



City of New York

OFFICE OF THE COMPTROLLER

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COMPTROLLER



MANAGEMENT AUDIT

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Deputy Comptroller for Audit

Audit Report on the Department for the
Aging's Monitoring of Senior Centers

MG16-111A

June 27, 2017

<http://comptroller.nyc.gov>



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SCOTT M. STRINGER

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To the Residents of the City of New York:

My office has audited the New York City Department for the Aging's (DFTA's) monitoring of senior centers with which it contracts. We audit City entities such as DFTA as a means of increasing accountability and ensuring that City programs operate as intended and in the best interest of the public.

The audit found that DFTA's monitoring of its contracted senior centers needs to be improved. Specifically, DFTA did not adequately track previously-identified deficiencies found in the centers or the implementation of the corrective action plans established by the centers to remediate the deficiencies. The failure to adequately address longstanding problems may have been exacerbated by the absence of established standards to guide DFTA staff on whether, when, and how they should assist senior centers to improve their conditions and operations, especially for centers located at the New York City Housing Authority (NYCHA) with issues of basic maintenance. In addition, DFTA has not established performance or productivity benchmarks for its staff. Finally, DFTA lacks an effective complaint tracking system that would assist management in identifying problem areas needing corrective action.

The audit makes 10 recommendations to DFTA, including that DFTA should establish a system that tracks all serious deficiencies and recurring problems found at the centers; work with NYCHA officials to enhance communication and coordination of efforts regarding the deficiencies and required repairs at senior centers located in NYCHA facilities; create policies and procedures for its program officers, nutritionists, and other relevant agency personnel; conduct a study to determine the adequacy of its staffing and structure in relation to the number of senior centers it oversees; and maintain a record of all complaints it receives pertaining to the senior centers.

The results of the audit have been discussed with DFTA officials, and their comments have been considered in preparing this report. Their complete written response is attached to this report.

If you have any questions concerning this report, please e-mail my Audit Bureau at audit@comptroller.nyc.gov.

Sincerely,

Scott M. Stringer

TABLE OF CONTENTS

EXECUTIVE SUMMARY	1
Audit Findings and Conclusions	1
Audit Recommendations.....	2
Agency Response.....	2
AUDIT REPORT	3
Background	3
Objective.....	4
Scope and Methodology Statement.....	4
Discussion of Audit Results with DFTA.....	4
FINDINGS AND RECOMMENDATIONS	5
Weaknesses in DFTA’s Monitoring of Senior Centers Need Improvement.....	5
DFTA Does Not Ensure That All Senior Centers’ Deficiencies Are Corrected	6
Safety and Health Conditions at Centers Are Not Adequate	7
Lack of Standards for Assisting Senior Centers	15
DFTA Does Not Monitor the Adequacy of Its Own Staffing	17
Recommendations	18
OTHER ISSUES	20
DFTA Does Not Formally Track Complaints Received Pertaining to the Senior Centers	20
VENDEX Evaluations Were Not Consistently Performed.....	20
Recommendations	21
DETAILED SCOPE AND METHODOLOGY.....	22
APPENDIX I	24
APPENDIX II	25
APPENDIX III	26
ADDENDUM	

THE CITY OF NEW YORK OFFICE OF THE COMPTROLLER MANAGEMENT AUDIT

Audit Report on the Department for the Aging's Monitoring of Senior Centers MG16-111A

EXECUTIVE SUMMARY

The objective of this audit was to determine whether the Department for the Aging (DFTA) adequately monitors the senior centers with which it contracts to ensure that they are in a safe and clean condition in accordance with DFTA's procedures and guidelines.

DFTA is responsible for planning, administering and coordinating the provision of services designed to help many of New York City's (the City's) senior citizens maintain their independence and participate in their communities. DFTA provides services to seniors directly and through contracts with community-based organizations. In connection with its oversight of contracted service providers, DFTA's Bureau of Community Services unit conducts both announced and unannounced formal assessments four times each fiscal year of each DFTA-contracted senior center through inspections by program officers and nutritionists.¹ At the conclusion of each assessment visit, DFTA issues an Assessment Report to the center's director, detailing the results of the visit and, if applicable, the deficiencies that the center is required to rectify.

During Fiscal Year 2016, DFTA contracted with 249 senior centers and, among many other services, provided 7.6 million meals (breakfast, lunch and dinner) to clients at those senior centers. During that same period, DFTA employed 16 program officers and 10 nutritionists to oversee the senior centers.

Audit Findings and Conclusions

DFTA's monitoring of its contracted senior centers needs to be improved. Although DFTA has standards, procedures, and personnel in place to monitor the approximately 250 senior centers, during our audit scope, it did not adequately track identified deficiencies found in the centers or the implementation of corrective action plans established to remediate them. Those oversight failures result, in part, from a lack of continuity in DFTA's monitoring efforts from year to year. Based on the findings of this and previous audits, it appears that DFTA's monitoring shortcomings have allowed some City-funded senior centers to operate with chronic unaddressed deficiencies.²

¹ Program officers and nutritionists are each required under DFTA guidelines to conduct one announced and one unannounced visit per fiscal year, for a total of four visits by DFTA personnel to each center. The City's fiscal year runs from July 1 to June 30. For example, Fiscal Year 2016 began on July 1, 2015.

² Our office has previously issued four audit reports that address the weaknesses of DFTA's monitoring of senior centers : (1) *Audit Report on the Monitoring of Senior Center Conditions by the Department for the Aging*, (# MG01-194A), Issued June 28, 2002;

The failure to adequately address longstanding problems may have been exacerbated by the absence of established standards to guide DFTA staff on whether, when, and how they should assist senior centers to improve their conditions and operations. Such standards might include guidance on how DFTA staff could assist the senior centers in their interactions with other City agencies to help facilitate their obtaining permits, inspections, and in some cases—specifically with the New York City Housing Authority (NYCHA)—basic maintenance. The current absence of such standards and guidance is of particular concern given the degree of problems we observed in conditions at senior centers located in NYCHA developments and with the lack of required permits from City agencies.

Further, we found that DFTA has not established performance or productivity benchmarks for its staff, some of whom expressed concerns to auditors about their workload levels. Finally, DFTA lacks an effective complaint tracking system that would assist management in identifying problem areas needing corrective action.

Audit Recommendations

To address the issues raised by this audit, we make 10 recommendations, including the following:

- DFTA should establish an effective information system that tracks all serious deficiencies and recurring problems found at each senior center until they are resolved.
- DFTA should work with NYCHA officials to enhance communication and coordination of efforts regarding the deficiencies and required repairs at senior centers located in NYCHA facilities.
- DFTA should create policies and procedures for its program officers, nutritionists, and other relevant agency personnel in sufficient detail--and with a resource guide and examples where warranted--to ensure that DFTA staff are aware of the kinds of assistance they should provide to centers to help facilitate their interactions with City agencies and third parties, and to achieve compliance with DFTA's standards for the safe conditions and effective operation of senior centers.
- DFTA should conduct a study to determine the adequacy of its staffing and structure in relation to the number of senior centers it oversees, and whether its current staffing levels are adequate to ensure thorough assessments, monitoring, follow-up, and assistance to senior centers.
- DFTA should maintain a record of all complaints it receives pertaining to the senior centers so that it can track and monitor the resolution of the complaints and identify any specific areas that require additional attention.

Agency Response

In its response, DFTA generally agreed with the audit's 10 recommendations.

(2) *Follow-up Audit Report on the Monitoring of Senior Center Conditions by the Department for the Aging*, (#MG05-093F), Issued June 17, 2005; (3) *Audit Report on the Monitoring of the Physical Conditions of Senior Citizen Centers by the Department for the Aging*, (#MD08-063A), Issued June 30, 2008; and (4) *Audit Report on the Department for the Aging's Monitoring of Senior Centers*, (#FM13-056A), Issued August 2, 2013.

AUDIT REPORT

Background

DFTA is the New York City agency that plans, administers and coordinates the provision of services that help many of the City's senior citizens maintain their independence and participate in their communities. It receives federal, New York State, and City funds to provide services for senior citizens and provides those services directly and through contracts with community-based organizations. The services include hot meals and activities at senior centers, home care, home-delivered meals, case management, and transportation.

DFTA manages contracts with community-based organizations and is responsible for ensuring service quality at the nearly 250 senior centers that those organizations operate throughout the five boroughs. As part of its oversight, DFTA's Bureau of Community Services unit conducts both announced and unannounced formal assessments four times each fiscal year of each DFTA-contracted senior center, through inspections by program officers and nutritionists. In their assessments, the program officers and nutritionists are required to evaluate each center's social and nutritional programs, as well as its overall operation and maintenance, including its compliance with DFTA's Performance Standards for Contracted Services.

At the beginning of each fiscal year, DFTA program officers and nutritionists are each required to perform one announced (pre-arranged) visit to every center as part of what DFTA calls an "initial assessment." At the conclusion of each of the assessment visit, DFTA issues an Assessment Report to the center's director, detailing the results of the visit and, if applicable, the deficiencies that the center is required to rectify. When deficiencies are found, the center will have 15 days to respond to the Assessment Report by creating a Corrective Action Plan that details the steps it has taken and/or will take to resolve the issues and the anticipated date of completion. DFTA program officers and nutritionists are also required to each conduct one unannounced follow-up visit to each center to determine whether the conditions previously cited, if any, have been corrected, and to identify any new deficiencies if they exist. The Assessment Reports and the results of the follow-up visits are entered into DFTA's computerized assessment tool, the Program Assessment System (PAS).

During Fiscal Year 2016, DFTA contracted with 249 senior centers and, among other things, provided 7.6 million congregate meals (breakfast, lunch and dinner) to clients who participate in those senior centers' activities. During that same period, DFTA employed 16 program officers and 10 nutritionists to oversee DFTA's contracts with the senior centers. The program officers and nutritionists are charged with overseeing the conditions at the centers to ensure their compliance with DFTA standards, and if needed, assisting the centers with related areas of concern. Nutritionists are also responsible for ensuring health and safety standards in the kitchen and for approving the menu of food served to the seniors.

In addition to the senior centers, DFTA oversees 74 other programs, including the Home Delivered Meals program and Transportation program. Program officers are responsible for overseeing all 74 programs, while the nutritionists have responsibility for overseeing 55 of them.

Objective

To determine whether DFTA adequately monitors the senior centers with which it contracts to ensure that they are in a safe and clean condition in accordance with DFTA's procedures and guidelines.

Scope and Methodology Statement

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objective. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objective. This audit was conducted in accordance with the audit responsibilities of the City Comptroller as set forth in Chapter 5, §93, of the New York City Charter.

The scope of this audit was the period covering Fiscal Years 2016 and 2017, through the end of the observation period on February 24, 2017. Please refer to the Detailed Scope and Methodology at the end of this report for the specific procedures and tests that were conducted.

Discussion of Audit Results with DFTA

The matters covered in this report were discussed with DFTA officials during and at the conclusion of this audit. A preliminary draft report was sent to DFTA and discussed at an exit conference held on May 23, 2017. We submitted a draft report to DFTA with a request for comments and received a written response from the agency on June 20, 2017.

In its response, DFTA generally agreed with the audit's 10 recommendations. However, DFTA takes issue with our methodology for selecting the 30 centers that we visited. DFTA argues that by selecting sites with known deficiencies that had been identified either in a prior audit or in DFTA's own initial assessment, "the findings for this atypical sample of 30 centers should not be extrapolated to the senior center network overall."

We disagree with DFTA's assessment. By design, we selected a sample of centers with past problems. We did not extrapolate our findings of this audit to all senior centers. Rather, we clearly indicated that our findings relate to only those centers where deficiencies had previously been identified by DFTA. The objective of this audit was to assess DFTA's monitoring of senior centers. As such, our methodology included a review of DFTA's on-going monitoring efforts over a period of time, especially as it pertains to those centers with known deficiencies.

After carefully reviewing DFTA's arguments, we find no basis for altering our audit findings. The full text of DFTA's response is included as an addendum to this report.

FINDINGS AND RECOMMENDATIONS

We found weaknesses in DFTA's monitoring of its contracted senior centers that need to be improved. Although DFTA has standards, procedures, and personnel in place to monitor the approximately 250 senior centers, during our audit scope, its tracking of the deficiencies identified and corrective action plans was inadequate and lacked continuity from year to year. Based on the findings of this and previous audits, it appears that DFTA's monitoring shortcomings have allowed some City-funded senior centers to operate with chronic deficiencies that have remained unaddressed for years. Our inspections of 30 senior centers found that the majority had one or more conditions that raised health, safety, and maintenance-related concerns, including unstable stairs and handrails, peeling paint, water damage, and obstructed exits and emergency doors. We also identified centers that were missing required fire, building and health permits.

Moreover, we found that DFTA has no standards to guide its program officers and nutritionists on whether, when, and how they should actively assist senior centers to improve their conditions and operations. During the audit, DFTA staff and upper management mentioned the need for DFTA to help the centers solve problems, and the audit revealed a need for DFTA to develop standards and procedures for the agency to do so, particularly to guide staff on when and how they can assist the centers in their interactions with other City agencies that issue permits, conduct inspections, and in some cases—specifically with NYCHA—provide basic maintenance. The lack of such standards and guidance may have contributed to the chronic nature of some of the deficiencies found at the centers. It is also of particular concern given the degree of problems we observed in senior centers located in NYCHA developments and with the lack of required permits from City agencies. Protocols should be developed to guide DFTA staff on assisting the senior centers to address deficiencies that require interaction with other City agencies and with third parties, such as private landlords.

We also found that the agency has not established performance or productivity benchmarks for its staff, some of whom expressed concerns to auditors about their workload levels. In addition, DFTA lacks an effective complaint tracking system that would assist management in identifying problem areas needing corrective action. Finally, DFTA did not always complete its VENDEX evaluations of the senior centers' performance in a timely manner.³

Similar weaknesses in DFTA's oversight of senior centers have been found in several prior audits by the Comptroller's Office. DFTA's inadequate monitoring, unless improved, will leave seniors who use and rely on the City's contracted senior centers exposed to health and safety risks.

The details of these findings are discussed in the following sections of this report.

Weaknesses in DFTA's Monitoring of Senior Centers Need Improvement

DFTA has failed to create an effective monitoring system that would allow it to ensure that oversight of centers is being performed adequately and in a consistent manner by its program officers and nutritionists. According to Comptroller's Directive #1 – *Principles of Internal Control*, “a sound internal control system must be supported by ongoing activity monitoring occurring at various organizational levels and in the course of normal operations. Such monitoring

³VENDEX is a citywide system that provides comprehensive information about City contractors and contract management.

should be performed continually and be ingrained throughout an agency's operations. It should include appropriate measurements on regular management and supervisory activities, comparisons, reconciliations, and other actions taken by employees in performing their duties.”

We found weaknesses in DFTA’s monitoring of senior centers, echoing the results of previous audits by the Comptroller’s Office that have cited inadequacies in DFTA’s monitoring efforts. Those weaknesses diminish DFTA’s ability to provide adequate oversight and guidance to staff to help them carry out their responsibilities. Further, they diminish DFTA’s ability to oversee the centers’ conditions and overall performance.

DFTA Does Not Ensure That All Senior Centers’ Deficiencies Are Corrected

During the audit scope period, DFTA did not continuously and consistently track the status of the deficiencies that its program officers and nutritionists identify during their visits to senior centers. The Assessment Reports identifying those deficiencies are maintained electronically in DFTA’s PAS system and are placed in read-only status at the end of the fiscal year in which the reports are created. However, DFTA does not have written protocols that require measures be taken to ensure that those prior-year deficiencies are tracked and corrected. Thus, at least as far as the information in PAS system is concerned, the centers start each new fiscal year with a clean slate, regardless of whether they have corrected previously-identified deficiencies and there are no uniform procedures to ensure that the program officers and nutritionists adequately follow up on such deficiencies.

In addition, as discussed later in this report, DFTA, as of the period covered by our audit, had not developed criteria to prioritize and ensure the prompt remediation of identified defects that pose particular health and safety risks for seniors. As a result, recurring issues with individual senior centers, including some that may jeopardize clients’ safety, may linger, possibly for years, without being corrected by the operator and without being flagged by DFTA as chronic or delinquent.

Comptroller’s Directive #1 states that “[a]gency management must perform continual monitoring of activities and programs.” The directive also states that “[m]onitoring of internal controls should also include policies and procedures for ensuring that the findings of audits and other internal and external reviews are promptly resolved.” DFTA’s performance when measured against that standard is mixed; although DFTA monitors the contracted senior centers and directs their operators to address the deficiencies found, DFTA does not effectively ensure that those deficiencies are resolved.

DFTA’s Assessment Reports are intended to, among other things, identify those aspects of a given senior center’s operation found deficient so that corrective actions can be taken. When a deficiency is identified, such as a missing Fire or Buildings Department permit or an unsanitary condition, a center is required to submit a Corrective Action Plan within 15 days that details the steps it has taken to resolve the issue and the anticipated date of completion. A few months after that, as one of the four annual formal assessments visits, the program officers and the nutritionists conduct unannounced follow-up visits to re-inspect whether conditions previously cited have been corrected, and to assess whether there are other, previously-unidentified areas of non-compliance. Any unresolved issues, as well as new non-compliant conditions, are noted in the follow-up Assessment Report and entered into DFTA’s PAS system.

However, as discussed above, at the start of the next assessment period (each new fiscal year), open deficiencies are not noted in the PAS system as being currently in need of remediation. Rather, the assessments from the previous fiscal year are placed into a read-only status, including any observations of deficiencies not yet corrected. Since DFTA is unable to update that information, it is not possible for the staff responsible for monitoring the centers to determine from those archived Assessment Reports whether the deficiencies identified therein were eventually remediated or if they remain outstanding.

We also found that DFTA does not have special protocols to address defects that are by their nature likely to be reoccurring, such as conditions resulting from leaks. DFTA has not developed a process for identifying, tracking and, if necessary, helping to facilitate the resolution of such serious and potentially reoccurring deficiencies, notwithstanding the fact that they may require a more hands-on approach to ensure that they are effectively remediated. For example, leaky pipes and leaky roofs may cause persistent mold and mildew, which can be especially harmful to the elderly. Effectively addressing such problems could require repairs to the building occupied by the center, which could be both costly and not entirely within the center's control, as is the case with senior centers that occupy space in NYCHA developments.

In addition, during our audit period, DFTA was unable to track the centers based on those with the greatest numbers of deficiencies or areas of non-compliance. DFTA officials acknowledged that problem and at the beginning of Calendar Year 2017 upgraded PAS to generate management reports for the purpose of tracking selected instances of non-compliance. Furthermore, as of Fiscal Year 2017, DFTA has implemented a new policy, whereby program directors for those centers that have not corrected deficiencies by the time DFTA conducts its follow-up visit will be required to meet with DFTA's upper management. Since that policy was not in effect during the fieldwork for our audit, we were unable to test its effectiveness.

However, even with that new policy and the PAS upgrades, DFTA's inability to systematically and continuously track deficiencies year-to-year increases the risk that deficient conditions will linger unresolved from one assessment period to the next without remediation and without being flagged by DFTA, potentially exposing seniors to unsafe or unsanitary conditions over extended periods of time. Consistent with this finding, in our inspections of a sample of centers, we found deficiencies that had been cited previously in a 2013 Comptroller's Office audit, including missing place-of-assembly permits, an exit sign that was not illuminated and signs of inadequate maintenance as evidenced by cracks and peeling paint on walls and ceilings. These findings are discussed in more detail below.

Safety and Health Conditions at Centers Are Not Adequate

Initial Sample of 10 Senior Centers

To determine the degree to which the City's contracted senior centers are maintained in safe and clean condition, we visited 10 judgmentally selected centers during the period of October 5, 2016 through November 1, 2016.⁴ Using DFTA's Assessment Tool, which its program officers and nutritionists use during their visits to assess the centers' compliance with DFTA standards, we identified 22 deficient conditions relating to three categories of deficiencies:

⁴ In accordance with Generally Accepted Government Auditing Standards, and as explained in more detail in the Detailed Scope and Methodology section of this report, we made a "judgmental" selection of centers to visit by selecting the five centers that were identified in a prior audit as having the greatest number of deficiencies along with five centers that had poor or decreased ratings in the City's VENDEX system.

- (1) Missing permits and missing evidence of an annual New York City Fire Department (FDNY or Fire Department) inspections;⁵
- (2) Safety concerns; and
- (3) Inadequate cleanliness and maintenance.

Our visits revealed that 9 of the 10 centers had deficiencies in one or more of those three categories. Of the nine centers with these deficiencies, seven had two or more, and one of those had five deficiencies. The deficiencies we found included:

- No heat;
- Lack of current permits and evidence of FDNY inspections;
- Lack of certified food handlers;
- Numerous leaks, cracks and peeling paint on walls and ceilings; and
- No emergency exit signs.

Table I below shows the distribution of defects found in our initial sample of 10 senior centers by category and by center.

Table I
Issues Found Upon
Inspection of the Initial
Sample of 10 Senior Centers

Name	Missing Permits and Missing Evidence of FDNY Inspections	Safety-related Conditions	Inadequate Cleanliness / Maintenance-	Number of Deficiencies	% of Deficiencies by Center
Arturo Schomburg	0	0	0	0	0%
Grand Coalition	1	0	0	1	5%
Young Israel	0	1	0	1	5%
Selfhelp Austin Street	2	0	1	3	14%
JSPOA Friendship	2	2	1	5	23%
H Gilroy	1	0	1	2	9%
Raices Times Plaza	2	0	1	3	14%
Willoughby	1	1	0	2	9%
A Philip Randolph	0	1	1	2	9%
Cassidy Coles	1	1	1	3	14%
Total	10	6	6	22	100%

Our initial sample of 10 senior centers included six of the same centers that our auditors visited in connection with a prior Comptroller's audit released on August 2, 2013. More than four years after those visits were conducted by the prior audit team, we found that the same types of deficiencies existed at five of the six centers. Specifically, three of the five centers were missing required City-issued place-of-assembly permits, one center had safety-related issues (exit sign

⁵ According to DFTA, unless there is a violation, FDNY does not issue an inspection report; however, according to DFTA's standards, centers are required to keep a log of the inspection as evidence.

not illuminated), and three centers had conditions reflecting inadequate maintenance and housekeeping, such as cracks and peeling paint on walls and ceilings.⁶ These issues had also been cited by in the prior audit report.⁷

Second Sample of 20 Senior Centers

During the course of our fieldwork for this audit, DFTA entered into a new round of contracts with senior centers and in November 2016 started to perform Fiscal Year 2017 initial assessments. We reviewed a number of DFTA Assessment Reports from the initial Fiscal Year 2017 inspections. We selected an additional 20 senior centers where DFTA program officers and nutritionists noted significant safety, health and cleanliness conditions and visited those centers to review their condition and to look for any evidence that the deficiencies cited by DFTA had been remedied.

Our visits to those 20 sample centers conducted during the period February 21, 2017 through February 24, 2017 revealed 71 deficiencies at 18 centers—33 of the deficiencies pertained to 17 centers that were also noted in DFTA's 2017 initial assessment. In fact, the previous Comptroller's 2013 audit report, as well as DFTA's 2017 initial assessment, cited two of those centers for the same deficiency that we found: inadequate maintenance based on observations of conditions such as peeling paint and water damage. One of these two centers was missing a required place-of-assembly permit, a condition that had been identified by the prior audit team's visit in 2012, by DFTA's 2017 assessment, as well as by our current visit of February 2017.

We found deficiencies at 18 of the 20 centers in one or more of the same three categories—lack of permits and evidence of FDNY inspections, safety concerns, and inadequate cleanliness and maintenance—as shown in Table II below.⁸

⁶ The prior audit team conducted their visits between August 14, 2012 and August 21, 2012. Our visits for these centers were conducted between October 5, 2016 and November 1, 2016.

⁷ Six of the 10 sampled centers with a history of deficiencies were located in NYCHA developments. Five of those six were found to currently have one or more of the cited deficiencies (Grand Coalition of Senior Neighborhood Senior Center; Manhattan; JSPOA Friendship Nutrition Center, Queens; H. Gilroy Senior Center, Brooklyn; Willoughby Senior Center, Brooklyn, and Cassidy Coles Senior Center, Staten Island). During our scope period, out of a total of 249 senior centers with DFTA contracts, 78 (31 percent) were located in NYCHA developments.

⁸ See Appendix II for a detailed breakdown of our visits to all 30 senior centers in our sample.

Table II**Issues Found at Second Sample of
20 Senior Centers**

Name	Missing Permits and Missing Evidence of FDNY Inspections	Safety-related Conditions	Inadequate Cleanliness / Maintenance-	Number of Deficiencies	% of Deficiencies by Center
Bensonhurst	0	0	1	1	1%
Stapleton	0	1	3	4	6%
RAIN Boston Road	0	0	0	0	0%
Cypress Hills	1	3	4	8	11%
ABSW	0	1	1	2	3%
Heights and Hills	1	1	6	8	11%
RAIN Mt Carmel	0	2	1	3	4%
Find Clinton	0	0	0	0	0%
Patterson Houses	1	2	2	5	7%
Bronxworks East Concourse	1	0	0	1	1%
Dreiser	2	1	2	5	7%
Bronx River	1	2	2	5	7%
Bay Eden	1	0	3	4	6%
Independence Plaza	2	1	1	4	6%
Riverdale	1	0	1	2	3%
JASA Throgs Neck	1	2	2	5	7%
Carter Burden Luncheon Club	1	3	2	6	8%
Prospect Hill	0	0	2	2	3%
PSS Harlem	0	2	1	3	4%
UJC Lillian Wald	0	1	2	3	4%
Total	13	22	36	71	100%

We discuss the conditions we found in more detail below.

*Lack of Valid Place-of Assembly Permits,
Evidence of Fire Inspections, and DOHMH Permits*

Nine of the 20 senior centers lacked either a place-of-assembly permit or a Department of Health and Mental Hygiene (DOHMH) permit. Four of the centers also lacked evidence of a fire inspection.

DFTA requires that every DFTA-contracted senior center undergo an inspection to ensure that the centers are in compliance with fire codes and FDNY rules. The centers are required to request those inspections from their local firehouses and maintain a log of those inspections. A place-of-assembly permit is required where 75 or more people gather indoors. Initially, the New York City Department of Buildings (DOB or Buildings Department) issues a Place of Assembly Certificate of Operation, and following an annual inspection, FDNY issues a place-of-assembly permit. A place-of-assembly permit is a visual safety reminder that should be conspicuously posted at all times noting the maximum number of persons who can safely assemble in a given room. Obtaining that permit involves ensuring that the premises meet the standards and codes of the Buildings Department and the Fire Department.

In addition, all centers are required to operate with a current permit from DOHMH, which involves an annual inspection by that agency, to ensure that there are no outstanding health code violations.

Table III lists the 11 senior centers where required permits or inspection documents were missing.

Table III

11 Senior Centers Lacking Valid Place-of-Assembly Permits, Fire Inspections, and DOHMH Permits

Name	No Evidence of FDNY Inspection	No Assembly Permit	No Current DOHMH Permit	Total Number of Conditions
Cypress Hills	X			1
Heights and Hills			X	1
Patterson Houses			X	1
Bronxworks East Concourse		X		1
Dreiser	X	X		2
Bronx River		X		1
Bay Eden	X			1
Independence Plaza	X	X		2
Riverdale			X	1
JASA Throgs Neck		X		1
Carter Burden Luncheon Club		X		1
Total	4	6	3	13

As shown in the table, four of the 11 centers were missing evidence of an FDNY inspection, and nine of the 11 centers were missing either a place-of-assembly permit or a DOHMH permit. Four of the 11 centers that had conditions identified are in NYCHA buildings.⁹

Some directors stated it would be helpful for DFTA to become more involved in helping them clear violations and obtain permits. For example, the director at the Heights and Hills Senior Center expressed great frustration in dealing with DOHMH on issues related to permitting and stated that she was not able to obtain assistance from DOHMH or from DFTA.

Failure to obtain the required permits increases the risk that a center may have health and safety hazards requiring attention that remain undetected and, therefore, unaddressed.

Safety Issues and Concerns

We found a combined total of 22 safety concerns at 13 of the 20 centers we visited in February 2017. Seven of the 13 centers, including three in NYCHA buildings, had at least two safety concerns.

⁹ The four centers with missing permits that are located in NYCHA buildings are: Patterson Houses Senior Center, Bronx; Bronx River Neighborhood Senior Center, Bronx; Bay Eden Neighborhood Senior Center, Bronx; and JASA Throgs Neck Neighborhood Senior Center, Bronx.

To protect seniors on a day-to-day basis, centers are required to abide by DFTA's standards, which include ensuring that seniors are protected from dangerous situations and that emergencies are handled appropriately. Those standards include the following:

- Choking-victim signs are to be posted in the dining rooms. These signs show the emergency procedures to be followed if someone is choking on food, a potentially life-threatening situation.
- All centers are required to be compliant with the Americans with Disability Act guidelines, which call for the centers to be accessible to those with disabilities.
- Two individuals with the necessary food handler permits are assigned to prepare or serve the food at the center. The purpose of the permit is to ensure that the individuals preparing and handling food are properly trained and can supervise others.
- Centers are prohibited from maintaining or serving food that is expired, and as a precautionary step, DFTA requires centers to store food separate and apart from cleaning goods.
- Centers are required to ensure that all emergency signs and emergency lights are working. In the event of an emergency, clearly visible and illuminated signs and lights are crucial so that seniors and staff at the centers can find the nearest safe exit.
- Exits are to be unobstructed and easily opened (outward direction) at all times when the building is in use. Part of this standard also includes ensuring that handrails and stairs leading to the exits are clear from obstruction, and that they are secure and in optimum condition.
- As part of fire preparedness, fire extinguishers are required to be inspected, tested and tagged with a current inspection date. In addition, center staff are required to participate in training related to using the fire extinguishers, and to conduct at least two fire drills. These procedures are an important part of the fire safety measures in a senior center.

Adherence to the above-mentioned safety requirements helps to ensure that the physical environment is safe. However, as indicated in the Table IV below, we found non-compliant conditions at 13 of the 20 sampled centers.

Table IV

13 Senior Centers with Safety Issues

Name	No Emergency or Exit Sign Lights	Emergency and Exit Doors Blocked	Inadequate Maintenance of Stairs and Handrails	Expired Fire Extinguishers Tags	No Evidence of Fire Extinguisher Training	No Fire Drills	Not Handicap Accessible	Lack of Heimlich Maneuver Sign	Lack of Required Food Handlers	Unsafe Storage of Food	Number of Areas with Problems
Stapleton										X	1
Cypress Hills		X	X				X				3
ABSW									X		1
Heights and Hills			X								1
RAIN Mt Carmel					X	X					2
Patterson Houses		X		X							2
Dreiser										X	1
Bronx River			X						X		2
Independence Plaza									X		1
JASA Throgs Neck	X							X			2
Carter Burden Luncheon Club					X	X	X				3
PSS Harlem	X								X		2
UJC Lillian Wald		X									1
Total	2	3	3	1	2	2	2	1	4	2	22

As shown in the table, the centers with the highest number of non-compliant conditions were Cypress Hills and the Carter Burden Luncheon Club, each with three of the 10 categories of safety deficiencies identified in our tests. Five centers had two safety deficiencies each, and six centers each had one deficiency. Five of the 13 centers, including three with two safety issues each are located in buildings managed by NYCHA.¹⁰

The conditions described above are dangerous for all individuals present at the centers. In the event of an emergency, they are even more dangerous for seniors, many of whom may have special needs such as reduced vision and impaired mobility that need to be taken into account. Consequently, DFTA needs to ensure that the centers are all maintained in accordance with required safety standards.

Problems with Maintenance and Cleanliness of the Centers

DFTA requires its contracted senior centers to maintain their facilities in accordance with certain maintenance and cleanliness standards. All program rooms in the centers, including bathrooms, are to be kept clean and well maintained, including that paint, plaster, and tiles in all rooms are to be in good condition; and toilets and sinks are to be in working condition.

Our visits to the 20 sampled centers revealed cleanliness and maintenance problems at 17 centers. Table V below lists the maintenance and cleanliness problems we found at those centers.

¹⁰ The five centers that are located in NYCHA buildings are: Stapleton Neighborhood Senior Center, Staten Island; Patterson Houses Senior Center, Bronx; Bronx River Neighborhood Senior Center, Bronx; JASA Throgs Neck Neighborhood Senior Center, Bronx; and UJC Lillian Wald Houses Senior Center, Manhattan.

Table V**17 Senior Centers with Cleanliness/
Maintenance Issues**

Name	Issues with Vermin	Cluttered or Dirty Center	Issues with Functioning Bathrooms	Damaged, Cracked, Broken Floors	Leaks, Cracks and Peeling on Walls, Ceilings and Doors	Issues with Lighting and Fixtures	Issues with Windows	Number of Areas with Problems
Bensonhurst		X						1
Stapleton		X		X	X			3
Cypress Hills	X	X		X	X			4
ABSW				X				1
Heights and Hills		X	X	X	X	X	X	6
RAIN Mt Carmel					X			1
Patterson Houses			X		X			2
Dreiser			X		X			2
Bronx River					X	X		2
Bay Eden		X	X				X	3
Independence Plaza			X					1
Riverdale					X			1
JASA Throgs Neck			X		X			2
Carter Burden Luncheon Club			X			X		2
Prospect Hill			X		X			2
PSS Harlem					X			1
UJC Lillian Wald	X				X			2
Total	2	5	8	4	12	3	2	36

Of the 17 senior centers where we found deficient cleanliness and maintenance, the center with the highest number of problems was Heights and Hills, with six of the seven types of deficiencies. Of the remaining 16 centers, one center had deficiencies in four categories, two centers each had three categories of noncompliant conditions, seven centers had problems in two categories, and six centers each had one problem area.

Six of the 17 centers with cleanliness/maintenance issues are located in NYCHA buildings, where the program directors told us they have had great difficulty getting necessary repairs from NYCHA. They stated that it takes months and sometimes even years, before repairs are made by NYCHA.¹¹ For example, at the Bay Eden Senior Center, even though center officials have made numerous repair requests to NYCHA, a window has remained cracked for the past five years.

According to the director of the Cassidy Coles senior center, also located at a NYCHA facility, the roof needs to be replaced. We observed a considerable amount of physical damage and disrepair throughout the center. Specifically, at the time of our visit, we observed visible signs of water damage, including peeling paint along with broken, cracked and warped plaster on the walls and ceiling. Despite the director's placing several requests to NYCHA for necessary repairs, the conditions were never fixed. Overall, program directors expressed frustration with the struggles they faced in seeking to resolve maintenance issues with NYCHA, while simultaneously being cited by DFTA for those very same issues.

After we notified DFTA of the deficiencies that we found at 27 of the 30 centers, DFTA officials informed us that they were in the process of addressing these issues, claiming that some of the

¹¹ The six centers that are located in NYCHA buildings are: Stapleton Neighborhood Senior Center, Staten Island; Patterson Houses Senior Center, Bronx; Bronx River Neighborhood Senior Center, Bronx; Bay Eden Neighborhood Senior Center, Bronx; JASA Throgs Neck Neighborhood Senior Center, Bronx; and UJC Lillian Wald Houses Senior Center, Manhattan.

maintenance issues, as well as lack of permits were already resolved and stating that other issues will be addressed during the follow-up visits. During the exit conference, DFTA officials stated that 43 of the 93 deficiencies had been corrected and provided us with evidence for 14 of the corrections, including for three of the conditions noted in Appendix III.

DFTA Response: “DFTA agrees with the City Comptroller that an improved management oversight system is needed, which DFTA has been developing over the last year, both through technological enhancements to its Program Assessment System (PAS) as well as improved operational practices.

In fact, work is underway at DFTA to further strengthen oversight practices and build on the enhancements to PAS. DFTA program staff have been working with their IT colleagues to revise the automated PAS in various ways. By the end of the Calendar Year, DFTA will institute new reporting functions that will make more efficient use of data used to track correction of conditions.”

Lack of Standards for Assisting Senior Centers

DFTA has no clearly defined standards concerning whether, when, and how the agency should assist its contracted senior centers in clearing up violations and deficiencies. In addition, DFTA does not have any written guidance for tracking recurring deficiencies and ensuring that they are promptly addressed. Such standards could be extremely helpful, especially when it comes to problems that require interaction with and potentially assistance from City agencies other than DFTA.

As discussed above, DFTA program officers and nutritionists complete an Assessment Report to detail the results of their respective visits to the senior centers and the deficiencies that the centers are required to rectify. Although during the audit, DFTA program officers, nutritionists and DFTA upper management all mentioned the need for DFTA to help the centers solve problems, the agency has no formal procedures to guide its program officers and nutritionists in doing so. Among other things, DFTA has not developed standards to guide its employees in identifying when it is appropriate for the agency to assist the centers in clearing up violations and deficiencies, or the kinds of assistance they should provide. Similarly, DFTA has not developed standards and procedures to address the problem of recurring violations in and among the senior centers, even though that problem has been repeatedly documented in this and previous audits over many years.

Program directors at the senior centers we visited referred to the difficulties they experienced in obtaining DFTA’s assistance in efforts to remedy deficiencies that required action on the part of third parties, such as other City agencies and building owners. The directors cited obstacles they faced in dealing with City agencies—such as DOB, FDNY, and DOHMH—in their efforts to clear up violations that prevented the centers from obtaining required permits. Directors stated that they often did not know whom to contact to obtain permits or request re-inspections. One program director stated that DFTA needed to be a better liaison between the centers and other City agencies. Several other program directors echoed that sentiment. However, DFTA has not developed any specific standards to guide its staff in whether, when and how to provide such assistance. Instead, those questions are left to the discretion of each individual program officer and nutritionist.

The lack of DFTA standards, procedures, and interagency coordination is of particular concern as applied to senior centers located within NYCHA buildings. Fourteen of the 30 centers in our sample

were located in NYCHA facilities. We observed problems at 11 of the 14 centers, with six of them each having four to six deficiencies at the time of our visits. The directors of those centers said that NYCHA has been non-responsive to their repair and maintenance requests. Moreover, according to the center directors and DFTA program officers, NYCHA rules prohibit the centers from making repairs on their own, which in effect prevents them from obtaining required permits.

During our visits to those centers, we were shown volumes of logs listing repair requests, many reflecting recurring maintenance issues and some that were closed without completion of the required work. Often, problems such as peeling paint, leaks that penetrated ceilings and roofs, and broken floor tiles have remained uncorrected for months and in some cases, years. DFTA officials stated that they had difficulties working with NYCHA to resolve deficiencies at the centers due to the fact that DFTA has not had a Memorandum of Understanding (MOU) with NYCHA since July 2008.¹² Although DFTA officials expressed their hope that an MOU could be entered into in the near future, they gave us no evidence that any efforts have been made to accomplish that result.

The primary responsibility for monitoring the senior centers and for enforcing compliance with the applicable standards remains with DFTA. Therefore, it is incumbent upon that agency to establish procedures and mechanisms (such as inter-agency MOUs) to assist it in carrying out its mission. As evidenced by the prior audit reports issued by the Comptroller's Office, DFTA has repeatedly failed to ensure that all the senior centers it oversees are operating their programs in facilities that are clean and safe and that are in full compliance with basic health and safety standards.

The deficiencies identified in this audit and those that preceded it reflect that the health and safety standards have been and continue to be deficient at many centers. To reverse that longstanding problem, DFTA should take concerted, purposeful action, in coordination with responsible operators of its senior centers and with City agencies that have specific responsibilities for relevant health, safety, maintenance, and housekeeping issues. In addition, DFTA should create more efficient lines of communication with the center program directors and solicit their input on what might help them to ensure that their centers and programs are in full compliance with applicable requirements. Doing so would allow DFTA to identify the strengths and weaknesses of the assistance it currently provides, and would help it to improve the support it provides to the centers.

DFTA Response: "DFTA is coordinating with other City agencies central to its monitoring efforts. It should be noted that senior center programs are responsible for and largely do maintain the centers in a code compliant and sanitary manner. . . . Senior center staff continue to maintain proper documentation and address facility issues when they arise, or work with their landlord or property manager, including NYCHA, as needed. When there are issues that the program is unable to resolve, either due to lack of funding, technical expertise, or appropriate/successful follow-up with building management or regulatory agencies, DFTA does assist."

Auditor Comment: Notwithstanding DFTA's claim of assistance, as indicated in the report, we observed problems at 11 of the 14 centers that were located in NYCHA facilities. Consistent with this finding, the directors of those centers described difficulties they had encountered in trying to get NYCHA to make repairs and to respond to maintenance

¹² An MOU is a formal agreement between two or more parties that sets out specific obligations of conduct and interaction.

requests. Their comments highlight the need for an improvement in DFTA standards, procedures, and interagency coordination.

DFTA Does Not Monitor the Adequacy of Its Own Staffing

DFTA does not monitor the adequacy of its own staffing in relation to the quantity of work required to properly administer the agency's contracts and oversight responsibility for the City's senior centers. According to Comptroller's Directive #1,

Effective management of an organization's workforce is essential to achieving desired results and an important part of internal control. Only when the proper personnel are on the job and are provided with the appropriate training, tools, structure, incentives, and responsibilities is . . . operational success attainable.

The directive also states that

Management, throughout the organization, should be comparing actual functional or activity level performance data to planned or expected results, analyzing significant variances and introducing corrective action as appropriate. Key indicator tracking and self-assessment checklists are important tools in measuring the control posture of various functional activities.

However, when we asked whether sufficient resources were assigned to monitor the senior centers, DFTA management acknowledged that the agency had not conducted any studies that would allow management to determine the number of staff required for adequate oversight of the centers. In addition and as a related matter, DFTA management has not established performance or productivity benchmarks or goals for its program officers or nutritionists, such as the number of visits and follow-up visits they must or should perform on a daily, weekly or monthly basis, the amount of time on average they should devote to each visit, or whether and how often rotations of staff assignments should be made. In the absence of such an analysis, neither we nor DFTA can be assured that current staffing levels are sufficient to perform thorough inspections and follow-up visits.

As stated previously, during our scope period, DFTA employed 16 program officers to monitor DFTA's 249 contracted senior centers, as well as its 74 programs. Those numbers break down to each program officer monitoring a total of approximately 20 centers and programs. According to DFTA's tasks and standards for program officers, day to day responsibilities include but are not limited to: (1) analyzing contractual performance of community partners, ensuring that program information provided for each contract is up-to-date, conducting two on-site assessments and/or monitoring for each assigned program, in addition to assisting the centers, as needed; (2) evaluating contractor compliance and as needed, providing technical assistance and quality enhancements, ensuring that assessment monitoring reports with documentation are submitted, preparing annual contractor performance evaluations for inclusion in the VENDEX system; and (3) acting as liaison with community groups, public and private agencies and elected officials to improve coordination of services and planning in the community and providing assistance to community partners.

During our scope period, DFTA also employed 10 nutritionists to monitor DFTA's 249 contracted senior centers, as well as 55 of DFTA's 74 other programs. One nutritionist holds a supervisory position and is responsible for monitoring 10 centers and programs; the nine remaining nutritionists are each responsible for monitoring approximately 33 centers and programs. The

day-to-day responsibilities of DFTA's nutritionists include but are not limited to: (1) inspecting the facility and program operations biannually for compliance with DFTA regulations, as well as with City and State sanitary codes; (2) monitoring the meal services provided at the senior centers to ensure that they are in compliance with nutritional standards and sanitary codes; (3) providing assistance with all food and nutrition-related topics to centers; (4) providing nutritional education workshops to the centers; and (5) evaluating and approving menus to ensure compliance with city, state and federal guidelines for meal programs for the elderly.

During our audit, we interviewed five program officers and five nutritionists to assess, among other things, the size and manageability of their workloads. Regarding the adequacy of staffing resources, some program officers and nutritionists said they felt overburdened to the extent that their workloads impacted their ability to carry out all of their responsibilities, while others felt that their workloads were manageable. Given the disparity in responses, it would be in DFTA's best interest to continuously assess the needs of its staff so as to ensure that they receive all of the resources necessary to achieve the goals of the agency.

DFTA Response: "DFTA has recognized the need to review periodically staffing levels impacting program officers and nutritionists who monitor senior centers. Based on our most recent assessment of staffing needs, DFTA decided to devote resources to the hiring of two additional program officers as well as one nutrition consultant. These new positions are expected to be filled by mid-summer 2017. DFTA will continue to monitor staffing requirements to ensure that the additional staff is sufficient to properly monitor our senior centers."

Recommendations

1. DFTA should establish an effective information system that tracks all serious deficiencies and recurring problems found at each senior center until they are resolved.

DFTA Response: "Refer to comments above concerning PAS enhancement, including additional management reporting functions and tighter oversight practices." With regard to PAS, DFTA stated, in part, "DFTA agrees with the City Comptroller that an improved management oversight system is needed, which DFTA has been developing over the last year, both through technological enhancements to its Program Assessment System (PAS) as well as improved operational practices. In fact, work is underway at DFTA to further strengthen oversight practices and build on the enhancements to PAS."

2. DFTA should develop protocols supported by changes in its information system to require and enable DFTA program officers and nutritionists to include and document the current status of previously-found deficiencies as part of the agency's assessment tool for all visits.

DFTA Response: "This information is being included as one of the enhancements to PAS currently underway."

3. DFTA should ensure that the senior centers identified in this report resolve all of the serious deficiencies cited in this report.

DFTA Response: "DFTA is tracking progress in this regard to help ensure achievement of this objective. Indeed, over half of the outstanding issues noted in the audit have either already been corrected, or will be corrected soon as the

result of a renovation at one center, with an anticipated completion date of fall 2017.”

4. DFTA should work with NYCHA officials to enhance communication and coordination of efforts regarding the deficiencies and required repairs at senior centers located in NYCHA facilities.

DFTA Response: “DFTA is in ongoing discussions with NYCHA officials and will continue that work to solidify processes for responding to deficiencies and repair needs in a timely manner.”

5. DFTA should create policies and procedures for its program officers, nutritionists, and other relevant agency personnel in sufficient detail--and with a resource guide and examples where warranted--to ensure that DFTA staff are aware of the kinds of assistance they should provide to centers to help facilitate their interactions with City agencies and third parties, and to achieve compliance with DFTA’s standards for the safe conditions and effective operation of senior centers.

DFTA Response: “DFTA already has extensive protocols and policies for staff with respect to addressing deficiencies impacting programs; however, we will review these policies with the program officers and nutritionists to explore opportunities to further strengthen operations.”

Auditor Comment: We are pleased that DFTA is reviewing its existing policies to explore opportunities to further strengthen operations. As indicated in the report, DFTA has no clearly defined standards concerning whether, when, and how the agency should assist its contracted senior centers in clearing up violations and deficiencies. In addition, DFTA does not have any written guidance for tracking recurring deficiencies and ensuring that they are promptly addressed. As part of its exploring of opportunities to strengthen operations, we urge DFTA to address these deficiencies.

6. DFTA should establish better lines of communication with center program directors and solicit feedback regarding the needs of the centers and the services provided by DFTA.

DFTA Response: “A number of enhancements, as indicated [in the response], have been implemented for programs and staff, promoting communications in this regard. Moreover, further improvements will be achieved as the monitoring tools and management practices described above are effectuated.”

Auditor Comment: We urge DFTA to ensure that the solicitation of feedback from the centers is included as part of its communication efforts.

7. In the event that serious deficiencies persist unaddressed, and based on a full, historical assessment of the center’s performance, including all unresolved and recurring deficiencies, DFTA should assess whether the center should remain eligible for City funding.

DFTA Response: “DFTA has already and continues to close centers based on the persistence of serious deficiencies. Further, we will use the enhanced monitoring process described above to better track deficiencies and document any ongoing deficiencies that may result in program closures.”

8. DFTA should conduct a study to determine the adequacy of its staffing and structure in relation to the number of senior centers it oversees and whether its

current staffing levels are adequate to ensure thorough assessments, monitoring, follow-up, and assistance to senior centers.

DFTA Response: “DFTA determined that additional staff were needed, and is adding two program officers, as well as diverting identified non-senior center contracts to other units. Also, DFTA will be revisiting the staffing resources regularly to help ensure that resource levels are adequate to comprehensively monitor programs, including the use of the PAS tracing and monitoring enhancements under development.”

OTHER ISSUES

DFTA Does Not Formally Track Complaints Received Pertaining to the Senior Centers

DFTA does not have an automated system that would help the agency more quickly track and identify potential areas of concerns requiring its intervention.

DFTA receives complaints through the City’s 311 hotline, Mayor’s Office, and directly from DFTA’s website. Complaints received by DFTA through the City’s 311 hotline are recorded in the City’s Siebel system. Complaints DFTA receives through other means, such as via email or United States Post Office delivered mail are not recorded in any database. All complaints pertaining to senior centers, regardless of the source, are forwarded to an official within Bureau of Community Services. The designated official can either personally resolve the complaint or forward it to the program officer or nutritionist responsible for that center. DFTA must resolve all of the complaints it receives within 14 days from the date the complaint is received and enter the resolution of the 311 complaint into the 311 database. However, DFTA does not otherwise track the complaints it receives from sources other than 311 or maintain a detailed record of them or their resolution, including those pertaining specifically to senior centers.

Creating a formal tool to manage and track complaints could aid the agency not only in monitoring whether complaints are resolved timely and appropriately, but also in identifying potential areas of concern, especially any that might be unique to a particular center. A high number of complaints concerning a particular issue or a specific senior center could alert DFTA that further attention is warranted to ascertain whether a problem may exist and if so, take prompt steps to resolve it.

VENDEX Evaluations Were Not Consistently Performed

According to the Mayor Office of Contracts Services, agencies are required to evaluate contractor performance and submit the evaluation to VENDEX on an annual basis. Our review of the VENDEX evaluations revealed that DFTA did not complete evaluations for 26 of the 249 senior centers overseen by the agency during Fiscal Year 2016 in a timely manner. As of March 9, 2017, more than eight months after the end of Fiscal Year 2016, DFTA had no record that it had completed its evaluations for six of those centers, and its evaluations for the remaining 20 were not timely, in that they were submitted to the Mayor’s Office of Contract Services more than 90 days after the contract year.

A vendor’s performance is critical to an agency’s determination to award, renew, extend, or terminate a contract. As part of the ongoing contract administration process, it is important that DFTA conducts and submits the evaluations in a timely manner. Failure to promptly conduct and

submit evaluations deprives DFTA's decision makers (as well as those at other agencies that might be considering contracts with a DFTA contractor) of information they should consider in deciding whether to continue contracts or enter into new contracts with the contractors. Absent complete and timely evaluations, the risk that poorly performing vendors could receive extensions, renewals or new City contracts is increased.

Recommendations

9. DFTA should maintain a record of all complaints it receives pertaining to the senior centers so that it can track and monitor the resolution of the complaints and identify any specific areas that require additional attention.

DFTA Response: "A complaint driven tracking system is under development and will be ready in fall 2017."

10. DFTA should ensure that it promptly completes VENDEX evaluations for all centers for which it has not yet completed a required evaluation.

DFTA Response: "DFTA is confident that the recent hires and the shift to the PassPort and related enhancements will allow the Agency to increase the VENDEX evaluation percentage above the current 90% on-time level."

Auditor Comment: We reiterate that DFTA should ensure that it completes a VENDEX evaluation for every contracted senior center.

DETAILED SCOPE AND METHODOLOGY

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objective. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objective. This audit was conducted in accordance with the audit responsibilities of the City Comptroller as set forth in Chapter 5, §93, of the New York City Charter.

The scope of this audit was the period covering Fiscal Years 2016 and 2017, through the end of the observation period on February 24, 2017.

To gain an understanding of DFTA's monitoring process of the senior centers, we met with officials from DFTA's Bureau of Community Services and Management Audit. We interviewed five program officers and five nutritionists from Bureau of Community Services to learn their respective oversight responsibilities in relation to the senior centers. To gain an insight of DFTA's assessment process for the senior centers, we reviewed DFTA's developed assessment tools used by the program officers and nutritionists during Fiscal Year 2016. In addition, we attended a PAS demonstration to understand how DFTA officials use the system to assist them in managing program assessments results and tracking issues on senior centers. We reviewed four prior audits conducted by our office, including: (1) *Audit Report on the Monitoring of Senior Center Conditions by the Department for the Aging*, (# MG01-194A), issued June 28, 2002; (2) *Follow-up Audit Report on the Monitoring of Senior Center Conditions by the Department for the Aging*, (#MG05-093F), issued June 17, 2005; (3) *Audit Report on the Monitoring of the Physical Conditions of Senior Citizen Centers by the Department for the Aging*, (#MD08-063A), issued June 30, 2008; and (4) *Audit Report on the Department for the Aging's Monitoring of Senior Centers* (Audit # FM13-056A), issued August 2, 2013. We reviewed those reports to assess whether DFTA's monitoring efforts had improved. We reviewed Comptroller's Directive #1 – *Principles of Internal Control*, to assess guidelines and standards for DFTA to follow.

We developed an audit observation checklist using the review areas listed in DFTA's assessment tools. To assess DFTA's monitoring of the physical conditions of the senior centers with respect to overall sanitary and safety issues, we judgmentally selected a sample of 30 senior centers for observation from a population of 249. The centers were selected among the five boroughs (Manhattan, Bronx, Brooklyn, Queens, and Staten Island). The sample selection was performed in two stages:

- During the survey stage of the audit, we selected 10 senior centers comprised of the five senior centers with the most issues cited from the prior audit and five centers from the population of 222 senior centers that had a poor or decreased VENDEX program ratings for Fiscal Years 2015 and 2016.
- During the fieldwork stage of the audit, we selected an additional 20 senior centers for which DFTA had completed the 2017 initial assessment by December 28, 2016¹³ and for

¹³ As of December 28, 2016, DFTA had completed 94 Initial Assessments for 94 senior centers, (92 by Program Officers and 2 by Nutritionists) and the assessment status for these centers had been moved to the Follow-up stage; 280 Initial Assessments associated with 159 senior centers were still in progress and 132 Initial Assessments had not yet started as of our review date.

which the Assessment Reports prepared by DFTA noted significant safety, health and cleanliness conditions.

We conducted unannounced observations for the 30 senior centers in our sample during the period of October 5, 2016, through February 24, 2017, and recorded our observations of each center's safety, sanitary, and physical conditions using the above-mentioned checklist. We also reviewed documentation from the senior centers relating to fire permits and inspections, DOHMH permits, food service handler's permits, fire drills and evacuation plans. During our visits we interviewed the program directors and other center staff to ascertain the issues that they faced in operating the centers. We also interviewed six of DFTA's Program Officers responsible for these senior centers to understand how DFTA assists these centers in the facilitation of repairs and maintenance, especially in reference to repairs made to centers located in NYCHA buildings.

We met with DFTA officials to discuss DFTA's oversight of complaints received by senior centers. We attended a demonstration of the system that is used to capture complaints received from 311. For the period of July 1, 2016 through January 30, 2017, DFTA received a total of 240 complaints, of which 76 were related to health and safety concerns. We randomly selected a sample of 25 out of the 76 complaints related to health and safety and attempted to assess DFTA's efforts in addressing them.

We reviewed VENDEX ratings for 256 senior centers and performed a 3-year trend analysis (Fiscal Year 2014 – Fiscal Year 2016) to determine whether DFTA completed VENDEX evaluations for the senior centers in a timely manner. We reviewed case files for 10 of the centers observed to determine whether the rating in the VENDEX system actually reflected the VENDEX evaluation kept on file for the senior centers we visited.

The results of the above test, while not statistically projected to their respective populations, provided a reasonable basis for us to assess whether DFTA adequately monitors the senior centers to ensure that they are in a safe and clean condition in accordance with DFTA's procedures and guidelines.

APPENDIX I

The 30 Senior Centers Visited by Auditors

#	NAME OF SENIOR CENTER	BOROUGH	NYCHA BUILDING
1	Arturo Schomburg Neighborhood Senior Center	Bronx	X
2	Grand Coalition of Seniors Neighborhood Senior Center	New York	X
3	Young Israel Wavecrest Bayswater Senior League	Queens	
4	Selfhelp Austin Street Neighborhood Senior Center	Queens	
5	JSPOA Friendship Nutrition Center	Queens	X
6	H Gilroy Senior Center	Brooklyn	X
7	Raices Times Plaza Senior Center	Brooklyn	
8	Willoughby Senior Center	Brooklyn	X
9	A Phillip Randolph Senior Center	Manhattan	
10	Cassidy Coles Senior Center	Staten Island	X
11	Bensonhurst Neighborhood Senior Center	Brooklyn	
12	Stapleton Neighborhood Senior Center	Staten Island	X
13	RAIN Boston Road Neighborhood Senior Center	Bronx	X
14	Cypress Hills Fulton Street Neighborhood Senior Center	Brooklyn	
15	ABSW Neighborhood Senior Center	New York	
16	Heights and Hills Senior Center	Brooklyn	
17	SEBCO Mt Carmel Neighborhood Senior Center (now RAIN Mt Carmel)	Bronx	
18	Find Clinton Neighborhood Senior Center	New York	X
19	Patterson Houses Senior Center	Bronx	X
20	Bronxworks East Concourse Neighborhood Senior Center	Bronx	
21	Dreiser Neighborhood Senior Center	Bronx	
22	Bronx River Neighborhood Senior Center	Bronx	X
23	Bay Eden Neighborhood Senior Center	Bronx	X
24	Independence Plaza Neighborhood Senior Center	New York	
25	Riverdale Senior Center	Bronx	
26	JASA Throgs Neck Neighborhood Senior Center	Bronx	X
27	Carter Burden Luncheon Club Neighborhood Senior Center	New York	
28	Prospect Hill Neighborhood Senior Center	Brooklyn	
29	PSS Harlem Neighborhood Senior Center	New York	
30	UJC Lillian Wald Houses Senior Center	New York	X

APPENDIX II

Summary of Conditions Found at Sampled Centers - 21 Problem Areas Tested

Name	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	Total	% of 21 Areas with Problems
Arturo Schomburg																						0	0%
Grand Coalition			X																			1	5%
Young Israel											X											1	5%
Selfhelp Austin Street	X	X															X					3	14%
JSPOA Friendship	X	X		X							X								X			5	23%
H Gilroy		X																	X			2	9%
Raices Times Plaza	X	X																	X			3	14%
Willoughby			X													X						2	9%
A Philip Randolph												X					X					2	9%
Cassidy Coles			X	X															X			3	14%
Bensonhurst															X							1	5%
Stapleton														X	X			X	X			4	18%
RAIN Boston Road																						0	0%
Cypress Hills	X				X	X				X			X		X			X	X			7	36%
ABSW												X						X				2	9%
Heights and Hills			X			X									X		X	X	X	X	X	8	36%
RAIN Mt Carmel								X	X										X			3	14%
Find Clinton																						0	0%
Patterson Houses			X		X		X										X		X			5	23%
Bronxworks East Concourse		X																				1	5%
Dreiser	X	X												X			X		X			5	23%
Bronx River		X				X						X							X	X		5	23%
Bay Eden	X														X		X				X	4	18%
Independence Plaza	X	X										X					X					4	18%
Riverdale			X																X			2	9%
JASA Throgs Neck		X		X							X						X		X			5	23%
Carter Burden Luncheon Club		X						X	X	X							X			X		6	27%
Prospect Hill																	X		X			2	9%
PSS Harlem				X								X							X			3	14%
UJC Lillian Wald					X								X						X			3	14%
TOTAL	7	10	6	4	3	3	1	2	2	2	2	6	2	2	5	1	10	4	16	3	2	93	

A = No Evidence of Fire Inspection

B = No Assembly Permit

C = Lack of Current DOHMH Permit

D = No Emergency or Exit Sign Lights

E = Emergency and Exit Doors Blocked

F = Issues with Stairs and Handrails

G = Expired Fire Extinguisher Tags

H = No Evidence of Fire Extinguisher Training

I = No Fire Drills

J = Not Handicap Accessible/Handicap Entrance Blocked

K = Lack of Heimlich Maneuver Sign

L = Lack of Required Food Handlers

M = Issues with Vermin

N = Issues with Storage of Food

O = Cluttered or Dirty Center

P = Lack of Heat at Center

Q = Issues with Functioning Bathrooms

R = Damaged, Cracked, Broken Floors

S = Leaks, Cracks, and Peeling on Walls, Ceilings and Doors

T = Issues with Lighting and Fixtures

U = Issues with Windows



**Photograph No 1 (a) – Obstructed Handicapped Entrance at Cypress Hills
Fulton Street Neighborhood Senior Center**



**Photograph No 1 (b) – Handicapped Entrance Cleared of Obstruction
(Photo provided by DFTA, dated 5/15/2017)**



Photograph No 2 (a) – Cracked Plaster at Cypress Hills Fulton Street Neighborhood Senior Center



**Photograph No 2 (b) – Cracked Plaster Was Repaired
(Photo provided by DFTA, dated 5/24/2017)**

APPENDIX III



Photograph No 3 (a) – Peeling Paint on the Wall in Men’s Bathroom at Prospect Hill Neighborhood Senior Center



**Photograph No 3 (b) – Peeling Paint on the Wall in Men’s Bathroom Was Repaired
(Photo provided by DFTA, dated 5/12/2017)**

APPENDIX III



Photograph No 4 – Broken Wall at Cypress Hills Fulton Street Neighborhood Senior Center



Photograph No 5 – Peeling Paint on Door at UJC Lillian Wald Houses Senior Center



Photograph No 6 – Cracked Ceiling in Dining Room Area at Patterson Houses Senior Center



Photograph No 7 – Emergency Exit Door Does Not Open in the Outward Direction at Patterson Houses Senior Center



Photograph No 8 – Water Damage at JASA Throgs Neck Neighborhood Senior Center



Photograph No 9 – Peeling Base Board in Multi-activity Room at Heights and Hills Senior Center



Donna M. Corrado,
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June 20, 2017

Ms. Marjorie Landa
Deputy Comptroller for Audit
Office of the City Comptroller
One Centre Street, Room 1100
New York, NY 10007-2341

Re: Audit Report of the Department for the Aging's Monitoring of Senior Centers –
MG16-111A

Dear Deputy Comptroller Landa:

Thank you for the opportunity to respond to the City Comptroller Office "Audit Report of the Department for the Aging's Monitoring of Senior Centers."

The delivery of a positive experience at senior centers is critically important to the Department. The centers have an average daily attendance of 28,000 older adults, and 146,000 individual seniors participated in DFTA's senior centers in FY 2017. Participants enjoyed nutritious meals, were assisted with social services, and engaged in health-promoting and life-enriching programs.

Senior centers provide enhanced programming in health and wellness, arts and culture, technology, assistance with benefits and entitlements, and volunteer opportunities. Many programs serve New York's new immigrant populations as well as longtime residents whose primary language may not be English. DFTA assures that centers are culturally and linguistically competent.

DFTA supports evidence-based (EB) Health Promotion programming in all senior centers. Many programs have sent staff to DFTA to be trained as certified leaders in EB programs so they can conduct them in their own centers. DFTA also directly provides EB workshops for those programs that cannot send staff for training.

Senior centers offer activities centered on arts and culture. SU-CASA is DFTA's joint program with the Department of Cultural Affairs and the City Council, which places professional artists and arts organizations in senior centers to work with seniors on projects. The projects can include paintings, sculptures, dances and much more. Senior centers offer computer classes that cover basic information, such as how to use the internet and how to use social-networking sites.



Considering the volume and variety of services that senior centers provide, it is clear that they are vital in fighting social isolation and improving health outcomes for the City's seniors, as was demonstrated through the first longitudinal study of the impact of senior center programming on the health and well-being of participants, published by the Fordham University School of Social Service in 2016. For some seniors, their center is not only a place where they interact with fellow members, but it is also a place where they volunteer. In doing so, these seniors continue to engage with their communities in an especially meaningful way.

DFTA has carefully considered the findings and recommendations in the report, and where the Department agrees with report findings, it has identified measures to further enhance and strengthen the management and monitoring of these facilities:

Monitoring of Senior Centers

The City Comptroller mentions that DFTA needs to improve its monitoring and follow-up of issues noted through its annual assessments, as well as through technical assistance visits conducted between the annual assessments by program officers and nutritionists assigned to a specific portfolio of centers. DFTA does, in fact, formally note each issue and keeps the issues "open" until correction takes place. DFTA agrees with the City Comptroller that an improved management oversight system is needed, which DFTA has been developing over the last year, both through technological enhancements to its Program Assessment System (PAS) as well as improved operational practices.

In fact, work is underway at DFTA to further strengthen oversight practices and build on the enhancements to PAS. DFTA program staff have been working with their IT colleagues to revise the automated PAS in various ways. By the end of the Calendar Year, DFTA will institute new reporting functions that will make more efficient use of data used to track correction of conditions. Moreover, as noted in the audit report, new practices that were put into effect this fiscal year are being implemented, including post-assessment meetings with providers that are having particular difficulty resolving compliance matters. DFTA expects that this and other revised practices will assist providers and DFTA staff in "closing the loop" on outstanding matters.

Ensure That All Senior Centers' Deficiencies Are Corrected

The audit refers to unannounced visits conducted by the audit team to 30 senior centers during the course of the review to illustrate this finding. It must be noted that these sites were selected because deficiencies had been identified either in the prior audit or in DFTA's own initial assessment visit. While we do not contest the observations noted in the report, we do take issue with the presentation that may suggest these conditions, though unacceptable to the Department, are a representative sample of centers: the findings for this atypical sample of 30 centers should not be extrapolated to the senior center network overall. In



addition, DFTA must emphasize that it does indeed prioritize for immediate correction critical health and safety matters, and in fact has closed centers with respect to such safety concerns.

DFTA contracts with community-based providers to operate 246 senior centers throughout the five boroughs as well as 29 other sites affiliated with those centers. The City Comptroller reviewed 21 nutrition and program compliance items at 30 centers from within the overall network of 246 senior centers, totaling 630 compliance items. While we do not minimize the importance of the cited compliance concerns, we do point out that the 30 centers were found to be in compliance with 87% of these standards at the time of the audit.

DFTA maintains an extensive and robust network of senior centers. It is always working to ensure that programs correct conditions, and has in the course of normal business been addressing these items with the senior centers and other City agencies as needed, such that at this point in time, the 87% compliance figure has risen to 93%, now with 42 items in the correction phase. Seven of these 42 remaining items will be resolved after the completion of a renovation at one center. Additional items among those remaining are either underway, or require the issuance of requested permits and completion of work orders. While working on the correction of all issues, DFTA takes steps to correct acute significant safety issues where the entities owning the buildings in which the centers are located may be unable to quickly resolve concerns.

To more comprehensively assess overall senior center system compliance with standards, DFTA reviewed PAS results for the entire network and found 95% compliance by senior centers at the time of their assessments, with ongoing correction of issues noted through the process taking place during and subsequent to the assessments. These data demonstrate that the Department maintains a strong level of compliance.

Standards for Assisting Senior Centers

The standards noted in this section of the City Comptroller report focus especially on matters potentially impacting other City and quasi-City agencies, ranging from permits to allow for construction-related remediation to take place, to prompt correction of work order requests. As described above, DFTA is coordinating with other City agencies central to its monitoring efforts. It should be noted that senior center programs are responsible for and largely do maintain the centers in a code compliant and sanitary manner, as clearly demonstrated above through the 95% compliance figure at the point of assessment. Senior center staff continue to maintain proper documentation and address facility issues when they arise, or work with their landlord or property manager, including NYCHA, as needed. When there are issues that the program is unable to resolve, either due to lack of funding, technical expertise, or appropriate/successful follow-up with building management or regulatory agencies, DFTA does assist.



While we agree that more standardized documentation of DFTA's assistance to centers is needed, we do give significant support to programs in this area, including:

- Provision of additional funding when needed to address violations or necessary improvements.
- Access to technical assistance from DFTA's Facility Management staff for situations requiring technical expertise beyond the senior center staff's capacity. This includes items such as reviews of work scopes and bid documents as well as guidance on procedures for obtaining permits.
- Major involvement by DFTA staff where renovations are needed to obtain Place of Assembly permits and address other code issues.
- On-going communication between contracted senior center staff and NYCHA, as needed, to address immediate and long-term facility issues.

Monitor the Adequacy and Sufficiency of Staffing

DFTA has recognized the need to review periodically staffing levels impacting program officers and nutritionists who monitor senior centers. Based on our most recent assessment of staffing needs, DFTA decided to devote resources to the hiring of two additional program officers as well as one nutrition consultant. These new positions are expected to be filled by mid-summer 2017. DFTA will continue to monitor staffing requirements to ensure that the additional staff is sufficient to properly monitor our senior centers.

Formally Track Complaints Received Pertaining to the Senior Centers

The report recognizes that DFTA tracks the resolution of 311 complaints, but states that the Department does not have a formal system for tracking the resolution of complaints received via the Mayor's Office, email or US mail. As you may know, DFTA does ensure resolution of the complaints received through all of these channels, but it does not currently have a formal system for documenting and tracking the resolution of these complaints. DFTA is currently developing a formal tracking system that is expected to be in place in fall 2017.

Vendex Evaluations

The report notes that 90% or 223 of 249 the evaluations were completed on time and states that DFTA should work to increase that number. DFTA is confident that the recent hires and related enhancements will allow the Agency to increase that percentage.

Based on the audit findings, following is the Agency's response to each City Comptroller audit recommendation:



1. **DFTA should establish an effective information system that tracks all serious deficiencies and recurring problems found at each senior center until they are resolved.** Response: Refer to comments above concerning PAS enhancements, including additional management reporting functions and tighter oversight practices.
2. **DFTA should develop protocols supported by changes in its information system to require and enable DFTA program officers and nutritionists to include and document the current status of previously found deficiencies as part of the agency's assessment tool for all visits.** Response: This information is being included as one of the enhancements to PAS currently underway.
3. **DFTA should ensure that the senior centers identified in this report resolve all of the serious deficiencies cited in this report.** Response: DFTA is tracking progress in this regard to help ensure achievement of this objective. Indeed, over half of the outstanding issues noted in the audit have either already been corrected, or will be corrected soon as the result of a renovation at one center, with an anticipated completion date of fall 2017.
4. **DFTA should work with NYCHA officials to enhance communication and coordination of efforts regarding the deficiencies and required repairs at senior centers located in NYCHA facilities.** Response: DFTA is in ongoing discussions with NYCHA officials and will continue that work to solidify processes for responding to deficiencies and repair needs in a timely manner.
5. **DFTA should create policies and procedures for its program officers, nutritionists, and other relevant agency personnel in sufficient detail, and with a resource guide and examples where warranted, to ensure that DFTA staff are aware of the kinds of assistance they should provide to centers to help facilitate the centers' interactions with City agencies and third parties to achieve compliance with DFTA's standards for the safe conditions and effective operation of senior centers.** Response: DFTA already has extensive protocols and policies for staff with respect to addressing deficiencies impacting programs; however, we will review these policies with the program officers and nutritionists to explore opportunities to further strengthen operations.
6. **DFTA should establish better lines of communication with center program directors and solicit feedback regarding the needs of the centers and the services provided by DFTA.** Response: A number of enhancements, as indicated above, have been implemented for programs and staff, promoting communications in this regard. Moreover, further improvements will be achieved as the monitoring tools and management practices described above are effectuated.



7. **In the event that serious deficiencies persist unaddressed, and based on a full, historical assessment of the center's performance, including all unresolved and recurring deficiencies, DFTA should assess whether the center should remain eligible for City funding.** Response: DFTA has already and continues to close centers based on the persistence of serious deficiencies. Further, we will use the enhanced monitoring process described above to better track deficiencies and document any ongoing deficiencies that may result in program closures.
8. **DFTA should conduct a study to determine the adequacy of its staffing and structure in relation to the number of senior centers it oversees and whether its current staffing levels are adequate to ensure thorough assessments, monitoring, follow-up, and assistance to DFTA's standards for senior centers.** Response: DFTA determined that additional staff were needed, and is adding two program officers, as well as diverting identified non-senior center contracts to other units. Also, DFTA will be revisiting the staffing resources regularly to help ensure that resource levels are adequate to comprehensively monitor programs, including the use of the PAS tracking and monitoring enhancements under development.
9. **DFTA should maintain a record of all complaints it receives pertaining to the senior centers so that it can track and monitor the resolution of the complaints and identify any specific areas that require additional attention.** Response: A complaint driven tracking system is under development and will be ready in fall 2017.
10. **DFTA should ensure that it promptly completes VENDEX evaluations for all centers for which it has not yet completed a required evaluation.** Response: As mentioned above, DFTA is confident that the recent hires and the shift to the PassPort and related enhancements will allow the Agency to increase the VENDEX evaluation percentage above the current 90% on-time level.

Sincerely,

A handwritten signature in blue ink, appearing to read "Donna M. Corrado". The signature is fluid and cursive, with a large initial "D".

Donna M. Corrado, Ph.D.