

AUDIT REPORT



CITY OF NEW YORK
OFFICE OF THE COMPTROLLER
BUREAU OF MANAGEMENT AUDIT
WILLIAM C. THOMPSON, JR., COMPTROLLER

Audit Report on the Contract Management Unit of the Human Resources Administration's Home Care Services Program

ME05-063A

June 30, 2005



THE CITY OF NEW YORK
OFFICE OF THE COMPTROLLER
1 CENTRE STREET
NEW YORK, N.Y. 10007-2341

WILLIAM C. THOMPSON, JR.
COMPTROLLER

To the Citizens of the City of New York

Ladies and Gentlemen:

In accordance with the Comptroller's responsibilities contained in Chapter 5, §93, of the New York City Charter, my office has examined the adequacy of the Human Resources Administration's (HRA's) oversight of the home attendant and housekeeping services provided by its vendor agencies.

The results of our audit, which are presented in this report, have been discussed with HRA officials, and their comments have been considered in the preparation of this report.

Audits such as this provide a means of ensuring that City resources are used effectively, efficiently, and in the best interests of the public.

I trust that this report contains information that is of interest to you. If you have any questions concerning this report, please e-mail my audit bureau at audit@comptroller.nyc.gov or telephone my office at 212-669-3747.

Very truly yours,

A handwritten signature in cursive script that reads "William C. Thompson, Jr.".

William C. Thompson, Jr.

WCT/fh

Report: ME05-063A
Filed: June 30, 2005

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*The City of New York
Office of the Comptroller
Bureau of Management Audit*

**Audit Report on the
Contract Management Unit of the
Human Resources Administration's
Home Care Services Program**

ME05-063A

AUDIT REPORT IN BRIEF

This report determined whether the Human Resources Administration (HRA) Contract Management Unit (CMU) adequately monitored the home attendant and housekeeping services provided by its vendor agencies in Fiscal Year 2004. HRA's Home Care Services Program (HCSP) arranges for services to Medicaid-eligible clients by assessing client needs and determining the appropriate care required. HCSP provides assistance with activities of daily living, such as personal hygiene, mobility, toileting, and feeding, as well as with housekeeping services, such as cleaning, meal preparation, shopping, and laundry services. HRA contracts with a total of 70 different home care agencies to provide home attendant and housekeeping services. As of Fiscal Year 2004, the 57 home attendant agencies and 13 housekeeping agencies had caseloads ranging from 125 to 1,800 clients.

Audit Findings and Conclusions

The HRA Contract Management Unit adequately monitored the home attendant and housekeeping services provided by its contracted vendor agencies in Fiscal Year 2004. However, the audit found areas for improvement. CMU did not adequately follow up on incomplete pre-employment screening information on vendors' home care service employees. In addition, CMU did not enforce applicable standards relating to the timeliness of supervisory and assessment nursing visits. Further, while CMU's home care service reviews were generally adequate, there were some discrepancies relating to the accuracy of CMU's review of information contained in vendor documentation.

Audit Recommendations

The audit recommended that the HRA should:

- Enhance its efforts to ensure the accuracy of its reviews of vendor performance in the areas of recruitment and pre-employment screening.

- Require supervisory nursing visits every three months and assessment nursing visits every six months, unless a patient's medical condition allows these visits to be combined and conducted every six months.
- Continue to improve its efforts to ensure the accuracy of its reviews of vendor performance in relation to medical exams for home care service employees and to serious substantiated complaints.

HRA Response

On May 19, 2005, we submitted a draft report to HRA officials with a request for comments. We received a written response from HRA officials on June 10, 2005. In its response, HRA officials agreed with all of the audit's findings and recommendations.

The full text of HRA's comments is included as an addendum to this report.

INTRODUCTION

Background

The mission of the Human Resources Administration is to help individuals and families achieve and sustain their maximum degree of self-sufficiency. To fulfill this mission, HRA provides a broad range of programs and services, including income support, Medicaid, and home care services for elderly and disabled individuals.

HRA's Home Care Services Program arranges for services to Medicaid-eligible clients by assessing client needs and determining the appropriate care required. HCSP provides assistance with activities of daily living, such as personal hygiene, mobility, toileting, and feeding, as well as with housekeeping services, such as cleaning, meal preparation, shopping, and laundry services. Home care clients receive services based on doctors' orders and plans of care. There are four types of home care services available: home attendant, housekeeper, home health aide, and long-term home health care. For the purpose of this audit, we focused only on home attendant and housekeeping services.

HRA determines the home care eligibility of elderly and disabled Medicaid recipients and provides case management services through its nine Community Alternative Systems Agency offices. HRA contracts with a total of 70 different home care agencies to provide home attendant and housekeeping services. As of Fiscal Year 2004, the 57 home attendant agencies and 13 housekeeping agencies had caseloads ranging from 125 to 1,800 clients.

HCSP staff members from the Contract Management Unit annually conduct three field evaluation visits to each contracted home care vendor to assess vendor compliance with three sets of performance indicators covering 12 aspects of vendor operations. Each field visit covers one of the three sets of indicators, which relate to client services, the hiring of new home care service employees, and the continuing employment of home care service employees. The three sets of indicators for home attendant agencies are similar to those for housekeeping agencies. The field visits include reviews of random samples of home care service employee and client records, data analyses, and reports on findings. In addition, the CMU conducts office reviews of information provided by the vendors, as well as by HRA's Community Alternative Systems Agencies and its Complaint Tracking/Quality Assurance Unit. The results of the field visits and office reviews are included in HRA's overall assessments of vendor performance.

In Fiscal Year 2004, HRA provided home care services to 66,378 people. Expenditures of federal, state, and local funds for home care services provided by HRA in New York City totaled \$1.6 billion in Fiscal Year 2004.

Objective

The objective of this audit was to determine the adequacy of the HCSP Contract Management Unit's oversight of home attendant and housekeeping services.

Scope and Methodology

The period covered by this audit was July 1, 2003 to June 30, 2004 (Fiscal Year 2004).

To gain an understanding of HRA's oversight of its home care vendors, we interviewed HCSP officials and conducted a walk-through of HCSP operations. We also reviewed HRA's home care service agreements with contracted home care vendors, the *Official Compilation of Codes, Rules and Regulations of the State of New York*, 18 NYCRR §505.14, on personal care services, as well as the standards and procedures for evaluating vendor performance contained in HCSP's *Home Attendant Vendor Stat Reference Guide 1.0* and Field Evaluation Visit memoranda.

To determine the adequacy of the HCSP Contract Management Unit's field evaluation visits, we randomly selected 13 of the 70 vendors and reviewed field-visit work sheets, field visit reports, exit conference reports, and work papers completed for visits to these vendors during the period of January through April 2004.¹ We then performed similar programmatic reviews to those conducted by CMU staff members at the 13 randomly selected vendors. CMU reviewed a total of 906 vendor files at these 13 vendors during this period. We randomly selected and reviewed 274 of these vendor files (143 home care service employee files and 131 client files). We compared the results of our review of these vendor files to the field-visit work sheets prepared by CMU staff members during their field visits. We also examined CMU's office reviews of these vendors that corresponded with the indicators evaluated during the field visits.

The results of the above tests, while not statistically projected to their respective populations, provide us with a reasonable basis to assess CMU's monitoring of the services provided by its home care vendors.

This audit was conducted in accordance with generally accepted government auditing standards (GAGAS) and included tests of records and other auditing procedures considered necessary. This audit was performed in accordance with the audit responsibilities of the City Comptroller as set forth in Chapter 5, §93, of the New York City Charter.

Discussion of Audit Results

The matters in this report were discussed with HRA officials during and at the conclusion of this audit. A preliminary draft report was sent to HRA officials on April 28, 2005, and was discussed at an exit conference held on May 5, 2005. On May 19, 2005, we submitted a draft report to HRA officials with a request for comments. We received a written response from HRA

¹ We randomly selected 10 of the 57 home attendant agencies and three of the 13 housekeeping agencies. In order to cover all three sets of performance indicators for both types of agencies, we randomly selected one housekeeping agency that CMU visited between September and December 2003 because CMU did not review any housekeeping agency for one of the three sets of indicators between January and April 2004.

officials on June 10, 2005. In its response, HRA officials agreed with all of the audit's findings and recommendations.

The full text of HRA's comments is included as an addendum to this report.

FINDINGS AND RECOMMENDATIONS

The HRA Home Care Services Program's Contract Management Unit adequately monitored the home attendant and housekeeping services provided by its contracted vendor agencies in Fiscal Year 2004. However, the audit found areas for improvement. CMU did not adequately follow up on incomplete pre-employment screening information on vendors' home care service employees. In addition, CMU did not enforce applicable standards relating to the timeliness of supervisory and assessment nursing visits. Further, while CMU's home care service reviews were generally adequate, there were some discrepancies relating to the accuracy of CMU's review of information contained in vendor documentation.

These findings are discussed in more detail in the following sections of the report:

The HCSP Contract Management Unit's Monitoring of Home Care Vendor Contracts Was Adequate

The HCSP Contract Management Unit adequately monitored the home attendant and housekeeping services its vendor agencies provided in Fiscal Year 2004. CMU contract managers conduct field visits to each contracted home care vendor to assess vendor compliance with home care regulations and contract provisions. CMU field visits include a random sampling of vendors' home care service employee and client records, an analysis of those records, and a rating for each performance indicator tested. CMU staff members also conduct office reviews of information relating to these indicators that is received from vendors and from other HRA units. The CMU office reviews consist primarily of the examination of the training certification of new home attendants and of the appropriateness of vendor actions relating to substantiated complaints.²

The three field evaluation visits conducted each year at each home care service agency assess compliance with three sets of indicators relating to 12 aspects of agency operations. The following is a brief description of each indicator:

1. Supervisory and Assessment Nursing Visits – determines whether the vendor conducted the required number of nursing visits to clients within a 12-month period.
2. Other Client Contacts – determines whether the vendor conducted the required number of client contacts within the required time frame.
3. Advanced Directives – determines whether the vendor provided the required medical directive information (such as a health care proxy or a Do-Not-Resuscitate order) to clients.
4. Case Referrals – determines whether the vendor initiated services to clients within the required time frame.

² CMU also receives numerical data from the Community Alternative Systems Agencies and the Complaint Tracking/Quality Assurance Unit that it incorporates into its overall assessment of a vendor.

5. Recruitment and Screening – determines whether vendor pre-employment screening for home care service employees was completed according to HRA guidelines.
6. Initial Medical Exam – determines whether home care service employees received medical exams and drug screens prior to the start of employment.
7. Training Prior to Hire – determines whether the housekeeping vendor provided training to new hires before they began to provide client services.
8. Client Complaints – determines whether client complaints were accurately classified, documented and reported to HRA for the period reviewed.
9. In-Service Training – determines whether the vendor provided the required annual in-service training.
10. Annual Medical Exam – determines whether the home care service employees received annual medical exams and drug screens.
11. Home Attendant/Housekeeper Evaluation – determines whether the vendor conducted annual performance evaluations.
12. Resume Review – determines whether new hires for the top three managerial-level positions met the minimal qualifications stated in the vendor agreement.

Each field visit assesses compliance with one of the three sets of indicators. The sets of indicators are: client services (indicators 1 through 4); the hiring of new home care service employees (indicators 5 through 7); and client complaints and the continuing employment of home attendants (indicators 8 through 11). The twelfth indicator (Resume Review) is reviewed during each field visit. The home attendant and housekeeping indicators are similar except that the case referral indicator does not apply to housekeeping services, and the indicator relating to the training of new home care service employees is a field visit indicator for housekeeping agencies but an office review indicator for home attendant agencies.

We randomly selected for review 13 of HRA's 70 home care service vendors. Our review of CMU field-visit work sheets completed between January and April 2004 for these 13 vendors found that the work sheets generally reflected the information contained in the client and home care service employee files for eight of the 12 performance indicators evaluated. The eight indicators are Other Client Contacts, Advance Directives, Case Referrals, Training Prior to Hire, Client Complaints, In-Service Training, Home Attendant/Housekeeper Evaluations, and Resume Review.

For the vendors in our sample, we also examined CMU's office reviews that corresponded with the indicators evaluated during CMU's January to April 2004 field visits. One type of CMU office review consists of the examination of the training certification of new

home attendants. We reviewed this area for the four vendors in our sample for which CMU evaluated compliance with the Recruitment and Screening indicator during its field visits. For home attendants hired between January and March 2004, vendor new-hire lists and copies of training certificates forwarded to CMU showed that the home attendants had received the required training from an approved program.

Weaknesses in HRA's Review of Vendors' Recruitment and Pre-employment Screening

Our review of 87 home care service employee files from five vendors found weaknesses relating to CMU's review of vendors' pre-employment screening process. In 11 of the 87 files reviewed, our results did not correspond with CMU's findings. Contrary to CMU's findings, we found that these 11 vendor files lacked complete pre-employment screening information.

With regard to the employment screening process, HRA's home care services agreements with contracted home care vendors state that all prospective home care service employees must be screened through HRA's central registry to determine whether the employee has been employed by another home care contractor. This registry check must be conducted within the three months prior to the home care service employee being hired. The agreement also states that information provided by the former employer must include, at a minimum, the dates of employment and an indication whether the former employer would rehire the prospective employee. If the former employer does not indicate whether it would rehire the prospective employee, or indicates that it would not rehire the person but does not state why, the vendor must contact the former employer in an attempt to obtain this information.

In addition, if the vendor cannot verify at least two references from former employers identified on the central registry, the vendor must attempt to secure and verify all other listed job references on the employment application. The vendor may use personal references only if there is no prior work history on the central registry and other job references cannot be obtained. A vendor may not employ a prospective home care service employee until they have obtained and verified all necessary employment and personal references.

In 11 of the 87 home care service employee files we reviewed, our findings did not correspond with CMU's findings as indicated on their field-visit work sheets. Specifically, we found the following:

- Five employee files lacked documentation that the vendor followed up on incomplete references submitted by former employers identified on the central registry. For these home care service employees, former employers submitted references that either did not indicate whether they would rehire the person or indicated that they would not rehire the person but did not specify why. In none of the five instances was there any evidence that the vendors followed up with the former employers to obtain this information. However, CMU's work sheet reported that the vendor met the pre-employment screening requirements for these employees.

- Two files showed that the vendor conducted a central registry check more than three months prior to the attendant's start of employment. However, CMU's work sheet reported that the vendor had conducted the registry checks within the required timeframe.
- Two files showed that the vendor did not verify all necessary employment and personal references prior to the attendant's start of employment. However, CMU did not note this on its field-visit work sheets.
- One file lacked other employment or personal references to substitute for incomplete references submitted by former employers listed on the central registry. However, CMU's work sheet reported that the vendor met the pre-employment screening requirement for this employee.
- One file lacked evidence of a central registry check. However, CMU's field-visit work sheet reported that the vendor had conducted a registry check.

HRA's procedures for pre-employment screening of home attendants can be strengthened by ensuring that vendors conduct the necessary follow-up of references submitted. Thorough pre-employment screening of home attendants will help ensure that all the necessary references are obtained for those entrusted to provide client care.

Recommendation

1. HRA should enhance its efforts to ensure the accuracy of its reviews of vendor performance in the areas of recruitment and pre-employment screening.

Agency Response: "We agree with the finding and recommendation. However, in our view the weakness identified here reflects the complexity of documenting performance reviews conducted in the field. The primary role of the contract manager is to review contractor performance on a face-to-face basis and assure that problems are promptly identified and that the contractor is advised to correct them. The written record is prepared on the spot, and is left with the vendor as a reminder of the verbal review. Traditionally, the goal of our reviews has been for the contract manager to ensure that the identified problems are corrected; and documentation of his/her findings becomes a secondary matter. To address the weakness, we have re-designed the form on which the managers document compliance. This new form will prompt the managers to address the very detailed requirements for recruitment and pre-employment screening.

"In addition, the Contract Management Unit (CMU) staff reviewed the requirements for recruitment and pre-employment screening of Home Attendants and Housekeepers at the April 29, 2005 monthly staff meeting. Each of the requirements was discussed and clarified. Further, beginning with the next round of field evaluation visits in September 2005, the contract managers will use the revised spreadsheet analysis form for Recruitment and Screening mentioned above. Two new fields 'Prior Vendor Would

Rehire Y/N' and 'Follow Up for Would Not Rehire-Y/N' have been added. A copy of the revised form is enclosed.”

HRA Is Not Enforcing Applicable Standards on Supervisory and Assessment Nursing Visits

State regulations (18 NYCRR §505.14), HRA’s written guidelines (*Home Attendant Vendor Stat Reference Guide 1.0*), and HRA’s written agreements with home care service vendors require supervisory nursing visits to clients at least every three months and assessment nursing visits at least every six months.³ Supervisory nursing visits provide home care service employee supervision and on-the-job training to ensure that the client’s needs are met. Assessment nursing visits evaluate the condition of the client. Despite these written standards, CMU officials informed us that they actually only require home attendant agencies to conduct one supervisory visit every four months and one assessment visit every seven months. Further, CMU officials informed us that they only require housekeeping agencies to conduct one nursing visit per year.

We found that CMU field-visit work sheets generally reflected the information contained in 80 client files at four home attendant agencies, and generally indicated that the vendors adhered to the four and seven month time periods for conducting nursing visits.⁴ However, the CMU work sheets also indicated that in many instances the vendors were not complying with the three and six month standards for nursing visits. HRA should enforce New York State regulations, as well as its own written guidelines and agreements, and require supervisory nursing visits every three months and assessment nursing visits every six months, unless a patient’s condition allows these visits to be combined and conducted every six months.

Recommendation

2. HRA should require supervisory nursing visits every three months and assessment nursing visits every six months, unless a patient’s medical condition allows these visits to be combined and conducted every six months.

Agency Response: “We agree with the finding and recommendation. The HRA contract with the vendors requires supervisory nursing visits every three months and assessment nursing visits every six months. The contract manager reviews the record to assure that these visits were conducted timely. However, the visits must be conducted in the home. Routinely conducting any kind of service in the home is subject to the vagaries of daily life. Particularly when dealing with a frail and vulnerable population it must be recognized that a certain degree of flexibility is called for in meeting these requirements, since there may be instances where a visit to the home must be postponed – for example,

³ The State regulations allow the supervisory and assessment nursing visits to be combined and conducted every six months when the client is self-directing and the patient’s medical condition is not expected to require any change in the level, amount or frequency of personal care services.

⁴ We also reviewed 20 files for clients at one housekeeping agency. CMU’s field-visit work sheets generally reflected the information contained in these 20 client files, and indicated that the housekeeping agency conducted at least one nursing visit per year.

the client may be away from the home at the scheduled date, perhaps hospitalized or visiting family members elsewhere. HRA's policy is that in such circumstances the provider may carry out the visit within 30 days of the original visit date. The ongoing schedule of visits must be maintained, so that the next visit falls at the regularly scheduled due date. In our view, the problem identified here is that the contract manager did not completely document the reason for the delay in making a visit, including full documentation of the circumstances, which resulted in the visit being made later than the due date. The Contract Manager's field visit instructions and spreadsheet analysis form for Supervisory/Assessment Nursing Visit, which is used for on-site documentation of the contract manager's review findings, will be clarified and reworded to reflect this requirement more accurately. The revised form will be presented at the next Contract Management Unit staff meeting and placed into service beginning with the next round of field visit evaluations in September 2005. A copy of the revised form is enclosed."

Some Documentation Discrepancies In Certain Performance Areas

CMU's documentation of vendor performance on some indicators was not always accurate. In our review of two of the 12 performance areas—Initial Medical Exams and Annual Medical Exams—CMU field-visit work sheets did not always accurately reflect the information contained in the vendors' home care service employee files. In addition, CMU did not always ensure that the vendor provided all the documentation needed for the CMU office review of serious substantiated complaints. To ensure the accurate reporting of vendor performance and the proper provision of home care services to clients, CMU should more carefully review and document vendor information in these areas.

To assess vendor compliance in the area of Initial Medical Exams, CMU looks for medical exams and drug screenings of new hires prior to the start of employment. For vendor compliance in the area of Annual Medical Exams, CMU reviews vendor files for medical exams and drug screenings of current home care service employees. For both performance indicators, CMU checks the medical documentation for any atypical medical or drug findings and, if there are any, whether the vendor appropriately followed up on these findings.

In the areas of Initial Medical Exams and Annual Medical Exams, we reviewed a total of 143 home care service employee files from eight vendors. In seven of the 143 files reviewed, our findings did not correspond with CMU's findings. Specifically, the medical exams in all seven files identified atypical medical results that CMU did not note in its field-visit work sheets. In fact, the medical exams for two of the seven files indicated that the employees were not currently employable due to their atypical medical conditions. Because CMU did not document these atypical medical conditions on its work sheets, CMU did not check whether the vendor appropriately followed up on these conditions. Nevertheless, we found that that the vendor did appropriately follow up on these atypical medical results.

For the vendors in our sample, we also examined CMU's office reviews that corresponded with the indicators evaluated during CMU's January to April 2004 field visits. In addition to the office review of home attendant training certification, CMU reviews serious

complaints that were investigated and substantiated by HRA's Complaint Tracking Unit. CMU reviews serious substantiated client complaints to determine the adequacy of the vendor's hiring and supervision of the home attendant involved in the complaint, as well as the vendor's personnel and administrative response. We reviewed this area for the four vendors in our sample for which CMU evaluated compliance with the Client Complaints indicator during the field visits. Serious complaints were substantiated for only one of the four vendors between January and April 2004. Our review of the two serious substantiated complaints for this vendor found that for one of these complaints, which related to the home attendant's failure to seek medical attention for a client's injury, the vendor did not provide all of the necessary documentation. Specifically, the vendor only had one incomplete employer reference for the home attendant involved in the complaint. The vendor did not provide HRA with other employment or personal references to show that it had obtained at least two complete references. CMU did not document this accurately during its office review of this complaint.

More accurate CMU reviews of vendor documentation will help to ensure that any vendor weaknesses are promptly brought to the attention of the home care providers.

Recommendation

3. HRA should continue to improve its efforts to ensure the accuracy of its reviews of vendor performance in relation to medical exams for home care service employees and to serious substantiated complaints.

Agency Response: "We agree with the finding and recommendation. At the April 29, 2005 Contract Management Unit Staff Meeting, the preliminary findings of the Comptroller's audit were discussed. Accordingly, requirements for medical exams, atypical medical findings, and documentation review of serious substantiated complaints were reviewed and clarified as well as the need for accuracy in documentation. Additionally, it was noted that the majority of the documentation discrepancies were attributed to a field visit conducted by a Contract Manager who at the time of the field visit had been a relatively new hire. The function of home care field review is complex and difficult to learn. To address the need to ensure the accuracy of reviews by newly hired staff, the Contracts Management Unit will expand the training and supervisory oversight, and the period of supervised field visits will be lengthened. Further, supervisory staff will begin to review randomly selected field reports against vendor records."



HUMAN RESOURCES ADMINISTRATION
OFFICE OF AUDIT SERVICES AND
ORGANIZATIONAL ANALYSIS
180 WATER STREET
NEW YORK, NEW YORK 10038
(212) 331-3978 Fax: (917) 639-0219
E-mail: brownhe@hra.nyc.gov

VERNA EGGLESTON
Administrator/Commissioner

HOLLY E. BROWN
Executive Deputy Commissioner

June 10, 2005

Mr. Greg Brooks
Deputy Comptroller
The City of New York
Office of the Comptroller
1 Centre Street
New York, NY 10007-2341

Re: Draft Audit Report on the Contract
Management Unit of the Human
Resources Administration's Home
Care Services Program
ME05-063A

Dear Mr. Brooks:

We have reviewed the referenced draft audit report on the Contract Management Unit of the Human Resources Administration's Home Care Services Program (ME05-063A). We are pleased that the auditors observed that the contract managers have performed their functions satisfactorily. Feedback provided to enhance this process is useful and always appreciated. Documenting the very complex contract management process conducted by staff who visit the providers three times each year, and review their findings with the provider immediately is an integral component of the review process.

Following are our responses to the audit findings and recommendations:

Auditors' Finding:

Weaknesses in HRA's Review of Vendors' Recruitment and Pre-employment Screening.

Auditor's Recommendation:

HRA should enhance its efforts to ensure the accuracy of its review of vendor performance in the areas of recruitment and pre-employment screening.

Agency's Response:

We agree with the finding and recommendation. However, in our view the weakness identified here reflects the complexity of documenting performance reviews conducted in the field. The primary role of the contract manager is to review contractor performance on a face-to-face basis and assure that problems are promptly identified and that the contractor is advised to correct them. The written record is prepared on the spot, and is left with the vendor as a reminder of the verbal review. Traditionally, the goal of our reviews has been for the contract manager to ensure that the identified problems are corrected; and documentation of his/her findings becomes a secondary matter. To address the weakness, we have re-designed the form on which the managers document compliance. This new form will prompt the managers to address the very detailed requirements for recruitment and pre-employment screening.

In addition, the Contract Management Unit (CTU) staff reviewed the requirements for recruitment and pre-employment screening of Home Attendants and Housekeepers at the April 29, 2005 monthly staff meeting. Each of the requirements was discussed and clarified. Further, beginning with the next round of field evaluation visits in September 2005, the contract managers will use the revised spreadsheet analysis form for Recruitment and Screening mentioned above. Two new fields "Prior Vendor Would Rehire Y/N" and "Follow Up for Would Not Rehire - Y/N" have been added. A copy of the revised form is enclosed.

Auditors' Finding:

HRA Is Not Enforcing Applicable Standards on Supervisory and Assessment Nursing Visits.

Auditors' Recommendation:

HRA should require supervisory nursing visits every three months and assessment nursing visits every six months. Unless a patient's medical condition allows these visits to be combined and conducted every six months.

Agency's Response:

We agree with the finding and recommendation. The HRA contract with the vendors requires supervisory nursing visits every three months and assessment nursing visits every six months. The contract manager reviews the record to assure that these visits were conducted timely. However, the visits must be conducted in the home. Routinely conducting any kind of service in the home is subject to the vagaries of daily life. Particularly when dealing with a frail and vulnerable population it must be recognized that a certain degree of flexibility is called for in meeting these requirements, since there may be instances where a visit to the home must be postponed - for example, the client may be away from the home at the scheduled date, perhaps hospitalized or visiting family members elsewhere. HRA's policy is that in such circumstances the provider may carry out the visit within 30 days of the original visit date. The ongoing schedule of visits must be maintained, so that the next visit falls at the regularly scheduled due date. In our view, the problem identified here is that the contract manager did not completely document the reason for the delay in making a visit, including full documentation of the circumstances, which resulted in the visit being made later than the due date. The Contract Managers' field visit instructions and spreadsheet analysis form for Supervisory / Assessment Nursing Visit, which is used for on-site documentation of the contract manager's review findings, will be clarified and reworded to reflect this requirement more accurately. The revised form will be presented at the next Contract Management Unit staff meeting and placed into service beginning with the next round of field visit evaluations in September 2005. A copy of the revised form is enclosed.

Auditors' Finding:

Some Documentation Discrepancies In Certain Performance Areas

Auditors' Recommendation:

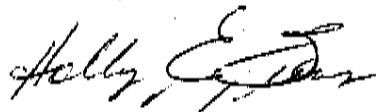
HRA should continue to improve its efforts to ensure accuracy of its reviews of vendor performance in relation to medical exams for home care service employees and serious substantiated complaints.

Agency's Response:

We agree with the finding and recommendation. At the April 29, 2005 Contract Management Unit Staff Meeting, the preliminary findings of the Comptroller's audit were discussed. Accordingly, requirements for medical exams, atypical medical findings, and documentation review of serious substantiated complaints were reviewed and clarified as well as the need for accuracy in documentation. Additionally, it was noted that the majority of the documentation discrepancies were attributed to a field visit conducted by a Contract Manager who at the time of the field visit had been a relatively new hire. The function of home care field review is complex and difficult to learn. To address the need to ensure the accuracy of reviews by newly hired staff, the Contracts Management Unit will expand the training and supervisory oversight, and the period of supervised field visits will be lengthened. Further, supervisory staff will begin to review randomly selected field reports against vendor records.

It is the goal of HRA to provide our consumers with the services that meet their needs in an efficient and compliant manner. We remain committed to ensuring our vendors provide the best services to our clients. Should you have any questions regarding this response, please contact Hope Henderson, Director, Bureau of Audit Coordination at (212) 331-3522.

Sincerely,



Holly E. Brown

cc:

Commissioner Eggleston
R. O'Halloran

