

YOUTH SERVICES POLICY

Title: Budget and Fiscal Management Activities	Type: A. Administrative Sub Type: 3. Fiscal Number: A.3.8
	Page 1 of 8
References: La. R.S. 24:513, 36:401; 39:78 "Uniform Accounting Procedures", 39:233, 39:242, 39:1561 and 49:321; State Treasurer Policies and Procedures Manual; Office of Risk Management Procedures Manual and Generally Accepted Accounting Principles; ACA Standards 2-CO-1B-01, 2-CO-1B-02, 2-CO-1B-03, 2-CO-1B-04, 2-CO-1B-05, 2-CO-1B-06, 2-CO-1B-07, 2-CO-1B-09 and 2-CO-1B-11 (Administration of Correctional Agencies); 4-JCF-6B-02, 4-JCF-6B-05, 4-JCF-6B-06, 4-JCF-6B-08, 4-JCF-6B-12 (Performance-Based Standards for Juvenile Correctional Facilities), 2-7060, 2-7061 and 2-7062 (Juvenile Probation and Aftercare Services); YS Policy Nos. A.1.14 "Unusual Occurrence Reports", A.1.7 "Risk Management", A.3.7 "Procurement of Supplies and Equipment", A.3.11 "Financial and Property Loss Prevention Program", B.9.1 "Youth Welfare Fund (YWF)", B.9.3 "Youth Banking", C.4.2 "Social Security Benefits", and C.5.3 "Quality Assurance Reviews-Central Office Audits, Secure Facilities and Regional Offices"	
STATUS: Approved	
Approved By: Otha "Curtis" Nelson, Jr., Deputy Secretary	Date of Approval: 10/09/2023

I. AUTHORITY:

Deputy Secretary of Youth Services (YS) as contained in La. R.S. 36:405. Deviation from this policy must be approved by the Deputy Secretary.

II. PURPOSE:

To provide YS' policy governing fiscal management to include planning, budgeting and accounting procedures.

III. APPLICABILITY:

Deputy Secretary, Assistant Secretary, Undersecretary, Deputy Undersecretary, Chief of Operations, Probation and Parole Director - Juvenile, Youth Facilities Director - Statewide, Executive Management Advisor, Regional Administrators, Facility Directors, Regional Managers, and all employees responsible for budget and accounting related activities.

IV. DEFINITIONS:

Imprest Fund - An account used primarily for reimbursement of travel expenses, registration fees for conferences, postage, and other minor expenses.

LaGOV ERP SRM - Enterprise Resource Planning, Supplier Relationship Management - An automated purchasing system on the ISIS mainframe used for transmitting, transacting, and data storage of purchasing documents/processes .

Office of Management and Finance (OMF) - An office within Youth Services that oversees the administrative and operational functions of the agency.

Petty Cash - Cash on hand for small incidental or emergency purchases where a check is not required or cost effective. Only secure facilities are authorized to have petty cash on hand.

Unit Head – For purposes of this policy, the Deputy Secretary, Facility Directors and Regional Managers.

Unusual Occurrence Report (UOR) - A document that must be completed by staff to report incidents or observations of events that may have an impact on any aspect of the agency. UOR forms shall be made available to all employees, working in all areas at all times. Employees must complete and submit a UOR prior to the end of their tour of duty on the day the incident was observed or comes to the employee's attention in any way. If a UOR form is not available, the employee must use any paper available to report the pertinent information. UORs may also be submitted by email. (Refer to YS Policy No. A.1.14)

Youth Welfare Fund (YWF) - Abandoned property in the form of legal tender, self-generated funds earned through fundraising, donations and interest income earned from the investment of youth money maintained by the DPS&C - Corrections Offender Banking Section (refer to YS Policy No. B.9.1).

YS Central Office - Offices of the Deputy Secretary, Assistant Secretary, Undersecretary, Chief of Operations, , Probation and Parole Director - Juvenile, Youth Facilities Director - Statewide, Executive Management Advisor, General Counsel, Regional Administrators, and their support staff.

V. POLICY:

It is the Deputy Secretary's policy that complete control over all financial management aspects and fiscal management activities be maintained for YS through utilization of La. R.S. 39:78 "Uniform Accounting Procedures," "State Treasurer Policies and Procedures Manual", "Office of Risk Management (ORM) Procedures Manual", and "Generally Accepted Accounting Principles". YS Policy No. A.1.7 contains information about the requirements of ORM.

VI. PROCEDURES:

- A. The Undersecretary/designee shall be responsible for monitoring and reviewing the expenditure of funds. All income and expenditures shall be accounted for on an ongoing basis through internal control procedures and internal audits as necessary. Planning and budgeting shall be related directly to the program objectives of each unit. Office of Management and Finance (OMF) shall assist the units with these efforts. Periodic reviews shall be conducted to include a full accounting of the funds allocated for each program function.
- B. Each Unit Head shall submit a proposed budget to the Undersecretary/designee annually for review and approval. The Deputy Secretary/designee shall be responsible for the overall agency formulation, presentation of YS' budget to the Legislature, and representing YS at budget hearings. The day-to-day financial management of YS shall be the responsibility of the Undersecretary/designee.
- C. Each Unit Head shall be responsible for the financial management and control of their respective budgets, and shall be responsible for ensuring that proper budget management is achieved. Oversight shall be provided by the Undersecretary/designee.
- D. OMF shall ensure that appropriate insurance coverage is provided, including but not limited to: worker's compensation, liability, automobile, physical damage, property, personal injury liability, public employee blanket bond, medical malpractice, and other miscellaneous coverage as deemed appropriate.
- E. Each Unit Head shall ensure that all bank accounts for their unit are properly secured or collateralized pursuant to La. R.S. 49:321. Each unit shall notify OMF of the type of accounts, account numbers, the dollar amounts in each account, as well as the bank's name and address.

Monthly “Bank Reconciliation” forms [see Attachment A.3.8 (a)] shall be submitted to OMF no later than 15 days following the end of the month. OMF shall monitor account activity and balances to determine if any under-collateralizations have or are likely to occur.

If the combined balance of all accounts at any financial institution not having an existing collateral agreement are likely to exceed the \$250,000 FDIC insurance limit for an interest and non-interest bearing account, the Undersecretary shall notify OMF to secure assistance to invest a portion of the funds in another financial institution.

The Undersecretary shall be notified any time account changes are required, whether it be the establishment of a new account, changes in investments, or a transfer of ownership of the financial institution; the units must coordinate efforts with the Undersecretary to monitor bank balances. The Undersecretary shall contact OMF to advise of these changes.

Those units operating under existing collateralization agreements shall be responsible for monitoring the bank accounts and notifying the Undersecretary, who shall contact OMF, if additional securities are required to be pledged in order to secure the account in keeping with the collateralization agreement.

F. Internal Controls

1. Each Unit Head shall appoint employees with a high standard of integrity and competency due to their education, experience and/or training to manage accounting procedures.
2. The Unit Head shall ensure that accounting transactions and other fiscal related activities are properly authorized, and that separation of duties is maintained in the assignment of responsibilities for authorizing, recording and auditing transactions, and maintaining the custody of assets.
3. When employees are assigned fiscal responsibilities, their supervisors shall provide training on applicable policies and procedures. Additional training may be requested from the OMF, if necessary.
4. All commodity based purchases shall be ordered, received and paid for through the LaGOV ERP SRM system maintained by the Division of Administration (DOA). (If over \$5,000 the requisition is entered in the LaGOV ERP SRM system.)

5. The agency's current Delegated Purchasing Authority is \$10,000.00. All other purchases within the agency's Delegated Purchasing Authority totaling \$5,000.00 or less may be processed through the LOTUS Notes 156-B database, and the payment may be processed through means of LaCarte Purchasing Card Program (refer to YS Policy A.3.10), Petty Cash (secure care facilities), or Imprest Check, unless the vendor requires another form of payment. Purchase requests that require payment through means of Interagency Funds Transfer or Travel Reimbursement shall be submitted to OMF for processing. Purchase Order requests shall be submitted through the LaGOV ERP SRM System.
6. Employees shall be permitted business-need-only access to data files and functions necessary to perform their assigned duties. The Unit Head/designee shall **immediately** notify the Undersecretary/designee any time an employee terminates employment with YS or transfers to another position or office within the unit for which access to data files is needed. The Undersecretary/designee shall then notify OMF.
7. All materials and supplies not available in warehouse or storeroom inventories, conference and convention registration, operating services, and equipment or major repairs shall be requisitioned by utilizing the LOTUS Notes 156-B database when the cost is \$5,000.00 or less, which automatically forwards requests to appropriate staff for approval when the "send" button is selected.
8. All materials and supplies not available in the warehouse or storeroom inventories, conference and convention registration, operating services, and equipment or major repairs shall be requisitioned by utilizing the LaGOV ERP SRM System to enter an ECPO Standard Purchase Order.
9. All requests for "as needed" services in the community based programs (P&P) inventory shall be submitted by utilizing the LOTUS Notes 156-A database.
10. All monies collected within each unit shall be placed daily in an officially designated and secure location by designated personnel. Deposits shall be made within 24 hours/or next business day per Chapter 6 (specifically section 6.63) of the Division of Administration and State Treasurer Policies and Procedures Manual. All deposits must be reported to OMF via submission of the Transfer of Monies form [see Attachment A.3.8(h)] with supporting documents (i.e. bank receipt, deposit ticket endorsed by financial institution and agency internal control forms). A copy of the deposit ticket endorsed by the financial institution shall be mailed to the Louisiana State Treasury office.

Capital Annex Building
1051 North 3rd Street
Baton Rouge, LA 70802

11. Facility procedures shall detail the specific duties and responsibilities for each employee to verify proper accounting for the receipt and transfer of monies, including cash, by completing the "Monetary Chain of Custody" form [see Attachment A.3.8 (b)]. These procedures shall be in compliance with "Generally Accepted Accounting Principles" and shall be reviewed periodically by OMF.
12. Problems such as cash shortages, inventory shortages, and any unauthorized warehouse transactions shall be immediately reported to the Unit Head by completing a UOR. The Unit Head shall investigate the problem and take corrective action as necessary. If the shortage exceeds amounts established by the Undersecretary, a report shall be submitted to the Undersecretary/ designee with a recommended solution pursuant to YS Policy No. A.3.11.

G. Petty Cash and Imprest Funds

1. Each secure care facility shall administer a Petty Cash Fund of no more than \$400 with a consistent approved balance in accordance with La. R.S. 39:233, and an Imprest Fund administered in accordance with La. R.S. 39:242. The Unit Head shall be deemed the custodian of the Petty Cash and Imprest Funds, and shall approve all vouchers for expenditure of these funds by ensuring a "Petty Cash Receipt" form [see Attachment A.3.8 (c)] is completed for each transaction. The Petty Cash Fund shall be maintained in a secure location in a fire proof safe with combination ingress. The Community Based Services Probation and Parole Offices do not have access to a Petty Cash Fund.
2. Petty Cash Funds shall be verified weekly on the "Petty Cash Verification" form [see Attachment A.3.8 (d)], and reconciled monthly on the "Petty Cash Reconciliation" form [see Attachment A.3.8 (e)].
3. As often as may be necessary, the custodian/designee shall replenish the Petty Cash Fund from the unit's Imprest Fund. Payment of reimbursement to the Petty Cash Fund shall be made to the custodian and shall be devoted to reimbursement thereof.
4. The Imprest Fund shall be maintained for the purpose of making disbursements requiring prompt cash outlay. As often as necessary, but no less than twice per month, to replenish the Imprest Fund from the unit's established operating appropriation and allotment, the custodian of the Imprest Fund shall submit a schedule of disbursements (Reimbursement Request), accompanied by appropriate vouchers, to OMF.

Payment shall be made to the custodian of the Imprest Fund by OMF via Electronic Fund Transfer (EFT) into the Imprest Account and shall be devoted to the reimbursement thereof.

H. Signature and Control on Checks

1. There shall be a limited number of employees who are authorized to sign Imprest checks for each unit as determined by the Undersecretary/designee. The signature of the Unit Head must appear on all checks issued.
2. Signature cards authorizing the appropriate individuals at each unit (normally the Unit Head), shall be submitted to the financial institution where the bank accounts are maintained. A copy of the signature cards shall be forwarded to OMF for informational and filing purposes.
3. The authorized signatures for checks drawn on the Facility "Youth Welfare Fund" (YWF) are the Youth Facility Director and authorized persons listed on the financial institutions banking signature card. Two signatures are required per check.
4. The authorized signatures for checks drawn on the Youth Banking System (refer to YS Policy No. B.9.3) are the DPS&C - Corrections Chief Fiscal Officer and Director of Offender Banking and Accounts Payable.

I. Quality Assurance

1. Audits shall be routinely performed pursuant to YS Policy No. C.5.3, with copies of the reports submitted to the Undersecretary/designee. Additional periodic audits may also be conducted by OMF.
2. Each Unit Head shall be responsible for providing a written response to audit findings and developing a "Corrective Action Plan" to correct any noted deficiencies. Written responses shall be forwarded to the Undersecretary/designee.

J. Youth Accounts

All youths' personal funds shall be accounted for using "Generally Accepted Accounting Principles" pursuant to facility "Standard Operating Procedures" (SOPs) and YS Policy No. B.9.3 and C.4.2.

VII. STAFF DEVELOPMENT:

- A. Supervisors shall provide necessary training on applicable policies and procedures, and automated systems to employees assigned fiscal responsibilities, prior to performing these duties.

Employees appointed to manage accounting procedures must have a high standard of integrity and competency due to the education, experience and/or training.

- B. Training shall be documented and entered in the Louisiana Employees Online (LEO) database by designated unit staff.
- C. Training documentation shall be maintained on file at the unit level.

Previous Regulation/Policy Number: A.3.8

Previous Effective Date: 06/16/2021

Attachments/References: A.3.8 (a) Bank Reconciliation Dec 2017.xls
A.3.8 (b) Monetary Chain of Custody 0913.doc
A.3.8 (c) Petty Cash Receipt June 2021.xls
A.3.8 (d) Petty Cash Verification 0913.doc
A.3.8 (e) Petty Cash Reconciliation 0913.doc
A.3.8 (f) Bank Charges and Reimbursements Dec 2017.doc
A.3.8 (g) Check Reconciliation Dec 2017.doc
A.3.8 (h) Transfer of Monies Dec 2017.doc
A.3.8 (i) Imprest Reimbursement LaGOV Coding Sheet May 2021.xlsx

BANK RECONCILIATION**A.3.8 (a)****AGENCY:****UNIT:****FUND NAME:** IMPREST FUND**BANK NAME:****ACCOUNT #:****PERIOD ENDED:****DATE PREPARED:****Adjustments: Balance:**

Balance Per Bank Statement 0

Subtotal 0

Less Outstanding Checks 0 0

Adjusted Bank Balance

Sub-Total (Should Equal Adjusted Bank Balance) 0

Plus - Reimbursements in Transit 0

Plus - Checks Issued - Reimbursement not Requested 0

Bank Fees 0

Petty Cash 0

Checks 0

*Overpayments/Shortages (Justification Required) 0

Plus - Petty Cash On Hand 0

Balance (Should Equal Total of Authorized Fund) 0

Overage/Shortage (if any). If so, MUST justify and rectify 0

Attachments:

Bank Statement

Reconciliation Detail

Outstanding Checks (Itemized)

Reimbursements in Transit (Itemized)

Reimbursements not Requested (Itemized)

Petty Cash Reconciliation

Overage/Shortage Justification

Dec-17

MONETARY CHAIN OF CUSTODY

FACILITY: _____

DATE: _____

Funds Disbursed					Funds Received				
NAME	SIGNATURE	DATE/ TIME	AMOUNT	SEAL /BAG NUMBER	NAME	SIGNATURE	DATE/ TIME	AMOUNT	SEAL/ BAG NUMBER

The individuals above certify that the funds given and received were counted and verified by both parties. Both parties observed are in agreement to the amount of money contained in the money box or bag at the time of disbursement. If applicable, upon return to fiscal staff, all funds received for goods/items sold are accounted for, and the funds for those items are contained in the money box/bag at the time of surrender. Any discrepancies shall be reported to the Unit Head in accordance with Youth Service Policy A.3.11, Financial and Property Loss Prevention Program, which includes the completion and submission of an Unusual Occurrence Report at the time that the discrepancies are discovered by all parties involved.

PETTY CASH RECEIPT					RECEIPT NO.
Office of Juvenile Justice					
Facility Name _____					
COST CENTER	GL ACCOUNT	ORDER	FUND	AMOUNT	DESCRIPTION OF ITEMS
CHECK NO.		AMOUNT OF CHECK	0	CHECK DATE	
RECEIVED BY _____		DATE _____		TITLE _____	
APPROVED BY _____		DATE _____		TITLE _____	

Petty Cash Verification

Week of: _____

Facility: _____

Allowable Amount of Cash on Hand: _____

CASH ON HAND	
	Currency
Twenty's	
Ten's	
Five's	
One's	
	Coins
Quarters	
Dimes	
Nickels	
Pennies	
TOTAL	

Outstanding Petty Cash Disbursements Awaiting Reconciliation

	Date	Name of Requestor	Ticket# / Description of Purchase	Amount
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
TOTAL:				_____

Verification Summary

Cash on Hand: _____ + Outstanding Disbursements: _____ =

Petty Cash Balance: _____

Prepared by: _____

Date: _____

Unit Head Verification: _____

Date: _____

Petty Cash Reconciliation

Month/Year: _____

Facility: _____

Allowable Amount of Cash on Hand: _____

CASH ON HAND	
	Currency
Twenty's	
Ten's	
Five's	
One's	
	Coins
Quarters	
Dimes	
Nickels	
Pennies	
TOTAL	

Outstanding Withdrawals, Receipts Paid, Reimbursements Not Requested

	Date	Name of Requestor	Ticket# / Description of Purchase	Amount
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

TOTAL: _____

Verification Summary

Cash on Hand: _____ + Outstanding Withdrawals, Receipts Paid, Reimbursements not requested: _____ +

 Reimbursements in Transit/Advances: _____ = **Petty Cash Balance:** _____

Prepared by: _____ Date: _____

Unit Head Verification: _____ Date: _____

September 2013

OFFICE OF JUVENILE JUSTICE

FACILITY NAME:

ADMINISTRATIVE IMPREST FUND

Period Ending:

Date Prepared:

BANK SERVICE CHARGES

Date

Amount

Total:

REIMBURSEMENTS IN TRANSIT

Date:

Check#

Amount

Total:

OFFICE OF JUVENILE JUSTICE

FACILITY NAME:

ADMINISTRATIVE IMPREST FUND

Period Ending:

Date Prepared:

OUTSTANDING CHECKS

<u>Date</u>	<u>Check#</u>	<u>Description</u>	<u>Amount</u>
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Total:

CHECKS ISSUED REIMBURSEMENTS NOT REQUESTED

<u>Date</u>	<u>Check#</u>	<u>Description</u>	<u>Amount</u>
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Total:

ORGANIZATIONS FOR YOUTH WELFARE AND CANTEEN FUNDS**FACILITY:** _____**DATE:** _____

REVENUE DESCRIPTION	REVENUE ORGANIZATION	REVENUE CODE	AMOUNT OF DEPOSIT	TICKET NO.
MISCELLANEOUS (contraband, restitution, etc.)				
CANTEEN SALES				
VENDING COMMISSIONS				
VISITATION CONCESSIONS SALES				
TELEPHONE COMMISSION				
RECYCLING COMMISSION				
MEAL SALES				
PHOTO SALES				
HOUSING MAINTENANCE				
SSA – SOCIAL SECURITY				
VOIDED RECEIPT				
MISCELLANEOUS				
OTHER				
TOTAL				

Prepared by: _____

Title: _____

Unit Head Verification: _____

Date: _____

OFFICE OF JUVENILE JUSTICE
SECURE CARE FACILITY NAME

A.3.8 (i)

Imprest Reimbursement LaGov Coding Sheet

Imprest Account # _____

FY 2021

Date of Request: _____

GL Account: (7 digits)	Amount	Business Area:	Fund #: (10 digits)	Cost Center: (10 digits)	WBS Element (if needed): (10 digits . 3 digits)	Grant # (if needed): (8 digits . 4 digits)	Functional Area (If Disaster): (7 digits)	Order (if needed): (12 digits)	Imprest Check #
Total	\$0.00								

Youth Facility Director - Custodian Name and Date (Print)

Administrative Program Manager - Designated Custodian Name and Date (Print)

Youth Facility Director - Custodian Name and Date (Signature)

Administrative Program Manager - Designated Custodian Name and Date (Signature)