



Legislation Text

File #: 18-118, **Version:** 1

Accept a Follow-Up Report on the In-Home Supportive Services (IHSS) Program Internal Control Review issued on April 27, 2017

Published Notice Required? Yes _____ No X
Public Hearing Required? Yes _____ No X

DEPARTMENTAL RECOMMENDATION:

The Department of Health & Social Services (H&SS) recommends that the Board accept a Follow-Up Report on the In-Home Supportive Services (IHSS) Program Internal Control Review issued on April 27, 2017.

SUMMARY:

On September 12, 2017, the Board received an Internal Control Review report presented by the Auditor-Controller's Office (ACO) on the In-Home Supportive Services (IHSS) Program. A link to that agenda item is attached.

The objective of the ACO's review was to evaluate the adequacy and effectiveness of IHSS internal controls, the procedures used to carry out assigned responsibilities, and compliance with applicable policies and standards. The ACO finalized and published their findings along with recommended opportunities for improvement dated April 27, 2017. The purpose of this Board Follow-up Report from H&SS is to describe the activities completed and in-progress related to the internal control review, specifically the areas for improvement and recommendations.

DISCUSSION:

IHSS is a statewide program administered at the County level by H&SS, Older & Disabled Adult Services (ODAS), and under the direction of the California Department of Social Services (CDSS). The goal of IHSS is to provide those with limited income who are disabled, blind or over the age of 65, with in-home care services to help them remain safely at home. Qualified individuals have the right to apply and are guaranteed services based on eligibility factors and determination of need.

The ACO's Internal Control Review of the IHSS program (dated April 27, 2017) reported opportunities for improvement in order to be in compliance with required mandates and to better achieve program objectives. ODAS has made evident progress within the IHSS Program with respect to the areas as outlined below.

- 1) The documentation of supervisor review and approval of intake cases. (In progress)
In FY2014/15, ODAS began implementing a paperless workflow system, the Transformation of Content Management (TACOMA). In the next phase of development of TACOMA a "box" is being added to the workflow for intake of cases that will specifically indicate supervisor review and approval for each case. This added functionality will be used to document the completed review.
- 2) Develop a process to randomly check provider timesheets. (In progress)
CDSS does not currently require County IHSS programs to pull error-free provider timesheets for review. However, CDSS has developed a draft All County Letter (ACL) relating to the subject of IHSS timesheet exceptions, and this pending ACL will require that IHSS programs annually check one percent (1%) of provider timecards. Once this ACL is released, County ODAS Quality Assurance staff will track and trend the required information.
- 3) Directed mailings, which did not meet State requirements. (Completed)
The IHSS Program Integrity Unit is providing directed mailings yearly. Mailing lists for the annual directed mailing are

coordinated with CDSS to match lists prior to mailing to avoid unintentional duplication. Policies and procedures for directed mailings include the adoption of forms/letters. ODAS office assistant staff provide support to the Program Integrity Unit.

- 4) Unannounced home visits; which were not performed in FY 2015/16. (Completed)
The ODAS Quality Assurance unit is on target to reach the required number of unannounced home visits for the current fiscal year.
- 5) Fraud referral management. (Completed)
While the IHSS Program Integrity Unit is in compliance with CDSS expectations for fraud referral, staff continue to review the management of such referrals to identify areas for improvement. For example, the Program Integrity Unit is now using a spreadsheet to supplement tracking of referrals and Office Assistant support to this effort has significantly increased.
- 6) State-required desk reviews and home visits. (Completed)
The required numbers of desk reviews and home visits are now being completed:
SOC 824 10/1/2016 Qtr 1 (July-Sept) 18 desk reviews, 4 home visits;
SOC 824 1/10/2017 Qtr 2 (Oct-Dec) 87 desk reviews, 10 home visits;
SOC 824 4/11/2017 Qtr 3 (Jan-Mar) 82 desk reviews, 2 home visits;
SOC 824 7/10/2017 Qtr 4 (April-June) 89 desk reviews, 12 home visits.
- 7) Errors contained in the QA/QI Quarterly Activities Report (Completed)
The Quality Assurance(QA)/Quality Improvement (QI) Quarterly Activities Report (SOC824 form) is now regularly reviewed by the ODAS Public Health Nurse Manager and Health Services Administrator and reconciled prior to submission to CDSS.

The ODAS Bureau will continue to address the concerns identified by the Office of the Auditor-Controller in the Internal Control Review of the IHSS Program, both by completing implementation of recommendations for areas of concern that are in progress and maintaining successful implementation of recommendations for areas of concern that are completed.

FINANCIAL IMPACT:

The cost of preparing this report is included in the FY2017/18 Adopted Budget. There is no impact to the County General Fund.

ALTERNATIVES:

The Board could elect not to receive this follow-up report as presented. This is not recommended as it provides a status update on notable progress made within the IHSS Program.

OTHER AGENCY INVOLVEMENT:

No other agencies were involved.

CAO RECOMMENDATION:

APPROVE DEPARTMENTAL RECOMMENDATION