7/29/2022	8/1/2022	8/2/2022	8/1/2022	8/8/2022	8/10/2022	2/24/1900
Program & Contract Administrator	Health & Human Services	1/16/2022	1/10/2022	1/10/2022	1/10/2022	1/11/2022	1/10/2022	1/11/2022	2/4/2022	2/4/2022	2/4/2022	2/4/2022	1/26/2022	2/7/2022	3/10/2022	3/22/2022	3/22/2022	3/22/2022	3/22/2022	3/11/2022	3/21/2022	4/11/2022	3/9/1900
Building Attendant	Facilities and Parks	1/21/2022	2/9/2022	2/9/2022	2/9/2022	2/9/2022	2/9/2022	2/11/2022	2/9/2022	2/9/2022	2/9/2022	2/9/2022	2/28/2022	3/2/2022	3/15/2022	3/18/2022	3/18/2022	3/22/2022	3/31/2022	4/1/2022	4/19/2022	4/25/2022	3/7/1900
Voting Machine Tech Lead	Clerk's	1/30/2022	3/3/2022	3/3/2022	3/1/2022	2/17/2022	3/3/2022	2/17/2022	3/15/2022	3/15/2022	3/1/2022	3/1/2022	3/10/2022	3/14/2022	3/18/2022	3/18/2022	3/18/2022	3/18/2022	3/18/2022	3/22/2022	3/23/2022	3/27/2022	2/3/1900
Budget Analyst	Finance	1/31/2022	1/25/2022	1/25/2022	1/25/2022	1/25/2022	1/25/2022	2/17/2022	2/17/2022	2/17/2022	2/17/2022	2/17/2022	2/9/2022	2/17/2022	3/3/2022	3/3/2022	3/3/2022	3/3/2022	3/3/2022	3/8/2022	3/9/2022	3/28/2022	2/12/1900
Mental Health Awareness Educator	Health & Human Services	2/1/2022	2/1/2022	2/7/2022	2/7/2022	4/12/2022	2/7/2022	4/12/2022	3/24/2022	3/24/2022	3/28/2022	4/7/2022	5/4/2022	3/28/2022	4/17/2022	8/31/2022	8/31/2022	8/31/2022	8/31/2022	9/9/2022	9/12/2022	10/23.22	6/1/1900
Accountant II	Finance	2/9/2022	1/27/2022	1/27/2022	1/27/2022	2/11/2022	2/2/2022	2/11/2022	3/29/2022	3/29/2022	3/29/2022	3/29/2022	3/7/2022	3/29/2022	4/26/2022	4/27/2022	4/27/2022	4/27/2022	4/27/2022	4/27/2022	4/28/2022	5/8/2022	3/16/1900
Accounting Specialist	Finance	2/12/2022	8/5/2022	8/5/2022	9/28/2022	8/18/2022	9/28/2022	8/19/2022	9/27/2022	9/28/2022	9/21/2022	9/28/2022	9/17/2022	9/28/2022	10/15/2022	10/18/2022	10/15/2022	10/18/2022	10/20/2022	10/21/2022	10/21/2022	#####	3/3/1900
IT Director	Information Technology	2/12/2022	9/8/2022	9/8/2022	9/8/2022	9/9/2022	9/8/2022	9/9/2022					9/23/2022	10/14/2022	11/9/2022	11/15/2022	11/9/2022	11/14/2022	11/15/2022	11/21/2022	11/21/2022	1/3/2023	3/13/1900
Utility Maintenance Worker	Utilities	2/14/2022	5/17/2022	5/17/2022	5/17/2022	7/28/2022	7/22/2022	7/29/2022	6/13/2022	6/13/2022	10/7/2022	10/7/2022	8/29/2022	9/6/2022	10/12/2022	10/12/2022	10/21/2022	10/21/2022	11/4/2022	10/21/2022	11/7/2022	#####	4/10/1900
Elections Staff Coordinator	Clerk's	2/27/2022	3/1/2022	3/1/2022	3/3/2022	3/3/2022	3/3/2022	3/3/2022	3/15/2022	3/15/2022	3/18/2022	3/18/2022	3/14/2022	3/17/2022	3/22/2022	3/22/2022	3/22/2022	3/22/2022	3/22/2022	3/23/2022	3/24/2022	3/27/2022	1/21/1900
Lead ACO	Animal Control	3/3/2022	4/26/2022	5/3/2022	5/3/2022	5/10/2022	4/26/2022	5/10/2022	7/25/2022	7/25/2022	8/17/2022	8/17/2022	6/1/2022	8/11/2022	8/18/2022	8/19/2022	8/19/2022			10/3/2022	10/6/2022	#####	5/28/1900
Community Health Worker	Health & Human Services	3/12/2022	9/29/2022	9/29/2022	9/29/2022	8/24/2022	8/23/2022	8/24/2022	9/13/2022	11/9/2022	10/21/2022	11/1/2022	9/8/2022	11/9/2022	12/9/2022	12/19/2022	12/19/2022	12/19/2022	12/19/2022	12/19/2022	1/17/2023	1/15/2023	5/25/1900
Document Tech.	Utilities	3/25/2022	12/3/2017	5/17/2022	5/17/2022	7/11/2022	5/17/2022	7/11/2022	7/11/2022	7/11/2022	7/11/2022	7/11/2022	7/25/2022	8/2/2022	8/10/2022	8/10/2022	8/11/2022	8/12/2022	8/15/2022	8/12/2022	8/23/2022	8/29/2022	2/12/1900
Document Tech.	Utilities	3/25/2022	10/22/2022	5/17/2022	5/17/2022	7/11/2022	5/17/2022	7/11/2022	7/11/2022	7/11/2022	7/11/2022	7/11/2022	7/25/2022	8/2/2022	8/10/2022	9/8/2022	9/8/2022	9/9/2022	9/13/2022	8/30/2022	9/14/2022	10/3/2022	3/5/1900
Planner-Current Planning	Community Development	3/26/2022	7/25/2022	7/25/2022	7/25/2022	7/22/2022	7/25/2022	7/25/2022	8/25/2022	8/25/2022	8/25/2022	8/25/2022	8/23/2022	8/25/2022	9/13/2022	9/16/2022	9/13/2022	9/22/2022	9/22/2022	9/23/2022	9/28/2022	10/3/2022	3/5/1900
Vote by Mail Lead	Clerk's	3/27/2022	4/1/2022	4/1/2022	4/12/2022	4/13/2022	4/12/2022	4/13/2022	4/19/2022	4/19/2022	4/19/2022	4/19/2022	4/21/2022	4/27/2022	5/5/2022	5/2/2022	5/2/2022	5/2/2022	5/2/2022	5/2/2022	5/4/2022	5/4/2022	1/21/1900
Emergency Management Coordinator	Office of Emergency Management	3/27/2022	4/26/2022	4/26/2022	4/26/2022	5/3/2022	4/26/2022	5/3/2022	5/18/2022	5/18/2022	6/8/2022	6/8/2022	5/17/2022	5/31/2022	6/16/2022	6/21/2022	6/16/2022	6/21/2022	6/21/2022	6/28/2022	6/29/2022	7/18/2022	2/26/1900
Payroll Coordinator	Finance	3/28/2022	3/15/2022	3/15/2022	3/15/2022	3/17/2022	3/15/2022	3/17/2022	4/5/2022	4/5/2022	4/19/2022	4/21/2022	4/1/2022	4/8/2022	4/21/2022	4/27/2022	4/27/2022	5/2/2022	5/12/2022	5/12/2022	5/19/2022	6/9/2022	3/3/1900
Animal Control Officer	Animal Control	4/3/2022	4/26/2023	4/26/2023	4/26/2023	4/26/2023	4/26/2023	4/28/2023	4/28/2023	4/28/2023	4/28/2023	6/14/2023	5/28/2023	6/2/2023	6/16/2023	6/29/2023	6/30/2023	6/30/2023	7/13/2023	7/17/2023	7/27/2023	7/31/2023	
Program Administrator	Health & Human Services	4/11/2022	3/30/2022	3/30/2022	3/31/2022	3/31/2022	4/7/2022	4/8/2022	4/25/2022	5/10/2022	5/12/2022	5/12/2022	4/18/2022	4/20/2022	5/12/2022	5/17/2022	5/17/2022	5/17/2022	5/17/2022	5/12/2022	5/16/2022	5/23/2022	2/7/1900
Accountant I TE	Finance	4/12/2022	10/26/2022	10/26/2022	10/26/2022	9/26/2022	10/26/2022	9/28/2022	10/27/2022	10/27/2022	10/27/2022	10/28/2022	10/20/2022	10/27/2022	11/14/2022	11/15/2022	11/14/2022	11/14/2022	11/14/2022	11/18/2022	11/29/2022	#####	3/2/1900
Veterinarian	Animal Control	4/21/2022	2/16/2023	2/10/2023	2/10/2023	2/10/2023	2/10/2023	2/13/2023	11/29/2023	12/4/2023	1/10/2024	1/11/2024	3/3/2024	1/11/2024	3/6/2024	5/13/2024	5/13/2024	3/8/2024	3/8/2024	3/12/2024	3/27/2024	8/5/2024	
Grants Manager	Finance	4/28/2022	9/13/2022	9/13/2022	9/13/2022	9/13/2022	9/13/2022	9/13/2022	6/17/2022	10/21/2022	10/21/2022	10/21/2022	10/13/2022	10/21/2022	10/31/2022	11/1/2022	10/31/2022	11/2/2022	11/2/2022	11/7/2022	11/8/2022	#####	2/25/1900
Sr. Human Resources Administrator	Human Resources	5/1/2022	3/4/2022	3/4/2022	3/4/2022	3/4/2022	3/4/2022	3/4/2022					3/20/2022	4/7/2022	4/8/2022					4/11/2022		6/1/2022	N/A
Planning Assistant	Community Development	5/1/2022	8/16/2022	8/16/2022	8/16/2022	8/16/2022	8/14/2022	8/16/2022	9/9/2022	9/9/2022	9/9/2022	9/9/2022	8/31/2022	9/13/2022	10/18/2022	11/9/2022	10/18/2022	10/21/2022	10/25/2022	10/19/2022	11/18/2022	12/5/2022	4/3/1900
Document Technician	Clerk's	5/2/2022	5/2/2022	5/22/2022	5/22/2022	5/3/2020	5/3/2020	5/3/2022	5/10/2022	5/10/2022	5/23/2022	5/23/2022	5/11/2022	5/29/2022	6/13/2022	6/13/2022	6/13/2022	6/13/2022	6/13/2022	6/13/2022	6/13/2022	6/13/2022	2/10/1900

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Accountatn I	Finance	5/7/2022	5/7/2022	4/8/2022	4/8/2022	5/9/2022	4/28/2022	5/9/2022	5/23/2022	5/23/2022	5/23/2022	5/23/2022	5/23/2022	7/13/2022	7/26/2022	7/28/2022	7/28/2022	7/29/2022	8/18/2022	8/18/2022	8/23/2022	9/12/2022	4/15/1900
Document Technician	Clerk's	5/14/2022	5/2/2022	5/22/2022	5/22/2022	5/3/2020	5/3/2020	5/3/2022	5/10/2022	5/10/2022	5/23/2002	5/23/2002	5/11/2022	5/29/2022	6/13/2022	6/21/2022	6/21/2022	6/14/2022	6/16/2022	6/22/2022	6/24/2022	7/18/2022	2/21/1900
Accounting Specialist	Finance	5/20/2022	2/14/2023	2/17/2023	2/17/2023	2/17/2023	2/17/2023	2/17/2023	2/21/2023	2/21/2023	2/17/2023	2/21/2023	3/6/2023	3/8/2023	6/2/2023	6/6/2023	6/6/2023	6/6/2023	7/12/2023	7/17/2023	7/21/2023	7/31/2023	6/2/1900
Appraiser	Assessor's	5/23/2022	6/7/2022	6/7/2022	6/7/2022	6/17/2022	6/7/2022	7/1/2022	6/7/2022	6/7/2022	6/7/2022	6/7/2022	7/18/2022	7/28/2022	8/16/2022	8/30/2022	8/30/2022	8/30/2022	8/30/2022	8/18/2022	9/7/2022	9/11/2022	3/8/1900
HR Administrator	Human Resources	6/1/2022	6/1/2022	6/1/2022	6/1/2022	7/27/2022	7/25/2022	7/27/2022	9/1/2022	9/1/2022	9/1/2022	9/1/2022	8/17/2022	8/22/2022	9/9/2022	9/26/2022	9/26/2022	9/13/2022	9/15/2022	9/26/2022	9/27/2022	#####	3/2/1900
Substance Use Prevention Coordinator	Health & Human Services	6/4/2022	5/18/2022	5/18/2022	5/18/2022	8/4/2022	4/5/2022	8/8/2022	8/29/2022	8/29/2022	8/29/2022	8/29/2022	8/23/2022	8/30/2022	9/8/2022	9/16/2022	9/16/2022	9/16/2022	9/16/2022	10/14/2022	10/19/2022	#####	3/12/1900
Equipment/Heavy Equipment Operator	Roads	6/17/2022	8/4/2023	8/4/2023	8/4/2023	8/7/2023	8/4/2023	8/7/2023	09/13/230	9/13/2023	9/13/2023	9/13/2023	11/7/2023	11/9/2023	12/6/2023	12/6/2023	12/7/2023	12/7/2023	01/04/23	12/7/2023			
Plans Examiner	Community Development	6/18/2022	8/26/2022	8/26/2022	9/2/2022	9/2/2022	9/19/2022	9/2/2022	10/7/2022	10/7/2022	10/6/2022	10/7/2022	9/20/2022	10/7/2022	10/20/2022	11/17/2022	10/20/2022	11/18/2022	11/28/2022	11/23/2022	11/29/2022	12/5/2022	3/28/1900
Admin Assistant	Clerk's	7/1/2022	6/10/2022	6/10/2022	6/10/2022	6/23/2022	7/13/2022	6/29/2022	7/18/2022	7/18/2022	7/18/2022	7/18/2022	7/14/2022	7/27/2022	8/5/2022	8/5/2022	8/5/2022	8/5/2022	8/5/2022	8/5/2022	8/15/2022	8/28/2022	2/16/1900
Document Technician BOE	Clerk's	7/1/2022	6/14/2022	6/14/2022	6/14/2022	7/7/2022	6/14/2022	7/7/2022	7/29/2022	7/29/2022	7/29/2022	7/29/2022	7/22/2022	7/29/2022	8/16/2022	10/12/2022	10/12/2022	10/12/2022	10/17/2022	10/12/2022	10/12/2022		4/6/1900
Document Technician BOE	Clerk's	7/1/2022	6/14/2022	6/14/2022	6/14/2022	7/7/2022	6/14/2022	7/7/2022	7/29/2022	7/29/2022	7/29/2022	7/29/2022	7/22/2022	7/29/2022	8/16/2022	8/18/2022	8/18/2022	9/7/2022	9/9/2022	9/8/2022	9/9/2022	9/12/2022	3/4/1900
Document Technician BOE	Clerk's	7/1/2022	6/14/2022	6/14/2022	6/14/2022	7/7/2022	6/14/2022	7/7/2022	7/29/2022	7/29/2022	7/29/2022	7/29/2022	7/22/2022	7/29/2022	8/16/2022	8/18/2022	8/18/2022	8/18/2022	9/6/2022	9/7/2022	9/11/2022		3/2/1900
Document Technician BOE	Clerk's	7/1/2022	6/14/2022	6/14/2022	6/14/2022	7/7/2022	6/14/2022	7/7/2022	7/29/2022	7/29/2022	7/29/2022	7/29/2022	7/22/2022	7/29/2022	8/16/2022	8/26/2022	8/26/2022	9/12/2022	9/14/2022	9/12/2022	9/12/2022	6/19/2022	3/7/1900
Document Technician BOE	Clerk's	7/1/2022	6/14/2022	6/14/2022	6/14/2022	7/7/2022	6/14/2022	7/7/2022	7/29/2022	7/29/2022	7/29/2022	7/29/2022	7/22/2022	7/29/2022	8/16/2022	8/26/2022	8/26/2022	3/7/2023	3/7/2023	9/12/2022	9/12/2022	9/19/2022	3/7/1900
Voting Machine Technician	Clerk's	7/1/2022	6/14/2022	6/14/2022	6/14/2022	7/11/2022	6/28/2022	7/11/2022	7/21/2022	7/21/2022	8/4/2022	8/4/2022	7/27/2022	8/8/2022	8/11/2022	8/11/2022	8/11/2022	8/11/2022	8/11/2022	8/11/2022	9/6/2022	9/6/2022	2/26/1900
Jetport Administrator	Santa Teresa Jetport	7/1/2022	9/7/2022	9/7/2022	9/7/2022	9/7/2022	9/18/2022	9/7/2022	11/9/2022	11/16/2022	11/9/2022	11/9/2022	1/4/2023	1/5/2023	1/12/2023	1/18/2023	1/12/2023	1/17/2023	1/23/2023	1/17/2023	1/26/2023	2/21/2023	5/20/1900
Senior Appraiser	Assessor's	7/2/2022	8/29/2022	8/29/2022	8/29/2022	9/2/2022	8/31/2022	9/2/2022	10/19/2022	10/26/2022	10/19/2022	10/26/2022	10/19/2022	10/26/2022	11/1/2022	11/1/2022	11/1/2022	11/1/2022	11/1/2022	11/1/2022	11/8/2022	#####	3/7/1900
Senior Computer Technician	Information Technology	7/3/2022	7/18/2022	7/18/2022	7/18/2022	7/11/2022	6/28/2022	7/11/2022	8/16/2022	8/16/2022	8/16/2022	8/16/2022	8/7/2022	8/22/2022	8/25/2022	8/26/2022	8/26/2022	8/24/2022	8/29/2022	8/30/2022	9/1/2022	9/4/2022	2/21/1900
Accounting Specialist	Finance	7/3/2022	8/5/2022	8/5/2022	9/28/2022	8/18/2022	9/28/2022	8/19/2022	9/27/2022	9/28/2022	9/21/2022	9/28/2022	9/17/2022	9/28/2022	10/15/2022	10/18/2022	10/15/2022	10/18/2022	10/25/2022	10/18/2022	10/26/2022	11/7/2022	3/8/1900
Community Outreach Spec II	Health & Human Services	7/16/2022	7/13/2022	7/13/2022	7/13/2022	7/13/2022	7/13/2022	7/15/2022	8/10/2022	8/10/2022	8/10/2022	8/10/2022	8/2/2022	8/10/2022	8/31/2022	9/1/2022	9/1/2022	9/1/2022	9/1/2022	9/9/2022	9/12/2022	9/12/2022	2/28/1900
Document Technician BOE	Clerk's	7/16/2022	6/14/2022	6/14/2022	6/14/2022	7/7/2022	6/14/2022	7/7/2022	7/29/2022	7/29/2022	7/29/2022	7/29/2022	7/22/2022	7/29/2022	8/16/2022	8/18/2022	8/18/2022	9/8/2022	9/9/2022	9/8/2022	9/9/2022	9/9/2022	3/4/1900
Heavy Equipment Operator - ** Bargaining Unit Position**	Engineering & Roads	7/30/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	10/26/2022	10/26/2022	10/26/2022	10/26/2022	1/6/2023	11/4/2022	2/16/2023	2/22/2023	2/22/2023	2/28/2023	3/6/2023	3/23/2023	3/29/2023	4/13/2023	12/28/1900
Public Records Coordinator	Legal	8/2/2022	7/28/2022	7/28/2022	7/28/2022	8/5/2022	7/28/2022	8/15/2022	9/7/2022	9/7/2022	9/7/2022	9/7/2022	8/19/2022	8/23/2022	9/8/2022	9/22/2022	9/22/2022	9/26/2022	10/4/222	9/26/2022	9/29/2022	#####	2/14/1900
Equipment Operator- Roads-**Bargaining Unit Position**	Engineering & Roads	8/13/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	7/27/2022	3/31/2022	7/27/2022	7/27/2022	12/7/2022	7/27/2022	7/27/2022			8/24/2022	8/26/2022	9/8/2022	9/12/2022	9/19/2022	6/13/1900
Community Health Worker	Health & Human Services	8/13/2022	8/18/2022	8/18/2022	8/18/2022	8/19/2022	8/18/2022	8/19/2022	9/13/2022	9/16/2022	9/16/2022	9/16/2022	9/6/2022	9/16/2022	9/22/2022	9/26/2022	9/26/2022	9/27/2022	9/30/2022	9/27/2022	10/11/2022	#####	2/22/1900
Secretary/Receptionist	County Manager	8/27/2022	9/26/2022	10/3/2022	10/3/2022	9/27/2022	9/27/2022	9/27/2022	10/12/2022	10/13/2022	10/13/2022	10/13/2022	10/11/2022	10/13/2022	10/26/2022	11/9/2022	11/9/2022	11/9/2022	11/9/2022	11/10/2022	11/14/2022	#####	2/17/1900
Programmer Analyst Sr.	Information Technology	8/27/2022	10/16/2023	10/16/2023	10/16/2023	10/18/2023	10/16/2023	10/18/2023	11/13/2023	11/14/2023	11/13/2023	11/14/2023	11/19/2023	11/14/2023	11/29/2023	12/1/2023	12/1/2023	11/30/2023	12/14/2023	12/14/2023	12/15/2023	1/22/2024	2/27/1900
Environmental Codes Officer	Community Development	9/1/2022	9/1/2022	11/3/2022	11/8/2022	11/8/2022	10/12/2022	11/8/2022	11/8/2022	11/8/2022	12/6/2022	12/6/2022	12/6/2022	12/8/2022	12/14/2022	12/15/2022	12/14/2022	12/15/2022	12/20/2022	12/15/2022	12/22/2022	1/30/2022	2/13/1900
Computer Technician	Information Technology	9/4/2022	9/2/2022	9/2/2022	9/8/2022	9/13/2022	9/8/2022	9/13/2022	10/3/2022	10/3/2022	10/5/2022	10/6/2022	9/28/2022	10/6/2022	10/13/2022	10/14/2022	10/13/2022	10/14/2022	10/14/2022	10/18/2022	10/20/2022	#####	2/6/1900
Planner/Designer	Community Development	9/6/2022	1/31/2023	1/31/2023	8/24/2022	8/24/2022	8/24/2022	1/31/2023	12/14/2022	12/14/2022	2/9/2023	2/9/2023	2/23/2023	2/24/2023	2/9/2023	3/6/2023	3/14/2023	3/14/2023	3/15/2023	3/13/2023	3/29/2023	4/3/2023	
Water/Wastewater Operator II	Utilities	9/7/2022	9/22/2022	9/22/2022	10/4/2022	10/5/2022	9/22/2022	10/5/2022	10/13/2022	10/13/2022	1/27/2023	1/27/2023	1/23/2023	1/27/2023	2/10/2023	3/7/2023	3/7/2023	3/7/2023	3/15/2023	3/7/2023	3/29/2023	4/3/2023	6/23/1900
Admin Assistant	Information Technology	9/9/2022	8/31/2022	8/31/2022	8/31/2022	9/2/2022	8/31/2022	9/2/2022	9/19/2022	9/30/2022	9/19/2022	9/19/2022	9/19/2022	9/30/2022	10/6/2022	10/7/2022	10/6/2022	10/11/2022	10/11/2022	10/11/2022	10/12/2022	11/6/2022	2/9/1900
Appraiser Assistant	Assessor's	9/10/2022	10/25/2022	10/25/2022	10/26/2022	10/27/2022	10/26/2022	10/27/2022	11/3/2022	11/3/2022	11/3/2022	11/3/2022	11/11/2023	11/14/2022	11/23/2022	11/28/2022	11/28/2022	11/29/2022	11/29/2022	11/29/2022	11/29/2022	12/4/2022	2/2/1900

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting/ Discussion with Department re: JD	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Qualified Applications Released to Department	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Reference Checks Received in HR	Background Check Initiated	Background Check Completed	Compensation Calculated/ Emailed to Department	Offer Extended to Candidate	Start Date	Time to Hire Final
Appraiser Assistant	Assessor's	9/10/2022	10/25/2022	10/25/2022	10/26/2022	10/27/2022	10/26/2022	10/27/2022	11/3/2022	11/3/2022	11/3/2022	11/3/2022	11/11/2023	11/14/2022	11/23/2022	12/15/2022	12/15/2022	12/15/2022	12/20/2022	12/15/2022	1/25/2023	1/30/2023	3/30/1900
Overdose Prevention Educator	Health & Human Services	9/14/2022	11/7/2022	11/7/2022	11/7/2022	8/15/2022	8/15/2022	8/15/2022	9/13/2022	11/9/2022	11/9/2022	11/9/2022	9/6/2022	12/2/2022	1/20/2023	1/27/2023	1/20/2023	1/27/2023	3/1/2023	3/2/2023	3/14/2023	3/20/2023	7/29/1900
Community Health Worker	Health & Human Services	9/24/2022	9/29/2022	9/29/2022	9/29/2022	8/24/2022	8/23/2022	8/24/2022	9/13/2022	11/9/2022	10/21/2022	11/1/2022	9/8/2022	11/9/2022	12/9/2022	12/19/2022	12/19/2022	12/19/2022	12/19/2022	12/19/2022	1/17/2023	1/15/2023	5/25/1900
GIS/Mapper Analyst	Community Development	9/24/2022	9/16/2022	9/16/2022	9/19/2022	9/20/2022	9/19/2022	9/20/2022	10/5/2022	10/11/2022	10/6/2022	10/11/2022	10/5/2022	10/11/2022	10/24/2022	10/24/2022	10/24/2022	10/24/2022	10/24/2022	10/24/2022	11/1/2022	#####	2/11/1900
Communications Coordinator	Clerk's	9/24/2022	10/12/2022	10/12/2022	10/12/2022	9/26/2022	10/12/2022	9/27/2022	10/20/2022	10/22/2022	10/5/2022	10/20/2022	10/13/2022	11/16/2022	12/20/2022	12/22/2022	12/20/2022	12/22/2022	12/23/2022	12/22/2022	1/3/2023	1/17/2023	4/7/1900
Doc. Tech- Assessors	Assessor's	9/28/2022	9/27/2022	9/27/2022	9/30/2022	10/3/2022	9/27/2022	10/4/2022	10/5/2022	10/5/2022	10/21/2022	10/28/2022	10/14/2022	10/28/2022	11/3/2022	11/7/2022	11/3/2022	11/8/2022	11/14/2022	11/14/2022	11/21/2022	12/5/2022	2/17/1900
Foreman	Engineering & Roads	9/30/2022	10/2/2022	10/27/2022	10/28/2022	10/31/2022	10/28/2022	10/31/2022	10/28/2022	10/28/2022	11/16/2022	11/16/2022	11/30/2022	12/1/2022	2/3/2023	2/6/2023	2/3/2023	2/6/2023	2/15/2023	2/6/2023	2/15/2023	3/13/2023	4/16/1900
Engineering Aide	Flood Commission	10/1/2022	10/1/2021	3/30/2022	2/23/2022	2/23/2022	3/23/2022	2/28/2022	3/30/2022	3/30/2022	4/6/2022	4/6/2022	3/29/2022	3/30/2022	4/12/2022	4/13/2022	4/13/2022			4/12/2022	4/18/2022	5/2/2022	2/18/1900
Communication Systems Technician	Information Technology	10/1/2022	9/28/2022	10/27/2022	11/3/2022	11/7/2022	11/3/2022	11/7/2022	1/6/2023	1/11/2023	1/20/2023	1/23/2023	12/6/2022	1/23/2023	2/2/2023	2/10/2023	2/14/2023	2/14/2023	3/14/2023	2/8/2022	3/3/2023	3/6/2023	4/25/1900
Contract Administrator	Finance	10/3/2022	9/21/2022	9/21/2022	9/21/2022	9/22/2022	9/21/2022	9/22/2022	10/13/2022	10/14/2022	10/13/2022	10/14/2022	10/7/2022	10/14/2022	11/1/2022	11/4/2022	11/4/2022	11/1/2022	11/1/2022	11/2/2022	11/8/2022	#####	2/16/1900
IT Applications Training and Support Specialist	Information Technology	10/5/2022	10/5/2022	10/5/2022	10/12/2022	10/12/2022	10/4/2022	10/12/2022	11/10/2022	11/10/2022	11/15/2022	11/16/2022	11/10/2022	11/16/2022	12/8/2022	12/14/2022	12/14/2022	12/14/2022	12/15/2022	12/14/2022	12/19/2022	1/3/2023	3/8/1900
Community Health Worker	Health & Human Services	10/5/2022	11/14/2022	11/14/2022	12/6/2022	12/9/2022	12/6/2022	12/9/2022	12/13/2022	12/13/2022	1/13/2023	1/13/2023	3/20/2023	1/13/2023	1/24/2023	1/26/2023	1/24/2023	1/26/2023	2/2/2023	1/25/2023	2/6/2023	F	2/28/1900
Community Health Worker	Health & Human Services	10/5/2022	11/14/2022	11/14/2022	12/6/2022	12/9/2022	12/6/2022	12/9/2022	12/13/2022	12/13/2022	1/13/2023	1/13/2023	3/20/2023	1/13/2023	2/7/2023	2/16/2023	2/16/2023	2/16/2023	2/17/2023	2/8/2023	3/7/2023	3/20/2023	3/28/1900
Community Health Worker	Health & Human Services	10/5/2022	11/14/2022	11/14/2022	12/6/2022	12/9/2022	12/6/2022	12/9/2022	12/13/2022	12/13/2022	1/13/2023	1/13/2023	3/20/2023	1/13/2023	2/7/2023	2/8/2023	2/10/2023	2/16/2023	2/21/2023	2/8/2023	2/27/2023	3/6/2023	3/20/1900
Community Health Worker	Health & Human Services	10/5/2022	11/14/2022	11/14/2022	12/6/2022	12/9/2022	12/6/2022	12/9/2022	12/13/2022	12/13/2022	1/13/2023	1/13/2023	3/20/2023	1/13/2023	1/24/2023	1/26/2023	1/24/2023	1/26/2023	2/2/2023	1/25/2023	2/15/2023	3/6/2023	3/8/1900
Document Technician	Utilities	10/7/2022	10/7/2022	10/7/2022	10/11/2022	10/12/2022	10/7/2022	10/12/2022	10/13/2022	10/17/2022	10/13/2022	10/17/2022	10/20/2022	10/21/2022	10/27/2002	10/28/2022	10/31/2022	11/4/2022	11/7/2022	11/1/2022	11/18/2022	#####	2/6/1900
Accounting Specialist - Utilities **FIXED TERM ONLY**	Utilities	10/7/2022	10/11/2022	10/11/2022	10/11/2022	10/12/2022	10/11/2022	10/12/2022	10/13/2022	10/13/2022	10/13/2022	10/17/2022	11/24/2022	10/28/2022	11/4/2022	11/7/2022	11/7/2022	11/7/2022	11/9/2022	11/7/2022	11/14/2022	#####	2/2/1900
Grounds Maintenance Worker	Facilities and Parks	10/13/2022	7/20/2023	7/27/2023	7/27/2023	7/28/2023	7/27/2023	7/28/2023	8/22/2023	8/22/2023	8/22/2023	8/22/2023	8/13/2023	8/22/2023	9/25/2023	9/29/2023	9/29/2023	9/29/2023	10/17/2023	10/17/2023	10/23/2023	11/7/2023	3/27/1900
Grounds Maintenance Worker	Facilities and Parks	10/15/2022	10/4/2021	2/18/2022	2/18/2022	4/26/2022	2/18/2022	2/18/2022	2/18/2022	2/18/2022	3/23/2022	3/23/2022	3/7/2022	4/27/2022	3/23/2022	4/14/2022	2/18/2022	4/14/2022	4/20/2022	4/22/2022	4/26/2022	4/27/2022	3/7/1900
Animal Control Officer	Animal Control	10/22/2022	10/18/2022	10/28/2022	10/18/2022	10/27/2022	10/17/2022	10/28/2022	10/31/2022	10/31/2022	10/31/2022	10/31/2022	11/28/2022	11/1/2022	11/14/2022	11/17/2022	11/17/2022	11/18/2022	11/21/2022	11/17/2022	11/23/2022	#####	1/26/1900
Facilities Maintenance Worker	Facilities and Parks	10/22/2022	3/22/2023	3/23/2023	3/24/2023	4/3/2023	3/31/2023	4/3/2023	4/21/2023	4/21/2023	4/28/2023	4/28/2023	4/25/2023	4/28/2023	5/25/2023	6/9/2023	6/9/2023	6/9/2023	6/23/2023	6/27/2023	7/7/2023	7/24/2023	4/4/1900
Admin Assistant	Fleet	11/5/2022	10/13/2022	10/28/2022	11/3/2022	11/7/2022	11/3/2022	11/7/2022	11/2/2022	11/3/2022	11/15/2022	12/1/2022	11/29/2022	12/1/2022	1/31/2023	4/3/2023	4/3/2023	4/3/2023	4/5/2023	4/19/2023	4/26/2023	5/15/2023	6/18/1900
Document Technician Personal Property	Assessor's	11/10/2022	11/10/2022	11/15/2022	11/15/2022	11/16/2022	11/16/2022	11/17/2022	11/29/2022	11/29/2022	12/5/2022	12/5/2022	12/2/2022	12/5/2022	12/13/2022	12/14/2022	12/14/2022	1/3/2023	1/5/2023	12/14/2022	1/24/2023	2/13/2023	3/8/1900
Budget & Grant Analyst Sr.	Finance	11/12/2022	11/17/2022	11/18/2022	11/18/2022	11/18/2022	11/18/2022	11/18/2022	12/8/2022	12/8/2022	12/6/2022	12/21/2022	12/9/2022	12/21/2022	1/18/2023	1/18/2023	1/18/2023	1/27/2023	1/27/2023	1/27/2023	1/31/2023	1/29/2023	3/14/1900
GIS Mapping Specialist	County Assessor	11/12/2022	3/17/2023	3/17/2023	3/17/2023	3/31/2023	3/22/2023	3/31/2023	4/28/2023	5/3/2023	4/28/2023	5/3/2023	4/23/2023	5/3/2023	7/20/2023	8/4/2023	8/8/2023	8/8/2023	8/9/2023	8/14/2023	8/21/2023	9/11/2023	5/22/1900
Grounds Maintenance Worker	Facilities and Parks	11/19/2022	10/25/2022	11/2/2022	11/9/2022	11/1/2022	11/1/2022	11/2/2022	11/9/2022	11/9/2022	11/17/2022	11/17/2022	11/17/2022	11/17/2022	12/5/2022	12/7/2022	12/7/2022	12/19/2022	1/17/2023	12/19/2022	1/24/2023	1/30/2023	3/23/1900
Wastewater Operator II	Utilities	11/19/2022	3/6/2023	3/8/2023	3/8/2023	3/8/2023	3/8/2023	3/8/2023	3/16/2023	3/16/2023	4/3/2023	4/10/2023	3/24/2023	4/10/2023	5/23/2023	6/7/2023	6/7/2023	6/7/2023	6/22/2023	6/22/2023	6/23/2023	7/3/2023	4/16/1900
Appraiser	Assessor's	11/21/2022	11/8/2022	11/8/2022	11/15/2022	11/14/2022	11/9/2022	11/14/2022	11/17/2022	12/1/2022	11/29/2022	11/30/2022	11/29/2022	12/1/2022	12/9/2022	11/28/2022	12/9/2022	12/13/2022	12/13/2022	12/13/2022	12/15/2022	#####	1/31/1900
Accountant I	Finance	11/23/2022	11/15/2022	11/16/2022	11/17/2022	11/17/2022	11/17/2022	11/17/2022	11/17/2022	11/17/2022	1/9/2023	1/9/2023	2/7/2023	2/9/2023	2/21/2023	2/21/2023	2/21/2023	2/21/2023	2/21/2023	2/21/2022	3/3/2023	3/19/2023	4/15/1900
GIS Mapper Analyst	Community Development	12/3/2022	12/31/2022	11/30/2022	12/5/2022	12/8/2022	12/5/2022	12/8/2022	1/3/2023	1/3/2023	1/3/2023	12/23/2022	1/3/2023	1/18/2023	1/18/2023	1/18/2023	1/18/2023	1/18/2023	1/18/2023	1/19/2023	1/23/2023	2/6/2023	2/15/1900
Appraiser Assistant	Assessor's	12/3/2022	12/20/2022	12/20/2022	12/20/2022	12/22/2022	12/20/2022	12/22/2022	1/5/2023	1/5/2023	1/5/2023	1/5/2023	1/6/2023	1/9/2023	1/17/2023	1/23/2023	1/23/2023	1/24/2023	1/30/2023	1/24/2023	2/6/2023	2/13/2023	2/15/1900
Appraiser Assistant	Assessor's	12/3/2022	12/20/2022	12/20/2022	12/20/2022	12/22/2022	12/20/2022	12/22/2022	1/5/2023	1/5/2023	1/5/2023	1/5/2023	1/6/2023	1/9/2023	1/17/2023	1/30/2023	1/30/2023	1/30/2023	2/3/2023	1/30/2023	2/10/2023	2/21/2023	2/19/1900
Development Technician	Community Development	12/3/2022	5/2/2023	5/4/2023	5/4/2023	5/12/2023	5/4/2023	5/12/2023	5/30/2023	5/30/2023	5/30/2023	5/30/2023	5/27/2023	5/30/2023	6/15/2023	6/16/2023	6/18/2023	6/20/2023	6/27/2023	6/27/2023	6/30/2023	7/3/2023	2/18/1900

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting/ Discussion with Department re: JD	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Qualified Applications Released to Department	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Reference Checks Received in HR	Background Check Initiated	Backgroun d Check Completed	Compensation Calculated/ Emailed to Department	Offer Extended to Candidate	Start Date	Time to Hire Final
Development Technician	Community Development	12/3/2022	7/5/2023	7/6/2023	7/6/2023	7/6/2023	7/6/2023	7/6/2023	9/7/2023	9/7/2023	9/5/2023	09/0/2023	8/20/2023	9/7/2023	9/25/2023	9/27/2023	9/27/2023	9/26/2023	9/27/2023	9/29/2023	10/2/2023	10/4/2023	3/28/1900
Development Technician	Community Development	12/3/2022	7/5/2023	7/6/2023	7/6/2023	7/6/2023	7/6/2023	7/6/2023	9/7/2023	9/7/2023	9/5/2023	9/7/2023	8/20/2023	9/7/2023	9/25/2023	9/27/2023	9/27/2023	9/26/2023	9/28/2023	9/29/2023	10/2/2023	#####	3/28/1900
Fleet Supervisor	Fleet	12/5/2022	12/5/2022	12/5/2022	12/6/2022	12/8/2022	12/8/2022	12/8/2022	12/15/2022	1/9/2023	12/15/2022	12/15/2022	1/6/2023	1/9/2023	3/8/2023	4/21/2023	4/21/2023	4/21/2023	4/25/2023	4/21/2023	5/9/2023	6/5/2023	5/31/1900
Grants Administrator	Finance	12/12/2022	1/19/2022	1/19/2022	1/19/2022	1/21/2022	1/19/2022	1/21/2022	2/1/2022	2/1/2022	2/4/2022	2/4/2022	1/27/2022	2/1/2022	2/4/2022	2/7/2022	2/7/2022	2/7/2022	2/10/2022	2/8/2022	2/12/2022	2/15/2022	1/22/1900
Director Human Resources	Human Resources	12/15/2022	12/15/2022	12/15/2022	12/15/2022	12/15/2022	12/15/2022	1/19/2023	2/15/2023	2/15/2023	1/5/2023	1/5/2023	2/2/2023	2/2/2023	2/16/2023	2/17/2023	2/17/2023	2/17/2023	2/17/2023		2/21/2023	2/27/2023	2/2/1900
Utilities Manager	Utilities	12/23/2022	12/12/2022	12/12/2022	12/12/2022	12/12/2022	12/12/2022	12/12/2022	2/17/2023	2/17/2023	2/17/2023	2/17/2023	1/10/2023	2/2/2023		3/3/2023	3/3/2023						N/A
GIS Mapper Analyst	Community Development	12/31/2022	12/31/2022	11/30/2022	12/5/2022	12/8/2022	12/5/2022	12/8/2022	1/3/2023	1/3/2023	1/3/2023	12/23/2022	1/3/2023	1/18/2023	1/18/2023	1/30/2023	1/30/2023	1/31/2023	2/2/2023	1/19/2023	2/7/2023	3/20/2023	3/1/1900
Plans Examiner	Community Development	1/5/2023	1/5/2023	1/5/2023	1/5/2023	1/11/2023	2/2/2023	2/2/2023	1/24/2023	1/24/2023	2/14/2023	2/15/2023	2/2/2023	2/15/2023	2/21/2023	2/21/2023	2/21/2023	2/24/2023	3/1/2023		3/1/2023	3/1/2023	1/27/1900
Plans Examiner	Community Development	1/5/2023	1/5/2023	1/5/2023	1/5/2023	1/11/2023	1/5/2023	1/11/2023	1/24/2023	1/24/2023	2/8/2023	2/9/2023	2/2/2023	2/14/2023	2/21/2023	2/21/2023	2/21/2023	2/24/2023	3/1/2023	2/22/2023	3/1/2023	3/1/2023	2/18/1900
Human Resources Assistant	Human Resources	1/6/2023	1/3/2023	1/3/2023	1/3/2023	1/6/2023	1/6/2023	1/8/2023	1/30/2023	1/31/2023	1/30/2023	1/31/2023	1/22/2023	1/31/2023	2/6/2023	2/14/2023	2/14/2023	2/16/2023	2/21/2023	2/21/2023	2/22/2023	3/13/2023	2/14/1900
Accountant III *	Finance	1/22/2023	2/13/2023	2/14/2023	2/13/2023	2/15/2023	2/13/2023	2/17/2023	2/10/2023	2/23/2023	2/10/2023	3/10/2023	3/3/2023	3/10/2023	3/17/2023	3/23/2023	3/23/2023	3/31/2023	3/29/2023	3/31/2023	4/3/2023	4/23/2023	2/14/1900
Budget Analyst	Finance	1/28/2023	11/17/2022	11/18/2022	11/18/2022	11/18/2022	11/18/2022	11/18/2022	12/8/2022	12/8/2022	12/6/2022	12/21/2022	12/9/2022	12/21/2022	1/26/2023	1/26/2023	1/26/2023	1/26/2023	1/26/2023	1/27/2023	1/31/2023	6/4/2023	3/14/1900
Payroll and Accounts Payable Manager	Finance	2/1/2023	2/24/2023	2/24/2023	2/24/2023	3/2/2023	3/1/2023	3/2/2023	3/21/2023	3/21/2023	3/3/2023	3/3/2023	4/5/2023	04/06/2023	4/19/2023	4/28/2023	4/28/2023	4/28/2023	5/2/2023	4/27/2023	5/4/2023	6/5/2023	3/3/1900
IT Service Desk Technician *	IT	2/2/2023	2/6/2023	2/6/2023	2/6/2023	2/9/2023	2/9/2023	2/9/2023	3/1/2023	3/1/2023	2/17/2023	2/23/2023	2/24/2023	3/1/2023	3/23/2023	3/27/2023	3/27/2023	3/28/2023	3/29/2023	3/23/2023	3/31/2023	4/3/2023	2/19/1900
Communications Coordinator	Health & Human Services	2/2/2023	2/2/2023	2/6/2023	2/6/2023	2/17/2023	2/6/2023	2/17/2023	2/28/2023	2/28/2023	3/15/2023	3/17/2023	3/6/2023	3/17/2023	4/24/2023	4/25/2023	4/25/2023	4/26/2023	4/27/2023	4/24/2023	5/3/2023	5/22/2023	
GIS Administrator	Community Development	2/7/2023	2/7/2023	2/9/2023	2/9/2023	2/10/2023	2/9/2023	2/13/2023					5/16/2023										
Chief Appraiser	Assessor's	2/11/2023	12/27/2023	12/27/2023	12/27/2023	12/27/2023	12/27/2023	12/28/2023	3/12/2024	3/12/2024	3/5/2024	3/5/2024	1/15/2024	3/12/2024	3/20/2024	3/20/2024	3/20/2024	3/20/2024	3/20/2024	3/22/2024	5/2/2024	3/24/2024	
Inspector I (Electrical)	Community Development	2/28/2023	3/9/2023	3/14/2023	3/17/2023	3/17/2023	3/17/2023	3/17/2023	4/19/2023	4/19/2023	4/17/2023	4/17/2023	4/14/2023	4/26/2023	5/9/2023	7/10/2023	7/11/2023			7/17/2023	7/18/2023	8/7/2023	5/2/1900
Inspector I (Electrical)	Community Development	2/28/2023	3/9/2023	3/14/2023	3/17/2023	3/17/2023	3/17/2023	3/17/2023	4/19/2023	4/19/2023	4/17/2023	4/17/2023	4/14/2023	4/26/2023	5/9/2023	7/10/2023	7/11/2023			7/17/2023	7/18/2023	8/7/2023	5/2/1900
Inspector I (Building)	Community Development	2/28/2023	7/19/2023	7/20/2023	7/19/2023	7/21/2023	7/19/2023	7/20/2023	8/2/2023	8/2/2023	9/5/2023	9/7/2023	8/22/2023	9/7/2023	9/26/2023	9/27/2023	9/27/2023	9/27/2023	10/16/2023	10/12/2023	10/17/2023	#####	3/29/1900
Building Attendant	Facilities and Parks	3/13/2023	3/13/2023	3/14/2023	3/16/2023	3/16/2023	3/16/2023	3/17/2023	3/23/2023	3/23/2023	4/6/2023	4/6/2023	4/3/2023	4/6/2023	4/25/2023	5/12/2023	5/12/2023	5/12/2023	5/16/2023	5/19/2023	5/24/2023	6/12/2023	3/8/1900
Document Technician	County Assessor	3/17/2023	3/17/2023	3/21/2023	4/10/2023	4/10/2023	4/10/2023	4/11/2023	4/19/2023	4/19/2023	5/15/2023	5/15/2023	4/26/2023	5/15/2023	6/20/2023	6/21/2023	6/21/2023	6/21/2023	6/21/2023	6/22/2023	7/12/2023	7/30/2023	4/1/1900
Environmental Codes Officer	Community Development	3/18/2023	3/21/2023	3/22/2023	3/22/2023	3/23/2023	3/22/2023	3/23/2023	4/20/2023	4/21/2023	4/20/2023	4/21/2023	4/9/2023	4/21/2023	5/2/2023	5/8/2023	5/12/2023	5/19/2023	5/24/2023	5/25/2023	5/25/2023	5/30/2023	3/3/1900
Doc Technician	DASO	3/18/2023	9/12/2023	9/12/2023	9/12/2023	9/12/2023	9/12/2023	9/14/2023	11/21/2023	11/29/2023	11/29/2023	11/29/2023	9/21/2023	9/21/2023	12/1/2023	1/9/2024	1/17/2024	12/20/2023	1/9/2024	1/26/2024	2/2/2024	2/12/2024	2/26/2026
Doc Technician	DASO	3/18/2023	9/12/2023	9/12/2023	9/12/2023	9/12/2023	9/12/2023	9/14/2023	11/21/2023	11/29/2023	11/29/2023	11/29/2023	9/21/2023		11/30/2023	1/4/2024	1/17/2024	12/20/2023	1/4/2024	1/26/2024	2/5/2024	4/21/2024	2/26/2026
Doc Technician	DASO	3/18/2023	9/12/2023	9/12/2023	9/12/2023	9/12/2023	9/12/2023	9/14/2023	11/21/2023	11/29/2023	11/29/2023	11/29/2023	9/21/2023		11/30/2023	4/10/2024	4/15/2024	3/13/2024	4/10/2024	4/16/2024	4/25/2024	5/13/2024	
Doc Technician	DASO	3/18/2023	9/12/2023	9/12/2023	9/12/2023	9/12/2023	9/12/2023	9/14/2023	11/21/2023	11/29/2023	11/29/2023	11/29/2023	9/21/2023		11/30/2023	2/8/2024	2/20/2024	12/20/2023	2/8/2024	2/26/2024	3/5/2024		
Doc Technician	DASO	3/18/2023	9/12/2023	9/12/2023	9/12/2023	9/12/2023	9/12/2023	9/14/2023	11/21/2023	11/29/2023	11/29/2023	11/29/2023	9/21/2023		11/30/2023	11/30/2023	11/30/2023	3/13/2024	3/13/2024	3/13/2024	3/13/2024		
Doc Technician	DASO	3/18/2023	9/12/2023	9/12/2023	9/12/2023	9/12/2023	9/12/2023	9/14/2023	11/21/2023	11/29/2023	11/29/2023	11/29/2023	9/21/2023		12/1/2023	12/1/2023	12/1/2023	12/1/2023	2/1/2024	2/1/2024	2/1/2024		
Doc Technician	DASO	3/18/2023	9/12/2023	9/12/2023	9/12/2023	9/12/2023	9/12/2023	9/14/2023	11/21/2023	11/29/2023	11/29/2023	11/29/2023	9/21/2023		12/1/2023	12/1/2023	12/1/2023	1/11/2024	1/11/2024	1/11/2024	1/11/2024		
Planner-Current Planning	Community Development	3/21/2023	3/21/2023	3/22/2023	3/23/2023	4/20/2023	3/28/2023	4/20/2023	5/10/2023	5/10/2023	5/24/2023	5/24/2023	5/19/2023	5/24/2023	6/14/2023	6/20/2023	6/20/2023	6/20/2023	6/21/2023	6/21/2023	6/22/2023	6/26/2023	3/3/1900
Document Technician	Clerk's	3/25/2023	4/4/2023	4/13/2023	4/13/2023	4/17/2023	4/13/2023	4/17/2023	4/20/2023	5/3/2023	5/2/2023	5/3/2023	5/2/2023	5/3/2023	5/24/2023	5/25/2023	5/25/2023	5/25/2023	5/25/2023	5/25/2023	6/1/2023	6/4/2023	2/14/1900
Voting Machine Technician	Clerk's	3/26/2023	7/19/2023	7/20/2023	7/19/2023	7/20/2023	7/19/2023	7/21/2023	8/2/2023	8/2/2023	8/10/2023	8/10/2023	8/20/2023	8/22/2023	8/25/2023	8/25/2023	8/25/2023	8/25/2023	8/29/2023	8/29/2023	9/5/2023	9/11/2023	2/15/1900

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Laborer	Community Development	4/3/2023	4/3/2023	4/5/2023	4/18/2023	7/26/2023	5/12/2023	7/28/2023	9/1/2023	9/1/2023	9/5/2023	9/5/2023	8/13/2023	9/5/2023	9/13/2023	10/27/2023	10/27/2023	10/11/2023	10/16/2023	10/30/2023	11/1/2023	11/6/2023	4/5/1900
Grounds Maintenance Worker	Facilities and Parks	4/5/2023	4/5/2023	4/6/2023	4/12/2023	4/13/2023	4/12/2023	4/13/2023	4/21/2023	4/21/2023	5/10/2023	5/10/2023	4/28/2023	5/10/2023	5/25/2023	6/6/2023	5/30/2023	6/6/2023	7/12/2023	7/12/2023	7/17/2023	7/24/2023	4/4/1900
Program and Contract Assistant	Health & Human Services	4/6/2023	4/6/2023	4/13/2023	4/6/2023	4/24/2023	4/6/2023	4/20/2023	4/20/2023	6/30/2023	6/20/2023	6/30/2023	5/12/2023	6/30/2023	7/5/2023	7/14/2023	7/17/2023	7/17/2023	7/20/2023	7/20/2023	8/1/2023	8/1/2023	4/12/1900
Community Health Worker	Health & Human Services	4/8/2023	4/14/2023	4/14/2023	4/12/2023	4/12/2023	4/12/2023	4/14/2023	5/2/2023	5/2/2023	5/4/2023	5/4/2023	5/7/2023	5/11/2023	5/12/2023	5/22/2023	5/22/2023	5/23/2023	5/24/2023	5/22/2023	6/1/2023	7/10/2023	2/17/1900
Community Health Worker	Health & Human Services	4/10/2023	4/10/2023	4/11/2023	4/12/2023	4/12/2023	4/12/2023	4/14/2023	5/2/2023	5/2/2023	5/4/2023	5/4/2023	5/7/2023	5/11/2023	5/12/2023	5/16/2023	5/16/2023	5/16/2023	5/16/2023	5/22/2023	6/17/2023	7/2/2023	3/4/1900
Program and Contract Assistant	HHS	4/14/2023	8/10/2023	8/14/2023	8/14/2023	8/17/2023	8/14/2023	8/17/2023	8/16/2023	8/17/2023	8/29/2023	8/29/2023	9/3/2023	9/11/2023	9/14/2023	9/26/2023	9/26/2023	9/21/2023	9/26/2023	9/27/2023	10/3/2023	10/4/2023	2/16/1900
Sr. Human Resources Administrator -Benefits	Human Resources	4/21/2023	4/21/2023	4/21/2023	4/21/2023	4/21/2023	4/21/2023	4/21/2023	7/17/2023	7/18/2023	7/17/2023	7/18/2023	4/30/2023	7/18/2023	7/26/2023	7/26/2023	7/26/2023	7/28/2023	7/28/2023	7/27/2023	7/31/2023	8/6/2023	4/10/1900
Accountant II	Finance	4/22/2023	5/5/2023	5/17/2023	5/16/2023	5/17/2023	5/16/2023	5/17/2023	7/6/2023	7/6/2023	7/13/2023	7/14/2023	7/6/2023	7/14/2023	8/2/2023	8/4/2023	8/4/2023	8/4/2023	8/7/2023	8/4/2023	8/11/2023	9/11/2023	3/26/1900
Accounting Specialist	Treasurer's	4/27/2023	4/24/2023	4/24/2023	5/4/2023	5/17/2023	5/16/2023	5/17/2023	6/14/2023	6/20/2023	6/20/2023	6/20/2023	6/8/2023	6/20/2023	6/23/2023	6/26/2023	6/26/2023	6/28/2023	6/28/2023	6/28/2023	7/5/2023	7/2/2023	2/18/1900
Infrastructure Manager	Information Technology	5/2/2023	5/2/2023	5/5/2023	5/12/2023	5/15/2023	5/12/2023	5/16/2023	6/9/2023	6/12/2023	6/9/2023	6/13/2023	5/31/2023	6/13/2023	6/28/2023	6/30/2023	7/3/2023	7/3/2023	7/10/2023	7/10/2023	7/14/2023	7/31/2023	2/28/1900
Community Outreach Spec II	HHS	5/3/2023	5/3/2023	5/4/2023	5/5/2023	5/7/2023	5/5/2023	5/8/2023	5/25/2023	5/26/2023	5/26/2023	5/26/2023	5/23/2023	5/26/2023	6/23/2023	7/11/2023	7/11/2023	7/12/2023	7/13/2023	7/17/2023	7/18/2023	7/24/2023	3/11/1900
Appraiser Assistant	County Assessor	5/4/2023	4/21/2023	4/21/2023	4/24/2023	5/16/2023	4/24/2023	5/16/2023	5/24/2023	5/24/2023	5/24/2023	6/6/2023	5/31/2023	6/6/2023	6/14/2023	6/15/2023	6/15/2023	6/20/2023	6/20/2023	6/20/2023			
Appraiser Assistant	County Assessor	5/4/2023	4/21/2023	4/21/2023	4/24/2023	5/16/2023	4/24/2023	5/16/2023	5/24/2023	6/6/2023	5/24/2023	5/24/2023	5/31/2023	6/6/2023	6/14/2023	6/15/2023	6/15/2023	6/20/2023	6/20/2023	6/20/2023			
Appraiser Assistant	County Assessor	5/4/2023	4/21/2023	4/21/2023	4/24/2023	5/16/2023	4/24/2023	5/16/2023	5/24/2023	6/6/2023	5/24/2023	6/6/2023	5/31/2023	6/6/2023	6/14/2023	6/15/2023	6/15/2023	6/27/2023	6/27/2023	6/27/2023	8/3/2023	8/7/2023	
Appraiser Assistant	County Assessor	5/4/2023	4/21/2023	4/21/2023	4/24/2023	5/16/2023	4/24/2023	5/16/2023	5/24/2023	6/6/2023	5/24/2023	6/6/2023	5/31/2023	6/6/2023	6/14/2023	9/8/2023	9/8/2023	9/11/2023	9/28/2023	9/28/2023	10/11/2023	#####	
Appraiser Assistant	County Assessor	5/4/2023	4/21/2023	4/21/2023	4/24/2023	5/16/2023	4/24/2023	5/16/2023	5/24/2023	6/6/2023	5/24/2023	6/6/2023	5/31/2023	6/6/2023	6/14/2023	8/14/2023	8/14/2023	8/18/2023	8/22/2023	8/22/2023	8/28/2023	9/11/2023	
Appraiser Assistant	County Assessor	5/4/2023	4/21/2023	4/21/2023	4/24/2023	5/16/2023	4/24/2023	5/16/2023	5/24/2023	6/6/2023	5/24/2023	6/6/2023	5/31/2023	6/6/2023	6/14/2023	8/9/2023	8/9/2023	8/18/2023	8/24/2023	8/24/2023	8/24/2023		
Document Technician	County Assessor	5/5/2023	5/1/2023	5/1/2023	5/2/2023	5/4/2023	5/2/2023	5/4/2023	5/24/2023	5/24/2023	5/24/2023	5/31/2023	5/21/2023	5/31/2023	6/5/2023	6/6/2023	6/8/2023	6/8/2023	6/16/2023	6/20/2023	7/11/2023	7/31/2023	3/8/1900
Payroll and Accounts Payable Manager	Finance	5/16/2023	5/16/2023	5/16/2023	5/16/2023	5/17/2023	5/16/2023	5/18/2023	5/18/2023	5/18/2023	6/6/2023	6/6/2023	6/2/2023	6/6/2023	6/9/2023	6/12/2023	6/12/2023	6/12/2023	6/16/2023	6/16/2023	6/20/2023	7/3/2023	2/2/1900
Accountant I	Finance	5/19/2023	5/7/2023	5/7/2023	5/7/2023	11/17/2022	11/17/2022	11/17/2022	11/17/2022	11/17/2022	1/9/2023	1/9/2023	2/7/2023	2/9/2023	2/21/2023	2/21/2023	5/7/2023	5/7/2023	5/7/2023	5/10/2023	5/15/2023	5/21/2023	6/27/1900
Accounting Specialist	Finance	5/22/2023	5/18/2023	5/18/2023	5/18/2023	5/19/2023	5/18/2023	5/19/2023	6/13/2023	6/13/2023	6/13/2023	6/20/2023	6/19/2023	6/20/2023	7/13/2023	7/13/2023	7/13/2023	7/20/2023	7/20/2023	7/20/2023	7/24/2023		3/6/1900
Director Facilities and Parks	Facilities and Parks	5/31/2023	4/10/2023	4/10/2023	4/10/2023	4/10/2023	4/10/2023	4/10/2023	4/28/2023	4/28/2023	4/28/2023	4/28/2023	4/25/2023	5/1/2023	5/24/2023	6/7/2023	6/7/2023	6/7/2023	6/22/2023	6/9/2023	6/9/2023	6/26/2023	2/29/1900
Mapping Technician	Clerk's	6/6/2023	6/5/2023	6/7/2023	5/1/2023	6/9/2023	5/1/2023	6/9/2023	6/26/2023	6/26/2023	6/29/2023	6/29/2023	6/26/2023	6/29/2023	7/18/2023	7/18/2023	7/18/2023	7/18/2023	7/18/2023	7/18/2023	7/21/2023	7/24/2023	2/11/1900
Court Compliance Secretary	HHS	6/14/2023	6/14/2023	6/14/2023	6/14/2023	6/20/2023	6/14/2023	6/20/2023	7/11/2023	7/12/2023	7/11/2023	7/12/2023	7/5/2023	7/12/2023	7/24/2023	7/27/2023	7/28/2023	7/28/2023	8/1/2023	8/1/2023	8/8/2023	8/28/2023	2/18/1900
Committee Coordinator	HHS	6/17/2023	6/13/2023	6/13/2023	6/13/2023	7/10/2023		7/10/2023	7/19/2023	7/19/2023	7/18/2023	7/19/2023	7/25/2023	7/27/2023	8/9/2023	8/14/2023	8/14/2023	8/14/2023	8/16/2023	8/17/2023	8/23/2023	9/11/2023	2/13/1900
Engineer Associate	Flood Commission	6/18/2023	2/16/2023	2/17/2023	2/17/2023	2/17/2023	2/17/2023	2/21/2023	3/24/2023	3/27/2023	3/27/2023	3/27/2023	3/23/2023	3/27/2023	4/5/2023	4/6/2023	4/11/2023	4/13/2023	4/17/2023	4/19/2023	5/3/2023	5/22/2023	
IT Network Engineer	Information Technology	6/21/2023	6/21/2023	6/23/2023	6/23/2023	6/26/2023	6/23/2023	6/26/2023	7/24/2023	7/24/2023	7/24/2023	7/24/2023	7/27/2023	8/1/2023	8/11/2023	9/7/2023	9/7/2023	9/7/2023	10/27/2023	9/13/2023	9/14/2023	#####	3/20/1900
IT Network Engineer	Information Technology	6/21/2023	6/21/2023	6/23/2023	6/23/2023	6/26/2023	6/23/2023	6/26/2023	7/24/2023	7/24/2023	7/24/2023	7/24/2023	7/27/2023	8/1/2023	8/11/2023	8/18/2023	8/28/2023	8/28/2023	9/6/2023	9/1/2023	9/26/2023	9/6/2023	4/1/1900
Document Technician Lead	Treasurer's	7/1/2023	7/24/2023	7/24/2023	7/24/2023	7/31/2023	7/24/2023	7/31/2023	8/22/2023	8/22/2023	8/23/2023	8/23/2023	8/8/2023	8/23/2023	8/31/2023	9/7/2023	9/7/2023	9/5/2023	9/5/2023	9/7/2023	9/20/2023	9/24/2023	2/20/1900
HR Administrator-Benefits	Human Resources	7/1/2023	3/7/2024	3/7/2024	3/7/2024	3/7/2024	3/7/2024	3/7/2024	8/22/2024	8/27/2024	8/22/2024	8/27/2024	3/31/2024	8/22/2024	8/29/2024	9/13/2024	9/13/2024	9/3/2024	9/5/2024	9/13/2024	9/16/2024	10/7/2024	
Electronic Technician	Flood Commission	7/3/2023	5/4/2023	5/5/2023	5/5/2023	5/5/2023	5/5/2023	5/5/2023	6/16/2023	6/16/2023	6/20/2023	6/20/2023	6/4/2023	6/20/2023	7/11/2023	7/19/2023	7/19/2023	7/19/2023	7/20/2023	7/21/2023	07/31/230	9/18/2023	
Compliance Officer	HHS	7/7/2023	6/23/2023	6/26/2023	6/23/2023	6/27/2023	6/23/2023	6/28/2023	7/20/2023	7/25/2023	7/20/2023	7/25/2023	7/12/2023	7/25/2023	8/3/2023	8/8/2023	8/9/2023	8/10/2023	8/14/2023	8/14/2023	9/5/2023	9/18/2023	3/9/1900
Compliance Officer	HHS	7/7/2023	6/23/2023	6/26/2023	6/23/2023	6/27/2023	6/23/2023	6/28/2023	7/20/2023	7/25/2023	7/20/2023	7/25/2023	7/12/2023	7/25/2023	8/3/2023	8/29/2023	8/30/2023	8/31/2023	9/14/2023	9/14/2023	9/18/2023	10/2/2023	3/22/1900

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting/ Discussion with Department re: JD	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Qualified Applications Released to Department	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Reference Checks Received in HR	Background Check Initiated	Background Check Completed	Compensation Calculated/ Emailed to Department	Offer Extended to Candidate	Start Date	Time to Hire Final
Program and Contract Assistant	HHS	7/7/2023	7/7/2023	7/7/2023	7/11/2023	7/18/2023	7/11/2023	7/18/2023	7/31/2023	7/31/2023	8/9/2023	8/9/2023	8/9/2023	8/15/2023	9/11/2023	10/25/2023	10/25/2023	10/24/2023	10/24/2023	10/26/2023	11/1/2023	11/5/2023	4/15/1900
Program and Contract Assistant	HHS	7/7/2023	047/07/2023	7/7/2023	7/11/2023	7/18/2023	7/11/2023	7/18/2023	7/31/2023	7/31/2023	8/9/2023	8/9/2023	8/9/2023	8/15/2023	9/11/2023	9/15/2023	9/15/2023	9/12/2023	9/12/2023	9/15/2023	9/29/2023	9/29/2023	3/13/1900
Equipment Operator/Heavy Equipment Operator	Engineering & Roads	7/17/2023	3/3/2023	3/6/2023	3/6/2023	3/9/2023	3/6/2023	3/9/2023	3/3/2023	3/3/2023	4/17/2023	4/18/2023	3/20/2023	4/18/2023	5/3/2023	5/11/2023	5/11/2023	5/16/2023	5/24/2023	5/26/2023	6/5/2023	6/20/2023	3/28/1900
Database Administrator	Information Technology	7/17/2023	7/17/2023	7/19/2023	7/17/2023	7/21/2023	7/17/2023	7/24/2023	7/17/2023	7/17/2023	7/17/2023	7/17/2023	8/22/2023	8/23/2023	9/8/2023	9/15/2023	9/15/2023	9/18/2023	9/22/2023	9/25/2023	9/26/2023	10/2/2023	3/4/1900
Laborer	Engineering & Roads	7/21/2023	7/21/2023	7/24/2023	7/24/2023	7/27/2023	7/24/2023	7/28/2023	8/14/2023	8/14/2023	8/14/2023	8/14/2023	8/13/2023	8/15/2023	8/31/2023	9/15/2023	9/15/2023	9/15/2023	10/17/2023	10/19/2023	11/17/2023	12/4/2023	4/21/1900
Contract Administrator	Finance	7/21/2023	7/21/2023	7/24/2023	7/24/2023	7/26/2023	7/24/2023	7/27/2023	8/11/2023	8/11/2023	8/21/2023	8/21/2023	8/18/2023	8/28/2023	9/13/2023	9/13/2023	9/13/2023	9/14/2023	9/14/2023	9/15/2023	9/21/2023	9/24/2023	2/25/1900
Document Technician	Clerk's	7/23/2023	8/29/2023	8/29/2023	8/29/2023	8/29/2023	8/29/2023	8/29/2023	8/29/2023	8/29/2023	8/29/2023	8/29/2023	9/13/2023	9/15/2023	9/28/2023	10/2/2023	10/2/2023	10/2/2023	10/2/2023	10/5/2023	10/9/2023	#####	
Appraiser Assistant	Assessor's	7/23/2023	9/8/2023	9/11/2023	9/11/2023	9/27/2023	9/11/2023	9/27/2023	10/26/5/2023	10/26/2023	10/24/2023	10/26/2023	10/12/2023	10/26/2023	11/13/2023	12/8/2023	12/8/2023	11/15/2023	11/29/2023	12/12/2023	12/20/2023	1/3/2024	
Executive Assistant to Commissioner	County Commission	7/24/2023	7/24/2023	7/24/2023	7/14/2023	7/24/2023	7/14/2023	7/24/2023	7/24/2023	7/24/2023	7/24/2023	7/24/2023	8/4/2023	8/7/2023	9/27/2023	10/2/2023	10/2/2023	9/27/2023	10/16/2023	10/2/2023	10/10/2023	#####	3/18/1900
Live Evidence Technician	Animal Control	7/28/2023	8/31/2023	9/7/2023	10/23/2023	11/2/2023	10/23/2023	11/2/2023	1/5/2024	1/5/2024	1/3/2024	1/10/2024	12/3/2023	1/10/2024	1/29/2024	2/9/2024	2/12/2024	1/29/2024	1/31/2024	2/26/2024	2/28/2024	3/18/2024	4/27/1900
Administrative Assistant	Fleet	8/3/2023	8/3/2023	8/3/2023	8/3/2023	8/4/2023	8/3/2023	8/3/2023	8/28/2023	8/28/2023	8/28/2023	8/28/2023	8/27/2023	8/31/2023	12/1/23	1/3/2024	1/3/2024	12/1/2023	12/14/2023	12/21/2023	1/4/2024	1/16/2024	
Payroll Coordinator	Finance	8/4/2023	7/24/2023	7/24/2023	7/25/2023	7/26/2023	7/25/2023	7/27/2023	8/29/2023	8/29/2023	9/8/2023	9/8/2023	8/25/2023	9/8/2023	9/15/2023	9/18/2023	9/18/2023	9/19/2023	9/20/2023	9/21/2023	9/27/2023	#####	3/2/1900
Document Technician	County Assessor	8/6/2023	8/18/2023	8/21/2023	8/21/2023	8/23/2023	8/21/2023	8/23/2023	9/5/2023	9/5/2023	9/7/2023	9/8/2023	9/7/2023	9/8/2023	9/13/2023	10/4/2023	10/5/2023	9/28/2023	10/16/2023	10/12/2023	10/27/2023	11/6/2023	
Document Technician	County Assessor	8/6/2023	8/18/2023	8/21/2023	8/21/2023	8/23/2023	8/21/2023	8/23/2023	9/5/2023	9/5/2023	9/7/2023	9/8/2023	9/7/2023	9/8/2023	9/13/2023	10/3/2023	10/3/2023	9/21/2023	9/26/2023	10/5/2023	10/12/2023	#####	
Economic Development Administrator	Community Development	8/7/2023	8/7/2023	8/8/2023	8/8/2023	8/9/2023	8/6/2023	8/9/2023	9/5/2023	9/7/2023	8/29/2023	9/5/2023	8/31/2023	9/5/2023	10/11/2023	10/27/2023	10/27/2023	10/12/2023	10/16/2023	10/27/2023	10/31/2023	#####	3/23/1900
Administrative Assistant	County Manager	8/12/2023	9/22/2023	9/22/2023	9/22/2023	9/22/2023	9/22/2023	9/22/2023	10/16/2023	10/17/2023	10/16/2023	10/17/2023	10/8/2023	10/17/2023	11/16/2023	11/29/2023	12/1/2023	11/29/2023	11/30/2023	12/1/2023	12/13/2023	1/8/2024	3/22/1900
Data and Evaluation Coordinator	HHS	8/14/2023	7/31/2023	8/2/2023	8/2/2023	8/2/2023	8/2/2023	8/2/2023	8/29/2023	8/29/2023	8/30/2023	8/30/2023	8/24/2023	8/30/2023	10/11/2023	10/16/2023	10/16/2023	10/12/2023	10/13/2023	10/18/2023	10/23/2023	#####	3/22/1900
Emergency Management Coordinator	Office of Emergency Management	8/14/2023	8/17/2023	8/18/2023	8/18/2023	8/22/2023	8/18/2023	8/22/2023	9/12/2023	9/12/2023	9/20/2023	9/20/2023	9/13/2023	9/20/2023	10/2/2023	11/27/2023	11/27/2023	11/7/2023	11/7/2023	11/27/2023	11/28/2023	1/2/2024	4/7/1900
Human Resources Administrator	Human Resources	8/21/2023	8/21/2023	8/22/2023	8/22/2023	8/23/2023	8/22/2023	8/24/2023	9/18/2023	9/18/2023	9/18/2023	9/18/2023	9/15/2023	9/18/2023	10/12/2023	10/17/2023	10/17/2023	10/13/2023	10/17/2023	10/17/2023	10/18/2023	#####	
GIS Mapping Specialist	County Assessor	8/24/2023	8/24/2023	8/25/2023	8/24/2023	8/25/2023	8/24/2023	8/28/2023	9/19/2023	9/19/2023	10/23/2023	10/23/2023	9/19/2023	10/23/2023	11/30/2023	12/20/2023	12/20/2023	12/1/2023	12/19/2023	12/21/2023	1/12/2024	1/16/2024	
Grant Administrator	Flood Commission	8/29/2023	8/30/2023	8/31/2023	8/30/2023	9/6/2023	8/30/2023	9/6/2023	9/22/2023	9/22/2023	9/28/2023	9/28/2023	9/27/2023	9/28/2023	10/16/2023	10/16/2023	10/16/2023	10/16/2023	10/18/2023	10/19/2023	11/2/2023	11/5/2023	2/26/1900
Manager	Purchasing Department	8/31/2023	4/13/2023	5/4/2023	5/1/2023	5/4/2023	5/1/2023	5/22/2023	6/20/2023	6/20/2023	6/20/2023	6/20/2023	7/4/2023	7/5/2023	7/11/2023	7/12/2023	7/12/2023	7/20/2023	7/20/2023	7/20/2023	7/21/2023	9/1/2023	2/29/1900
Animal Control Officer	Animal Control	8/31/2023	8/31/2023	9/1/2023	9/1/2023	9/21/2023	9/19/2023	9/21/2023	10/31/2023	10/31/2023	10/31/2023	10/31/2023	10/22/2023	11/6/2023	11/17/2023	12/7/2023	12/7/2023	12/8/2023	12/11/2023	12/19/2023	12/21/2023	1/16/2024	
Animal Control Officer	Animal Control	8/31/2023	8/31/2023	9/1/2023	9/1/2023	9/21/2023	9/19/2023	9/21/2023	10/31/2023	10/31/2023	10/31/2023	10/31/2023	10/22/2023	11/6/2023	11/17/2023	1/11/2024	1/11/2024	12/12/2023	12/19/2023	1/22/2024	1/30/2024	2/5/2024	
Court Compliance Secretary Lead	HHS	9/5/2023	6/15/2023	9/6/2023	6/15/2023	9/11/2023	8/31/2023	9/15/2023	10/13/2023	10/13/2023	10/13/2023	10/13/2023	10/8/2023	10/16/2023	11/2/2023	11/7/2023	11/7/2023	11/3/2023	11/3/2023	11/8/2023	11/22/2023	#####	
Document Technician	Treasurer's	9/9/2023	9/14/2023	9/14/2023	9/14/2023	9/19/2023	9/14/2023	9/19/2023	10/6/2023	10/6/2023	9/29/2023	10/6/2023	9/27/2023	10/6/2023	10/12/2023	10/20/2023	10/20/2023	10/12/2023	10/18/2023	10/20/2023	10/26/2023	11/6/2023	
Community Outreach Specialist	HHS	9/13/2023	9/13/2023	9/13/2023	9/18/2023	10/2/2023	9/18/2023	10/4/2023	11/18/2023	11/8/2023	11/14/2023	11/14/2023	10/26/2023	11/14/2023	12/8/2023	12/15/2023	12/15/2023	12/12/2023	12/13/2023	12/15/2023	12/27/2023	1/16/2024	
Volunteer Coordinator	Office of Emergency Management	9/20/2023	9/21/2023	9/21/2023	9/20/2023	9/21/2023	9/20/2023	9/22/2023	10/25/2023	10/25/2023	11/1/2023	11/1/2023	10/15/2023	11/1/2023	11/17/2023	11/28/2023	11/28/2023	11/17/2023	11/20/2023	11/27/2023	11/29/2023	12/4/2023	
Sr. HR Representative	Human Resources	9/29/2023	9/29/2023	9/29/2023	9/29/2023	10/3/2023	9/29/2023	10/3/2023	10/19/2023	10/19/2023	10/19/2023	10/19/2023	10/10/2023	10/19/2023	10/24/2023	10/24/2023	10/24/2023	10/24/2023	10/24/2023	10/24/2023	10/27/2023	#####	1/24/1900
IT Communications Systems Technician	Information Technology	9/29/2023	9/29/2023	9/29/2023	9/29/2023	10/19/2023	10/18/2023	10/19/2023	11/8/2023	11/8/2023	11/2/2023	11/2/2023	11/12/2023	11/13/2023	11/28/2023	1/23/2024	1/23/2024	1/17/2024	1/24/2024	1/25/2024	1/25/2024	1/30/2024	
IT Communications Systems Technician	Information Technology	9/29/2023	9/29/2023	9/29/2023	9/29/2023	10/19/2023	10/18/2023	10/19/2023	11/8/2023	11/8/2023	11/2/2023	11/2/2023	11/12/2023	11/13/2023	11/28/2023	12/12/2023	12/12/2023	12/20/2023	12/27/2023	12/27/2023	1/4/2024	1/8/2024	3/17/1900
Accountant III	Finance	10/10/2023	10/18/2023	10/20/2023	10/23/2023	11/17/2023	10/23/2023	11/17/2023		12/21/2023	12/13/2023	12/21/2023	12/10/2023	12/21/2023	1/11/2024	1/11/2024	1/11/2024	1/12/2024	1/12/2024	1/12/2024	1/12/2024	1/28/2024	
Opioid Settlement Coordinator	HHS	10/16/2023	10/18/2023	10/18/2023	8/16/2023	10/21/2023	8/16/2023	10/24/2023	11/8/2023	11/13/2023	11/7/2023	11/7/2023	11/8/2023	11/13/2023	11/28/2023	11/29/2023	12/1/2023	12/1/2023	12/6/2023	12/7/2023	1/4/2024	1/8/2024	3/12/1900

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting/ Discussion with Department re: JD	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Qualified Applications Released to Department	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Reference Checks Received in HR	Background Check Initiated	Background Check Completed	Compensation Calculated/ Emailed to Department	Offer Extended to Candidate	Start Date	Time to Hire Final
Health Promotion Specialist II	HHS	10/27/2023	10/12/2023	10/13/2023	10/12/2023	10/18/2023	10/12/2023	10/18/2023	11/3/2023	11/6/2023	11/3/2023	11/6/2023	11/2/2023	11/6/2023	11/9/2023	11/17/2023	11/17/2023	11/17/2023	11/17/2023	11/17/2023	12/5/2023	12/6/2023	2/17/1900
Human Resources Representative	Human Resources	10/29/2023	9/5/2024	9/5/2024	9/5/2024	9/5/2024	9/5/2024	9/6/2024	9/30/2024	9/30/2024	9/30/2024	9/30/2024	9/21/2024	9/30/2024	10/16/2024	10/17/2024	10/17/2024	10/17/2024	10/25/2024	10/17/2024	10/25/2024	#####	
Flood Warning & Infrastructure	Flood Commission	10/31/2023	10/31/2023	10/31/2023	10/23/2023	11/3/2023	10/23/2023	11/3/2023	11/16/2023	11/16/2023	11/16/2023	11/16/2023	11/26/2023	11/30/2023	12/13/2023	12/15/2023	12/15/2023	12/15/2023	12/15/2023	12/20/2023	1/4/2024	1/7/2024	
Construction Coordinator	Flood Commission	11/3/2023	11/30/2023	12/1/2023	12/1/2023	12/4/2023	10/23/2023	12/4/2023	1/22/2024	2/5/2024	1/22/2024	2/5/2024	1/3/2024	2/5/2024	2/12/2024	2/12/2024	2/12/2024	2/12/2024	2/12/2024	2/20/2024	2/23/2024	2/25/2024	
Jetport Maintenance Worker	Santa Teresa Jetport	11/3/2023	11/3/2023	11/3/2023	12/6/2023	12/15/2023	12/10/2023	12/15/2023	12/19/2023	12/19/2023	12/19/2023	12/19/2023	12/24/2023	1/19/2024	1/30/2024	2/5/2024	2/5/2024	1/30/2024	2/2/2024	2/6/2024	2/9/2024	2/20/2024	
Document Technician	Assessor's	11/20/2023	11/20/2023	11/21/2023	11/21/2023	11/22/2023	11/22/2023	11/27/2023	11/29/2023	11/29/2023	12/18/2023	12/18/2023	12/12/2023	12/18/2023	1/3/2024	1/5/2024	1/5/2024	1/4/2024	1/8/2024	1/8/2024	1/18/2024	1/29/2024	2/21/1900
GIS Administrator	Community Development	11/30/2023	11/30/2023	11/30/2023	11/30/2023	11/30/2023	11/30/2023	12/1/2023	12/18/2023	12/18/2023	12/18/2023	12/18/2023	12/17/2023	12/18/2023	1/16/2024	1/17/2024	1/17/2024	1/16/2024	1/16/2024	1/18/2024	1/22/2024	1/28/2024	2/21/1900
Grounds Maintenance Worker	Facilities and Parks	12/1/2023	12/1/2023	12/4/2023	12/4/2023	12/5/2023	12/4/2023	12/5/2023	12/4/2023	12/4/2023	1/8/2024	1/8/2024	12/27/2023	1/8/2024	2/1/2024	2/13/2024	2/13/2024	2/2/2024	2/9/2024	2/16/2024	2/21/2024	2/26/2024	
Equipment/Heavy Equipment Operator	Roads	12/6/2023	12/6/2023	12/8/2023	12/7/2023	12/12/2023	12/7/2023	12/19/2023	1/18/2024	1/18/2024	2/5/2024	2/5/2024	1/21/2024	2/5/2024	2/22/2024	2/26/2024	2/26/2024	2/23/2024	2/25/2024	2/26/2024	2/28/2024	3/18/2024	
Equipment/Heavy Equipment Operator	Roads	12/6/2023	12/6/2023	12/8/2023	12/7/2023	12/12/2023	12/7/2023	12/19/2024	1/18/2024	1/18/2024	2/5/2024	2/5/2024	1/21/2024	2/5/2024	2/22/2024	2/23/2024	2/26/2024	2/23/2024	2/26/2024	2/26/2024	2/28/2024	3/18/2024	
Equipment/Heavy Equipment Operator	Roads	12/6/2023	12/6/2023	12/8/2023	12/7/2023	12/12/2023	12/7/2023	12/19/2023	1/18/2024	1/18/2024	2/5/2024	2/5/2024	1/21/2024	2/5/2024	2/23/2024	2/26/2024	2/26/2024	2/23/2024	2/27/2024	2/26/2024	2/28/2024	3/18/2024	
Equipment/Heavy Equipment Operator	Roads	12/6/2023	12/6/2023	12/8/2023	12/7/2023	12/12/2023	12/7/2023	12/19/2023	1/18/2024	1/18/2024	2/5/2024	2/5/2024	1/21/2024	2/5/2024	2/23/2024	2/23/2024	2/26/2024	2/23/2024	2/28/2024	2/26/2024	2/28/2024	3/18/2024	
IT Network Systems Administrator	Information Technology	12/27/2023	12/21/2023	12/21/2023	12/21/2023	12/21/2023	12/21/2023	12/21/2023	1/2/2024	1/9/2024	1/9/2024	1/9/2024	12/31/2023	1/9/2024	1/16/2024	1/16/2024	1/16/2024	1/16/2024	1/18/2024	1/18/2024	1/22/2024	1/28/2024	2/1/1900
Title Examiner - Supervisor	Assessor's	12/27/2023	12/27/2023	12/27/2023	12/27/2023	12/27/2023	12/27/2023	12/28/2023	3/28/2024	3/28/2024	3/7/2024	3/7/2024	1/15/2024	4/1/2024	4/8/2024	4/8/2024	4/8/2024	4/11/2024	4/18/2024	5/1/2024	5/7/2024	5/12/2024	
Sr. Network & Systems Administrator	Information Technology	12/30/2023	1/11/2024	1/12/2024	1/11/2024	1/16/2024	1/11/2024	1/16/2024	2/2/2024	2/9/2024	2/2/2024	2/9/2024	2/7/2024	2/9/2024	2/21/2024	3/28/2024	3/28/2024	03/11/240	3/14/2024	4/18/2024	4/18/2024	4/18/2024	
Election Specialist	Clerk's	1/2/2024	1/2/2024	1/5/2024	1/8/2024	1/8/2024	1/8/2024	1/8/2024					6/14/2024										
Project Manager	Facilities and Parks	1/4/2024	12/21/2023	12/21/2023	12/21/2023	12/21/2023	12/21/2022	12/21/2023	1/8/2024	1/10/2024	1/8/2024	1/10/2024	1/7/2024	1/10/2024	1/18/2024	2/8/2024	2/8/2024	1/19/2024	1/23/2024	2/8/2024	2/13/2024	2/26/2024	
Recording & Licensing Lead	Clerk's	1/12/2024	12/27/2023	1/3/2024	1/10/2024	2/6/2024	1/10/2024	2/21/2024	2/26/2024	2/26/2024	2/26/2024	2/26/2024	2/2/2024	2/26/2024	3/4/2024	3/4/2024	3/4/2024	3/4/2024	3/4/2024	3/4/2024	3/5/2024	3/10/2024	
IT Computer Technician	Information Technology	1/22/2024	1/22/2024	1/23/2024	1/23/2024	2/7/2024	2/6/2024	2/7/2024	1/30/2024	2/9/2024	1/30/2024	2/9/2024	2/14/2024	2/16/2024	3/7/2024	3/8/2024	3/8/2024	3/7/2024	3/7/2024	3/8/2024	3/11/2024	4/7/2024	
IT Computer Technician	Information Technology	1/22/2024	1/22/2024	1/23/2024	1/23/2024	2/7/2024	2/6/2024	2/7/2024	1/30/2024	2/9/2024	1/30/2024	2/9/2024	2/14/2024	2/16/2024	3/7/2024	5/15/2024	5/15/2024	5/7/2024	5/8/2024	5/21/2024	5/23/2024	5/28/2024	
Document Technician	Treasurer's	1/29/2024	1/29/2024	2/2/2024	1/29/2024	2/2/2024	1/29/2024	2/2/2024	2/9/2024	2/9/2024	2/13/2024	2/13/2024	2/11/2024	2/13/2024	2/23/2024	2/28/2024	2/29/2024	2/26/2024	2/27/2024	2/29/2024	3/4/2024	3/25/2024	
Mental Health Awareness Educator	HHS	1/30/2024	1/30/2024	2/1/2024	2/1/2024	2/1/2024	2/1/2024	2/2/2024	2/29/2024	2/29/2024	2/28/2024	2/29/2024	2/18/2024	3/1/2024	5/10/2024	5/14/2024	5/14/2024	5/13/2024	5/17/2024	5/17/2024	5/23/2024	6/3/2024	
Grounds Maintenance Worker	Facilities and Parks	2/1/2024	2/1/2024	2/6/2024	2/6/2024	2/7/2024	2/6/2024	2/7/2024	2/29/2024	2/29/2024	3/4/2024	3/4/2024	2/29/2024	3/4/2024	3/14/2024	3/18/2024	3/18/2024	3/15/2024	3/19/2024	3/20/2024	3/22/2024	4/8/2024	
Grounds Maintenance Worker	Facilities and Parks	2/1/2024	2/1/2024	2/6/2024	2/6/2024	2/7/2024	2/6/2024	2/7/2024	2/29/2024	2/29/2024	3/4/2024	3/4/2024	2/29/2024	3/4/2024	3/14/2024	3/18/2024	3/18/2024	3/15/2024	3/19/2024	3/20/2024	3/21/2024	4/18/2024	
Grounds Maintenance Worker	Facilities and Parks	2/1/2024	2/1/2024	2/6/2024	2/6/2024	2/7/2024	2/6/2024	2/7/2024	2/29/2024	2/29/2024	3/4/2024	3/4/2024	2/29/2024	3/4/2024	3/14/2024	3/26/2024	3/26/2024	3/18/2024	4/12/2024	4/15/2024	4/23/2024	5/13/2024	
HR Representative- ER-Temp Student Interns	Human Resources	2/5/2024	2/5/2024	2/5/2024	2/5/2024	2/9/2024	2/5/2024	2/12/2024	3/18/2024	3/18/2024	3/18/2002	3/18/2024	3/10/2024	3/18/2024	3/25/2024	3/28/2024	3/28/2024	3/25/2024	3/28/2024	3/28/2024	4/1/2024	4/2/2024	
HR Representative-ER-Temp Student Interns	Human Resources	2/5/2024	2/5/2024	2/5/2024	2/5/2024	2/9/2024	2/5/2024	2/12/2024	3/18/2024	3/18/2024	3/18/2002	3/18/2024	3/10/2024	3/18/2024	3/25/2024	4/3/2024	4/3/2024	3/25/2024	4/3/2024	4/3/2024	4/4/2024	4/22/2024	
HR Representative-ER-Temp Student Interns	Human Resources	2/5/2024	2/5/2024	2/5/2024	2/5/2024	2/9/2024	2/5/2024	2/12/2024	3/18/2024	3/18/2024	3/18/2002	3/18/2024	3/10/2024	3/18/2024	4/12/2024			4/15/2024					
Laborer	Community Development	2/7/2024	2/7/2024	2/7/2024	2/7/2024	3/4/2024	2/7/2024	3/4/2024	3/13/2024	3/13/2024	3/21/2024	3/21/2024	3/19/2024	3/21/2024	4/11/2024	4/17/2024	4/17/2024	4/12/2024	4/15/2024	4/22/2024	4/23/2024	4/29/2024	
Laborer	Community Development	2/7/2024	2/7/2024	2/7/2024	2/7/2024	3/4/2024	2/7/2024	3/4/2024	3/13/2024	3/13/2024	3/21/2024	3/21/2024	3/19/2024	3/21/2024	4/11/2024	4/24/2024	4/24/2024	4/12/2024	4/25/2024	5/1/2024	5/2/2024	5/6/2024	
GIS Mapper Analyst	Community Development	2/21/2024	2/21/2024	2/22/2024	2/21/2024	2/23/2024	2/21/2024	2/23/2024	3/5/2024	3/5/2024	3/13/2024	3/13/2024	3/10/2024	3/13/2024	4/1/2024	4/22/2024	4/22/2024	4/22/2024	4/29/2024	4/30/2024	5/1/2024	6/17/2024	
GIS Mapper Analyst	Community Development	2/21/2024	2/21/2024	2/22/2024	2/21/2024	2/23/2024	2/21/2024	2/23/2024	3/5/2024	3/5/2024	3/13/2024	3/13/2024	3/10/2024	3/13/2024	4/1/2024	4/8/2024	4/8/2024	4/2/2024	4/2/2024	4/8/2024	4/16/2024	5/20/2024	
Community Outreach Specialist	HHS	2/22/2024	2/22/2024	2/22/2024	2/22/2024	2/26/2024	2/23/2024	3/19/2024	3/27/2024	3/28/2024	3/27/2024	3/28/2024	3/19/2024	3/28/2024	4/11/2024	5/15/2024	5/15/2024	5/14/2024	5/14/2024	5/15/2024	6/11/2024	7/1/2024	

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting/ Discussion with Department re: JD	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Qualified Applications Released to Department	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Reference Checks Received in HR	Background Check Initiated	Background Check Completed	Compensation Calculated/ Emailed to Department	Offer Extended to Candidate	Start Date	Time to Hire Final
Administrative Assistant-SEIP/HR	Human Resources	2/23/2024	3/4/2024	3/4/2024	3/1/2024	3/7/2024	3/1/2024	3/8/2024					3/24/2024		4/12/2024	4/15/2024	4/15/2024	4/15/2024					
Constituent Services Specialist	Constituent Services	2/24/2024	2/27/2024	2/27/2024	2/27/2024	3/1/2024	3/21/2024	3/1/2024	2/28/2024	3/27/2024	3/26/2024	3/27/2024	3/24/2024	3/27/2024	4/25/2024	5/1/2024	5/1/2024	4/15/2024	4/16/2024	5/2/2024	5/6/2024	5/28/2024	
Document Technician	Clerk's	3/4/2024	3/4/2024	3/4/2024	3/12/2024	3/15/2024	3/12/2024	3/15/2024	4/5/2024	4/5/2024	4/5/2024	4/5/2024	3/31/2024	4/5/2024	4/24/2024	5/7/2024	5/7/2024	4/25/2024	5/2/2024	5/7/2024	5/9/2024	5/20/2024	
Inspector I - Electrical	Community Development	3/11/2024	3/11/2024	3/11/2024	3/11/2024	3/15/2024	3/11/2024	3/18/2024	4/4/2024	4/4/2024	5/31/2024	5/31/2024	4/30/2024	5/31/2024	7/19/2024	8/6/2024	8/7/2024	7/22/2024	7/29/2024	8/8/2024	8/8/2024	9/23/2024	
IT Service Desk Technician	Information Technology	3/14/2024	3/14/2024	3/14/2024	3/14/2024	3/19/2024	3/14/2024	3/19/2024	3/25/2024	3/25/2024	3/26/2024	4/1/2024	3/27/2024	4/4/2024	4/16/2024	4/22/2024	4/22/2024	4/17/2024	4/22/2024	4/23/2024	4/24/2024	4/29/2024	
Supervisor, Cash Operations	Treasurer's	3/22/2024	2/14/2024	2/14/2024	2/28/2024	3/19/2024	3/15/2024	3/19/2024	3/27/2024	4/1/2024	3/27/2024	3/28/2024	3/27/2024	4/1/2024	4/5/2024	4/5/2024	4/8/2024	4/8/2024	4/11/2024	4/11/2024	4/24/2024	5/6/2024	
IT Communications Systems Technician	Information Technology	3/25/2024	3/25/2024	3/27/2024	3/25/2024	3/28/2024	3/27/2024	3/28/2024	3/25/2024	3/25/2024	3/25/2024	3/25/2024	4/14/2024	4/16/2024	4/30/2024	5/8/2024	5/8/2024	5/1/2024	5/6/2024	5/14/2024	5/15/2024	5/28/2024	
Engineer Sr.	Flood Commission	4/18/2024	4/18/2024	4/19/2024	4/18/2024	4/24/2024	4/18/2024	4/25/2024	5/28/2024	5/28/2024	5/29/2024	5/29/2024	6/14/2024	6/20/2024									
Administrative Assistant	County Manager	4/24/2024	4/24/2024	4/24/2024	4/24/2024	4/25/2024	4/24/2024	4/25/2024	5/15/2024	5/15/2024	5/7/2024	5/8/2024	5/12/2024	5/15/2024	5/29/2024	6/6/2024	6/6/2024	6/4/2024	6/6/2024	6/5/2024	6/7/2024	6/10/2024	
Laborer	Community Development	4/25/2024	4/25/2024	4/26/2024	4/25/2024	4/30/2024	4/25/2024	5/3/2024	5/28/2024	5/28/2024	5/29/2024	5/29/2024	5/19/2024	5/29/2024	6/26/2024	8/12/2024	8/12/2024	7/8/2024	7/11/2024	8/13/2024	8/14/2024	9/9/2024	
Administrative Assistant	Probate	4/25/2024	4/25/2024	4/26/2024	4/25/2024	4/29/2024	4/25/2024	5/2/2024	5/29/2024	6/3/2024	6/11/2024	6/11/2024	5/19/2024	6/12/2024	8/21/2024	9/3/2024	9/5/2024	8/27/2024	8/30/2024	8/27/2024	9/12/2024	9/23/2024	
Registration Lead	Clerk's	4/26/2024	4/17/2024	4/26/2024	4/26/2024	5/10/2024	5/9/2024	5/10/2024	4/26/2024	5/31/2024	4/26/2024	5/10/2024	5/27/2024	5/31/2024	6/24/2024	6/24/2024	6/24/2024	6/24/2024	6/24/2024	6/24/2024	6/28/2024	6/30/2024	
Accountant I	Finance	4/30/2024	4/17/2024	4/17/2024	4/17/2024	5/29/2024	5/28/2024	5/29/2024	7/2/2024	7/2/2024	7/2/2024	7/2/2024	6/14/2024	7/2/2024	7/17/2024	7/22/2024	7/22/2024	7/18/2024	7/18/2024	7/23/2024	7/25/2024	8/5/2024	
County Compliance Officer	Legal	5/10/2024	5/10/2024	5/10/2024	0/10/2024	5/13/2024	5/10/2024	5/13/2024	6/13/2024	6/24/2024	6/13/2024	6/14/2024	5/31/2024	6/14/2024	7/9/2024	7/23/2024	7/23/2024	7/19/2024	7/22/2024	7/29/2024	7/30/2024	8/12/2024	
Health Promotion Specialist II	HHS	5/20/2024	5/20/2024	5/22/2024	5/31/2024	7/10/2024	6/25/2024	7/10/2024	8/2/2024	8/5/2024	8/1/2024	8/1/2024	7/25/2024	8/5/2024	8/30/2024	10/11/2024	10/11/2024	10/1/2024	10/4/2024	10/11/2024	10/15/2024	#####	
Contract Coordinator	Purchasing Department	5/28/2024	5/28/2024	5/29/2024	5/25/2024	6/3/2024	5/25/2024	6/3/2024	7/3/2024	7/3/2024	7/1/2024	7/1/2024	6/13/2024	7/8/2024	7/19/2024	8/12/2024	8/12/2024	8/13/2024	8/13/2024	8/13/2024	8/22/2024	9/8/2024	
Accountant	Treasurer's	5/31/2024	7/11/2024	7/12/2024	7/11/2024	8/9/2024	8/1/2024	8/9/2024	9/4/2024	9/4/2024	9/4/2024	9/4/2024	8/26/2024	9/4/2024	9/13/2024	9/25/2024	9/25/2024	9/23/2024	9/23/2024	9/26/2024	9/30/2024	9/30/2024	
Electrician II	Facilities and Services	6/11/2024	6/11/2024	6/11/2024		8/16/2024	7/11/2024	8/20/2024	11/12/2024	11/12/2024	11/12/2024	11/13/2024	10/5/2024	11/13/2024	11/22/2024	11/26/2024	11/26/2024	11/25/2024	12/9/2024	12/9/2024	12/16/2024	#####	
Document Technician	Clerk's	6/21/2024	6/3/2024	6/3/2024	6/3/2024	6/3/2024	6/3/2024	6/3/2024	7/8/2024	7/12/2024	7/12/2024	7/12/2024	6/24/2024	7/16/2024	7/30/2024	8/29/2024	9/5/2024	8/1/2024	8/6/2024	8/13/2024	9/17/2024	10/1/2024	
Document Technician	Clerk's	6/21/2024	6/3/2024	6/3/2024	6/3/2024	6/3/2024	6/3/2024	6/3/2024	7/8/2024	7/12/2024	7/12/2024	7/12/2024	6/24/2024	7/16/2024	7/30/2024	10/2/2024	10/8/2024	10/8/2024	10/16/2024	10/8/2024	10/18/2024	11.04.24	
Warehouse and Inventory Coordinator	Purchasing Department	6/30/2024	5/10/2024	5/10/2024	5/21/2024	7/11/2024	6/6/2024	7/12/2024	8/28/2024	9/3/2024	8/28/2024	8/29/2024	7/28/2024	9/3/2024	10/29/2024	1/9/2025	1/9/2025	12/12/2024	12/29/2024	1/10/2025	1/10/2025	1/27/2025	
Election Specialist	Clerk's	7/2/2024	7/2/2024	7/8/2024	7/8/2024	7/9/2024	7/9/2024	7/10/2024															
Environmental Codes Officer	Community Development	7/10/2024	6/24/2024	6/24/2024	7/12/2024	8/26/2024	7/26/2024	8/26/2024	10/8/2024	10/8/2024	10/8/2024	10/17/2024	8/26/2024		10/24/2024	12/3/2024	12/3/2024	11/22/2024	11/25/2024	12/3/2024	12/4/2024	12/9/2024	
Equipment Operator	Roads	7/12/2024	7/12/2024	7/16/2024	7/16/2024	8/2/2024	8/2/2024	8/2/2024	6/20/2024	6/20/2024	9/9/2024	9/10/2024	9/3/2024	9/10/2024	10/16/2024	11/6/2024	11/6/2024	10/16/2024	10/22/2024	10/22/2024	11/13/2024	12/2/2024	
Heavy Equipment Operator	Roads	7/12/2024	7/12/2024	7/16/2024	7/16/2024	8/5/2024	7/16/2024	8/5/2024	7/8/2024	7/8/2024	9/10/2024	9/10/2024	9/6/2024	10/1/2024	10/16/2024	11/7/2024	11/7/2024	10/16/2024	10/22/2024	11/4/2024	11/7/2024	12/2/2024	
IT Application Training & Support Specialist	Information Technology	7/12/2024	7/2/2024	7/2/2024	7/2/2024	8/5/2024	7/31/2024	8/21/2024	8/30/2024	9/3/2024	8/26/2024	9/6/2024	10/7/2024	9/9/2024	11/1/2024	11/6/2024	11/6/2024	11/4/2024	11/14/2024	11/14/2024	11/18/2024	12/9/2024	
Document Technician	Clerk's	7/15/2024	7/15/2024	7/16/2024	7/16/2024	7/16/2024	7/22/2024	7/22/2024	8/6/2024	8/6/2024	8/6/2024	8/9/2024	8/6/2024	8/9/2024	8/29/2024	8/30/2024	8/30/2024	8/30/2024	8/30/2024	8/30/2024	9/25/2024	9/29/2024	
Document Technician	Clerk's	7/15/2024	7/15/2024	7/16/2024	7/16/2024	07/16/2024	7/22/2024	7/22/2024	8/6/2024	8/6/2024	8/6/2024	8/9/2024	8/6/2024	8/9/2024	8/29/2024	8/30/2024	8/30/2024	8/30/2024	8/30/2024	8/30/2024	9/26/2024	9/29/2024	
Sr. Network & Systems Administrator	Information Technology	7/15/2024	7/15/2024	7/15/2024	7/15/2024	8/13/2024	8/1/2024	8/14/2024	8/14/2024	8/14/2024	9/14/2024	10/2/2024	12/10/2024	10/2/2024	12/19/2024	12/19/2024	12/19/2024	12/23/2024	12/23/2024	12/23/2024	1/7/2025	1/7/2025	
Senior Engineer	Flood Commission	7/16/2024	7/16/2024	7/16/2024	7/16/2024	7/22/2024	7/16/2024	7/23/2024	10/1/2024	10/1/2024	10/1/2024	10/1/2024	8/25/2024	10/1/2024									
IT Network Engineer	Information Technology	7/22/2024	7/22/2024	8/1/2024	8/1/2024	8/5/2024	7/31/2024	8/7/2024	8/26/2024	8/27/2024	8/27/2024	8/27/2024	10/7/2024	8/27/2024	10/31/2024	11/13/2024	11/13/2024	11/1/2024	11/4/2024	11/13/2024	11/18/2024	#####	
Senior Appraiser	Assessor's	7/23/2024	6/5/2024	7/23/2024	6/5/2024	7/26/2024	7/26/2024	7/26/2024	10/2/2024	10/2/2024	10/2/2024	10/2/2024	8/28/2024	11/13/2024	11/15/2024	11/15/2024	11/15/2024	11/20/2024	11/20/2024	11/19/2024	11/21/2024	3/9/2025	
Budget Analyst	Finance	8/9/2024	8/13/2024	8/13/2024	8/20/2024	8/27/2024	8/27/2024	8/27/2024	10/8/2024	10/21/2024	10/8/2024	10/21/2024	9/26/2024	10/21/2024	11/5/2024	11/5/2024	11/5/2024	11/5/2024	11/5/2024	11/5/2024	11/7/2024	12/1/2024	

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting/ Discussion with Department re: JD	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Qualified Applications Released to Department	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Reference Checks Received in HR	Background Check Initiated	Background Check Completed	Compensation Calculated/ Emailed to Department	Offer Extended to Candidate	Start Date	Time to Hire Final
Operations & Maintenance Coordinator	Flood Commission	8/14/2024	8/14/2024	8/14/2024	8/14/2024	8/28/2024	8/14/2024	8/29/2024	9/19/2024	9/26/2024	9/19/2024	9/26/2024	9/20/2024	10/3/2024	10/17/2024	10/17/2024	10/17/2024	10/17/2024	10/17/2024	10/18/2024	10/29/2024	11/3/2024	
Public Safety Communications Coordinator	Public Information	8/16/2024	8/16/2024	8/22/2024	7/25/2024	8/21/2024	8/13/2024	8/21/2024	9/12/2024	9/19/2024	9/17/2024	9/18/2024	9/12/2024	9/20/2024	10/1/2024	10/23/2024	10/28/2024	10/23/2024	10/25/2024	11/13/2025	11/14/2025	2/2/2024	
Communications Systems Tech	Information Technology	8/20/2024	8/20/2024	8/28/2024	8/28/2024	8/28/2024	8/28/2024	8/28/2024	9/24/2024	9/24/2024	9/24/2024	9/24/2024	11/5/2024	9/24/2024	10/29/2024	11/6/2024	11/6/2024	10/29/2024	11/4/2024	11/12/2024	11/18/2024	12/9/2024	
Administrative Assistant	PIO	9/6/2024	11/14/2024	11/14/2024	11/14/2024	11/21/2024	11/14/2024	11/26/2024	12/27/2024	12/27/2024	12/27/2024	12/27/2024	12/16/2024	12/27/2024	1/6/2025	1/10/2025	1/10/2025	1/7/2025	1/8/2025	1/13/2025	1/24/2025	2/10/2025	
Project Manager	Facilities and Services	9/10/2024	9/10/2024	9/11/2024	9/11/2024	9/12/2024	9/11/2024	9/13/2024	9/18/2024	9/18/2024	9/18/2024	10/7/2024	9/30/2024	10/7/2024	10/24/2024	10/31/2024	11/1/2024	10/25/2024	10/29/2024	11/1/2024	11/18/2024	#####	
Project Manager	Facilities and Services	9/10/2024	9/10/2024	9/11/2024	9/11/2024	9/12/2024	9/11/2024	9/13/2024	9/18/2024	10/7/2024	9/18/2024	10/7/2024	9/30/2024	10/7/2024	10/24/2024	11/4/2024	11/6/2024	10/25/2024	10/29/2024	11/7/2024	11/15/2024	2/10/2025	
IT Cybersecurity Administrator	Information Technology	9/19/2024	9/19/2024	9/26/2024	9/26/2024	9/30/2024	9/9/2024	10/2/2024	10/31/2024	10/31/2024	10/29/2024	11/4/2024	11/12/2024	11/4/2024	11/22/2024	12/2/2024	12/22/2024	11/25/2024	12/4/2024	12/5/2024	12/10/2024	1/6/2025	
Secretary	Facilities & Services	9/26/2024	9/16/2024	10/18/2024	9/9/2024	10/18/2024	9/11/2024	10/18/2024	12/14/2024	12/19/2024	12/14/2024	12/19/2024	11/11/2024	12/20/2024	1/31/2025	2/10/2025	2/10/2025	2/3/2025	2/7/2025	2/11/2025	2/13/2025	2/18/2025	
Court Compliance Secretary	HHS	9/27/2024	9/27/2024	11/14/2024	11/1/2024	11/14/2024	11/1/2024	11/14/2024	12/2/2024	12/2/2024	12/3/2024	12/3/2024	11/29/2024	12/6/2024	1/17/2025	1/29/2025	1/29/2025	1/21/2025	1/27/2025	1/30/2025	1/31/2025	2/3/2025	
Computer Technician	Information Technology	10/7/2024	10/7/2024	10/7/2024	10/24/2024	11/6/2024	10/23/2024	11/7/2024	12/13/2024	12/17/2024	12/4/2024	12/4/2024	11/23/2024	12/17/2024	12/23/2024	1/3/2025	1/3/2025	12/23/2024	1/6/2025	2/26/2025	2/28/2025	3/17/2025	
Animal Control Officer	Animal Control	10/9/2024	10/9/2024	10/16/2024	10/16/2024	10/18/2024	10/16/2024	10/18/2024	11/26/2024	11/26/2024	12/9/2024	12/11/2024	11/18/2024	12/11/2024	12/18/2024	12/19/2024	12/23/2024	12/19/2024	12/30/2024	1/13/2024	1/22/2025	1/27/2025	
Live Evidence Technician	Animal Control	10/9/2024	10/9/2024	10/16/2024	10/16/2024	10/17/2024	10/16/2024	10/18/2024	2/18/2025	2/18/2025	2/27/2025	2/27/2025	1/8/2025	2/27/2025	3/5/2025	3/14/2025	3/14/2025	3/6/2025	3/19/2025	3/19/2025	3/19/2025	3/31/2025	
Animal Control Officer	Animal Control	10/9/2024	10/9/2024	10/16/2024	10/16/2024	10/18/2024	10/16/2024	10/18/2024	11/26/2024	11/26/2024	12/9/2024	12/11/2024	11/18/2024	12/11/2024	12/18/2024	1/2/2025	1/2/2025	12/19/2024	12/30/2024	1/13/2025	1/17/2025	1/27/2025	
Document Technician	Treasurer's	10/11/2024	11/7/2024	11/8/2024	11/8/2024	12/9/2024	11/8/2024	12/9/2024	12/17/2024	12/17/2024	12/30/2024	1/3/2025	12/24/2024	1/13/2025	1/23/2025	1/28/2025	1/28/2025	1/23/2025	1/23/2025	1/29/2025	1/30/2025	3/30/2025	
Heavy Equipment Mechanic	Fleet	10/15/2024	10/16/2024	10/18/2024	10/1/2024	10/17/2024	11/25/2024	10/18/2024	11/25/2024	11/25/2024	11/25/2024	11/25/2024	11/12/2024	128/04/2024	12/18/2024	12/30/2024	12/30/2024	12/19/2024	1/7/2025	1/2/2025	1/24/2025	2/18/2025	
Community Health Worker	HHS	10/18/2024	10/18/2024	10/31/2024	10/31/2024	11/8/2024	10/31/2024	11/8/2024	12/10/2024	12/10/2024	12/10/2024	12/11/2024	11/25/2024	12/11/2024	1/16/2025	2/4/2025	2/4/2025	1/16/2025	1/16/2025	2/4/2025	2/10/2025	2/16/2025	
Community Health Worker	HHS	10/18/2024	10/18/2024	10/31/2024	10/31/2024	11/8/2024	10/31/2024	11/8/2024	12/10/2024	12/10/2024	12/10/2024	12/11/2024	11/25/2024	12/11/2024	1/16/2024	1/31/2025	1/31/2025	1/17/2025	1/24/2025	2/4/2025	2/7/2025	2/18/2025	
Community Health Worker	HHS	10/18/2024	10/18/2024	10/31/2024	10/31/2024	11/8/2024	10/31/2024	11/8/2024	12/10/2024	12/10/2024	12/10/2024	12/11/2024	11/25/2024	12/11/2024	1/16/2025	1/27/2025	1/27/2025	1/17/2025	1/21/2025	2/7/2025	2/11/2025	3/10/2025	
Grounds Maintenance Worker	Facilities and Services	10/18/2024	10/18/2024	10/22/2024	10/23/2024	10/25/2024	10/23/2024	10/25/2024	12/3/2024	12/3/2024	12/17/2024	12/17/2024	11/18/2024	12/17/2024	1/17/2025	1/22/2025	1/22/2025	1/21/2025	1/27/2025	1/27/2025	1/31/2025	2/18/2025	
Assistant Director	Facilities and Services	10/23/2024	10/23/2024	10/24/2024	10/23/2024	10/25/2024	10/23/2024	10/25/2024	12/17/2024	12/17/2024													
Heavy Equipment Operator	Roads	10/30/2024	10/30/2024	11/1/2024	10/30/2024	11/5/2024	10/30/2024	11/8/2024	12/9/2024	12/9/2024	12/9/2024	12/9/2024	12/9/2024	12/9/2024	1/10/2025	2/3/2025	2/3/2025	1/27/2025	2/3/2025	2/14/2025	2/25/2025	3/10/2025	
Heavy Equipment Operator	Roads	10/30/2024	10/30/2024	11/1/2024	10/30/2024	11/5/2024	10/30/2024	11/8/2024	12/9/2024	12/9/2024	12/9/2024	12/9/2024	12/9/2024	12/9/2024	1/10/2025	1/31/2025	2/3/2025	1/27/2025	2/4/2025	2/14/2025	2/25/2025	3/17/2025	
Accounting Specialist	Finance	11/30/2024	11/6/2024	11/6/2024	11/6/2024	12/4/2024	12/3/2024	12/5/2024	1/17/2025	1/17/2025	1/17/2025	1/21/2025	12/27/2024	1/21/2025	1/24/2025	2/5/2025	2/11/2025	1/29/2025	1/31/2025	2/11/2025	2/12/2025	2/18/2025	
Accounting Specialist	Finance	11/30/2024	11/6/2024	11/6/2024	11/6/2024	12/4/2024	12/3/2024	12/5/2024	1/17/2025	1/17/2025	1/17/2025	1/21/2025	12/27/2024	1/21/2025	1/24/2025	4/14/2025	4/14/2025	4/14/2025	4/15/2025	4/16/2025	4/17/2025	4/28/2025	
Document Technician	Treasurer's	12/2/2024	12/2/2024	12/2/2024	12/02/24	12/3/2024	12/2/2024	12/3/2024	12/3/2024	12/3/2024	12/20/2024	1/3/2025	12/12/2024	12/26/2025	1/24/2025	1/31/2025	1/31/2025	1/27/2025	1/27/2025	1/31/2025	2/3/2025	2/16/2025	
Document Technician	Treasurer's	12/2/2024	12/2/2024	12/2/2024	12/2/2024	12/3/2024	12/2/2024	12/3/2024	12/3/2024	12/3/2024	12/20/2024	1/3/2025	12/12/2024	12/26/2024	1/24/2025	2/18/2025	2/18/2025	2/12/2025	2/13/2025	2/19/2025	2/24/2025	3/31/2025	
Secretary	Community Development	12/2/2024	12/2/2024	12/12/2024	12/2/2024	12/12/2024	12/2/2024	12/16/2024	1/30/2025	2/5/2025	1/30/2025	2/5/2025	1/7/2025	2/5/2025	2/21/2025	2/24/2025	2/24/2025	2/24/2025	2/27/2025	2/27/2025	3/4/2025	3/24/2025	
Accountant IV	Finance	12/4/2024	12/4/2024	12/12/2024	12/4/2024	12/12/2024	12/4/2024	12/16/2024	1/6/2025	1/23/2025	1/6/2025	1/8/2025	12/24/2024	1/23/2025	1/31/2025	2/4/2025	2/4/2025	2/3/2025	2/4/2025	2/12/2025	2/12/2025	2/16/2025	
Title Examiner	Assessor's	12/9/2024	12/9/2024	12/10/2024	12/11/2024	12/20/2024	12/11/2024	12/20/2024	2/26/2025	3/11/2025	1/18/2025	1/21/2025	1/4/2025	3/11/2025	5/14/2025	5/19/2025	5/19/2025	5/20/2025				N/A	
Title Examiner	Assessor's	12/9/2024	12/9/2024	12/10/2024	12/11/2024	12/20/2024	12/11/2024	12/20/2024	2/26/2025	3/11/2025	1/18/2025	1/21/2025	1/4/2025	3/11/2025	5/14/2025	5/21/2025	5/22/2025	5/20/2025	6/4/2025	6/26/2025	6/30/2025	7/7/2025	
Title Examiner	Assessor's	12/9/2024	12/9/2024	12/10/2024	12/11/2024	12/20/2024	12/11/2024	12/20/2024	2/26/2025	3/11/2025	1/18/2025	1/21/2025	1/4/2025	3/11/2025	5/14/2025	5/19/2025	5/19/2025	5/20/2025				N/A	
Appraiser	Assessor's	12/9/2024	12/9/2024	12/10/2024	12/11/2024	1/28/2025	1/22/2025	1/28/2025	4/2/2025	4/17/2025	4/2/2025	4/2/2025	2/12/2025	4/17/2025	5/20/2025	5/21/2025	5/21/2025	5/20/2025	5/21/2025	6/13/2025	6/13/2025	6/15/2025	
Appraiser	Assessor's	12/9/2024	12/9/2024	12/10/2024	12/11/2024	1/28/2025	1/22/2025	1/28/2025	4/2/2025	4/17/2025	4/2/2025	4/2/2025	2/12/2025	4/17/2025	5/20/2025	5/21/2025	5/21/2025	5/20/2025	5/28/2025	5/30/2025	6/5/2025	6/8/2025	

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting/ Discussion with Department re: JD	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Qualified Applications Released to Department	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Reference Checks Received in HR	Background Check Initiated	Background Check Completed	Compensation Calculated/ Emailed to Department	Offer Extended to Candidate	Start Date	Time to Hire Final
Appraiser	Assessor's	12/9/2024	12/9/2024	12/10/2024	12/11/2024	1/28/2025	1/22/2025	1/28/2025	4/2/2025	4/17/2025	4/2/2025	4/2/2025	2/12/2025	4/17/2025	5/20/2025	5/22/2025	5/22/2025	5/20/2025	5/28/2025	5/30/2025	6/16/2025		
Assistant County Manager	County Manager	12/13/2024	12/13/2024	12/13/2024	12/13/2024	12/13/2024	12/13/2024	12/13/2024	1/9/2025	1/10/2025	12/23/2024	12/23/2024	12/21/2024	12/23/2024	1/16/2025	1/17/2025	1/17/2025	1/17/2025	1/17/2025	1/27/2025	1/28/2025	1/26/2025	
Economic Development Director	Community Development	12/13/2024	12/13/2024	12/13/2024	12/13/2024	12/13/2024	12/13/2024	12/13/2024	1/16/2025	1/16/2025	2/20/2025	2/20/2025	12/31/2024	2/20/2025	2/24/2025			2/24/2025					
Administrative Assistant	Human Resources	12/16/2024	12/16/2024	12/16/2024	12/16/2024	12/17/2024	12/16/2024	12/17/2024			2/5/2025	2/5/2025	12/28/2024	2/5/2025	2/6/2025	2/10/2025	2/10/2025	2/10/2025	2/10/2025	2/10/2025	2/12/2025	2/16/2025	
Planner/Designer	Community Development	12/16/2024	12/17/2024	12/18/2024	12/18/2024	12/23/2024	12/12/2024	12/23/2024	1/28/2025	1/29/2025	1/27/2025	2/7/2025	2/1/2025	2/10/2025	3/21/2025	8/19/2025	8/19/2025	3/24/2025	3/26/2025	8/19/2025	8/19/2025	8/19/2025	
Health Promotion Coordinator	HHS	12/20/2024	12/20/2024	12/20/2024	12/20/2024	12/23/2024	12/17/2024	12/23/2024	2/4/2025	2/10/2025	2/4/2025	2/10/2025	1/22/2025	2/10/2025	3/19/2025	4/25/2025	4/25/2025	4/21/2025	4/21/2025	4/29/2025	5/1/2025	5/18/2025	
Accounting Manger	Treasurer's	12/26/2024	12/26/2024	12/26/2024	12/26/2024	12/30/2024	12/26/2024	12/30/2024	2/11/2025	2/13/2025	2/11/2025	2/13/2025	1/21/2025	2/13/2025	2/28/2025	3/4/2025	3/4/2025	2/28/2025	3/4/2025	3/4/2025	3/7/2025	4/7/2025	
HR Assistant	Human Resources	12/31/2024	12/31/2024	12/31/2024	12/31/2024	4/4/2025	4/4/2025	4/4/2025	4/4/2025	4/4/2025	4/4/2025	4/4/2025	4/13/2025	4/13/2025	5/28/2025	6/6/2025	6/6/2025	6/3/2025	6/6/2025	6/5/2025	6/16/2025	6/23/2025	
Laborer	Community Development	1/9/2025	1/9/2025	1/13/2025	1/14/2025	1/16/2025	1/14/2025	1/17/2025	2/21/2025	2/21/2025	2/21/2025	2/25/2025	2/10/2025	2/25/2025	3/14/2025	4/8/2025	4/30/2025	3/17/2025	3/20/2025	4/29/2025	5/5/2025	5/12/2025	
Animal Control Officer	Animal Control	1/10/2025	1/10/2025	1/29/2025	1/29/2025	1/30/2025	1/29/2025	1/31/2025	3/5/2025	3/5/2025	3/17/2025	3/18/2025	3/3/2025	3/18/2025	3/25/2025	4/1/2025	3/31/2025	3/31/2025	4/1/2025	4/2/2025	4/4/2025	4/21/2025	
Senior HR Administrator	Human Resources	1/13/2025	1/13/2025	1/13/2025	1/18/2025	1/20/2025	1/18/2025	1/20/2025	2/11/2025	2/11/2025	2/11/2025	2/11/2025	2/4/2025	2/5/2025	2/13/2025	2/13/2025	2/13/2025	2/13/2025	2/13/2025	2/13/2025	2/13/2025	2/16/2025	
Grants Administrator	Facilities and Services	1/14/2025	1/14/2025	1/17/2025	1/17/2025	1/23/2025	1/17/2025	1/23/2025	2/20/2025	2/20/2025	2/18/2025	2/20/2025	2/8/2025	2/20/2025	2/26/2025	3/3/2025	3/3/2025	2/27/2025	3/3/2025	3/6/2025	3/10/2025	3/17/2025	
Doc Tech - Personal Property	Assessor's	1/15/2025	1/15/2025	1/15/2025	1/17/2025	1/28/2025	1/17/2025	1/28/2025	2/26/2025	2/26/2025	5/1/2025	5/2/2025	2/13/2025	5/2/2025	7/1/2025	7/18/2025	7/18/2025	7/9/2025	7/10/2025	7/23/2025	7/20/2025	8/4/2025	
Inspector I	Community Development	1/24/2025	1/24/2025	1/24/2025	1/27/2025	2/13/2025	1/27/2025	2/13/2025	3/24/2025	3/24/2025	3/24/2025	3/24/2025	2/28/2025	3/26/2025	4/17/2025	5/13/2025	5/13/2025	4/17/2025	4/30/2025	5/5/2025	5/5/2025	5/5/2025	
Training Coordinator	Human Resources	1/27/2025	1/27/2025	1/27/2025	1/29/2025	2/3/2025	1/29/2025	2/3/2025	2/25/2025	2/25/2025	2/25/2025	2/25/2025	2/19/2025	2/25/2025	3/13/2025	3/14/2025	3/14/2025	3/14/2025	3/18/2025	3/14/2025	3/19/2025	4/7/2025	
Accounting Specialist	Detention Center	1/31/2025	2/3/2025	2/3/2025	2/3/2025	2/3/2025	2/3/2025	1/27/2025	3/12/2025	3/14/2025	3/12/2025	3/14/2025	2/3/2025	2/3/2025	3/19/2025	3/19/2025	3/19/2025	3/19/2025	3/19/2025	3/19/2025	3/19/2025	4/13/2025	
County Surveyor	Engineering & Roads	2/3/2025	2/3/2025	2/11/2025	2/11/2025	2/12/2025	2/11/2025	2/12/2025	2/14/2025				3/14/2025		3/19/2025	3/21/2025	3/21/2025			3/19/2025	4/1/2025	3/23/2025	
Manager	Office of Emergency Management	2/3/2025	2/3/2025	2/6/2025	2/6/2025	3/3/2025	2/26/2025	3/3/2025					3/11/2025	3/11/2025		3/19/2025	3/19/2025			3/11/2025	3/19/2025	3/23/2025	
Executive Assistant to Commissioner Dist1	County Manager	2/7/2025	2/7/2025	2/10/2025	2/7/2025	2/11/2025	2/4/2025	2/11/2025					2/19/2025	2/28/2025	2/28/2025	3/19/2025	3/19/2025	3/3/2025	3/6/2025	3/6/2025	3/19/2025	3/31/2025	
Emergency Management Coordinator	Office of Emergency Management	2/10/2025	2/10/2025	3/18/2025	3/10/2025	3/14/2025	3/13/2025	038/18/2025	4/7/2025	4/7/2025	4/7/2025	4/9/2025	4/2/2025	4/9/2025	4/21/2025	4/29/2025	5/2/2025	4/22/2025		5/16/2025	5/21/2025	6/9/2025	
Mapping Technician	Clerk's	2/13/2025	1/30/2025	2/3/2025	2/3/2025	2/4/2025	2/3/2025	2/4/2025	3/3/2025	3/3/2025	3/3/2025	3/3/2025	2/20/2025	3/4/2025	3/20/2025	3/20/2025	3/20/2025			3/20/2025	3/21/2025	3/23/2025	
Senior Inspector/ Plans Examiner	Community Development	2/14/2025	2/14/2025	2/18/2025	2/14/2025	2/19/2025	2/14/2025	2/19/2025	4/9/2025	4/22/2025	4/28/2025	4/29/2025	3/13/2025	4/29/2025	5/2/2025	5/6/2025	5/6/2025	5/5/2025	5/5/2025	5/8/2025	5/13/2025	5/18/2025	
Building Attendant	Facilities and Services	2/14/2025	2/14/2025	2/19/2025	2/19/2025	2/21/2025	2/19/2025	2/21/2025	3/13/2025	3/13/2025	3/21/2025	3/24/2025	3/10/2025	3/24/2025	4/23/2025	5/2/2025	5/2/2025	4/24/2025	4/29/2025	5/6/2025	5/13/2025	5/19/2025	
Building Attendant	Facilities and Services	2/14/2025	2/14/2025	2/19/2025	2/19/2025	2/21/2025	2/19/2025	2/21/2025	3/13/2025	3/13/2025	3/21/2025	3/24/2025	3/10/2025	3/24/2025	4/23/2025	5/6/2025	5/14/2025	4/24/2025	4/29/2025	5/21/2025	5/23/2025	5/27/2025	
Document Technician	Clerk's	2/15/2025	2/3/2025	2/3/2025	2/3/2025	2/4/2025	2/3/2025	2/4/2025	3/13/2025	3/13/2025	3/13/2025	3/14/2025	2/19/2025	3/14/2025	4/8/2025	6/5/2025	6/9/2025	5/17/2025	5/21/2025	5/21/2025	6/30/2025	7/14/2025	
Document Technician	Clerk's	2/15/2025	2/3/2025	2/3/2025	2/3/2025	2/4/2025	2/3/2025	2/4/2025	3/13/2025	3/13/2025	3/13/2025	3/14/2025	2/19/2025	3/14/2025	4/5/2025	4/25/2025	4/25/2025	4/9/2025	4/14/2025	4/11/2025	4/30/2025	5/5/2025	
County Attorney	Legal	2/28/2025	2/28/2025	2/28/2025	2/28/2025	3/6/2025	2/28/2025	3/6/2025	3/25/2025	3/25/2025	3/25/2025	3/25/2025	3/15/2025	3/25/2025							3/17/2025	3/17/2025	
Equipment Operator	Roads	2/28/2025	2/28/2025	3/5/2025	3/6/2025	3/12/2025	3/6/2025	3/12/2025	4/9/2025	4/9/2025	4/8/2025	4/9/2025	3/27/2025	4/9/2025	4/22/2025	7/2/2025	7/2/2025	7/1/2025	7/11/2025	7/14/2025	7/28/2025	8/11/2025	
Equipment Operator	Roads	2/28/2025	2/28/2025	3/5/2025	3/6/2025	3/12/2025	3/6/2025	3/12/2025	4/9/2025	4/9/2025	4/8/2025	4/9/2025	3/27/2025	4/9/2025	4/22/2025	7/2/2025	7/2/2025	7/1/2025	7/11/2025	7/14/2025	7/28/2025		
Community Health Worker	HHS	3/3/2025	3/3/2025	3/4/2025	3/4/2025	3/7/2025	3/4/2025	3/7/2025	4/9/2025	4/9/2025	4/9/2025	4/9/2025	3/29/2025	4/9/2025	5/1/2025	5/7/2025	5/7/2025	5/1/2025	5/1/2025	5/16/2025	5/20/2025	5/25/2025	
Economic Development Director	Economic Development	3/6/2025	3/6/2025	3/7/2025	3/6/2025	3/14/2025	3/6/2025	3/17/2025	5/30/2025	5/30/2025	6/16/2025	6/16/2025	6/6/2025	5/27/2025	7/23/2025	8/6/2025	8/6/2025	8/6/2025	8/6/2025			8/10/2025	
Accountant III	Finance	3/11/2025	3/11/2025	4/2/2025	3/11/2025	4/4/2025	4/1/2025	4/4/2025	4/4/2025	4/4/2025	4/16/2025	4/17/2025	4/28/2025	4/17/2025	05/08/2025	5/29/2025	5/29/2025	5/9/2025	5/12/2025	5/29/2025	5/30/2025	6/9/2025	
Accountant III	Finance	3/11/2025	3/11/2025	4/2/2025	3/11/2025	4/4/2025	4/1/2025	4/4/2025	4/4/2025	4/4/2025	4/16/2025	4/17/2025	4/28/2025	4/17/2025	5/8/2025	5/16/2025	5/16/2025	5/9/2025	5/9/2025	5/16/2025	5/21/2025	5/25/2025	

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting/ Discussion with Department re: JD	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Qualified Applications Released to Department	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Reference Checks Received in HR	Background Check Initiated	Backgroun d Check Completed	Compensation Calculated/ Emailed to Department	Offer Extended to Candidate	Start Date	Time to Hire Final
Foreman	Roads	3/14/2025	3/14/2025	3/14/2025	3/17/2025	4/4/2025	4/2/2025	4/4/2025	4/24/2025	4/24/2025	4/21/2025	4/24/2025	4/19/2025	4/24/2025	5/8/2025	5/15/2025	5/15/2025			5/15/2025	5/20/2025	6/1/2025	
Executive Administrative Assistant	County Manager	3/18/2025	3/18/2025	3/18/2025	3/18/2025	4/4/2025	4/1/2025	4/4/2025	4/16/2025	4/16/2025	4/21/2025	4/21/2025	4/13/2025	4/21/2025	5/14/2025	5/20/2025	5/20/2025	5/15/2025	5/15/2025	5/15/2025	5/23/2025	5/18/2025	
Deputy Manager	Office of Emergency Management	3/19/2025	3/19/2025	3/19/2025	4/17/2025	5/19/2025	5/15/2025	5/19/2025	5/16/2025	5/16/2025	5/16/2025	5/16/2025	6/3/2025	6/6/2025	6/25/2025	7/1/2025	7/1/2025			7/2/2025	7/8/2025	7/13/2025	
Animal Control Officer	Animal Control	4/2/2025	4/2/2025	4/2/2025	4/22/2025	4/28/2025	4/22/2025	4/28/2025	6/11/2025	7/3/2025	6/11/2025	7/3/2025	5/27/2025	7/3/2025	7/18/2025	9/24/2025	9/24/2025	10/8/2025		10/8/2025	10/30/2025	#####	
Animal Control Officer	Animal Control	4/2/2025	4/2/2025	4/2/2025	4/22/2025	4/28/2025	4/22/2025	4/28/2025	6/11/2025	7/3/2025	6/11/2025	7/3/2025	5/27/2025	7/3/2025	7/18/2025	9/23/2025	9/24/2025	9/28/2025	9/29/2025	9/28/2025	10/20/2025	#####	
Animal Control Officer	Animal Control	4/2/2025	4/2/2025	4/2/2025	4/22/2025	4/28/2025	4/22/2025	4/28/2025	6/11/2025	7/3/2025	6/11/2025	7/3/2025	5/27/2025	7/3/2025	7/18/2025	8/4/2025	7/28/2025	7/18/2025	7/22/2025	7/29/2025	8/28/2025	9/2/2025	
GIS Mapping Specialist	Assessor's	4/8/2025	4/8/2025	4/9/2025	8/5/2025	8/12/2025	8/5/2025	8/13/2025	9/2/2025	9/2/2025	9/2/2025	9/5/2025	8/29/2025	9/5/2025	9/12/2025	9/17/2025	9/17/2025	9/12/2025	9/21/2025	9/21/2025	10/20/2025	12/1/2025	
Supervisor	Vector Control	4/15/2025	4/15/2025	4/16/2025	4/15/2025	4/21/2025	4/1/2025	4/21/2025	5/14/2025	5/15/2025	5/14/2025	5/15/2025	5/7/2025	5/15/2025	6/23/2025	6/30/2025	6/30/2025	6/24/2025	6/30/2025	7/1/2025	7/3/2025	7/13/2025	
Grounds Maintenance Worker	Facilities and Services	4/15/2025	4/15/2025	4/22/2025	4/22/2025	4/23/2025	4/22/2025	4/23/2025	5/22/2025	5/22/2025	5/20/2025	5/21/2025	5/8/2025	5/30/2025	7/23/2025	7/23/2025	7/23/2025	7/23/2025	7/28/2025	8/4/2025	8/6/2025	8/11/2025	
Grounds Maintenance Worker	Facilities and Services	4/15/2025	6/5/2025	6/6/2025	4/22/2025	4/23/2025	4/22/2025	6/6/2025	5/22/2025	5/22/2025	5/20/2025	5/21/2025	6/21/2025	7/7/2025	7/23/2025	7/23/2025	7/23/2025	7/23/2025	7/25/2025	7/28/2025	7/29/2025	8/11/2025	
Plans Examiner - Plumbing/Mechanical	Community Development	4/16/2025	4/16/2025	4/16/2025	6/24/2025	8/1/2025	7/25/2025	8/1/2025	8/26/2025	9/10/2025	8/25/2025	8/25/2025	8/16/2025	9/10/2025	10/29/2025	10/30/2025	10/30/2025	10/30/2025	10/30/2025	11/19/2025	12/2/2025	#####	
Administrative Assistant	Office of Emergency Management	4/23/2025	4/23/2025	4/23/2025	4/25/2025	5/21/2025	5/15/2025	5/21/2025	5/23/2025	5/23/2025	5/23/2025	6/4/2025	5/29/2025	6/4/2025	6/18/2025	6/30/2025	6/30/2025	6/20/2025	6/25/2025	7/3/2025			
Deputy County Attorney	Legal	5/1/2025	5/1/2025	5/2/2025	5/15/2025	5/22/2025	5/20/2025	5/22/2025	7/14/2025	7/14/2025	7/10/2025	7/16/2025	8/7/2025	7/16/2025	7/24/2025	8/4/2025	8/4/2025	7/31/2025	8/4/2025	8/4/2025	8/7/2025	9/8/2025	
Fleet Supervisor	Fleet	5/1/2025	5/1/2025	5/2/2025	5/21/2025	5/23/2025	5/21/2025	5/23/2025	6/30/2025	6/30/2025	6/30/2025	7/1/2025	6/16/2025	7/1/2025	8/7/2025	8/13/2025	8/13/2025	8/7/2025	8/11/2025	8/13/2025	8/20/2025	9/8/2025	
Fleet Supervisor	Fleet	5/1/2025	5/1/2025	5/2/2025	5/21/2025	5/23/2025	5/21/2025	5/23/2025	6/30/2025	6/30/2025	6/30/2025	7/1/2025	6/16/2025	7/1/2025	8/7/2025	9/2/2025	9/2/2025	9/3/2025	9/11/2025		9/25/2025	1/12/2026	
Communications Systems Tech	Information Technology	5/2/2025	5/2/2025	5/5/2025	5/2/2025	6/5/2025	6/3/2025	6/5/2025	6/18/2025	6/18/2025	6/18/2025	6/18/2025	6/14/2025	6/18/2025	7/18/2025	7/18/2025	7/18/2025	7/18/2025	7/18/2025	7/18/2025	7/28/2025	7/27/2025	
Environmental Codes Officer	Community Development	5/7/2025	5/13/2025	5/13/2025	5/13/2025	5/15/2025	5/13/2025	5/15/2025	6/17/2025	8/5/2025	6/17/2025	8/5/2025	5/30/2025	8/5/2025	8/13/2025	8/21/2025	8/21/2025	8/21/2025	8/25/2025	8/26/2025	9/5/2025	9/8/2025	
Environmental Codes Officer	Community Development	5/7/2025	5/13/2025	5/13/2025	5/13/2025	5/15/2025	5/13/2025	5/15/2025	6/17/2025	8/5/2025	6/17/2025	8/5/2025	5/30/2025	8/5/2025	8/13/2025	8/25/2025	8/25/2025	8/21/2025	8/22/2025	8/27/2025	9/2/2025	9/15/2025	
Environmental Codes Officer	Community Development	5/7/2025	5/13/2025	5/13/2025	5/13/2025	5/15/2025	5/13/2025	5/15/2025	6/17/2025	8/5/2025	6/17/2025	8/5/2025	5/30/2025	8/5/2025	8/13/2025	8/26/2025	8/26/2025	8/21/2025	8/29/2025	8/29/2025	9/5/2025	9/22/2025	
Accountant I	Finance	5/14/2025	4/30/2025	5/2/2025	5/2/2025	5/7/2025	5/2/2025	5/7/2025	5/16/2025	5/16/2025	6/17/2025	6/17/2025	6/6/2025	6/17/2025	6/27/2025	7/11/2025	7/11/2025	7/11/2025	7/14/2025	7/15/2025	7/16/2025	7/21/2025	
Accountant I	Finance	5/14/2025	4/30/2025	5/2/2025	5/2/2025	5/7/2025	5/2/2025	5/7/2025	5/16/2025	5/16/2025	6/17/2025	6/17/2025	6/6/2025	6/17/2025	6/27/2025	7/14/2025	7/14/2025	7/14/2025	7/16/2025	7/16/2025	7/17/2025	8/4/2025	
HR Administrator	Human Resources	5/15/2025	5/14/2025	5/15/2025	5/15/2025	5/22/2025	5/21/2025	5/23/2025	7/14/2025	7/14/2025	7/14/2025	7/14/2025	6/9/2025	7/14/2025	8/1/2025	8/6/2025	8/6/2025	8/5/2025	8/7/2025	8/12/2025	8/13/2025	8/25/2025	
HR Administrator	Human Resources	5/15/2025	5/14/2025	5/15/2025	5/15/2025	5/22/2025	5/21/2025	5/23/2025	7/14/2025	7/14/2025	7/14/2025	7/14/2025	6/9/2025	7/14/2025	8/1/2025	8/6/2025	8/6/2025	8/5/2025	8/11/2025	8/12/2025	8/13/2025	8/25/2025	
Engineering Technician	Engineering & Roads	5/16/2025	5/1/2025	5/2/2025	7/10/2025	7/25/2025	7/23/2025	7/25/2025	8/26/2025	9/17/2025	9/17/2025	9/17/2025	8/18/2025	9/18/2025	10/1/2025	10/10/2025	10/16/2025	10/1/2025	11/20/2025	10/29/2025	11/5/2025	12/1/2025	
Voting Machine Technician	Clerk's	5/16/2025	5/16/2025	5/19/2025	5/20/2025	8/1/2025	7/30/2025	8/1/2025	8/1/2025	8/1/2025	8/29/2025	8/29/2025	8/16/2025	8/29/2025	9/4/2025	9/10/2025	9/8/2025	9/5/2025	9/8/2025	9/12/2025	9/25/2025	#####	
Voting Machine Technician	Clerk's	5/16/2025	5/16/2025	5/19/2025	5/20/2025	8/1/2025	7/30/2025	8/1/2025	8/1/2025	8/1/2025	8/29/2025	8/29/2025	8/16/2025	8/29/2025	9/4/2025	9/10/2025	9/10/2025	9/10/2025	9/18/2025		9/22/2025	9/29/2025	
Plans Examiner-Building	Community Development	5/20/2025	5/20/2025	5/20/2025	5/21/2025	6/11/2025	6/9/2025	6/11/2025	8/6/2025	8/13/2025	8/6/2025	8/6/2025	6/26/2025	8/6/2025	8/14/2025	8/25/2025	8/25/2025	8/14/2025	8/14/2025	8/27/2025	9/2/2025	9/2/2025	
Plans Examiner Electrical	Community Development	5/20/2025	5/20/2025	5/21/2025	5/21/2025	6/11/2025	6/8/2025	6/11/2025	7/7/2025	7/7/2025	7/10/2025	7/14/2025	6/27/2025	7/15/2025	7/21/2025	9/8/2025	9/8/2025	7/22/2025	8/13/2025	7/22/2025	9/29/2025	11/3/2025	
Accountant II	Finance	5/29/2025	5/29/2025	5/29/2025	6/3/2025	6/12/2025	6/8/2025	6/12/2025	6/30/2025	7/3/2025	6/25/2025	7/3/2025	7/4/2025	7/3/2025	7/11/2025	7/14/2025	7/14/2025	7/14/2025	7/14/2025	7/14/2025	7/15/2025	8/10/2025	
Court Compliance Secretary Lead	HHS	5/29/2025	5/29/2025	5/29/2025	6/2/2025	6/20/2025	6/12/2025	6/23/2025	7/14/2025	7/14/2025	7/14/2025	7/14/2025	7/15/2025	7/29/2025	8/21/2025	9/5/2025	9/5/2025	8/22/2025	8/28/2025	9/5/2025	9/19/2025	10/6/2023	
Accountant IV	Finance	5/30/2025	5/30/2025	6/2/2025	6/3/2025	6/16/2025	6/11/2025	6/16/2025	6/16/2025	7/3/2025	6/16/2025	7/3/2025	7/21/2025	7/3/2025	7/8/2025	7/9/2025	7/9/2025	7/9/2025	7/9/2025	7/10/2025	7/21/2025	7/21/2025	
Accountant IV	Finance	5/30/2025	5/30/2025	6/2/2025	6/3/2025	6/16/2025	6/11/2025	6/16/2025	6/16/2025	7/3/2025	6/16/2025	7/3/2025	7/21/2025	7/3/2025	7/8/2025	9/5/2025	9/25/2025	9/5/2025	9/5/2025	9/12/2025	9/19/2025	9/21/2025	
Administrative Assistant	County Manager	6/3/2025	6/3/2025	6/4/2025	6/13/2025	7/25/2025	7/23/2025	7/25/2025	8/18/2025	8/20/2025	8/20/2025	8/20/2025	8/9/2025	8/20/2025	9/8/2025	9/24/2025	9/24/2025			10/2/2025	10/8/2025	11/2/2025	

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting/ Discussion with Department re: JD	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Qualified Applications Released to Department	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Reference Checks Received in HR	Background Check Initiated	Background Check Completed	Compensation Calculated/ Emailed to Department	Offer Extended to Candidate	Start Date	Time to Hire Final
Inspector I - Electrical	Community Development	6/4/2025	6/4/2025	6/4/2025	6/16/2025	6/23/2025	6/16/2025	6/23/2025	7/16/2025	7/16/2025	8/14/2025	8/15/2025	7/8/2025	8/15/2025	9/8/2025	9/11/2025	9/11/2025	9/8/2025	9/11/2025	9/15/2025	9/29/2025	#####	
Compliance Officer	HHS	6/10/2025	6/10/2025	6/13/2025	6/17/2025	6/25/2025	6/17/2025	6/25/2025	7/15/2025	7/15/2025	7/15/2025	7/18/2025	7/17/2025	7/22/2025	8/1/2025	8/21/2025	8/21/2025	8/4/2025	8/7/2025	9/11/2025	9/19/2025	10/6/2025	
Appraiser	Assessor's	6/30/2025	6/30/2025	7/2/2025	7/30/2025	8/5/2025	7/30/2025	8/5/2025	8/25/2025	8/26/2025	8/25/2025	2/25/2025	8/21/2025	8/26/2025	10/1/2025	10/3/2025	10/3/2025	10/8/2025	10/9/2025	10/10/2025	10/17/2025	#####	
Title Examiner	Assessor's	6/30/2025	6/30/2025	7/2/2025	8/5/2025	8/12/2025	8/5/2025	8/13/2025	9/8/2025	9/10/2025	9/8/2025	9/8/2025	8/29/2025	9/10/2025	10/1/2025	10/21/2025	10/22/2025	10/7/2025		10/31/2025	11/3/2025	#####	
Title Examiner	Assessor's	6/30/2025	6/30/2025	7/2/2025	8/5/2025	8/12/2025	8/5/2025	8/13/2025	9/8/2025	9/10/2025	9/8/2025	9/8/2025	8/29/2025	9/10/2025	10/1/2025	10/21/2025	10/22/2025	10/7/2025		10/31/2025	11/3/2025	#####	
Title Examiner	Assessor's	6/30/2025	6/30/2025	7/2/2025	8/5/2025	8/12/2025	8/5/2025	8/13/2025	9/8/2025	9/10/2025	9/8/2025	9/8/2025	8/29/2025	9/10/2025	10/1/2025	10/21/2025	10/22/2025	10/7/2025		10/30/2025	11/3/2025	#####	
Administrative Assistant	OEM	7/8/2025	7/8/2025	7/8/2025	7/10/2025	7/14/2025	7/10/2025	7/14/2025	7/22/2025	7/22/2025	7/22/2025	7/22/2025	7/29/2025	8/20/2025	8/28/2025	9/3/2025	9/3/2025	8/28/2025	8/28/2025	10/27/2025	10/30/2025	11/3/2025	
Vector Control Technician	Facilities and Services	7/8/2025	7/8/2025	7/8/2025	7/8/2025	10/17/2025	9/19/2025	10/20/2025	11/24/2025	11/24/2025	11/25/2025	11/25/2025	11/15/2025	11/25/2025	12/4/2025	12/8/2025	12/8/2025	12/4/2025	12/9/2025	12/4/2025	12/9/2025	#####	
Project Manager Senior	Facilities & Services	7/16/2025	7/16/2025	7/17/2025	7/9/2025	7/23/2025	7/9/2025	7/23/2025	8/28/2025	9/18/2025	8/28/2025		8/16/2025	9/18/2025	9/25/2025	9/29/2025	9/29/2025	N/A	N/A	9/30/2025	10/15/2025	#####	
Infrastructure Supervisor	Information Technology	7/16/2025	7/16/2025	7/17/2025	7/17/2025	7/25/2025	7/17/2025	7/25/2025	8/11/2025	8/11/2025	8/6/2025	8/6/2025	8/9/2025	8/26/2025	10/30/2025	11/3/2025	11/5/2025	10/31/2025		11/5/2025	11/20/2025	#####	
Building Attendant	Facilities and Services	7/21/2025	7/21/2025	7/22/2025	7/24/2025	7/29/2025	7/24/2025	7/31/2025	7/31/2025	7/31/2025	10/15/2025	10/21/2025	8/16/2025	10/21/2025	11/12/2025	11/19/2025	11/19/2025	11/31/2025	11/21/2025	11/25/2025	12/3/2025	#####	
Building Attendant	Facilities and Services	7/21/2025	07/21/225	7/22/2025	7/24/2025	7/29/2025	7/24/2025	7/31/2025	7/31/2025	7/31/2025	10/15/2025	10/21/2025	8/16/2025	10/21/2025	11/12/2025	11/19/2025	11/19/2025	11/31/2025	11/20/2025	11/1/2025	12/3/2025	12/8/2025	
Surgical Veterinary Assistant	Animal Control	7/22/2025	7/22/2025	7/23/2025	7/23/2025	7/23/2025	7/23/2025	7/23/2025	8/20/2025	8/25/2025	8/26/2025	8/29/2025	8/7/2025	8/29/2025	9/29/2025	9/23/2025	9/24/2025	9/12/2025	9/22/2025	9/23/2025	10/20/2025	11/3/2025	
Surgical Veterinary Assistant	Animal Control	7/22/2025	7/22/2025	7/23/2025	7/23/2025	7/23/2025	7/23/2025	7/23/2025	8/20/2025	8/25/2025	8/26/2025	8/29/2025	8/7/2025	8/29/2025	9/9/2025	9/24/2025	9/24/2025	9/21/2025	10/28/2025	10/10/2025	10/30/2025	11/3/2025	
Project Manager, Fixed	Facilities and Services	7/22/2025	7/22/2025	7/23/2025	7/23/2025	8/8/2025	8/4/2025	8/12/2025	9/2/2025	9/2/2025	9/9/2025	9/9/2025	8/27/2025	9/9/2025	10/23/2025	11/3/2025	11/3/2025	N/A	N/a	11/3/2025	11/21/2025	12/1/2025	
Heavy Equipment Operator	Roads	7/23/2025	7/23/2025	7/23/2025	7/31/2025	8/6/2025	7/31/2025	8/6/2025	9/9/2025	9/9/2025	9/11/2025	9/11/2025	8/22/2025	9/12/2025	10/1/2025	10/6/2025	10/9/2025	10/7/2025	11/20/2025	8/6/2025	11/5/2025	#####	
Heavy Equipment Operator	Roads	7/23/2025	7/23/2025	7/23/2025	7/31/2025	8/6/2025	7/31/2025	8/6/2025	9/9/2025	9/9/2025	9/11/2025	9/11/2025	8/22/2025	9/12/2025	10/1/2025	10/7/2025	10/9/2025	10/10/2025	N/A	8/6/2025	N/A		
Accountant III	Finance	7/31/2025	6/6/2025	6/6/2025	6/6/2025	6/16/2025	6/6/2025	6/16/2025	7/3/2025	7/3/2025	7/3/2025	7/3/2025	8/12/2025	7/3/2025	7/8/2025	8/4/2025	8/5/2025	8/4/2025	8/6/2025	8/8/2025	8/12/2025	8/25/2025	
Accountant III	Finance	7/31/2025	6/6/2025	6/6/2025	6/6/2025	6/16/2025	6/6/2025	6/16/2025	7/3/2025	7/3/2025	7/3/2025	7/3/2025	8/12/2025	7/3/2025	7/8/2025	6/30/2025	6/30/2025	6/30/2025	6/30/2025	7/9/2025	7/15/2025	7/21/2025	
Accountant III	Finance	7/31/2025	6/6/2025	6/6/2025	6/6/2025	6/16/2025	6/16/2025	6/16/2025	7/3/2025	7/3/2025	7/3/2025	7/3/2025	8/12/2025	7/3/2025	7/8/2025	8/15/2025	8/15/2025	8/21/2025	8/22/2025	9/30/2025	10/2/2025	#####	
Controller	Finance	7/31/2025	5/30/2025	6/3/2025	6/3/2025	6/16/2025	6/12/2025	6/16/2025	7/2/2025	7/2/2025	7/2/2025	7/2/2025	6/23/2025	7/2/2025	8/25/2025	8/26/2025	8/26/2025	8/26/2025	8/26/2025	8/27/2025	9/3/2025	9/7/2025	
IT Network & Systems Administrator	Information Technology	8/6/2025	8/5/2025	8/6/2025	8/5/2025	8/7/2025	8/6/2025	8/11/2025	9/3/2025	9/3/2025	9/3/2025	9/4/2025	8/27/2025	9/4/2025	9/12/2025	9/15/2025	9/15/2025			9/23/2025	9/26/2025	10/5/2025	
Administrative Assistant	Economic Development	8/11/2025	8/20/2025	8/20/2025	8/21/2025	8/27/2025	8/19/2025	8/28/2025	N/A	N/A	N/A	N/A	9/12/2025	N/A	N/A	10/29/2025	10/29/2025	9/25/2025	9/26/2025	11/6/2025	11/17/2025	#####	
Planner/Designer	Community Development	8/19/2025	8/19/2025	8/20/2025	8/20/2025	8/26/2025	8/20/2025	8/20/2025	10/6/2025	10/14/2025	10/6/2025	10/14/2025	10/6/2025	10/14/2025	11/4/2025	11/10/2025	11/10/2025	11/5/2025	11/20/2025	11/25/2025	12/2/2025	#####	
Permit Technician I	Community Development	8/28/2025	8/28/2025	9/3/2025	9/3/2025	9/10/2025	8/28/2025	9/10/2025	10/1/2025	10/1/2025	10/7/2025	10/7/2025	9/25/2025	10/7/2025	10/14/2025	10/21/2025	10/21/2025	10/21/2025	11/4/2025	11/21/2025	12/2/2025	12/8/2025	
Permit Technician I	Community Development	8/28/2025	8/28/2025	9/3/2025	9/3/2025	9/10/2025	8/28/2025	9/10/2025	10/1/2025	10/1/2025	10/7/2025	10/7/2025	9/25/2025	10/7/2025	10/14/2025	10/27/2025	10/30/2025	10/22/2025	11/4/2025	11/6/2025	11/17/2025	12/1/2025	
Permit Tech Supervisor	Community Development	8/28/2025	9/30/2025	9/30/2025	9/3/2025	9/8/2025	9/8/2025	9/30/2025	10/22/2025	10/30/2025	11/4/2025	11/4/2025	10/8/2025	11/4/2025	11/18/2025	11/21/2025	11/21/2025	11/21/2025	11/21/2025	12/2/2025	12/10/2025	#####	
HR Representative	Human Resources	9/15/2025	9/15/2025	9/15/2025	9/16/2025	9/29/2025	9/25/2025	9/29/2025	12/5/2025	12/5/2025	12/5/2025	12/5/2025	10/15/2025	12/5/2025									
Facilities Maintenance Lead	Facilities & Services	9/25/2025	10/1/2025	10/14/2025	10/1/2025	10/14/2025	10/2/2025	10/14/2025	11/5/2025	11/5/2025	11/6/2025	11/17/2025	10/22/2025	11/17/2025	11/21/2025	11/24/2025	11/24/2025	N/A	N/A	11/24/2025	12/3/2025	12/1/2025	
Accountant III	Finance	9/26/2025	9/26/2025	10/2/2025	10/1/2025	10/14/2025	10/2/2025	10/14/2025	10/20/2025	10/20/2025	10/21/2025	10/21/2025	9/26/2025	10/21/2025	11/19/2025	11/21/2025	11/21/2025	11/19/2025	12/2/2025	11/21/2025	12/4/2025	#####	
Programmer Analyst	Information Technology	9/30/2025	10/14/2025	10/14/2025	10/4/2025	10/25/2025	10/14/2025	10/27/2025	12/1/2025	12/8/2025	12/1/2025	12/8/2025	11/11/2025	12/8/2025	12/18/2025	1/13/2026	1/13/2026	12/19/2025	12/23/2025	1/13/2026	1/20/2026	2/9/2026	
Computer Technician TE	Information Technology	10/5/2025	9/26/2025	10/9/2025	10/9/2025	10/14/2025	10/9/2025	10/14/2025					10/22/2025	11/4/2025	11/12/2025	11/20/2025	11/20/2025	11/12/2025	11/20/2025	11/20/2025	12/2/2025	12/8/2025	
Computer Technician TE	Information Technology	10/5/2025	9/26/2025	10/9/2025	10/9/2025	10/14/2025	10/9/2025	10/14/2025					10/22/2025	11/4/2025	11/12/2025	11/21/2025	11/21/2025	11/12/2025	11/20/2025	11/21/2025	12/2/2025	12/8/2025	

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Document Technician Lead	Treasurer's	11/17/2025	11/17/2025	11/17/2025	11/18/2025	11/24/2025	11/18/2025	11/25/2025	1/12/2026	1/12/2026	1/7/2026	1/8/2026	12/11/2025	1/13/2026	1/27/2026	2/4/2026	2/4/2026	1/27/2026	1/27/2026	2/5/2026	2/11/2026	2/22/2026	
IT Support Supervisor	Information Technology	11/17/2025	11/17/2025	11/17/2025	11/17/2025	11/24/2025	11/17/2025	11/24/2025	12/17/2025	12/19/2025	12/17/2025	12/19/2025	12/15/2025	12/19/2025	12/30/2025	12/30/2025	12/30/2025	12/30/2025	12/30/2025	1/13/2026	1/15/2026	1/18/2026	
IT Technician III	Information Technology	11/17/2025	11/17/2025	11/24/2025	11/17/2025	12/30/2025	11/17/2025	12/30/2025	1/21/2026	1/22/2026	1/21/2026	1/23/2026	1/15/2025	1/23/2026	2/3/2026	2/11/2026	2/11/2026	2/3/2026	2/9/2026	2/13/2026	2/17/2026	2/23/2026	
Office Supervisor	Public Works	12/3/2025	12/3/2025	12/3/2025	12/3/2025	12/5/2025	11/19/2025	12/5/2025	12/18/2025	12/18/2025	12/18/2025	12/18/2025	12/12/2025		12/19/2025	12/19/2025	12/19/2025	12/19/2025	12/19/2025	12/19/2025	12/29/2025	1/5/2026	
Senior HR Administrator	Human Resources	12/13/2025	12/13/2025	12/15/2025	12/13/2025	12/15/2025	12/15/2025	12/16/2025	1/23/2026	1/26/2026	1/23/2026	1/23/2026	1/3/2026	1/26/2026	2/5/2026	2/9/2026	2/9/2026	2/6/2026	2/6/2026	2/13/2026	2/18/2026	2/22/2026	
HR Specialist	Human Resources	1/16/2026	1/16/2026	1/16/2026	1/16/2026	1/16/2026	1/16/2026	1/16/2026	1/28/2026	1/28/2026	1/25/2026	1/27/2026	1/27/2026	1/28/2026	2/6/2026	2/11/2026	2/11/2026	2/6/2026	2/12/2026	2/12/2026	2/13/2026	2/23/2026	
Document Technician-TE	Clerk's	Elections TE	1/19/2022	1/19/2022	1/19/2022	1/21/2022	1/19/2022	1/21/2022	2/1/2022	2/1/2022	2/11/2022	2/11/2022	6/29/2022	2/1/2022	2/18/2022	2/18/2022	2/18/2022	2/22/2022	3/3/2022	2/18/2022	2/22/2022	2/28/2022	2/1/1900
Health Promotion Specialist	Health & Human Services		10/20/2022	12/1/2022	1/11/2023	1/17/2023	1/11/2023	1/17/2023	1/23/2023	1/23/2023	3/7/2023	3/7/2023	1/31/2023	3/17/2023	4/12/2023	4/14/2023	4/14/2023	4/17/2023	4/17/2023	6/6/2023	6/8/2023	6/18/2023	5/21/1900
Contract Monitor	Dete																						
Administrative Assistant	Clerk's		7/6/2023	7/6/2023	7/7/2023	7/16/2023	7/7/2023	7/14/2023	7/26/2023	7/26/2023	7/27/2023	7/27/2023	7/23/2023	7/27/2023	8/7/2023	8/7/2023	8/7/2023	8/7/2023	8/7/2023	8/7/2023	8/8/2023	8/20/2023	1/25/1900
Document Technician Lead	Treasurer's		11/28/2023	12/14/2023	12/14/2023	12/15/2023	12/14/2023	12/15/2023	1/2/2024	1/2/2024	1/2/2024	1/9/2024	12/31/2023	1/9/2024	1/12/2024	1/24/2024	1/24/2024	1/12/2024	1/23/2024	1/29/2024	1/31/2024	2/20/2024	
Election Specialist	Clerk's												6/14/2024										
Department Manager	DASO								6/24/2025	6/24/2025	6/24/2025	6/24/2025	6/24/2025	6/24/2025	6/26/2025	7/17/2025	6/28/2025	6/28/2025	7/17/2025	7/17/2025	7/17/2025	8/24/2025	
Surveyor/Surveying Associate	Engineering & Roads		4/1/2025	4/1/2025	4/2/2025	7/17/2025	6/20/2025	7/18/2025	11/5/2025	11/5/2025	11/5/2025	11/5/2025	12/8/2025	11/5/2025	11/21/2025	12/7/2025	12/8/2025	11/25/2025	12/10/2025	11/25/2025	12/3/2025	#####	
Community Outreach Promotora	Health & Human Services		8/28/2025	8/28/2025	8/26/2025	8/28/2025	8/26/2025	8/28/2025	9/18/2025	9/18/2025	9/18/2025	9/18/2025	9/12/2025	9/23/2025	10/9/2025	11/21/2025	11/21/2025	11/14/2025	11/20/2025	12/2/2025	12/12/2025	#####	
Grounds Maintenance Supervisor	Facilities & Services		8/8/2025	9/23/2025	8/8/2025	9/23/2025	9/22/2025	9/24/2025	10/20/2025	10/20/2025	10/15/2025	10/20/2025	10/8/2025	10/20/2025	10/28/2025	11/7/2025	11/7/2025	10/29/2025	11/21/2025	11/3/2025	12/12/2025	12/1/2025	
Document Technician	Assessor's			9/18/2025	9/18/2025	9/26/2025	9/18/2025	9/30/2025	10/29/2025	10/29/2025	10/29/2025	10/29/2025	10/15/2025	10/29/2025	12/16/2025	12/29/2025	12/29/2025	12/22/2025	12/29/2025		1/20/2026	2/2/2026	
Document Technician	Assessor's														12/16/2025	2/16/2026	2/16/2026	2/18/2026	2/18/2026	2/18/2026	2/24/2026	3/9/2026	
Document Technician	Assessor's														12/16/2025	2/16/2026	2/17/2026	2/3/2026	2/10/2026	2/18/2026	2/24/2026	3/9/2026	
Inspector I -Plumbing/Mechanical	Community Development		8/21/2025	8/21/2025	9/22/2025	10/3/2025	9/25/2025	10/3/2025	10/27/2025	10/27/2025	10/24/2025	10/27/2025	10/20/2025	10/27/2025	10/29/2025	12/12/2025	12/16/2025	12/18/2025	1/9/2026	1/7/2026	1/29/2026	2/2/2026	
Inspector I -Electrical	Community Development		9/9/2025	9/9/2025	9/9/2025	10/7/2025	9/9/2025	10/7/2025	11/6/2025	11/6/2025	11/18/2025	11/19/2025	10/22/2025	11/19/2025	11/25/2025	11/25/2025	11/25/2025	12/1/2025	12/4/2025	12/12/2025	12/15/2025	#####	
Administrative Assistant	OEM		9/30/2025	10/6/2025	10/6/2025	10/3/2025	10/6/2025	10/6/2025	10/6/2025	10/23/2025	10/6/2025	10/23/2025	10/21/2025	10/23/2025	12/5/2025	12/24/2025	12/24/2025	12/9/2025	12/22/2025	1/5/2026	1/8/2026	1/20/2026	
Senior Network Engineer	Information Technology		10/8/2025	10/8/2025	10/8/2025	10/14/2025	10/8/2025	10/14/2025	11/18/2025	11/20/2025	11/20/2025	11/20/2025	11/5/2025	11/20/2025	12/12/2025	1/7/2026	1/8/2026	12/29/2025	1/5/2026		1/20/2026	2/11/2026	
Jetport Manager	Jetport			8/19/2025	9/10/2025	10/14/2025	10/5/2025	10/14/2025	12/10/2025	12/11/2025	12/8/2025	12/10/2025	10/29/2025	12/11/2025	12/16/2025	12/19/2025	12/19/2025	12/19/2025	12/19/2025	1/13/2026	1/20/2026	1/20/2026	
Compliance Officer	HHS		10/8/2025	10/10/2025	10/14/2025	10/17/2025	10/14/2025	10/17/2025	11/12/2025	11/12/2025	11/10/2025	11/12/2025	11/10/2025	11/19/2025	12/17/2025	12/29/2025	12/29/2025	12/18/2025	12/23/2025	1/5/2026	1/8/2026	1/20/2026	
Compliance Officer	HHS		10/8/2025	10/10/2025	10/14/2025	10/17/2025	10/14/2025	10/17/2025	11/12/2025	11/12/2025	11/10/2025	11/12/2025	11/10/2025	11/19/2025	12/17/2025	12/29/2025	12/29/2025	12/18/2025	12/19/2025	1/9/2026	1/16/2026	1/26/2026	
Appraiser Assistant	Assessor's		10/15/2025	10/16/2025	10/17/2025	10/17/2025	10/17/2025	10/20/2025	11/24/2025	11/24/2025	11/24/2025	11/24/2025	11/4/2025	11/24/2025	12/18/2025	1/21/2026	1/21/2026	12/18/2025	12/23/2025	1/21/2026	1/26/2026	2/10/2026	
Inspector I (Building)	Community Development		9/2/2025	9/4/2025	9/4/2025	10/28/2025	10/19/2025	10/28/2025	11/21/2025	11/21/2025	11/14/2025	11/21/2025	11/12/2025	11/21/2025	11/25/2025	12/2/2025	12/2/2025	11/25/2025	12/1/2025	12/4/2025	12/9/2025	#####	
Economic Development Administrator	Economic Development		9/24/2025	9/24/2025	9/24/2025	10/28/2025	10/27/2025	10/28/2025	12/3/2025	12/5/2025	12/3/2025	12/7/2025	11/12/2025	12/4/2025	12/9/2025	12/16/2025	12/16/2025	12/11/2025	12/18/2025	12/23/2025	1/27/2026	2/17/2026	
Systems Analyst	Information Technology														1/15/2026	1/20/2026	1/21/2026	1/15/2026	1/20/2026	1/21/2026	1/28/2026	2/2/2026	
Student Intern	Assessor's					11/3/2025										11/6/2025	11/6/2025	11/3/2025			11/14/2025	#####	
Live Evidence Technician	Animal Control		10/30/2025	11/3/2025	11/5/2025	11/4/2025	11/5/2025	11/25/2025	12/10/2025	12/10/2025	11/12/2025	11/12/2025	12/3/2025	12/10/2025	12/19/2025	12/29/2025	12/29/2025	12/19/2025	1/8/2026	12/23/2025	1/27/2026	2/2/2026	
Special Projects Manager	HHS		11/5/2025	11/5/2025	11/5/2025	11/13/2025	11/5/2025	11/13/2025	12/1/2025	12/3/2025	12/1/2025	12/7/2025	11/28/2025	12/803/2025	12/10/2025	12/15/2025	12/15/2025	12/11/2025	12/16/2025	1/5/2026	1/8/2026	2/23/2026	

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting/ Discussion with Department re: JD	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Qualified Applications Released to Department	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Reference Checks Received in HR	Background Check Initiated	Backgroun d Check Completed	Compensation Calculated/ Emailed to Department	Offer Extended to Candidate	Start Date	Time to Hire Final
Engineer Supervisor	Engineering & Roads														2/17/2026	2/24/2026	2/24/2026	2/17/2026	2/19/2026	2/23/2026	2/27/2026	3/16/2026	
Appraiser Assistant	Assessor's		10/15/2025	10/16/2025	10/17/2025	10/17/2025	10/17/2025	10/20/2025	11/24/2025	11/24/2025	11/24/2025	11/24/2025	11/4/2025	11/24/2025	12/18/2025	1/5/2026	1/5/2026	12/18/2025	12/22/2025	1/8/2026	1/9/2026	1/18/2026	
Appraiser Assistant	Assessor's		10/15/2025	10/15/2025	10/17/2025	10/17/2025	10/17/2025	10/20/2025	11/24/2025	11/24/2025	11/24/2025	11/24/2025	11/4/2025	11/24/2025	12/18/2025	1/12/2026	1/12/2026	12/18/2025	12/23/2025	1/13/2026	1/20/2026	2/2/2026	
Appraiser Assistant	Assessor's		10/15/2025	10/15/2025	10/17/2025	10/17/2025	10/17/2025	10/20/2025	11/24/2025	11/24/2025	11/24/2025	11/24/2025	11/4/2025	11/24/2025	12/18/2025	1/6/2026	1/7/2026	12/18/2025	1/5/2026	1/8/2026	1/9/2026	1/20/2026	

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Assistant Operations Manager	CRRUA	3/15/2019	8/15/2021	11/3/2022	11/9/2022	9/3/2021	11/9/2022	9/3/2021	3/3/2023	3/3/2023	4/10/2023	4/11/2023	4/10/2023	4/11/2023	4/19/2023								N/A
Assistant Executive Director	CRRUA	11/12/2021	1/27/2022	8/8/2022		1/12/2022	1/27/2022	1/12/2022	2/25/2022	2/25/2022	3/3/2022	3/3/2022	1/27/2022	9/7/2022	7/27/2022				8/22/2022	8/24/2022	9/7/2022	9/12/2022	238
Utility Service Clerk	CRRUA	10/9/2021	7/28/2022	11/9/2022	7/28/2022	7/28/2022	7/28/2022	7/29/2022			12/21/2022	12/21/2022	2/2/2023										N/A
Utility Worker TE	CRRUA	1/13/2023	1/13/2023	1/13/2023	1/13/2023	1/18/2023	1/13/2023	1/19/2023	3/16/2023	3/16/2023	4/3/2023	4/6/2023	2/28/2023	4/6/2023									
Utility Worker TE	CRRUA	1/13/2023	1/13/2023	1/13/2023	1/13/2023	1/18/2023	1/13/2023	1/19/2023	3/16/2023	3/16/2023	4/3/2023	04/06/2023	2/28/2023	4/6/2023									
Assistant Operations Manager	CRRUA	3/30/2019	2/28/2023	2/28/2023	2/28/2023	2/28/2023	2/28/2023																0
Water/Wastewater Operator I	CRRUA	2/11/2023	2/27/2023	3/2/2023	3/2/2023	3/6/2023	3/2/2023	3/6/2023	4/6/2023	4/6/2023	4/6/2023	4/6/2023	3/14/2023	4/12/2023	4/6/2023	4/12/2023	4/12/2023	4/12/2023	4/21/2023	05/01/2023	4/18/2023	5/1/2023	43
Water/Wastewater Operator I	CRRUA	2/11/2023	2/27/2023	3/2/2023	3/2/2023	3/6/2023	3/2/2023	3/6/2023	4/6/2023	4/6/2023	4/6/2023	4/6/2023	3/14/2023	4/12/2023	4/6/2023	4/21/2023	4/21/2023	4/21/2023	4/24/2023	4/25/2023	5/11/2023	5/7/2023	66
Utility Service Clerk	CRRUA	2/10/2023	2/10/2023	2/15/2023	2/10/2023	2/17/2023	2/10/2023	2/17/2023	3/1/2023	3/1/2023	3/1/2023	3/1/2023	2/27/2023	3/3/2023	5/8/2023	5/9/2023	5/9/2023	5/16/2023	5/10/2023	5/16/2023	5/18/2023	5/24/2023	90
Utility Worker FT/T	CRRUA	5/8/2021	3/1/2023	3/8/2023	3/8/2023	3/17/2023	3/16/2023	3/17/2023	3/16/2023	3/16/2023	7/20/2023	7/20/2023	7/9/2023	7/20/2023									
Water/ Wastewater Operator I	CRRUA	2/11/2023	5/10/2023	5/11/2023	5/11/2023	5/19/2023	5/11/2023	5/19/2023	3/15/2023	3/15/2023	8/2/2023	8/2/2023	7/28/2023	8/2/2023	8/8/2023	8/14/2023	9/7/2023	8/29/2023	8/14/2023	8/29/2023	9/8/2023	9/25/2023	
Water/Wastewater Operator I	CRRUA	2/11/2023	5/10/2023	5/11/2023	5/11/2023	5/19/2023	5/11/2023	5/19/2023	3/15/2023	3/15/2023	8/2/2023	8/2/2023	7/28/2023	8/2/2023								9/24/2023	
Water/Wastewater Operator III	CRRUA	7/20/2019	5/10/2023	5/18/2023	5/18/2023	5/19/2023	5/18/2023	5/19/2023					3/10/2024										
Water/Wastewater Operator II	CRRUA	5/24/2023	5/24/2023	6/5/2023	5/18/2023	6/6/2023	5/18/2023	6/7/2023	6/12/2023	6/12/2023	8/1/2023	8/1/2023	6/21/2023	8/1/2023	7/28/2023	8/4/2023	8/4/2023	7/28/2023	7/28/2023	7/28/2023	8/8/2023	7/30/2023	62
Water/Wastewater Operator II	CRRUA	5/24/2023	5/24/2023	6/5/2023	5/18/2023	6/6/2023	5/18/2023	6/7/2023	6/12/2023	6/12/2023	8/1/2023	8/1/2023	6/21/2023	8/1/2023	8/8/2023	8/14/2023	8/14/2023	8/22/2023	8/14/2023	8/18/2023	9/14/2023	9/18/2023	
Utility Operations Manager	CRRUA	6/8/2023	6/8/2023	6/8/2023	0608/2023	6/9/2023	6/8/2023	6/9/2023	6/23/2023	6/27/2023	7/20/2023	7/20/2023	3/10/2024	7/20/2023	10/5/2023	10/16/2023	10/20/2023	10/20/2023	10/21/2023	10/26/2023			
Utility Operations Manager	CRRUA	6/8/2023	6/8/2023	6/8/2023	6/8/2023	6/9/2023	6/8/2023	6/9/2023	6/23/2023	6/27/2023	7/20/2023	7/20/2023	3/10/2024	7/20/2023	4/5/2024	4/10/2024	4/11/2024	4/11/2024	4/11/2024	4/18/2024	4/25/2024	6/17/2024	
Utility Worker FT/TE	CRRUA	8/3/2023	8/3/2023	8/3/2023	8/4/2023	8/4/2023	8/4/2023	8/4/2023	8/23/2023	8/23/2023	8/23/2023	8/23/2023	9/26/2023	8/23/2023									
Wastewater Lead Operator	CRRUA	6/20/2018	10/5/2023	10/5/2023	10/5/2023	10/5/2023	10/5/2023	10/5/2023	4/1/2024	4/2/2024	4/1/2024	4/2/2024	2/25/2024	4/2/2024									
Water/Wastewater Operator I	CRRUA	12/4/2023	11/9/2023	12/4/2023	12/7/2023	12/8/2023	12/7/2023	12/8/2023	1/16/2024	1/16/2024	1/17/2024	1/17/2024	1/1/2024	1/17/2024	2/2/2024	2/7/2024	2/23/2024	2/23/2024	2/5/2024	2/16/2024	2/26/2024	2/27/2024	
Utility Worker	CRRUA	11/30/2023	11/30/2023	11/30/2023	11/30/2023	2/9/2024	2/7/2024	2/9/2024	3/8/2024	3/8/2024	3/13/2024	3/13/2024	3/3/2024	3/13/2024									
Utility Customer Service Lead	CRRUA	2/9/2024	2/9/2024	2/12/2024	2/13/2024	2/21/2024	2/13/2024	2/21/2024	3/14/2024	3/14/2024	3/12/2024	3/14/2024	3/3/2024	3/14/2024	6/17/2024	6/7/2024	6/7/2024	6/12/2024			6/16/2024	6/16/2024	
Executive Director	CRRUA	2/21/2024	2/21/2024	2/21/2024	2/21/2024	2/22/2024	2/21/2024	2/22/2024	3/28/2024	3/28/2024	3/27/2024	3/27/2024	3/24/2024	3/27/2024	4/13/2024	5/11/2024	5/1/2024	5/2/2024	8/22/2022	8/24/2022	4/23/2023	5/13/2024	
Executive Director	CRRUA	2/21/2024	2/21/2024	2/21/2024	2/21/2024	2/22/2024	2/21/2024	2/22/2024	3/28/2024	3/28/2024	3/27/2024	3/27/2024	3/24/2024	3/27/2024	4/13/2024			4/15/2024	4/15/2024				
Executive Director	CRRUA	2/21/2024	2/21/2024	2/21/2024	2/21/2024	2/22/2024	2/21/2024	2/22/2024	3/28/2024	3/28/2024	3/27/2024	3/27/2024	3/24/2024	3/27/2024	4/13/2024								
Executive Director	CRRUA	2/21/2024	2/21/2024	2/21/2024	2/21/2024	2/22/2024	2/21/2024	2/22/2024	3/28/2024	3/28/2024	3/27/2024	3/27/2024	3/24/2024	3/27/2024	4/13/2024								
Executive Director	CRRUA	2/21/2024	2/21/2024	2/21/2024	2/21/2024	2/22/2024	2/21/2024	2/22/2024	3/28/2024	3/28/2024	3/27/2024	3/27/2024	3/24/2024	3/27/2024	4/13/2024								
Water/Wastewater Operator I	CRRUA	2/27/2024	2/27/2024	2/27/2024	2/27/2024	2/28/2024	2/27/2024	2/28/2024	4/11/2024	4/11/2024	4/11/2024	4/11/2024	5/23/2024	4/11/2024	7/26/2024	8/2/2024	8/5/2024	8/29/2024	8/1/2024	8/1/2024	8/30/2024	9/3/2024	
Water/Wastewater Operator I	CRRUA	2/27/2024	2/27/2024	2/27/2024	2/27/2024	2/28/2024	2/27/2024	2/28/2024	4/11/2024	4/11/2024	4/11/2024	4/11/2024	5/23/2024	4/11/2024	7/26/2024	8/2/2024	8/5/2024	8/29/2024	8/1/2024	8/1/2024	8/30/2024	9/3/2024	
Water/Wastewater Operator I	CRRUA	2/27/2024	2/27/2024	2/27/2024	2/27/2024	2/28/2024	2/27/2024	2/28/2024	4/11/2024	4/11/2024	4/11/2024	4/11/2024	5/23/2024	4/11/2024	7/26/2024	8/5/2024	8/5/2024	8/24/2024	8/1/2024	8/27/2024	8/30/2024	9/3/2024	
Water/Wastewater Operator II	CRRUA	3/1/2024	3/1/2024	3/4/2024	3/2/2024	3/7/2024	3/2/2024	3/7/2024	4/1/2024	4/1/2024	4/1/2024	4/1/2024	4/8/2024	4/19/2024	4/19/2024	4/25/2024	4/25/2024	4/25/2024	4/25/2024	4/29/2024	5/31/2024	6/17/2024	
Wastewater Lead Operator	CRRUA	4/11/2024	4/11/2024	4/11/2024	4/11/2024	4/12/2024	4/11/2024	4/12/2024	6/21/2024				6/14/2024										
Water/Wastewater Operator III	CRRUA	4/11/2024	4/11/2024	4/11/2024	4/11/2024	4/14/2024	4/11/2024	4/15/2024	10/23/2024	10/23/2024	12/19/2024		4/30/2024	12/19/2024									
Meter Specialist	CRRUA	4/19/2024	4/19/2024	4/22/2024	4/19/2024	4/25/2024	4/19/2024	4/25/2024	7/1/2024	7/3/2024	6/21/2024	6/21/2024	5/12/2024	7/3/2024	7/14/2024	7/15/2024	7/15/2024	7/16/2024	7/15/2024	7/15/2024	7/29/2024	7/14/2024	
Administrative Assistant	CRRUA	3/1/2024	3/1/2024	3/4/2024	4/2/2024	5/3/2024	5/3/2024	5/6/2024	1/3/2024	1/3/2024	7/25/2024	7/26/2024	5/22/2024	1/3/2024									
Assistant Executive Director	CRRUA	4/25/2024	4/25/2024	5/3/2024	5/3/2024	6/4/2024	6/3/2024	6/4/2024	7/1/2024	7/2/2024	6/21/2024	6/21/2024	6/14/2024	7/2/2024	8/1/2024	8/1/2024	8/27/2024	8/14/2024	8/1/2024	8/7/2024	8/29/2024	9/16/2024	
Assistant Operations Manager	CRRUA	5/29/2024	5/29/2024	5/31/2024	5/31/2024	7/10/2024	7/6/2024	7/10/2024	11/7/2024	11/7/2024	10/22/2024	10/23/2024	9/5/2024	11/8/2024									
Utility Service Clerk	CRRUA	7/11/2024	7/11/2024	7/12/2024	7/12/2024	7/29/2024	7/12/2024	7/30/2024	11/27/2024	11/27/2024	11/27/2024	11/27/2024	8/15/2024	12/4/2024	12/11/2024	12/18/2024	1/2/2025	1/27/2025	1/9/2025	1/10/2025	1/31/2025	2/10/2025	
Water/Wastewater Operator I	CRRUA	9/17/2024	9/17/2024	9/17/2024	9/17/2024	9/24/2024	9/17/2024	9/24/2024	1/3/2025	1/3/2025	1/3/2025	1/3/2025	10/3/2024	1/7/2025	2/13/2025				2/18/2025	2/24/2025			
Water/Wastewater Operator II	CRRUA	9/23/2024	9/23/2024	10/1/2024	10/1/2024	10/9/2024	10/1/2024	10/18/2024	3/31/2025	3/31/2025	3/31/2025	3/31/2025	2/24/2025	3/31/2025									
Utility Worker	CRRUA	10/18/2024	10/18/2024	10/18/2024	10/18/2024	10/18/2024	10/9/2024	10/18/2024	1/3/2025	1/6/2025	1/3/2025	1/6/2025	12/18/2024	1/6/2025	2/13/2025				2/18/2025				
Water/Wastewater Operator I	CRRUA	10/4/2024	10/4/2024	10/18/2024	10/18/2024	10/9/2024	10/4/2024	10/18/2024	2/26/2025	2/26/2025	2/26/2025	2/26/2025	1/12/2025	2/28/2025									
Assistant Operations Manager	CRRUA	1/3/2025	1/3/2025	1/8/2025	1/8/2025	0/16/2025	1/8/2025	1/28/2025	1/22/2025	1/22/2025	3/25/2025	3/26/2025	10/28/2025	3/26/2025									
Utility Service Clerk	CRRUA	2/18/2025	2/18/2025	2/18/2025	2/18/2025	2/19/2025	2/18/2025	2/19/2025	2/14/2025	2/14/2025	3/6/2025	3/6/2025	3/3/2025	3/6/2025									
Water/Wastewater Operator I	CRRUA	3/25/2025	3/25/2025	3/27/2025	3/27/2025	5/5/2025	4/3/2025	5/5/2025	5/21/2025	5/21/2025	5/21/2025	5/22/2025	5/20/2025	5/22/2025									
Water/Wastewater Operator II	CRRUA	4/3/2025	4/3/2025	4/3/20																			

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting / Discussion with Department re: JD	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Background Report Completed	Date Recruitment Packet Delivered to HR	Compensation Calculated/ Emailed to Department	Department Routes P1 for Approval	Contingent Offer made by Recruiter	Psychological Scheduled	Psychological Report Received	Medical Scheduled	Medical Report Received	Start Date	Time to Hire Final
DASO Captain	Sheriff's Office	3/26/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/24/2022	2/2/2022	2/23/2022		2/23/2022	2/23/2022	2/9/2022	2/18/2022	N/A		2/24/2022		4/7/2022	4/20/2022					5/8/2022	77
DASO Captain	Sheriff's Office	7/31/2021	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/24/2022	2/2/2022	2/23/2022		2/23/2022	2/23/2022	2/9/2022	2/18/2022	N/A		2/24/2022		2/18/2022	2/28/2022					2/27/2022	26
Records Specialist	Sheriff's Office	1/16/2022	1/14/2022	1/14/2022	1/14/2022	1/14/2022	1/14/2022	1/20/2022	2/16/2022	2/28/2022	2/23/2022	2/28/2022	1/27/2022	2/28/2022	3/17/2022	3/21/2022		3/16/2022	3/21/2022	3/22/2022						61
Records Specialist	Sheriff's Office	1/16/2022	1/14/2022	1/14/2022	1/14/2022	1/14/2022	1/14/2022	1/20/2022	2/16/2022	2/28/2022	2/23/2022	2/28/2022	1/27/2022	2/28/2022	3/17/2022	3/21/2022		3/16/2022	3/21/2022	3/22/2022					3/22/2022	61
Court Security & Transport Officer	Sheriff's Office	1/1/2022	1/28/2022	1/28/2022	1/28/2022	1/31/2022	1/28/2022	2/2/2022	3/4/2022	3/7/2022	3/4/2022	3/7/2022	2/28/2022	3/8/2022	4/25/2022	5/24/2022	5/26/2022	5/24/2022	5/31/2022	6/8/2022						126
Court Security & Transport Officer	Sheriff's Office	11/6/2021	1/28/2022	1/28/2022	1/28/2022	1/31/2022	1/28/2022	2/2/2022	3/4/2022	3/7/2022	3/4/2022	3/7/2022	2/28/2022	3/8/2022	4/28/2022		5/13/2022	5/18/2022	5/18/2022	6/22/2022					7/10/2022	140
DASO Document Technician	Sheriff's Office	N/A	3/21/2022	3/21/2022	3/21/2022	3/21/2022	3/21/2022	3/22/2022	4/18/2022	4/19/2022	4/18/2022	4/19/2022	3/29/2022	4/20/2022	5/26/2022		6/14/2022									N/A
DASO Document Technician	Sheriff's Office	3/26/2022	3/21/2022	3/21/2022	3/21/2022	3/21/2022	3/21/2022	3/22/2022	4/18/2022	4/19/2022	4/18/2022	4/19/2022	3/29/2022	4/20/2022	6/15/2022	6/15/2022	6/14/2022	6/21/2022	6/21/2022							N/A
Certified Deputy	Sheriff's Office	N/A	2/28/2022	2/28/2022	2/28/2022	2/28/2022	2/28/2022	3/7/2022	4/21/2022	N/A	4/21/2022	N/A	6/7/2022	4/27/2022	6/24/2022	7/15/2022	7/12/2022	7/14/2022	7/25/2022	7/29/2022						144
DASO Detective	Sheriff's Office	1/1/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	4/20/2022	4/20/2022	4/26/2022	4/26/2022	4/13/2022	4/27/2022			5/7/2022	5/10/2022	5/15/2022	5/17/2022					5/22/2022	64
Certified Deputy	Sheriff's Office	N/A	2/28/2022	2/28/2022	2/28/2022	2/28/2022	2/28/2022	3/7/2022	4/21/2022	N/A	4/21/2022	N/A	6/7/2022	6/29/2022	7/14/2022											N/A
Fleet Coordinator	Sheriff's Office	7/2/2022	6/16/2022	6/16/2022	6/16/2022	6/16/2022	6/16/2022	6/17/2022					7/5/2022	7/14/2022												N/A
Records Specialist	Sheriff's Office	10/8/2022	6/17/2022	6/17/2022	6/17/2022	6/21/2022	6/17/2022	6/21/2022	7/19/2022	7/19/2022	7/20/2022	7/20/2022	6/28/2022	7/21/2022	9/22/2022	9/26/2022	7/22/2022	9/23/2022	9/27/2022	9/29/2022					10/9/2022	100
Records Specialist	Sheriff's Office	3/18/2022	6/17/2022	6/17/2022	6/17/2022	6/21/2022	6/17/2022	6/21/2022	7/19/2022	7/19/2022	7/20/2022	7/20/2022	6/28/2022	7/25/2022	7/25/2022	7/25/2022	7/22/2022	7/25/2022	7/28/2022	8/1/2022					7/31/2022	41
Court Security and Transport	Sheriff's Office	4/23/2022	6/17/2022	6/17/2022	6/17/2022	6/21/2022	6/17/2022	6/21/2022					7/17/2022	7/27/2022	8/12/2022	9/12/2022	9/9/2022	9/13/2022	9/15/2022	10/18/2022					10/31/2022	119
DASO Training Assistant	Sheriff's Office	3/21/2022	7/12/2022	7/12/2022	7/12/2022	7/12/2022	7/12/2022	7/12/2022	8/8/2022	8/9/2022	8/8/2022	8/9/2022	7/19/2022	8/11/2022	8/15/2022	8/15/2022	8/15/2022	8/17/2022	8/18/2022	8/23/2022					8/28/2022	42
DASO Document Technician	Sheriff's Office	7/26/2022	7/26/2022	7/26/2022	7/26/2022	7/27/2022	7/26/2022	7/28/2022	8/22/2022	8/22/2022	8/22/2022	8/22/2022	8/5/2022	8/24/2022	9/21/2022	10/5/2022	9/28/2022	10/4/2022	10/11/2022	10/19/2022					10/24/2022	83
DASO Document Technician	Sheriff's Office	7/16/2011	7/26/2022	7/26/2022	7/26/2022	7/27/2022	7/26/2022	7/28/2022	8/22/2022	8/22/2022	8/22/2022	8/22/2022	8/5/2022	8/24/2022	9/15/2022	10/14/2022	9/27/2022	10/12/2022	10/12/2022	10/13/2022					10/31/2022	77
Fleet Coordinator	Sheriff's Office	7/2/2022	8/16/2022	8/16/2022	8/16/2022	8/26/2022	8/24/2022	8/26/2022	9/16/2022	9/19/2022	9/19/2022	9/19/2022	9/19/2022	9/2/2022	9/20/2022	9/21/2022	9/21/2022	9/21/2022	9/22/2022	9/23/2022					9/25/2022	28
Court Security *& Transport Officer	Sheriff's Office	7/30/2022	9/19/2022	9/19/2022	9/19/2022	9/19/2022	9/16/2022	9/20/2022	10/19/2022	10/21/2022	10/19/2022	10/21/2022	10/22/2022	10/6/2022	10/18/2022	10/21/2022	11/2/2022	11/2/2022	11/4/2022	11/7/2022					11/14/2022	48
Court Security *& Transport Officer	Sheriff's Office	1/1/2022	9/19/2022	9/19/2022	9/19/2022	9/19/2022	9/16/2022	9/20/2022	10/19/2022	10/21/2022	10/19/2022	10/21/2022	10/22/2022	10/28/2022	11/1/2022		11/2/2022									N/A
Evidence & Property Specialist	Sheriff's Office	1/29/2023	10/19/2022	10/19/2022	10/19/2022	10/19/2022	10/19/2022	10/20/2022	1/9/2023	1/9/2023	1/10/2023	1/10/2023	11/10/2022	1/12/2023	1/18/2023	1/23/2023	1/13/2023	1/23/2023	1/26/2023	1/25/2023					1/29/2023	97
Inventory Technician	Sheriff's Office	9/24/2022	12/3/2022	12/3/2022	12/3/2022	12/5/2022	12/3/2022	12/9/2022	2/13/2023	2/13/2023	2/15/2023	2/15/2023	12/30/2022	2/15/2023	4/11/2023	4/11/2023	4/28/2023	5/18/2023	5/18/2023	5/31/2023					6/20/2023	173
Crime Scene Technician	Sheriff's Office	1/4/2023	1/4/2023	1/12/2023	1/12/2023	1/9/2023	1/4/2023	1/12/2023	4/5/2023	4/5/2023	4/5/2023	4/5/2023	2/3/2023	4/6/2023	6/27/2023	6/26/2023	6/30/2023	7/19/2023	7/25/2023	7/26/2023					8/13/2023	
DASO Crime Scene Technician	Sheriff's Office	1/4/2023	1/4/2023	1/12/2023	1/12/2023	1/9/2023	1/4/2023	1/12/2023	4/5/2023	4/5/2023	4/5/2023	4/5/2023	2/3/2023	4/6/2023	6/23/2023	6/30/2023		7/18/2023	7/20/2023	7/25/2023					8/14/2023	
Crime Scene Technician	Sheriff's Office	1/4/2023	1/4/2023	1/12/2023	1/12/2023	1/9/2023	1/4/2023	1/12/2023	4/5/2023	4/5/2023	4/5/2023	4/5/2023	2/3/2023	4/7/2023	7/6/2023	7/6/2023		7/21/2023	7/21/2023	7/26/2023					8/13/2023	
Document Technician	Sheriff's Office	8/27/2022				02/09/23		2/16/2023	4/5/2023	4/6/2023	4/5/2023	4/6/2023	2/23/2023	4/10/2023	6/8/2023			6/7/2023	7/6/2023	7/27/2023					8/13/2023	
Document Technician	Sheriff's Office	10/8/2022				2/9/2023		2/14/2023	4/5/2023	4/6/2023	4/5/2023	4/6/2023	2/23/2023	4/10/2023												
Evidence Supervisor	Sheriff's Office	3/12/2023	3/14/2023	3/14/2023	3/14/2023	3/15/2023	1/4/2023	3/17/2023	4/24/2023	4/24/2023	4/24/2023	4/24/2023	4/15/2023	4/27/2023			7/13/2023	6/21/2023	6/22/2023	6/27/2023						102
DASO Intelligence Analyst	Sheriff's Office	12/5/2014	3/14/2023	3/14/2023	3/14/2023	3/15/2023	3/14/2023	3/17/2023	4/27/2023	4/27/2023	4/27/2023	4/27/2023	4/15/2023	4/28/2023	4/21/2023	6/30/2023	7/10/2023	7/21/2023	7/21/2023	7/25/2023					8/14/2023	
DASO Intelligence Analyst	Sheriff's Office	12/5/2014	3/14/2023	3/14/2023	3/14/2023	3/15/2023	3/14/2023	3/17/2023	4/27/2023	4/27/2023	4/27/2023	4/27/2023	4/15/2023	4/28/2023	6/12/2023		6/30/2023									
DASO Intelligence Analyst	Sheriff's Office	12/5/2014	3/14/2023	3/14/2023	3/14/2023	3/15/2023	3/14/2023	3/17/2023	4/27/2023	4/27/2023	4/27/2023	4/27/2023	4/15/2023	4/28/2023	5/22/2023		6/8/2023	6/9/2023								
DASO Uncertified Cadet	Sheriff's Office	5/20/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	3/30/2023	4/2/2023	5/24/2023	5/30/2023	5/24/2023	5/30/2023	10/2/2023	5/2/2023	6/2/2023	6/5/2023	6/6/2023	6/9/2023	6/12/2023	6/21/2023	5/30/2023	6/7/2023	5/22/2023	6/12/2023	7/3/2023	
DASO Uncertified Cadet	Sheriff's Office	6/6/2020	3/31/2023	3/31/2023	3/31/2023	3/31/2023	3/30/2023	4/2/2023	5/1/2023	5/1/2023	5/1/2023	5/1/2023	10/2/2023	5/2/2023	5/24/2023	5/25/2023	5/26/2023	5/30/2023	5/31/2023	6/12/2023	5/16/2023	5/19/2023	5/9/2023	5/19/2023	7/10/2023	

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting / Discussion with Department re: JD	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Background Report Completed	Date Recruitment Packet Delivered to HR	Compensation Calculated/ Emailed to Department	Department Routes P1 for Approval	Contingent Offer made by Recruiter	Psychological Scheduled	Psychological Report Received	Medical Scheduled	Medical Report Received	Start Date	Time to Hire Final
DASO Uncertified Cadet	Sheriff's Office					3/31/2023	3/30/2024	4/2/2023	5/24/2023	5/30/2023	5/24/2023	5/30/2023		5/2/2023	5/24/2023	5/25/2023	5/26/2023	5/30/2023		6/12/2023	5/16/2023	5/19/2023	5/10/2023	6/12/2023		
DASO Uncertified Cadet	Sheriff's Office	4/2/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	4/2/2023	5/1/2023	5/1/2023	5/1/2023	5/1/2023	10/3/2023	6/30/2023	7/24/2023	8/2/2023	8/14/2023		8/14/2023	8/4/2023	8/22/2023	8/30/2023	8/16/2023	9/8/2023	10/16/230	
DASO Uncertified Cadet	Sheriff's Office	4/2/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	4/2/2023	5/1/2023	5/1/2023	5/1/2023	5/1/2023	10/3/2023	6/30/2023	7/17/2023	8/2/2023	8/14/2023	8/14/2023	8/14/2023	8/5/2023	8/8/2023	8/11/2023	8/11/2023	8/28/2023	9/5/2023	
DASO Uncertified Cadet	Sheriff's Office	4/2/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	4/2/2023	5/24/2023	5/30/2023	5/24/2023	5/30/2023	8/11/2023	8/8/2023	9/14/2023	9/14/2023	8/29/2023	9/6/2023	9/7/2023	9/14/2023	9/28/2023	11/3/2023	10/2/2023	10/20/2023	12/4/2023	
DASO Uncertified Cadet	Sheriff's Office	4/2/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	4/2/2023	5/24/2023	5/30/2023	5/24/2023	5/30/2023	8/11/2023	8/8/2023	9/12/2023	9/12/2023	8/29/2023	9/11/2023	9/11/2023	9/14/2023	9/28/2023	11/3/2023	9/25/2023	10/20/2023	12/4/2023	
DASO Uncertified Cadet	Sheriff's Office	4/2/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	4/2/2023	5/24/2023	5/24/2023	5/24/2023	5/30/2023	8/11/2023	8/8/2023	9/14/2023	9/14/2023	8/29/2023	09/01/213	9/7/2023	9/14/2023	9/28/2023	11/3/2023	10/2/2023	10/20/2023	10/2/2023	
DASO Uncertified Cadet	Sheriff's Office	4/2/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	4/2/2023	5/24/2023	5/24/2023	5/24/2023	5/30/2023	8/11/2023	8/8/2023	9/6/2023	9/6/2023	8/29/2023	8/30/2023	9/7/2023	9/14/2023	9/28/2023	11/3/2023	9/25/2023	10/20/2023	10/16/2023	
DASO Uncertified Cadet	Sheriff's Office	4/2/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	4/2/2023	5/24/2023	5/30/2023	5/24/2023	5/30/2023	8/11/2023	8/8/2023	9/14/2023	9/14/2023	8/29/2023	9/1/2023	9/7/2023	9/14/2023	11/10/2023	12/6/2023	10/2/2023	10/31/2023	10/2/2023	
DASO Uncertified Cadet	Sheriff's Office	4/2/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	4/2/2023	5/24/2023	5/24/2023	5/24/2023	5/30/2024	8/11/2023	8/8/2023	9/13/2023	9/13/2023	8/29/2023	8/30/2023	9/7/2023	9/13/2023	9/28/2023	11/3/2023	9/26/2023	10/31/2023	10/10/2023	
DASO Uncertified Cadet	Sheriff's Office	4/2/2023	4/2/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	4/2/2023	5/24/2023	5/24/2023	5/30/2023	8/11/2023	8/8/2023	9/13/2023	9/13/2023	8/29/2023	9/1/2023	9/11/2023	9/13/2023	9/28/2023	11/3/2023	9/29/2023	10/20/2023	10/10/230	
DASO Uncertified Cadet	Sheriff's Office					3/31/2023	3/30/2023	4/2/2023	5/24/2023	5/30/2023	5/24/2023	5/30/2023		8/8/2023	5/23/2023	9/13/2023	8/29/2023	9/1/2023	9/7/2023	9/14/2023	9/28/2023	11/3/2023	10/6/2023	10/31/2023		
DASO Uncertified Cadet	Sheriff's Office	4/2/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	4/2/2023	5/24/2023	5/30/2023	5/24/2023	5/30/2023	0/11/2023	8/25/2023	9/15/2023	9/15/2023	9/8/2023	9/11/2023	9/11/2023	9/13/2023	9/28/2023		9/29/2023	10/31/2023	1/8/2024	
DASO Uncertified Cadet	Sheriff's Office	4/2/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	4/2/2023	5/24/2023	5/30/2023	5/24/2023	5/30/2023	8/11/2023	9/12/2023	9/19/2023	10/4/2023	10/4/2023	10/5/2023	10/14/2023	10/24/2023	11/10/2023	12/6/2023	11/7/2023	12/5/2023	11/13/2023	
DASO Uncertified Cadet	Sheriff's Office	4/2/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	4/2/2023	5/24/2023	5/30/2023	5/24/2023	5/30/2023	8/11/2023	9/12/2023	9/19/2023	10/17/2023	10/4/2023	10/5/2023	10/14/2023	10/24/2023	11/10/2023	12/6/2023	11/6/2023	12/5/2023	11/13/2023	
DASO Uncertified Cadet	Sheriff's Office	4/2/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	4/2/2023	5/24/2023	5/30/2023	5/24/2023	5/30/2023	8/11/2023	9/12/2023	9/19/2023	10/16/2023	10/4/2023	10/5/2023	10/14/2023	10/24/2023	11/18/2023	12/6/2023	11/6/2023	12/5/2023	11/19/2023	
DASO Uncertified Cadet	Sheriff's Office	8/11/2023	8/4/2023	8/4/2023	8/4/2023	8/7/2023	8/7/2023	8/11/2023	5/24/2023	5/30/2023	5/24/2023	5/30/2023	12/30/2023	9/12/2023	9/19/2023	10/17/2023	10/4/2023	10/5/2023	10/14/2023	10/24/2023	11/18/2023	12/6/2023	11/3/2023	12/19/2023	12/4/2023	
DASO Uncertified Cadet	Sheriff's Office	4/2/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	4/2/2023	5/24/2023	5/30/2023	5/24/2023	5/30/2023	8/11/2023	10/3/2023	11/1/2023	11/16/2023	11/2/2023	11/2/2023	11/2/2023	11/3/2023	11/10/2023	12/6/2023	#####	12/19/2023	11/27/2023	
DASO Uncertified Cadet	Sheriff's Office	4/2/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	4/2/2023	5/24/2023	5/30/2023	5/24/2023	5/30/2023	8/11/2023	10/3/2023	11/3/2023	11/3/2023	10/30/2023	10/31/2023	11/1/2023	11/3/2023					11/6/2023	
DASO Uncertified Cadet	Sheriff's Office	8/11/2023	8/4/2023	8/4/2023	8/4/2023	8/7/2023	8/7/2023	8/11/2023	5/24/2023	5/30/2023	5/24/2023	5/30/2023	12/30/2023	10/3/2023	10/16/2023	11/2/2023	10/30/2023	10/31/2023	10/31/2023	11/2/2023	11/10/2023	12/6/2023	#####	12/19/2023	1/14/2023	
DASO Uncertified Cadet	Sheriff's Office	8/11/2023	8/4/2023	8/4/2023	8/4/2023	8/7/2023	8/7/2023	8/11/2023	5/24/2023	5/30/2023	5/24/2023	5/30/2023	12/30/2023	10/3/2023	11/8/2023	12/4/2023	10/17/2023	11/14/2023	10/31/2023	11/16/2023	1/16/2024	1/22/2024	#####	1/8/2024	12/26/2023	
DASO Uncertified Cadet	Sheriff's Office	8/11/2023	8/4/2023	8/4/2023	8/4/2023	8/7/2023	8/7/2023	8/11/2023	5/24/2023	5/30/2023	5/24/2023	5/30/2023	12/30/2023	10/3/2023	11/1/2023	11/20/2023	11/2/2023	11/2/2023	11/2/2023	11/3/2025	1/16/2024	1/22/2024	11/8/2023	12/5/2023	12/11/2023	
DASO Deputy Certified	Sheriff's Office	5/20/2023	8/1/2023	8/1/2023	8/1/2023	8/2/2023	8/2/2023	8/11/2023	1/30/2024	2/2/2024	1/30/2024	2/2/2024	12/30/2024	10/19/2023	12/21/2023	12/21/2023	11/6/2023	11/15/2023	11/20/2023	11/28/2023	1/16/2024	1/22/2024	#####	1/9/2024	2/5/2024	
DASO Uncertified Cadet	Sheriff's Office	8/11/2023	8/4/2023	8/4/2023	8/4/2023	8/7/2023	8/7/2023	8/11/2023	5/24/2023	5/30/2023	5/24/2023	5/30/2023	12/30/2023	10/30/2023	11/21/2023	11/28/2023	11/6/2023	12/1/2023	12/1/2023	12/6/2023	1/16/2024	1/22/2024	#####	1/8/2024	2/5/2024	
DASO Uncertified Cadet	Sheriff's Office	8/11/2023	8/4/2023	8/4/2023	8/4/2023	8/7/2023	8/7/2023	8/11/2023	5/24/2023	5/30/2023	5/24/2023	5/30/2023	12/30/2023	10/30/2023	11/17/2023	12/4/2023	11/6/2023	12/1/2023	12/1/2023	12/6/2023	1/16/2024	1/22/2024	#####	1/9/2024	1/2/2024	
Uncertified Cadet - DASO	Sheriff's Office													10/30/2023	11/13/2023	11/29/2023	11/6/2023	12/1/2023	12/1/2023	12/6/2023	1/16/2024	1/22/2024	#####	1/9/2024	1/2/2024	1/2/2024
DASO Uncertified Cadet	Sheriff's Office	8/11/2023	8/4/2023	8/4/2023	8/4/2023	8/7/2023	8/7/2023	8/11/2023	11/22/2023	11/27/2023	11/22/2023	11/27/2023	12/30/2023	11/28/2023	12/21/2023	1/2/2024	1/11/2024	12/8/2023	12/19/2023	12/20/2023	1/16/2024	1/22/2024	1/5/2024	1/25/2024	2/5/2024	
DASO Uncertified Cadet	Sheriff's Office	8/11/2023	8/4/2023	8/4/2023	8/4/2023	8/7/2023	8/7/2023	8/11/2023	11/22/2023	11/27/2023	11/22/2023	11/27/2023	12/30/2023	11/28/2023	12/27/2023	1/19/2024	1/11/2024	12/8/2023	12/19/2023	12/20/2023	1/16/2024	1/22/2024	1/5/2024	1/25/2024	1/29/2024	
DASO Uncertified Cadet	Sheriff's Office	8/11/2023	8/4/2023	8/4/2023	8/4/2023	8/7/2023	8/7/2023	8/11/2023	11/22/2023	11/27/2023	11/22/2023	11/27/2023	12/30/2023	11/28/2023	12/21/2023	1/3/2024	1/17/2024	12/8/2023	12/19/2023	12/20/2023	1/16/2024	1/22/2024	1/25/2024	1/29/2024	1/29/2024	
Uncertified Cadet - DASO	Sheriff's Office								1/10/2024	1/10/2024	1/10/2024	1/10/2024	12/30/2023	12/14/2023	3/20/2024	3/21/2024	3/27/2024	3/18/2024	3/22/2024	3/25/2024	5/9/2024	5/24/2024	4/3/2024	4/16/2024	4/29/2024	4/29/2024
DASO Deputy Certified	Sheriff's Office													12/14/2023	3/20/2024	3/21/2024	3/27/2024	3/18/2024	3/22/2024	3/25/2024	5/9/2024	5/24/2024	4/3/2024	4/3/2024	4/1/2024	4/1/2024
DASO Deputy Certified	Sheriff's Office													12/14/2023	2/20/2024	2/20/2024	4/18/2024	3/22/2024	3/25/2024	3/27/2024	5/9/2024	5/24/2024	4/24/2024	5/3/2024	4/15/2024	4/15/2024
Sex Offender Registration Coordinator	Sheriff's Office	8/11/2023	8/23/2023	8/23/2023	8/23/2023	8/24/2023	8/11/2023	8/25/2023	12/13/2023	12/15/2023	12/13/2023	12/15/2023	9/16/2023	12/18/2023	2/1/2024	2/1/2024	2/8/2024	2/12/2024	2/13/2024	2/14/2024					3/1/2024	
Uncertified Cadet - DASO	Sheriff's Office								1/10/2024	1/10/2024	1/10/2024	12/30/2023	1/17/2024	2/17/2024	3/14/2024	3/20/2024	3/20/2024	3/14/2024	3/22/2024	5/9/2024	5/24/2024	4/2/2024	4/16/2024	4/29/2024	4/29/2024	
Uncertified Cadet - DASO	Sheriff's Office								1/10/2024	1/10/2024	1/10/2024	1/10/2024	12/30/2023	1/17/2024	2/20/2024	2/20/2024	4/18/2024	3/22/2024	3/25/2024	3/27/2024	5/9/2024	5/24/2024	4/24/2024	5/3/2024	6/10/2024	6/10/2024
Uncertified Cadet - DASO	Sheriff's Office								1/10/2024	1/10/2024	1/10/2024	1/10/2024	12/30/2023	1/17/2024	3/12/2024	3/15/2024	4/18/2024	3/22/2024	3/27/2024	4/1/2024	5/9/2024	5/24/2024	4/24/2024	5/3/2024	5/13/2024	5/13/2024
Uncertified Cadet - DASO	Sheriff's Office								1/10/2024	1/10/2024	1/10/2024	1/10/2024	12/30/20													

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DASO Deputy Certified	Sheriff's Office													3/26/2024	3/26/2024		7/26/2024	7/26/2024		7/11/2024	7/11/2024	7/11/2024	7/11/2024	7/11/2024	7/11/2024	7/11/2024
DASO Deputy Certified	Sheriff's Office													3/26/2024	7/1/2024	7/1/2024	7/15/2024	5/15/2024	5/20/2024	5/22/2024	7/9/2024	8/5/2024	6/3/2024	6/18/2024	9/1/2024	9/1/2024
Crime Scene Technician	Sheriff's Office	8/22/2023	1/18/2024	1/22/2024	1/22/2024	2/7/2024	2/7/2024	2/15/2024	4/2/2024	4/4/2024	4/2/2024	4/4/2024	3/22/2024	4/5/2024	5/13/2024	5/13/2024	3/27/2024	5/24/2024	5/24/2024	5/28/2024					6/24/2024	
Crime Scene Technician	Sheriff's Office	8/22/2023	1/18/2024	1/22/2024	1/22/2024	2/7/2024	2/7/2024	2/15/2024	4/2/2024	4/4/2024	4/2/2024	4/4/2024	3/22/2024	4/5/2024	5/7/2024	5/7/2024		8/8/2024	8/15/2024	8/16/2024					9/16/2024	
DASO Deputy Certified	Sheriff's Office								4/11/2024	4/11/2024	4/11/2024	4/11/2024		4/16/2024	7/16/2024	7/15/2024	8/5/2024	5/21/2024	5/23/2024	5/24/2024	7/8/2024	8/5/2024	7/10/2024	7/26/2024	8/25/2024	8/25/2024
DASO Deputy Certified	Sheriff's Office													4/22/2024	7/1/24	7/1/2024	7/15/2024	5/15/2024	5/20/2024	5/22/2024	7/9/2024	8/5/2024	6/3/2024	6/18/2024	8/26/2024	8/26/2024
DASO Deputy Certified	Sheriff's Office													4/22/2024	7/29/2024	7/29/2024	8/19/2024	5/15/2024	5/20/2024	5/22/2024	7/9/2024	8/5/2024	6/10/2024	6/21/2024	9/9/2024	9/9/2024
DASO Deputy Certified	Sheriff's Office													5/9/2024	8/14/2024	8/14/2024	9/7/2024	7/3/2024	7/3/2024	7/11/2024	7/15/2024	8/13/2024	7/29/2024	8/23/2024	8/23/2024	8/23/2024
DASO Deputy Certified	Sheriff's Office													5/9/2024	8/15/2024	8/15/2024	8/19/2024	7/3/2024	7/3/2024	7/11/2024	7/11/2024	8/13/2024	7/22/2024	8/9/2024	8/9/2024	8/9/2024
DASO Deputy Certified	Sheriff's Office													5/9/2024	8/13/2024	8/13/2024	9/17/2024			7/11/2024	7/11/2024	8/13/2024	7/25/2024	8/9/2024	8/9/2024	8/9/2024
DASO Deputy Certified	Sheriff's Office													5/9/2024	8/12/2024	8/12/2024	8/23/2024	6/13/2024	6/13/2024	6/17/2024	6/17/2024	8/5/2024	7/18/2024	7/26/2024	7/26/2024	7/26/2024
DASO Deputy Certified	Sheriff's Office													5/9/2024	9/10/2024	9/10/2024	9/12/2024	6/12/2024	6/13/2024	6/14/2024	6/14/2024	8/5/2024	8/21/2024	7/15/2024	7/15/2024	7/15/2024
DASO Deputy Certified	Sheriff's Office													5/9/2024	7/12/2024	7/12/2024	7/15/2024	6/12/2024	6/13/2024	6/14/2024	7/8/2024	8/5/2024	6/26/2024	7/11/2024	8/5/2024	8/5/2024
DASO Deputy Certified	Sheriff's Office													5/9/2024	8/30/2024	8/30/2024	9/5/2024	7/3/2024	7/3/2024	7/11/2024	7/12/2024	8/13/2024	7/17/2024	8/9/2024	9/9/2024	9/9/2024
DASO Deputy Certified	Sheriff's Office													6/4/2024	8/29/2024	8/29/2024	9/5/2024	7/15/2024	7/19/2024	7/30/2024	7/30/2024	8/30/2024	8/5/2024	8/26/2024	8/26/2024	8/26/2024
DASO Deputy Certified	Sheriff's Office													6/4/2024	9/3/2024	9/3/2024	9/6/2024	7/15/2024	7/19/2024	7/30/2024	8/20/2024	8/30/2024	8/9/24	8/26/2024	9/11/2024	9/11/2024
DASO Deputy Certified	Sheriff's Office													7/1/2024	8/20/2024	8/20/2024	9/17/2024	7/31/2024	7/31/2024	7/31/2024	7/31/2024	8/30/2024	8/6/2024	9/5/2024	9/5/2024	9/5/2024
DASO Deputy Certified	Sheriff's Office													7/1/2024	7/1/2024	8/15/2024	11/4/2024	7/31/2024	7/31/2024	7/31/2024	7/31/2024	7/31/2024	7/31/2024	7/31/2024	7/31/2024	7/31/2024
DASO Deputy Certified	Sheriff's Office													7/1/2024	8/20/2024	8/20/2024	8/23/2024	8/23/2024	7/31/2024	7/31/2024	8/8/2024	8/30/2024	8/5/2024	8/26/2024	9/16/2024	9/16/2024
DASO Deputy Certified	Sheriff's Office													7/1/2024	8/20/2024	8/20/2024	8/23/2024	8/23/2024	7/31/2024	7/31/2024	8/9/2024	8/30/2024	8/6/2024	8/26/2024	9/16/2024	9/16/2024
DASO Deputy Certified	Sheriff's Office													7/1/2024	8/20/2024	8/20/2024	8/23/2024	8/23/2024	7/31/2024	7/31/2024	8/8/2024	8/30/2024	8/6/2024	9/11/2024	9/16/2024	9/16/2024
DASO Deputy Certified	Sheriff's Office													7/1/2024	8/23/2024	8/20/2024	8/23/2024	8/23/2024	7/3/2024	7/31/2024	8/9/2024	8/30/2024	8/9/2024	8/26/2024	9/9/2024	9/9/2024
DASO Deputy Certified	Sheriff's Office													7/1/2024	8/13/2024	8/13/2024	8/19/2024	7/31/2024	7/31/2024	8/7/2024	8/30/2024	8/7/2024	8/26/2024	9/9/2024	9/9/2024	9/9/2024
DASO Deputy Certified	Sheriff's Office													7/1/2024	8/16/2024	8/16/2024	8/23/2024	7/31/2024	7/13/24	7/31/2024	8/8/2024	8/30/2024	8/5/2024	9/11/2024	9/9/2024	9/9/2024
DASO Deputy Certified	Sheriff's Office													7/1/2024	8/13/2024	8/13/2024	8/19/2024	7/30/2024	7/31/2024	7/31/2024	8/13/2024	8/30/2024	8/7/2024	8/26/2024	9/16/2024	9/16/2024
DASO Deputy Certified	Sheriff's Office													7/26/2024	10/31/2024	10/31/2024	11/15/2024	8/15/2024	8/15/2024	8/22/2024	1/14/2025	2/11/2025	1/6/2025	2/5/2025	3/3/2025	3/3/2025
DASO Uncertified Cadet	Sheriff's Office								3/10/2025	3/10/2025	3/10/2025	3/10/2025		2/25/2025	4/11/2025	4/11/2025	4/16/2025			4/11/2025	5/27/2025	6/30/2025	4/23/2025	5/7/2025		
DASO Uncertified Cadet	Sheriff's Office								3/10/2025	3/10/2025	3/10/2025	3/10/2025		2/25/2025			4/17/2025			4/11/2025						
DASO Uncertified Cadet	Sheriff's Office								3/10/2025	3/10/2025	3/10/2025	3/10/2025		2/25/2025	3/14/2025	4/3/2025	4/14/2025			4/11/2025	6/2/2025	6/30/2025	5/5/2025	5/22/2025	5/22/2025	5/22/2025
DASO Uncertified Cadet	Sheriff's Office								3/10/2025	3/10/2025	3/10/2025	3/10/2025		2/25/2025	2/25/2025	4/16/2025	5/6/2025	5/6/2025	5/6/2025	4/11/2025	4/11/2025	6/30/2025	4/28/2025	5/7/2025	7/21/2025	7/21/2025
Sex Offender Registration Coordinator	Sheriff's Office								2/19/2025	2/21/2025	2/21/2025	2/21/2025		2/26/2025	2/26/2025	4/9/2025	4/17/2025	4/17/2025	4/17/2025	4/17/2025	4/17/2025	4/17/2025	4/17/2025	4/17/2025	4/17/2025	4/17/2025
Sex Offender Registration Coordinator	Sheriff's Office								2/19/2025	2/21/2025	2/21/2025	2/21/2025		2/26/2025	2/26/2025	5/19/2025	6/13/2025	7/25/2025	7/25/2025	7/25/2025	7/25/2025	7/25/2025	7/25/2025	7/25/2025	7/25/2025	7/25/2025
DASO Inventory Technician	Sheriff's Office								3/6/2025	3/6/2025	3/6/2025	3/7/2025		3/13/2025	4/14/2025	4/14/2025		5/13/2025	5/13/2025	5/16/2025					6/2/2025	
DASO Uncertified Cadet	Sheriff's Office								3/10/2025	3/10/2025	3/10/2025	3/10/2025		3/24/2025	4/2/2025	4/23/2025	5/7/2025			4/11/2025	4/11/2025		4/30/2025	5/7/2025	5/7/2025	5/7/2025
DASO Certified Deputy	Sheriff's Office													3/26/2025		3/25/2025										
DASO Certified Deputy	Sheriff's Office													3/26/2025		4/29/2025	8/13/2025	8/13/2025	8/13/2025	8/13/2025	8/13/2025	8/13/2025	8/13/2025	8/13/2025	8/13/2025	8/13/2025
DASO Certified Deputy	Sheriff's Office													3/26/2025		4/29/2025	8/13/2025	8/13/2025	8/13/2025	8/13/2025	8/13/2025	8/13/2025	8/13/2025	8/13/2025	8/13/2025	8/13/2025
DASO Uncertified Cadet	Sheriff's Office								3/20/2025	3/20/2025	3/20/2025	3/20/2025		4/8/2025	5/12/2025	5/12/2025	5/19/2025	4/29/2025	4/29/2025	4/30/2025	6/9/2025	6/30/2025	5/21/2025	5/29/2025	7/21/2025	7/21/2025
DASO Uncertified Cadet	Sheriff's Office								3/20/2025	3/20/2025	3/20/2025	3/20/2025		4/8/2025	4/15/2025	5/13/2025	5/19/2025	4/29/2025	4/29/2025	4/30/2025	6/9/2025	6/30/2025	5/13/2025	5/22/2025	7/21/2025	7/21/2025
DASO Uncertified Cadet	Sheriff's Office								3/20/2025	3/20/2025	3/20/2025	3/20/2025		4/8/2025	4/14/2025	5/12/2025	9/5/2025	9/5/2025	9/5/2025	9/5/2025	9/5/2025	9/5/2025	9/5/2025	9/5/2025	9/5/2025	9/5/2025
DASO Uncertified Cadet	Sheriff's Office								3/10/2025	3/10/2025	3/10/2025	3/10/2025		4/8/2025	5/12/2025	5/12/2025	5/19/2025	5/19/2025	5/19/2025	5/19/2025	5/28/2025	6/30/2025	5/16/2025	5/29/2025	8/4/2025	8/4/2025
DASO Uncertified Cadet	Sheriff's Office								3/10/2025	3/10/2025	3/10/2025	3/10/2025		4/28/2025		5/14/2025	7/10/2025			5/21/2025			6/4/2025	6/18/2025	7/21/2025	
DASO Uncertified Cadet	Sheriff's Office								3/20/2025	3/20/2025	3/20/2025	3/20/2025		4/28/2025	5/13/2025	6/6/2025	6/6/2025	6/6/2025	6/6/2025	6/6/2025	6/6/2025	6/6/2025	6/6/2025	6/6/2025	6/6/2025	6/6/2025
DASO Uncertified Cadet	Sheriff's Office								3/10/2025	3/10/2025	3/10/2025	3/10/2025		4/28/2025	4/28/2025	4/28/2025	4/28/2025	4/28/2025	4/28/2025	5/21/2025	5/21/2025	7/10/2025	7/10/2025	6/28/2025	7/21/2025	7/21/2025
DASO Uncertified Cadet	Sheriff's Office								3/10/2025	3/10/2025	3/10/2025	3/10/2025		5/5/2025	5/5/2025	6/5/2025	6/24/2025	5/20/2025	5/20/2025	5/21/2025	6/13/2025	7/10/2025	5/30/2025	6/13/2025	6/13/2025	6/13/2025
DASO Uncertified Cadet	Sheriff's Office								3/10/2025	3/10/2025	3/10/2025	3/10/2025		5/5/2025	5/5/2025	5/25/2025	5/25/2025	5/25/2025	5/25/2025	5/21/2025	5/21/2025	7/10/2025	7/10/2025	6/18/2025	7/28/2025	7/28/2025
DASO Certified Deputy	Sheriff's Office								5/27/2025	5/27/2025	5/27/2025	5/27/2025		5/22/2025	7/7/2025	7/7/2										

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting / Discussion with Department re: JD	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Background Report Completed	Date Recruitment Packet Delivered to HR	Compensation Calculated/ Emailed to Department	Department Routes P1 for Approval	Contingent Offer made by Recruiter	Psychological Scheduled	Psychological Report Received	Medical Scheduled	Medical Report Received	Start Date	Time to Hire Final
Inventory Technician	Sheriff's Office	9/24/2022	9/26/2022	9/26/2022	10/12/2022	9/26/2022	9/26/2022	9/26/2022	10/19/2022	10/24/2022	10/19/2022	10/24/2022	10/4/2022													N/A
Crime Scene Technician	Sheriff's Office								11/13/2023	11/14/2023	11/13/2023	11/14/2023														
DASO Certified Deputy	Sheriff's Office														6/13/2025	7/14/2025	9/5/2025									

App Submitted	App Reviewed	Email sent to candidate re: date of written	Written Test	PAT	Firearm Qualifications	Interview	Reference Checks Complete	Background Submitted to Justfacts	Justfacts Report Received	Background Interview Conducted	Background Report Completed	Investigator Approves	PSD Supervisor Approves	Lt. Approves	Captain Approves	Major Approves	Sheriff Approves	Delivered packet to HR	Comp provided to Recruiter	Contingent Offer made by HR	Psychological Scheduled	Psychological Report Received	Medical Scheduled	Medical Report Received	Official Offer Made	Start Date
6/29/2020	7/2/2020	7/17/2020	7/20/2020	7/20/2020	N/A	7/30/2020	10/22/2020	N/A	N/A	9/10/2020	10/22/2020		10/26/2020	10/28/2020		10/29/2020	10/29/2020	11/6/2020		11/12/2020	11/16/2020		11/17/2020			4/12/2021
6/27/2020	7/13/2020	7/17/2020	7/20/2020	7/20/2020	N/A	7/30/2020	10/14/2020	N/A	N/A	9/15/2020	9/24/2020	10/26/2020	10/26/2020	10/27/2020		10/27/2020	10/29/2020	10/30/2020		11/12/2020	11/16/2020	11/23/2020	11/17/2020			4/12/2021
6/27/2020	7/13/2020	7/24/2020	7/27/2020	7/27/2020	N/A	7/30/2020	10/28/2020	N/A	N/A	10/23/2020	10/28/2020	10/28/2020	10/28/2020	10/28/2020		10/29/2020	10/29/2020	11/6/2020		11/13/2020	11/16/2020		11/17/2020		2/18/2021	4/12/2021
6/25/2020	7/13/2020	7/17/2020	8/18/2020	8/18/2020	N/A	8/20/2020	9/10/2020	N/A	N/A	9/10/2020	9/10/2020	9/10/2020	9/11/2020	9/15/2020		9/16/2020	9/22/2020	9/30/2020	10/7/2020	10/20/2020	10/27/2020		10/30/2020	11/17/2020		4/12/2021
6/15/2020	7/13/2020	7/17/2020	7/20/2020	7/20/2020	N/A	7/30/2020	9/25/2020	N/A	N/A	9/15/2020	9/25/2020	9/28/2020	10/1/2020	10/5/2020		10/5/2020	10/6/2020	10/20/2020		10/21/2020	10/27/2020	11/9/2020	10/30/2020	11/17/2020	2/18/2021	4/12/2021
6/12/2020	7/14/2020	8/8/2020	8/10/2020	8/10/2020	N/A	8/13/2020	10/26/2020	N/A	N/A	9/15/2020	10/19/2020	10/29/2020	10/29/2020	11/3/2020		10/3/2020	10/4/2020	11/13/2020		11/16/2020	11/9/2020 11/12/2020	12/4/2020	11/23/2020	12/3/2020		4/12/2021
8/4/2020	8/5/2020																									
6/1/2020	7/15/2020	7/17/2022	7/20/2020	7/20/2020	N/A	7/30/2020	10/7/2020	N/A	N/A	9/16/2020	10/7/2020	10/7/2020		10/8/2020		10/9/2020	10/13/2020			10/22/2020	11/3/2020	11/12/2020	11/4/2020			4/12/2021
5/31/2020	6/30/2020	7/17/2020	7/20/2020	7/20/2020	N/A	7/30/2020	9/18/2020	N/A	N/A	9/10/2020	9/18/2020	9/18/2020	9/18/2020	9/28/2020		9/28/2020	10/6/2020	10/20/2020		10/21/2020	10/27/2020	11/9/2020	11/2/2020	11/17/2020	2/18/2021	4/12/2021
6/30/2020	7/1/2020																									
5/27/2020	7/1/2020	7/24/2020	7/27/2020	7/27/2020	N/A	8/6/2020	10/28/2020	N/A	N/A	10/23/2020	10/28/2020	10/29/2020	11/12/2020	11/3/2020		11/3/2020	11/4/2020	11/12/2020		11/18/2020	11/30/2020	12/4/2020	11/23/2020	12/3/2020		4/12/2021
6/1/2020																										
5/11/2020	8/4/2020	8/8/2020	8/10/2020	8/10/2020	N/A	8/13/2020	10/1/2020	N/A	N/A	9/29/2020	10/1/2020	10/1/2020	10/1/2020	10/5/2020		10/5/2020	16/6/2020	10/19/2020		10/21/2020	11/3/2020		11/3/2020			4/12/2021
5/13/2020																										
4/24/2020	7/29/2020	8/8/2020	8/10/2020	8/10/2020	N/A	8/13/2020	10/2/2020	N/A	N/A	9/29/2020	10/2/2020	10/2/2020	10/2/2020	10/5/2020		10/5/2020	10/6/2020	10/8/2020		10/20/2020	11/16/2020		11/2/2020	11/17/2020	2/18/2021	4/12/2021
4/24/2020	7/29/2020	8/1/2020	8/3/2020	8/3/2020	N/A	8/6/2020	9/30/2020	N/A	N/A	9/29/2020	9/30/2020	9/30/2020	9/30/2020	10/1/2020		10/1/2020	10/6/2020	10/8/2020		10/20/2020	10/27/2020		11/3/2020	11/17/2020	2/18/2021	4/12/2021
6/19/2020	8/4/2020	8/11/2020	8/17/2020	8/17/2020	N/A	8/20/2020	9/9/2020	N/A	N/A	9/9/2020	9/9/2020	9/9/2020	9/10/2020	9/15/2020		9/16/2020	9/22/2020	9/30/2020		10/20/2020	10/27/2020	11/9/2020	10/28/2020	11/17/2020		4/12/2021
6/30/2020	7/2/2020	7/24/2020	7/27/2020	7/27/2020	N/A	7/30/2020	11/4/2020	N/A	N/A	9/25/2020	11/4/2020	10/28/2020	10/29/2020	10/29/2020		10/29/2020	10/30/2020	11/6/2020		11/16/2020	11/30/2020	12/4/2020	11/20/2020			N/A
5/16/2020	7/1/2020		8/19/2020	8/19/2020	N/A	8/20/2020	9/22/2020	N/A	N/A	9/11/2020	9/22/2020	9/22/2020	9/22/2020	9/28/2020			10/6/2020	10/8/2020		10/20/2020	10/27/2020		11/4/2020	11/17/2020		N/A
10/25/2020	10/28/2020	N/A	N/A	11/16/2020	11/16/2020	11/17/2020	11/23/2020	N/A	N/A	12/3/2020	12/15/2020	12/18/2020	1/7/2021	1/8/2021		1/11/2021	1/13/2021	1/15/2021	2/4/2021	2/10/2021	2/15/2021	2/25/2021	2/16/2021	3/17/2021	N/A	
10/21/2020	10/28/2020	N/A	N/A	11/16/2020	11/16/2020	11/18/2020	12/14/2020	N/A	N/A	12/2/2020	12/14/2020	12/14/2020	12/15/2020	12/15/2020			12/17/2020	1/15/2021	1/11/2021	1/29/2021	2/15/2021	2/25/2021	2/10/2021		3/2/2021	3/15/2021
10/14/2020	10/20/2020	N/A	N/A	11/16/2020	11/16/2020	11/18/2020	12/17/2020	N/A	N/A	12/2/2020	12/17/2020	12/17/2020	12/17/2020	12/17/2020		12/18/2020	12/19/2020	1/8/2021	1/14/2021	1/22/2021	1/1/2021		2/10/2021		2/25/2021	3/29/2021
10/6/2020	10/29/2020	N/A	N/A	11/16/2020	11/16/2020	11/17/2020	1/12/2021	N/A	N/A	12/3/2020	1/12/2021	1/5/2021	1/14/2021	1/15/2021		1/15/2021	1/21/2021	1/25/2021	2/11/2021	2/16/2021	3/3/2021		2/22/2021		3/16/2021	3/29/2021
6/27/2021	7/8/2021	N/A	N/A	8/9/2021	8/9/2021	8/10/2021	9/13/2021	N/A	N/A	8/31/2021	9/13/2021	9/13/2021	9/13/2021	9/14/2021	9/14/2021		9/20/2021	9/22/2021	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
7/12/2021	7/19/2021																									

App Submitted	App Reviewed	Email sent to candidate re: date of written	Written Test	PAT	Firearm Qualifications	Interview	Reference Checks Complete	Background Submitted to Justifacts	Justifacts Report Received	Background Interview Conducted	Background Report Completed	Investigator Approves	PSD Supervisor Approves	Lt. Approves	Captain Approves	Major Approves	Sheriff Approves	Delivered packet to HR	Comp provided to Recruiter	Contingent Offer made by HR	Psychological Scheduled	Psychological Report Received	Medical Scheduled	Medical Report Received	Official Offer Made	Start Date	
3/3/2021	3/29/2021	N/A	N/A	4/20/2021	4/20/2021	4/21/2021	5/23/2022	N/A	N/A	5/25/2021	6/12/2021	6/13/2021	6/24/2021	6/29/2021	7/6/2021			5/1/2022	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
										4/15/2022	4/28/2022	5/3/2022	5/3/2022		5/9/2022	5/6/2022	5/9/2022										
10/19/2021	11/9/2021	12/6/2021	12/14/2021	12/14/2021	N/A	12/15/2021	2/17/2022	N/A	N/A	2/10/2022	2/23/2022	2/18/2022	2/23/2022	2/23/2022	2/23/2022		2/24/2022	3/2/2022	3/7/2022	3/10/2022	3/15/2022			3/16/2022	4/4/2022	4/4/2022	4/11/2022
9/10/2021	10/30/2021	10/30/2021	11/9/2021	11/9/2021	N/A	12/1/2021	12/21/2021	N/A	N/A	12/8/2021	12/21/2021	12/21/2021	1/10/2022	12/21/2021	1/10/2022		1/10/2022	1/31/2022	2/2/2022	2/18/2022	3/8/2022			2/28/2022		3/15/2022	3/21/2022
10/3/2021	11/8/2021	11/29/2021	11/30/2021	11/30/2021	N/A	12/1/2021	2/28/2022	N/A	N/A	2/15/2022	2/28/2022	2/28/2022		2/28/2022	3/8/2022		3/8/2022	3/9/2022	4/1/2022	4/4/2022	4/5/2022 & 4/6/2022			4/6/2022		4/19/2022	5/9/2022
11/17/2021	12/1/2021	12/10/2021	12/14/2021	12/14/2021	N/A	12/15/2021	3/2/2022	N/A	N/A	2/1/2022	3/2/2022	3/2/2022	3/2/2022	3/7/2022	3/7/2022		3/8/2022		3/23/2022	3/25/2022	4/5/2022 & 4/6/2022			4/6/2022		4/21/2022	5/9/2022
11/23/2021	12/1/2021	12/6/2021	12/7/2021	12/7/2021	N/A	12/8/2021	2/22/2022	N/A	N/A	1/19/2022	2/1/2022	2/1/2022	2/24/2022	2/1/2022	2/2/2022		2/7/2022		3/7/2022	3/10/2022	3/15/2022			3/16/2022	4/4/2022	4/4/2022	5/2/2022
	12/3/2021																										
10/15/2021	11/10/2021	12/6/2021	12/7/2021	12/7/2021	N/A	12/8/2021	1/26/2022	N/A	N/A	1/19/2022	2/1/2022	2/1/2022	2/24/2022	2/1/2022	2/2/2022		2/7/2022	2/24/2022	3/7/2022	3/10/2022	3/15/2022			3/18/2022		4/13/2022	5/2/2022
10/5/2021	11/8/2021	11/29/2021	11/30/2021	11/30/2021	N/A	12/1/2021	2/24/2022	N/A	N/A	2/16/2022	3/23/2022	2/24/2022	3/1/2022	2/24/2022				3/23/2022	3/25/2022	3/30/2022	4/5/2022 & 4/6/2022			4/7/2022		4/21/2022	5/2/2022
											2/24/2022																
9/12/2021	10/30/2021	11/11/2021	11/8/2021	12/8/2021	N/A	12/1/2021	3/9/2022	N/A	N/A	2/16/2022	2/24/2022	2/24/2022	2/24/2022	2/24/2022	2/25/2022		3/1/2022	3/2/2022		3/10/2022	3/15/2022			3/14/2022	4/4/2022	4/4/2022	4/11/2022
9/7/2021	10/22/2021	7/29/2021	10/26/2021	10/26/2021	N/A	10/27/2021	12/21/2021	N/A	N/A	12/2/2021	12/21/2021	12/22/2021	1/10/2022	1/12/2022	1/13/2022		1/14/2022	2/9/2022	2/22/2022	2/17/2022	2/23/2022			2/28/2021	3/7/2022	3/15/2022	4/25/2022
9/14/2021																											
11/29/2021	12/1/2021	12/2/2021	12/7/2021		N/A	12/8/2021	3/10/2022	N/A	N/A	1/19/2022	3/10/2022	2/1/2022		2/1/2022	2/2/2022		2/7/2022	3/21/2022	3/22/2022	3/23/2022	4/5/2022 & 4/6/2022			4/6/2022		4/20/2022	5/2/2022
											2/1/2022																
11/5/2021	11/8/2021	12/6/2021	12/7/2021	12/7/2021	N/A	12/8/2021	1/26/2022	2/28/2022	3/1/2022	1/19/2022	2/1/2022	2/1/2022		2/1/2022	2/2/2022	2/7/2022	2/1/2022	2/24/2022	3/2/2021	3/3/2022	3/22/2022			3/9/2022	4/4/2022	4/4/2022	4/25/2022
9/1/2021	10/22/2021	12/3/2021	12/7/2021	12/7/2021	N/A	12/8/2021	2/24/2022	N/A	N/A	1/12/2022	3/1/2022	3/1/2022	3/1/2022	3/2/2022	3/8/2022		3/8/2022	3/9/2022	3/11/2022	3/15/2022	4/5/2022 & 4/6/2022			3/25/2022		4/13/2022	N/A
12/1/2021	12/2/2021							N/A	N/A																		
10/1/2020	10/29/2021	N/A	N/A	1/18/2022	1/18/2022	1/19/2022	2/23/2022	5/18/2022	5/18/2022	2/2/2022	5/10/2022	2/14/2022		2/25/2022	3/24/2022		3/24/2022	3/28/2022	5/31/2022 & 7/18/2022	7/20/2022							
Applied 10/28/2021																											
4/4/2022	4/5/2022	N/A	N/A	4/26/2022	4/26/2022	4/27/2022	6/24/2022	7/14/2022	7/15/2022	5/25/2022	6/28/2022	6/28/2022	7/5/2022		7/5/2022	7/5/2022	7/6/2022	7/12/2022	7/19/2022	7/29/2022	8/9/2022	8/16/2022	8/10/2022				
6/2/2022	6/13/2022	N/A	N/A	6/28/2022	6/28/2022	6/29/2022	7/18/2022	N/A	N/A	6/30/2022	7/19/2022	7/19/2022	7/19/2022		7/25/2022	7/25/2022	7/25/2022	7/28/2022	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	

App Submitted	App Reviewed	Email sent to candidate re: date of written	Written Test	PAT	Firearm Qualifications	Interview	Reference Checks Complete	Background Submitted to Justfacts	Justfacts Report Received	Background Interview Conducted	Background Report Completed	Investigator Approves	PSD Supervisor Approves	Lt. Approves	Captain Approves	Major Approves	Sheriff Approves	Delivered packet to HR	Comp provided to Recruiter	Contingent Offer made by HR	Psychological Scheduled	Psychological Report Received	Medical Scheduled	Medical Report Received	Official Offer Made	Start Date
6/13/2022	6/14/2022																									
8/8/2022	N/A	N/A	N/A	8/23/2022	8/23/2022	8/24/2022	9/12/2022	9/16/2022	9/19/2022	8/30/2022	9/13/2022	9/13/2022	9/13/2022		9/14/2022	9/14/2022	9/14/2022	9/15/2022	9/21/2022	made by Stacy 9/28/2022	10/4/2022	10/13/2022	10/6/2022	10/18/2022	Done by Stacy 10/21/2022	11/7/2022
7/20/2022	8/10/2022	N/A	N/A	8/23/2022	8/23/2022	8/24/2022	9/15/2022	N/A	N/A	8/30/2022	9/27/2022	9/16/2022	9/20/2022		9/21/2022	9/21/2022	9/21/2022	9/22/2022	9/27/2022	10/6/2022	10/25/2022	11/1/2022	10/10/2022	10/21/2022	10/28/2022	11/14/2022
re-submitted 7/30/2022																										
10.30.22	11.8.22	11.8.22	11.9.22	11.9.22	N/A	11.30.22	1.4.23	N/A	N/A	1.9.23	1.9.23	1.5.23	1.9.23		1.11.23	1.11.23	1.11.23	1.13.23	1.23.23	1.26.23	1.31.23	2.6.23	1.30.23	2.24.23		
10.13.22	11.1.22	11.1.22	11.8.22	11.8.22	N/A	11.9.22	12.22.22	N/A	N/A	12.13.22	12.13.22	12.14.22	12.19.22		12.20.22	12.20.22	12.20.22	1.4.23	1.13.23	1.26.23	1.31.23	2.6.23	2.5.23	2.24.23		3.13.23
9.28.22	10.19.22	10.19.22	11.29.22	11.8.22	N/A	11/30/2022	1.4.23	N/A	N/A	1.19.23	1.19.23	1.19.23	1.19.23		1.23.23	1.23.23	1.23.23	1.24.23	2.3.23	2.8.23	2.14.23	2.17.23	2.13.23	3.3.23	2.8.23	2.26.23
9.19.22	9.23.22	10.19.23	10.25.22	10.25.22	N/A	10.25.22	11.29.22	N/A	N/A	12.1.22	12.1.22	12.1.22	12.1.22		12.2.22	12.2.22	12.6.22	12.8.22	12.28.22	1.20.23	1.31.23	2.6.23	1.25.23	2.2.23		3.20.23
9.8.22	10.19.22	10.19.22	10.25.22	10.25.22	N/A	10.26.22	12.6.22	N/A	N/A	12.6.22	12.13.22	2.13.22	12.13.22		12.15.22	12.15.22	12.19.22	1.4.2023	1.13.23	1.26.23	2.21.23	2.27.23	2.17.23	3.19.23	1.26.23	3.19.23
9.9.22	10.18.22	10.18.22	12.6.22	12.6.22	N/A	1.12.23	1.10.23	N/A	N/A	1.12.23	1.17.22	1.17.23	1.17.23		1.18.23	1.19.23	1.19.23	1.20.23	2.3.23	2.8.23	2.14.23	2.17.23	2.13.23	3.3.23	2.8.23	2.13.23
12.29.22	1.16.23	1.17.23	1.31.23	1.17.23	N/A	1.18.23	2.10.23			2.10.23	2.10.23	2.13.23	2.14.23		2.14.23	2.14.23	2.14.23	2.15.23	2.2.24.23	3.2.23					.	
								2.17.23	2.24.23																	
9.22.22	9.22.22	12.6.22	12.13.22	12.13.22	N/A	12.14.22	1.27.23	N/A	N/A	1.30.23	1.30.23	1.30.23	2.1.3		2.2.23	2.2.23	2.3.23	2.7.23	2.8.23	2.8.23	2.21.23	2.27.23	2.20.23	3.3.23		
9.16.22	10.19.22	10.18 & 10.21.22	11.29.22	11.29.22	N/A	1.30.22	1.11.23	N/A	N/A	1.27.23	2.1.23	2.1.23	2.1.23		2.2.23	2.2.23	2.3.23	2.7.23	2.8.23	2.13.23	2.21.23	2.27.23	2.20.23			
12.1.22	12.1.22	12.13.22	12.13.22	12.13.22	N/A	12.14.22	2.15.23	2.10.23	2.15.23	2.14.23	2.14.23	2.15.23	2.15.23		2.17.23	2.21.23	2.22.23	2.23.23	3.9.23							
											3.7.23															
10.18.22	11.1.22	11.1.22	11.8.22	11.8.22	N/A	11.9.22	12.12.22	N/A	N/A	12.14.22	12.14.22	12.14.22	12.20.22		12.20.22	12.20.22	12.20.22	1.4.23	1.25.23	2.21.23	2.27.23	2.1.23	2.24.23	3.13.23		3.13.23
						5.17.23	6.1.23		5.31.23									6.6.23	6.21.23	6.27.23	5.30.23	6.7.23	6.5.23	7.3.23		7.17.23

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting/ Discussion with Department re: ID	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Background Interview Conducted	Background Report Completed	Recruitment Packet Delivered to HR	Salary Emailed to Department	Department Routes P1 for Approval	Start Date	Psychological Scheduled	Psychological Report Received	Medical Scheduled	Medical Report Received	Time to Hire Final
DC Lieutenant	Detention Center	10/18/2021	1/21/2022	1/21/2022	1/21/2022	1/24/2022	1/21/2022	1/24/2022					2/21/2022	6/9/2022	6/16/2022	9/2/2022		6/17/2022	7/22/2022	9/6/2022	9/25/2022					225
DC Document Technician-Disposition	Detention Center	3/26/2022	2/11/2022	2/11/2022	2/11/2022	2/11/2022	2/11/2022	2/14/2022	3/29/2022	3/29/2022	3/15/2022	3/15/2022	2/28/2022	3/15/2022	3/17/2022	3/28/2022	3/29/2022	3/29/2022	3/29/2022	3/30/2022	4/11/2022					46
DC Accounting Specialist	Detention Center	8/28/2021	3/7/2022	3/7/2022	3/7/2022	3/7/2022	3/7/2022	3/7/2022	3/7/2022				3/22/2022	4/14/2022	4/20/2022	4/22/2022	4/26/2022	4/22/2022	4/26/2022	4/27/2022	5/16/2022					52
Detention Officer Trainee	Detention Center	8/1/2020	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	4/6/2022	4/6/2022	6/3/2022	6/3/2022	6/14/2022	6/3/2022	6/16/2022	6/6/2022	6/7/2022	6/17/2022	6/22/2022	6/22/2022	7/5/2022					106
Detention Officer Trainee	Detention Center	6/20/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	4/6/2022	4/6/2022	3/25/2022	3/25/2022	6/14/2022	3/25/2022	3/29/2022	3/28/2022	3/29/2022	4/6/2022	4/6/2022	4/7/2022	5/31/2022					28
Detention Officer Trainee	Detention Center	10/24/2020	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	4/6/2022	4/6/2022	4/28/2022	4/28/2022	6/14/2022	3/25/2022	3/29/2022	4/13/2022	4/19/2022	5/5/2022	5/10/2022	5/10/2022	5/31/2022					58
Detention Officer Trainee	Detention Center	1/1/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	4/6/2022	4/6/2022	5/11/2022	5/11/2022	6/14/2022	3/25/2022	3/29/2022	5/16/2022	5/16/2022		5/27/2022	5/27/2022	7/11/2022					78
Detention Officer Trainee	Detention Center	2/16/2019	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	4/6/2022	4/6/2022	6/16/2022	6/16/2022	6/14/2022	6/16/2022	6/27/2022	6/24/2022	6/28/2022	6/29/2022	7/11/2022	7/11/2022	7/18/2022					120
Detention Officer Trainee	Detention Center	N/A	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	4/6/2022	4/6/2022	6/16/2022	6/16/2022	6/14/2022	6/16/2022	6/29/2022	6/24/2022	6/28/2022	7/6/2022	7/11/2022							N/A
Detention Officer Trainee	Detention Center	10/24/2020	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	4/6/2022	4/6/2022	6/3/2022	6/3/2022	6/14/2022	6/3/2022	6/16/2022	6/3/2022	6/21/2022	6/16/2022	6/22/2022	6/28/2022	7/5/2022					108
Detention Officer Trainee	Detention Center	10/24/2020	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	4/6/2022	4/6/2022	6/3/2022	6/3/2022	6/14/2022	6/3/2022	6/28/2022			7/19/2022	7/22/2022							N/A
Detention Officer Trainee	Detention Center	6/20/2020	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	4/6/2022	4/6/2022	5/20/2022	5/20/2022	6/14/2022	5/20/2022	6/13/2022	5/25/2022	5/31/2022	6/15/2022	6/22/2022	6/28/2022	7/5/2022					108
Detention Officer Trainee	Detention Center	8/14/2021	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	4/6/2022	4/6/2022	5/20/2022	5/20/2022	6/14/2022	5/20/2022	6/13/2022	5/25/2022	6/7/2022	6/15/2022	6/22/2022	6/28/2022	10/3/2022					108
Detention Officer Trainee	Detention Center	7/2/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	4/6/2022	4/6/2022	5/20/2022	5/20/2022	6/14/2022	5/20/2022	6/14/2022	5/25/2022	5/27/2022	6/15/2022	5/27/2022	6/28/2022	8/15/2022					109
Detention Officer Trainee	Detention Center	10/24/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	5/18/2022	5/18/2022	5/18/2022	5/18/2022	6/14/2022	5/18/2022	6/3/2022	5/18/2022	5/20/2022	6/7/2022	6/11/2022	6/11/2022	6/27/2022					92
Detention Officer Trainee	Detention Center	10/24/2020	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	4/6/2022	4/6/2022	5/23/2022	5/23/2022	6/14/2022	5/20/2022	6/13/2022	5/23/2022	5/24/2022	5/31/2022	6/10/2022	6/11/2022	8/22/2022					95
Detention Officer Trainee	Detention Center	2/18/2017	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	3/14/2022	4/6/2022	4/6/2022	5/11/2022	5/11/2022	6/14/2022	5/20/2022	6/13/2022	5/16/2022	5/16/2022		6/11/2022	6/11/2022	7/5/2022					92
DC Document Technician-Disposition	Detention Center	6/19/2021	3/22/2022	3/22/2022	3/22/2022	3/23/2022	3/22/2022	3/23/2022					4/13/2022	4/29/2022	5/4/2022	5/2/2022	5/3/2022	5/5/2022	5/10/2022	5/17/2022	5/31/2022					58
DC Document Technician-Reception	Detention Center	5/8/2021	3/23/2022	3/23/2022	3/23/2022	3/23/2022	3/23/2022	3/24/2022					4/11/2022	6/21/2022	7/14/2022	7/14/2022	7/15/2022	7/15/2022	7/27/2022	7/27/2022	8/8/2022					130
Accounting Specialist	Detention Center	6/4/2022	4/21/2022	4/21/2022	4/21/2022	4/21/2022	4/21/2022	4/21/2022	7/5/2022				5/6/2022	6/22/2022	6/30/2022	8/1/2022	8/2/2022	8/4/2022	9/1/2022	9/1/2022	9/6/2022					138
Accounting Specialist	Detention Center	6/4/2022	4/21/2022	4/21/2022	4/21/2022	4/21/2022	4/21/2022	4/21/2022	7/5/2022				5/6/2022	6/22/2022	6/30/2022	7/7/2022	7/7/2022	7/5/2022	7/15/2022	7/25/2022						95
Document Technician-Dispositions	Detention Center	9/25/2021	5/9/2022	5/9/2022	5/9/2022	5/9/2022	5/9/2022	5/9/2022					5/31/2022	6/30/2022	8/23/2022	8/23/2022	8/25/2022	8/25/2022	9/6/2022	9/6/2022	9/19/2022					121
Document Technician-Dispositions	Detention Center	3/26/2022	5/9/2022	5/9/2022	5/9/2022	5/9/2022	5/9/2022	5/9/2022					5/31/2022	6/30/2022	7/25/2022	7/29/2022	7/29/2022	7/29/2022	8/19/2022	8/23/2022	9/19/2022					109
Document Technician-Dispositions	Detention Center	9/25/2021	5/9/2022	5/9/2022	5/9/2022	5/9/2022	5/9/2022	5/9/2022					5/31/2022	6/30/2022	7/19/2022	7/6/2022	7/7/2022	7/20/2022	7/25/2022	7/27/2022						81
DC Officer Trainee	Detention Center 1	10/22/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	9/16/2022	9/16/2022	9/16/2022	9/16/2022	9/15/2022	9/16/2022	11/3/2022	9/16/2022	11/3/2022	11/7/2022	11/9/2022	11/10/2022	11/28/2022	12/6/2022	11/1/2022	1/3/2023	1/19/2023	152
DC Officer Trainee	Detention Center 2	9/24/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	9/16/2022	9/16/2022	9/16/2022	9/16/2022	9/15/2022	9/16/2022	11/3/2022	9/16/2022	11/3/2022	11/7/2022	11/10/2022	11/10/2022	11/28/2022	12/6/2022	12/13/2022	12/27/2022	1/5/2023	152
DC Officer Trainee	Detention Center 3	1/1/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	8/25/2022	8/25/2022	8/25/2022	8/25/2022	9/15/2022	8/25/2022	9/26/2022	9/26/2022	10/4/2022	9/27/2022	9/30/2022	9/30/2022	10/11/2022					110
DC Officer Trainee	Detention Center 4	6/20/2020	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	8/10/2022	8/10/2022	8/10/2022	8/10/2022	9/15/2022	8/11/2022	8/31/2022	8/18/2022	10/3/2022	9/1/2022	9/15/2022	9/15/2022	9/26/2022					93

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting/ Discussion with Department re: ID	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Background Interview Conducted	Background Report Completed	Recruitment Packet Delivered to HR	Salary Emailed to Department	Department Routes P1 for Approval	Start Date	Psychological Scheduled	Psychological Report Received	Medical Scheduled	Medical Report Received	Time to Hire Final
DC Officer Trainee	Detention Center 5	1/30/2021	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	7/22/2022	7/22/2022	7/22/2022	7/22/2022	9/15/2022	7/22/2022	8/8/2022	7/28/2022	10/3/2022	8/11/2022	8/19/2022	9/1/2022	9/19/2022					79
DC Officer Trainee	Detention Center 6	8/13/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	7/14/2022	7/14/2022	7/14/2022	7/14/2022	9/15/2022	7/14/2022	8/5/2022	8/18/2022	7/28/2022	8/8/2022	8/19/2022	8/19/2022	8/29/2022					69
DC Officer Trainee	Detention Center 7	10/27/2018	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	7/8/2022	7/8/2022	7/8/2022	7/8/2022	9/15/2022	7/8/2022	8/4/2022	7/15/2022	8/15/2022	8/4/2022	8/19/2022	8/19/2022	8/29/2022					69
DC Officer Trainee	Detention Center 8	6/20/2020	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	9/16/2022	9/16/2022	9/16/2022	9/16/2022	9/15/2022	7/18/2022	8/13/2022	7/29/2022	7/19/2022	8/8/2022	8/19/2022	9/1/2022	9/12/2022					84
DC Officer Trainee	Detention Center 9	6/22/2019	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	7/8/2022	7/8/2022	7/8/2022	7/8/2022	9/15/2022	7/8/2022	7/22/2022	7/14/2022	8/2/2022	8/8/2022	8/8/2022	8/8/2022	10/3/2022					61
DC Officer Trainee	Detention Center 10	7/2/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	7/8/2022	7/8/2022	7/8/2022	7/8/2022	9/15/2022	7/8/2022	8/2/2022	7/15/2022	7/18/2022	8/8/2022	8/19/2022	8/19/2022	10/17/2022				10/7/2022	114
DC Officer Trainee	Detention Center 11	7/6/2019	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	7/1/2022	7/1/2022	7/1/2022	7/1/2022	9/15/2022	7/1/2022	7/28/2022	7/11/2022	7/12/2022	8/8/2022	8/9/2022	8/10/2022	10/11/2022					56
DC Officer Trainee	Detention Center 12	4/24/2021	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	7/8/2022	7/8/2022	7/8/2022	7/8/2022	9/15/2022	7/8/2022	7/22/2022	7/22/2022	7/22/2022	7/22/2022	8/8/2022	8/8/2022	8/15/2022					56
DC Officer Trainee	Detention Center 13	10/24/2020	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	7/8/2022	7/8/2022	7/8/2022	7/8/2022	9/15/2022	7/8/2022	7/22/2022	7/20/2022	7/20/2022	7/22/2022	8/8/2022	8/8/2022	9/26/2022					55
DC Officer Trainee	Detention Center 14	12/31/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	10/5/2022	10/5/2022	10/5/2022	10/5/2022	9/15/2022	10/6/2022	1/20/2023	10/7/2022	2/2/2022	1/20/2023	1/24/2023	1/24/2023	3/20/2023	2/14/2023	2/17/2023	2/24/2023	2/28/2023	224
DC Officer Trainee	Detention Center 15	12/31/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	9/16/2022	9/16/2022	9/16/2022	9/16/2022	9/15/2022	9/16/2022	11/16/2022		9/27/2022	11/16/2022	3/17/2023	3/17/2023	4/10/2023					288
DC Officer Trainee	Detention Center 16	9/24/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	9/16/2022	9/16/2022	9/16/2022	9/16/2022	9/15/2022	9/16/2022	10/25/2022	10/4/2022	10/4/2022	10/12/2022	10/27/2022	10/28/2022	11/14/2022					135
DC Officer Trainee	Detention Center 17	10/24/2020	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	9/9/2022	9/9/2022	9/9/2022	9/9/2022	9/15/2022	9/9/2022	10/21/2022	9/19/2022	9/23/2022	10/25/2022	10/25/2022	10/24/2022	11/14/2022					132
DC Officer Trainee	Detention Center 18	7/6/2019	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	9/8/2022	9/8/2022	9/8/2022	9/8/2022	9/15/2022	9/9/2022	10/7/2022	9/12/2022	10/11/2022	10/12/2022	10/21/2022	10/24/2022	2/27/2023	11/8/2022	11/15/2022	11/29/2022	12/6/2022	131
DC Officer Trainee	Detention Center 19	2/16/2019	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	9/8/2022	9/8/2022	9/8/2022	9/8/2022	9/15/2022	9/9/2022	10/18/2022	9/12/2022	10/21/2022	10/25/2022	10/25/2022	10/25/2022	3/20/2023	12/6/2022	12/13/2022	1/9/2023	1/24/2023	133
DC Officer Trainee	Detention Center 20	7/6/2019	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	8/12/2022	8/12/2022	8/12/2022	8/12/2022	9/15/2022	8/12/2022	9/1/2022	8/12/2022	9/1/2022	9/17/2022	9/19/2022	9/20/2022	12/12/2022	10/4/2022	10/13/2022	10/21/2022	11/14/2022	154
DC Officer Trainee	Detention Center 21	6/9/2018	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	8/10/2022	8/10/2022	8/10/2022	8/10/2022	9/15/2022	8/11/2022	9/7/2022	8/12/2022	9/7/2022	9/8/2022	9/24/2022	9/29/2022	12/12/2022	10/25/2022	11/1/2022	11/10/2022	11/22/2022	167
DC Officer Trainee	Detention Center 22	5/8/2021	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	8/12/2022	8/12/2022	8/12/2022	8/12/2022	9/15/2022	8/12/2022	9/12/2022	8/12/2022	9/12/2022	9/15/2022	9/29/2022	9/29/2022	1/17/2023	11/29/2022	12/13/2022	12/13/2022	12/28/2022	107
DC Officer Trainee	Detention Center	N/A	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	8/25/2022	8/25/2022	8/25/2022	8/25/2022	9/15/2022	8/25/2022	10/17/2022	8/25/2022	10/25/2022	10/27/2022	10/27/2022	10/27/2022						N/A
DC Officer Trainee	Detention Center	N/A	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	10/5/2022	10/5/2022	10/5/2022	10/5/2022	9/15/2022	10/6/2022	10/24/2022	10/7/2022	11/14/2022	11/16/2022								N/A
DC Officer Trainee	Detention Center	N/A	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	8/10/2022	8/10/2022	8/10/2022	8/10/2022	9/15/2022	8/11/2022	8/24/2022	8/24/2022		8/25/2022	9/15/2022							N/A
DC Officer Trainee	Detention Center	N/A	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	8/19/2022	8/19/2022	8/19/2022	8/19/2022	9/15/2022	8/19/2022				9/23/2022								N/A
DC Officer Trainee	Detention Center	N/A	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	8/25/2022	8/25/2022	8/25/2022	8/25/2022	9/15/2022	8/25/2022	9/21/2022	9/2/2022		9/23/2022	9/30/2022							N/A
DC Officer Trainee	Detention Center	N/A	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	8/10/2022	8/10/2022	8/10/2022	8/10/2022	9/15/2022	8/11/2022	9/8/2022	8/16/2022		9/9/2022	9/29/2022	9/29/2022						N/A
DC Officer Trainee	Detention Center	N/A	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	8/12/2022	8/12/2022	8/12/2022	8/12/2022	9/15/2022	8/12/2022	8/25/2022	8/17/2022		9/23/2022	9/19/2022	9/19/2022						N/A
DC Officer Trainee	Detention Center	N/A	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	7/1/2022	7/1/2022	7/1/2022	7/1/2022	9/15/2022	7/1/2022	7/28/2022	7/29/2022		7/29/2022	8/15/2022							N/A
DC Officer Trainee	Detention Center	N/A	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/15/2022	7/8/2022	7/8/2022	7/8/2022	7/8/2022	9/15/2022	7/8/2022	7/28/2022	7/14/2022		8/8/2022	8/16/2022							N/A
DC Officer Trainee	Detention Center	N/A							9/16/2022	9/16/2022	9/16/2022	9/16/2022		9/16/2023	2/24/2023	9/16/2022	2/28/2023	3/15/2023	3/17/2023	3/17/2023	4/10/2023	5/2/2023	5/19/2023	5/22/2023	6/12/2023	

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DC Lieutenant	Detention Center	7/2/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/8/2022	6/9/2022	9/27/2022	9/27/2022	9/27/2022	9/27/2022	7/5/2022	9/27/2022	10/12/2022	9/30/2022	10/12/2022	10/21/2022	10/24/2022	10/24/2022	12/4/2022	10/12/2022	10/12/2022	10/12/2022	10/12/2022	160
DC Doc Tech- Reception	Detention Center	8/27/2022	8/23/2022	8/23/2022	8/23/2022	8/23/2022	8/23/2022	8/23/2022					9/7/2022													N/A
DC Officer Trainee	Detention Center	12/31/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	10/5/2022	10/5/2022	10/5/2022	10/5/2022	12/21/2022	10/6/2022	1/18/2023	10/7/2022	1/9/2023	1/25/2023	1/27/2023	1/27/2023		2/21/2023	2/27/2023			133
DC Officer Trainee	Detention Center	12/31/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	10/5/2022	10/5/2022	10/5/2022	10/5/2022	12/21/2022	10/6/2022	12/16/2022	10/6/2022	12/16/2022	12/21/2022	12/22/2022	12/22/2022						N/A
DC Officer Trainee	Detention Center	9/4/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	10/14/2022	10/14/2022	10/14/2022	10/14/2022	12/21/2022	10/14/2022	10/28/2022	10/22/2022	10/24/2022	11/1/2022	11/1/2022	11/1/2022	11/14/2022					48
DC Officer Trainee	Detention Center	12/3/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	10/14/2022	10/14/2022	10/14/2022	10/14/2022	12/21/2022	10/14/2022	11/7/2022	10/14/2022	11/17/2022	12/21/2022	1/23/2023	1/24/2023		1/31/2023	2/6/2023	2/22/2023	2/27/2023	127
DC Officer Trainee	Detention Center	7/30/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	10/27/2022	10/27/2022	10/27/2022	10/27/2022	12/21/2022	10/28/2022	12/2/2022	12/12/2022	1/10/2023	12/21/2022	1/12/2023	1/12/2023	5/1/2023	03/21/223	3/24/2023	4/4/2023	4/17/2023	127
DC Officer Trainee	Detention Center	9/24/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	10/27/2022	10/27/2022	10/27/2022	10/27/2022	12/21/2022	10/28/2022	12/6/2022	10/28/2022	12/6/2022	12/16/2022	12/21/2022	12/21/2022	1/3/2023	1/10/2023	1/18/2023	1/24/2023	1/30/2023	93
DC Officer Trainee	Detention Center	8/13/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	10/27/2022	10/27/2022	10/27/2022	10/27/2022	12/21/2022	10/28/2022	12/1/2022	10/28/2022	12/2/2022	12/16/2022	2/2/2023	2/2/2023		3/21/2023				136
DC Officer Trainee	Detention Center	12/31/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	11/29/2022	11/29/2022	11/29/2022	11/29/2022	12/21/2022	11/30/2022	12/15/2022	11/30/2022	12/15/2022	12/21/2022	12/22/2022	12/27/2022	3/20/2023	1/10/2023	1/18/2023	1/30/2023	3/3/2023	100
DC Officer Trainee	Detention Center	12/31/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	11/29/2022	11/29/2022	11/29/2022	11/29/2022	12/21/2022	11/30/2022	12/21/2022	11/30/2022	12/21/2022	12/22/2022	1/23/2023	1/25/2023						N/A
DC Officer Trainee	Detention Center	N/A	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	12/19/2022	12/19/2022	12/19/2022	12/19/2022	12/21/2022	12/20/2022												N/A
DC Officer Trainee	Detention Center	N/A	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	12/19/2022	12/19/2022	12/19/2022	12/19/2022	12/21/2022	12/20/2022												N/A
DC Officer Trainee	Detention Center	N/A	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	12/19/2022	12/19/2022	12/19/2022	12/19/2022	12/21/2022	12/20/2022												N/A
DC Officer Trainee	Detention Center	12/31/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	2/1/2023	2/1/2023	1/27/2023	1/27/2023	12/21/2022	2/1/2023	2/7/2023	2/2/2023	2/7/2023	2/8/2023	2/9/2023	2/10/2023	2/21/2023	3/7/2023	3/13/2023	3/22/2023	4/10/2023	143
DC Officer Trainee	Detention Center	12/31/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	9/20/2022	2/1/2023	2/1/2023	1/27/2023	1/27/2023	12/21/2022	2/1/2023	3/8/2023	2/2/2023	3/21/2023	3/14/2023	3/29/2023	3/29/2023		4/4/2023	4/10/2023			190
DC Officer Trainee	Detention Center	9/24/2022				9/20/2022	9/20/2022	9/20/2022	2/1/2023	2/1/2023	1/27/2023	1/27/2023	12/21/2022	2/1/2023	3/9/2023	2/1/2023	5/1/2023	5/3/2023	5/5/2023	5/5/2023	5/30/2023	6/5/2023	6/12/2023	6/6/2023	6/28/2023	231
DC Captain	Detention Center	9/19/2020	12/9/2022	11/22/2022	12/9/2022	9/29/2022	12/9/2022	9/29/2022	11/28/2022	12/1/2022	12/9/2022	12/9/2022	11/2/2022	12/15/2022	12/19/2022	12/16/2022	12/19/2022	12/20/2022	12/28/2022	12/29/2022	1/3/2023					91
DC Lieutenant	Detention Center	4/20/2023				10/3/2022	10/3/2022	10/4/2022	3/15/2023	3/16/2023	3/15/2023	3/16/2023	11/7/2022	3/21/2023	3/28/2023	3/22/2023	4/5/2023	4/27/2023	5/3/2023	5/4/2023	5/21/2023	3/28/2023	3/28/2023	3/28/2023	3/28/2023	220
DC Lieutenant	Detention Center	4/20/2023				10/3/2022	10/3/2022	10/4/2022	3/15/2023	3/16/2023	3/15/2023	3/16/2023	11/7/2022	3/21/2023	3/28/2023	3/22/2023	4/3/2023	4/27/2023	5/4/2023	5/4/2023	5/21/2023	3/28/2023	3/28/2023	3/28/2023	3/28/2023	220
DC Lieutenant	Detention Center	4/20/2023				10/3/2022	10/3/2022	10/4/2022	3/15/2023	3/16/2023	3/15/2023	3/16/2023	11/7/2022	3/21/2023	3/28/2023	3/22/2023	5/2/2023	5/2/2023	5/4/2023	5/4/2023	5/21/2023	3/28/2023	3/28/2023	3/28/2023	3/28/2023	220
DC Lieutenant	Detention Center	4/20/2023				10/3/2022	10/3/2022	10/4/2022	3/15/2023	3/16/2023	3/15/2023	3/16/2023	11/7/2022	3/21/2023	4/25/2023	3/22/2023	4/25/2023	4/27/2023	5/2/2023	5/2/2023	5/30/2023	6/5/2023	6/12/2023	6/7/2023	7/6/2023	217
Inmate Program Specialist	Detention Center	9/24/2022	10/13/2022	10/13/2022	10/13/2022	10/13/2022	10/13/2022	10/13/2022	10/13/2022	10/13/2022	10/13/2022	10/13/2022	11/1/2022													N/A
Detention Officer Trainee	Detention Center								2/1/2023	2/1/2023	1/27/2023	1/27/2023		2/1/2023	3/24/2023	02//02/23	3/27/2023	3/28/2023	3/31/2023	4/3/2023	6/26/2023	4/18/2023	4/21/2023	5/1/2023	6/1/2023	
Detention Officer Trainee	Detention Center								3/13/2023	3/13/2023	3/13/2023	3/14/2023		3/15/2023	3/27/2023	3/15/2023	3/29/2023	4/3/2023	4/19/2023	04//20/23	5/1/2023	5/31/2023	6/7/2023	6/5/2023	6/28/2023	
Detention Officer Trainee	Detention Center								2/1/2023	2/1/2023	1/27/2023	1/27/2023		2/1/2023	2/27/2023	2/2/2023	3/6/2023	3/7/2023	3/10/2023	3/13/2023	3/20/2023	3/20/2023	3/20/2023	3/20/2023	3/20/2023	
Detention Officer Trainee	Detention Center								4/24/2023	4/24/2023	4/24/2023	4/24/2023		4/27/2023	6/12/2023	5/13/2023	6/22/2023			6/23/2023	7/6/2023	7/6/2023	7/6/2023	7/6/2023	7/6/2023	
Detention Officer Trainee	Detention Center													3/15/2023	3/24/2023	3/15/2023	3/24/2023	3/31/2023	4/3/2023	4/3/2023	4/10/2023	5/2/2023	5/11/2023	5/22/2023	3/13/2023	

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Detention Officer Trainee	Detention Center								4/24/2023	4/24/2023	4/24/2023	4/24/2023		4/27/2023	5/5/2023	4/27/2023	5/5/2023	5/9/2023	5/9/2023	5/22/2023	5/30/2023	6/5/2023	6/12/2023	6/12/2023	6/28/2023	
Detention Officer Trainee	Detention Center								4/24/2023	4/24/2023	4/24/2023	4/24/2023		4/27/2023	5/8/2023	4/27/2023	5/8/2023	5/11/2023	5/12/2023	05/12/23	7/10/2023	6/20/2023	6/27/2023	6/14/2023	7/6/2023	
Detention Officer Trainee	Detention Center								2/22/2023	2/22/2023	2/22/2023	2/22/2023	4/10/2023	2/23/2023	3/22/2023	2/24/2023	3/22/2023	3/31/2023	4/3/2023	4/3/2023	4/10/2023	5/2/2023	5/12/2023	5/9/2023	6/13/2023	
Inmate Program Specialist	Detention Center	9/24/2022				2/21/2023	2/21/2023	2/21/2023	4/27/2023	5/1/2023	4/27/2023	5/1/2023	3/13/2023	5/5/2023	5/19/2023	5/22/2023	5/24/2023	5/22/2023	5/26/2023	5/30/2023	6/23/2023					122
Inmate Program Specialist	Detention Center	9/24/2022				2/21/2023	2/21/2023	2/21/2023	4/27/2023	5/1/2023	4/27/2023	5/1/2023	3/13/2023	5/5/2023	6/20/2023	6/5/2023	6/20/2023	6/21/2023	6/21/2023	6/21/2023	6/21/2023					120
Background Investigator	Detention Center								7/14/2023	7/17/2023	7/19/2023	7/19/2023	7/18/2023	7/21/2023	7/26/2023	7/31/2023	7/31/2023	8/10/2023	7/31/2023	7/31/2023	7/31/2023	7/31/2023	7/31/2023	7/31/2023	7/31/2023	
Background Investigator	Detention Center								7/14/2023	7/17/2023	7/19/2023	7/19/2023	7/18/2023	7/21/2023	8/7/2023											
Background Investigator	Detention Center								7/14/2023	7/17/2023	7/19/2023	7/19/2023	7/18/2023	7/21/2023	7/25/2023											
Contract Monitor	Detention Center	7/20/2023	7/17/2023	7/17/2023	7/17/2023	7/17/2023	7/17/2023	7/19/2023	9/19/2023	9/21/2023	9/19/2023	9/21/2023	8/9/2023	9/27/2023	10/5/2023				10/18/2023	10/18/2023	10/29/2023					
Inmate Program Specialist	Detention Center	9/22/2022	7/5/2023	7/5/2023	7/5/2023	7/5/2023	7/5/2023	7/5/2023	8/2/2023	8/3/2023	8/2/2023	8/3/2023	7/19/2023	11/12/2023												
DC Compliance Specialist	Detention Center	8/31/2014	7/13/2023	7/13/2023	7/13/2023	7/18/2023	7/18/2023	7/19/2023	8/22/2023	8/22/2023	8/18/2023	8/22/2023	8/8/2023	8/30/2023	10/12/2023	10/6/2023	10/6/2023	10/16/2023	10/20/2023	10/20/2023						
DC Compliance Specialist	Detention Center	8/31/2014	7/13/2023	7/13/2023	7/13/2023	7/18/2023	7/18/2023	7/19/2023	8/22/2023	8/22/2023	8/18/2023	8/22/2023	8/8/2023	8/30/2023	9/12/2023	8/31/2023	9/15/2023		9/21/2023	9/25/2023	9/28/2023					
Document Technician-Reception	Detention Center	8/25/2017	7/31/2023					7/31/2023	10/12/2023	10/12/2023	10/12/2023	10/16/2023	8/15/2023	10/18/2023	10/31/2023	10/26/2023	11/1/2023	10/31/2023	11/8/2023	11/8/2023	12/4/2023					
DC Lieutenant	Detention Center		10/23/2021	8/11/2023	8/11/2023	8/14/2023	8/14/2023	8/14/2023	9/1/2023	9/1/2023	9/1/2023	9/5/2023	8/30/2023	9/8/2023	9/11/2023		9/25/2023		9/26/2023	9/26/2023	10/8/2023					
DC Lieutenant	Detention Center	1/14/2023	1/14/2023	1/14/2023	1/14/2023	8/14/2023	8/14/2023	8/14/2023	9/1/2023	9/1/2023	9/1/2023	9/5/2023	8/30/2023	9/8/2023	9/11/2023			9/26/2023	9/26/2023	10/6/2023						
DC Lieutenant	Detention Center	1/11/2024	10/5/2023	10/5/2023	10/5/2023	10/5/2023	10/5/2023	10/5/2023	10/30/2023	10/30/2023	10/30/2023	10/30/2023	10/24/2023	11/2/2023	1/19/2024	1/18/2024	1/22/2024	1/22/2024	1/23/2024	1/23/2024	1/28/2024	1/18/2024	1/18/2024	1/18/2024	1/18/2024	
DC Lieutenant	Detention Center	1/14/2023	10/5/2023	10/5/2023	10/5/2023	10/5/2023	10/5/2023	10/5/2023	10/30/2023	10/30/2023	10/30/2023	10/30/2023	10/24/2023	11/2/2023	11/8/2023	11/8/2023	11/9/2023	11/9/2023	11/16/2023	11/17/2023	11/19/2023	11/8/2023	11/8/2023	11/8/2023	11/8/2023	
Detention Officer Trainee	Detention Center	4/13/2019	4/18/2023						7/28/2023	7/28/2023	8/2/2023	8/2/2023	7/18/2023	8/3/2023	8/11/2023	8/9/2023	8/11/2023	8/15/2023	9/15/2023	9/15/2023	9/25/2023	9/26/2023	10/5/2023	10/13/2023	11/9/2023	
Detention Officer Trainee	Detention Center	12/3/2022	4/18/2023						7/12/2023	7/12/2023	7/13/2023	7/14/2023	7/18/2023	7/14/2023	7/26/2023	7/25/2023	7/26/2023	7/28/2023	7/31/2023	7/31/2023	8/7/2023	8/8/2023	8/11/2023	8/16/2023	8/29/2023	
Detention Officer Trainee	Detention Center	10/8/2022	4/18/2023				4/13/2023	4/13/2023	6/5/2023	6/5/2023	6/5/2023	7/14/2023	7/18/2023	6/8/2023	7/13/2023	6/14/2023	7/14/2023	7/20/2023	7/21/2023	7/21/2023	8/7/2023	8/7/2023	8/11/2023	8/14/2023	8/29/2023	
Detention Officer Trainee	Detention Center	7/29/2023	4/18/2023						7/12/2023	7/12/2023	7/11/2023	7/14/2023	7/18/2023	7/14/2023	8/18/2023	7/25/2023	8/18/2023	8/23/2023	8/25/2023	8/25/2023	10/16/2023	9/12/2023	9/21/2023	9/7/2023	09/29/23	
Detention Officer Trainee	Detention Center	7/29/2023	4/18/2023						7/12/2023	7/12/2023	7/13/2023	7/14/2023	7/18/2023	7/14/2023	8/11/2023	7/19/2023	8/11/2023	8/15/2023	8/21/2023	8/22/2023	8/28/2023	9/26/2023	10/5/2023	9/5/2023	9/29/2023	
Detention Officer Trainee	Detention Center	7/29/2023	7/27/2023					7/31/2023	11/9/2023	11/13/2023	11/9/2023	11/13/2023	11/1/2023	11/16/2023	12/6/2023	12/15/2023	1/4/2024	12/20/2023	1/8/2024	1/9/2024	3/18/2024	1/23/2024	1/29/2024	2/7/2024	2/22/2024	
Detention Officer Trainee	Detention Center	7/29/2023	7/27/2023					7/31/2023	10/20/2023	10/20/2023	10/23/2023	10/23/2023	11/1/2023	10/26/2023	11/9/2023	10/10/2023	11/9/2023	11/13/2023	11/22/2023	11/22/2023	12/11/2023	12/5/2023	12/8/2023	1/30/2024	2/9/2024	
Detention Officer Trainee	Detention Center	9/23/2023	7/27/2023					7/31/2023	10/20/2023	10/20/2023	10/23/2023	10/23/2023	11/1/2023	10/26/2023	11/7/2023	10/23/2023	11/9/2023	11/13/2023	11/22/2023	11/22/2023	11/28/2023	12/5/2023	12/8/2023	1/25/2024	1/25/2024	
Detention Officer Trainee	Detention Center	9/24/2022	7/27/2023					7/31/2023	9/12/2023	9/12/2023	9/15/2023	9/15/2023	11/1/2023	9/18/2023	10/19/2023	10/5/2023	10/19/2023	10/30/2023	11/6/2023	11/8/2023	11/20/2023	12/5/2023	12/8/2023	12/8/2023	12/8/2023	
Detention Officer Trainee	Detention Center	9/23/2023	7/27/2023						9/12/2023	9/12/2023	9/15/2023	9/15/2023	11/1/2023	10/26/2023	10/13/2023	10/13/2023	10/13/2023	10/30/2023	11/6/2023	11/8/2023						
Detention Officer Trainee	Detention Center	8/14/2021	7/27/2023					7/31/2023	9/12/2023	9/12/2023	9/15/2023	9/15/2023	11/1/2023	9/18/2023	9/15/2023	8/25/2023	9/18/2023	9/20/2023	9/29/2023	10/2/2023	11/20/2023	10/10/2023	10/13/2023	10/17/2023	11/9/2023	

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DC-Document Technician-Dispositions	Detention Center	10/7/2023	10/5/2023	10/5/2023	10/5/2023	10/5/2023	10/5/2023	10/5/2023	11/21/2023	11/22/2023	11/29/2023	11/29/2023	10/26/2023	11/330/23	1/4/2024	12/13/2023	12/15/2023	1/25/2024	1/26/2024	1/26/2024	2/5/2024	12/15/2023	12/15/2023	12/15/2023	12/15/2023	
DC Accounting Specialist	Detention Center	10/28/2023	10/30/2023	10/30/2023	10/30/2023	10/30/2023	10/31/2023	10/31/2023	12/15/2023	12/15/2023	12/15/2023	12/15/2023	11/17/2023	11/17/2023	2/16/2024	2/6/2024	2/7/2024	2/22/2024	3/4/2024	3/4/2024	3/18/2024					
DC Sergeant	Detention Center	10/7/2023	11/9/2023					11/9/2023	12/19/2023	12/19/2023	1/4/2024	1/4/2024	11/30/2023	1/8/2024	1/19/2024	1/18/2024	1/19/2024	2/8/2024	2/26/2024	2/27/2024	3/10/2024					
DC Sergeant	Detention Center	1/27/2024	11/9/2023					11/9/2023	12/19/2023	12/19/2023	1/4/2024	1/4/2024	11/30/2023	1/10/2024	1/19/2024	1/25/2024	1/22/2024	1/29/2024	2/23/2024	2/27/2024	3/10/2024					
DC Sergeant	Detention Center	10/7/2023	11/9/2023					11/9/2023	12/19/2023	12/19/2023	1/4/2024	1/4/2024	11/30/2023	1/10/2024	1/19/2024	1/24/2024	1/29/2024	1/29/2024	2/26/2024	2/27/2024	3/10/2024					
DC Sergeant	Detention Center	5/20/2023	11/9/2023					11/9/2023	12/19/2023	12/19/2023	1/4/2024	1/4/2024	11/30/2023	1/10/2024	1/19/2024	1/19/2024	1/19/2024	1/29/2024	2/26/2024	2/27/2024	3/10/2024					
DC Sergeant	Detention Center	1/27/2024	11/9/2023					11/9/2023	12/19/2023	12/19/2023	1/4/2024	1/4/2024	11/30/2023	1/8/2024	1/19/2024	1/25/2024	1/23/2024	1/29/2024	2/23/2024	2/27/2024	3/10/2024					
DC Sergeant	Detention Center	12/31/2022	11/9/2023					11/9/2023	12/19/2023	12/19/2023	1/4/2024	1/4/2024	11/30/2023	1/8/2024	1/19/2024	1/25/2024	1/23/2024	1/29/2024	2/26/2024	2/27/2024	3/10/2024					
DC Sergeant	Detention Center	1/27/2024	11/9/2023					11/9/2023	12/19/2023	12/19/2023	1/4/2024	1/4/2024	11/30/2023	1/8/2024	2/5/2024	1/29/2024	2/13/2024	1/29/2024	2/26/2024	2/27/2024	3/10/2024					
DC Sergeant	Detention Center	12/2/2022	11/9/2023					11/9/2023	12/19/2023	12/19/2023	1/4/2024	1/4/2024	11/30/2023	1/8/2024	1/19/2024	1/17/2024	2/6/2024	1/29/2024	2/26/2024	2/27/2024	3/10/2024					
Detention Officer Trainee	Detention Center	1/23/2016	11/9/2023			11/17/223	11/15/2023	11/17/223	4/29/2024				5/2/2024	2/20/2024	3/13/2024	4/29/2024	4/29/2024	3/12/2024	5/1/2024	5/13/2024	5/13/2024	5/20/2024	05/28/224	5/31/2024	6/5/2024	06/18/224
Detention Officer Trainee	Detention Center	04/08/223	11/9/2023			11/17/2023	11/15/2023	11/17/2023	3/8/2024	3/11/2024	3/8/2024	3/11/2024	2/20/2024	3/13/2024	3/27/2024	2/20/2024	4/1/2024	4/5/2024	4/17/2024	4/18/2024	4/22/2024	4/23/2024	4/29/2024	4/30/2024	5/10/2024	
Detention Officer Trainee	Detention Center	7/29/2023	11/09/223			11/17/2023	11/15/2023	11/17/2023	3/8/2024	3/11/2024	3/8/2024	3/11/2024	2/20/2024	3/13/2024	3/27/2024	2/23/2024	4/2/2024	4/18/2024	4/23/2024	4/24/2024	4/29/2024	5/14/2024	5/21/2024	5/7/2024	5/21/2024	
Detention Officer Trainee	Detention Center	12/31/2022	11/9/2023			11/17/2023	11/15/2023	11/17/2023	3/8/2024	3/11/2024	3/8/2024	3/11/2024	2/20/2024	3/13/2024	4/4/2024	2/29/2024	3/1/2024	4/5/2024	4/17/2024	4/18/2024	4/22/2024	5/14/2024	5/21/2024	5/1/2024	5/10/2024	
Detention Officer Trainee	Detention Center	1/27/2024	11/9/2023			1/17/2023	11/15/2023	11/17/2023	2/8/2024	2/8/2024	2/8/2024	2/8/2024	2/20/2024	2/9/2024	2/16/2024	2/9/2024	2/15/2024	2/22/2024	2/27/2024	2/27/2024	4/29/2024	3/19/2024	3/26/2024	4/4/2024	4/16/2024	
Detention Officer Trainee	Detention Center	10/17/2015	11/09/223			11/17/2023	11/15/2023	11/17/2023	2/8/2024	2/8/2024	2/8/2024	2/8/2024	2/20/2024	1/11/2024	1/30/2024	11/30/2023	12/5/2023	2/5/2024	2/16/2024	2/16/2024	2/26/2023					
Detention Officer Trainee	Detention Center	10/17/2015	11/9/2023			11/17/2023	11/15/2023	11/17/2023	2/8/2024	2/8/2024	2/8/2024	2/8/2024	2/20/2024	1/11/2024	2/12/2024	12/15/2023	1/3/2024	2/14/2024	2/21/2024	2/22/2024	3/4/2024	3/26/2024	4/4/2024	3/6/2024	4/1/2024	
Detention Officer Trainee	Detention Center	3/23/2015	11/9/2023			11/17/2023	11/15/2023	11/17/2023	3/8/2024	3/11/2024	3/8/2024	3/11/2024	2/20/2024	5/2/2024	4/3/2024	6/13/2024	2/21/2024	06/14/2024/	6/21/2024	6/24/2024	7/15/2024	7/23/2024	7/29/2024	10/15/2024	11/8/2024	
Detention Officer Trainee	Detention Center	7/25/2024	11/9/2023			11/17/2023	11/15/2023	11/17/2023	2/8/2024	2/8/2024	2/8/2024	2/8/2024	2/20/2024	1/11/2024	2/14/2024	12/15/2023	1/8/2024	12/14/2023	2/21/2024	2/22/2024	3/25/2024	3/26/2024	4/10/2024	3/8/2024	3/19/2024	
Detention Officer Trainee	Detention Center	10/17/2015	11/9/2023			11/17/2023	11/15/2023	11/17/2023	3/8/2024	3/11/2024	3/8/2024	3/11/2024	2/20/2024	3/13/2024	5/24/2024	2/21/2024	2/22/2024	5/14/2024	5/24/2024	5/28/2024	6/3/2024					
Detention Officer Trainee	Detention Center		11/9/2023			11/17/2023	11/15/2023	11/17/2023	3/8/2024	3/11/2024	3/8/2024	3/11/2024	2/20/2024	3/13/2024	3/14/2024	3/1/2024	3/11/2024	3/27/2024								
DC-Document Technician-IPRA	Detention Center	5/31/2023	12/1/2023						1/18/2024	1/19/2024	1/18/2024	1/19/2024	12/13/2023	1/25/2024	2/8/2024	2/8/2024	2/26/2024	2/8/2024	2/28/2024	2/28/2024	3/10/2024	2/26/2024				
Document Technician Dispositions	Detention Center	12/2/2023	2/5/2024			2/6/2024	2/6/2024	2/6/2024	4/1/2024	4/3/2024	4/1/2024	4/3/2024	2/21/2024	4/5/2024	5/7/2024	5/9/2024	5/15/2024	5/9/2024	5/13/2024	5/16/2024						
Background Investigator	Detention Center	9/9/2024	2/23/2024	2/23/2024	2/23/2024	2/23/2024	2/23/2024	2/27/2024	4/10/2024	4/11/2024	4/10/2024	4/11/2024	3/15/2024	4/17/2024	5/3/2024	4/30/2024	5/8/2024	5/8/2024	5/9/2024							
Background Investigator	Detention Center	9/29/2023	2/23/2024					2/27/2024	4/10/2024	4/11/2024	4/10/2024	4/11/2024	3/15/2024	4/17/2024	5/29/2024	5/30/2024	5/29/2024	5/31/2024	6/4/2024	6/5/2024						
Detention Officer Trainee	Detention Cener		3/7/2024					3/8/2024	4/29/2024	4/29/2024	5/2/2024	5/2/2024	6/14/2024	5/2/2024	6/12/2024	4/10/2024	6/13/2024	6/14/2024	6/21/2024	6/24/2024	7/1/2024	7/23/2024	7/29/2024	7/9/2024	7/30/2024	
Detention Officer Trainee	Detention Center		3/7/2024					3/8/2024	4/29/2024	4/29/2024	5/2/2024	5/2/2024	6/14/2024	5/2/2024	5/29/2024	4/24/2024	5/15/2024	5/20/2024	5/31/2024	5/31/2024	6/10/2024	6/11/2024	6/14/2024	6/17/2024	7/3/2024	
Detention Officer Trainee	Detention Center		3/7/2024					3/8/2024	6/12/2024	6/12/2024	6/12/2024	6/12/2024	6/14/2024	6/14/2024	7/12/2024	5/24/2024	7/12/2024	7/16/2024	7/19/2024	7/19/2024	7/30/2024	8/6/2024	8/15/2024	8/12/2024	9/5/2024	

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Detention Officer Trainee	Detention Center	5/4/2024	3/7/2024					3/8/2024	4/29/2024	4/29/2024	5/2/2024	5/2/2024	6/14/2024	5/2/2024	6/6/2024	4/24/2024	5/2/2024	6/12/2024	6/17/2024	6/17/2024	8/5/2024	7/9/2024	7/15/2024	7/1/2024	7/15/2024	
Detention Officer Trainee	Detention Center	5/4/2024	3/7/2024					3/8/2024	4/29/2024	4/29/2024	5/2/2024	5/2/2024	6/14/2024	5/2/2024	6/5/2024	4/30/2024	6/5/2024	5/31/2024	6/6/2024	6/6/2024	6/17/2024	6/18/2024	7/15/2024	7/1/2024	7/8/2024	
Detention Officer Trainee	Detention Center		3/7/2024					3/8/2024	6/12/2024	6/12/2024	6/12/2024	6/12/2024	6/14/2024	6/14/2024	7/10/2024	5/23/2024	5/23/2024	7/16/2024	7/24/2024	7/26/2024	8/5/2024	8/6/2024	8/15/2024	8/13/2024	9/5/2024	
Detention Officer Trainee	Detention Center		3/7/2024					3/8/2024	7/23/2024	7/23/2024	7/23/2024	7/23/2024	6/14/2024	7/26/2024	8/9/2024	6/26/2024	7/19/2024	8/12/2024	8/19/2024	8/19/2024	10/21/2024	9/10/2024	9/13/2024	9/5/2024	9/27/2024	
Detention Officer Trainee	Detention Center		3/7/2024					3/8/2024	4/29/2024	4/29/2024	5/2/2024	5/2/2024	6/14/2024	5/2/2024	6/3/2024	6/13/2024	4/11/2024	6/14/2024	6/26/2024	6/26/2024	7/1/2024	7/23/2024	7/29/2024	7/9/2024	7/30/2024	
Accounting Specialist	Detention Center	6/1/2024	6/4/2024					6/4/2024	7/9/2024	7/10/2024	7/9/2024	7/10/2024	6/14/2024	7/12/2024	7/31/2024	7/24/2024	7/25/2024	8/2/2024	8/8/2024	8/8/2024	8/26/2024					
Detention Officer Trainee	Detention Center		3/7/2024					3/7/2024	8/6/2024	8/6/2024	8/6/2024	8/7/2024	6/14/2024	7/26/2024	8/8/2024	7/24/2024	8/9/2024	8/19/2024	8/21/2024	9/23/2024	9/30/2024	10/1/2024	10/11/2024	10/9/2024	11/8/2024	
Detention Officer Trainee	Detention Center		3/7/2024					3/7/2024	8/6/2024	8/6/2024	8/6/2024	8/7/2024	6/14/2024	8/9/2024	8/26/2024	7/31/2024	8/27/2024	8/29/2024	9/23/2024	9/23/2024	9/24/2024	10/1/2024	10/11/2024	10/8/2024	10/17/2024	
Detention Officer Trainee	Detention Center		3/7/2024					03/07/2024	8/6/2024	8/6/2024	8/6/2024	8/7/2024	6/14/2024	8/9/2024	8/20/2024	8/1/2024	8/13/2024	8/29/2024	8/30/2024	9/23/2024	9/23/2024	10/1/2024	10/11/2024	10/8/2024	10/17/2024	
Detention Officer Trainee	Detention Center		3/7/2024					3/7/2024	8/6/2024	8/6/2024	8/6/2024	8/7/2024	6/14/2024	7/26/2024	8/15/2024	7/11/2024	8/27/2024	8/29/2024	8/30/2024	9/23/2024						
Detention Officer Trainee	Detention Center		3/7/2024					3/7/2024	8/6/2024	8/6/2024	8/6/2024	8/7/2024	6/14/2024	8/9/2024	9/3/2024	8/6/2024	8/12/2024	9/5/2024	9/6/2024	9/23/2024						
Detention Officer Trainee	Detention Center		3/7/2024					3/7/2024	8/6/2024	8/6/2024	8/6/2024	8/7/2024	6/14/2024	8/9/2024	9/3/2024	8/2/2024	8/13/2024	9/5/2024	9/6/2024	9/23/2024	10/15/2024	11/5/2024	11/13/2024	10/9/2024	11/8/2024	
Detention Officer Trainee	Detention Center		3/7/2024					3/7/2024	8/6/2024	8/6/2024	8/6/2024	8/7/2024	6/14/2024	8/9/2024	9/5/2024	7/25/2024	7/26/2024	9/9/2024	9/23/2024	9/25/2024	12/2/2024	10/15/2024	10/29/2024	10/11/2024	11/8/2024	
Detention Officer Trainee	Detention Center		3/7/2024					3/7/2024	8/6/2024	8/6/2024	8/6/2024	8/7/2024	6/14/2024	8/9/2024	9/6/2024	7/31/2024	8/5/2024	9/11/2024	9/30/2024	9/30/2024	10/15/2024	11/5/2024	11/21/2024	11/7/2024	12/9/2024	
Detention Officer Trainee	Detention Center		3/7/2024						9/3/2024	9/4/2024	9/3/2024	10/24/2024		9/5/2024	10/15/2024	8/30/2024	9/5/2024	10/22/2024	10/23/2024	10/23/2024	11/4/2024	11/19/2024	11/27/2024	12/2/2024	12/20/2024	
Detention Officer Trainee	Detention Center		3/7/2024						10/2/2024	10/3/2024	10/2/2024	10/3/2024	6/14/2024	10/2/2024	11/8/2024	11/8/2024	11/8/2024	11/8/2024	11/20/2024	11/20/2024	12/2/2024	12/10/2024	12/20/2024	12/3/2024	12/20/2024	
Document Technician Dispositions	Detention Center	7/11/2024				7/12/2024	7/12/2024	7/12/2024	8/16/2024	8/16/2024	8/16/2024	8/16/2024	07/26/2024	8/20/2024	9/12/2024	9/12/2024	8/29/2024	9/12/2024	10/9/2024	10/9/2024	10/22/2024					
DC Officer Trainee	Detention Center								12/20/2024	12/23/2024	12/20/2024	12/23/2024		1/3/2025	2/10/2025	1/22/2025	2/10/2025	2/24/2025	3/12/2025	4/1/2025	4/14/2025	4/15/2025	4/22/2025	4/16/2025	4/30/2025	
DC Officer Trainee	Detention Center								12/20/2024	12/23/2024	12/20/2024	12/23/2024		1/3/2025	3/14/2025	2/11/2025	2/16/2025	2/24/2025	3/13/2025	3/14/2025	4/7/2025	4/15/2025	4/22/2025	4/9/2025	4/29/2025	
DC Officer Trainee	Detention Center								12/20/2024	12/23/2024	12/20/2024	12/23/2024		1/3/2025	2/12/2025	2/11/2025	5/14/2025	4/30/2025	5/6/2025	5/5/2025						
DC Officer Trainee	Detention Center								12/20/2024	12/23/2024	12/20/2024	12/23/2024		1/3/2025	2/19/2025	2/10/2025	4/10/2025	4/4/2025	4/11/2025	4/12/2025						
DC Officer Trainee	Detention Center								1/3/2025	1/6/2025	1/3/2025	1/6/2025		1/9/2025	2/23/2025	3/25/2025	3/13/2025	3/25/2025	4/10/2025	4/11/2025	4/21/2025	4/29/2025	5/12/2025	4/25/2025	5/7/2025	
DC Officer Trainee	Detention Center								1/3/2025	1/6/2025	1/3/2025	1/6/2025		1/9/2025	5/21/2025	3/18/2025	3/25/2025	4/1/2025	4/16/2025	4/16/2025	6/1/2025	6/10/2025	6/16/2025	5/29/2025	6/18/2025	
DC Officer Trainee	Detention Center								1/3/2025	1/6/2025	1/3/2025	1/6/2025		1/9/2025	3/7/2025	2/22/2025	3/25/2025	4/2/2025	4/14/2025	4/14/2025	4/28/2025					
DC Officer Trainee	Detention Center								1/17/2025	1/22/2025	1/17/2025	1/22/2025		1/24/2025	3/25/2025	2/12/2025	3/25/2025	3/7/2025	4/11/2025	4/11/2025	4/21/2025	4/29/2025	5/12/2025	4/25/2025	5/7/2025	
DC Officer Trainee	Detention Center								1/17/2025	1/22/2025	1/17/2025	1/22/2025		1/24/2025	3/24/2025	2/17/2025	2/19/2025	3/27/2025	4/11/2025	4/11/2025						
DC Officer Trainee	Detention Center								2/10/2025	2/11/2025	2/10/2025	2/11/2025		2/13/2025	4/3/2025	1/5/2025	4/3/2025	4/1/2025	4/21/2025	4/21/2025	5/12/2025	5/13/2025	5/19/2025	5/14/2025	5/28/2025	

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DC Officer Trainee	Detention Center		8/29/2024					11/12/2024	11/8/2024	11/8/2024	11/8/2024	11/13/2024	1/13/2025	11/15/2024	1/28/2024	1/29/2025	5/7/2025	5/9/2025	6/4/2025	6/5/2025	6/16/2025	6/24/2025	6/27/2025	6/25/2025	7/11/2025	
DC Officer Trainee	Detention Center		8/29/2024					11/12/2024	11/8/2024	11/8/2024	11/8/2024	11/13/2024	1/13/2025	11/15/2024	2/7/2025	2/3/2025	3/9/2025	2/12/2025	2/21/2025	2/21/2025		4/1/2025				
DC Officer Trainee	Detention Center		8/29/2024					11/12/2024	11/8/2024	11/8/2024	11/8/2024	11/13/2024	1/13/2025	11/15/2024	3/10/2025	3/25/2025	11/12/2024	3/25/2025	5/10/2025	5/9/2025	6/2/2025	5/20/2025	5/29/2025	5/27/2025	6/9/2025	
DC Officer Trainee	Detention Center		8/29/2024					11/12/2024	11/8/2024	11/8/2024	11/8/2024	11/13/2024	1/13/2025	11/15/2024	1/29/2025	1/29/2025	4/4/2025	3/27/2025	4/3/2025	4/7/2025	5/27/2025	4/29/2025	5/12/2025	4/22/2025	5/7/2025	
DC Officer Trainee	Detention Center		8/29/2024					11/12/2024	11/8/2024	11/8/2024	11/8/2024	11/13/2024	1/13/2025	11/15/2024	1/29/2025	1/29/2025	1/30/2025	2/5/2025	2/24/2025	2/28/2025	4/21/2025	3/18/2025	3/25/2025	3/14/2025	4/15/2025	
DC Officer Trainee	Detention Center		8/29/2024					11/12/2024	11/8/2024	11/8/2024	11/8/2024	11/13/2024	1/13/2025	11/15/2024	2/3/2025	2/3/2025	2/3/2025	2/11/2025	2/26/2025	2/28/2025	3/10/2025	3/18/2025	3/25/2025	3/19/2025	4/15/2025	
DC Officer Trainee	Detention Center		8/29/2024					11/12/2024	11/8/2024	11/8/2024	11/8/2024	11/13/2024	1/13/2025	11/15/2024												
DC Officer Trainee	Detention Center		8/29/2024					11/12/2024	11/8/2024	11/8/2024	11/8/2024	11/13/2024	1/13/2025	11/15/2024	1/30/2025		11/11/2024	2/11/2025								
DC Officer Trainee	Detention Center		8/29/2024					11/12/2024	11/8/2024	11/8/2024	11/8/2024	11/13/2024	1/13/2025	10/25/2024	1/6/2025	12/30/2024	1/8/2025	1/17/2025	2/6/2025	2/13/2025	3/3/2025	3/5/2025	3/14/2025	3/15/2025	3/15/2025	
DC Officer Trainee	Detention Center		8/29/2024					11/12/2024	11/8/2024	11/8/2024	11/8/2024	11/13/2024	1/13/2025	10/25/2024	1/4/2025	1/4/2025	1/4/2025	3/21/2025	2/5/2025	2/5/2025	3/24/2025	2/11/2025	2/18/2025	2/26/2025	3/21/2025	
DC Officer Trainee	Detention Center		8/29/2024					11/12/2024	10/21/2024	10/22/2024	10/21/2024	10/22/2024	1/13/2025	10/25/2024	11/12/2025	10/7/2024	11/13/2024	11/18/2024	12/9/2024	12/9/2024	12/30/2024	1/7/2025	1/21/2025	1/6/2025	2/14/2024	
DC Officer Trainee	Detention Center		8/29/2024					11/12/2024	10/21/2024	10/22/2024	10/21/2024	10/22/2024	1/13/2025	10/25/2024	11/12/2025	11/13/2024	10/15/2024	11/18/2024	11/20/2024	11/20/2024	12/9/2024	12/10/2024	12/20/2024	12/23/2024	1/21/2025	
DC Officer Trainee	Detention Center		8/29/2024					11/12/2024	10/2/2024	10/3/2024	10/2/2024	10/3/2024	1/13/2025	10/4/2024	10/30/2024	11/5/2024	9/18/2024	11/8/2024	11/16/2024	11/16/2024	12/9/2024	12/10/2024	12/20/2024	12/2/2024	12/20/2024	
DC Officer Trainee	Detention Center		8/29/2024					11/12/2024	10/2/2024	10/3/2024	10/2/2024	10/3/2024	1/13/2025	10/4/2024	10/30/2024	10/30/2024	10/10/2024	11/5/2024	11/13/2024	11/13/2024	12/16/2024	11/27/2024	12/20/2024	12/11/2024	1/21/2025	
DC Inmate Programs Specialist	Detention Center	10/31/2024	10/7/2024	10/7/2024	10/7/2024	10/25/2024	10/24/2024	10/25/2024	11/19/2024	11/19/2024	11/19/2024	11/19/2024	11/13/2024	11/22/2024	1/16/2025	1/6/2025	1/6/2025		2/12/2025	2/12/2025	2/23/2025					
Compliance Specialist	Detention Center		9/25/2024				6/27/2025	10/23/2024	12/11/2024	12/11/2024	12/11/2024	12/16/2024	11/12/2024	12/18/2024	1/29/2025	1/29/2025	2/20/2025	1/29/2025		3/21/2025						
Background DSU investigator	Detention Center	9/9/2023	9/9/2023	11/4/2024	11/4/2024	11/12/2024	11/4/2024	11/12/2025	1/28/2025	1/31/2025	1/28/2025	1/31/2025	1/28/2025	2/6/2025	2/7/2025	2/7/2025	3/21/2025			4/2/2025	4/21/2025					
Officer Trainee	Detention Center					1/16/2025		1/16/2025	4/7/2025	4/7/2025	4/7/2025	4/7/2025		4/10/2025	5/15/2025	4/22/2025	5/15/2025	5/22/2025	7/1/2025	7/1/2025	9/29/2025	9/9/2025	9/12/2025	8/8/2025	8/18/2025	
Officer Trainee	Detention Center								4/7/2025	4/7/2025	4/7/2025	4/7/2025		4/10/2025	4/29/2025	4/25/2025	4/29/2025	5/7/2025	5/27/2025	5/27/2025	6/9/2025	6/23/2025	7/15/2025	6/23/2025	7/15/2025	
Officer Trainee	Detention Center								3/18/2025	3/19/2025	3/18/2025	3/19/2025		3/20/2025	5/29/2025	4/17/2025	6/25/2025	6/13/2025	6/28/2025	6/27/2025	7/7/2025	7/15/2025	7/18/2025	7/8/2025	7/25/2025	
Officer Trainee	Detention Center								3/18/2025	3/19/2025	3/18/2025	3/19/2025		3/20/2025	4/24/2025	4/23/2025	6/18/2025	5/9/2025	5/27/2025	5/27/2025	6/24/2025	7/15/2025	7/15/2025	6/25/2025	7/15/2025	
Officer Trainee	Detention Center								4/4/2025	4/7/2025	4/4/2025	4/4/2025		4/11/2025	5/3/2025	5/3/2025	5/3/2025	5/28/2025	6/30/2025	6/30/2025	7/14/2025	7/15/2025	7/18/2025	7/16/2025	8/5/2025	
Officer Trainee	Detention Center								3/18/2025	3/19/2025	3/18/2025	3/19/2025		3/20/2025	5/29/2025	5/29/2025	5/29/2025	6/11/2025	6/30/2025	7/1/2025	9/8/2025	9/9/2025	9/12/2025	7/29/2025	8/13/2025	
Officer Trainee	Detention Center								3/18/2025	3/19/2025	3/18/2025	3/19/2025		3/20/2025	4/16/2025	4/10/2025	4/16/2025	5/7/2025	4/20/2025	5/13/2025	5/20/2023	6/10/2025	6/16/2025	5/28/2025	6/13/2025	
Accounting Specialist	Detention Center	1/31/2025	2/3/2025					1/27/2025	3/12/2025	3/14/2025	3/12/2025	3/14/2025	2/3/2025	3/19/2025							4/13/2025					
Compliance Specialist	Detention Center																									
Officer Trainee	Detention Center								8/11/2025	8/11/2025	8/11/2025	8/11/2025		8/14/2025	8/23/2025	8/18/2025	8/23/2025	8/28/2025	9/11/2025	9/11/2025	9/29/2025	10/17/2025	10/15/2025	10/7/2025	10/15/2025	
Officer Trainee	Detention Center								7/15/2025	7/16/2025	7/15/2025	7/16/2025		7/18/2025	8/10/2025	8/10/2025	8/10/2025	8/18/2025	8/23/2025	8/25/2025	9/22/2025	10/7/2025	10/15/2025	9/29/2025	10/20/2025	

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting/ Discussion with Department re: ID	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Background Interview Conducted	Background Report Completed	Recruitment Packet Delivered to HR	Salary Emailed to Department	Department Routes P1 for Approval	Start Date	Psychological Scheduled	Psychological Report Received	Medical Scheduled	Medical Report Received	Time to Hire Final
Officer Trainee	Detention Center								6/18/2025	6/18/2025	6/18/2025	6/23/2025		6/27/2025	7/7/2025	7/9/2025	7/7/2025	8/4/2025	8/20/2025	8/21/2025	8/26/2025	9/30/2025	10/25/2025	9/24/2025	10/20/2025	
Officer Trainee	Detention Center								7/5/2025	7/16/2025	7/15/2025	7/16/2025		7/18/2025	8/20/2025	8/20/2025	8/20/2025	8/28/2025	9/11/2025	9/11/2025	9/29/2025	10/7/2025	10/15/2025	10/28/2025	11/17/2025	
Officer Trainee	Detention Center								8/11/2025	8/11/2025	8/11/2025	8/11/2025		8/14/2025	9/4/2025	9/3/2025	9/4/2025	9/17/2025	9/21/2025	9/26/2025	10/29/2025	11/4/2025	11/10/2025	12/12/2025	12/15/2025	
Officer Trainee	Detention Center								7/15/2025	7/16/2025	7/15/2025	7/16/2025		7/18/2025	8/14/2025	8/2/2025	8/14/2025	8/28/2025	9/4/2025	9/10/2025	1/5/2026	10/7/2025	10/15/2025	9/24/2025	10/20/2025	
Officer Trainee	Detention Center								9/8/2025	9/8/2025	9/8/2025	9/8/2025		9/12/2025	10/5/2025	10/3/2025	10/5/2025	10/15/2025	11/12/2025	11/12/2025	12/1/2025	12/9/2025		12/10/2026	1/13/2026	
Officer Trainee	Detention Center								9/8/2025	9/8/2025	9/8/2025	9/8/2025		10/24/2025	11/2/2025	11/2/2025	11/2/2025	12/19/2025		1/5/2026	1/20/2026					
Officer Trainee	Detention Center								8/11/2025	8/11/2025	8/11/2025	8/11/2025		8/14/2025	8/24/2025	8/24/2025	8/24/2025	8/28/2025	9/11/2025	9/11/2025	9/29/2025	10/7/2025	10/15/2025	10/14/2025		
Officer Trainee	Detention Center								7/15/2025	7/16/2025	7/15/2025	7/16/2025		7/18/2025	8/1/2025	8/1/2025	8/1/2025	8/20/2025	8/23/2025	8/23/2025	9/8/2025	9/9/2025	9/12/2025	9/23/2025	11/17/2025	
Captain	Detention Center	6/30/2025	5/5/2025	5/5/2025	5/5/2025	5/6/2025	5/5/2025	5/7/2025	6/5/2025	6/5/2025	6/5/2025	6/9/2025	5/21/2025	6/10/2025	6/12/2025	6/12/2025	6/13/2025	6/13/2025	6/25/2025	6/25/2025	6/29/2025					
Document Technician Dispositions	Detention Center								8/29/2025	8/29/2025	8/29/2025	9/2/2025		9/4/2025	9/28/2025	9/17/2025	9/30/2025	10/1/2025	10/31/2025	10/31/2025	11/17/2025					
Accounting Specialist	Detention Center								10/20/2025	10/20/2025	10/20/2025	10/20/2025		10/23/2025												
Officer Trainee	Detention Center								11/19/2025	11/20/2025	11/19/2025	11/20/2025		10/24/2025	11/2/2025	11/2/2025	12/3/2025	12/5/2025	12/6/2025	12/6/2025	12/22/2025	1/6/2026	1/14/2026	1/5/2026	2/13/2026	
Officer Trainee	Detention Center								12/12/2025	12/12/2025	12/12/2025	12/16/2025		11/21/2025		12/10/2025	11/20/2025	1/12/2026		1/14/2026		2/20/2026	2/20/2026	2/20/2026	2/20/2026	
Officer Trainee	Detention Center													12/18/2025	1/19/2025	1/19/2025	1/19/2025	2/5/2026	2/10/2026	2/10/2026	3/3/2026	3/3/2026	3/3/2026	3/3/2026	3/3/2026	

Job Title	Department	Date Position Became Vacant	Date Hiring Department Notified HR of Vacancy	Date Recruitment Email Sent to Department	Date Meeting/ Discussion with Department re: JD	Date Position Recruitment Form Completed	Date Requisition Approved	Date Job Description Approved	Date Job Posted	Date Interview Questions Received	Date Interview Questions Approved	Date Interview Panel Received	Date Interview Panel Approved	Date Posting Closed	Date Candidates Interviewed by Department	Date Reference Checks Completed on Selected Candidate	Date Background Submitted by HR	Date Background Completed	Date Recruitment Packet Delivered to HR	Date Salary Emailed to Department	Date Department Routes P1 for Approval	Contingent Offer made by HR	Medical Scheduled	Medical Report Received	Start Date	Time to Hire Final
Firefighter EMT Basic - **Collective Bargaining Unit** - EXTENDED	Fire & Emergency Services	11/6/2021	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	2/21/2022	2/21/2022	2/21/2022	2/21/2022	7/21/2022	7/16/2022	7/18/2022	7/18/2022	7/25/2022	7/16/2022	7/28/2022	7/28/2022	8/1/2022	8/3/2022	8/23/2022	8/15/2022	182
Firefighter EMT Basic - **Collective Bargaining Unit** - EXTENDED	Fire & Emergency Services	11/6/2021	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	2/21/2022	2/21/2022	2/21/2022	2/21/2022	7/21/2022	7/16/2022	7/18/2022	7/18/2022	7/18/2022	7/16/2022	7/28/2022	7/28/2022	8/1/2022	8/1/2022	9/18/2022	8/15/2022	182
Firefighter EMT Basic - **Collective Bargaining Unit** - EXTENDED	Fire & Emergency Services	11/6/2021	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	2/21/2022	2/21/2022	2/21/2022	2/21/2022	7/21/2022	4/28/2022	5/16/2022	5/19/2022	5/23/2022	4/29/2022	6/8/2022	6/8/2022	5/23/2022	6/21/2022	7/13/2022	7/18/2022	112
Firefighter EMT Basic - **Collective Bargaining Unit** - EXTENDED	Fire & Emergency Services	2/22/2021	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	2/21/2022	2/21/2022	2/21/2022	2/21/2022	7/21/2022	4/28/2022	5/11/2022	5/16/2022	5/19/2022	4/29/2022	6/8/2022	6/8/2022	5/23/2022	7/26/2022	9/12/2022	7/25/2022	112
Firefighter EMT Basic - **Collective Bargaining Unit** - EXTENDED	Fire & Emergency Services	2/22/2021	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	2/21/2022	2/21/2022	2/21/2022	2/21/2022	7/21/2022	4/28/2022	5/11/2022	5/16/2022	5/19/2022	4/29/2022	6/8/2022	6/8/2022	5/23/2022	6/14/2022	6/30/2022	7/18/2022	112
Firefighter EMT Basic - **Collective Bargaining Unit** - EXTENDED	Fire & Emergency Services	2/22/2021	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	2/21/2022	2/21/2022	2/21/2022	2/21/2022	7/21/2022	7/16/2022	7/16/2022	7/19/2022	7/25/2022	7/16/2022	7/19/2022	7/29/2022	8/1/2022	8/3/2022	8/22/2022	8/8/2022	182
Firefighter EMT Basic - **Collective Bargaining Unit** - EXTENDED	Fire & Emergency Services	7/1/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	2/21/2022	2/21/2022	2/21/2022	2/21/2022	7/21/2022	4/28/2022	5/23/2022	5/24/2022	6/13/2022	4/29/2022	6/14/2022	6/14/2022	5/23/2022	6/24/2022	8/2/2022	7/18/2022	112
Firefighter EMT Basic - **Collective Bargaining Unit** - EXTENDED	Fire & Emergency Services	7/1/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	2/21/2022	2/21/2022	2/21/2022	2/21/2022	7/21/2022	4/28/2022	5/11/2022	5/16/2022	6/3/2022	4/29/2022	6/8/2022	6/8/2022	5/23/2022	6/21/2023	8/2/2022	7/18/2022	112
Firefighter EMT Basic - **Collective Bargaining Unit** - EXTENDED	Fire & Emergency Services	7/1/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	2/21/2022	2/21/2022	2/21/2022	2/21/2022	7/21/2022	4/28/2022	5/11/2022	5/16/2022	6/14/2022	4/29/2022	6/16/2022	6/16/2022	5/23/2022	6/29/2022	7/26/2022	7/18/2022	112
Firefighter EMT Basic - **Collective Bargaining Unit** - EXTENDED	Fire & Emergency Services	7/1/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	2/21/2022	2/21/2022	2/21/2022	2/21/2022	7/21/2022	4/28/2022	6/5/2022	6/14/2022	6/14/2022	6/21/2022	6/27/2022	6/27/2022	5/23/2022	7/5/2022	7/20/2022	7/18/2022	112
Firefighter EMT Basic - **Collective Bargaining Unit** - EXTENDED	Fire & Emergency Services	7/1/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	2/21/2022	2/21/2022	2/21/2022	2/21/2022	7/21/2022	5/27/2022	6/1/2022	6/2/2022	6/28/2022	4/29/2022	6/29/2022	6/29/2022	5/23/2022	7/6/2022	8/2/2022	7/18/2022	112
Firefighter - EMT Lieutenant**	Fire & Emergency Services	2/9/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	2/21/2022	2/21/2022	2/21/2022	2/21/2022	7/27/2022	5/27/2022	6/17/2022	6/17/2022	6/17/2022	4/29/2022	6/28/2022	6/28/2022	6/29/2022			7/17/2022	149
Firefighter - EMT Lieutenant**	Fire & Emergency Services	2/9/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	2/21/2022	2/21/2022	2/21/2022	2/21/2022	7/27/2022	5/27/2022	6/17/2022	6/17/2022	6/17/2022	4/29/2022	6/30/2022	6/30/2022	6/30/2022			7/17/2022	150
Battalion Chief	Fire & Emergency Services	8/2/2022	8/3/2022	10/4/2022	10/4/2022	8/4/2022	8/9/2022	7/30/2022	8/9/2022	10/13/2022	10/14/2022	10/13/2022	10/14/2022	8/29/2022	11/17/2022	12/5/2022	12/14/2022	12/14/2022	11/17/2022	12/19/2022	12/28/2022	1/1/2023	1/1/2023	1/1/2023	1/1/2023	155
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	3/12/2023	10/14/2022	10/14/2022	11/1/2022	11/1/2022	11/5/2022	11/3/2022	11/7/2022	11/1/2022	11/1/2022	11/23/2022	11/23/2022	11/27/2022	12/21/2022	3/1/2023	3/1/2023	3/23/2023	3/1/2023	3/6/2023	3/6/2023	3/7/2023	3/10/2023	3/28/2023	3/20/2023	124
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	3/12/2023	10/14/2022	10/14/2022	11/1/2022	11/1/2022	11/5/2022	11/3/2022	11/7/2022	11/1/2022	11/1/2022	11/23/2022	11/23/2022	11/27/2022	12/21/2022	1/26/2023	2/8/2023	2/22/2023	1/26/2023	2/22/2023	2/23/2023	3/2/2023	3/2/2023	3/16/2023	3/20/2023	119
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	3/12/2023	10/14/2022	10/14/2022	11/1/2022	11/1/2022	11/5/2022	11/3/2022	11/7/2022	11/1/2022	11/1/2022	11/23/2022	11/23/2022	11/27/2022	12/21/2022	2/16/2023	2/16/2023	2/21/2023	2/16/2023	2/22/2023	2/22/2023	3/2/2023	3/2/2023	3/29/2023	3/20/2023	119
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	3/12/2023	10/14/2022	10/14/2022	11/1/2022	11/1/2022	11/5/2022	11/3/2022	11/7/2022	11/1/2022	11/1/2022	11/23/2022	11/23/2022	11/27/2022	12/20/2022	1/20/2023	1/25/2023	1/31/2023	1/20/2023	2/17/2023	2/17/2023	2/22/2023	2/23/2023	3/29/2023	3/20/2023	111
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	3/12/2023	10/14/2022	10/14/2022	11/1/2022	11/1/2022	11/5/2022	11/3/2022	11/7/2022	11/1/2022	11/1/2022	11/23/2022	11/23/2022	11/27/2022	12/21/2022	1/21/2023	1/26/2023	1/31/2023	1/21/2023	2/17/2023	2/17/2023	2/22/2023	2/24/2023	3/15/2023	3/20/2023	111
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	11/11/2020	10/14/2022	10/14/2022	11/1/2022	11/1/2022	11/5/2022	11/3/2022	11/7/2022	11/1/2022	11/1/2022	11/23/2022	11/23/2022	11/27/2022	12/21/2022	2/6/2023	2/8/2023	2/15/2023	2/6/2023	2/17/2023	2/17/2023	2/22/2023	2/22/2023	3/13/2023	3/20/2023	111
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	8/4/2020	10/14/2022	10/14/2022	11/1/2022	11/1/2022	11/5/2022	11/3/2022	11/7/2022	11/1/2022	11/1/2022	11/23/2022	11/23/2022	11/27/2022	12/20/2022	2/8/2023	2/9/2023	2/13/2023	2/8/2023	2/17/2023	2/17/2023	2/23/2023	2/24/2023	3/29/2023	3/20/2023	112
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	1/18/2020	10/14/2022	10/14/2022	11/1/2022	11/1/2022	11/5/2022	11/3/2022	11/7/2022	11/1/2022	11/1/2022	11/23/2022	11/23/2022	11/27/2022	12/20/2022	1/26/2023	1/26/2023	1/31/2023	1/26/2023	2/17/2023	2/17/2023	2/23/2023	2/23/2023	3/13/2023	3/20/2023	112
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	9/12/2020	10/14/2022	10/14/2022	11/1/2022	11/1/2022	11/5/2022	11/3/2022	11/7/2022	11/1/2022	11/1/2022	11/23/2022	11/23/2022	11/27/2022	12/20/2023	1/23/2023	1/25/2023	1/31/2023	1/23/2023	2/17/2023	2/23/2023	3/1/2023	3/2/2023	3/28/2023	3/20/2023	118
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	3/12/2023	10/14/2022	10/14/2022	11/1/2022	11/1/2022	11/5/2022	11/3/2022	11/7/2022	11/1/2022	11/1/2022	11/23/2022	11/23/2022	11/27/2022	12/20/2023	2/6/2023	3/1/2023	1/31/2023	2/6/2023	2/17/2023	2/17/2023	2/22/2023	2/23/2023	3/16/2023	3/20/2023	111
Firefighter EMT Basic - **Collective Bargaining Unit**	Fire & Emergency Services	9/26/2020	10/14/2022	10/14/2022	11/1/2022	11/1/2022	11/5/2022	11/3/2022	11/7/2022	11/1/2022	11/1/2022	11/23/2022	11/23/2022	11/27/2022	12/20/2022	1/18/2022	1/26/2023	2/6/2023	1/18/2023	2/8/2023	2/13/2023	2/22/2023	2/22/2023	3/28/2023	3/20/2023	111
Firefighter EMT Basic - **Collective Bargaining Unit**	Fire & Emergency Services	3/12/2023	10/14/2022	10/14/2022	11/1/2022	11/1/2022	11/5/2022	11/3/2022	11/7/2022	11/1/2022	11/01/2022	11/23/2022	1/23/2022	11/27/2022	12/21/2022	2/1/2023	2/1/2023	2/6/2023	2/1/2023	2/17/2023	2/13/2023	2/24/2023	2/24/2023	3/15/2023	3/20/2023	113
Firefighter EMT Basic - **Collective Bargaining Unit**	Fire & Emergency Services	3/12/2023	10/14/2022	10/14/2022	11/1/2022	11/1/2022	11/5/2022	11/3/2022	11/7/2022	11/1/2022	11/1/2022	11/23/2022	11/23/2022	11/27/2022	12/20/2022	1/27/2023	1/28/2023	2/6/2023	1/27/2023	2/17/2023	2/13/2023	2/27/2023	2/28/2023	3/15/2023	3/20/2023	116
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	3/12/2023	10/14/2022	10/14/2022	11/1/2022	11/1/2022	11/5/2022	11/3/2022	11/7/2022	11/1/2022	11/1/2022	11/23/2022	11/23/2022	11/27/2022	12/20/2022	1/19/2023	1/26/2023	2/1/2023	1/19/2023	2/13/2023	2/17/2023	2/22/2023	3/23/2023	3/29/2023	3/20/2023	111

Job Title	Department	Date Position Became Vacant	Date Hiring Department Notified HR of Vacancy	Date Recruitment Email Sent to Department	Date Meeting/ Discussion with Department re: JD	Date Position Recruitment Form Completed	Date Requisition Approved	Date Job Description Approved	Date Job Posted	Date Interview Questions Received	Date Interview Questions Approved	Date Interview Panel Received	Date Interview Panel Approved	Date Posting Closed	Date Candidates Interviewed by Department	Date Reference Checks Completed on Selected Candidate	Date Background Submitted by HR	Date Background Completed	Date Recruitment Packet Delivered to HR	Date Salary Emailed to Department	Date Department Routes P1 for Approval	Contingent Offer made by HR	Medical Scheduled	Medical Report Received	Start Date	Time to Hire Final
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	7/16/2022	10/14/2022	10/14/2022	11/1/2022	11/1/2022	11/5/2022	11/3/2022	11/7/2022	11/1/2022	11/1/2022	11/23/2022	11/23/2022	11/24/2022	12/20/2022	1/18/2023	1/19/2023	1/27/2023	1/18/2023	2/1/2023	2/2/2023	2/8/2023	2/23/2023	3/3/2023	3/20/2023	97
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	7/16/2022	10/14/2022	10/14/2022	11/1/2022	11/1/2022	11/5/2022	11/3/2022	11/7/2022	11/1/2022	11/1/2022	11/23/2022	11/23/2022	11/27/2022	12/20/2022	1/24/2023	1/26/2023	1/31/2023	1/24/2023	2/1/2023	2/6/2023	2/6/2023	2/23/2023	3/3/2023	3/20/2023	95
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	12/3/2022	10/14/2022	10/14/2022	11/1/2022	11/1/2022	11/5/2022	11/3/2022	11/7/2022	11/1/2022	11/1/2022	11/23/2022	11/23/2022	11/27/2022	12/20/2023	1/23/2023	1/20/2023	1/30/2023	1/23/2023	2/1/2023	2/6/2023	2/8/2023	2/23/2023	3/3/2023	3/20/2023	97
Battalion Chief	Fire & Emergency Services	8/2/2022	11/29/2022	11/29/2022	12/13/2022	12/20/2022	12/21/2022	12/13/2022	12/21/2022	1/12/2023	1/12/2023	1/12/2023	01/13/23	1/5/2023	2/21/2023	2/23/2023		2/24/2023	2/23/2023	2/27/2023	2/27/2023	2/27/2023			2/26/2023	76
Battalion Chief	Fire & Emergency Services	8/2/2022	11/29/2022	11/29/2022	12/13/2022	12/20/2022	12/21/2022	12/13/2022	12/21/2022	1/12/2023	1/12/2023	1/12/2023	1/13/2023	1/5/2023	2/21/2023	2/23/2023	2/27/2023	2/27/2023	2/23/2023	2/27/2023	2/27/2023	2/28/2023			2/26/2023	77
Fire Lieutenant	Fire & Emergency Services	2/9/2022	10/14/2022	10/27/2022	11/1/2022	11/4/2022	11/7/2022	11/4/2022	11/7/2022	11/1/2022	11/2/2022	11/28/2022	11/29/2022	11/22/2022	1/3/2023	1/6/2023	1/10/2023	1/10/2023	1/3/2023		1/17/2023	1/19/2023	1/19/2023	1/19/2023	1/29/2023	76
Fire Lieutenant	Fire & Emergency Services	7/1/2022	10/14/2022	10/27/2022	11/1/2022	11/4/2022	11/7/2022	11/4/2022	11/7/2022	11/1/2022	11/2/2022	11/28/2022	11/29/2022	11/22/2022	1/3/2023	1/6/2023	1/10/2023	1/10/2023	1/6/2023		1/17/2023	1/19/2023	1/19/2023	1/19/2023	1/29/2023	76
Fire Lieutenant	Fire & Emergency Services	1/17/2023	1/17/2023	1/18/2023	1/25/2023	1/17/2023	1/30/2023	1/25/2023	1/30/2023	2/7/2023	2/7/2023	2/8/2023	2/8/2023	2/7/2023	2/21/2023	1/6/2023		2/27/2023	1/6/2023	3/6/2023	3/7/2023	3/9/2023			3/12/2023	43
Firefighter EMT Basic - **Collective Bargaining Unit** - EXTENDED	Fire & Emergency Services	11/6/2021	1/31/2022			1/31/2022	1/31/2022	1/31/2022	1/31/2022	2/21/2022	2/21/2022	2/21/2022	2/21/2022	7/21/2022	5/27/2022	6/1/2022										N/A
Firefighter EMT Basic - **Collective Bargaining Unit** - EXTENDED	Fire & Emergency Services	11/6/2021	1/31/2022			1/31/2022	1/31/2022	1/31/2022	1/31/2022	2/21/2022	2/21/2022	2/21/2022	2/21/2022	7/21/2022	7/16/2022											N/A
Firefighter EMT Basic - **Collective Bargaining Unit** - EXTENDED	Fire & Emergency Services	11/6/2021	1/31/2022			1/31/2022	1/31/2022	1/31/2022	1/31/2022	2/21/2022	2/21/2022	2/21/2022	2/21/2022	7/21/2022	7/16/2022	7/16/2022										N/A
Firefighter - EMT Lieutenant**	Emergency Services	2/9/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	2/21/2022	2/21/2022	2/21/2022	2/21/2022	7/27/2022	5/27/2022	6/17/2022										N/A
Fire Lieutenant	Fire & Emergency Services	7/1/2022	10/14/2022	10/27/2022	11/1/2022	11/4/2022	11/7/2022	11/4/2022	11/7/2022	11/1/2022	11/2/2022	11/28/2022	11/29/2022	11/22/2022	1/3/2023	1/6/2023										N/A
Fire Lieutenant	Fire & Emergency Services	7/1/2022	10/14/2022	10/27/2022	11/1/2022	11/4/2022	11/7/2022	11/4/2022	11/7/2022	11/1/2022	11/2/2022	11/28/2022	11/29/2022	11/22/2022	1/3/2023	1/6/2023										N/A
Fire Lieutenant	Fire & Emergency Services	7/1/2022	10/14/2022	10/27/2022	11/1/2022	11/4/2022	11/7/2022	11/4/2022	11/7/2022	11/1/2022	11/2/2022	11/28/2022	11/29/2022	11/22/2022	1/3/2023	1/6/2023										N/A
Fire Lieutenant	Emergency Services	7/1/2022	10/14/2022	10/27/2022	11/1/2022	11/4/2022	11/7/2022	11/4/2022	11/7/2022	11/1/2022	11/2/2022	11/28/2022	11/29/2022	11/22/2022	1/3/2023	1/6/2023										N/A
Fire Lieutenant	Fire & Emergency Services	7/1/2022	10/14/2022	10/27/2022	11/1/2022	11/4/2022	11/7/2022	11/4/2022	11/7/2022	11/1/2022	11/2/2022	11/28/2022	11/29/2022	11/22/2022	1/3/2023	1/6/2023										N/A
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	8/19/2020	10/14/2022	10/14/2022	11/1/2022	11/1/2022	11/5/2022	11/3/2022	11/7/2022						11/27/2022			1/23/2023	1/19/2023	2/8/2023	2/13/2023					N/A
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	N/A	10/14/2022	10/14/2022	11/1/2022	11/1/2022	11/5/2022	11/3/2022	11/7/2022						11/27/2022											N/A
Recruiting Coordinator	Fire & Emergency Services	3/30/2023	3/31/2023	3/31/2023	3/31/2023	3/31/2023	4/3/2023	3/31/2023	4/4/2023	4/19/2023	4/19/2023	5/2/2023	5/2/2023	4/18/2023	5/24/2023	6/1/2023	6/1/2023	6/20/2023	5/25/2023	6/21/2023	6/23/2023	6/26/2023			7/17/2023	N/A
Secretary	Fire & Emergency Services	1/4/2023	1/17/2023	1/17/2023	1/17/2023	1/18/2023	1/18/2023	1/18/2023	1/18/2023					1/25/2023												N/A
Fire Lieutenant	Fire & Emergency Services	1/7/2023	1/17/2023	1/18/2023	1/25/2023	1/17/2023	1/30/2023	1/25/2023	1/30/2023	2/7/2023	2/7/2023	2/8/2023	2/8/2023	2/7/2023	2/21/2023											N/A
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	5/9/2023	5/15/2023	5/17/2023	5/18/2023	5/18/2023	5/22/2023	5/18/2023	5/22/2023	6/8/2023	6/22/2023	6/22/2023	6/22/2023	6/20/2023	8/3/2023	8/21/2023	8/15/2023	8/18/2023	8/21/2023	8/21/2023	9/7/2023	9/8/2023	9/8/2023	9/29/2023	10/16/2023	

Job Title	Department	Date Position Became Vacant	Date Hiring Department Notified HR of Vacancy	Date Recruitment Email Sent to Department	Date Meeting/ Discussion with Department re: JD	Date Position Recruitment Form Completed	Date Requisition Approved	Date Job Description Approved	Date Job Posted	Date Interview Questions Received	Date Interview Questions Approved	Date Interview Panel Received	Date Interview Panel Approved	Date Posting Closed	Date Candidates Interviewed by Department	Date Reference Checks Completed on Selected Candidate	Date Background Submitted by HR	Date Background Completed	Date Recruitment Packet Delivered to HR	Date Salary Emailed to Department	Date Department Routes P1 for Approval	Contingent Offer made by HR	Medical Scheduled	Medical Report Received	Start Date	Time to Hire Final
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	5/9/2023	5/15/2023	5/17/2023	5/18/2023	5/18/2023	5/22/2023	5/18/2023	5/22/2023	6/8/2023	6/22/2023	6/22/2023	6/22/2023	6/20/2023	8/3/2023	8/8/2023	8/14/2023	8/23/2023	8/22/2023	8/23/2023	9/7/2023	9/8/2023	9/8/2023	10/5/2023	10/16/2023	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	5/9/2023	5/15/2023	5/17/2023	5/18/2023	5/18/2023	5/22/2023	5/18/2023	5/22/2023	6/8/2023	6/22/2023	6/22/2023	6/22/2023	6/20/2023	8/4/2023	8/18/2023	8/17/2023	8/25/2023	8/22/2023	8/22/2023	9/8/2023	9/8/2023	9/11/2023	10/5/2023	10/16/2023	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	5/9/2023	5/15/2023	5/17/2023	5/18/2023	5/18/2023	5/22/2023	5/18/2023	5/22/2023	6/8/2023	6/22/2023	6/22/2023	6/22/2023	6/20/2023	8/7/2023	8/10/2023	8/14/2023	8/17/2023	8/22/2023	8/22/2023	9/7/2023	9/8/2023	9/8/2023	10/5/2023	10/16/2023	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	5/9/2023	5/15/2023	5/17/2023	5/18/2023	5/18/2023	5/22/2023	5/18/2023	5/22/2023	6/8/2023	6/22/2023	6/22/2023	6/22/2023	6/20/2023	8/3/2023	8/14/2023	8/14/2023	8/16/2023	8/22/2023	8/22/2023	9/7/2023	9/8/2023	9/8/2023	10/5/2023	10/16/2023	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	5/9/2023	5/15/2023	5/17/2023	5/18/2023	5/18/2023	5/22/2023	5/18/2023	5/22/2023	6/8/2023	6/22/2023	6/22/2023	6/22/2023	6/20/2023	8/3/2023	8/15/2023	9/12/2023	9/21/2023	8/22/2023	8/22/2023	9/7/2023	9/27/2023	9/27/2023	10/13/2023	10/16/2023	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	5/9/2023	5/15/2023	5/17/2023	5/18/2023	5/18/2023	5/22/2023	5/18/2023	5/22/2023	6/8/2023	6/22/2023	6/22/2023	6/22/2023	6/20/2023	8/4/2023	8/14/2023	8/14/2023	8/16/2023	8/14/2023	8/14/2023	9/7/2023	9/8/2023	9/8/2023	10/5/2023	10/16/2023	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	5/9/2023	5/15/2023	5/17/2023	5/18/2023	5/18/2023	5/22/2023	5/18/2023	5/22/2023	6/8/2023	6/22/2023	6/22/2023	6/22/2023	6/22/2023	8/4/2023	8/22/2023	8/16/2023	8/21/2023	8/22/2023	8/22/2023	9/7/2023	9/8/2023	9/8/2023	9/29/2023	10/16/2023	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	5/9/2023	5/15/2023	5/17/2023	5/18/2023	5/18/2023	5/22/2023	5/18/2023	5/22/2023	6/8/2023	6/22/2023	6/22/2023	6/22/2023	6/20/2023	8/4/2023	8/22/2023	8/17/2023	8/21/2023	8/22/2023	8/22/2023	9/7/2023	9/8/2023	9/8/2023	9/29/2023	10/16/2023	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	5/9/2023	5/15/2023	5/17/2023	5/18/2023	5/18/2023	5/22/2023	5/18/2023	5/22/2023	6/8/2023	6/22/2023	6/22/2023	6/22/2023	6/20/2023	8/3/2023	8/22/2023	8/19/2023	8/22/2023	8/22/2023	8/22/2023	9/7/2023	9/8/2023	9/8/2023	10/5/2023	10/16/2023	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	5/9/2023	5/15/2023	5/17/2023	5/18/2023	5/18/2023	5/22/2023	5/18/2023	5/22/2023	6/8/2023	6/22/2023	6/22/2023	6/22/2023	6/20/2023	8/4/2023	8/22/2023	8/18/2024	8/22/2023	8/22/2023	8/22/2023	9/7/2023	9/8/2023	9/8/2023	10/10/2023	10/16/2023	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	5/9/2023	5/15/2023	5/17/2023	5/18/2023	5/18/2023	5/22/2023	5/18/2023	5/22/2023	6/8/2023	6/22/2023	6/22/2023	6/22/2023	6/20/2023	8/7/2023	8/21/2023	8/15/2023	8/18/2023	8/21/2023	8/21/2023	9/7/2023	9/8/2023	9/8/2023	9/29/2023	10/16/2023	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	5/9/2023	5/15/2023	5/17/2023	5/18/2023	5/18/2023	5/22/2023	5/18/2023	5/22/2023	6/8/2023	6/22/2023	6/22/2023	6/22/2023	6/20/2023	8/7/2023	8/22/2023	8/16/2023	8/28/2023	8/22/2023	8/22/2023	9/7/2023	9/8/2023	9/8/2023	10/5/2023	10/16/2023	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	5/9/2023	5/15/2023	5/17/2023	5/18/2023	5/18/2023	5/22/2023	5/18/2023	5/22/2023	6/8/2023	6/22/2023	6/22/2023	6/22/2023	6/20/2023	8/4/2023	8/18/2023	8/14/2023	8/17/2023	8/18/2023	9/8/2023	9/7/2023	9/8/2023	9/8/2023	9/29/2023	10/16/2023	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	5/9/2023	5/15/2023	5/17/2023	5/18/2023	5/18/2023	5/22/2023	5/18/2023	5/22/2023	6/8/2023	6/22/2023	6/22/2023	6/22/2023	6/20/2023	8/3/2024	8/22/2023	8/18/2023	8/24/2023	8/22/2023	8/22/2023	9/8/2023	9/8/2023	9/8/2023	10/5/2023	10/16/2023	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	5/9/2023	5/15/2023	5/17/2023	5/18/2023	5/18/2023	5/22/2023	5/18/2023	5/22/2023	6/8/2023	6/22/2023	6/22/2023	6/22/2023	6/20/2023	8/3/2023	8/22/2023	9/12/2023	9/13/2023	8/22/2023	8/22/2023	9/8/2023	9/13/2023	9/13/2023	10/5/2023	10/16/2023	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	5/9/2023	5/15/2023	5/17/2023	5/18/2023	5/18/2023	5/22/2023	5/18/2023	5/22/2023	6/8/2023	6/22/2023	6/22/2023	6/22/2023	6/20/2023	8/4/2023	8/29/2023	9/11/2023	9/13/2023	8/29/2023	8/29/2023	9/8/2023	9/13/2023	9/13/2023	10/5/2023	10/16/2023	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	5/9/2023	5/15/2023	5/17/2023	5/18/2023	5/18/2023	5/22/2023	5/18/2023	5/22/2023	6/8/2023	6/22/2023	6/22/2023	6/22/2023	6/20/2023	8/3/2023	8/29/2023	9/12/2023	9/13/2023	8/29/2023	8/22/2023	9/8/2023	9/13/2023	9/13/2023	10/10/2023	10/16/2023	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	5/9/2023	5/15/2023	5/17/2023	5/18/2023	5/18/2023	5/22/2023	5/18/2023	5/22/2023	6/8/2023	6/22/2023	6/22/2023	6/22/2023	6/20/2023	8/3/2023	8/22/2023	9/11/2023	9/13/2023	8/22/2023	8/22/2023	9/8/2023	9/13/2023	9/13/2023	10/10/2023	10/16/2023	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	5/9/2023	5/15/2023	5/17/2023	5/18/2023	5/18/2023	5/22/2023	5/18/2023	5/22/2023	6/8/2023	6/22/2023	6/22/2023	6/22/2023	6/20/2023	8/4/2023	8/22/2023	9/11/2023	9/11/2023	8/22/2023	8/22/2023	9/8/2023	9/11/2023	9/11/2023	9/29/2023	10/16/2023	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	5/9/2023	5/15/2023	5/17/2023	5/18/2023	5/18/2023	5/22/2023	5/18/2023	5/22/2023	6/8/2023	6/22/2023	6/22/2023	6/22/2023	6/20/2023	8/4/2023	8/13/2023	9/11/2023	9/12/2023	8/29/2023	8/29/2023	9/8/2023	9/12/2023	9/12/2023	10/13/2023	10/16/2023	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	5/9/2023	5/15/2023	5/17/2023	5/18/2023	5/18/2023	5/22/2023	5/18/2023	5/22/2023	6/8/2023	6/22/2023	6/22/2023	6/22/2023	6/20/2023	8/3/2023	9/29/2023	9/12/2023	9/14/2023	9/29/2023	9/29/2023	9/8/2023	9/14/2023	9/14/2023	10/10/2023	10/16/2023	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	5/9/2023	5/15/2023	5/17/2023	5/18/2023	5/18/2023	5/22/2023	5/18/2023	5/22/2023	6/8/2023	6/22/2023	6/22/2023	6/22/2023	6/20/2023	8/3/2023	8/14/2023	9/13/2023	9/14/2023	8/22/2023	8/22/2023	9/8/2023	9/14/2023	9/14/2023	10/5/2023	10/16/2023	
Deputy Chief	Fire & Emergency Services	5/9/2023	6/20/2023	6/26/2023	6/26/2023	6/26/2023	6/27/2023	6/26/2023	6/30/2023	7/17/2023	7/17/2023	7/17/2023	7/17/2023	7/16/2023												
Fire Lieutenant	Fire & Emergency Services	6/17/2022	7/17/2023	7/17/2023	7/17/2023	7/17/2023	7/19/2023	7/17/2023	8/4/2023	11/3/2023	11/7/2023	11/3/2023	11/7/2023	8/11/2023	11/14/2023	11/15/2023			11/15/2023	11/15/2023	11/29/2023				11/19/2023	
Deputy Chief	Fire & Emergency Services	5/9/2023	7/18/2023	7/18/2023	7/18/2023	7/18/2023	7/20/2023	7/20/2023	7/20/2023	7/17/2023	7/31/2023	7/17/2023	7/17/2023	7/30/2023	8/21/2023	9/5/2023	9/5/2023	9/11/2023	9/5/2023	9/12/2023	9/12/2023	9/14/2023	9/15/2023	10/10/2023	10/23/2023	
Fire Prevention Specialist	Fire & Emergency Services	7/1/2023	6/12/2023	6/12/2023	6/23/2023	7/20/2023	7/20/2023	7/18/2023	7/21/2023	8/16/2023	8/17/2023	8/16/2023	8/17/2023	8/6/2023	9/6/2023	9/8/2023	9/8/2023	9/12/2023	9/8/2023	9/12/2023	9/14/2023	9/18/2023	9/22/2023	10/10/2023	10/23/2023	
Inventory Technician Senior	Fire & Emergency Services	9/18/2023	9/18/2023	9/21/2023	9/19/2023		9/21/2023	9/19/2023	9/21/2023	10/5/2023	10/12/2023	10/5/2023	10/12/2023	10/8/2023	10/8/23/23	12/15/2023	12/18/2023	12/12/2023	12/15/2023	12/15/2023	12/18/2023	12/19/2023			1/8/2024	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services		9/20/2023	9/21/2023			9/21/2023	9/21/2023	9/23/2023	11/28/2023	11/30/2023	12/6/2023	12/6/2023	12/05/12023	12/13/2023	12/13/2023	12/16/2023	1/9/2024	1/3/2024							

Job Title	Department	Date Position Became Vacant	Date Hiring Department Notified HR of Vacancy	Date Recruitment Email Sent to Department	Date Meeting/ Discussion with Department re: JD	Date Position Recruitment Form Completed	Date Requisition Approved	Date Job Description Approved	Date Job Posted	Date Interview Questions Received	Date Interview Questions Approved	Date Interview Panel Received	Date Interview Panel Approved	Date Posting Closed	Date Candidates Interviewed by Department	Date Reference Checks Completed on Selected Candidate	Date Background Submitted by HR	Date Background Completed	Date Recruitment Packet Delivered to HR	Date Salary Emailed to Department	Date Department Routes P1 for Approval	Contingent Offer made by HR	Medical Scheduled	Medical Report Received	Start Date	Time to Hire Final
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services		9/20/2023	9/21/2023			9/21/2023	9/21/2023	9/23/2023	11/30/2023	11/30/2023	12/6/2023	12/6/2023	12/5/2023	12/14/2023	12/20/2023	12/15/2023	1/8/2024	1/3/2024							
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services		9/20/2023	9/21/2023			9/21/2023	9/21/2023	9/23/2023	11/30/2023	11/30/2023	12/6/2023	12/6/2023	12/5/2023	12/15/2023	12/18/2023	12/20/2023	1/2/2024	1/4/2024	1/4/2024	1/4/2024	1/8/2024	1/8/2024	2/15/2024	3/18/2024	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	9/20/2024	9/21/2024	9/21/2024			9/21/2023	9/21/2023	9/23/2023	11/30/2023	11/30/2023	12/6/2023	12/6/2023	12/5/2023	12/15/2023	1/8/2023	12/19/2023	12/22/2023	1/8/2024	1/8/2024	1/9/2024	1/18/2024	1/18/2024	2/15/2024	3/18/2024	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	9/20/2023	9/21/2023	9/21/2023			9/21/2023	9/21/2023	9/23/2023	11/30/2023	11/30/2023	12/6/2023	12/6/2023	12/5/2023	12/14/2023	12/21/2023	12/17/2023	12/18/2023	1/8/2024	1/8/2024	1/23/2024	1/23/2024	1/23/2024	3/12/2024	3/18/2024	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	9/20/2023	9/21/2023	9/23/2023			9/21/2023	9/21/2023	9/23/2023	11/30/2023	11/30/2023	12/6/2023	12/6/2023	12/5/2023	12/14/2023	1/8/2024	12/17/2023	1/9/2024	1/3/2024	1/8/2024	1/9/2024	1/18/2024	1/18/2024	3/15/2024	3/18/2024	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services		9/20/2023	9/21/2023			9/21/2023	9/21/2023	9/23/2023	11/30/2023	11/30/2023	2/2/2024	2/5/2024	2/1/2024	2/7/2024	2/9/2024	2/8/2024	2/26/2024	2/9/2024	2/9/2024	2/9/2024	2/12/2024	2/12/2024	3/15/2024	3/18/2024	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	9/20/2023	9/21/2023	9/21/2023			9/21/2023	9/21/2023	9/23/2023	11/30/2023	11/30/2023	12/6/2023	12/6/2023	12/5/2023	12/15/2023	12/18/2023	12/17/2023	1/3/2024	1/23/2024	1/23/2024	1/9/2024	2/8/2024	2/8/2024	3/13/2024	3/18/2024	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	9/20/2023	9/21/2023	9/21/2023			9/21/2023	9/21/2023	9/23/2023	11/30/2023	11/30/2023	12/6/2023	12/6/2023	12/5/2023	12/15/2023	1/8/2024	1/18/2024	1/23/2024	1/8/2024	1/8/2024	1/9/2024	1/18/2024	1/18/2024	3/13/2024	3/18/2024	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services		9/20/2023	9/21/2023			9/21/2023	9/21/2023	9/23/2023	11/30/2024	11/30/2024	2/2/2024	2/5/2024	2/1/2024	2/7/2024	2/9/2024	2/8/2024	2/14/2024	2/9/2024	2/9/2024	2/9/2024	2/14/2024	2/14/2024	3/15/2024	3/18/2024	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services		9/21/2023	9/21/2023			9/21/2023	9/21/2023	9/23/2023	11/30/2023	11/30/2023	12/6/2023	12/6/2023	12/5/2023	12/15/2023	1/8/2024	12/16/2023	12/19/2023	1/8/2024	1/8/2024	1/9/2024	1/18/2024	1/18/2024	2/15/2024	3/18/2024	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	9/20/2023	9/21/2023	9/21/2023			9/21/2023	9/21/2023	9/23/2023	11/30/2023	11/30/2023	12/6/2023	12/6/2023	12/5/2023	12/14/2023	1/8/2024	12/18/2023	12/20/2023	1/8/2024	1/8/2024	2/14/2024	2/14/2024	2/14/2024	3/15/2024	3/18/2024	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	9/20/2023	9/21/2023	9/21/2023			9/21/2023	9/21/2023	9/23/2023	11/30/2023	11/30/2023	12/6/2023	12/6/2023	12/5/2023	12/14/2023	1/8/2024	12/16/2023	1/2/2024	1/8/2024	1/8/2024	1/17/2024	1/18/2024	1/18/2024	3/11/2024	3/18/2024	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services		9/20/2023	9/21/2023			9/21/2023	9/21/2023	9/23/2023	11/30/2024	11/30/2024	2/2/2024	2/5/2024	2/1/2024	2/7/2024	2/12/2024	2/8/2024	2/14/2024	2/12/2024	2/9/2024	2/9/2024	2/14/2024	2/14/2024	3/15/2024	3/18/2024	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	9/20/2023	9/21/2023	9/21/2023			9/21/2023	9/21/2023	9/23/2023	11/30/2023	11/30/2023	12/6/2023	12/6/2023	12/5/2023	12/14/2023	1/8/2024	12/15/223	12/18/2023	1/8/2024	1/8/2024	1/9/2024	1/18/2024	1/18/2024	3/13/2024	3/18/2024	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	9/20/2023	9/21/2023	9/21/2023			9/21/2023	9/21/2023	9/23/2023	11/30/2023	11/30/2023	12/6/2023	12/6/2023	12/5/2023	12/14/2023	1/8/2024	12/18/2023	12/19/2023	1/8/2024	1/26/2024	2/8/2024	2/9/2024	2/9/2024	3/12/2024	3/18/2024	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	9/20/2023	9/21/2023	9/21/2023			9/21/2023	9/21/2023	9/23/2023	11/30/2023	11/30/2023	12/6/2023	12/6/2023	12/5/2023	12/13/2023	12/20/2023	12/15/2023	1/29/2024	1/3/2024	1/8/2024	2/8/2024	2/9/2024	2/9/2024	3/13/2024	3/18/2024	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	9/20/2023	9/20/2024	9/21/2024			9/21/2023	9/21/2023	9/23/2023	11/30/2023	11/30/2023	2/2/2024	2/5/2024	2/1/2024	2/7/2024	2/9/2024	2/8/2024	2/15/2024	2/9/2024	2/9/2024	2/9/2024	2/14/2024	2/14/2024	3/8/2024	3/18/2024	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	9/20/2024	9/21/2024	9/21/2024			9/21/2023	9/21/2023	9/23/2023	11/30/2023	11/30/2023	12/6/2023	12/6/2023	12/5/2023	12/15/2023	1/8/2024	1/18/2024	1/23/2024	1/8/2024	1/8/2024	1/9/2024	2/8/2024	2/8/2024	3/13/2024	3/18/2024	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	9/20/2024	9/21/2024	9/21/2024			9/21/2023	9/21/2023	9/23/2023	11/30/2023	11/30/2023	12/6/2023	12/6/2023	12/5/2023	12/13/2023	1/8/2024	12/16/2023	12/18/2023	1/8/2024	1/8/2024	1/9/2024	2/8/2024	2/8/2024	3/13/2024	3/18/2024	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	9/20/2024	9/21/2024	9/21/2024			9/21/2023	9/21/2023	9/23/2023	11/30/2023	11/30/2023	12/6/2023	12/6/2023	12/5/2023	12/14/2023	1/8/2024	12/18/2023	12/18/2023	1/8/2024	1/8/2024	1/9/2024	1/23/2024	1/23/2024	3/8/2024	3/18/2024	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	9/20/2024	9/21/2024	9/21/2024			9/21/2023	9/21/2023	9/23/2023	11/30/2023	11/30/2023	12/6/2023	12/6/2023	12/5/2023	12/15/2023	1/22/2024	12/6/2024	12/20/2023	1/2/2024	1/8/2024	1/9/2024	1/23/2024	1/23/2024	3/13/2024	3/18/2024	
Firefighter EMT Basic **Collective Bargaining Unit**	Fire & Emergency Services	9/20/2024	9/21/2024	9/21/2024			9/21/2023	9/21/2023	9/23/2023	11/30/2023	11/30/2023	12/6/2023	12/6/2023	12/5/2023	12/14/2024	1/3/2024	12/17/2024	1/22/2024	1/23/2024	1/8/2024	1/9/2024	1/26/2024	1/26/2024	3/15/2024	3/18/2024	
Fire Lieutenant	Fire & Emergency Services	3/11/2023	12/18/2023	12/18/2023	12/18/2023		12/18/2023	12/18/2023	12/21/2023	12/18/2023	12/18/2023	1/23/2024	1/23/2024	1/14/2024	2/9/2024	2/9/2024			2/9/2024	2/9/2024	2/9/2024	2/14/2024	1/26/2024	3/15/2024	2/11/2024	
Fire Lieutenant	Fire & Emergency Services	7/1/2022	12/18/2023	12/18/2023	12/18/2023		12/18/2023	12/18/2023	12/21/2023	12/18/2023	12/18/2023	1/23/2024	1/23/2024	1/14/2024	2/9/2024	2/9/2024			2/9/2024	2/9/2024	2/9/2024	2/14/2024			2/11/2024	
Fire Lieutenant	Fire & Emergency Services	7/1/2022	12/18/2023	12/18/2023	12/18/2023		12/18/2023	12/18/2023	12/21/2023	12/18/2023	12/18/2023	1/23/2024	1/23/2024	1/14/2024	2/9/2024	2/9/2024			2/9/2024	2/9/2024	2/9/2024	2/12/2024			2/11/2024	
Fire Lieutenant	Fire & Emergency Services	1/5/2024	12/18/2023	12/18/2023	12/18/2023		12/18/2023	12/18/2023	12/21/2023	12/18/2023	12/18/2023	1/23/2024	1/23/2024	1/14/2024	2/9/2024	2/9/2024			2/9/2024	2/9/2024	2/9/2024	2/12/2024			2/11/2024	
Fire Lieutenant	Fire & Emergency Services	1/5/2024	12/18/2023	12/18/2023	12/18/2023		12/18/2023	12/18/2023	12/21/2023	12/18/2023	12/18/2023	1/23/2024	1/23/2024	1/14/2024	2/9/2024	2/9/2024			2/9/2024	2/9/2024	2/9/2024	2/12/2024			2/11/2024	
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2023	8/6/2024	8/8/2024	7/29/2024	8/27/2024	9/9/2024	8/29/2024	8/30/2024	9/9/2024	9/9/2024	9/19/2024	9/21/2024	9/21/2024	10/11/2024	10/15/2024	

Job Title	Department	Date Position Became Vacant	Date Hiring Department Notified HR of Vacancy	Date Recruitment Email Sent to Department	Date Meeting/ Discussion with Department re: JD	Date Position Recruitment Form Completed	Date Requisition Approved	Date Job Description Approved	Date Job Posted	Date Interview Questions Received	Date Interview Questions Approved	Date Interview Panel Received	Date Interview Panel Approved	Date Posting Closed	Date Candidates Interviewed by Department	Date Reference Checks Completed on Selected Candidate	Date Background Submitted by HR	Date Background Completed	Date Recruitment Packet Delivered to HR	Date Salary Emailed to Department	Date Department Routes P1 for Approval	Contingent Offer made by HR	Medical Scheduled	Medical Report Received	Start Date	Time to Hire Final
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	7/29/2024	08/27/244	9/9/2024	8/28/2024	8/30/2024	9/9/2024	9/9/2024	9/19/2024	9/20/2024	9/20/2024	10/11/2024	10/15/2024	
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	9/9/2024	9/11/2024	9/6/2024	9/20/2024	9/20/2024	9/15/2024	9/24/2024	9/25/2024	9/25/2024	9/25/2024	9/27/2024	9/27/2024	10/10/2024	10/15/2024	
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	7/29/2024	8/26/2024	9/9/2024	8/30/2024	9/6/2024	9/9/2024	9/9/2024	9/19/2024	9/21/2024	9/24/2024	10/11/2024	10/15/2024	
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	7/29/2024	8/28/2024	9/9/2024	8/29/2024	9/6/2024	9/9/2024	9/9/2024	9/19/2024	9/21/2024	9/21/2024	10/11/2024	10/15/2024	
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	7/29/2024	8/28/2024	9/9/2024	8/31/2024	9/9/2024	9/9/2024	9/9/2024	9/19/2024	9/21/2024	9/21/2024	10/11/2024	10/15/2024	
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	7/29/2024	8/27/2024	9/9/2024	8/28/2024	8/30/2024	9/9/2024	9/9/2024	9/19/2024	9/23/2024	9/23/2024	10/10/2024	10/15/2024	
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	9/9/2024	9/11/2024	9/6/2024	9/20/2024	9/20/2024	9/13/2024	9/18/2024	9/24/2024	9/24/2024	9/25/2024	9/27/2024	9/27/2024	10/29/2024	10/15/2024	
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	7/29/2024	8/26/2024	9/9/2024	8/29/2024	9/13/2024	9/9/2024	9/9/2024	9/21/2024	9/21/2024	9/21/2024	10/8/2024	10/15/2024	
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	7/29/2024	8/26/2024	9/9/2024	8/29/2024	9/13/2024	9/9/2024	9/9/2024	9/21/2024	9/21/2024	9/21/2024	10/11/2024	10/15/2024	
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	7/29/2024	8/28/2024	9/9/2024	8/29/2024	9/13/2024	9/9/2024	9/9/2024	9/19/2024	9/21/2024	9/21/2024	10/15/2024	10/15/2024	
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	7/29/2024	8/26/2024	9/9/2024	8/28/2024	8/30/2024	9/9/2024	9/9/2024	9/19/2024	9/21/2024	9/21/2024	10/10/2024	10/15/2024	
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	7/29/2024	8/27/2024	9/9/2024	8/28/2024	8/29/2024	9/9/2024	9/9/2024	9/19/2024	9/20/2024	9/20/2024	10/8/2024	10/15/2024	
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	7/29/2024	8/26/2024	9/9/2024	8/28/2024	9/5/2024	9/9/2024	9/9/2024	9/19/2024	9/21/2024	9/21/2024	10/10/2024	10/15/2024	
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	7/29/2024	8/27/2024	9/9/2024	8/29/2024	9/4/2024	9/9/2024	9/9/2024	9/19/2024	9/20/2024	9/20/2024	10/10/2024	10/15/2024	
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	7/29/2024	8/26/2024	9/9/2024	8/30/2024	9/13/2024	9/9/2024	9/9/2024	9/19/2024	9/20/2024	9/20/2024	10/10/2024	10/15/2024	
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	7/29/2024	8/26/2024	9/9/2024	8/29/2024	9/4/2024	9/9/2024	9/9/2024	9/19/2024	9/20/2024	9/20/2024	10/10/2024	10/15/2024	
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	9/9/2024	12/11/2024	9/6/2024	9/20/2024	9/20/2024	9/13/2024	9/18/2024	9/24/2024	9/9/2024	9/19/2024	9/27/2024	9/27/2024	10/11/2024	10/15/2024	
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	07/29/240	8/26/2024	9/9/2024	8/29/2024	8/30/2024	9/9/2024	9/9/2024	9/25/2024	9/25/2024	9/25/2024	10/8/2024	10/15/2024	
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	07/29/240	8/27/2024	9/9/2024	8/31/2024	9/6/2024	9/9/2024	9/9/2024	9/19/2024	9/21/2024	9/21/2024	10/11/2024	10/15/2024	
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	07/29/240	8/28/2024	9/4/2024	8/28/2024	9/10/2024	9/9/2024	9/9/2024	9/19/2024	9/20/2024	9/20/2024	10/10/2024	10/15/2024	
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	07/29/240	8/26/2024	9/9/2024	8/29/2024	8/29/2024	9/9/2024	9/9/2024	9/19/2024	9/20/2024	9/20/2024	10/10/2024	10/15/2024	
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	07/29/240	8/27/2024	9/9/2024	8/29/2024	8/30/2024	8/9/2024	8/9/2024	8/19/2024	9/21/2024	9/21/2024	10/11/2024	10/15/2024	
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	07/29/240	8/27/2024	9/9/2024	8/28/2024	9/12/2024	9/9/2024	9/9/2024	9/19/2024	9/21/2024	9/19/2024	10/15/2024	10/15/2024	
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	9/9/2024	9/11/2024	9/6/2024	9/20/2024	9/20/2024										
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	7/29/2024	8/27/2024	9/4/2024	9/11/2024	9/16/2024	9/9/2024							
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	9/9/2024	9/11/2024	9/6/2024	9/20/2024	9/24/2024	9/18/2024	9/23/2024	9/25/2024	9/25/2024	9/26/2024	9/27/2024	9/30/2024	10/18/2024		

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Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	7/29/2024	9/20/2024	9/24/2024										
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	07/29/240		9/9/2024										
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	07/29/240		8/29/2024	8/29/2024	8/30/2024								
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	07/29/240			8/29/2024	8/30/2024								
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	07/29/240												
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	07/29/240	8/27/2024											
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	07/29/240												
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	07/29/240												
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	07/29/240												
Firefighter EMT	Fire & Emergency Services				11/4/2024		6/28/2024	11/4/2024	6/28/2024	8/8/2024	12/11/2024	8/6/2024	8/8/2024	07/29/240												
Battalion Chief	Fire & Emergency Services									11/19/2024	11/19/2024	12/4/2024	12/4/2024		12/12/2024											
Fire Rescue-Lieutenant	Fire & Emergency Services									12/4/2024	12/4/2024	12/4/2024	12/6/2024			12/11/2024			12/11/2024							
Lieutenant Firefighter-EMT	Fire & Emergency Services									12/4/2024	12/4/2024	12/4/2024	12/6/2024			12/11/2024			12/11/2024							
Fire- Driver Operator	Fire & Emergency Services		12/10/2024	12/10/2024	12/10/2024	12/10/2024	12/10/2024	12/10/2024	12/10/2024	1/6/2025	1/13/2025	1/6/2025	1/13/2025	12/19/2024	1/22/2025	1/24/2025			1/24/2025		1/23/2025	2/4/2025				
Division Chief	Fire & Emergency Services	12/16/2024			12/5/2024		12/16/2024	12/5/2024	12/16/2024	2/18/2025	12/5/2024	2/18/2025	2/26/2025		3/5/2025	3/24/2025	3/12/2025	3/24/2025	3/26/2025		3/26/2025	3/31/2025				
Deputy Chief	Fire & Emergency Services	12/16/2024			12/3/2024		12/16/2024	12/3/2024	12/16/2024	2/26/2025	2/26/2025	2/18/2025	2/26/2025		3/5/2025	3/24/2025	3/12/2025	3/24/2025	3/26/2025		3/26/2025	3/31/2025	3/31/2025		5/5/2025	
Fire Driver Operator	Fire & Emergency Services									4/29/2025	4/29/2025	4/29/2025	5/2/2025		5/5/2025	5/14/2025			5/14/2025		5/7/2025				5/18/2025	
Battallion Chief	Fire & Emergency Services									5/20/2025	5/21/2025	5/20/2025	5/21/2025		5/28/2025	6/4/2025			6/4/2025							
Battallion Chief	Fire & Emergency Services									5/20/2025	5/21/2025	5/20/2025	5/21/2025		5/28/2025	1/6/2026	1/6/2026	1/6/2026	6/4/2025	1/6/2026	1/6/2026	1/9/2026			1/11/2026	
Lieutenant Firefighter-EMT	Fire & Emergency Services									4/29/2025	4/29/2025	4/29/2025	5/2/2025		5/5/2025											
Firefighter-EMT Driver Operator	Fire & Emergency Services									5/30/2025	6/4/2025	5/30/2025	6/4/2025		6/12/2025	6/25/2025			6/25/2025		7/3/2025	7/8/2025			7/13/2025	
Firefighter-EMT Driver Operator	Fire & Emergency Services									5/30/2025	6/4/2025	5/30/2025	6/4/2025		6/12/2025	6/25/2025			6/25/2025		7/3/2025	7/8/2025			7/13/2025	
Firefighter-EMT Driver Operator	Fire & Emergency Services									5/30/2025	6/4/2025	5/30/2025	6/4/2025		6/12/2025	6/25/2025			6/25/2025		7/3/2025	7/8/2025			7/13/2025	
Firefighter-EMT Driver Operator	Fire & Emergency Services									5/30/2025	6/4/2025	5/30/2025	6/4/2025		6/12/2025	6/25/2025			6/25/2025		7/3/2025	7/8/2025			7/13/2025	
Firefighter-EMT Driver Operator	Fire & Emergency Services									5/30/2025	6/4/2025	5/30/2025	6/4/2025		6/12/2025	6/25/2025			6/25/2025		7/3/2025	7/8/2025			7/13/2025	
Firefighter-EMT Driver Operator	Fire & Emergency Services									5/30/2025	6/4/2025	5/30/2025	6/4/2025		6/12/2025	6/25/2025			6/25/2025		7/3/2025	7/8/2025			7/13/2025	
Firefighter-EMT Driver Operator	Fire & Emergency Services									5/30/2025	6/4/2025	5/30/2025	6/4/2025		6/12/2025	6/25/2025			6/25/2025		7/3/2025	7/8/2025			7/13/2025	

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Firefighter-EMT Driver Operator	Fire & Emergency Services									5/30/2025	6/4/2025	5/30/2025	6/4/2025		6/12/2025	6/25/2025			6/25/2025		7/3/2025	7/8/2025			7/13/2025	
Firefighter-EMT Driver Operator	Fire & Emergency Services									5/30/2025	6/4/2025	5/30/2025	6/4/2025		6/12/2025	6/25/2025			6/25/2025		7/3/2025	7/8/2025			7/13/2025	
Firefighter-EMT Driver Operator	Fire & Emergency Services									5/30/2025	6/4/2025	5/30/2025	6/4/2025		6/12/2025	6/25/2025			6/25/2025		7/3/2025	7/8/2025			7/13/2025	
Firefighter-EMT Driver Operator	Fire & Emergency Services									5/30/2025	6/4/2025	5/30/2025	6/4/2025		6/12/2025	6/25/2025			6/25/2025		7/3/2025	7/8/2025			7/13/2025	
Fire-Lieutenant	Fire & Emergency Services									6/4/2025	6/4/2025	5/30/2025	6/4/2025		6/6/2025	6/25/2025			6/25/2025		6/23/2025	7/1/2025			6/15/2025	
Fire-Lieutenant	Fire & Emergency Services									6/4/2025	6/4/2025	5/30/2025	6/4/2025		6/6/2025	6/25/2025			6/25/2025		6/23/2025	7/1/2025			6/15/2025	
Fire-Lieutenant	Fire & Emergency Services									6/4/2025	6/4/2025	5/30/2025	6/4/2025		6/6/2025	6/25/2025			6/25/2025		6/23/2025	7/1/2025			6/15/2025	
Fire Lieutenant	Fire & Emergency Services									8/14/2025	8/14/2025	8/14/2025	8/14/2025		08/19/225	9/22/2025	9/16/2025	9/22/2025	9/25/2025	10/6/2025	10/6/2025	10/15/2025	10/28/2025	11/5/2025	12/1/2025	
Firefighter - EMT	Fire & Emergency Services											8/19/2025	8/19/2025		8/28/2025	8/28/2025										
Firefighter - EMT	Fire & Emergency Services									8/14/2025	8/19/2025				8/20/2025	9/26/2025	9/17/2025	9/26/2025	10/7/2025	10/10/2025	10/10/2025	10/15/2025	10/28/2025	12/1/2025	11/12/2025	
Firefighter - EMT	Fire & Emergency Services									8/14/2025	8/19/2025				8/21/2025	9/26/2025	10/3/2025	9/26/2025	10/9/2025	11/13/2025	11/13/2025	11/13/2025	11/21/2025	12/22/2025	11/17/2025	
Firefighter - EMT	Fire & Emergency Services									8/14/2025	8/19/2025				8/21/2025	10/8/2025	10/6/2025	10/8/2025	10/19/2025	10/14/2025	10/14/2025	10/24/2025	11/11/2025	12/1/2025	11/12/2025	
Firefighter - EMT	Fire & Emergency Services									8/14/2025	8/19/2025				8/21/2025	10/8/2025	10/24/2025	10/24/2025	10/9/2025	10/24/2025	10/2/2025	10/30/2025	11/21/2025	12/1/2025	11/12/2025	
Firefighter - EMT	Fire & Emergency Services									8/14/2025	8/19/2025				8/21/2025	9/21/2025	9/19/2025	9/21/2025	9/25/2025	10/9/2025	10/9/2025	10/17/2025	11/4/2025	12/22/2025	11/12/2025	
Firefighter - EMT	Fire & Emergency Services									8/14/2025	8/19/2025				8/22/2025	9/25/2025	9/18/2025	9/25/2025	10/16/2025	10/21/2025	10/21/2025	10/22/2025	11/21/2025	12/1/2025	11/12/2025	
Firefighter - EMT	Fire & Emergency Services									8/14/2025	8/19/2025				8/20/2025	10/6/2025	10/6/2025	10/6/2025	10/9/2025	10/14/2025	10/14/2025	10/24/2025	11/25/2025	12/1/2025	11/12/2025	
Firefighter - EMT	Fire & Emergency Services									8/14/2025	8/19/2025				8/22/2025	9/29/2025	9/27/2025	9/29/2025	10/15/2025	10/17/2025	10/17/2025	10/20/2025	10/29/2025	11/18/2025	11/12/2025	
Firefighter - EMT	Fire & Emergency Services														8/21/2025	9/23/2025	9/19/2025	9/23/2025	10/16/2025	10/17/2025	10/17/2025	10/22/2025	11/6/2025	11/18/2025	11/12/2025	
Firefighter - EMT	Fire & Emergency Services									8/14/2025	8/19/2025				8/20/2025	9/24/2025	9/27/2025	9/24/2025	10/1/2025	10/7/2025	10/7/2025	10/15/2025	10/21/2025	11/5/2025	11/12/2025	
Firefighter - EMT	Fire & Emergency Services									8/14/2025	8/19/2025				8/22/2025	10/1/2025	10/3/2025	10/1/2025	10/7/2025	10/20/2025	10/20/225	10/29/2025	11/24/2025	12/1/2025	11/12/2025	
Firefighter - EMT	Fire & Emergency Services									8/14/2025	8/19/2025				8/22/2025	10/3/2025	10/3/2025	10/3/2025	10/7/2025	10/9/2025	10/9/2025	10/17/2025	10/30/225	12/1/2025	11/12/2025	
Firefighter - EMT	Fire & Emergency Services									8/14/2025	8/19/2025				8/22/2025	10/8/2025	10/7/2025	10/8/2025	10/16/2025	10/29/2025	10/29/225	10/31/2025	11/12/2025	12/1/2025	11/12/2025	
Firefighter - EMT	Fire & Emergency Services									8/14/2025	8/19/2025				8/20/2025	9/28/2025	9/28/2025	9/28/2025	10/7/2024	10/14/2025	10/14/2025	10/24/2025	10/31/2025	10/31/2025	10/31/2025	
Firefighter - EMT	Fire & Emergency Services											8/14/2025	8/19/2025		8/20/2025	9/26/2025	9/26/2025	9/26/2025	10/2/2025	10/7/2025	10/7/2025	10/15/2025	10/21/2025	11/5/2025	11/12/2025	
Firefighter - EMT	Fire & Emergency Services											8/14/2025	8/19/2025		8/21/2025	9/30/2025	9/23/2025	10/10/2025	10/9/2025	12/9/2025	12/9/2025	12/16/2025	12/18/2025	1/13/2026	2/2/2026	
Firefighter - EMT	Fire & Emergency Services											8/14/2025	8/19/2025		8/20/2025	10/3/2025	9/27/2025	10/3/2025	10/9/2025	10/15/2025	10/15/2025	10/29/2025	11/21/2025	2/13/2026	11/12/2025	
Fire Chief	Fire & Emergency Services	8/29/2025	8/29/2025	9/2/2025	9/2/2025		9/4/2025	9/2/2025	9/4/2025	10/20/2025	10/23/2025	10/1/2025	10/1/2025	9/25/2025	10/27/2025		11/13/2025	11/13/2025	11/13/2025	11/13/2025	11/13/2025	10/31/2025			11/13/2025	
Firefighter - EMT Driver Operator	Fire & Emergency Services									1/5/2026	1/5/2026	12/19/2025	1/5/2026		1/8/2026	1/14/2026	1/14/2026	1/14/2026	1/21/2026	1/16/2026	1/16/2026	1/23/2026	1/14/2026	1/14/2026	1/25/2026	

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Firefighter - EMT Driver Operator	Fire & Emergency Services									1/5/2026	1/5/2026	12/19/2025	1/5/2026		1/8/2026	1/14/2026	1/14/2026	1/14/2026	1/21/2026	1/16/2026	1/16/2026	1/23/2026	1/14/2026	1/14/2026	1/25/2026	
Firefighter - EMT Driver Operator	Fire & Emergency Services									1/5/2026	1/5/2026	12/19/2026	1/5/2026		1/8/2026	1/14/2026	1/14/2026	1/14/2026	1/21/2026	1/16/2026	1/16/2026	1/23/2026	1/14/2026	1/14/2026	1/25/2026	
Firefighter - EMT Driver Operator	Fire & Emergency Services									1/5/2026	1/5/2026	12/19/2025	1/5/2026		1/8/2026	1/14/2026	1/14/2026	1/14/2026	1/21/2026	1/16/2026	1/16/2026	1/23/2026	1/14/2026	1/14/2026	1/25/2026	
Firefighter - EMT Driver Operator	Fire & Emergency Services									1/5/2026	1/5/2026	12/19/2026	1/5/2026		12/18/2025				1/21/2026				12/15/2025			
Firefighter - EMT Driver Operator	Fire & Emergency Services									1/5/2026	1/5/2026	12/19/2025	1/5/2026		12/18/2025	12/18/2025	12/18/2025	12/18/2025	1/21/2026	12/18/2025	12/18/2025	12/18/2025	12/18/2025	12/18/2025	12/18/2025	
Firefighter - EMT Driver Operator	Fire & Emergency Services									1/5/2026	1/5/2026	12/19/2025	1/5/2026		12/18/2025	12/18/2025	12/18/2025	12/18/2025	1/21/2026	12/18/2025	12/18/2025	12/18/2025	12/18/2025	12/18/2025	12/18/2025	
Office Supervisor	Fire & Emergency Services		12/2/2025	12/2/2025	11/21/2025		11/25/2025	11/21/2025	12/2/2025	12/12/2025	12/12/2025	12/12/2025	12/12/2025	12/9/2025	12/15/2025	12/18/2025			12/18/2025	12/22/2025	12/22/2025	12/30/2025			1/11/2026	

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting/ Discussion with Department re: JD	Position Recruitment Form Completed	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Qualified Applications Released to Department	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Recruitment Packet Received in HR	Background Check Initiated	Background Check Completed	Compensation Calculated/ Emailed to Department	P1 Routed for Approval	Offer Extended to Candidate	Start Date	Time to Hire Final
Community Health Worker-AHL	Health & Human Services	10/20/2021	10/22/2021	10/22/2021	10/22/2021	10/27/2021	10/21/2021	10/21/2021	11/19/2021	11/17/2021	11/19/2021	11/18/2021	11/19/2021	6/24/2022	11/18/2021	11/30/2021									
Community Health Worker (Promotora)	Health & Human Services	8/14/2021	12/3/2021	12/3/2021	12/3/2021	12/3/2021	12/3/2021	12/3/2021	12/6/2021	12/29/2021	12/29/2021	2/22/2022	2/22/2022	12/1/2021	2/4/2022	2/15/2022									N/A
Mechanic	Fleet	8/6/2021	12/17/2021	12/17/2021	12/17/2021	12/17/2021	12/17/2021	12/17/2021	12/17/2021	12/17/2021	1/17/2022	1/20/2022	1/20/2022	1/10/2022	1/13/2022	1/28/2022	2/18/2022	2/18/2022	2/4/2022	2/7/2022	2/10/2022	2/10/2022	2/18/2022	3/7/2022	63
Superintendent	Engineering & Roads	11/30/2020	11/19/2020	11/19/2020	11/19/2020	11/19/2020	11/20/2020	11/19/2020	11/20/2020					2/26/2021	2/5/2021				3/11/2021	3/25/2021	3/5/2021	3/8/2021	3/30/2021		130
Grounds Maintenance Worker	Facilities and Parks	10/15/2021	12/28/2021	12/28/2021	12/28/2021	12/28/2021	12/29/2021	12/28/2021	1/5/2022	12/28/2021	12/28/2021	12/28/2021	12/28/2021	1/20/2022	1/26/2022	2/18/2022									
Building Attendant TE	Facilities and Parks	6/28/2021	1/5/2022	1/5/2022	1/5/2022	1/5/2022	1/5/2022	1/5/2022	1/5/2022	2/14/2022	2/14/2022	2/14/2022	2/14/2022	1/20/2022	1/26/2022	2/28/2022	3/10/2022	3/10/2022	3/21/2022	3/25/2022	3/2/2022	3/2/2022	3/21/2022	3/28/2022	75
Facilities Maintenance Worker	Facilities and Parks	9/30/2021	1/10/2022	1/10/2022	1/10/2022	1/10/2022	1/10/2022	1/10/2022	1/10/2022	1/10/2022	1/10/2022	1/10/2022	1/10/2022	1/26/2022											N/A
Community Health Worker Coordinator	Health & Human Services	New	1/10/2022	1/10/2022	1/10/2022	1/10/2022	1/10/2022	1/10/2022	1/10/2022	2/8/2022	2/8/2022	2/8/2022	2/8/2022	1/25/2022	2/4/2022	2/23/2022									N/A
Assistant Director	Health & Human Services	New	1/13/2022	1/13/2022	1/13/2022	1/13/2022	1/31/2022	1/13/2022	2/1/2022	2/18/2022	2/18/2022	3/8/2022	3/8/2022	2/23/2022	2/25/2022	3/15/2022	4/4/2022	4/4/2022	4/7/2022	4/13/2022	4/13/2022	4/13/2022	4/18/2022		76
Engineer Associate	Engineering & Roads	3/21/2018	12/29/2021	12/29/2021	12/29/2021	2/22/2022	1/24/2022	2/22/2022	1/24/2022	2/22/2022	2/22/2022	6/30/2022	6/30/2022	2/22/2022	7/1/2022	7/14/2022	7/15/2022	7/15/2022	7/27/2022	8/1/2022	8/11/2022	8/1/2022	8/24/2022		212
Construction Inspector	Engineering & Roads	12/1/2021	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/31/2022	2/16/2022	2/1/2022					2/16/2022											N/A
BOE Elections Specialist	Clerk's	Elections TE	1/31/2022	1/31/2022	1/31/2022	1/31/2022	1/28/2022	1/28/2022	1/31/2022	N/A	N/A	N/A	N/A	6/30/2022	Ongoing	N/A									N/A
Mental Health Awareness Educator	Health & Human Services	02//01/22	2/1/2022	2/18/2022	2/7/2022	2/1/2022	2/7/2022	2/7/2022	2/18/2022	3/24/2022	3/24/2022	3/24/2022	3/24/2022	3/7/2022	3/28/2022	4/7/2022									N/A
Childcare Provider Part Time	Health & Human Services	5/17/2019	2/1/2022	2/1/2022	2/1/2022	2/1/2022	2/7/2022	2/7/2022	2/18/2022					3/7/2022											N/A
Childcare Provider Part Time	Health & Human Services	5/17/2019	2/1/2022	2/1/2022	2/1/2022	2/1/2022	2/7/2022	2/7/2022	2/18/2022					3/7/2022											N/A
Childcare Provider Part Time	Health & Human Services	5/17/2019	2/1/2022	2/1/2022	2/1/2022	2/1/2022	2/7/2022	2/7/2022	2/18/2022					3/7/2022											N/A
Community Health Worker (Promotora)	Health & Human Services	8/15/2022	2/16/2022	2/16/2022	2/16/2022	2/16/2022	2/16/2022	2/16/2022	2/16/2022	2/16/2022	2/16/2022			3/3/2022											N/A
Animal Control Officer Lead	Animal Control	11/29/2022	2/25/2022	5/3/2022	4/27/2022	2/25/2022	3/10/2022	2/25/2022	3/10/2022					4/1/2022											N/A
Accounting Specialist	Finance	2/11/2022	2/23/2022	3/16/2022	2/23/2022	2/23/2022	2/23/2022	2/23/2022	3/3/2022	3/14/2022	3/14/2022	3/23/2022	3/23/2022	3/11/2022	3/16/2022	3/31/2022	4/4/2022	04/31/22							N/A
Voting Machine Technician-Clerk's- *TEMPORARY*	Clerk's	3/1/2022	3/7/2022	3/7/2022	3/7/2022	3/1/2022	3/4/2022	3/7/2022	3/7/2022	3/9/2022	3/9/2022	4/1/2022	4/1/2022	4/25/2022	4/1/2022	4/6/2022	4/7/2022	4/7/2022	4/19/2022	4/19/2022	4/18/2022	4/18/2022	4/19/2022	4/24/2022	43
Voting Machine Technician-Clerk's- *TEMPORARY*	Clerk's	3/1/2022	3/7/2022	3/7/2022	3/7/2022	3/1/2022	3/4/2022	3/7/2022	3/7/2022	3/9/2022	3/9/2022	4/1/2022	4/1/2022	4/25/2022	4/1/2022	4/6/2022	4/7/2022	4/7/2022	4/12/2022	4/12/2022	4/18/2022	4/18/2022	4/20/2022	4/25/2022	44
Voting Machine Technician-Clerk's- *TEMPORARY*	Clerk's	3/1/2022	3/7/2022	3/7/2022	3/7/2022	3/1/2022	3/4/2022	3/7/2022	3/7/2022	3/9/2022	3/9/2022	4/1/2022	4/1/2022	4/25/2022	4/1/2022	4/11/2022	5/11/2022	5/11/2022	5/2/2022	5/6/2022	4/19/2022	5/11/2022	5/11/2022	5/23/2022	65
Voting Machine Technician-Clerk's- *TEMPORARY*	Clerk's	3/1/2022	3/7/2022	3/7/2022	3/7/2022	3/1/2022	3/4/2022	3/7/2022	3/7/2022	3/9/2022	3/9/2022	4/1/2022	4/1/2022	4/25/2022	4/6/2022	4/11/2022	5/11/2022	5/11/2022	4/26/2022	5/10/2022	4/19/2022	5/11/2022	5/11/2022	5/12/2022	65
IT Director	Information Technology	2/13/2022	2/13/2022	2/13/2022	2/13/2022	2/13/2022	9/9/2022	3/2/2022	9/9/2022	7/6/2022	7/6/2022	7/7/2022	7/7/2022	9/23/2022	7/5/2022	7/7/2022	7/9/2022	7/9/2022	7/8/2022	7/11/2022	7/13/2022	7/14/2022	7/14/2022		N/A
IT Director	Information Technology	2/13/2022	2/13/2022	2/13/2022	2/13/2022	2/13/2022	9/9/2022	3/2/2022	9/9/2022	7/6/2022	7/6/2022	7/7/2022	7/7/2022	9/23/2022	10/14/2022	11/9/2022	11/15/2022	11/9/2022	11/14/2022	11/15/2022		7/13/2022	11/21/2022		73
Overdose Prevention Educator	Health & Human Services	3/4/2022	3/4/2022	3/4/2022	3/4/2022	3/4/2022	3/7/2022	3/4/2022	3/10/2022					3/25/2022	4/12/2022										
IT Infrastructure Manager	Information Technology	3/26/2022	3/16/2022	3/16/2022	3/16/2022	3/7/2022	3/11/2022	3/11/2022	4/14/2022					7/14/2022	8/16/2022	9/7/2022									
Laborer	Community Development	6/24/2017	1/28/2022	1/28/2022	1/28/2022	1/28/2022	3/10/2022	3/14/2022	3/10/2022	4/8/2022	4/8/2022	4/8/2022	4/8/2022	4/1/2022	4/20/2022	4/27/2022	05/06/225	4/27/2022							N/A
Environmental Codes Enforcement Officer	Community Development	6/24/2017	1/28/2022	1/28/2022	1/28/2022	3/10/2022	3/11/2022	3/1/2022	3/11/2022	4/19/2022	4/19/2022	4/19/2022	4/19/2022	4/4/2022	4/25/2022	5/3/2022	5/10/2022	5/10/2022							N/A

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Environmental Codes Enforcement Officer- Lead	Community Development	6/8/2021	3/10/2022	3/10/2022	3/10/2022	3/10/2022	3/10/2022	3/10/2022	3/10/2022					3/25/2022											N/A
IT Web Application Developer	Information Technology	12/4/2021	3/15/2022	3/15/2022	3/15/2022	3/15/2022	3/15/2022	3/15/2022	3/15/2022					5/11/2022	9/2/2022										N/A
Payroll Coordinator	Finance	3/28/2022	3/15/2022	3/15/2022	3/15/2022	3/15/2022	3/17/2022	3/15/2022	3/17/2022	4/5/2022	4/5/2022	4/19/2022	4/21/2022	4/1/2022	4/8/2022	4/21/2022	4/27/2022	4/27/2022	5/2/2022	5/9/2022	5/12/2022	5/12/2022	5/19/2022	6/9/2022	63
Planner-Current Planning	Community Development	4/22/2022	3/22/2022	3/22/2022	3/29/2022	3/22/2022	3/29/2022	3/29/2022	3/30/2022	4/20/2022	4/20/2022	4/20/2022	4/20/2022	4/14/2022	4/21/2022	5/11/2022		5/11/2022							N/A
Heavy Equipment Operator ** Bargaining Unit Position**	Engineering & Roads	10/3/2017	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	10/18/2022	10/21/2021	10/18/2022	10/21/2022	1/6/2023	10/13/2022	10/27/2022	11/8/2022	10/27/2022	11/16/2022	11/22/2022					N/A
Heavy Equipment Operator ** Bargaining Unit Position**	Engineering & Roads	10/3/2017	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	10/18/2022	10/21/2021	10/18/2022	10/21/2022	1/6/2023	10/13/2022	10/28/2022	11/15/2022	10/27/2022	11/15/2022	11/22/2022					N/A
Heavy Equipment Operator ** Bargaining Unit Position**	Engineering & Roads	10/3/2017	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	10/18/2022	10/21/2021	10/18/2022	10/21/2022	1/6/2023	7/8/2022	7/27/2022	8/2/2022	10/27/2022	8/18/2022						N/A
Heavy Equipment Operator ** Bargaining Unit Position**	Engineering & Roads	10/3/2017	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	10/18/2022	10/21/2021	10/18/2022	10/21/2022	1/6/2023	7/8/2022	7/27/2022	8/2/2022	8/2/2022	8/18/2022	8/18/2022					N/A
Heavy Equipment Operator ** Bargaining Unit Position**	Engineering & Roads	12/21/2019	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	3/31/2022	10/26/2022	10/26/2022	10/26/2022	10/26/2022	1/6/2023	11/4/2022	2/16/2023	2/24/2023	2/24/2023	2/28/2023	3/6/2023	3/22/2023	3/23/2023	3/29/2023		N/A
Veterinarian *	Animal Control	4/21/2022	4/8/2022	4/8/2022	4/8/2022	4/11/2022	4/8/2022	4/8/2022	4/8/2022					2/10/2023											
Summer Intern Coordinator	Human Resources	Summer	4/14/2022	4/14/2022	4/14/2022	4/14/2022	4/18/2022	4/4/2022	4/19/2022					5/16/2022											N/A
Overdose Prevention Educator	Health & Human Services	9/14/2022	4/25/2022	4/25/2022	4/25/2022	4/25/2022	4/25/2022	4/25/2022	4/26/2022					5/18/2022	6/30/2022										
Assistant Director	Health & Human Services	4/26/2014	4/27/2022	4/27/2022	4/27/2022	4/27/2022	4/27/2022	4/27/2022	4/27/2022	4/27/2022	4/27/2022			5/12/2022	6/27/2022										N/A
HR Administrator	Human Resources	6/1/2022	4/29/2022	4/29/2022	4/29/2022	4/29/2022	4/29/2022	4/29/2022	4/29/2022	4/29/2022	4/29/2022			5/13/2022											N/A
Accounting Specialist	Finance	2/11/2022	4/18/2022	4/18/2022	4/18/2022	4/18/2022	4/28/2022	4/18/2022	4/28/2022	6/30/2022	4/18/2022	6/30/2022	6/30/2022	5/13/2022	7/15/2022	7/14/2022	7/14/2022	7/14/2022	7/15/2022	7/29/2022	8/3/2022	8/3/2022			N/A
Accounting Specialist	Finance	2/11/2022	4/18/2022	4/18/2022	4/18/2022	4/18/2022	4/28/2022	4/18/2022	4/28/2022	5/23/2022	4/18/2022	6/30/2022	6/30/2022	5/13/2022	6/30/2022	7/14/2022	7/15/2022	7/15/2022	7/18/2022	7/21/2022	7/29/2022	7/29/2022	7/29/2022		92
Planning Assistant	Community Development	4/29/2022	4/29/2022	4/29/2022	4/19/2022	4/17/2022	4/29/2022	4/19/2022	4/29/2022					5/13/2022											N/A
Grants Manager	Finance	4/28/2022	5/11/2022	5/11/2022	5/11/2022	5/11/2022	5/11/2022	5/11/2022	5/11/2022					5/25/2022											N/A
Grounds Maintenance Worker	Facilities and Parks	10/17/2021	5/9/2022	5/9/2022	5/9/2022	5/9/2022	5/10/2022	5/9/2022	5/11/2022	8/12/2022	8/12/2022	8/12/2022	8/12/2022	5/26/2022	6/30/2022	8/16/2022	8/23/2022	8/23/2022	9/15/2022	10/4/2022	9/12/2022	9/14/2022	9/14/2022		126
Childcare Provider Part Time	Facilities and Parks	5/17/2019	4/28/2022	4/28/2022	4/28/2022	4/28/2022	5/12/2022	4/28/2022	5/17/2022	4/8/2022	4/8/2022	7/1/2022	7/1/2022	6/1/2022	6/30/2022	7/29/2022									
Childcare Provider Part Time	Facilities and Parks	5/17/2019	4/28/2022	4/28/2022	4/28/2022	4/28/2022	5/12/2022	4/28/2022	5/17/2022	4/8/2022	4/8/2022	7/1/2022	7/1/2022	6/1/2022	6/30/2022	7/29/2022									
Childcare Provider Part Time	Facilities and Parks	5/17/2019	4/28/2022	4/28/2022	4/28/2022	4/28/2022	5/12/2022	4/28/2022	5/17/2022	4/8/2022	4/8/2022	7/1/2022	7/1/2022	6/1/2022	6/30/2022	7/29/2022									
Health Promotion Specialist I	Health & Human Services	8/17/2019	5/16/2022	5/16/2022	5/16/2022	5/16/2022	5/18/2022	5/16/2022	6/13/2022					6/21/2022											N/A
HHS Student Assistant	Health & Human Services	9/25/2021	5/10/2022	5/10/2022	5/10/2022	5/10/2022	5/18/2022	5/10/2022	6/13/2022					6/21/2022											N/A
Utility Maintenance Worker	Utilities	3/16/2019	5/17/2022	5/17/2022	5/17/2022	5/17/2022	6/13/2022	6/13/2022	6/13/2022	6/13/2022	6/13/2022	7/16/2022	7/16/2022	7/11/2022	7/18/2022										N/A
Office Supervisor	Utilities	4/19/2022	5/17/2022	5/17/2022	5/17/2022	5/17/2022	6/14/2022	5/17/2022	6/14/2022	7/8/2022	7/8/2022	7/8/2022	7/8/2022	7/26/2022	7/22/2022	8/5/2022	8/11/2022	8/11/2022	8/11/2022	8/30/2022	9/9/2022	9/9/2022	9/12/2022		90
Document Tech.	Utilities	3/25/2022	10/22/2022	5/17/2022	5/17/2022	5/17/2022	7/11/2022	5/17/2022	7/11/2022	7/11/2022	7/11/2022	7/11/2022	7/11/2022	7/25/2022	8/2/2022	8/10/2022	8/11/2022	8/11/2022	8/12/2022						N/A
Airport Administrator	Airport	7/1/2022	5/26/2022	5/26/2022	5/26/2022	5/26/2022	7/1/2022	5/26/2022	7/1/2022					8/26/2022											N/A

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting/ Discussion with Department re: JD	Position Recruitment Form Completed	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Qualified Applications Released to Department	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Recruitment Packet Received in HR	Background Check Initiated	Background Check Completed	Compensation Calculated/ Emailed to Department	P1 Routed for Approval	Offer Extended to Candidate	Start Date	Time to Hire Final
Appraiser	Assessor's	5/23/2022	6/7/2022	6/7/2022	6/7/2022	6/6/2022	6/17/2022	6/7/2022	7/1/2022	6/7/2022	6/7/2022	6/7/2022	6/7/2022	7/18/2022	7/28/2022	8/16/2022	8/18/2022	8/18/2022	8/18/2022	8/18/2022	8/18/2022	8/18/2022	8/30/2022		60
Engineer Associate	Flood Commission	6/18/2022	6/13/2022	6/13/2022	6/13/2022	6/13/2022	6/23/2022	6/24/2022	6/29/2022	6/29/2022	6/29/2022	8/8/2022	8/8/2022	8/4/2022	8/9/2022	8/30/2022	8/30/2022	8/30/2022	8/31/2022	9/1/2022	8/31/2022	8/31/2022	9/7/2022		70
BOE Elections Specialist-TE	Clerk's	Multiple	6/30/2022	6/30/2022	6/30/2022	6/30/2022	6/30/2022	6/30/2022	7/1/2022					10/31/2022	Ongoing	No interviews	Multiple	No interviews	Multiple	Multiple	Flat rates \$15 & \$18	Multiple	Multiple	Multiple	
Court Compliance Secretary	Health & Human Services	3/26/2022	7/6/2022	7/6/2022	7/6/2022	7/6/2022	7/7/2022	7/6/2022	7/7/2022					7/25/2022	8/8/2022	9/28/2022					10/25/2022	10/25/2022	11/3/2022		119
Electronic Technician	Flood Commission	7/3/2021	6/22/2022	6/22/2022	6/22/2022	6/22/2022	7/11/2022	6/30/2022	7/11/2022	6/22/2022	8/4/2022	8/1/2022	8/4/2022	8/2/2022	8/4/2022	8/10/2022	8/31/2022	8/31/2022			9/9/2022	9/12/2022	9/13/2022		64
Electronic Technician	Flood Commission	7/3/2021	6/22/2022	6/22/2022	6/22/2022	6/22/2022	7/11/2022	6/30/2022	7/11/2022	6/22/2022	8/4/2022	8/1/2022	8/4/2022	8/2/2022	8/4/2022	8/31/2022	8/16/2022	8/31/2022	9/16/2022	9/26/2022	9/16/2022	9/26/2022	9/27/2022		78
Accountant I TE	Finance	4/23/2022	7/13/2022	7/13/2022	7/13/2022	7/13/2022	7/13/2022	7/13/2022	7/15/2022					8/1/2022	8/3/2022										N/A
Planning Assistant	Community Development	5/1/2022	7/25/2022	7/25/2022	4/19/2022	4/19/2022	7/22/2022	7/25/2022	7/25/2022					8/9/2022											N/A
Grants Manager	Finance	1/17/2023	7/19/2022	7/19/2022	7/19/2022	7/19/2022	7/8/2022	7/8/2022	7/9/2022					8/15/2022											N/A
Probate Judge Assistant	Probate Judge	8/13/2022	7/25/2022	7/25/2022	7/25/2022	9/9/2022	7/28/2022	7/25/2022	7/29/2022	8/16/2022	9/18/2022	8/25/2022	9/15/2022	8/15/2022	9/15/2022										N/A
IT Network Engineer	Information Technology	4/6/2019	8/26/2022	8/2/2022	8/2/2022	8/2/2022	8/11/2022	8/26/2022	8/11/2022	9/7/2022	9/13/2022	9/7/2022	9/13/2022	8/27/2022	9/13/2022										N/A
Heavy Equipment Mechanic	Fleet	8/13/2022	8/2/2022	8/2/2022	8/2/2022	8/2/2022	8/9/2022	8/2/2022	8/9/2022					8/24/2022											N/A
Surveying Associate	Engineering & Roads	8/28/2021	6/14/2022	6/14/2022	6/14/2022	6/14/2022	8/9/2022	8/9/22	8/9/2022					9/7/2022											N/A
Building Attendant TE	Facilities and Parks	7/16/2022	7/27/2022	7/27/2022	7/27/2022	7/27/2022	8/9/2022	8/9/2022	8/9/2022	8/19/2022	8/19/2022	8/19/2022	8/19/2022	12/29/2022	1/5/2023	1/8/2023	1/25/2022	1/25/2022	2/13/2023	2/10/2022	2/10/2022	2/10/2022	2/13/2022		N/A
Building Attendant TE	Facilities and Parks	7/16/2022	7/27/2022	7/27/2022	7/27/2022	7/27/2022	8/9/2022	8/9/2022	8/9/2022	8/19/2022	8/19/2022	8/19/2022	8/19/2022	12/29/2022	1/5/2023	1/18/2023			11/2/2022	11/3/2022	2/13/2023				N/A
Secretary/Receptionist	County Manager	8/27/2022	8/26/2022	8/26/2022	8/26/2022	8/26/2022	8/16/2022	8/16/2022	8/16/2022					8/31/2022	9/8/2022	9/14/2022		9/14/2022							N/A
Childcare Provider Part Time	Health & Human Services	5/17/2019	8/18/2023	8/17/2022	8/17/2022	8/18/2023	8/23/2022	8/18/2022	8/23/2022	9/16/2022	10/17/2022	10/3/2022	10/28/2022	11/23/2022	10/28/2022										N/A
Childcare Provider Part Time	Health & Human Services	5/17/2019	8/18/2023	8/17/2022	8/17/2022	8/18/2023	8/23/2022	8/18/2022	8/23/2022	9/16/2022	10/17/2022	10/3/2022	10/28/2022	11/23/2022	10/28/2022										N/A
Childcare Provider Part Time	Health & Human Services	5/17/2019	8/18/2023	8/17/2022	8/17/2022	8/18/2023	8/23/2022	8/18/2022	8/23/2022	9/16/2022	10/17/2022	10/3/2022	10/28/2022	11/23/2022	10/28/2022										N/A
Database Administrator	Information Technology	6/1/2015	8/30/2022	8/30/2022	8/30/2022	8/30/2022	9/2/2022	9/1/2022	9/2/2022					10/4/2022											N/A
GIS Administrator	Community Development	6/10/2022	8/30/2022	8/30/2022	8/30/2022	8/30/2022	9/2/2022	9/2/2022	9/2/2022					9/27/2022											N/A
Accountant 1	Finance	8/30/2022	8/30/2022	8/30/2022	8/30/2022	8/30/2022	9/6/2022	8/30/2022	9/6/2022					9/28/2022											N/A
Community Health Worker (Promotora)	Health & Human Services	3/12/2022	9/2/2022	9/2/2022	9/2/2022	9/2/2022	9/6/2022	9/2/2022	9/6/2022					9/21/2022											N/A
Community Health Worker (Promotora)	Health & Human Services	8/14/2021	9/2/2022	9/2/2022	9/2/2022	9/2/2022	9/6/2022	9/2/2022	9/6/2022					9/21/2022											N/A
Heavy Equipment Mechanic	Fleet	8/13/2022	8/24/2022	8/24/2022	8/24/2022	8/24/2022	9/13/2022	8/24/2022	9/13/2022	10/3/2022	10/3/2022	10/3/2022	10/11/2022	9/28/2022	10/11/2022	11/2/2022		11/2/2022							N/A
IT Web Developer	Information Technology	11/30/2021	9/13/2022	10/12/2022	9/13/2022	9/12/2022	9/13/2022	2/17/2022	9/14/2022	10/28/2022	10/28/2022	11/14/2022	11/14/2022	12/7/2022	12/8/2022	12/21/2022	1/30/2023	2/13/2023							N/A
IT Infrastructure Manager	Information Technology	3/26/2022	2/7/2023	2/7/2023	2/7/2023	2/7/2023	2/7/2023	2/7/2023	2/7/2023	2/7/2023	2/7/2023	3/8/2023	3/8/2023	3/8/2023	11/15/2022	11/28/2022									N/A
IT Infrastructure Manager	Information Technology	3/26/2022	2/7/2023	2/7/2023	2/7/2023	2/7/2023	2/7/2023	2/7/2023	2/7/2023	2/7/2023	2/7/2023	3/8/2023	3/8/2023	3/8/2023	1/3/2023	2/6/2023									N/A
Voting Machine Technician-Clerk's- *TEMPORARY*	Clerk's	9/11/2022	9/13/2022	9/13/2022	9/13/2022	9/13/2022	9/16/2022	9/13/2022	9/16/2022	10/6/2022	10/21/2022	10/14/2022	10/18/2022	10/3/2022	10/21/2022	10/27/2022	10/27/2022	10/27/2022	10/27/2022	10/27/2022	10/28/2022				N/A

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting/ Discussion with Department re: JD	Position Recruitment Form Completed	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Qualified Applications Released to Department	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Recruitment Packet Received in HR	Background Check Initiated	Background Check Completed	Compensation Calculated/ Emailed to Department	P1 Routed for Approval	Offer Extended to Candidate	Start Date	Time to Hire Final
Office Supervisor	Utilities	4/19/2022	5/17/2022	5/17/2022	5/17/2022	5/17/2022	9/19/2022	5/17/2022	9/19/2022	10/13/2022	10/21/2022	10/13/2022	10/21/2022	12/23/2022	10/21/2022	11/4/2022									N/A
GIS/Mapper Analyst	Community Development	9/15/2022	9/16/2022	9/16/2022	9/19/2022	9/16/2022	9/20/2022	9/19/2022	9/20/2022	10/5/2022	10/11/2022	10/6/2022	10/11/2022	10/5/2022	10/11/2022	10/24/2022	12/1/2022	10/24/2022	12/2/2022	12/12/2022		12/2/2022			N/A
Network Engineer	Information Technology	4/6/2019	8/2/2022	8/2/2022	8/2/2022	8/2/2022	9/22/2022	8/2/2022	9/22/2022	11/1/2022	11/1/2022	11/1/2022	11/1/2022	10/21/2022	11/1/2022	11/10/2022	11/18/2022	12/7/2022	12/7/2022	1/6/2023	12/7/2022	1/12/2023			112
GIS Administrator	Community Development	6/18/2022	9/27/2022	9/27/2022	9/27/2022	8/30/2022	9/30/2022	9/27/2022	9/30/2022	12/1/2022	12/2/2022	12/1/2022	12/1/2022	11/25/2022	12/2/2022	12/12/2022	12/15/2022	12/15/2022	12/27/2022	12/12/2022	12/12/2022	12/12/2022	1/4/2023		96
Document Technician- BOE Recording & Filing Temporary	Clerk's	Temporary	9/22/2022	9/22/2022	9/22/2022	9/22/2022	9/29/2022	9/22/2022	9/29/2022	10/22/2022	10/22/2022	10/22/2022		10/21/2022											N/A
Database Administrator	Information Technology	6/1/2015	8/30/2022	8/30/2022	8/30/2022	8/30/2022	10/5/2022	8/30/2022	10/5/2022	11/2/2022	11/2/2022	12/5/2022	12/9/2022	11/3/2022	12/9/2022	2/10/2023	3/23/2023	4/5/2023	4/18/2023	5/17/2023					
Programmer/Analyst Sr.	Information Technology	8/26/2022	9/28/2022	9/28/2022	9/28/2022	8/31/2022	10/11/2022	9/13/2022	10/11/2022	12/12/2022	12/12/2022	12/5/2022	12/9/2022	11/9/2022	12/12/2022	3/2/2023	3/23/2023	3/23/2023	4/19/2023	5/3/2023	5/3/2023	5/3/2023	5/4/2023		205
Planner-Current Planning	Community Development	4/9/2022	10/3/2022	10/3/2022	10/3/2022	10/3/2022	10/11/2022	10/3/2022	10/11/2022	11/1/2022	11/1/2022	11/1/2022	11/2/2022	1/7/2023	1/9/2023	3/16/2023									N/A
Document Technician	Utilities	10/7/2022	10/7/2022	10/7/2022	10/11/2022	10/11/2022	10/12/2022	10/7/2022	10/12/2022	10/13/2022	10/17/2022	10/13/2022	10/17/2022	10/20/2022	10/21/2022	10/27/2002	10/28/2022	10/28/2022	11/1/2022	11/18/2022	11/1/2022	11/8/2022			N/A
Document Technician	Utilities	10/7/2022	10/7/2022	10/7/2022	10/11/2022	10/11/2022	10/12/2022	10/7/2022	10/12/2022	10/13/2022	10/17/2022	10/13/2022	10/17/2022	10/20/2022	10/21/2022	10/27/2002	10/28/2022	10/28/2022	11/1/2022	11/3/2022	11/1/2022				N/A
Doc. Tech- Assessors	Assessor's	9/28/2022	9/27/2022	10/13/2022	9/27/2022	10/3/2022	10/21/2022	10/11/2022	10/25/2022	11/10/2022	11/16/2022	11/30/2022	11/30/2022	11/9/2022	11/30/2022										N/A
Animal Control Officer	Animal Control	7/30/2022	10/18/2022	10/28/2022	10/18/2022	10/21/2022	10/27/2022	10/17/2022	10/28/2022	10/31/2022	10/31/2022	10/31/2022	10/31/2022	11/28/2022	11/1/2022	11/14/2022	11/17/2022	11/17/2022	11/18/2022	12/2/2022	11/17/2022	11/17/2022	12/7/2022		40
Appraiser Assistant	Assessor's	9/10/2022	10/25/2022	10/25/2022	10/26/2022	10/26/2022	10/27/2022	10/26/2022	10/27/2022	11/3/2022	11/3/2022	11/3/2022	11/3/2022	11/11/2023	11/14/2022	12/9/2022	12/9/2022	12/9/2022	12/15/2022	1/9/2023					N/A
Admin Assistant	Fleet	11/5/2022	10/13/2022	10/28/2022	11/3/2022	11/3/2022	11/7/2022	11/3/2022	11/7/2022	11/2/2022	11/3/2022	11/15/2022	12/1/2022	11/29/2022	12/1/2022	1/31/2023	2/13/2023	2/13/2023	2/13/2022		2/8/2022				N/A
GIS Mapping Specialist	Assessor's	11/10/2022	11/9/2022	11/9/2022	11/23/2022	11/11/2022	11/10/2022	11/23/2022	11/14/2022	11/23/2022	11/23/2022			12/15/2022											N/A
Heavy Equipment Mechanic	Fleet	8/13/2022	11/2/2022	11/2/2022	11/2/2022	11/2/2022	11/17/2022	11/2/2022	11/18/2022	11/2/2022	11/2/2022	11/18/2022	11/18/2022	11/24/2022	11/30/2022	12/13/2022	12/21/2022	12/13/2022	12/21/2022	12/22/2022	12/22/2022	12/22/2022	1/3/2023		46
Document Technician	Utilities	10/29/2022	11/21/2022	11/21/2022	11/21/2022	11/21/2022	11/23/2022	11/21/2022	11/23/2022	11/22/2022	11/22/2022			12/22/2022											N/A
HHS Court Compliance Secretary	HHS	3/27/2022	4/5/2022	11/30/2022	12/5/2022	11/23/2022	11/30/2022	12/5/2022	11/30/2022	12/5/2022	12/5/2022	12/5/2022	12/5/2022	12/15/2022											N/A
Development Technician	Community Development	12/5/2022	11/29/2022	11/29/2022	11/30/2022	11/30/2022	11/30/2022	11/30/2022	11/30/2022	12/20/2022	12/20/2022	12/20/2022	12/20/2022	2/8/2023											N/A
Equipment Operator- Roads **Bargaining Unit Position**	Engineering & Roads	10/13/2022	10/13/2022	10/13/2022	10/13/2022	12/7/2022	12/12/2022	10/13/2022	12/12/2022	12/14/2022	12/14/2022	1/13/2023	1/17/2023	3/13/2023	1/17/2023	2/16/2022		2/16/2022							N/A
Community Health Worker	Health & Human Services	10/5/2022	11/14/2022	11/14/2022	12/6/2022	12/9/2022	12/9/2022	12/6/2022	12/9/2022	12/13/2022	12/13/2022	1/13/2023	1/13/2023	3/20/2023	1/13/2023	01/24/2023	1/27/2023	1/24/2023	1/27/2023	2/6/2023	1/25/2023	01/25/2023	2/15/2023		68
Community Health Worker	Health & Human Services	10/5/2022	11/14/2022	11/14/2022	12/6/2022	12/9/2022	12/9/2022	12/6/2022	12/9/2022	12/13/2022	12/13/2022	1/13/2023	1/13/2023	3/20/2023	1/13/2023	1/24/2023	1/26/2023	1/24/2023	1/26/2023	1/27/2023	1/25/2023	1/25/2023			N/A
Utilities Manager	Utilities	12/23/2022	12/12/2022	12/12/2022	12/12/2022	12/12/2022	12/12/2022	12/12/2022	12/12/2022	2/17/2023	2/17/2023	2/17/2023	2/17/2023	1/10/2023	2/2/2023	2/22/2023	3/3/2023	3/3/2023	3/3/2023	3/15/2023	3/3/2023	3/7/2023	3/8/2023		86
Director Human Resources	Human Resources	12/15/2022	12/15/2022	12/15/2022	12/15/2022	12/15/2022	12/15/2022	12/15/2022	12/15/2022	2/15/2023	2/15/2023	1/5/2023	1/5/2023	1/6/2023	1/9/2023	2/16/2023	2/17/2023	2/17/2023	2/17/2023	2/17/2023	2/17/2023	2/17/2023	2/21/2023	2/27/2023	68
Document Technician Lead	Treasurer's	12/22/2022	12/22/2022	12/22/2022	12/19/2022	12/27/2022	12/28/2022	12/19/2022	12/28/2022	12/28/2022	12/28/2022	1/5/2023	1/5/2023	1/5/2023	1/5/2023	1/5/2023	1/5/2023	1/5/2023	1/5/2023	1/5/2023	1/5/2023	1/5/2023	1/5/2023	1/5/2023	8
Heavy Equipment Mechanic	Fleet	1/10/2023	1/10/2023	1/10/2023	1/11/2023	1/10/2023	1/11/2023	1/11/2023	1/11/2023	1/11/2023	1/11/2023	2/8/2023	2/9/2023	2/2/2023	2/9/2023										N/A
IT Network Engineer *	IT	1/17/2023	1/17/2023	1/17/2023	1/17/2023	1/17/2023	1/18/2023	1/17/2023	1/18/2023	1/26/2023	1/26/2023	2/8/2023	2/8/2023	2/9/2023	2/16/2023										N/A
Facilities Maintenance Worker *	Facilities and Parks	10/22/2022	1/18/2023	1/18/2023	1/19/2023	1/18/2023	1/20/2023	1/19/2023	1/20/2023	1/19/2023	1/19/2023	3/3/2023	3/13/2023	2/10/2023	3/13/2023										N/A

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting/ Discussion with Department re: JD	Position Recruitment Form Completed	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Qualified Applications Released to Department	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Recruitment Packet Received in HR	Background Check Initiated	Background Check Completed	Compensation Calculated/ Emailed to Department	P1 Routed for Approval	Offer Extended to Candidate	Start Date	Time to Hire Final
Grants Manager *	Finance	1/25/2023	1/25/2023	1/26/2023	2/1/2023	1/26/2023	1/30/2023	1/26/2023	1/30/2023	2/1/2023	2/1/2023	2/1/2023	2/1/2023	2/7/2023	2/9/2023	2/14/2023	2/15/2023	2/15/2023	2/21/2023	2/15/2023	2/15/2023	2/17/2023	2/17/2023	2/20/2023	18
Emergency Management Coordinator*	Office of Emergency Management	7/1/2022	2/15/2023	2/1/2023	2/13/2023	1/31/2023	2/2/2023	1/6/2023	2/2/2023	2/13/2023	2/13/2023	2/24/2023	2/24/2023	2/17/2023	2/24/2023	3/15/2023	3/29/2023	3/15/2023	3/31/2023	3/16/2023	3/20/2023				N/A
Emergency Management Coordinator*	Office of Emergency Management	7/1/2022	2/15/2023	2/1/2023	2/13/2023	1/31/2023	2/2/2023	1/6/2023	2/2/2023	2/13/2023	2/13/2023	2/24/2023	2/24/2023	2/17/2023	2/24/2023										N/A
Grounds Maintenance Worker*	Facilities and Parks	8/20/2022	1/18/2023	1/18/2023	2/7/2023	1/18/2023	2/9/2023	2/7/2023	2/9/2023	2/7/2023	2/7/2023	3/15/2023	3/15/2023	2/24/2023	3/16/2023	3/30/2023	4/5/2023								N/A
GIS Administrator *	Community Development	2/7/2023	2/7/2023	2/9/2023	2/9/2023	2/10/2023	2/10/2023	2/9/2023	2/13/2023					3/14/2023											N/A
Veterinarian *	Animal Control	2/10/2023	2/10/2023	2/10/2023	2/10/2023	2/10/2023	2/10/2023	2/10/2023	2/13/2023					3/14/2023											N/A
Community Outreach Specialist II	Health & Human Services	10/23/2003	2/7/2023	1/28/2023	2/14/2023	2/14/2023	2/15/2023	2/14/2023	2/15/2023	3/1/2023	3/1/2023	3/17/2023	3/17/2023	3/2/2023	3/17/2023	4/10/2023	4/26/2023	5/9/2023							N/A
Engineer Associate	Flood Commission	6/18/2022	2/16/2023	2/17/2023	2/17/2023	2/17/2023	2/17/2023	2/17/2023	2/21/2023					3/23/2023											N/A
Accounting Specialist FXT	Finance	5/2/2022	2/14/2023	2/17/2023	2/17/2023	2/17/2023	2/17/2023	2/17/2023	2/17/2023	2/21/2023	2/21/2023	2/17/2023	2/21/2023	3/6/2023	3/8/2023	4/24/2023	4/26/2023	4/26/2023	4/26/2023	5/1/2023	4/26/2023	5/2/2023	5/3/2023		75
Accounting Specialist FXT	Finance	5/2/2022	2/14/2023	2/17/2023	2/17/2023	2/17/2023	2/17/2023	2/17/2023	2/17/2023	2/21/2023	2/21/2023	2/17/2023	2/21/2023	3/6/2023	3/8/2023	4/24/2023	5/10/2023	5/10/2023	5/11/2023	5/16/2023					N/A
Development Technician	Community Development	12/3/2022	2/14/2023	2/14/2023	2/14/2023	2/14/2023	2/28/2023	2/23/2023	2/28/2023	3/17/2023	3/17/2023	3/17/2023	3/20/2023	3/15/2023	3/20/2023	4/18/2023	4/19/2023	4/19/2023	4/25/2023	5/1/2023	4/19/2023	4/26/2023	5/1/2023		62
HR Manager-Benefits Compensation & ADA/Senior HR	Human Resources	2/26/2023	2/22/2023	2/22/2023	2/22/2023	3/1/2023	2/28/2023	2/28/2023	4/11/2023	4/11/2023	4/12/2023	4/11/2023	4/12/2023	3/22/2023	4/12/2023	4/20/2023									N/A
Payroll and Accounts Payable Manager	Finance	2/1/2023	2/24/2023	2/24/2023	2/24/2023	3/1/2023	3/2/2023	3/1/2023	3/2/2023	3/21/2023	3/21/2023	3/3/2023	3/3/2023	4/5/2023	04/06/2023	4/19/2023	4/19/2023	4/19/2023	4/20/2023	4/25/2023	4/19/2023	4/19/2023	4/26/2023		55
Childcare Provider Part Time	HHS	5/1/2019	2/21/2023	2/21/2023	3/1/2023	2/21/2023	3/2/2023	3/1/2023	3/3/2023	10/1/2022	10/1/2022			6/2/2023											N/A
Childcare Provider Part Time	HHS	5/17/2023	2/21/2023	2/21/2023	3/1/2023		3/2/2023	3/1/2023	3/3/2023	3/28/2023	3/28/2023	4/18/2023	4/20/2023			5/3/2023	5/26/2023	5/26/2023	7/26/2023						N/A
Laborer	Roads	4/27/2019	2/24/2023	3/2/2023	3/2/2023	3/2/2023	3/5/2023	3/2/2023	3/6/2023	3/15/2023	3/15/2023	3/15/2023	3/15/2023	3/21/2023	3/27/2023										N/A
Equipment Operator/Heavy Equipment Operator	Roads	4/2/2016	3/3/2023	3/6/2023	3/6/2023	3/10/2023	3/9/2023	3/6/2023	3/9/2023	3/3/2023	3/3/2023	4/17/2023	4/18/2023	3/26/2023	4/18/2023	5/3/2023	5/11/2023	5/11/2023	5/16/2023	6/16/2023	6/16/2023	6/16/2023	6/23/2023	N/A	N/A
Jetport Ops & Maintenance Worker	Jetport	3/31/2023	3/1/2023	3/1/2023	3/10/2023	3/1/2023	3/14/2023	3/10/2023	3/14/2023	3/29/2023	3/29/2023	5/2/2023	5/2/2023	4/24/2023	5/2/2023	5/9/2023	5/15/2023	5/9/2023			5/15/2023				
IT Infrastructure Manager	Information Technology	3/6/2022	2/7/2023	2/7/2023	9/7/2022	3/15/2023	3/16/2023	3/15/2023	3/16/2023	3/17/2023	3/17/2023	3/17/2023	3/17/2023	3/30/2023	4/3/2023	4/20/2023									N/A
Inspector I- Building	Community Development	2/28/2023	3/9/2023	3/14/2023	3/6/2023	3/9/2023	3/17/2023	3/6/2023	3/17/2023	4/5/2023	4/5/2023	4/17/2023	4/17/2023	4/11/2023	4/17/2023	5/9/2023	5/18/2023	5/18/2023	5/24/2023	5/25/2023	5/22/2023	5/22/2023	5/25/2023	6/12/2023	
Utilities Manager	Utilities	12/31/2022	3/16/2023	3/16/2023	3/17/2023	3/17/2023	3/20/2023	3/17/2023	3/20/2023	3/22/2023	3/22/2023	4/21/2023	4/21/2023	4/11/2023	4/21/2023	5/5/2023	5/17/2023	5/17/2023	6/5/2023	6/21/2023	6/12/2023	6/12/2023	6/13/2023		85
Outreach Coordinator	Finance	3/13/2023	3/15/2023	3/15/2023	3/15/2023	3/22/2023	3/23/2023	3/22/2023	3/23/2023					4/9/2023											N/A
Student Assistant TE	HHS	9/25/2021	3/22/2023	3/27/2023	3/28/2023	3/22/2023	3/29/2023	3/28/2023	3/29/2023	4/14/2023	4/14/2023	4/14/2023	4/14/2023	4/13/2023											N/A
GIS Mapping Specialist	County Assessor	1/28/2023	3/17/2023	3/17/2023	3/17/2023	3/31/2023	3/31/2023	3/22/2023	3/31/2023	4/28/2023	5/3/2023	4/28/2023	5/3/2023	4/23/2023	5/3/2023	7/20/2023	8/7/2023	8/8/2023	8/8/2023	8/10/2023	8/14/2023	8/14/2023	8/21/2023		
Community Health Worker	Health & Human Services	4/12/2023	4/14/2023	4/14/2023	4/12/2023		4/12/2023	4/12/2023	4/14/2023	5/2/2023	5/2/2023	5/4/2023	5/4/2023	5/7/2023	5/11/2023	6/15/2023	7/17/2023	7/19/2023	7/20/2023	8/1/2023	8/2/2023	8/2/2023	8/2/2023		
Communications Systems Technician	Information Technology	3/10/2023	3/1/2023	3/1/2023	3/15/2023		4/10/2023	4/6/2023	4/13/2023	4/26/2023	4/26/2023	5/11/2023	5/13/2023	4/28/2023	5/12/2023	5/18/2023									
Communications Systems Technician	Information Technology	3/10/2023	3/1/2023	3/1/2023	3/15/2023		4/10/2023	4/6/2023	4/13/2023	8/24/2023	8/24/2023	8/24/2023	8/24/2023	8/6/2023	8/9/2023	8/24/2023	8/25/2023	9/5/2023	9/5/2023	10/2/2023	9/12/2023	9/12/2023	9/12/2023	9/12/2023	
Health Promotion Specialist I-Temp	Health & Human Services	8/17/2019	3/21/2023	3/22/2023	4/10/2023	4/11/2023	4/12/2023	4/10/2023	4/13/2023					4/14/2023											N/A
Health Promotion Specialist I-Temp	Health & Human Services	12/14/2013	3/21/2023	3/22/2023	4/10/2023	4/11/2023	4/10/2023	4/10/2023	4/13/2023					4/14/2023											N/A

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting/ Discussion with Department re: JD	Position Recruitment Form Completed	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Qualified Applications Released to Department	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Recruitment Packet Received in HR	Background Check Initiated	Background Check Completed	Compensation Calculated/ Emailed to Department	P1 Routed for Approval	Offer Extended to Candidate	Start Date	Time to Hire Final
Heavy Equipment Mechanic	Fleet	8/13/2022	3/22/2023	3/24/2023	4/12/2023	4/12/2023	4/12/2023	4/12/2023	4/13/2023	4/21/2023	4/21/2023	6/15/2023	6/15/2023	8/8/2023	9/8/2023										
Grounds Maintenance Worker	Facilities and Parks	4/5/2023	4/5/2023	4/6/2023	4/12/2023		4/13/2023	4/12/2023	4/13/2023	4/21/2023	4/21/2023	5/10/2023	5/10/2023	4/28/2023	5/10/2023	5/25/2023	7/26/2023	7/26/2023							
Grounds Maintenance Worker	Facilities and Parks	4/5/2023	4/5/2023	4/6/2023	4/12/2023		4/13/2023	4/12/2023	4/13/2023	4/21/2023	4/21/2023	5/10/2023	5/10/2023	4/28/2023	5/10/2023	5/25/2023	6/28/2023	6/28/2023	6/28/2023	7/10/2023					
IT Network Engineer	Information Technology	4/6/2019	4/14/2023	4/25/2023	4/14/2023	4/25/2023	4/26/2023	4/24/2023	4/28/2023	6/9/2023	6/9/2023	6/8/2023	6/12/2023	6/7/2023	6/12/2023	6/21/2023									N/A
Animal Control Officer	Animal Control	7/3/2023	4/26/2023	4/26/2023	4/26/2023		4/26/2023	4/26/2023	4/28/2023	4/28/2023	4/28/2023	6/14/2023	4/28/2023	5/28/2023	6/2/2023	6/16/2023	6/22/2023	6/30/2023	6/30/2023	7/17/2023	7/17/2023	7/19/2023	7/27/2023		
Document Technician	County Assessor	5/5/2023	5/1/2023	5/1/2023	5/2/2023		5/4/2023	5/2/2023	5/4/2023	5/24/2023	5/24/2023	5/24/2023	5/31/2023	5/21/2023	5/31/2023	6/5/2023	8/8/2023	8/8/2023	8/8/2023	8/8/2023	8/10/2023	8/10/2023	8/18/2023		
Document Technician	County Assessor	5/5/2023	5/1/2023	5/1/2023	5/2/2023		5/4/2023	5/2/2023	5/4/2023	5/24/2023	5/24/2023	5/24/2023	5/31/2023	5/21/2023	5/31/2023	6/5/2023	7/26/2023	7/27/2023	7/27/2023	7/27/2023	7/27/2023	7/27/2023	7/27/2023		84
Document Technician	County Assessor	5/5/2023	5/1/2023	5/1/2023	5/2/2023		5/4/2023	5/2/2023	5/4/2023	5/24/2023	5/24/2023	5/24/2023	5/31/2023	5/21/2023	5/31/2023	6/5/2023	8/2/2023	8/2/2023	8/2/2023	8/8/2023	8/8/2023	8/8/2023	8/9/2023		
Programmer/Analyst	Information Technology	5/9/2023	5/9/2023	5/11/2023	5/11/2023		5/24/2023	5/23/2023	5/30/2023	6/16/2023	6/16/2023	6/16/2023	6/16/2023	6/14/2023	6/16/2023										
IT Database Administrator	Information Technology	Jun-15	5/15/2023	5/24/2023	5/18/2023		5/24/2023	5/23/2023	5/25/2023	6/16/2023	6/16/2023	6/16/2023	6/16/2023	6/11/2023	6/16/2023										
IT Computer Technician	Information Technology	10/22/2022	5/25/2023	6/1/2023	5/25/2023	5/25/2023	6/5/2023	5/25/2023	6/5/2023	6/26/2023	6/26/2023	6/26/2023	6/27/2023	6/20/2023	6/26/2023	6/30/2023	7/14/2023	7/17/2023							N/A
Assistant Operations Manager	CRRUA	3/30/2019	6/8/2023	6/8/2023	6/8/2023		6/9/2023	6/8/2023	6/9/2023	4/11/2023	4/11/2023	7/14/2023	7/14/2023	9/26/2023	7/20/2023										
Communications Systems Technician	Information Technology	3/11/2023	7/10/2023	7/14/2023	7/14/2023		7/13/2023	7/14/2023	7/14/2023	8/24/2023	8/24/2023	9/14/2023	9/14/2023	8/6/2023	8/9/2023	9/18/2023	9/25/2023	9/25/2023	9/25/2023	9/25/2023	9/25/2023	9/25/2023	9/25/2023	9/25/2023	
IT Programmer Analyst Sr	Information Technology	6/26/2023	6/26/2023	6/27/2023	6/26/2023		6/27/2023	6/26/2023	6/28/2023	7/28/2023	8/29/2023	8/29/2023	8/29/2023	7/27/2023	8/29/2023	9/12/2023	10/17/2023	10/17/2023	9/26/2023	10/16/2023	10/17/2023	10/17/2023	10/17/2023		
IT Programmer Analyst Sr	Information Technology	6/26/2023	6/26/2023	6/27/2023	6/26/2023		6/27/2023	6/26/2023	6/28/2023	7/28/2023	8/29/2023	8/29/2023	8/29/2023	7/27/2023	8/29/2023	9/12/2023	9/13/2023	9/13/2023	9/14/2023	9/15/2023	9/19/2023	9/20/2023	9/21/2023	9/22/2023	
HR Administrator	Human Resources	6/28/2023	6/28/2023	6/28/2023	6/28/2023		6/28/2023	6/28/2023	6/28/2023	8/15/2023	8/15/2023	8/15/2023	8/15/2023	8/6/2023	8/15/2023										
Equipment/Heavy Equipment Operator	Roads	7/20/2019	6/16/2023	6/26/2023	6/30/2023		6/30/2023	6/30/2023	6/30/2023	6/30/2023	6/30/2023	7/31/2023	8/3/2023	7/23/2023	8/3/2023										
Equipment/Heavy Equipment Operator	Roads	6/17/2023	6/16/2023	6/26/2023	6/30/2023	3/10/2023	6/30/2023	6/30/2023	6/30/2023	6/30/2023	6/30/2023	7/31/2023	8/3/2023	7/23/2023	8/3/2023										
Equipment/Heavy Equipment Operator	Roads	4/2/2016	6/16/2023	6/26/2023	6/30/2023		6/30/2023	6/30/2023	6/30/2023	6/30/2023	6/30/2023	7/31/2023	8/3/2023	7/23/2023	8/3/2023										
Jetport Ops & Maintenance Worker	Jetport	5/15/2023	5/15/2023	5/16/2023	5/24/2023		7/10/2023	7/10/2023	7/10/2023	7/19/2023	7/19/2023	7/19/2023	7/19/2023	7/25/2023	8/2/2023	8/7/2023	8/9/2023	8/9/2023	8/14/2023	8/17/2023					
Plumber II	Facilities and Parks	9/12/2023	10/4/2023	10/5/2023	10/18/2023		10/23/2023	10/18/2023	10/23/2023	12/20/2023	1/5/2024	12/20/2023	1/5/2024	12/18/2023	1/5/2024	1/25/2024									
Admin Assistant	County Manager		7/21/2023	7/21/2023	7/21/2023		7/21/2023	7/21/2023	7/21/2023	8/25/2023	8/29/2023	8/28/2023	8/29/2023	7/30/2023	8/29/2023	9/6/2023	9/14/2023	9/14/2023	9/15/2023	9/15/2023	9/15/2023	9/15/2023	9/21/2023		
Document Technician	Clerk's	7/21/2023	7/21/2023	7/21/2023	7/25/2023		7/26/2023	7/25/2023	7/27/2023	8/15/2023	8/15/2023	8/9/2023	8/11/2023	8/13/2023	8/17/2023	8/24/2023									
Community Outreach Specialist II	HHS		7/26/2023	7/27/2023	7/27/2023		7/28/2023	7/27/2023	7/28/2023	7/28/2023	8/29/2023	8/29/2023	8/13/2023	8/29/2023	9/13/2023										
Support Service Navigator	HHS		7/31/2023	8/4/2023	7/31/2023		8/17/2023	7/31/2023	8/17/2023	8/17/2023	8/18/2023	9/11/2023	9/12/2023	9/13/2023	9/12/2023	11/16/2023	12/7/2023	12/7/2023	12/7/2023	12/8/2023	12/8/2023	12/27/2023	1/10/2024		
GIS Mapper Analyst	Community Development	7/29/2023	7/31/2023	8/2/2023	8/2/2023		8/3/2023	8/2/2023	8/7/2023	9/1/2023	9/1/2023	9/18/2023	9/18/2023	8/29/2023	9/18/2023	10/17/2023	10/19/2023	10/19/2023	10/18/2023	10/19/2023	10/23/2023	10/23/2023	11/1/2023		
GIS Mapper Analyst	Community Development	7/29/2023	7/31/2023	8/2/2023	8/2/2023		8/3/2023	8/2/2023	8/7/2023	9/1/2023	9/1/2023	9/18/2023	9/18/2023	8/29/2023	9/18/2023	10/17/2023	11/27/2023	11/27/2023	11/27/2023	12/4/2023	12/4/2023	12/4/2023	12/4/2023	12/4/2023	
Planner/Designer	Community Development	8/1/2023	8/1/2023	8/2/2023	8/2/2023		8/3/2023	8/2/2023	8/7/2023	11/20/2023	11/20/2023	10/18/2023	10/18/2023	10/13/2023	11/21/2023										
Outreach Coordinator	Finance	7/26/2023	7/26/2023	7/31/2023	8/9/2023		8/10/2023	8/9/2023	8/10/2023	8/23/2023				8/29/2023											

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting/ Discussion with Department re: JD	Position Recruitment Form Completed	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Qualified Applications Released to Department	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Recruitment Packet Received in HR	Background Check Initiated	Background Check Completed	Compensation Calculated/ Emailed to Department	P1 Routed for Approval	Offer Extended to Candidate	Start Date	Time to Hire Final
Community Health Worker Promotora	Health & Human Services	1/6/2018	8/8/2023	8/16/2023	8/16/2023		8/17/2023	8/16/2023	8/21/2023	8/16/2023	8/16/2023	9/6/2023	9/6/2023	9/13/2023	9/18/2023										
Community Health Worker Promotora	Health & Human Services	8/14/2021	8/8/2023	8/16/2023	8/16/2023		8/17/2023	8/16/2023	8/21/2023	8/16/2023	8/16/2023	9/6/2023	9/6/2023	9/13/2023	9/18/2023										
Community Health Worker Promotora	Health & Human Services	12/17/2022	8/8/2023	8/16/2023	8/16/2023		8/17/2023	8/16/2023	8/21/2023	8/16/2023	8/16/2023	9/6/2023	9/6/2023	9/13/2023	9/18/2023										
Electrician II	Facilities and Parks	8/23/2023	8/23/2023	8/24/2023	8/28/2023		9/11/2023	8/28/2023	9/11/2023	11/6/2023	11/6/2023	11/6/2023	11/6/2023	11/2/2023	11/6/2023	12/7/2023	12/26/2023	12/26/2023	12/8/2023	12/12/2023	12/27/2023	12/28/2023	1/5/2024	1/5/2024	
Appraiser Assistant	Assessor's	7/23/2023	9/8/2023	9/11/2023	9/11/2023		9/27/2023	9/11/2023	9/27/2023	10/26/2023	10/26/2023	10/24/2023	10/26/2023	10/12/2023	10/26/2023	11/13/2023	12/27/2023	12/27/2023	12/19/2023	12/26/2023	12/28/2023	12/28/2023	1/8/2024		
Grounds Maintenance Worker	Facilities and Parks	10/12/2023	9/29/2023	10/2/2023	10/2/2023		10/3/2023	10/2/2023	10/4/2023	10/20/2023	10/20/2023	11/2/2023	11/2/2023	10/19/2023	11/2/2023	11/17/2023	11/22/2023	11/28/2023	11/22/2023	11/27/2023	11/29/2023	11/30/2023	12/5/2023	12/5/2023	
Grounds Maintenance Worker	Facilities and Parks	10/12/2023	9/29/2023	10/2/2023	10/2/2023		10/3/2023	10/2/2023	10/4/2023	10/20/2023	10/20/2023	11/2/2023	11/2/2023	10/19/2023	11/2/2023	11/17/2023	11/28/2023	11/28/2023	11/22/2023	11/27/2023	11/28/2023	11/28/2023	11/28/2023	11/28/2023	
Buyer	Purchasing		10/18/2023	10/18/2023	10/18/2023		10/23/2023	10/18/2023	10/23/2023	11/9/2023	12/15/2023	12/14/2023	12/18/2023	11/19/2023	12/18/2023										
HR Administrator - Benefits	Human Resources	7/1/2023	11/9/2023	11/9/2023	11/9/2023		11/13/2023	11/9/2023	11/14/2023					12/5/2023											
Heavy Equipment Mechanic	Roads		10/26/2023	10/27/2023	10/27/2023		10/27/2023	10/27/2023	10/30/2023	12/20/2023	12/20/2023	12/19/2023	12/20/2023	12/3/2023	12/20/2023	2/7/2024									
HR Representative	Human Resources	11/1/2023	11/1/2023	11/1/2023	11/1/2023		11/1/2023	11/1/2023	11/1/2023	11/3/2023	11/3/2023	11/17/2023	11/17/2023	11/13/2023	11/17/2023	11/29/2023									
Jetport Maintenance Worker	Jetport	11/3/2023	11/3/2023	11/3/2023	9/27/2023		11/3/2023	11/2/2023	11/3/2023	11/22/2023	11/22/2023	11/22/2023	11/22/2023	11/26/2023	11/30/2023										
GIS Mapper Analyst	Community Development	12/4/2023	12/4/2023	12/4/2023	12/7/2023		12/15/2023	12/7/2023	12/15/2023	1/5/2024	1/5/2024	1/23/2024	1/23/2024	1/1/2024	1/23/2024	2/21/2024	2/28/2024	2/28/2024	2/23/2024	2/26/2024	2/29/2024	2/29/2024	3/4/2024	3/4/2024	
Equipment/Heavy Equipment Operator	Roads	12/6/2023	12/6/2023	12/8/2023	12/7/2023		12/12/2023	12/7/2023	12/19/2023	1/18/2024	1/18/2024	2/5/2024	2/5/2024	1/21/2024	2/5/2024	2/23/2024									
Equipment/Heavy Equipment Operator	Roads	12/6/2023	12/6/2023	12/8/2023	12/7/2023		12/12/2023	12/7/2023	12/19/2023	1/18/2024	1/18/2024	2/5/2024	2/5/2024	1/21/2024	2/5/2024										
HR Representative	Human Resources	10/28/2023	12/11/2023	12/11/2023	12/11/2023		12/12/2023	12/11/2023	12/12/2023	2/29/2024	2/29/2024	2/29/2024	2/29/2024	1/9/2024	3/4/2024	3/7/2024									
Mental Health Awareness Educator	Health & Human Services		11/7/2023	11/7/2023	11/7/2023		11/9/2023	11/7/2023	11/9/2023	12/13/2023	12/13/2023	12/5/2023	12/13/2023	11/26/2023	12/13/2023	1/5/2024	1/17/2024	1/30/2024	1/8/2024	1/11/2024	1/30/2024	1/30/2024	1/30/2024	1/30/2024	
Electrician II	Facilities and Parks	8/23/2024	1/5/2024	1/9/2024	1/9/2024		1/10/2024	1/9/2024	1/10/2024	3/19/2024	3/19/2024	3/19/2024	3/19/2024	3/10/2024	3/19/2024	5/10/2024	5/21/2024	5/21/2024	5/13/2024	5/28/2024					
Accountant II	Finance	1/27/2024	1/16/2024	1/16/2024	1/16/2024		2/14/2024	1/16/2024	2/20/2024	3/26/2024	3/26/2024	3/26/2024	3/26/2024	3/20/2024	3/26/2024										
Plumber II	Facilities and Parks	7/28/2023	2/7/2024	2/7/2024	2/7/2024		2/8/2024	2/7/2024	2/8/2024																
Heavy Equipment Mechanic	Fleet	8/13/2022	2/7/2024	2/7/2024	2/7/2024		2/7/2024	2/7/2024	2/8/2024	3/22/2024	3/22/2024	3/22/2024	3/25/2024	3/20/2024	3/25/2024	4/18/2024		4/18/2024		4/18/2024					
Executive Assistant to Commissioner	County Commission	2/7/2024	2/7/2024	2/7/2024	2/7/2024		2/8/2024	2/7/2024	2/8/2024					2/15/2024											
Executive Assistant to Commissioner	County Commission	2/27/2024	2/7/2024	2/7/2024	2/7/2027		2/8/2024	2/7/2024	2/8/2024					2/15/2024											
HR Training Coordinator	Human Resources	3/4/2024	3/4/2024	3/4/2024	3/4/2024		3/7/2024	3/1/2024	3/7/2024					3/24/2024	8/22/2024										
Support Service Navigator	Health & Human Services	2/8/2024	2/8/2024	2/8/2024	2/22/2024		3/6/2024	3/5/2024	3/6/2024	3/27/2024	3/27/2024	4/2/2024	4/3/2024	3/21/2024	4/3/2024	4/12/2024	5/7/2024	5/9/2024	5/3/2024	5/6/2024	5/20/2024	5/20/2024	5/20/2024	5/20/2024	
HR Representative ER	Human Resources		3/8/2024	3/8/2024	3/8/2024		3/8/2024	3/8/2024	3/8/2024					3/24/2024											
HR Representative	Human Resources	3/8/2024	3/8/2024	3/8/2024	3/8/2024		3/8/2024	3/8/2024	3/8/2024	4/29/2024	4/29/2024	4/29/2024	4/29/2024	3/24/2024	4/29/2024										
Live Evidence Technician	Animal Control	3/14/2024	3/14/2024	3/14/2024	3/14/2024		3/15/2024	3/14/2024	3/18/2024	5/7/2024	5/7/2024	5/28/2024	5/28/2024	5/14/2024	5/28/2024	6/25/2024	6/26/2024	6/26/2024	6/26/2024	7/15/2024	7/15/2024	7/23/2024	7/26/2024	8/1/2024	
Sr. Network & Systems Administrator	Information Technology	4/24/2024	4/24/2024	4/26/2024	4/24/2024		4/28/2024	4/26/2024	4/29/2024	5/23/2024	5/28/2024	5/17/2024	5/17/2024	5/15/2024	5/28/2024	6/12/2024	6/12/2024								

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting/ Discussion with Department re: JD	Position Recruitment Form Completed	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Qualified Applications Released to Department	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Recruitment Packet Received in HR	Background Check Initiated	Background Check Completed	Compensation Calculated/ Emailed to Department	P1 Routed for Approval	Offer Extended to Candidate	Start Date	Time to Hire Final
Heavy Equipment Mechanic	Fleet	4/26/2024	4/26/2024	5/2/2024	5/2/2024		5/3/2024	5/2/2024	5/3/2024	7/16/2024	7/22/2024	6/25/2024	7/22/2024	6/14/2024	7/22/2024										
HR Representative	Human Resources	4/29/2024	4/29/2024	5/3/2024	4/29/2024		5/3/2024	4/29/2024	5/3/2024	5/29/2024	5/29/2024	6/10/2024	6/10/2024	5/28/2024	6/10/2024	6/14/2024									
Heavy Equipment Operator	Roads	5/15/2024	5/15/2024	5/16/2024	5/15/2024			5/15/2024	5/22/2024	5/24/2024	6/5/2024	7/8/2024	7/8/2024	6/14/2024	7/8/2024										
Equipment Operator	Roads	5/21/2024	5/21/2024	5/23/2024	5/24/2024		5/31/2024	5/31/2024	5/31/2024	5/24/2024	6/5/2024	7/8/2024	7/8/2024	6/14/2024	7/8/2024										
Accountant II	Finance	4/17/2024	4/17/2024	4/17/2024	4/17/2024		5/29/2024	5/28/2024	5/29/2024	7/22/2024	7/22/2024	6/25/2024	6/25/2024	6/14/2024	7/22/2024										
Support Service Manager	Health & Human Services	5/20/2024	5/20/2024	5/22/2024	5/31/2024		6/4/2024	5/31/2024	6/4/2024	7/12/2024	7/15/2024	7/12/2024	7/12/2024	6/14/2024	7/15/2024										
IT Communications Systems Technician	Information Technology	6/18/2024	6/18/2024	6/18/2024	6/18/2024		7/10/2024	6/18/2024	7/10/2024	7/24/2024	7/24/2024	7/24/2024	7/24/2024	7/25/2024	8/6/2024	8/20/2024									
Building Attendant	Facilities and Services	7/9/2024	7/9/2024	7/10/2024	7/10/2024		7/11/2024	7/10/2024	7/12/2024	7/22/2024	7/22/2024	7/22/2024	7/22/2024	7/21/2024	7/31/2024	8/14/2024	8/30/2024	8/30/2024	8/16/2024	8/30/2024	9/4/2024	9/4/2024	9/6/2024	9/9/2024	
Grounds Maintenance Worker	Facilities and Services	5/31/2024	5/31/2024	5/31/2024	5/31/2024		7/29/2024	7/10/2024	7/29/2024	9/19/2024	9/19/2024	9/5/2024	9/5/2024	8/21/2024	9/24/2024	10/18/2024	10/18/2024	10/18/2024	10/18/2024	10/22/2024	10/22/2024	10/28/2024	10/28/2024	10/28/2024	
Public Safety Communications Coordinator	PIO	8/16/2024	8/16/2024	8/22/2024	7/25/2024		8/21/2024	8/13/2024	8/21/2024	9/12/2024	9/19/2024	9/17/2024	9/18/2024	9/12/2024	9/20/2024	10/1/2024	10/23/2024	10/28/2024	10/23/2024	10/25/2024	10/28/2024	10/28/2024	10/28/2024	10/28/2024	
Public Safety Communications Coordinator	PIO	8/16/2024	8/16/2024	8/22/2024	7/25/2024		8/21/2024	8/13/2024	8/21/2024	9/12/2024	9/19/2024	9/17/2024	9/18/2024	9/12/2024	9/20/2024	10/1/2024	10/7/2024	10/8/2024	10/4/2024	10/8/2024	10/8/2024	10/8/2024	10/18/2024	10/22/2024	
Computer Technician	Information Technology	8/26/2024	8/26/2024	8/26/2024	8/26/2024		9/3/2024	8/26/2024	9/5/2024	8/29/2024	8/29/2024	9/23/2024	9/27/2024	9/20/2024	10/2/2024	10/11/2024	10/17/2024	10/17/2024	10/17/2024						
IT Service Desk Temporary	Information Technology	9/27/2024	10/2/2024	10/18/2024	10/2/2024		10/24/2024	10/2/2024	10/24/2024	11/14/2024	11/14/2024	11/19/2024	11/19/2024	11/9/2024	11/21/2024										
Assistant Director	Facilities and Services	10/23/2024	10/23/2024	10/24/2024	10/23/2024		10/25/2024	10/23/2024	10/25/2024	12/17/2024	12/17/2024	12/17/2024	12/17/2024	12/17/2024	12/17/2024										
Accountant II	Finance	7/23/2024	7/23/2024	7/25/2024	7/25/2024		12/23/2024	12/23/2024	12/23/2024	12/23/2024	12/23/2024	12/23/2024	12/23/2024	12/23/2024	12/23/2024										
HR Training Coordinator	Human Resources	8/20/2024	8/21/2024	8/22/2024	8/21/2024		8/22/2024	8/21/2024	8/28/2024	12/12/2024	12/12/2024	12/12/2024	12/12/2024	12/7/2024	12/13/2024	12/19/2024	1/9/2025	1/9/2025	1/4/2025	1/27/2025	1/16/2025	1/27/2025	1/27/2025		
Appraiser Assistant	Assessor's	8/23/2024	8/23/2024	8/23/2024	8/23/2024		8/29/2024	8/23/2024	8/29/2024	10/2/2024	10/21/2024	10/2/2024	10/21/2024	9/16/2024	10/21/2024										
Administrative Assistant	Assessor's	6/5/2024	6/5/2024	6/5/2024	6/5/2024		9/3/2024	8/27/2024	9/3/2024	9/25/2024	9/25/2024	10/2/2024	10/7/2024	9/19/2024	10/7/2024										
County Attorney	Legal		9/13/2024	9/13/2024	9/13/2024		9/18/2024	9/13/2024	9/18/2024	1/2/2025	1/2/2025	11/5/2024	11/7/2024	2/21/2025	11/7/2024	11/18/2024									
Grant Administrator	Facilities and Services	9/24/2025	9/24/2025	10/7/2024	9/23/2024		10/9/2024	9/23/2024	10/10/2024	12/12/2024	12/17/2024	12/12/2024	12/17/2024	12/2/2024	12/18/2024	12/23/2024	1/2/2025	1/2/2025	12/23/2024	1/6/2025					
Laborer	Community Development	10/16/2024	10/16/2024	10/23/2024	10/23/2024		10/28/2024	10/23/2024	10/28/2024	12/4/2024	12/11/2024	12/4/2024	12/11/2024	11/21/2024	12/12/2024	12/20/2024	1/8/2025	1/8/2025	12/23/2024	12/27/2024	1/14/2025	1/14/2025	1/14/2025		
Equipment Operator	Roads	10/30/2024	10/30/2024	11/1/2024	11/1/2024		11/15/2024	11/1/2024	11/15/2024	12/12/2024	12/12/2024	12/12/2024	12/12/2024	12/16/2024	12/18/2024	1/14/2025	1/31/2025	2/3/2025	1/27/2025	1/31/2025	2/14/2025	2/19/2025	2/25/2025		
Building Attendant	Facilities and Services	11/4/2024	11/5/2024	11/5/2024	11/4/2024		11/6/2024	11/4/2024	11/6/2024	11/8/2024	11/8/2024	12/11/2024	12/18/2024	11/21/2024	12/18/2024	1/30/2025	2/3/2025	2/4/2025	1/31/2025	2/18/2025	2/18/2025	2/18/2025	2/18/2025	2/18/2025	
Building Attendant	Facilities and Services	11/4/2025	118/05/2024	11/5/2024	11/4/2025		11/6/2024	11/4/2024	11/6/2024	11/8/2024	11/8/2024	12/11/2024	12/18/2024	11/21/2024	12/18/2024	1/30/2025	3/5/2025	3/6/2025	2/18/2025	2/25/2025	3/7/2025	3/7/2025	3/10/2025	3/10/2025	
Community Health Worker-Court Compliance	HHS	11/7/2024	11/7/2024	11/12/2024	11/12/2024		11/15/2024	11/12/2024	11/15/2024	2/5/2025	2/5/2025	1/27/2025	2/5/2025	12/7/2024	2/7/2025										
Compliance Officer	HHS	12/2/2024	12/2/2024	12/2/2024	12/2/2024		12/3/2024	12/2/2024	12/3/2024	2/13/2025	2/13/2025	2/12/2025	2/13/2025	12/25/2025	2/20/2025										
County Engineer	Engineering & Roads	10/18/2024	10/4/2024	10/4/2024	12/5/2024		12/5/2024	12/5/2024	12/5/2024	2/5/2025	2/7/2025	2/5/2025	2/7/2025	1/14/2025	2/7/2025	2/13/2025			2/14/2025						
Supervisor	Fleet	10/8/2024	10/8/2024	12/5/2024	12/2/2024		12/5/2024	12/2/2024	12/5/2024	12/6/2024	12/6/2024	12/6/2024	12/30/2024	12/20/2024	1/3/2024	1/27/2025									
Coordinator	Office of Emergency Management	1/2/2025	1/2/2025	1/2/2025	1/2/2025		1/6/2025	1/2/2025	1/6/2025	1/7/2025	1/7/2025	1/10/2025	2/7/2025	2/4/2025	2/7/2025										

Job Title	Department	Position Became Vacant	Hiring Department Notified HR of Vacancy	Recruitment Email Sent to Department	Meeting/ Discussion with Department re: JD	Position Recruitment Form Completed	Requisition Approved	Job Description Approved	Job Posted	Interview Questions Received	Interview Questions Approved	Interview Panel Received	Interview Panel Approved	Posting Closed	Qualified Applications Released to Department	Candidates Interviewed by Department	Reference Checks Completed on Selected Candidate	Recruitment Packet Received in HR	Background Check Initiated	Background Check Completed	Compensation Calculated/ Emailed to Department	P1 Routed for Approval	Offer Extended to Candidate	Start Date	Time to Hire Final
Executive Assistant to Commissioner	County Manager	1/10/2025	1/10/2025	1/10/2025	1/10/2025		1/10/2025	1/10/2025	1/10/2025	2/24/2025	2/24/2025	2/24/2025	2/24/2025	1/21/2025	2/24/2025	2/24/2025	3/3/2025	3/3/2025	2/26/2025	3/4/2025	2/26/2025	3/3/2025	3/7/2025		
Laborer	Community Development	1/9/2025	1/9/2025	1/13/2025	1/14/2025		1/16/2025	1/14/2025	1/17/2025	2/21/2025	2/21/2025	2/21/2025	2/25/2025	2/10/2025	2/25/2025	3/14/2025	4/16/2025	4/29/2025	3/17/2025	3/21/2025	4/30/2025	4/30/2025	4/30/2025	4/30/2025	
Human Resources Assistant	Human Resources	2/17/2025	2/17/2025	2/18/2025	2/17/2025		2/19/2025	2/17/2025	2/19/2025	3/16/2025	3/17/2025	3/16/2025	3/17/2025	2/27/2025	3/17/2025	4/9/2025									
HR Administrator	Human Resources	2/18/2025	2/18/2025	2/19/2025	2/24/2025		2/24/2025	2/24/2025	2/24/2025	3/25/2025	3/25/2025	3/25/2025	3/25/2025	3/12/2025	3/25/2025										
Equipment Operator	Roads	2/28/2025	2/28/2025	3/5/2025	3/6/2025		3/12/2025	3/6/2025	3/12/2025	4/9/2025	4/9/2025	4/8/2025	4/9/2025	3/27/2025	4/9/2025	4/22/2025	4/24/2025	4/24/2025							
Compliance Specialist	HHS									5/27/2025	5/28/2025	5/27/2025	5/28/2025			6/5/2025									
Heavy Equipment Mechanic	Fleet	3/17/2025	3/17/2025	3/18/2025	3/19/2025		3/21/2025	4/5/2023	3/21/2025	5/1/2025	5/1/2025	5/1/2025	5/1/2025	4/28/2025	5/1/2025	5/29/2025			5/29/2025						
Compliance Officer	HHS	3/10/2025	3/10/2025	3/10/2025	3/10/2025		3/26/2025	3/25/2025	3/27/2025	5/2/2025	5/2/2025	5/2/2025	5/2/2025	4/25/2025	5/13/2025	5/23/2025	6/5/2025	6/5/2025	6/13/2025	6/13/2025	6/13/2025	6/13/2025	6/13/2025		
Network & System Administrator	Information Technology	1/7/2025	1/7/2025	1/9/2025	1/27/2025		4/1/2025	3/24/2025	4/1/2025	1/27/2025	1/27/2025	4/16/2025	4/17/2025	4/16/2025	4/21/2025	5/20/2025	5/23/2025	5/23/2025	5/22/2025	6/3/2025	6/3/2025	6/3/2025	6/4/2025	6/30/2025	
Accountant III	Finance	3/11/2025	3/11/2025	4/2/2025	3/11/2025		4/4/2025	4/1/2025	4/4/2025	4/4/2025	4/4/2025	4/16/2025	4/17/2025	4/28/2025	4/17/2025	5/8/2025	6/5/2025								
Engineer Supervisor	Engineering & Roads	3/31/2025	7/25/2025	7/25/2025	4/9/2025		5/5/2025	5/2/2025	7/29/2025	5/30/2025	6/9/2025	10/3/2025	10/3/2025	8/30/2025	10/3/2025	11/6/2025									
Engineer Supervisor	Engineering & Roads	3/31/2025	3/31/2025	4/1/2025	4/9/2025		5/5/2025	5/2/2025	5/6/2025	5/30/2025	6/9/2025	5/29/2025	5/30/2025	5/22/2025	6/9/2025										
Engineer Supervisor	Engineering & Roads	3/31/2025	3/31/2025	4/1/2025	4/9/2025		5/5/2025	5/2/2025	5/6/2025	5/30/2025	6/9/2025	5/29/2025	5/30/2025	5/22/2025	6/9/2025										
Fleet Supervisor	Fleet	5/1/2025	5/1/2025	5/2/2025	5/21/2025		5/23/2025	5/21/2025	5/23/2025	6/30/2025	6/30/2025	6/30/2025	7/1/2025	6/16/2025	7/1/2025	8/7/2025	8/13/2025	8/13/2025	8/7/2025	8/11/2025	8/13/2025	8/14/2025	8/20/2025	9/8/2025	
Fleet Supervisor	Fleet															8/7/2025	9/2/2025	9/2/2025	9/3/2025	9/11/2025		9/18/2025	9/25/2025	10/14/2025	
Field Ops & Maintenance Technician	Flood Commission	5/20/2025	5/20/2025	5/22/2025	5/20/2025		5/28/2025	5/20/2025	5/29/2025	6/30/2025	6/30/2025	6/30/2025	7/24/2025	6/28/2025	7/24/2025	8/13/2025	8/28/2025	8/29/2025	8/14/2025						
Laborer	Community Development		5/13/2025	5/13/2025	5/14/2025		6/16/2025	6/4/2025	6/16/2025	9/19/2025	9/19/2025	9/15/2025	9/19/2025	7/1/2025	9/19/2025	10/8/2025		10/29/2025	10/8/2025						
Data and Evaluation Assistant	HHS	8/22/2025	8/22/2025	8/27/2025	8/27/2025		9/9/2025	8/22/2025	9/9/2025	9/9/2025	9/24/2025	9/23/2025	9/24/2025	9/25/2025	10/1/2025	11/6/2025	11/13/2025	11/13/2025	11/6/2025	11/20/2025	11/24/2025	11/24/2025	12/9/2025	12/9/2025	
Data and Evaluation Assistant	HHS	8/22/2025	8/22/2025	8/27/2025	8/27/2025		9/9/2025	8/22/2025	9/9/2025	9/9/2025	9/24/2025	9/23/2025	9/24/2025	9/25/2025	10/1/2025	11/6/2025	12/15/2025	12/15/2025	12/9/2025	12/15/2025	12/15/2025	12/15/2025	12/15/2025	12/15/2025	
Heavy Equipment Mechanic	Fleet	6/11/2025	6/11/2025	6/12/2025	9/15/2025		9/17/2025	9/15/2025	9/17/2025	10/21/2025	10/21/2025	10/21/2025	10/22/2025	10/10/2025	10/22/2025	12/4/2025	12/9/2025	12/9/2025	12/4/2025	12/17/2025		12/17/2025			
Document Technician	Assessor's		8/5/2025	8/5/2025			9/19/2025		9/22/2025	N/A	N/A	N/A	N/A	10/7/2025	N/A										
Assistant Director/ County Engineer	Engineering & Roads	9/23/2025	9/23/2025	9/30/2025	9/2/2025		9/30/2025	9/2/2025	10/1/2025	1/7/2026	1/7/2026	1/7/2026	1/7/2026	11/15/2025	1/7/2026										
Community Engagement Specialist	Community Engagement Office	11/3/2025	11/3/2025	11/3/2025	11/3/2025		11/4/2025	10/22/2025	11/5/2025	12/4/2025	12/9/2025	12/4/2025	12/9/2025	11/21/2025	128/09/2025	2/18/2026									
Code Enforcement Supervisor	Community Development		10/30/2025	11/4/2025	10/30/2025		11/10/2025	10/30/2025	11/10/2025	12/9/2025	12/10/2025	12/11/2025	12/11/2025	12/2/2025	12/11/2025	12/18/2025	12/22/2025	12/22/2025	12/18/2025	12/18/2025	12/23/2025	12/23/2025	1/7/2026	1/11/2026	
Division Manager	HHS	12/31/2025	10/27/2025	10/30/2025	10/30/2025		11/19/2025	11/13/2025	11/19/2025	12/11/2025	12/11/2025	12/8/2025	12/8/2025	12/5/2025	12/11/2025	1/23/2026	1/26/2026	1/26/2026	1/23/2026	1/23/2026	1/26/2026	1/26/2026	1/26/2026	1/26/2026	

EXAMPLE HIRING TIMELINE – HR / DASO SEX OFFENDERS REGISTRATION AND NOTIFICATION ACT (SORNA) SORNA COORDINATOR (SORC) – VACANT POSITION

The following information was pulled independently from emails during our procedures to illustrate difficulties in the County's hiring process. SORNA is a federal¹ and state² law and lack of diligence in this area could cause harm to the Public.

2024

No.	Date	From	To	Description
1.	7/6/2024			SORNA Coordinator resigned
2.	8/6/2024	HR Staff	All HR	Notified of resignation of SORNA Coordinator in Termination report dated 7/01/24 – 7/31/2024 (30 days)
3.	8/27/2024	HR Staff	Herself	Emailed herself the termination report (These were confirmed deactivated on 8/27/2024)
4.	8/12/2024	Applicant 1	HR Admin Rep	Following up on status of SORC position
	8/14/2024	HR Admin Rep	Applicant 1	Sorry for delay, no additional updates
	8/14/2024	Applicant 1	HR Admin	The plan is to still make an offer to me correct? (2 days)
5.	8/21/2024	Sheriff	Stacy, DASO	Provide list of candidates HR is holding back, I will forward to Asst County Manager/HR
	8/21/2024	DASO Recruiter	Sheriff	No comp rate received for SORC candidate Applicant 1, many attempts made since July have not been able to route P1.
6.	8/22/2024	HR Admin	Sheriff/DASO Recruiter	P1 can now be initiated and routed for approval for Applicant 1 (approximately 30 days for job posting and interview based on emails)
7.	8/26/2024	HR Admin	Applicant 1	(Same thread as #4) left you a VM as a follow-up on position, contact me back
	8/26/2024	Applicant 1	HR Admin	My current position is B23, the position is B24, correct?
	8/26/2024	HR Admin	Applicant 1	Yes, offer rate was based on B24....

¹ Enacted as part of the Adam Walsh Act, 2006.

² Section 29-11A-1 NMSA 1978.

8.	8/26/2024	HR Admin	Sheriff & DASO Recruiter	Applicant 1 declined the offer of employment
9.	9/03/2024	DASO Recruiter	Major, DASO; Cc: Sheriff	As of today requested vacancies have not been moved into Workday so I can post recruitment....below is email request submitted on 8/28/24...I have been instructed to move forward with SORC...
	8/28/2024	Major, DASO	Asst. HR Director	Can you move all position vacancies listed with Workday to Sheriff's team so she can be the hiring manager? That way we can post these open positions and better track vacancies
10.	9/19/2024	DASO Recruiter	Undersheriff	Per our conversations this week, the following are pending from HR – we need to post for SORC asap (Note: SORC is 1 of 4 items on list)
11.	10/02/2024	HR Admin	Sheriff & Undersheriff	Below is a list of current vacant positions....SORC is 1 of then..... Please confirm which vacancies from this list would you like us to post to begin the recruitment process (Note: there are 10 total vacant positions)
	10/10/2024		Asst HR Director	Above email forwarded to HR (8 days)
	10/10/2024	Asst HR Director	HR Director	Email forwarded; please see HR Admin's email below to Undersheriff and Sheriff re: vacant positions
	10/10/2024	HR Director	Asst. HR Director	I was going to set up a meeting with Sheriff on hiring process....Is HR Admin asking what he wants HR to start on ? (Note: why set up meeting now on hiring process, Sheriff has been in office for years)
	Reply 10/10/2024	Asst. HR Director	HR Director	Yes, he reached to see what position they would HR to post. He reached out on October 2, 2024 and we have not heard back from the department.
	Reply 10/10/2024	HR Director	Asst. HR Director	Okay if he doesn't hear back, have him hold out on reaching out again.
12.	10/21/2024	DASO Recruiter	Undersheriff	I was asked sometime last week if we know when the SORC position will be

				open for applications, have you heard anything or would you like me to email HR? (DASO Recruiter fwd the email from 9/19/2024 #10 on my list)
13.	10/22/2024	HR Admin	HR Director & Asst. HR Director	Here is the email sent to the Sheriff and Undersheriff regarding vacancy posting. No confirmation response has been received as of yet.
	Reply 10/23/2024	HR Director	Asst. HR Director & HR Admin	Thank you HR Admin! Go ahead and hold off on asking for another update , County Manager will be talking with Sheriff about their recruiting and will let us know how to proceed. In the meantime, if Sheriff's Office contacts you on recruiting please let me and/or Asst. HR Director know.
14.	10/25/2024	Sheriff	HR Director Cc: HR Admin, DASO Deputies, & DASO Recruiter	Requesting a status on several HR pending issues to include hiring status of cadet, how many vacancies do they have allotted to them – info no longer available and advising to post vacancies of SORC, Department Manager and Legal Process Server
15.	10/25/2024	DASO Recruiter	Sheriff Cc: DASO Deputy	Per your request, below are cited items that are HR matters – 7 items listed along with, post vacancies: SORC...
16.	11/01/2024	HR Admin	DASO Recruiter	Your Workday recruiting access should now be restored.....when you get a chance if you could call to discuss the positions to be posted
	11/01/2024	DASO Recruiter	Sheriff & Undersheriff	Email forwarded...routed req and memo for Captain....now we are going to get back on track... please advise which positions you want me to start working on next week...SORC., Legal Process server, Department Manger or Doc Tech...I also am reviewing HR protocol draft for the hiring process
	11/05/2024	DASO Recruiter	Sheriff & Undersheriff	Wanted to follow-up which of the positions do you want me to follow up with....

17.	11/12/2024	HR Assistant	DASO Recruiter Cc: most of HR including HR Director, Asst. HR Director, and HR Admin	For all to review block ad
	11/12/2024	DASO Recruiter	HR Assistant	Please add SORC, Process Server and Department Manager to this ad
	11/12/2024	HR Assistant	DASO Recruiter, DASO Deputy, Cc: most of HR including HR Director, Asst. HR Director, and HR Admin	I added requested Job Vacancies see attached
18.	11/13/2024	DASO Recruiter	Sheriff, Undersheriff, DASO Deputies	Finally ready to post positions SORC is in list asking Sheriff to approve
	11/13/2024	Sheriff	All above	Yes
19.	11/14/2024	DASO Recruiter	All DASO	Advising accepting applications for positions (SORC is one of them)
20.	12/09/2024	HR assistant	Accounting Specialist	Block ad
21.	12/13/2024	HR Rep	DASO Recruiter	Application for SORC
22.	12/19/2024	HR Rep	DASO Recruiter	Supplemental application

2025

No.	Date	From	To	Description
23.	1/16/2025	Applicant 1	HR Admin	Any idea when applicants will be notified about moving forward
	1/17/2025	HR Admin	Applicant 1	I have not received any recent updates from the department on recruitment for this position as of yet
	1/21/2025	Applicant 1	HR Admin	Since I declined the position and they reposted...can I reconsider?

	1/23/2025	HR Admin	Applicant 1	Since the position was reposted it will need to go through the complete recruitment process
24.	01/29/2025	HR Director	HR Administrators Cc: Asst. HR Director	Review benchmark positions that will be used for class and comp study. Let me know if there are any positions ... we have a difficult time recruiting for...
	01/29/2025	HR Admin	HR Director, HR Administrators Cc: Asst. HR Director, HR Benefits	One additional position I can think of that has had recruitment and retention issues is SORC
25.	02/19/2025	DASO Recruiter	HR Administrators Cc: HR Admin	Questions for SORC interviews on 2/26/2025
26.	02/21/2025	DASO Recruiter	HR Administrators Cc: HR Admin	Advising DASO panelist is Detective
27.	03/06/2025	DASO Recruiter	Applicant 1	Fingerprint instructions for SORC position
28.	05/15/2025	DASO	HR Admin	FMLA and the SORC position being vacant... we still need to ensure proper monitoring of offender in the community
	05/20/2025	HR Admin	DASO	...the SORC position should hopefully be filled soon
29.	06/05/2025	DASO Recruiter	HR Admin & HR Assistants	Can I get copies of DASO Job descriptions by Monday please
	06/06/2025	HR admin Assistant	DASO Recruiter, HR Admin & HR Assistants	I have attached PDF's of DASO job descriptions
30.	07/22/2025	DASO Recruiter	Captain	We have not received updated comp and information for our recommended SORC Applicant. File taken to HR on 6/27/25
31.	07/24/2025	HR Rep	DASO Recruiter	She is working on SORC recruitment since HR Admin is out, not able to locate supplemental app for Applicant 3
	07/24/2025	DASO Recruiter	HR Rep	Responds with documents requested above

32.	08/07/2025	Applicant 3	HR Admin Assistant	I just saw your email in regard to the offer letter for the position as SORC, I will be declining the offer
	08/07/2025	HR Admin	DASO Recruiter & Sheriff	3 rd Applicant declined offer....the next recommended candidate was not approved for offer by department... 4th Applicant.... Do you want to proceed with this candidate
	08/07/2025	DASO Recruiter	HR Admin & Sheriff	...why did he decline
	08/07/2025	HR Admin	DASO Recruiter & Sheriff	He declined due to pay
33.	08/08/2025	Sheriff	HR Director & HR Admin	Let us do a wage analysis and get up to 21st century pay rates....I was told HR did this ...when is the date of completion
34.	08/08/2025	HR Admin	Asst. HR Director	Background information of SORC recruitment (Note: HR Admin began his info on 11/14/2024 with the job posting, this process began in July 2024 – Applicant 1 declined offer in 8/24 – HR Timeline here was incorrect based on review of emails)
35.	08/09/2025	Sheriff	Command Staff	We need to meet to discuss options for filling this position....

It appears from the emails able to be retrieved that it took from July 6, 2024 to November 14, 2024, **131 days** just to post the initial offer. However, emails do not show/mention the posting for Applicant 1 which must have been before August 2024. HR Admin does not reflect the posting of this position nor the offer to Applicant 1 in the timeline he provided to HR Director and Asst. HR Director. HR mentions a compensation study; however, there is no indication that it was completed for at least **150 days**.

In order to be in compliance with federal law and state Section 29-11A-4 NMSA 1978, the Sheriff made the decision to temporarily assign SORNA duties to a Detective in 2024 when the position was having difficulty being filled. These duties are now being handled by the Legal Process Section of DASO with assistance from a Detective. The SORNA position should have a dedicated individual who can call on the assistance of patrol officers or other certified personnel to assist in selected duties, for example physical home verification visits, physical employment verification, etc.

A review of the Time to Hire spreadsheet provided by Human Resources (**EXHIBIT 4**) compared to certain emails we were able to obtain revealed:

The HR Timeline Tracker Chart (EXHIBIT 4) shows:

- Vacancy date: 8/1/2023
- Posting date: 12/13/2023 (this information was not verified; there should be multiple posting dates)
- An offer in April 2024: Applicant 1 declined due to pay (**NOTE: the difference was a minor amount, less than \$0.35 per hour**). Although he was a current employee, HR explained that his resume submitted online was missing certain facts which decreased his points assigned for the pay determination and the minor difference was not allowed to be adjusted.

However, the emails show:

- Vacancy date: 7/6/2024 (date the SORNA Coordinator resigned, verified via email)
- Posting date: 11/14/2024
- Candidate processing: Aug 2024 – Aug 2025
- No hire occurred. Sheriff had to modify personnel schedules/duties to accommodate federal and state mandates on SORNA.

The position has remained vacant for 645 days, from July 6, 2024 through April 12, 2026, reflecting a prolonged and avoidable lapse in staffing. During this period, more than 13 months of delay are directly attributable to administrative inaction, lack of proper Workday access, HR requests to delay, simple compensation-related delays, miscommunication, and process failures, rather than external labor-market or department conditions.

Human Resources did not exercise the level of due diligence required for this recruitment, resulting in a critical and preventable service gap for the residents of Doña Ana County. For example, we noted that a modest degree of flexibility, specifically, a small hourly pay adjustment well within standard administrative discretion would likely have secured a qualified candidate and avoided the vacancy but was not allowed by HR policies and procedures. Under any system but especially a merit system of pay, there should be Office and Department leadership judgment allowed in employee raises and transfers.

SEE FOLLOWING PAGES

Hiring & Commissioning Cadets

This exhibit contains the detailed file analysis for the eight Cadets referenced in the report. These analyses were conducted to evaluate the consistency and alignment between Human Resources (HR) determinations, licensed psychologist evaluations, and background investigation findings. Each Cadet file is presented in a standardized format to allow for a clear comparison of HR memoranda, psychological evaluations, and background investigations, followed by an overall conclusion. The purpose of this exhibit is to present the underlying support for the report's findings regarding inconsistencies in interpretation, application of standards, and the relationship between CMO recommendations and DASO statutory authority.

Analysis – Cadet 1

This Cadet file reflects a direct conflict between HR's interpretation of selected MMPI material, the licensed psychologist's recommendation, and the totality of the background investigation.

HR Memo

HR cites the MMPI-s sub score as "deficient" and utilizes it to recommend the candidate not continue employment.

- "This portion of the evaluation is rated as deficient due to the prediction of future performance difficulties."

This memo presents only negative information and frames it as an indicator of future performance issues.

- Negative framing includes prior employment termination and prior write-ups as indicators of future performance issues.

Psychological Evaluation

The licensed psychologist reaches the opposite conclusion and recommends the Cadet without reservation.

- Psychologist: "Applicant IS RECOMMENDED WITHOUT RESERVATION for certification pending completion of NMLEA approved training academy."

This is a direct contradiction, as HR is overriding the judgment of a trained, licensed professional using a few subscale points rather than evaluating the full report.

Background Investigation

The background investigation contains repeated positive findings that are omitted or discounted in HR's framing.

- “All references... had no reason not to recommend Applicant for a position of public trust.”
- “Applicant does appear honest, respectful, and forthcoming... appears to make a good fit honoring the Sheriff’s Office Core Values.”

A deeper review of the background revealed full disclosure and truthfulness to questions asked.

HR’s decision conflicts with:

- the psychologist’s recommendation,
- the overwhelmingly positive background findings, and
- the absence of behavioral evidence supporting the psychological caution flag.

Analysis – Cadet 2

This Cadet file reflects the same recurring conflict between HR, the psychologist, and the background investigation. HR relies on a single sub score and selected negative historical facts, while the psychologist and background materials reflect suitability.

HR Memo

The memo utilizes a single sub score to justify disqualification, while identifying several risk traits.

- HR asserts on the MMPI-3 it is “deficient due to the prediction of future performance difficulties” and follows by listing several risk traits.

This highlights negative background items while ignoring strong positive areas.

- AWOL/Article 15
- Sam’s Club Termination
- Deming PD write-up

Psychological Evaluation

The licensed psychologist, who is the authority under NMAC 10.29.9.12, clearly states this candidate passed and is recommended.

- LEA 4: “Applicant is recommended without reservation for certification pending...”
- Cadet 2 “earns an overall average score of 3.2, which is passing and indicates he is a strong candidate for the position.”

Background Investigation

After a careful neutral review of the entire background investigation(s), the following positive evidence was documented:

- “All references... had no reason not to recommend Applicant for a position of public trust.”
- “Applicant appeared honest, respectful, and was forthcoming.”
- “Applicant appears to make a good fit honoring The Dona Ana County Sheriff’s Office Core Values...”
- Deming PD supervisor stated Cadet 2 “does his job, has a good grasp, personable with peers and public...takes initiative...”
- National Guard supervisor stated Cadet 2 was “a good person, does a good job...”
- Background for Doña Ana Detention Center 4/22: “File review conducted by HR. No adverse information was located or found.”
- No IA investigations, no integrity violations, no aggression or anger issues, good standing at Deming PD and positive performance and interpersonal evaluations.

HR’s disqualification recommendation is inconsistent with the psychologist’s recommendation and with the totality of the background investigation, which reflects honesty, professionalism, positive performance, and no disqualifying behavioral pattern.

Analysis – Cadet 3

This Cadet file reflects a pattern in which HR treats a single MMPI-3 sub score as disqualifying even though the background investigation does not support the predicted concerns.

HR Memo

The memo treats the MMPI-3 sub score as disqualifying, citing introversion, avoidance, low positive effect and predicted performance issues.

Psychological Evaluation

The licensed psychologist, who is the authority under NMAC 10.29.9.12, clearly states this candidate passed and is recommended. HR utilized a single sub score to justify disqualification.

Background Investigation

The background investigation reflects no behavioral or performance pattern supporting HR’s interpretation.

- No criminal history

- No driving violations
- No employment terminations
- No IA issues
- No documented reliability or attendance issues
- The psychological interview notes “...he has never been fired or reprimanded...”

The predicted psychological risks do not appear in Cadet 3’s real-world behavior or employment history. The background investigation and interview do not corroborate HR’s interpretation.

Analysis – Cadet 4

This Cadet file demonstrates HR relying on a single sub score and then extrapolating unsupported attendance, judgment, and reliability concerns that are not borne out by the record.

HR Memo

This memo utilizes a single sub score to justify disqualification, while the licensed psychologist clearly states this candidate passed and is recommended.

- HR’s conclusion: “it is the recommendation of HR that this individual not be permitted to continue with employment...”

HR also cites attendance, judgment and reliability risks without supporting evidence in the background investigation or interview.

- HR states, “more likely... to have problems reliably attending court, with conscientiousness and with punctuality and attendance.”

Psychological Evaluation

The psychological materials conflict directly with HR’s conclusion.

- LEA-4 and page 4 (final paragraph) of the Pre-employment Psychological Evaluation Report state:
 - “Applicant IS RECOMMENDED WITHOUT RESERVATION for certification pending the successful completion of a NMLEA approved training academy.”
 - “In summary, Cadet 4 earns a score of 2.8 which is passing.”
- Under NMAC 10.29.1.10 only the licensed psychologist determines psychological suitability, HR is overriding the statutory authority of the licensed psychologist.
- Psychologist report reflects:
 - “mature and professional”

- “casually but appropriately groomed”
- “never been fired or officially reprimanded”

Background Investigation

The background investigation does not support HR’s claims.

- No criminal history in NM or TX
- No employment terminations
- No disciplinary actions
- No negative attendance history
- Only minor traffic violations (speeding, improper placement...)

This is treating the MMPI-3 as if it were documented behavior, which it is not. Neither the background investigation nor the interview support the memo. The psychologist still rated the interview as acceptable (score 3). It appears there is demonstrated unsupported extrapolation.

Analysis – Cadet 5

This Cadet file reflects HR substituting its own psychological judgment for the evaluator’s and treating predictive MMPI-3 statements as disqualifying even though the psychologist identified no essential job function the Cadet could not perform.

HR Memo

This memo utilizes a single sub score to justify disqualification, while the licensed psychologist clearly states this candidate passed and is recommended.

- “It is the recommendation of HR that this individual not be permitted to continue with employment...”

HR treats predictive MMPI-3 statements as disqualifying.

- HR labels the MMPI-s portion: “rated as deficient due to the prediction of future performance difficulties”
- HR highlights:
 - “clinically significant emotional and interpersonal dysfunction...”
 - “more likely... to have trouble tolerating ambiguous... environments...”
 - “more likely... to have problems controlling and deescalating conflict.”

The memo also asserts behavioral and reliability risk that are not supported by the background investigation or psychologist interview.

- HR asserts:
 - “more likely... to brush off criticism.”
 - “more likely... to be rigid and inflexible.”
 - “more likely... to have problems controlling and deescalating conflict.”

Psychological Evaluation

This is in direct conflict with the psychological recommendation.

- LEA-4 and page 4 (final paragraph) of the Pre-employment Psychological Evaluation Report state:
 - “Applicant IS RECOMMENDED WITHOUT RESERVATION for certification pending the successful completion of a NMLEA approved training academy.”
 - “In summary, Cadet 5 earns a score of 2.8 which is passing.”
- Despite the noted tendencies, the psychologist concludes:
 - Cadet 5 earns an overall average score of 2.8, which is passing.
 - “LEA 4 Form was signed... recommended for full participation at the Law Enforcement Academy.”
 - Dr. Cave did not identify any essential job function Cadet 5 is incapable of performing.
- Under NMAC 10.29.1.10 only the licensed psychologist determines psychological suitability, HR is overriding the statutory authority of the licensed psychologist.

Background Investigation

The background and interview do not support the behavioral concerns HR advances.

- Psychologist interview findings:
 - “an adult man who related in a mature and professional manner.”
 - “casually but appropriately groomed.”
 - “never been fired or officially reprimanded.”
- Background Investigation findings:
 - No criminal history

- No employment discipline
- No attendance issues
- Clean driving record
- Strong credit history with no negative accounts

This is treating the MMPI-3 as if it were documented behavior. Neither the background investigation nor the interview support HR's claims. This is substituting psychological judgment for the evaluator's.

Analysis – Cadet 6

This Cadet file reflects treating sub scores as disqualifying, disregarding the psychologist's statutory role, and creating a disclosure issue that the background investigation itself contradicts.

HR Memo

This document utilizes a single sub score to justify disqualification, while the licensed psychologist clearly states this candidate passed and is recommended.

- HR recommends:
 - “this individual not be permitted to continue with employment”

HR's position/interpretation includes the following:

- “deficient due to low reading level”
- “deficient due to overall defensiveness”
- “these results do not rule out the possibility that psychological problems will impede his ability...”

HR further asserts that Cadet 6 “failed to disclose” discipline and uses this to support concerns about underreporting and denial of faults.

- HR states, “Cadet 6 failed to disclose the reprimand for inappropriate behavior...”
- HR uses this to support: “concerns about under reporting and denial of faults...”

Psychological Evaluation

The psychologist explicitly concludes the candidate passed and is recommended.

- “Cadet 6 earns an overall average score of 2.6, which is passing.”
- “LEA 4 Form was signed... as recommended for full participation at the Law Enforcement Academy.”

- LEA 4: “Applicant IS RECOMMENDED WITHOUT RESERVATION for certification...”

Under NMAC 10.29.9.12(A)(1), only the licensed psychologist is authorized to certify psychological suitability. Cadet 6 did not receive a psychological rejection, so the NMAC rejection/appeal process does not apply. HR is substituting its own interpretation of sub scores for the psychologist’s statutory determination. A deficiency is not necessarily unacceptable for the purpose of the psychologist report. As such, it should not be considered a deficiency as noted in DAC Resolution 2024-82, which lacks clear guidance as to what a deficiency is.

Under NMAC 10.29.9.12(B)(6):

- If a candidate is not recommended, the psychologist must identify which essential job functions they cannot perform.
- But Cadet 6 was recommended, so:
 - Sub scores cannot be treated as disqualifying.
 - HR cannot elevate component-level concerns above the psychologist’s final determination.

Background Investigation

The background investigation reflects disclosure, not concealment.

- The background investigator documents:
 - “Applicant advised he received a letter of reprimand... for flipping his middle finger...”
 - “Applicant also received two verbal warnings for being late...”

As a whole overview of this employee, there is an incorrect corroboration loop interpreting the MMPI-3 as showing defensiveness, HR claims the applicant was defensive, but he was forthcoming in both the background and psychological materials.

This is substituting interpretation of sub scores for the psychologist’s statutory determination and then using a contradicted claim of nondisclosure to reinforce that interpretation. The record instead reflects disclosure and a passing psychological recommendation.

Analysis – Cadet 7

This Cadet file presents a conflict between psychological risk indicators cited by HR and the Cadet’s actual academic, employment, and background history.

HR Memo

The justification utilizes a single sub score to justify disqualification, while the licensed psychologist clearly states this candidate passed and is recommended. This is substituting again interpretation of sub scores for the psychologist's statutory determination. A deficiency is not necessarily unacceptable for the purpose of the psychologist report and therefore should not automatically be considered a deficiency under DAC Resolution 2024-82, which lacks clear guidance as to what a deficiency is.

The MMPI 3 identifies clinically significant interpersonal dysfunction tied to overly domineering behavior, predicting problems with cooperation, criticism, and conflict de escalation. Yet the background investigation and personal interview show no history of confrontations, no disciplinary issues, and a pattern of team oriented, cooperative behavior.

After reviewing the HR Memo, Psychological Report and Background we found the following:

- "Clinically significant interpersonal dysfunction related to overly domineering behavior."
- "More likely to be opinionated... demanding... difficulties cooperating with peers or supervisor."
 - Full quote: "More likely to be opinionated and outspoken or demanding and to have difficulties cooperating with peers or supervisor."
- "More likely to exhibit problems controlling and deescalating conflict."
 - Full quote: "Cadet 7's responses suggest he is more likely to exhibit problems controlling and deescalating conflict."

HR also labels a cognitive/communication discrepancy as a deficiency.

- "Word reading score within the 37th percentile (11.6 grade equivalent)."
- "Composite scores... 23rd percentile (7.5 grade equivalent)."
- "These results suggest he may have to buckle down to master academic demands."

Psychological Evaluation

The 16PF (Protective Services Reports, PSR) reflects positive countervailing findings that HR neglects to mention.

- "Extremely high Emotional Adjustment suggesting he is typically relaxed and composed with relatively few feelings of frustrations or impatience.... rarely reacts to challenging situations in a reactive way... appears quite comfortable in situations that involve cooperation and teamwork."

Despite the above concerns, Cadet 7 passed overall with a 2.8 average.

Background Investigation

The background investigation reflects no disqualifying concerns and substantial positive indicators.

- Background: “Applicant appears honest, respectful and forthcoming... seems to be a good fit for DASO.”
- Background: Bachelor of Arts in Criminal Justice (2023) and Associate of Arts (2021).
- Background Report: “Applicant appears honest, respectful and forthcoming... no negative factors disclosed... no criminal record.”
- Background investigation reflects no discipline, no confrontations, no criminal history and positive employment references.

This creates a direct conflict between the psychological risk indicators and real-world behavioral evidence. It may also raise questions about the validity of the interpretation of the MMPI-3, which should be done by a licensed psychologist. The cognitive/communication discrepancy is also in tension with Cadet 7’s successful completion of two college degrees, which require sustained academic reading and comprehension. HR neglects to mention positive attributes in the 16PF, which could shed a different light, and it appears HR neglected to fully consider the background investigation, which reflects no criminal, financial, or employment-related red flags. Despite passing overall with a 2.8 average, the documented psychological deficiencies form the basis for HR’s recommendation against continuing employment.

Analysis – Cadet 8

This Cadet file reflects elevating an old incident and selective negative history into a current integrity-based disqualification, even though the psychologist evaluated the same information and still recommended the Cadet.

HR utilizes a single sub score to justify disqualification, while the licensed psychologist clearly states this candidate passed and is recommended. This is substituting an interpretation of sub scores for the psychologist’s statutory determination. A deficiency is not necessarily unacceptable for the purpose of the psychologist report and therefore should not automatically be considered a deficiency as noted in DAC Resolution 2024-82, which lacks clear guidance as to what a deficiency is.

HR Memo:

- “Psychological evaluation... rated as deficient due to the prediction of future performance difficulties.”

- “Terminated... for stealing food. This information supports the concerns noted in the psychological evaluation...”

HR treats the 2014 incident as a current integrity disqualifier.

Psychological Evaluation

The psychologist explicitly acknowledges the same incident and still recommends the candidate.

- “He was fired for stealing a Lunchables.”
- “He produced a normal limits profile with no extreme scores or elevations.”
- “Overall score... 2.8, passing.”
- LEA 4 Certification and Report:
 - “Applicant IS RECOMMENDED WITHOUT RESERVATION for certification pending the successful completion of a NMLEA approved training academy.”
 - Narrative Report: “Overall average score of 2.8, which is passing.”

Under NMAC 10.29.9.12, only a psychologist can issue a psychological rejection, a rejection must be reported to NMLEA within 30 days, and no rejection was issued. This is substituting judgment in place of the psychologist’s.

Background Investigation

The background investigation shows no criminal pattern and reflects full disclosure.

- Across all jurisdictions:
 - “No Records Found” (Criminal)
- Cadet 8 fully disclosed all information and provided details on the firing:
 - “I was fired back in 2014 I believe it was for coming clean to my boss at Family Dollar for stealing some food.”
 - “When I was 20 I illegally had alcohol in my vehicle, I went to court for it and I believe I had to do probation for it.”
 - “I was arrested twice in Silver City, NM one time was 2017 the other time was 2013 or 2014 I’m not exactly certain.”

These statements, along with the psychological interview and subsequent assessment, give credit to the overall recommendation of the psychological testing.

HR treats an old incident as a present integrity disqualifier even though the psychologist incorporated that same history into the evaluation and still recommended the candidate. The

background check shows no criminal pattern, which contradicts HR's implication of "potential future performance difficulties" or current disqualifying risk.

These instances caused concern and allegations reported to us that the BOCC's Resolution, CMO, Legal, and HR were utilizing these cadets as pawns in a power struggle with DASO. From interviews, it appeared that HR was attempting to mitigate risk of poor hiring and future lawsuits and expressed fear that they would be blamed if problems occurred with a hire when they were responsible for reviewing.

SEE FOLLOWING PAGES

#	PBC		Selection Type	Documentation									Attributes				Notes
	ID	Create Date		Date Received	Notification Sent	Date of DAC Follow Up Action	Define Follow Up Action	Method of Fulfillment	Date Request Completed	Completeness of File	Excessive Redaction	Burdensome Appropriate	1	2	3	4	
1	2021-00360	7/3/2021	Broad	7/3/2021	Auto	extended to 07/30/21	Needed more time for redaction	Docs added to portal	Partial 07/19/21	Police Reports only	No	Yes	A	X	X	X	Does not appear 07/30/21 deadline was met. Requestor withdrew request 08/11/21 for video due to fees charged
2	2021-00365	7/6/2021	Broad	7/6/2021	Auto	extended to 07/28/21	Needed additional time to prepare videos	Docs added to portal / videos avail for pick up	Docs added to portal 07/13 - Videos ready 07/28	Docs in Portal complete - not able to test the CD	No	Yes	X	I	X	X	Referred to Mesilla Valley Dispatch for 911 call recording - Videos (on CD) picked up at office
3	2021-00381	7/13/2021	Broad	7/13/2021	Auto	7/13/2021	No calls in DAC files, referred to City of Las Cruces	Closed - no info found	Closed 07/13/21	N/A	N/A	N/A	X	N/A	X	N/A	Checked for DAC calls, then referred to City of Las Cruces
4	2021-00384	7/14/2021	Broad	7/14/2021	Auto	extended to 8/11/21	Needed additional time to research	Closed - no responsive documents to provide	Closed 08/06/21	N/A	N/A	Yes	A	X	B	X	Sheriff, Purchasing, IT involved, determined not used - Discovered that communications were not sent to Requestor re: extended due date. Identified as 'improvement needed' (training opportunity), as burdensome letter was never sent. DAC did not meet the 07/29/21 add'l time deadline communicated to Requestor. Changes to processes have been made.
5	2021-00388	7/15/2021	Broad	7/15/2021	Auto	7/20/2021	Standard RT	Closed - no records found	Closed 07/16/21	N/A	N/A	N/A	X	N/A	F	N/A	Closed e-mail template indicated that documents were uploaded, however actually no record was found - this was communicated in notes.
6	2021-00394	7/20/2021	Broad	7/20/2021	Auto	7/23/2021	Standard RT	Docs added to portal	7/22/2021	Complete	No	N/A	X	X	X	X	
7	2021-00395	7/21/2021	Broad	7/21/2021	Auto	7/26/2021	Standard RT	Docs added to portal	7/22/2021	Complete	No	N/A	X	X	X	X	
8	2021-00402	7/23/2021	Broad	7/23/2021	Auto	extended to 08/25/21	Deemed overly broad - Needed additional time to prepare videos	Docs, photos added to portal / videos mailed	Docs on portal 08/09-Photos on portal 08/23	Docs in Portal complete - not able to test the CD	No	Yes	X	I	X	X	Not noted when video was mailed - Some items would have come from another Agency
9	2021-00403	7/23/2021	Broad	7/23/2021	N/A	7/26/2021	Standard RT	Closed - duplicate request	Closed 07/26/21	N/A	N/A	N/A	N/A	N/A	X	N/A	
10	2021-00404	7/20/2021	Broad	7/20/2021	Auto	8/4/2021	Needed additional time	Docs added to portal	7/27/2021	Accident Report only - dashcam footage had been purged	No	N/A	X	C	X	N/A	Sheriff Custodian not able to say how long does dashcam footage needs to be retained.
11	2021-00410	7/26/2021	Broad	7/26/2021	Auto	7/29/2021	No records found within timeframe-referred to City of Las Cruces	Closed - Wrong Governmental Entity	7/26/2021	N/A	N/A	N/A	X	N/A	X	N/A	Referred to City of Las Cruces
12	2021-00414	7/27/2021	Broad	7/27/2021	Auto	extended to 08/31/21	Case still open, waiting for records to be released	Notes indicate 'Ready for pick up'	Closed 09/27/21	Not able to test	Not able to test	Yes	A	I	X	X	
13	2021-00416	7/27/2021	Broad	7/27/2021	Auto	7/30/2021	Standard RT	Docs added to portal	7/29/2021	Complete	No	N/A	X	X	X	N/A	

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14	2021-00419	7/28/2021	Broad	7/28/2021	Auto	08/10/21, 09/13/21, 02/04/22	Burdensome, waiting on DHS to finish investigation	Closed - Requestor withdrew	Closed 03/08/22	N/A	N/A	Yes					Taken over by DHS/BP - on 02/07/22 DAC asked to close request and have them resubmit after 180 days, but kept open - 03/07/22 DAC notified that given okay to release - per inquiry DAC gave overview of footage available, and CopTV decided not to pursue further.
15	2021-00420	7/28/2021	Broad	7/28/2021	Auto	8/2/2021	Standard RT	Closed - no records found	8/2/2021	N/A	N/A	N/A	X	N/A	F	N/A	Referred to OMI, provided e-mail
16	2021-00421	7/28/2021	Broad	7/28/2021	Auto	8/2/2021	Standard RT	Closed - no records found	8/2/2021	N/A	N/A	N/A	X	N/A	F	N/A	
17	2021-00423	7/29/2021	Broad	7/29/2021	Auto	8/3/2021	Standard RT	Closed - no records found	8/3/2021	N/A	N/A	N/A	X	N/A	X	N/A	Not able to locate information with limited details given in request - referred to Sunland Park Police, provided e-mail
18	2021-00425	7/30/2021	Broad	7/30/2021	Auto	extended to 09/16/21	Burdensome, waiting on completion of interviews	CDs avail for pickup office	9/27/2021	Not able to test	Not able to test	Yes	A	I	X	X	
19	2021-00426	7/30/2021	Broad	7/30/2021	Forwarded from City of Las Cruces	extended to 08/31/21	Burdensome, need additional time to prepare videos	Docs added to portal / videos avail for pick up	Docs added to portal 07/13 - Videos ready 09/13	Docs in Portal complete - not able to test the CD	No	Yes	A	I	X	X	
20	2021-00428	7/30/2021	Broad	7/30/2021	Auto	8/4/2021	Standard RT	Closed - no records found	8/2/2021	N/A	N/A	N/A	X	N/A	F	N/A	DAC not able to provide info on when files may have been purged
21	2021-00431	7/31/2021	Random	7/31/2021	Auto	extended to 09/16/21	Burdensome, waiting on completion of interviews	CDs avail for pickup office	9/27/2021	Not able to test	Not able to test	Yes	A	I	X	X	
22	2021-00432	7/31/2021	Random	7/31/2021	Auto	extended to 09/16/21	Burdensome, waiting on completion of interviews	CDs avail for pickup office	9/27/2021	Not able to test	Not able to test	Yes	A	I	X	X	
23	2021-00433	7/31/2021	Random	7/31/2021	Auto	extended to 09/16/21	Burdensome, waiting on completion of interviews	CDs avail for pickup office	9/27/2021	Not able to test	Not able to test	Yes	A	I	X	X	
24	2021-00560	9/23/2021	Random	9/23/2021	Auto	10/8/2021	Add'l time requested, 15 days allowed	Closed - No response	10/4/2021	N/A	N/A	N/A	X	N/A	X	N/A	Request included LCPD case number, so referred to LCPD
25	2021-00625	10/19/2021	Random	10/19/2021	Auto	11/3/2021	Standard RT	Docs added to portal	10/20/2021	Complete	No	N/A	X	X	X	N/A	Claim of assault on him by Deputy
26	2021-00715	11/22/2021	Random	11/22/2021	Auto	12/7/2021	Add'l time requested, 15 days allowed	Closed-no addt'l provided	12/2/2021	No docs provided	N/A	N/A					DAC's response was no addt'l docs to provide, fulfilled with ID 2021-0625
27	2021-00716	11/23/2021	Random	11/23/2021	Auto	12/8/2021	Add'l time requested, 15 days allowed	Docs sent via e-mail	12/2/2021	Not able to test	Not able to test	N/A	X	J	X	N/A	
28	2021-00752	12/10/2021	Random	12/10/2021	Auto	12/15/2021	Standard RT	Closed-no record found	12/14/2021	N/A	N/A	N/A	X	N/A	X	N/A	Deputy did not have his lapel camera turned on
29	2021-00434	8/2/2021	Random	8/2/2021	Auto	8/17/2021	Add'l time requested, 15 days allowed	Closed-no record found	8/6/2021	N/A	N/A	N/A	X	N/A	X	N/A	No records found-referred to MV Dispatch for 911 call or State Police for report
30	2021-00455	8/6/2021	Random	8/6/2021	Auto	8/11/2021	Communication re: prepayment required	Closed-Requestor withdrew	8/11/2021	N/A	N/A	N/A	X	N/A	X	N/A	Requestor withdrew request 08/11/21 for video due to fees charged
31	2021-00459	8/9/2021	Random	8/9/2021	Auto	8/12/2021	Standard RT	Docs added to portal	8/12/2021	Complete	No	N/A	X	X	X	X	Also referred to MV Dispatch for CADs

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32	2021-00465	8/11/2021	Random	8/11/2021	Auto	8/26/2021	Add'l time requested, 15 days allowed	Docs added to portal/videos avail for pick up from office	8/26/2021	Docs in Portal complete - not able to test the CD	No	N/A	X	I	X	N/A	Stop initiated by Sheriff
33	2021-00467	8/13/2021	Random	8/13/2021	Auto	8/18/2021	Standard RT	Closed - no record found	8/16/2021	N/A	N/A	N/A	X	N/A	F	N/A	Referred to MV Dispatch for CAD reports
34	2021-00559	9/23/2021	Random	9/23/2021	Auto	9/28/2021	Standard RT	Closed - no records found	9/24/2021	N/A	N/A	N/A	X	N/A	F	N/A	Referred to MV Dispatch for CAD reports
35	2021-00569	9/28/2021	Random	9/28/2021	Auto	10/1/2021	Standard RT	Closed - no records found	9/29/2021	N/A	N/A	N/A	X	N/A	X	N/A	Doc uploaded to portal was a letter stating no documents located
36	2021-00597	10/7/2021	Random	10/7/2021	Auto	extended to 11/5/2021	Burdensome - waiting on final report	Docs added to portal / videos avail for pick up	1/7/2022	Docs in Portal complete - not able to test the CD	No	Yes	A	I	X	X	E-Mail notifications set deadline of 11/05/21; there were items provided over the weeks, and some messages with updates, but no official record of an extended deadline.
37	2021-00601	10/7/2021	Random	10/7/2021	Auto	10/12/2021	Standard RT	Closed - no records found	10/12/2021	N/A	N/A	N/A	X	N/A	F	N/A	
38	2021-00603	10/8/2021	Random	10/8/2021	Auto	10/23/2021	Add'l time requested, 15 days allowed	Closed - Unresponsive	10/22/2021	N/A	N/A	N/A	X	N/A	H	N/A	Request was submitted via mail. Requestor selected phone only communications. The request was too broad, and the Requestor was non-responsive when Custodian attempted to reach them by phone to get clarification.
39	2021-00610	10/12/2021	Random	10/12/2021	Auto	10/15/2021	Standard RT	Closed - no records found	10/13/2021	N/A	N/A	N/A	X	N/A	F	N/A	
40	2021-00777	12/20/2021	Random	12/20/2021	Auto	extended to 01/28/2022	Burdensome - need time to redact videos	Closed - no records found	12/20/2021	N/A	N/A	No	E	N/A	X	E	Notifications and reason closed were misleading
41	2022-00005	1/4/2022	Random	1/4/2022	Auto	extended to 01/28/22	Burdensome - need time to finish last video	Docs added to portal / videos mailed	Docs added to portal 01/13 - videos mailed 01/20	Docs in Portal complete - not able to test the CD	No	Yes	X	I	X	X	
42	2022-00008	1/4/2022	Random	1/4/2022	Auto	1/19/2022	Add'l time requested, 15 days allowed	CDs avail for pickup office	1/13/2022	Not able to test	Not able to test	N/A	X	I	X	N/A	Also referred to Magistrate Court
43	2022-00037	1/13/2022	Random	1/13/2022	Auto	1/18/2022	Standard RT	Closed - no records found	1/14/2022	N/A	N/A	N/A	X	N/A	X	N/A	Referred to LCPD and given their information
44	2022-00080	1/27/2022	Random	1/27/2022	Auto	2/11/2022	Add'l time requested, 15 days allowed	Docs added to portal / videos avail for pick up	Docs added to portal 01/28 - videos ready 02/04	Docs in Portal complete - not able to test the CD	Not able to test	N/A	X	I	X	N/A	
45	2022-00083	1/28/2022	Random	1/28/2022	Auto	2/12/2022	Add'l time requested, 15 days allowed	Photos added to portal	2/2/2022	Complete	No	N/A	X	X	X	N/A	
46	2022-00154	2/22/2022	Random	2/22/2022	Auto	3/9/2022	Add'l time requested, 15 days allowed	Reports/Videos uploaded to portal	3/18/2022	Complete	No	N/A	X	X	X	N/A	Additional time needed past 15 days communicated through chat only
47	2022-00155	2/22/2022	Random	2/22/2022	Auto	3/9/2022	Add'l time requested, 15 days allowed	Video link added to portal	3/4/2022	Not able to test	Not able to test	N/A	X	J	X	N/A	
48	2022-00185	3/3/2022	Random	3/3/2022	Auto	3/18/2022	Add'l time requested, 15 days allowed	Docs added to portal	3/14/2022	Complete	No	N/A	X	X	X	N/A	

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	ID	Create Date		Date Received	Notification Sent	Date of DAC Follow Up Action	Define Follow Up Action	Method of Fulfillment	Date Request Completed	Completeness of File	Excessive Redaction	Burdensome Appropriate	1	2	3	4	
49	2022-00396	5/10/2022	Random	5/10/2022	Auto	5/13/2022	Standard RT	Closed - no records found	5/11/2022	N/A	N/A	N/A	X	N/A	X	N/A	
50	2022-00504	6/23/2022	Random	6/23/2022	Auto	7/8/2022	Add'l time requested, 15 days allowed	Video link added to portal	7/6/2022	Complete	No	N/A	X	X	X	N/A	
51	2022-00507	6/26/2022	Random	6/26/2022	Auto	7/11/2022	Add'l time requested, 15 days allowed	Closed - copy not needed	7/5/2022	N/A	N/A	N/A	X	N/A	X	N/A	This was a second request. The original CD was received, so no copy needed.
52	2022-00526	7/5/2022	Random	7/5/2022	Auto	11/11/2022	Burdensome - need time for preparation/redaction	Video links added to portal	10/10/2022	Complete	No	Yes	A	X	X	X	Initial extension to 08/31 not updated/extended again until 09/29
53	2022-00534	7/8/2022	Random	7/8/2022	Auto	7/11/2022	Standard RT	Closed - Wrong Governmental Entity	7/11/2022	N/A	N/A	N/A	X	N/A	X	N/A	Referred to MV Regional Dispatch
54	2022-00835	10/4/2022	Random	10/4/2022	Auto	10/19/2022	Add'l time requested, 15 days allowed	Docs added to portal	10/11/2022	Complete	No	N/A	X	X	X	N/A	
55	2023-00024	1/10/2023	Random	1/10/2023	Auto	1/13/2023	Standard RT	Docs added to portal	1/11/2023	Complete	No	N/A	X	X	X	N/A	Fwd from LC Clerk's office
56	2023-00063	1/20/2023	Random	1/20/2023	Auto	1/25/2023	Standard RT	Docs added to portal	1/20/2023	Complete	No	N/A	X	X	X	N/A	
57	2023-00197	2/22/2023	Random	2/22/2023	Auto	2/27/2023	Standard RT	Closed - no records found	2/24/2023	N/A	N/A	N/A	X	N/A	F	N/A	
58	2023-00301	3/16/2023	Random	3/16/2023	Auto	3/31/2023	Add'l time requested, 15 days allowed	Closed - no records found	3/28/2023	N/A	N/A	N/A	X	N/A	F	N/A	
59	2023-00316	3/21/2023	Random	3/21/2023	Auto	4/5/2023	Add'l time requested, 15 days allowed	Docs added to portal	3/31/2023	Complete	No	N/A	X	X	X	N/A	
60	2023-00325	3/23/2023	Random	3/23/2023	Auto	4/7/2023	Add'l time requested, 15 days allowed	Docs added to portal	4/3/2023	Complete	No	N/A	X	X	X	N/A	
61	2023-00399	4/17/2023	Random	4/17/2023	Auto	6/2/2023	Burdensome - need time for preparation/redaction	Reports/Videos uploaded to portal	5/12/2023	Complete	No	Yes	X	X	X	X	
62	2023-00596	6/13/2023	Random	6/13/2023	Auto	6/16/2023	Standard RT	Closed - no records found	6/14/2023	N/A	N/A	N/A	X	N/A	X	N/A	
63	2023-00604	6/16/2023	Random	6/16/2023	Auto	7/3/2023	Add'l time requested, 15 days allowed	Docs added to portal	6/26/2023	Complete	No	N/A	X	X	X	N/A	Gov to Gov exchange of information/records - Law Enforcement
64	2023-00822	8/8/2023	Random	8/8/2023	Auto	10/13/2023	Burdensome - need time for preparation/redaction	Closed-Requestor withdrew	8/23/2023	N/A	N/A	Yes	N/A	N/A	X	X	Requestor withdrew when asked to prepay for CDs
65	2023-00873	8/17/2023	Random	8/17/2023	Auto	9/1/2023	Add'l time requested, 15 days allowed	Closed - no records found	8/24/2023	N/A	N/A	N/A	X	N/A	F	N/A	
66	2023-00880	8/21/2023	Random	8/21/2023	Auto	8/24/2023	Standard RT	Closed - no record found	8/24/2023	N/A	N/A	N/A	X	N/A	X	N/A	Referred to LCPD, provided contact info
67	2024-01117	9/5/2024	Random	9/5/2024	Auto	9/10/2024	Standard RT	Axon link sent to Requestor's e-mail	9/9/2024	Not able to test	Not able to test	N/A	X	J	X	N/A	
68	2024-01323	10/11/2024	Random	10/11/2024	Auto	10/26/2024	Add'l time requested, 15 days allowed	Docs added to portal	10/17/2024	Complete	No	N/A	X	X	X	N/A	
69	2024-01514	11/13/2024	Random	11/13/2024	Auto	11/18/2024	Standard RT	Referred to DAC website	11/13/2024	N/A	No	N/A	X	X	X	N/A	Referred to DAC website for policies/procedures
70	2025-00044	1/9/2025	Random	1/9/2025	Auto	7/31/2025	Burdensome - need time for preparation/redaction	Docs added to portal / links to videos sent via e-mail	4/21/2025	Docs in Portal complete - not able to test the CD	No	Not able to test fully	X	J	X	X	
71	2025-00091	1/16/2025	Random	1/16/2025	Auto	1/21/2025	Standard RT	Docs added to portal	1/17/2025	Complete	No	N/A	X	X	X	N/A	County did apologize, Requestor was not given info to file a complaint

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72	2025-00239	2/11/2025	Random	2/11/2025	Auto	6/3/2025	Burdensome-extended several times-need time to review/redact	CDs mailed	6/3/2025	Not able to test	Not able to test	Not able to test fully	X	I	X	I	
73	2025-00242	2/11/2025	Random	2/11/2025	Auto	2/26/2025	Add'l time requested, 15 days allowed	Link to video sent via e-mail	2/19/2025	Not able to test	Not able to test	N/A	X	J	X	N/A	
74	2025-00332	2/27/2025	Random	2/27/2025	Auto	5/30/2025	Burdensome - need time for preparation/redaction	Video unavailable	Closed 05/20/25	N/A	N/A	Not able to test					Requestor did not respond to question if request should be kept open or closed (resubmitted later), so request was closed
75	2025-00408	3/11/2025	Random	3/11/2025	Auto	3/14/2025	Standard RT	Deemed duplicate of prev request 2025-00370	Closed 03/11/25	N/A	N/A	N/A	N/A	N/A	X	N/A	Referred to link provided with previous request
76	2025-00502	3/21/2025	Random	3/21/2025	Auto	3/26/2025	Standard RT	Closed - Docs protected	3/25/2025	N/A	N/A	N/A	X	N/A	X	N/A	DAC claimed protected under IPRA 14-2-1 C, not able to provide
77	2025-00466	3/18/2025	Random	3/18/2025	Auto	06/04/25	Add'l time requested, 15 days allowed	Docs/video links in portal	5/2/2025	Complete (some could not be accessed)	No	N/A					The burdensome or extension e-mails were never sent. There were communications on 04/07 advising more time needed, 15 days had already passed.
78	2025-00481	3/20/2025	Random	3/20/2025	Auto	3/25/2025	Standard RT	Docs added to portal	3/24/2025	Complete	No	N/A	X	X	X	N/A	
79	2025-00482	3/20/2025	Random	3/20/2025	Auto	4/4/2025	Add'l time requested, 15 days allowed	Docs added to portal	4/1/2025	Complete	No	N/A	X	X	X	N/A	
80	2025-00593	4/1/2025	Random	4/1/2025	Auto	4/4/2025	Standard RT	Docs added to portal	4/4/2025	Complete	No	N/A	X	X	X	N/A	Some documents not provided, cited IPRA 14-2-1 B.3
81	2025-00600	4/2/2025	Random	4/2/2025	Auto	4/17/2025	Add'l time requested, 15 days allowed	Docs added to portal	4/8/2025	Complete	No	N/A	X	X	X	N/A	
82	2021-00584	10/4/2021	Sheriff	10/4/2021	Auto	10/7/2021	Standard RT	Per April link sent directly from Axon	10/4/2021	Not able to test	Not able to test	N/A	X	J	X	N/A	
83	2021-00669	11/1/2021	Sheriff	11/1/2021	Auto	11/24/2021	Burdensome - Dept still gathering info	Docs added to portal	11/18/2021	Complete	No	Yes	X	X	X	X	
84	2021-00683	11/5/2021	Sheriff	11/5/2021	Auto	12/1/2021	Burdensome - Needs time to review e-mails	Docs added to portal	12/1/2021	Complete	No	Yes	X	X	X	X	
85	2021-00790	12/27/2021	Sheriff	12/27/2021	Auto	1/11/2022	Add'l time requested, 15 days allowed	Videos links added to portal	1/11/2022	Complete	No	N/A	X	X	X	N/A	
86	2022-00117	2/8/2022	Sheriff	2/8/2022	Auto	2/23/2022	Add'l time requested, 15 days allowed	CDs avail for pickup office	2/23/2022	Not able to test	Not able to test	N/A	X	I	X	N/A	Case 21-3853 - Sheriff initiated pursuit
87	2022-00208	3/9/2022	Sheriff	3/9/2022	Auto	3/14/2022	Standard RT	Docs added to portal	3/11/2022	Complete	No	N/A	X	X	X	N/A	
88	2022-00222	3/14/2022	Sheriff	3/14/2022	Auto	4/22/2022	Burdensome - need add't time to review videos	Docs in portal / CDs mailed	4/20/2022	Docs in Portal complete - not able to test the CD	Not able to test fully	Yes	X	I	X	X	
89	2022-00474	6/13/2022	Sheriff	6/13/2022	Auto	7/8/2022	Burdensome - need add't time to gather records	Docs/video links in portal	7/7/2022	Docs in Portal complete - not able to test the CD	Not able to test fully	Yes	X	J	X	X	Request for lapel video for Sheriff and Lt from 06/09/22
90	2022-00669	8/19/2002	Sheriff	8/19/2022	Auto	8/24/2022	Standard RT	Closed - no records found	8/22/2022	N/A	N/A	N/A	X	N/A	F	N/A	
91	2022-00705	8/28/2022	Sheriff	8/28/2022	Auto	10/7/2022	Burdensome (extended 2x) - waiting on response	Docs added to portal	10/7/2022	Complete	No	Yes	X	X	X	X	E-mails between Sheriff and Capt
92	2022-00795	9/22/2022	Sheriff	9/22/2022	Auto	9/27/2022	Standard RT	Closed - no records found	9/23/2022	N/A	N/A	N/A	X	N/A	F	N/A	

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93	2022-00796	9/22/2022	Sheriff	9/22/2022	Auto	9/27/2022	Standard RT	Closed - no records found	9/26/2022	N/A	N/A	N/A	X	N/A	X	N/A	Concise Officer Histories' not provided
94	2022-00811	9/28/2022	Sheriff	9/28/2022	Auto	10/3/2022	Standard RT	Docs added to portal	9/28/2022	Complete	No	N/A	X	X	X	N/A	
95	2022-00892	10/31/2022	Sheriff	10/31/2022	Auto	11/15/2022	Addt'l time requested, 15 days allowed	Doc/audio file in portal	11/14/2022	Complete	No	N/A					IA investigation files and HR separation records (re: former Undersheriff)
96	2023-00096	1/26/2023	Sheriff	1/26/2023	Auto	2/10/2023	Addt'l time requested, 15 days allowed	Closed - no records found	2/9/2023	N/A	N/A	N/A	X	N/A	X	N/A	RE: AD cases
97	2023-00287	3/10/2023	Sheriff	3/10/2023	Auto	4/7/2023	Burdensome - need to review for redaction	Docs added to portal	3/31/2023	Complete	No	Yes	X	X	X	X	
98	2023-00426	4/26/2023	Sheriff	4/26/2023	Auto	5/11/2023	Addt'l time requested, 15 days allowed	Doc added to portal	5/9/2023	Complete	No	N/A	X	X	X	N/A	
99	2023-00910	8/30/2023	Sheriff	8/30/2023	Auto	9/14/2023	Addt'l time requested, 15 days allowed	file link posted in portal	9/12/2023	Not able to test	Not able to test	N/A	X	J	X	N/A	[Added to IPRA 2023-00544]
100	2023-01085	10/17/2023	Sheriff	10/17/2023	Auto	11/1/2023	Addt'l time requested, 15 days allowed	Closed - Requestor will re-submit new search later	10/19/2023	N/A	N/A	N/A	X	N/A	X	N/A	
101	2023-01283	12/12/2023	Sheriff	12/12/2023	Auto	2/9/2024	Burdensome (extended 2x) - need time to redact	Docs/video links in portal	1/29/2024	Complete	No	Yes	X	X	X	X	Claim that Sgt (assisted) was fired for his handling of this case, but later re-instated by County Manager
102	2024-00047	1/12/2024	Sheriff	1/12/2024	Auto	2/29/2024	Burdensome - deemed overly broad	Closed-no additional documents to	2/28/2024	N/A	N/A	Yes	X	N/A	X	N/A	Per chain-of-command all records have already been provided
103	2024-00431	4/8/2024	Sheriff	4/8/2024	Auto	7/26/2024	First extened due to DASO Custodian in training till 04/15, then Burdensome 'need time to redact'	Video links added to portal	7/26/2024	Complete	No	Yes	X	X	X	X	HR determined 'No responsive documents' to request for info from personnel files re: disciplinary actions
104	2024-00583	5/7/2024	Sheriff	5/7/2024	Auto	5/22/2024	Addt'l time requested, 15 days allowed	Closed-Requestor will re-submit new search later	5/9/2024	N/A	N/A	N/A	X	N/A	X	N/A	No chat records on the communication tab. So no record of Requestor response; had sent the incorrect link, resent now
105	2024-00629	5/19/2024	Sheriff	5/19/2024	Auto	6/28/2024	Burdensome - need time to redact docs	Docs added to portal	6/3/2024	Complete	No	Yes	X	X	X	X	
106	2024-01247	9/26/2024	Sheriff	9/26/2024	Auto	10/1/2024	Standard RT	Closed - no records found	9/30/2024	N/A	N/A	N/A		N/A	X	N/A	No video records from multiple responding Officers [crash w/ Officer]
107	2024-01472	11/5/2024	Sheriff	11/5/2024	Auto	3/7/2025	Burdensome (extend 2x)-need time review/redact	Docs added to portal	2/25/2025	Complete	No	Yes	X	X	X	X	Request all e-mails/texts between Sheriff and Undersheriff since 12/01/23
108	2024-01473	11/5/2024	Sheriff	11/5/2024	Auto	1/3/2025	Burdensome (extend-2x)-need time review/redact	Zip file added to portal	1/3/2025	Complete	No	Yes	X	X	X	X	Request all e-mails between Sheriff/Under/Other after 05/01/24 re: Captain
109	2024-01474	11/5/2024	Sheriff	11/5/2024	Auto	1/10/2025	Burdensome (extend 4x)-need time review/redact	Docs added to portal	1/10/2025	Complete	No	Yes	X	X	X	X	All e-mails between Sheriff/Manager/HR Director ACM after 01/01/21 RE: Lieutenant/Capt promotions

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110	2024-01512	11/13/2024	Sheriff	11/13/2024	Auto	11/18/2024	Standard RT	Docs added to portal	11/13/2024	Partial ?	No	N/A					Only one report attached-record of weapon test 12/28/22 score-request was for firearm qualification forms 2019-24. A stated M is the one that provided the scorecard, and Requestor did not submit a follow up request
111	2024-01747	12/31/2024	Sheriff	12/31/2024	Auto	1/24/2025	Burdensome - still searching for records	Doc added to portal	1/23/2025	Complete	No	Yes	X	X	X	N/A	
112	2025-00133	1/23/2025	Sheriff	1/23/2025	Auto	2/21/2025	Burdensome - need time to review/redact	Docs added to portal	2/14/2025	Complete	No	Yes	X	X	X	X	
113	2025-00485	3/20/2025	Legal	3/20/2025	Auto	5/2/2025	Burdensome - high volume, need review/redact	Docs added to portal	4/8/2025	Complete	No	Yes	X	X	X	X	E-Mails from Sheriff with certain key words
114	2025-00487	3/20/2025	Legal	3/10/2025	Auto	4/4/2025	Add'l time requested, 15 days allowed	Docs added to portal	3/26/2025	Complete	No	N/A	X	X	X	N/A	E-Mails from Sheriff re: employee
115	2025-00302	2/23/2025	Legal	2/23/2025	Auto	4/22/2025	Burdensome (x4) - need more time to review	Docs added to portal	4/22/2025	Complete	No	Yes	X	X	X	X	E-Mails from Sheriff with certain key words
116	2025-00279	2/18/2025	Legal	2/18/2025	Auto	2/21/2025	Standard RT	Closed - not able to fulfill	2/21/2025	N/A	N/A	N/A	X	N/A	X	N/A	Cited Section 14-2-1 Attorney-Client Privilege
117	2025-00488	3/20/2025	Finance	3/20/2025	Auto	4/4/2025	Add'l time requested, 15 days allowed	Docs added to portal	3/27/2025	Complete	No	N/A	X	X	X	N/A	
118	2024-01544	11/19/2024	Finance	11/19/2024	Auto	6/30/2025	Burdensome (x6)-docs stored off-site, review/redact	Docs added to portal	5/30/2025	Complete	No	Yes	X	X	X	X	RE: Sheriff travel/expenses outside NM
119	2024-01588	11/26/2024	Finance	11/26/2024	Auto	3/31/2025	Burdensome (x5)-docs stored off-site, review/redact	Docs added to portal	3/20/2025	Complete	No	Yes	X	X	X	X	RE: DASO Wellness contracts/costs/payments
120	2021-00726	11/30/2021	HR and IT	11/30/2021	Auto	12/3/2021	Standard RT	Docs added to portal	12/2/2021	Complete	No	N/A	X	X	X	N/A	E-Mails between Sheriff and other re: Lieutenant promotions
121	2022-01022	12/29/2022	HR and IT	12/29/2022	Auto	1/3/2023	Standard RT	Doc in portal/chat notes	1/3/2023	Complete	No	N/A	X	X	X	N/A	
122	2023-00840	8/11/2023	HR and IT	8/11/2023	Auto	8/28/2023	Add'l time requested, 15 days allowed	Answers in chat notes	8/24/2023	Complete	No	N/A	X	X	X	N/A	Questions about hiring process
123	2023-00896	8/24/2023	HR and IT	8/24/2023	Auto	8/29/2023	Standard RT	Doc in portal/chat notes	8/24/2023	Complete	No	N/A	X	X	X	N/A	Follow up re: previous inquiry on position, provided more detail
124	2024-01468	11/5/2024	HR and IT	11/5/2024	Auto	11/20/2024	Add'l time requested, 15 days allowed	Docs added to portal	11/20/2024	Partial	No	N/A	X	X	X	N/A	Item #2 of the request was denied under NMSA 14-2-1.C - What was provided was the gold form sent to Legal to review Disciplinary Packet dated 10/08/24, not the 'Notice of Intent to Demote' dated
125	2024-01469	11/5/2024	HR and IT	11/5/2024	Auto	12/6/2024	Burdensome - need more time to review	Docs added to portal	12/5/2024	Complete	No	N/A	X	X	X	X	
126	2024-01471	11/5/2024	HR and IT	11/5/2024	Auto	1/17/2025	Burdensome (x3)-need more time to research/review	Closed - no records found	1/17/2025	N/A	N/A	Yes	X	K	X	X	No records were found in review of 2700 communications between multiple people because of the word "and".
127	2024-01518	11/13/2024	HR and IT	11/13/2024	Auto	12/2/2024	Add'l time requested, 15 days allowed	Docs added to portal	12/2/2024	Complete	No	N/A	X	X	X	N/A	11/28/24 deadline moved to 12/02/24 due to holiday. Some of the request was denied under NMSA 14-2-1 B.3

#	PBC		Selection Type	Documentation									Attributes				Notes
	ID	Create Date		Date Received	Notification Sent	Date of DAC Follow Up Action	Define Follow Up Action	Method of Fulfillment	Date Request Completed	Completeness of File	Excessive Redaction	Burdensome Appropriate	1	2	3	4	
128	2024-01589	11/26/2024	HR and IT	11/26/2024	Auto	12/13/2024	Burdensome - need time to search for records	Closed - not able to fulfill	12/13/2024	N/A	N/A	Yes	X	N/A	X	X	Denied under NMSA 14-2-1 C
129	2025-00444	3/14/2025	HR and IT	3/14/2025	Auto	3/19/2025	Standard RT	Docs added to portal	3/17/2025	Complete	No	N/A	X	X	X	N/A	
130	2023-00616	6/20/2023	PIO-County Mgt	6/20/2023	Auto	7/5/2023	Add'l time requested, 15 days allowed	Docs added to portal	6/23/2023	Complete	No	N/A	X	X	X	N/A	Internal Audit Reports

Tested - 130, with a strong lean toward DASO requests due to scope of work.

Of 130 tested, 16 were physically transferred to the requestor via disc or paper copy via in-person pickup or mailing. No electronic or physical copy of these fulfilled requests was available and as such, completeness of these files could not be verified. Attempts to validate the transfer of the files from DAC to the requestor were made, however, no receipts were available for any requests occurring prior to the current Claims & Public Record Coordinator stepping into her current role in December 2022, and as such, these 16 files remain untested for fulfillment or completeness as JAG cannot validate that the request was fulfilled and thereby, cannot validate whether a file transferred to the requestor was complete.

DAC relies on the Requestor notifying them via RecordBook (reopen a case or submit a new request), sending them an e-mail or filing a DOJ complaint if the request was not fulfilled completely.

For 7 of the 16 requests, the only confirmation of fulfillment was a note in RecordBook. These files were fulfilled through a second system - Axon, which is used exclusively by law enforcement (DASO). A secure link is sent to the requestor and that link expires after 10 days. The Claims & Public Record Coordinator did not facilitate access to this information through coordination with DASO despite multiple requests for documentation. This further exemplifies the barriers in communication and willingness to collaborate between DAC County Administration Office (CMO) and associated departments such as LEG and DASO.

Given complaints against DAC over failures in IPRA fulfillment, a more proactive response to mitigate ongoing issues and avoid future complaints would benefit this process.

See **EXHIBIT 1 Finding**: Recommendations such as:

- Improve documentation of IPRA timelines and fulfillment participants across all departments involved
- Maintain copies of IPRA fulfillments for future reference and establish internal review and internal audit procedures to ensure regular evaluation of IPRA fulfillments
- Establish cross-departmental accountability in use of systems for fulfillment of IPRA requests

Attributes:

- Request fulfilled timely
- Request fulfilled completely
- Communications/Notification provided
- Determination of burdensome was appropriate

Tickmarks:

- X
N/A
- | | | |
|---|----|---|
| A | 10 | DAC did not meet the deadline they set |
| B | 2 | Notification of burdensome determination not sent |
| C | 1 | Dashcam footage no longer available |
| D | 1 | Delayed due to open DHS Investigatgion |
| E | 1 | DAC claimed 'burdensome' when in fact there were no records to be redacted |
| F | 13 | The reason code on the Request Closed e-mail was listed as 'All Response Documents Added' but should have been 'No responsive documents to produce' |
| G | 0 | Confirmed receipt showing item picked up |
| H | 1 | Requestor selected phone only communications |
| I | 16 | Not able to test for completeness as the item was mailed/picked up at office |
| J | 8 | Not able to test for completeness as the link to requested docs/videos was sent directly by Axon and/or had expired |
| K | 2 | Questions concerning no records found |

Complaint Channels

Compliance Officer: This employee position was to address code of conduct violations, independently from Legal, which is a department under the County Manager's administration. This position and avenue for complaints was dissolved in 2024 and no longer exists.

Internal Audit: The County's Internal Audit function has one employee that reports to the County Manager. The Internal Auditor receives tasks from the County Manager or Assistant County Managers. Any guidance from the Board of County Commissioners goes through the County Manager. There is also an Internal Audit Advisory Board that works with the Internal Auditor. Internal audits are performed throughout the year using a risk-based approach and on special projects assigned.

Supervisors and Department or Office Heads: As the first reporting line, many employees report complaints to their supervisors and area leaders. Due to a County lawsuit that was settled in 2008 and required corrective action for five years, the current policy requires supervisors to submit an EEOC complaint within 24 hours on behalf of employees that come to them with a complaint.

EthicsPoint Hotline: Complaints through this avenue are gathered anonymously through a third party vendor. The hotline provides a way anyone (employees or public) can file a complaint of any nature, including fraud, waste, and abuse of taxpayer public funds and non-compliance. These can be anonymous, or they can include the name and contact information of the reporting party. They can be filed online, by phone with EthicsPoint, or by contacting the CM Office who can assist in filing. These were assigned to Legal until the Fall of 2025. They are now reviewed and assigned out for investigation by the Internal Auditor.

Union Grievances: For members of the various Collective Bargaining Units, grievances can be filed within their work unit. There are 3 stages of grievance. Generally, Step 1 is handled by the immediate supervisor, Step 2 by the Department Head, and Step 3 by the County Manager. Steps 2 and 3 only occur if the covered employee is not satisfied and wishes to appeal.

EEO Complaints: These are filed with HR but then sent to Legal for investigation if the HR Director determines that they include prima facie evidence of discrimination based on a protected status. These include violence (policy includes intimidation) in the workplace. Often, these are investigated by an external firm under contract with the County as assigned by the Legal department.

Other Complaints: These are filed either to a supervisor, or more commonly to HR. Depending on the nature of the complaint, they will usually be assigned to the department head or ACM over the affected department for investigation and action.

Supervisory: There are sometimes cases when a supervisor needs assistance investigating possible misconduct. For DASO and Detention, these are often handled by the Professional Standards Unit (PSU). For the rest, the request for assistance might go to HR or to Legal (most common).

Appeals of Discipline: Per our discussion, an employee facing possible disciplinary action can request a pre-disciplinary hearing (i.e., a Loudermill hearing). These are conducted using an outside hearing officer, and each side is able to present evidence and call witnesses. If the hearing officer agrees with the proposed discipline, it is carried out, and the employee can then request a post-discipline Panel Review which is comprised of three department heads from other departments in the County. This review is based on a written appeal by the employee, and a written response by the supervisor. If the employee does not like the findings from the Panel Review, they can then request an Arbitration Hearing in front of an external hearing officer where evidence and witnesses can once again be presented. If the employee does not like the results of the Arbitration Hearing, they can then challenge the action through the court system.

The hearing and appeals processes and timelines are cumbersome and contribute to the untimeliness of complaint resolution. This frustrates employees and contributes to turnover, lower morale, and perceptions of unfairness. We have made recommendations in the Findings – **EXHIBIT 1** to the County regarding re-evaluating these processes above, including for independence purposes adding an Inspector General function and having the Internal Auditor report directly to the Board of County Commissioners. Logistical improvements to tracking complaints must be made as well to ensure timely resolution and accountability for ethical and performance issues must be implemented.

SEE FOLLOWING PAGES

EEO Complaint Stats by Department / Office and Type

Number and Percentage of Complaints per Average Employee by Department (in Rank Order)

Department / Office	Avg. 2024	EEOs / % Avg	
	Employees	# EEOs	Employees
HR	15	5	33%
Commission	5	1	20%
Finance	28	9	32%
County Assessor	39	12	31%
County Manager	8	2	25%
County Clerk	36	8	22%
Health & Human Services	55	11	20%
Public Information Office	6	1	17%
Detention Center	179	28	16%
Animal Control	14	2	14%
Engineering/Roads	47	6	13%
County Sheriff	211	26	12%
Facilities & Parks	34	3	9%
Fleet	12	1	8%
Information Technology	24	2	8%
Utilities	14	1	7%
Community Development	32	2	6%
Fire Marshal	92	5	5%
County Treasurer	13	0	0%
Flood	10	0	0%
Legal	7	0	0%
Emergency Management	6	0	0%
Probate	2	0	0%
Purchasing	6	0	0%
Risk	2	0	0%
Airport	3	0	0%
Vector	4	0	0%
Total	904	125	

Number of Complaints by Topic (in Alphabetical Order)

EEO Topic	# of Cases
Abuse Power/Position	4
Code of Conduct	2
Discrimination	33
Favortism	5
Hostile Work Environment	1
Policy	4
Related to Sex	45
Retaliation	7
Theft	3
Unfair Hiring Practices	3
Violence/Discourtesy	18
Grand Total	125

Number of Complaints by Topic (in Rank Order)

EEO General Topic	EEO # of Cases
Related to Sex	45
Discrimination	33
Violence/Discourtesy	18
Retaliation	7
Favortism	5
Abuse Power/Position	4
Policy	4
Theft	3
Unfair Hiring Practices	3
Code of Conduct	2
Hostile Work Environment	1
Grand Total	125

Complaints by Department and Topic (in Order by Department)

Department	Abuse Power / Position	Code of Conduct	Discrimination	Favortism	Hostile Work Environment	Policy	Related to Sex	Retaliation	Theft	Unfair Hiring Practices	Violence / Discourtesy	Grand Total
Animal Control			2									2
Assessor			2			1	4	3			2	12
Commission						1						1
Clerk			4				1	1			2	8
Community and Constituent Services			1	1								2
County Manager									1			1
Detention	1		3	1			17				6	28
Engineering			2				1		1			4
Engineering and F&P							1					1
Facilities & Parks							2				1	3
Finance/ERAP			1	1			4				3	9
Fire & Emergency Services	1			1			2			1		5
Fleet/Assessor							1					1
Health & Human Services			5				5	1				11
Human Resources						1	1	1		2		5
Information Technology							1	1				2
Public Information Office									1			1
Roads											1	1
Sheriff	2	2	13	1		1	4				3	26
Utilities							1					1
County Commissioners, HR, County Manager						1						1
Grand Total	4	2	33	5	1	4	45	7	3	3	18	125

Complaints by Department and Topic (in Rank Order by Number of Complaints)

Department	Abuse Power / Position	Code of Conduct	Discrimination	Favortism	Hostile Work Environment	Policy	Related to Sex	Retaliation	Theft	Hiring Practices	Violence / Discourtesy	Grand Total
Detention	1		3	1			17				6	28
Sheriff	2	2	13	1	1		4				3	26
Assessor			2			1	4	3			2	12
HHS			5				5	1				11
Finance/ERAP			1	1			4				3	9
Clerk			4				1	1			2	8
Fire & Emergency Services	1			1			2			1		5
Human Resources						1	1	1		2		5
Engineering			2				1		1			4
Facilities & Parks							2				1	3
Animal Control			2									2
Community and Constituent Services			1	1								2
Information Technology							1	1				2
Commission						1						1
County Manager									1			1
Engineering and F&P							1					1
Fleet/Assessor							1					1
Public Information Office									1			1
Roads											1	1
Utilities							1					1
County Commissioners, HR, County Manager						1						1
Grand Total	4	2	33	5	1	4	45	7	3	3	18	125

Complaint Settlements: County Costs & Insurance

We requested from the County all complaint settlements either through the County alone or through the NM Association of Counties (NMAC) insurance with County and NMAC portions. We received two files. The following is information (unaudited) provided by the County and NMAC. The first table shows FY25 invoices unrelated to NMAC that were paid using code SC-154, litigation settlements. FY26 doesn't have any expenses incurred, and prior to FY25, the only invoices observed are from NMAC. The second table shows data from NMAC on claim payments from July 1, 2021 through mid April 2026 with bold > 10%.

Payee	Date of Payment	Amount	Description	Department	DAC Portion	NMAC
Vehicle Tracking Solutions, LLC dba Intellishift	9/20/2024	\$ 50,000.00	Early contract termination	Risk Management	\$ 50,000.00	N/A
Vehicle Tracking Solutions, LLC dba Intellishift	2/12/2025	\$ 4,440.00	For hardware related to early contract termination	Fleet	\$ 4,440.00	N/A
			Repair chain link at 845 N. Motel. Damage caused by 3rd party. Recover \$2,295.54 from Farmer's			
CES Cooperative Educational Services	1/17/2025	\$ 2,295.54	Insurance	Risk Management	\$ 2,295.54	N/A
			Mediation services for Steven Breen v. DAC Property			
Roger Davie P.C.	3/21/2025	\$ 500.00	Assessor's Office	Legal	\$ 500.00	N/A
Total Provided by the County for Settlements Outside NMAC		\$ 57,235.54			\$ 57,235.54	

Claim Type	Sum of Amount	Percentage
APD 1st Party Physical Damage	\$ 523,874	7%
AU 3rd Party BI - PD	867,275	11%
AU 3rd Party Bodily Injury	-	0%
AU 3rd Party Property Damage	3,009	0%
E&O Errors and Omissions	(7,747)	0%
EPL Constitutional Deprivation	127,555	2%
EPL Employment Related	832,781	11%
EPL Sexual Harassment	27,791	0%
EPL Title VII	200,832	3%
EPL Whistleblower Protection Act	116,277	1%
GL Bodily Injury Only	356,117	5%
GL Both BI and PD	144,736	2%
GL Crime	(9,587)	0%
GL General Liability	108,520	1%
GL IPRA	23,966	0%
GL Property Damage Only	(3,698)	0%
IR Injunctive Relief	12,044	0%
LE Breach of Duty	64,214	1%
LE Due Process	41,732	1%
LE Failure to Protect	846,363	11%
LE False Arrest	550,798	7%
LE False Imprisonment	-	0%
LE Inadequate Medical Treatment	222,649	3%
LE Inadequate Mental Health Treatment	-	0%
LE Sexual Misconduct	384,455	5%
LE Use of Force	723,349	9%
LE Vehicle Pursuit	-	0%
LU Zoning	20,625	0%
PR All Risk Building	(1,571)	0%
PR All Risk Other	319,030	4%
WC Became Lost Time	257,261	3%
WC Became Medical Only	400	0%
WC Lost Time	105,927	1%
WC LT-PPD	688,983	9%
WC Medical Only	261,413	3%
Grand Total	\$ 7,809,371	100%

SEE FOLLOWING PAGES

County Wide Anonymous Employee Survey

February – March 2026

The anonymous survey was conducted independently by JAG. The following charts summarize each survey question and the leading category of each response. Not every survey question had comments. Comments were not traceable to employees. Comments were not counted in multiple categories to prevent confusion, so the most applicable category was used. Questions were designed to determine root causes of identified issues in the scope of work. Respondents had opportunities to skip questions or choose Other, N/A, leave a comment contrary to the given options, and respond to open ended questions.

Following the summary charts here, we present the exact results in charts and graphs for each question. Care has been taken to not present exact comments, to preserve anonymity.

Question #	Question Topic	Total	Communication	Leadership / Process	Work Ethic	Favoritism / Corruption	Competency / Training	Staffing / Resources	Culture / Morale	Fear of Retaliation	N/A, Other
1	Interdepartment delays	47	8	6	3	10	5	5	5	0	5
3	Issues not resolved timely	57	12	13	6	5	4	9	3	0	5
4	Discourages raising concerns	47	6	9	3	5	2	1	8	8	5
5	Source of retaliation	39	2	10	1	8	3	1	5	3	6
7	Complaints to legal action	35	3	7	2	7	2	2	4	2	6
8	Investigation issues	38	5	8	1	6	4	2	3	3	6
9	Discipline influenced by	27	1	6	1	7	2	1	2	1	6
10	Barrier to accountability	43	4	11	4	6	6	1	5	2	4
11	Prevents correction	34	3	12	3	3	2	2	4	1	4
25	Conflicts of interest / nepotism	62	2	13	0	29	6	0	3	4	5
26	Supervisor reliance reasons	21	0	5	2	6	4	1	1	1	1
	TOTAL	450	46	100	26	92	40	25	43	25	53
	PERCENTAGE BY TOPIC		10%	22%	6%	20%	9%	5%	10%	6%	12%

Category Descriptions

Communication – Breakdowns in information sharing, delayed responses, and inconsistent messaging between departments or leadership.

- Lack of communication between departments
- Emails or calls not returned
- Delays waiting for responses or guidance
- Conflicting or inconsistent information from different sources
- Not being informed of changes, expectations, or decisions

Leadership / Process – Issues with leadership decisions, direction, oversight, and how policies or processes are implemented or enforced.

- Lack of clear direction or expectations from leadership
- Poor decision-making by management
- Inconsistent enforcement of policies
- Lack of follow-through or accountability from leadership

- Processes varying depending on who is in charge
- Policies existing but not being applied

Work Ethic – Individual employee behavior related to effort, responsibility, and follow-through.

- Employees not doing their jobs
- Avoidance of work or responsibility
- Lack of follow-through on assigned tasks
- General comments about laziness or lack of effort

Favoritism / Corruption – Perceived or explicit unequal treatment, nepotism, or unethical behavior tied to relationships or power.

- Favoritism in hiring, promotions, or discipline
- “Who you know” culture
- Nepotism
- Unequal treatment of employees
- Corruption or unethical conduct by leadership or staff

Competency / Training – Lack of skills, knowledge, or training needed to perform job duties effectively.

- Employees or supervisors lacking necessary knowledge
- Inadequate or no training provided
- Poor onboarding or preparation for roles
- Inexperienced individuals placed in key positions

Staffing / Resources – Insufficient staffing levels or lack of tools and resources needed to perform work.

- Not enough staff to handle workload
- Vacant positions not being filled
- High turnover impacting operations
- Lack of necessary tools or resources

Culture / Morale – Workplace environment, attitudes, and overall employee experience.

- Toxic or negative work environment
- Low morale among staff
- Lack of respect between employees or departments
- “Us vs them” mentality
- Burnout related to workplace conditions

Fear of Retaliation – Concerns about negative consequences for reporting issues or speaking up.

- Fear of being targeted for raising concerns
- Hesitation to report issues
- Observations of retaliation against others
- Concern about negative career impacts for speaking up

N/A, Other – Responses that did not provide usable information or indicated no input.

- N/A, NA, or n/a responses
- Blank responses
- “I don’t know” or no opinion provided

Question #	Question Topic	Total	Communication	Leadership	Accountability	Favoritism	Policy / Process	Training	Staffing	Culture / Morale	Political	HR	Workload	Roles	Other	No Issue	Don't Know	N/A	Personal Contact
27	Cooperation Issues	275	134	21	26	11	18	6	9	14	8	3	2	9	5	5	2	2	-
28	Complaints / Lawsuits Causes	275	12	24	61	47	19	8	4	13	11	16	2	2	6	3	6	21	-
29	Improve Fairness & Accountability	275	18	32	96	41	27	14	6	8	5	10	1	3	4	2	4	4	-
30	Barriers to Reporting / Misconduct	275	17	26	68	49	21	9	4	15	9	18	1	2	5	3	6	22	-
31	Improve Trust in Leadership	275	52	61	49	28	18	12	5	14	4	11	1	2	4	3	5	6	-
33	Additional Comments	53	3	5	4	3	3	1	1	4	1	2	1	1	2	3	1	3	15
	TOTAL	1,428	236	169	304	179	106	50	29	68	38	60	8	19	26	19	24	58	15
	PERCENTAGE BY TOPIC		17%	12%	21%	13%	7%	4%	2%	5%	3%	4%	1%	1%	2%	1%	2%	4%	1%

Category Descriptions

Communication – Breakdowns, lack of information sharing, delayed responses, inconsistent messaging.

- Lack of communication
- No communication between departments
- Emails not answered / delays in responses
- Miscommunication / unclear information
- Different information from different departments
- Information roaming... causing confusion
- Guidance takes days or weeks

Leadership – Issues with leadership behavior, decisions, competence, or direction.

- Complaints about County Manager, directors, supervisors
- Bad leadership, poor management
- Lack of vision or direction
- Leadership incompetence or behavior issues
- Supervisors not trained or competent
- New leadership needed

Accountability – Failure to hold people responsible; lack of consequences or enforcement.

- No accountability
- People get away with things
- No consequences for poor performance
- Failure to follow through on discipline
- Same issues keep happening
- Lack of enforcement

Favoritism – Unequal treatment based on relationships, bias, or internal networks.

- Favorites, good ol' boy system
- Promotions or protections based on relationships, favorites
- Unequal discipline, treatment
- Retaliation tied to favoritism
- It's who you know

Policy / Process – Issues with systems, procedures, rules, or workflows.

- Lack of SOPs
- Inconsistent or changing policies
- Broken or unclear processes
- Workflow inefficiencies
- Policies not followed
- Rules constantly change
- Delays due to process issues

Training – Lack of training, onboarding, or skill development.

- No training
- Supervisors not trained
- System training issues such as Workday
- Lack of knowledge due to training gaps
- Systems not understood

Staffing – Insufficient staffing levels or hiring/retention issues.

- Short staffing
- Hiring problems
- Turnover
- Inability to fill positions
- Can't hire due to pay
- Vacancies

Culture / Morale – Workplace environment, attitudes, and interpersonal climate.

- Toxic culture
- Egos, disrespect, hostility
- Low morale, burnout
- Lack of teamwork
- Us vs them culture

Political – Influence of elected officials or political dynamics.

- Sheriff vs County conflict
- BOCC influence
- Political agendas
- Power struggles tied to offices

- Political reasons
- Elected officials not following policy

HR – Issues specifically tied to Human Resources.

- HR delays
- HR decisions overriding departments
- HR handling complaints
- HR inconsistency or bias
- HR takes too long
- HR not helping
- HR not following through

Workload – Volume of work or time pressure.

- Too much work
- Deadlines / delays due to workload
- Overburdened employees
- Work piling up
- Overwhelmed staff

Roles – Unclear responsibilities, authority, or structure.

- Confusion about who does what
- Chain of command issues
- Overlapping responsibilities
- Not my job
- Unclear authority
- Roles not defined

ADDITIONAL QUESTION DATA FOLLOWS:

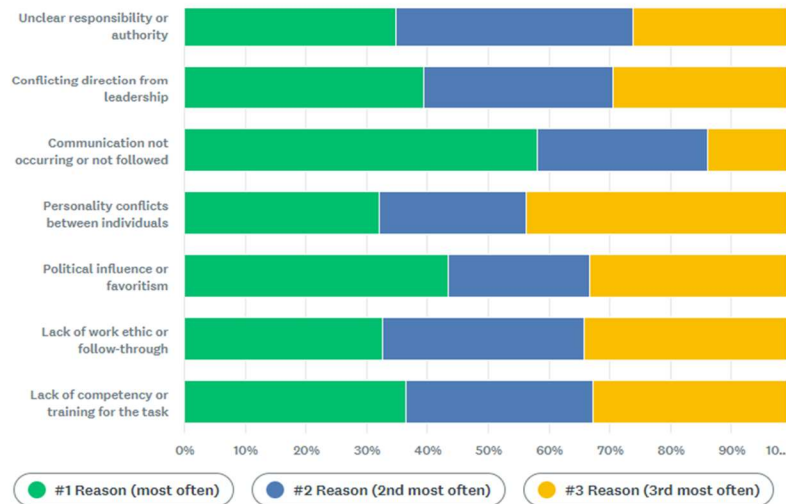
Question 1:

When work requires cooperation between departments, what most often contributes to delays or breakdowns?

	#1 Reason (most often)	#2 Reason (2nd most often)	#3 Reason (3rd most often)	Total	Weighted Average			
Unclear responsibility or authority	34.85%	69	38.89%	77	26.26%	52	198	1.91
Conflicting direction from leadership	39.44%	71	31.11%	56	29.44%	53	180	1.9
Communication not occurring or not followed	58.10%	147	28.06%	71	13.83%	35	253	1.56
Personality conflicts between individuals	32.12%	44	24.09%	33	43.80%	60	137	2.12
Political influence or favoritism	43.48%	60	23.19%	32	33.33%	46	138	1.9
Lack of work ethic or follow-through	32.56%	56	33.14%	57	34.30%	59	172	2.02
Lack of competency or training for the task	36.42%	59	30.86%	50	32.72%	53	162	1.96
Other (please specify)							44	
							Answered	328
When work requires cooperation between departments, what most often							Skipped	0

When work requires cooperation between departments, what most often contributes to delays or breakdowns?

Answered: 328 Skipped: 0



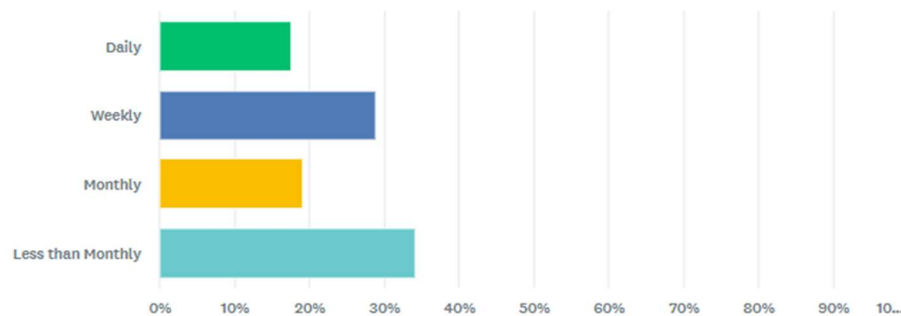
Question 2:

How often on average are you prevented from moving forward on your work due to lack of responsiveness both from within your department/office and within the County overall?

Answer Choices	Responses	
Daily	17.68%	58
Weekly	28.96%	95
Monthly	19.21%	63
Less than Monthly	34.15%	112
Answered		328
Skipped		0

How often on average are you prevented from moving forward on your work due to lack of responsiveness both from within your department/office and within the County overall?

Answered: 328 Skipped: 0



Answer Choices ↓	Percentage ↓	Responses ↓	
● Daily	17.68%	58	...
● Weekly	28.96%	95	...
● Monthly	19.21%	63	...
● Less than Monthly	34.15%	112	...
Total		328	

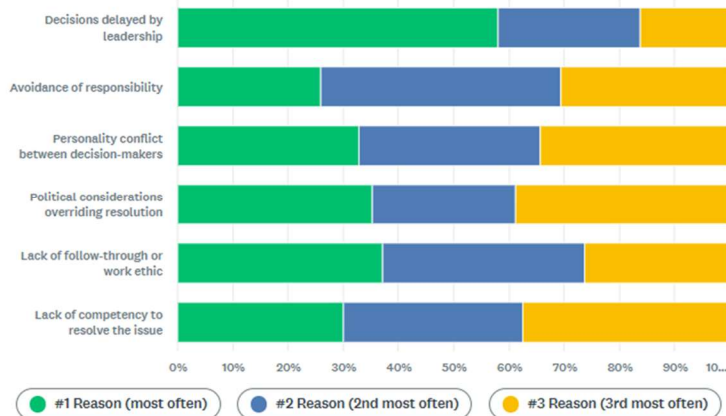
Question 3:

What is the most common reason issues are not resolved in a timely manner?

	#1 Reason (most often)	#2 Reason (2nd most often)	#3 Reason (3rd most often)	Total	Weighted Average
Decisions delayed by leadership	58.08% 133	25.76% 59	16.16% 37	229	1.58
Avoidance of responsibility	26.02% 51	43.37% 85	30.61% 60	196	2.05
Personality conflict between decision-makers	32.87% 47	32.87% 47	34.27% 49	143	2.01
Political considerations overriding resolution	35.25% 49	25.90% 36	38.85% 54	139	2.04
Lack of follow-through or work ethic	37.10% 82	36.65% 81	26.24% 58	221	1.89
Lack of competency to resolve the issue	30.11% 53	32.39% 57	37.50% 66	176	2.07
Other (please specify)				56	
				Answered	328
				Skipped	0

What is the most common reason issues are not resolved in a timely manner?

Answered: 328 Skipped: 0



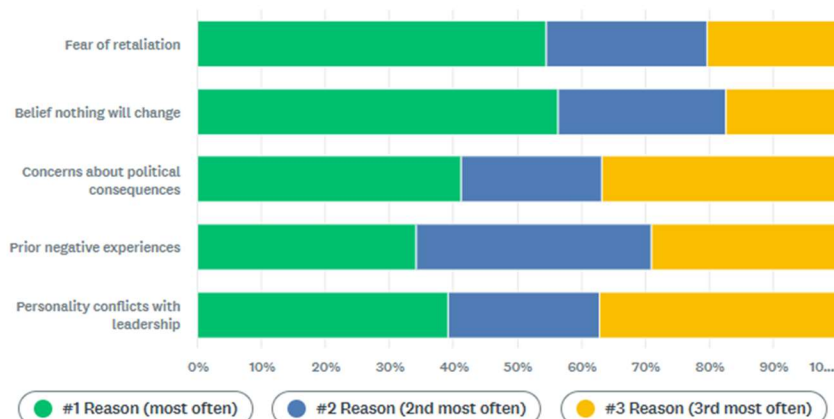
Question 4:

What most discourages employees from raising concerns?

	#1 Reason (most often)	#2 Reason (2nd most often)	#3 Reason (3rd most often)	Total	Weighted Average
Fear of retaliation	54.58% 137	25.10% 63	20.32% 51	251	1.66
Belief nothing will change	56.38% 159	26.24% 74	17.38% 49	282	1.61
Concerns about political consequences	41.23% 47	21.93% 25	36.84% 42	114	1.96
Prior negative experiences	34.21% 78	36.84% 84	28.95% 66	228	1.95
Personality conflicts with leadership	39.19% 58	23.65% 35	37.16% 55	148	1.98
Other (please specify)				47	
				Answered	321
				Skipped	7

What most discourages employees from raising concerns?

Answered: 321 Skipped: 7

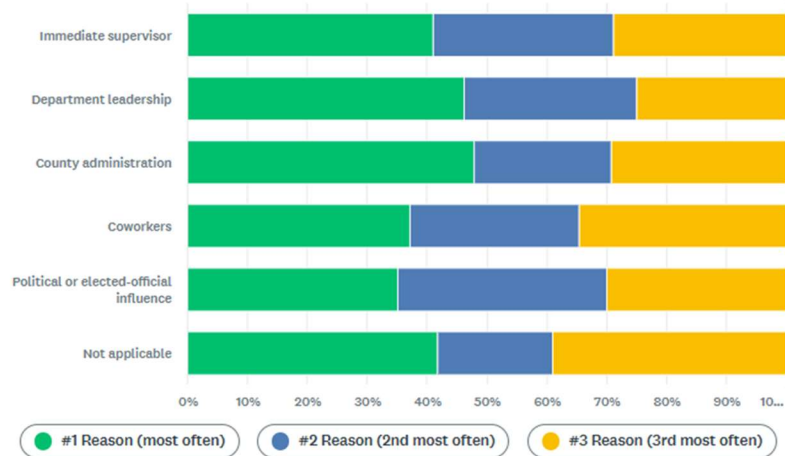


Question 5:

If retaliation concerns exist, where are they perceived to originate?								
	#1 Reason (most often)		#2 Reason (2nd most often)		#3 Reason (3rd most often)		Total	Weighted Average
Immediate supervisor	41.03%	64	30.13%	47	28.85%	45	156	1.88
Department leadership	46.15%	96	28.85%	60	25.00%	52	208	1.79
County administration	47.80%	87	23.08%	42	29.12%	53	182	1.81
Coworkers	37.11%	59	28.30%	45	34.59%	55	159	1.97
Political or elected-official influence	35.04%	48	35.04%	48	29.93%	41	137	1.95
Not applicable	41.82%	46	19.09%	21	39.09%	43	110	1.97
Other (please specify)							35	
Answered							321	
Skipped							7	

If retaliation concerns exist, where are they perceived to originate?

Answered: 321 Skipped: 7



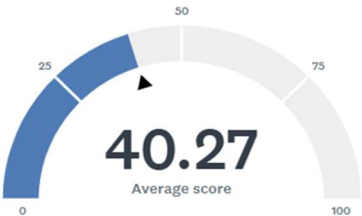
Question 6:

How confident are you that concerns are handled fairly and objectively?

Answer Choices	Average Number	Total Number	Responses
(no label)	40.26791277	12926	100.00% 321
Answered			321
Skipped			7

How confident are you that concerns are handled fairly and objectively?

Answered: 321 Skipped: 7



Basic statistics				
Minimum	Maximum	Median	Mean	Standard Deviation
0.00	100.00	41.00	40.27	31.70

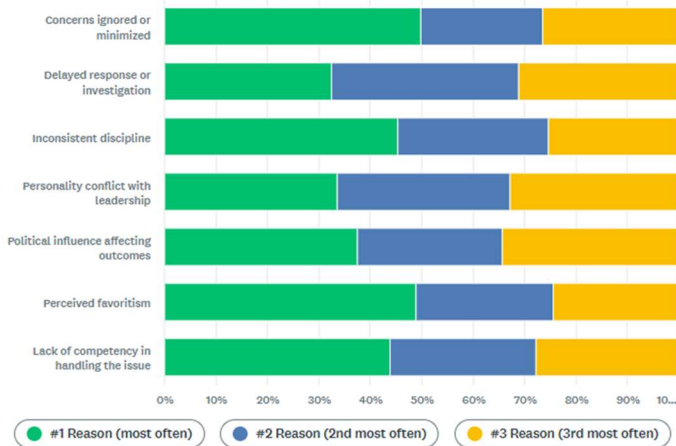
Question 7:

What most often causes employee concerns to become formal complaints or legal actions?

	#1 Reason (most often)	#2 Reason (2nd most often)	#3 Reason (3rd most often)	Total	Weighted Average
Concerns ignored or minimized	49.78% 113	23.79% 54	26.43% 60	227	1.77
Delayed response or investigation	32.47% 50	36.36% 56	31.17% 48	154	1.99
Inconsistent discipline	45.40% 79	29.31% 51	25.29% 44	174	1.8
Personality conflict with leadership	33.61% 40	33.61% 40	32.77% 39	119	1.99
Political influence affecting outcomes	37.50% 36	28.13% 27	34.38% 33	96	1.97
Perceived favoritism	48.94% 92	26.60% 50	24.47% 46	188	1.76
Lack of competency in handling the issue	43.80% 60	28.47% 39	27.74% 38	137	1.84
Other (please specify)				29	
	Answered			295	
	Skipped			33	

What most often causes employee concerns to become formal complaints or legal actions?

Answered: 295 Skipped: 33



Question 8:

During investigations, such as EEO or internal complaints, what issue is most problematic?

	#1 Reason (most often)	#2 Reason (2nd most often)	#3 Reason (3rd most often)	Total	Weighted Average
Lack of neutrality or independence	47.59% 79	28.31% 47	24.10% 40	166	1.77
Slow timelines	48.63% 89	27.87% 51	23.50% 43	183	1.75
Poor communication of results	46.86% 97	24.64% 51	28.50% 59	207	1.82
Personality conflicts affecting the process	33.33% 40	30.83% 37	35.83% 43	120	2.03
Political pressure or influence	32.79% 40	31.15% 38	36.07% 44	122	2.03
Incomplete fact-finding due to lack of competency	38.55% 64	34.94% 58	26.51% 44	166	1.88
Other (please specify)				34	
	Answered			291	
	Skipped			37	

During investigations, such as EEO or internal complaints, what issue is most problematic?

Answered: 291 Skipped: 37



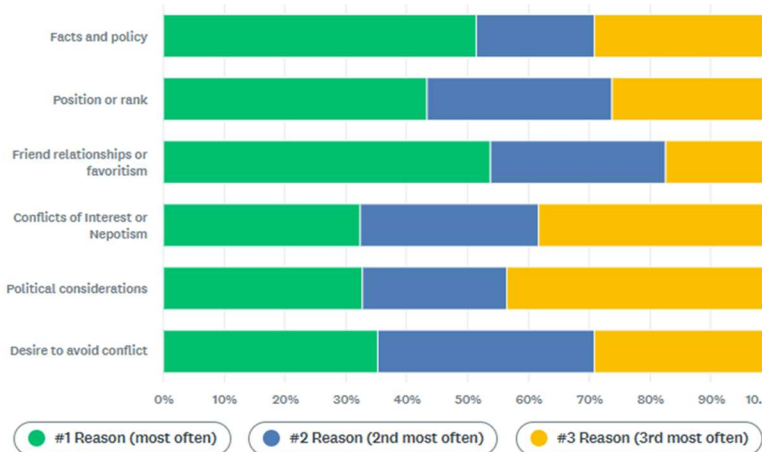
Question 9:

In your experience, disciplinary outcomes are most influenced by:

	#1 Reason (most often)	#2 Reason (2nd most often)	#3 Reason (3rd most often)	Total	Weighted Average
Facts and policy	51.43% 90	19.43% 34	29.14% 51	175	1.78
Position or rank	43.27% 74	30.41% 52	26.32% 45	171	1.83
Friend relationships or favoritism	53.85% 105	28.72% 56	17.44% 34	195	1.64
Conflicts of Interest or Nepotism	32.33% 43	29.32% 39	38.35% 51	133	2.06
Political considerations	32.79% 40	23.77% 29	43.44% 53	122	2.11
Desire to avoid conflict	35.20% 63	35.75% 64	29.05% 52	179	1.94
Other (please specify)				21	
	Answered				296
	Skipped				32

In your experience, disciplinary outcomes are most influenced by:

Answered: 296 Skipped: 32



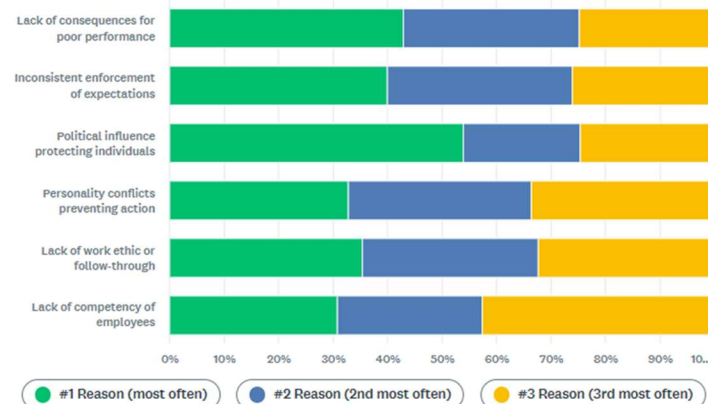
Question 10:

What is the biggest barrier (obstacle) to accountability in the County?

	#1 Reason (most often)	#2 Reason (2nd most often)	#3 Reason (3rd most often)	Total	Weighted Average
Lack of consequences for poor performance	42.93% 85	32.32% 64	24.75% 49	198	1.82
Inconsistent enforcement of expectations	40.00% 86	33.95% 73	26.05% 56	215	1.86
Political influence protecting individuals	54.00% 81	21.33% 32	24.67% 37	150	1.71
Personality conflicts preventing action	32.82% 43	33.59% 44	33.59% 44	131	2.01
Lack of work ethic or follow-through	35.33% 59	32.34% 54	32.34% 54	167	1.97
Lack of competency of employees	30.77% 44	26.57% 38	42.66% 61	143	2.12
Other (please specify)				41	
	Answered				297
	Skipped				31

What is the biggest barrier (obstacle) to accountability in the County?

Answered: 297 Skipped: 31



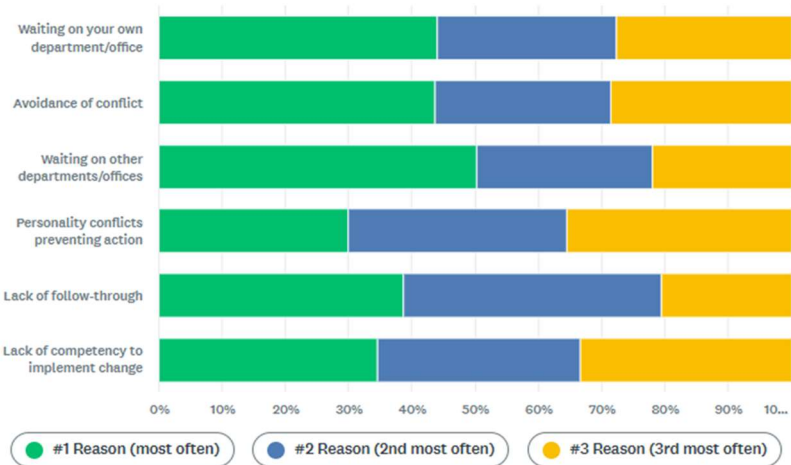
Question 11:

When problems are identified, what most often prevents correction?

	#1 Reason (most often)	#2 Reason (2nd most often)	#3 Reason (3rd most often)	Total	Weighted Average			
Waiting on your own department/office	44.08%	67	28.29%	43	27.63%	42	152	1.84
Avoidance of conflict	43.64%	72	27.88%	46	28.48%	47	165	1.85
Waiting on other departments/offices	50.27%	92	27.87%	51	21.86%	40	183	1.72
Personality conflicts preventing action	30.00%	33	34.55%	38	35.45%	39	110	2.05
Lack of follow-through	38.76%	81	40.67%	85	20.57%	43	209	1.82
Lack of competency to implement change	34.57%	56	32.10%	52	33.33%	54	162	1.99
Other (please specify)							29	
							Answered	297
							Skipped	31

When problems are identified, what most often prevents correction?

Answered: 297 Skipped: 31



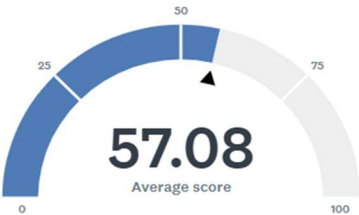
Question 12:

How clearly are decision authority and responsibility understood in your work?

Answer Choices	Average	Number	Total Number	Responses
(no label)	57.07744108	16952	100.00%	297
Answered				297
Skipped				31

How clearly are decision authority and responsibility understood in your work?

Answered: 297 Skipped: 31



Basic statistics				
Minimum	Maximum	Median	Mean	Standard Deviation
0.00	100.00	60.00	57.08	33.26

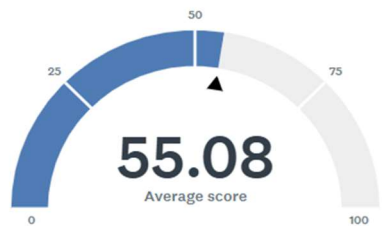
Question 13:

How often do the same problems repeat after being reported?

Answer Choices	Average Number	Total Number	Responses
(no label)	55.08080808	16359	100.00%
Answered			297
Skipped			31

How often do the same problems repeat after being reported?

Answered: 297 Skipped: 31



Basic statistics				
Minimum	Maximum	Median	Mean	Standard Deviation
0.00	100.00	50.00	55.08	32.74

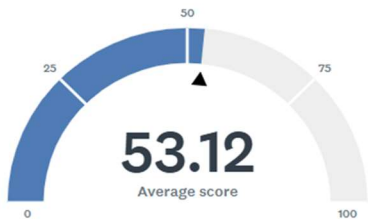
Question 14:

Overall, what level of trust exists between employees and their own Department/Office leadership?

Answer Choices	Average Number	Total Number	Responses
(no label)	53.11784512	15776	100.00%
Answered			297
Skipped			31

Overall, what level of trust exists between employees and their own Department/Office leadership?

Answered: 297 Skipped: 31



Basic statistics				
Minimum	Maximum	Median	Mean	Standard Deviation
0.00	100.00	50.00	53.12	34.89

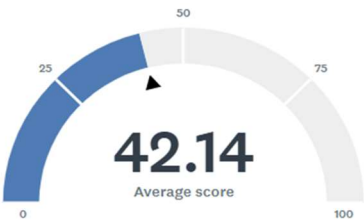
Question 15:

Overall, what level of trust exists between all employees and the County Manager Office (CMO) leadership team?

Answer Choices	Average Number	Total Number	Responses
(no label)	42.14141414	12516	100.00% 297
Answered			297
Skipped			31

Overall, what level of trust exists between all employees and the County Manager Office (CMO) leadership team?

Answered: 297 Skipped: 31



Basic statistics ⓘ				
Minimum	Maximum	Median	Mean	Standard Deviation
0.00	100.00	44.00	42.14	34.01

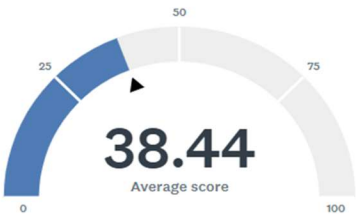
Question 16:

Overall, what level of trust exists between all employees and the Board of County Commissioners leadership?

Answer Choices	Average Number	Total Number	Responses
(no label)	38.44107744	11417	100.00% 297
Answered			297
Skipped			31

Overall, what level of trust exists between all employees and the Board of County Commissioners leadership?

Answered: 297 Skipped: 31



Basic statistics ⓘ				
Minimum	Maximum	Median	Mean	Standard Deviation
0.00	100.00	40.00	38.44	31.25

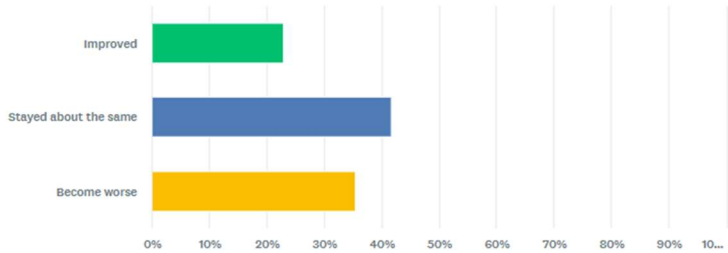
Question 17:

In the past 6 months, has your County experience:

Answer Choices	Responses	
Improved	22.90%	68
Stayed about the same	41.75%	124
Become worse	35.35%	105
Answered		297
Skipped		31

In the past 6 months, has your County experience:

Answered: 297 Skipped: 31



Answer Choices ↓	Percentage ↓	Responses ↓
Improved	22.90%	68
Stayed about the same	41.75%	124
Become worse	35.35%	105
Total		297

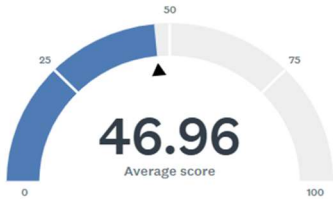
Question 18:

Higher-performing employees are appropriately given more responsibility and/or opportunities.

Answer Choices	Average Number	Total Number	Responses
(no label)	46.9556314	13758	100.00% 293
Answered			293
Skipped			35

Higher-performing employees are appropriately given more responsibility and/or opportunities.

Answered: 293 Skipped: 35



Basic statistics ⓘ				
Minimum	Maximum	Median	Mean	Standard Deviation
0.00	100.00	50.00	46.96	33.65

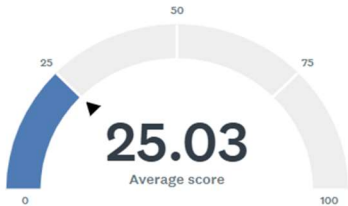
Question 19:

Pay increases or promotions are generally based on effectiveness and results.

Answer Choices	Average Numbe	Total Number	Responses
(no label)	25.02730375	7333	100.00% 293
Answered			293
Skipped			35

Pay increases or promotions are generally based on effectiveness and results.

Answered: 293 Skipped: 35



Basic statistics				
Minimum	Maximum	Median	Mean	Standard Deviation
0.00	100.00	10.00	25.03	29.55

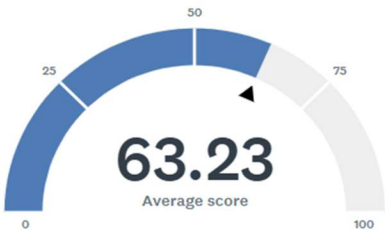
Question 20:

Supervisors appropriately rely more on employees who consistently perform well.

Answer Choices	Average Numbe	Total Number	Responses
(no label)	63.22866894	18526	100.00% 293
Answered			293
Skipped			35

Supervisors appropriately rely more on employees who consistently perform well.

Answered: 293 Skipped: 35



Basic statistics				
Minimum	Maximum	Median	Mean	Standard Deviation
0.00	100.00	75.00	63.23	33.44

Question 21:

Decisions about pay, promotions, or opportunities are explained clearly enough to be understood.

Answer Choices	Average Number	Total Number	Responses
(no label)	32.39	249	100.00%
		147	
		94	
		91	
		100.00%	293
		Answered	293
		Skipped	35

Decisions about pay, promotions, or opportunities are explained clearly enough to be understood.

Answered: 293 Skipped: 35



Basic statistics				
Minimum	Maximum	Median	Mean	Standard Deviation
0.00	100.00	20.00	32.39	33.61

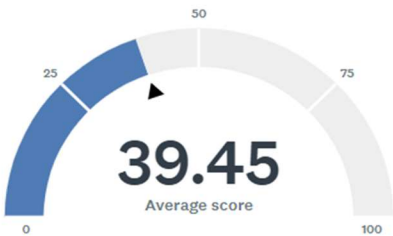
Question 22:

Employees with similar performance are treated consistently.

Answer Choices	Average Number	Total Number	Responses
(no label)	39.45	115	100.00%
		59	
		11	
		59	
		100.00%	293
		Answered	293
		Skipped	35

Employees with similar performance are treated consistently.

Answered: 293 Skipped: 35



Basic statistics				
Minimum	Maximum	Median	Mean	Standard Deviation
0.00	100.00	40.00	39.45	34.31

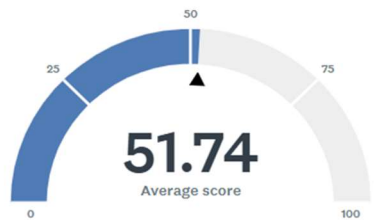
Question 23:

Personal relationships appear to influence workplace decisions.

Answer Choices	Average Numbe	Total Number	Responses
(no label)	51.73720137	15159	100.00% 293
		Answered	293
		Skipped	35

Personal relationships appear to influence workplace decisions.

Answered: 293 Skipped: 35



Basic statistics				
Minimum	Maximum	Median	Mean	Standard Deviation
0.00	100.00	50.00	51.74	35.34

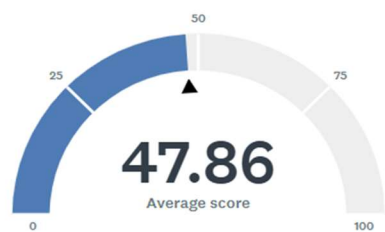
Question 24:

Lack of transparency contributes to perceptions of unfairness.

Answer Choices	Average Numbe	Total Number	Responses
(no label)	47.85665529	14022	100.00% 293
		Answered	293
		Skipped	35

Lack of transparency contributes to perceptions of unfairness.

Answered: 293 Skipped: 35



Basic statistics				
Minimum	Maximum	Median	Mean	Standard Deviation
0.00	100.00	50.00	47.86	36.75

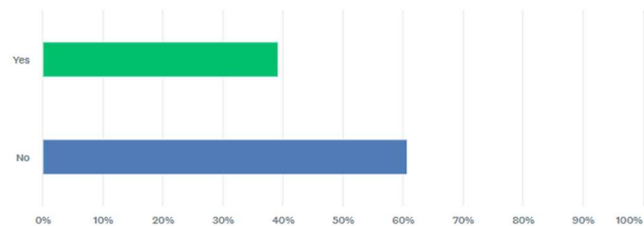
Question 25:

I am aware of situations where conflicts of interest, family relationships (nepotism), and/or political influence may have influenced employment decisions.

Answer Choices	Responses	
Yes	39.25%	115
No	60.75%	178
If Yes, please provide specific details so the issue may be followed up on		67
Answered		293
Skipped		35

I am aware of situations where conflicts of interest, family relationships (nepotism), and/or political influence may have influenced employment decisions.

Answered: 293 Skipped: 35



Answer Choices ↓	Percentage ↓	Responses ↓
● Yes	39.25%	115
● No	60.75%	178
Show comments		
Total		293

Question 26:

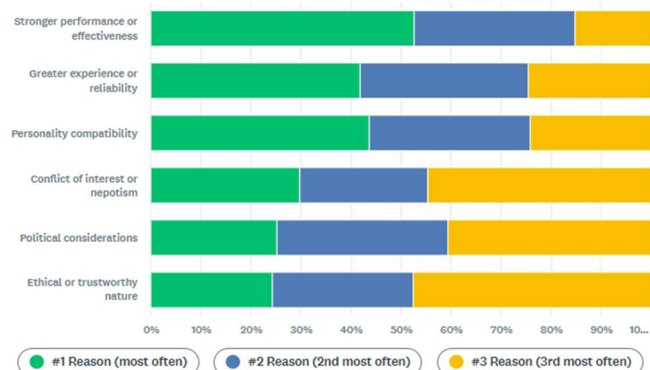
When supervisors rely more heavily on certain employees, what are the primary reasons?

	#1 Reason (most often)	#2 Reason (2nd most often)	#3 Reason (3rd most often)	Total	Weighted Average			
Stronger performance or effectiveness	52.67%	128	32.10%	78	15.23%	37	243	1.63
Greater experience or reliability	41.95%	99	33.47%	79	24.58%	58	236	1.83
Personality compatibility	43.62%	65	32.21%	48	24.16%	36	149	1.81
Conflict of interest or nepotism	29.79%	28	25.53%	24	44.68%	42	94	2.15
Political considerations	25.27%	23	34.07%	31	40.66%	37	91	2.15
Ethical or trustworthy nature	24.24%	48	28.28%	56	47.47%	94	198	2.23
Other (please specify)						20		

Answered 293
Skipped 35

When supervisors rely more heavily on certain employees, what are the primary reasons?

Answered: 293 Skipped: 35



Question 27: What is the single biggest reason cooperation between departments does not work effectively?

These open responses show a clear and dominant pattern centered on Communication, which overwhelmingly drives interdepartmental breakdowns. A large portion of respondents explicitly cited “lack of communication,” “no communication,” or “poor communication” as the primary barrier, often describing delays, confusion, and duplication of effort. This theme is closely reinforced by issues in Leadership / Process, where respondents pointed to unclear direction, inconsistent expectations, and weak oversight as contributing factors. Comments such as “no clear and consistent direction from leadership” and “unclear authority and responsibility for cross-department projects” highlight that breakdowns are not just about messaging, but about how work is structured and led. Additionally, Roles emerged as a meaningful factor, with employees noting unclear responsibilities and siloed operations, for example: “everything is compartmentalized” and “unclear roles and responsibilities.” Responses also indicate that retaliation concerns influence workplace behavior more broadly, with employees demonstrating hesitation to engage, escalate issues, or challenge not only other departments, but also co-workers, supervisors, and department leadership due to perceived risk.

A second tier of concerns centers on Culture / Morale, Favoritism, and Accountability, which shape how employees interact across departments. Respondents frequently described an environment of “egos,” “personality conflicts,” and “us vs them” dynamics, along with perceptions that favoritism and unequal treatment influence cooperation. Statements such as “management has their favorites,” “favoritism,” and “no one takes ownership of problems” illustrate how trust and fairness issues undermine collaboration. Political dynamics also surfaced, particularly tensions involving elected officials and leadership, as seen in comments referencing “political reasons” and conflicts between the Sheriff’s Office and County management. While a smaller number of responses indicated no issues (“works well every time I’ve worked with other departments”), the overall pattern shows that communication failures, unclear leadership direction, cultural divisions, and broader concerns about fairness and potential job-related repercussions contribute to ineffective cooperation across departments and within the organization as a whole.

Question 28: What factors contribute most to complaints or lawsuits involving the County?

These open responses identify Favoritism / Corruption and Leadership / Process failures as the primary drivers of complaints and lawsuits involving the County. A significant number of respondents pointed to unequal treatment, inconsistent discipline, and lack of accountability as core issues, frequently referencing favoritism, retaliation, and unethical behavior. Comments such as “unfair treatment,” “inconsistent policy enforcement,” and “management treating others unfairly” reflect a widespread perception that rules are not applied equally. Leadership concerns are closely tied to this theme, with respondents citing poor oversight, lack of enforcement of policies, and failure to act on known issues. Several responses also referenced systemic problems such as “lack of transparency,” “failure to follow procedures,” and “unethical decision-making,” indicating that complaints and legal actions are often viewed as the result of preventable internal failures rather than isolated incidents.

Secondarily, there were highlights HR-related issues, lack of accountability, and retaliation concerns as contributing factors that escalate complaints into formal actions. Respondents frequently described delays, lack of follow-through, and perceived bias in how complaints are handled, particularly within HR, reinforcing the belief that internal processes are ineffective. Retaliation and fear of consequences for raising concerns were also repeatedly noted, especially in employment-related complaints, suggesting that employees may pursue legal action when internal reporting is seen as unsafe or unproductive. Additional contributing factors include competency gaps, lack of training, and communication breakdowns, though these were less dominant. While some respondents indicated limited awareness of complaints or lawsuits, the overall pattern shows that perceived unfairness, inconsistent enforcement of policies, weak leadership oversight, and lack of trust in internal processes are the key conditions driving complaints and litigation.

Question 29: What changes would most improve fairness and accountability?

Question 29 open responses strongly emphasize Accountability, Transparency, and Leadership / Process improvements as the primary ways to improve fairness and accountability within the County. A dominant theme across responses is the need for consistent application of rules, with many employees calling for “holding everyone to the same standards,” “consistent disciplinary processes,” and “accountability regardless of level.” Closely tied to this is a demand for greater transparency in decision-making, particularly around hiring, promotions, compensation, and discipline. Comments such as “clear and transparent hiring and promotion processes” and “apply policies consistently at every level” reflect a widespread perception that current systems lack clarity and fairness. Leadership is also a central factor, with many responses calling for stronger oversight, better decision-making, and in some cases significant changes in leadership itself, indicating that employees view fairness issues as rooted in how authority is exercised.

A second tier of responses highlights Favoritism, HR concerns, and Culture / Morale as key barriers to fairness that must be addressed. Many respondents explicitly called for the elimination of favoritism and nepotism, emphasizing that opportunities should be based on merit rather than relationships. HR was frequently identified as a critical area needing reform, with calls for restructuring, improved responsiveness, making suggestions instead of directives, and more objective processes. Cultural issues also emerged, including low morale, lack of trust, and fear of retaliation, which continue to undermine confidence in the system. Notably, several responses stressed that without meaningful accountability at the leadership level and consistent enforcement of policies, other improvements will have limited impact. Overall, the responses indicate that improving fairness and accountability requires systemic changes in leadership behavior, transparent and consistent processes, and rebuilding trust across the organization.

Question 30: What barriers exist to correcting concerns or misconduct?

Question 30 responses identify Fear of Retaliation as the primary barrier to correcting concerns or misconduct within the County. Employees consistently described an environment where speaking up is perceived as unsafe, with direct references such as “fear of retaliation,” “fear of retaliation from coworkers,” and concerns that issues will “get back to the person the concern was about.” This fear extends across supervisors, leadership, and peers, creating a strong deterrent to reporting. Driving this further is Leadership / Process failure, where respondents highlighted inconsistent enforcement and lack of follow-through, noting that “issues are ignored until they become a problem” and that there is a “lack of accountability” and “inconsistency in enforcing policy.” Together, these conditions reinforce a belief that reporting concerns may lead to negative consequences without meaningful resolution.

Secondary themes include Favoritism and Accountability gaps, which further erode trust in the system. Respondents pointed out that “certain individuals seem to be ‘unreachable’ as any complaints never result in action” and that “correcting concerns or misconduct only applies to certain people.” These perceptions of unequal treatment are compounded by comments such as “employees being protected... nothing happens to them” and “favoritism and political considerations,” reinforcing the idea that outcomes are influenced by relationships rather than facts. While additional factors like HR delays (“it gets ‘stuck’ in HR”), lack of supervisor training, and unclear reporting processes were noted, they are secondary to the broader issue: many employees do not trust that the system will protect them or act fairly, and this lack of trust prevents concerns from being raised or addressed effectively.

Question 31: What leadership actions would most improve trust in the workplace?

Question 31 responses focus on specific actions leadership must take to improve trust, with Transparency, Communication, and Consistent Leadership behavior emerging as the most prominent themes. Employees repeatedly called for clearer and more open decision-making, particularly around promotions, organizational changes, and leadership actions that directly impact staff. Many respondents emphasized that trust is weakened when decisions are made without explanation or visibility, and strengthened when leadership provides clear rationale and follows through on commitments. Comments

such as “be honest,” “lead by example,” and “clear, consistent leadership” reflect a strong expectation that leadership actions align with stated expectations and policies. In addition, employees expressed a need for more direct engagement, including requests to “communicate directly with employees,” provide regular updates, and involve staff earlier in decisions rather than after changes are already implemented. Several responses also highlighted that employees often learn about decisions indirectly or too late, which contributes to confusion and erodes confidence in leadership.

Additional actions identified include improving Fairness, Accountability, and Workplace Culture, particularly in how employees are treated and how decisions are applied across the organization. Respondents frequently called for leadership to “hold everyone to the same standards” and “stop employee favoritism,” indicating that inconsistent treatment continues to be a major barrier to trust. Concerns about promotions, compensation, and opportunities being influenced by relationships rather than qualifications were also common, reinforcing the need for more objective and transparent processes. Employees further emphasized the importance of leadership follow-through, noting that issues are often acknowledged but not resolved, which undermines confidence over time. There were also calls for leadership to be more visible, accessible, and responsive, with greater effort to listen to employee concerns and demonstrate that feedback leads to action. Overall, responses indicate that improving trust requires sustained, visible changes in how leadership communicates, makes decisions, and applies standards—ensuring that actions are transparent, consistent, and perceived as fair across all levels of the organization.

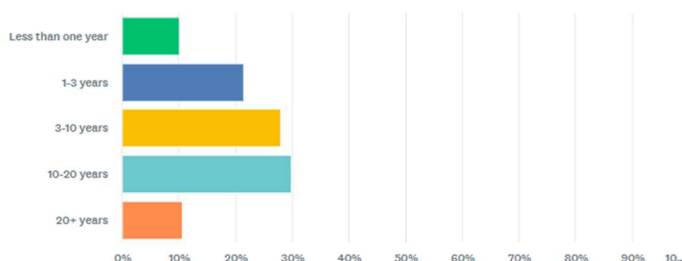
Question 32:

My total years of working at the County:

Answer Choices	Responses	
Less than one year	10.18%	28
1-3 years	21.45%	59
3-10 years	28.00%	77
10-20 years	29.82%	82
20+ years	10.55%	29
Answered		275
Skipped		53

My total years of working at the County:

Answered: 275 Skipped: 53



Answer Choices ↓	Percentage ↓	Responses ↓
● Less than one year	10.18%	28
● 1-3 years	21.45%	59
● 3-10 years	28.00%	77
● 10-20 years	29.82%	82
● 20+ years	10.55%	29
Total		275

Question 33: This survey is anonymous. ONLY IF you would like to provide comments and details, please leave your contact information here or email Admin@JAG.CPA. Thank you for your participation.

These open ended responses provide additional qualitative detail and direct examples that reinforce and expand upon themes identified in earlier questions, particularly related to HR effectiveness, leadership behavior, fairness, and workplace trust. Many respondents described ongoing delays, lack of follow-through, and inconsistent guidance, often tied to Human Resources, noting that issues “take an extremely long time to resolve,” calls go unanswered, and turnover within HR disrupts continuity. These operational breakdowns contribute directly to workflow inefficiencies and reinforce frustration across departments. In addition, several comments raise concerns about inconsistent discipline and perceived favoritism, including situations where similar issues appear to result in different outcomes depending on the individuals involved.

A significant portion of responses also highlight fear of retaliation and lack of confidence in internal processes, with employees expressing hesitation to report concerns or provide identifying information. Comments indicate employees do not feel safe sharing contact information, question whether the process is truly anonymous, and believe that raising concerns may lead to being targeted or treated differently. At the same time, a smaller group of employees voluntarily provided their names or contact information, indicating a willingness to be contacted for follow-up despite these concerns. Some responses include direct references to specific departments and elected officials, particularly within the Sheriff’s Office, where respondents describe concerns related to retaliation, lack of accountability, and perceived influence over investigative or disciplinary outcomes. There are also references to leadership concerns within the Assessor’s Office, though these appear more limited and localized. Additional issues raised include low morale, frequent leadership turnover, lack of training and clear processes, and dissatisfaction with pay and advancement opportunities. Overall, Question 33 responses reinforce earlier findings and survey responses while providing more detailed insight into how issues related to communication, accountability, fairness, and retaliation are experienced across the organization.