

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

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Audit Report on the Monitoring of Senior Citizen Center Conditions by the Department for the Aging

MG01-194A

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

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EXECUTIVE SUMMARY

Background

The Department for the Aging (DFTA) plans, administers, and coordinates the provision of services that help many of the 1.3 million senior citizens in the City participate in their communities and maintain their independence. DFTA supports a broad range of services for the elderly, both directly and through contracts with community-based organizations. These services include the provision of senior citizen centers, congregate and home-delivered meals, transportation, case management, social services, legal assistance, and home care. DFTA receives federal, state and City funds, as well as private grants and contributions.

DFTA has contracts with 338 senior citizen centers in the City to provide services to the elderly. These centers are located in City-owned buildings (five percent), City-leased buildings (nine percent), New York City Housing Authority buildings (28 percent), sponsor-owned buildings (eight percent), and sponsor-leased buildings (50 percent).

DFTA conducts one formal survey and assessment of each senior citizen center every year. This survey is comprised of inspections by a program officer and a nutritionist. While most of this survey relates to the center's social and nutritional programs, the survey also addresses the maintenance of the center. The DFTA survey assessment reports identify service and maintenance issues that the center must address by indicated due dates. In addition to notifying the center about problems that must be corrected, DFTA program officers are required to notify the DFTA Facilities Management unit when they identify a center that requires renovations. Facilities Management staff—those at the agency with expertise on technical building requirements—do not routinely visit centers to determine the need for renovations. This unit primarily relies on the program

officers and others outside DFTA to bring centers requiring renovations to their attention.

In fiscal year 2001, DFTA had 375 employees and expenditures of \$237 million. DFTA spent \$21 million on personal services and \$216 million on other than personal services.

Objective

The objective of this audit was to determine the effectiveness of DFTA's efforts to ensure the proper maintenance of its senior citizen centers in terms of the centers' safety, cleanliness, physical condition, and accessibility.

Scope and Methodology

The scope of our audit was fiscal years 2001 through February 14, 2002, the date of our last visit to the centers.

To achieve our audit objective, we interviewed DFTA officials and reviewed the agency's written procedures for monitoring senior citizen centers, its survey assessments of selected centers, and other relevant documentation, including reports, contracts, and database printouts. We reviewed DFTA's Contract Agency Program Management Manual to determine the maintenance standards that it applies to its senior citizen centers. We also reviewed the Building Code of the City of New York, The City of New York Fire Code, and the federal Americans with Disability Act Accessibility Guidelines for Buildings and Facilities for standards that we, with limited expertise on technical building requirements, could readily check at the centers.

Based on these reviews, we developed a checklist of items to inspect during our visits. This checklist was revised and refined based on our visits to three judgmentally selected centers. Upon completion of our finalized checklist (see Appendix I), we randomly selected and visited 36 of the 338 senior centers in the City. We made our random selections on a borough by borough basis to ensure that we would visit centers in each borough in proportion to the percentage of the City's centers that were located in the borough. We conducted our visits to the centers from December 14, 2001, to February 14, 2002. The 39 centers that we visited are listed in Appendix II

Using the checklists, we recorded our observations of each center's safety, cleanliness, physical condition, and accessibility. We also photographed many of the conditions we found at these centers and reviewed center documentation relating to evacuation plans, fire drills, safety inspections, incident reports, and Notices of Violation issued by City agencies. We surveyed the physical

environments of the centers from a generalist's perspective. We obtained technical advice from the New York City Fire Department's Bureau of Fire Prevention concerning some of the safety conditions we noted during our visits to the centers.

This audit was conducted in accordance with Generally Accepted Government Auditing Standards (GAGAS) and included tests of records and other auditing procedures considered necessary. This audit was performed in accordance with the City Comptroller's audit responsibilities as set forth in Chapter 5, § 93, of the New York City Charter.

Results in Brief

DFTA regularly surveys and assesses the quality of services as well as the safety, cleanliness, physical condition, and accessibility of its senior citizen centers. We did not evaluate either the services provided at these centers or the DFTA assessments of these services. However, we did conclude that DFTA needs to improve its efforts to review the safety, cleanliness, physical condition, and accessibility of its centers.

Our visits to 39 senior citizen centers provided evidence that the maintenance of these centers' safety, cleanliness, physical condition, and accessibility needs to be improved. Most of the centers we visited were clean and in decent physical condition, and several of the centers were accessible to the handicapped. However, there were fire safety problems at many of the centers we visited, and there were cleanliness, physical condition, and accessibility issues at some of them. After reviewing the most recent DFTA survey assessment reports on these centers, we concluded that the agency's efforts to ensure the proper maintenance of its senior citizen centers needs to be strengthened.

Numerous Fire Safety Problems at Senior Citizen Centers

There were fire safety problems at many of the centers we visited. These problems primarily related to the centers' evacuation plans and diagrams, fire drills, safety system inspections, and exit passageways.

Of the 39 centers we visited, 12 did not have either a written evacuation plan or a clear diagram showing the center's exits; 15 centers had a written plan, but their plan lacked a clear evacuation diagram; and two centers had an evacuation diagram, but no written instructions to explain the diagram or the roles of staff and volunteers in the event of an evacuation. Inadequacies in evacuation plans were compounded by the fact that 26 of the 39 centers had no documentary evidence that they conducted at least two fire drills a year, as required by the DFTA program manual. Furthermore, none of the centers we visited were able to

provide evidence that all of their emergency safety systems, including fire alarms, emergency lighting, sprinklers, and smoke detectors, had been regularly inspected or tested.

One of the most significant fire safety problems we noted at many centers related to exit passageways. There were 22 centers that lacked one or more exit signs or that had one or more exit signs that were not illuminated. In addition, there were 21 centers that had one or more of its exits blocked or partially blocked. Exit-blocking ranged from major hindrances to minor obstacles that would limit free movement through designated exit passageways in the event of an emergency. Some of the obstacles appeared to be temporary in nature. However, so many exits were "temporarily blocked" that we have concluded that consistently maintaining clear exit passageways at these centers is a low priority.

Other fire safety concerns at the centers included the following:

- 18 centers had no smoke detectors,
- nine centers did not have all of their fire extinguishers inspected at least every six months.
- four centers did not have directional exit signs pointing to the means of egress,

Some Cleanliness and Physical Condition Concerns Noted during Visits to Senior Citizen Centers

Most of the 39 centers we visited were clean and in reasonable physical condition. However, we had concerns about the cleanliness and physical condition of some of the centers.

The cleanliness concerns related to sanitary conditions in the kitchens of two of the centers, and to the sanitary conditions in the bathrooms of one center. The physical condition concerns we noted at a total of 13 centers related to missing ceiling tiles at six centers; ceilings and walls needing to be painted or wallpapered at five centers; floors or steps requiring repair at five centers; cracked windows at two centers; and a broken entrance door-closer at one center.

Some Accessibility Problems Noted During Visits to Senior Citizen Centers

DFTA categorized only 10 of the 39 centers we visited as being compliant with Americans with Disabilities Act (ADA) guidelines. We reviewed the accessibility of these centers to the handicapped in terms of center entrances, bathrooms, elevators, and lifts. While all 10 of these centers had entrances, bathrooms, elevators, and lifts that appeared to be accessible, we had some concerns in this area.

During our visits, there were two centers with automated lifts to accommodate wheelchairs at the front entrance that had not been inspected for more than three years. The elevator at another center did not have an interior light, and three centers had no documentary evidence that their elevators had been recently inspected. In addition, at a center not categorized as being ADA-compliant, there was a toilet that had a handrail for the handicapped on only one side, because the handrail on the other side had broken off and had not been replaced.

Several Community Districts Lack an ADA-Compliant Senior Citizen Center

Federal regulations require that programs, such as DFTA's senior citizen center program, make reasonable accommodations for their facilities to be accessible to the handicapped. Federal regulations do not require that every senior citizen center in the City be ADA-compliant. However, the regulations do state that if the cost of making a particular center ADA-compliant is prohibitive, reasonable accommodations should be made so that disabled seniors have alternative centers to visit. DFTA initially informed us that its senior citizen center program met this standard by ensuring that there was at least one ADA-compliant center in each of the 59 community districts in the City.

We reviewed DFTA's list of ADA-compliant senior citizen centers and noted the community districts in which they are located. We concluded that eight community districts—three in Manhattan, three in the Bronx, one in Queens, and one in Brooklyn—lacked an ADA-compliant senior citizen center. While there are active renovation projects to improve the accessibility of centers located in four of these community districts, there will still be at least four community districts in the City that lack an ADA-compliant center even after these projects are completed.

DFTA argued that it does not need to have an ADA-compliant center in each community district because it provides handicapped senior citizens with transportation to ADA-compliant centers in nearby community districts. Better compliance with federal ADA regulations could be achieved by DFTA by upgrading the accessibility of at least one of the centers in each community district that will continue to lack a compliant center after all of the active accessibility-upgrade projects are completed.

DFTA Survey and Assessment Process Needs Improvement

The Department for the Aging's survey and assessment process for its senior citizen centers needs improvement concerning the safety, cleanliness, physical condition, and accessibility of the centers.

During its most recent inspections, DFTA did not note most of the fire and personal safety problems described earlier, that we found in the 39 centers we visited. DFTA cited only one of the four centers that we noted lacked a current place-of-assembly permit, one of the 22 centers that lacked exit signs or had exit signs that were not illuminated, one of the 21 centers that had an obstructed exit passageway, six of the 18 centers that had no smoke detectors, and two of the nine centers that did not have all of their fire extinguishers inspected at least every six months.

In addition, DFTA did not note in its most recent inspections some of the cleanliness and most of the physical condition problems we observed at the centers. DFTA did cite both kitchens that were less than properly sanitary and the floors or steps of two of the five centers that needed repair, but it did not cite the other problems. DFTA also did not note the ADA accessibility problems we observed in its most recent inspections of the centers we visited.

Given the fact that DFTA did not note so many of the safety, cleanliness, physical condition, and accessibility concerns that we observed at the 39 centers we visited, we must conclude that DFTA survey efforts are inadequate and in need of improvement.

DFTA's Program Assessment System Needs to be Upgraded

Upon completion of a survey and assessment of a senior citizen center by a program officer or a nutritionist, the surveyor enters the results into DFTA's computerized Program Assessment System (PAS). These results show the problems noted during the survey and the dates by which centers are expected to correct the problems. As evidence is presented to the surveyor, either through a reinspection or a mailed document, that a problem has been corrected, the surveyor enters into PAS the date that correction of the problem is confirmed. However, when a new assessment year begins during the first few months of a new fiscal year, all of the results of the surveys conducted during the previous year are placed into a read-only state in PAS. Thus, with the beginning of each new assessment year, all the centers start with a clean ratings slate. Therefore, DFTA is unable to update information in PAS on outstanding problems because the previous year's results are placed in a read-only state at the beginning of the new assessment year.

In reviewing the fiscal year 2001 survey assessment reports generated by PAS for the 39 centers we visited, we noted that there was no indication that 472 (66%) of the 717 deficiencies cited by the surveyors (relating to both services and maintenance) had ever been corrected. DFTA argues that once it began a new assessment year in fiscal year 2002, the previous year's findings were not relevant because each center would receive a new formal survey and assessment. However, for some of these centers, this formal survey would not be performed

for many months, during which time problems could easily continue uncorrected. Monitoring of a center's efforts to correct outstanding deficiencies should be a process that continues until the next formal survey at the center, and should not be discontinued at the start of a new assessment year.

Recommendations

The audit resulted in 16 recommendations, including the following:

The Department for the Aging should ensure that all senior citizen centers:

- Have written emergency evacuation plans that are posted on a public bulletin board on each floor. These plans should include diagrams showing the designated exit passageways at the center, and written instructions that include, among other things, the roles of employees and volunteers during an emergency.
- Conduct fire drills at least twice yearly and maintain documentary evidence of such drills.
- Regularly inspect and test their emergency safety systems.
- Maintain well-lit and unobstructed exit passageways, and provide adequately illuminated exit signs as needed.
- Immediately resolve the specific safety, cleanliness, physical condition, and accessibility problems noted in this audit concerning the 39 centers we visited.
- DFTA should ensure that Community District No. 2 in the Bronx, Community District No. 4 in Brooklyn, Community District No. 4 in Manhattan, and Community District No. 11 in Queens have at least one ADA-compliant senior citizen center.
- DFTA should enhance its survey efforts concerning the safety, cleanliness, physical conditions, and accessibility of its centers.
- DFTA should continue to monitor, through its Program Assessment System, the correction of outstanding deficiencies at each center until the time of the next formal survey.

DFTA Response

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 officials on May 10, 2002 and was discussed at an exit conference held on May 21, 2002. On June 5, 2002, we submitted a draft report to DFTA officials with a request for comments. We received a written response from DFTA on June 21, 2002.

In its response, DFTA generally agreed with the audit's recommendations concerning the safety, cleanliness, physical conditions, and accessibility of its senior citizen centers. On safety, DFTA stated that it "will send more reminders to center staff of their responsibility for the safety of their participants." On cleanliness, DFTA stated that "there is no reason why senior center staff cannot maintain a clean and sanitary site and we will continue to enforce these requirements." On physical conditions, DFTA stated that "centers do not always have control over their surroundings." DFTA cited three other City agencies that also have some responsibility for the physical conditions of some of the senior centers—the New York City Housing Authority for centers located at its housing developments, and the Department of Citywide Administrative Services and the Department of Design and Construction for City-owned and City-leased centers. On accessibility, DFTA stated that ongoing projects will upgrade a few senior citizen centers such that every community district in the City will have at least one center that complies with the requirements of the Americans with Disabilities Act. Concerning its own survey efforts, DFTA stated that it "is looking again at its system of monitoring and assessing senior centers." DFTA's responses to our specific recommendations are presented throughout the body of this report.

The full text of DFTA's comments is included as an Addendum to this report.

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INTRODUCTION

Background

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Scope and Methodology

The scope of our audit was fiscal years 2001 through February 14, 2002, the date of our last visit to the centers.

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Based on these reviews, we developed a checklist of items to inspect during our visits. This checklist was revised and refined based on our visits to three judgmentally selected centers. Upon completion of our finalized checklist (see Appendix I), we randomly selected and visited 36 of the 338 senior centers in the City. We made our random selections on a borough by borough basis to ensure that we would visit centers in each borough in proportion to the percentage of the City's centers that were located in the borough. We conducted our visits to the centers from December 14, 2001, to February 14, 2002. The 39 centers that we visited are listed in Appendix II

Using the checklists, we recorded our observations of each center's safety, cleanliness, physical condition, and accessibility. We also photographed many of the conditions we found at these centers and reviewed center documentation relating to evacuation plans, fire drills, safety inspections, incident reports, and Notices of Violation issued by City agencies. We surveyed the physical environments of the centers from a generalist's perspective. We obtained technical advice from the New York City Fire Department's Bureau of Fire Prevention concerning some of the safety conditions we noted during our visits to the centers.

We chose not to expand our sample size to the number of centers that would have enabled us to project our results onto the entire population of 338 senior citizen centers. We made this decision because at the estimated error rate of at least 50 percent, to achieve a 95 percent confidence level, we would have had to visit from about 75 to about 180 centers, depending on the

¹We had an estimated error rate of at least 50 percent because we found areas of concern about the maintenance of a majority of the centers in our preliminary sample.

desired precision rate.² We concluded that randomly selecting more than 10 percent of the senior citizen centers for visits would provide us with a reasonable insight into the conditions of these centers and would be an appropriate use of limited auditing resources. Upon completion of our visits, we reviewed the most recent DFTA survey assessment reports on these centers in order to compare our results with those of DFTA.

This audit was conducted in accordance with Generally Accepted Government Auditing Standards (GAGAS) and included tests of records and other auditing procedures considered necessary. This audit was performed in accordance with the City Comptroller's audit responsibilities as set forth in Chapter 5, § 93, of the New York City Charter.

DFTA Response

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 officials on May 10, 2002 and was discussed at an exit conference held on May 21, 2002. On June 5, 2002, we submitted a draft report to DFTA officials with a request for comments. We received a written response from DFTA on June 21, 2001.

In its response, DFTA generally agreed with the audit's recommendations concerning the safety, cleanliness, physical conditions, and accessibility of its senior citizen centers. On safety, DFTA stated that it "will send more reminders to center staff of their responsibility for the safety of their participants." On cleanliness, DFTA stated that "there is no reason why senior center staff cannot maintain a clean and sanitary site and we will continue to enforce these requirements." On physical conditions, DFTA stated that "centers do not always have control over their surroundings." DFTA cited three other City agencies that also have some responsibility for the physical conditions of some of the senior centers—the New York City Housing Authority for centers located at its housing developments, and the Department of Citywide Administrative Services and the Department of Design and Construction for Cityowned and City-leased centers. On accessibility, DFTA stated that ongoing projects will upgrade a few senior citizen centers such that every community district in the City will have at least one center that complies with the requirements of the Americans with Disabilities Act. Concerning its own survey efforts, DFTA stated that it "is looking again at its system of monitoring and assessing senior centers." DFTA's responses to our specific recommendations are presented throughout the body of this report.

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OFFICE OF THE COMPTROLLER NEW YORK CITY

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 $^{^2}$ We would have had to visit about 75 centers at a 10 percent precision rate and about 180 centers at a five percent precision rate.

FINDINGS AND RECOMMENDATIONS

DFTA regularly surveys and assesses the quality of services as well as the safety, cleanliness, physical condition, and accessibility of its senior citizen centers. We did not evaluate either the services provided at these centers or the DFTA assessments of these services. However, we did conclude that DFTA needs to improve its efforts to review the safety, cleanliness, physical condition, and accessibility of its centers.

<u>DFTA's Efforts to Ensure the Proper Maintenance</u> of its Senior Citizen Centers could be Improved

Our visits to 39 senior citizen centers provided evidence that the maintenance of these centers' safety, cleanliness, physical condition, and accessibility needs to be improved. Most of the centers we visited were clean and in decent physical condition, and several of the centers were accessible to the handicapped. However, there were fire safety problems at many of the centers we visited, and there were cleanliness, physical condition, and accessibility issues at some of them. After reviewing the most recent DFTA survey assessment reports on these centers, we concluded that the agency's efforts to ensure the proper maintenance of its senior citizen centers needs to be strengthened.

Numerous Fire Safety Problems at Senior Citizen Centers

There were fire safety problems at many of the centers we visited. These problems primarily related to the centers' evacuation plans and diagrams, fire drills, safety system inspections, and exit passageways.

Of the 39 centers we visited, 12 did not have either a written evacuation plan or a clear diagram showing the center's exits; 15 centers had a written plan, but their plan lacked a clear evacuation diagram; and two centers had an evacuation diagram, but no written instructions to explain the diagram or the roles of staff and volunteers in the event of an evacuation. Only 10 centers had both a written evacuation plan and a clear diagram of the center's exits.

Three of the 10 centers with both written evacuation plans and evacuation diagrams did not post them on a public bulletin board. In addition, seven of the 17 centers that had either a written evacuation plan or an evacuation diagram did not post it on a public bulletin board. Inadequacies in evacuation plans were compounded by the fact that 26 of the 39 centers had no documentary evidence that they conducted at least two fire drills a year, as required by the DFTA program manual.

None of the centers we visited were able to provide evidence that all of their emergency safety systems, including fire alarms, emergency lighting, sprinklers, and smoke detectors, had

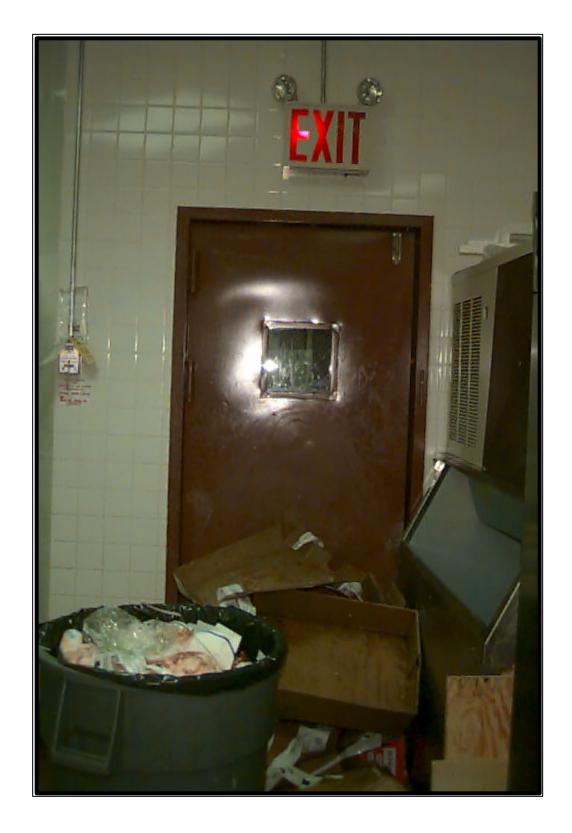
been regularly inspected or tested.³ Whether any or all of these systems are required in a particular senior citizen center by the City building and fire codes depends on the type of building in which the senior citizen center is located. If it is required that a center have one or more of these systems, the systems must be inspected and tested by individuals possessing the relevant certificates of fitness issued by the New York City Fire Department. If a center has certain emergency systems beyond those required by the codes, those who test and inspect those systems are not required to possess certificates for those systems; however, Fire Department officials recommend that they possess such certificates.

Many of the center directors we spoke with during our visits told us that the building's owner or manager, or the center's parent organization or sponsor, are responsible for such inspections and tests, and would maintain any related documentation. Even in these circumstances, the center itself could maintain a log of such inspections and tests. The log could show the dates of inspections and tests, and the names of the individuals or organizations performing them. This approach would help to ensure greater center involvement in fire safety efforts.

Centers that serve 75 or more seniors on site need a place-of-assembly permit that is issued by the Buildings Department, based on an annual inspection by the Fire Department. Four of the 26 centers we visited that serve 75 or more seniors on site did not have current place-of-assembly permits as of the dates of our visits. For those centers that serve fewer than 75 seniors on site, the DFTA program manual requires that the center request an annual fire inspection through the local firehouse. There was no documentation of such inspections or requests for such inspections at any of the 13 centers we visited that serve fewer than 75 seniors on site.

One of the most significant fire safety problems we noted at many centers related to exit passageways. There were 22 centers that lacked one or more exit signs or that had one or more exit signs that were not illuminated. In addition, there were 21 centers that had one or more of its exits blocked or partially blocked. Exit-blocking ranged from major hindrances to minor obstacles that would limit free movement through designated exit passageways in the event of an emergency. Some of the obstacles appeared to be temporary in nature. However, so many exits were "temporarily blocked" that we have concluded that consistently maintaining clear exit passageways at these centers is a low priority. In addition, four of these 21 centers had locked exit doors. One center had a locked metal grating covering the entire exit door and another center had chain locks on the doors. After we pointed out these situations to the directors of these centers, these exit doors were immediately unlocked. The following photographs show six examples of the types of blocked (and locked) exits found during our visits.

³Although three centers had documentary evidence that their emergency lighting had been tested, three centers had evidence that their fire alarm system had been tested, and four centers had evidence that their sprinklers and/or smoke detectors had been inspected, none of the centers had evidence that all of their emergency safety systems had been inspected and tested.



Photograph No. 1, A blocked exit at Sephardic Senior Center in Brooklyn.



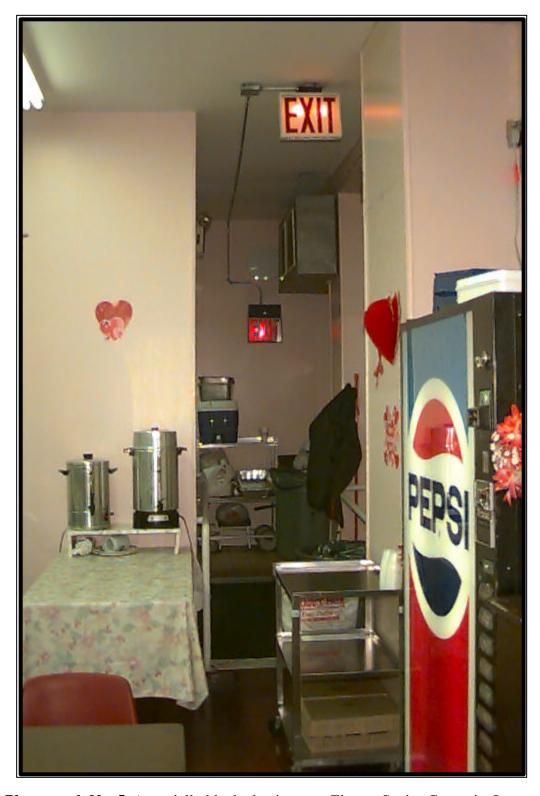
Photograph No. 2, A blocked exit at Brookdale Village Senior Center in Queens.



Photograph No. 3, A padlocked exit at Farragut Senior Center in Brooklyn.



Photograph No. 4, Padlocked exits at Community Lounge Senior Center in Manhattan.



Photograph No. 5, A partially blocked exitway at Elmcor Senior Center in Queens.



Photograph No. 6, A blocked exit at SNAP Eastern Queens Senior Center.

Other fire safety concerns at the centers included the following:

- 18 centers had no smoke detectors,
- nine centers did not have all of their fire extinguishers inspected at least every six months.
- four centers did not have directional exit signs pointing to the means of egress,
- two centers had one or more doors that did not open in the direction of exit travel,
- two centers had one or more stairways that lacked handrails,
- one center had one or more doors that could not be easily opened from the inside,
- one center had an exit that was not properly lit,
- one center had no portable fire extinguishers,
- one center had a broken fire extinguisher,
- one center (serving 85 seniors) had no emergency lighting,
- one center had a large accumulation of empty boxes and other items to be discarded, and
- one center had paint cans stored near its hot water heater (see photograph on the next page).

We also noted other personal safety concerns during our visits as follows:

- eight centers had no policy of forwarding reports of major injuries to DFTA, and
- two centers had no "Choking Victim" poster that was visible in the dining room area.

Table I on page 14 shows a summary of the fire safety conditions found at the 39 centers visited by the auditors.



Photograph No. 7, Paint cans and other flammable substances stored near a hot-water heater at Murray Hill SRO Senior Center in Manhattan.

Table I

Summary of Fire and Personal Safety Conditions Found at 39 Centers Visited by Auditors

Fire and Personal Safety Conditions	No. of Centers Found with that Condition	Percentage of Centers with that Condition
Lack of documentary evidence that two fire drills are conducted every year	26	67%
Lack of exit signs, or signs were not illuminated	22	56%
One or more exits blocked or partially blocked	21	54%
Lack of smoke detectors	18	46%
Lack of clear evacuation diagram (but had a written plan)	15	38%
Lack of both a written evacuation plan and a clear diagram showing exits	12	31%
Fire extinguishers not inspected every six months	9	23%
No policy of forwarding reports of major injuries to DFTA	8	21%
Lack of Place-of-Assembly permits	4	10%
Lack of directional exit signs pointing to means of egress	4	10%
Locked exit doors	4	10%
Doors that do not open in the direction of exit travel	2	5%
No "Choking Victim" poster visible in the dining room area	2	5%
Lack of written evacuation plan (but had a diagram)	2	5%
Stairways that lacked handrails	2	5%
Exit doors that could not be easily opened from the inside	1	3%
Exits not properly lit	1	3%
Lack of portable fire extinguishers	1	3%
Broken fire extinguishers	1	3%
Lack of emergency lighting	1	3%
Accumulation of empty boxes and other refuse for disposal	1	3%
Paint cans and other flammable material stored near a hot-water heater	1	3%

DFTA's monitoring and follow-up efforts regarding fire and personal safety problems are discussed later in this audit report in a section entitled "DFTA Survey and Assessment Process Needs Improvement."

Recommendations

The Department for the Aging should ensure that all senior citizen centers:

1. Have written emergency evacuation plans that are posted on a public bulletin board on each floor. These plans should include diagrams showing the designated exit passageways at the center, and written instructions that include, among other things, the roles of employees and volunteers during an emergency.

<u>**DFTA Response:**</u> "Currently we require written emergency procedures, but not their posting. We also do not require diagrams, other than at sites with elevators where signs at each landing must display a diagram showing stairs with instructions to use the stairs

in case of fire. ... DFTA will revise its requirements for emergency evacuation plans to include diagrams and posting. We will send more reminders to center staff of their responsibility for the safety of their participants."

2. Conduct fire drills at least twice yearly and maintain documentary evidence of such drills

<u>DFTA Response</u>: "We already require programs to keep records of fire drills. Program records can be checked during any DFTA staff visit. The number of drills per year is determined by the New York City Fire Department."

<u>Auditors' Comments</u>: DFTA's program manual requires that its senior centers conduct at least two fire drills per year. Our concern is that 26 of the 39 senior citizen centers we visited did not maintain records showing compliance with this requirement.

3. Regularly inspect and test their emergency safety systems. The centers should possess documentary evidence of such inspections and tests or, at the very least, maintain a log showing the dates of such inspections and tests, and the names of the individuals or organizations performing them. These systems should be inspected and tested by individuals possessing the applicable certificates of fitness issued by the New York City Fire Department.

<u>DFTA Response</u>: "We agree that safety systems should be tested regularly to assure good operation. This includes fire alarms, emergency lighting, sprinklers and smoke detectors. We do not require tests at specific intervals; rather, all systems should be in good working order at all times, including whenever any DFTA staff chooses to conduct a test. We will revise our requirements, but we think the 'we can test at any time' approach has merit in that it lets programs know they must always be ready. Where the landlord, not the DFTA center, maintains such records, we will encourage centers to maintain their own log of inspection or request. Regarding certification of persons inspecting and testing such systems, DFTA follows requirements of the New York City Fire Department and will continue to do so."

4. Possess current place-of-assembly permits (for those centers that are required to have such permits).

<u>DFTA Response</u>: "The Department already requires current Place of Assembly Permits, including public posting of such Permit. This is one of the items checked annually and we will continue to do so and to follow-up with any site found not in compliance. DFTA considers having Place of Assembly (PA) Permits for programs with room occupancy of greater than 75 persons to be of utmost importance. The code compliance items required to have a PA permit ensure the safety of our seniors in event of fire.

"The audit cited five sites as not having PA Permits. Two of these sites, Elmcor and JASA Parkchester have attendance of less than 75 persons per day and are not required to have a PA permit. SNAP of Eastern Queens is in a State Office of Mental Health

building at the former Creedmore complex. This facility was renovated in accordance with the New York State Building Code. There are features in the Dining Room similar to those required by the NYC Department of Buildings, but filing was handled as a state job. No PA is required. SI Comm Svces Friendship has an expired PA for 160 persons (PA permits must be renewed annually). We have advised the program to renew their PA. City Hall, a newly relocated center, has filed for a PA and was constructed in strict accordance with PA code requirements. Awaiting final Fire Department inspection and issuance of actual permit."

<u>Auditors' Comments</u>: Our report only cites four centers for not having Place of Assembly permits. These centers included Elmcor, SNAP of Eastern Queens, Staten Island Community Services Friendship Center, and City Hall. We did not identify JASA Parkchester as a center that required a Place of Assembly permit. During our visits to Elmcor, the director informed us that they serve 80 persons per day at the center. Therefore, this center would require a Place of Assembly permit. In reference to SNAP of Eastern Queens, an official of the New York City Fire Department's Bureau of Fire Prevention informed us that even though the center is located in a state facility, the center would still need a Place of Assembly permit in that it serves 100 persons a day at the site.

5. Maintain documentary evidence, or at least a log, of an annual Fire Department inspection, or a request for such an inspection (for those centers that are not required to have place-of-assembly permits).

required to have place-of-assi

<u>DFTA Response</u>: "As with the previous recommendation, we already require annual Fire Department inspection. Senior centers can only request such inspection, so the record of request must be maintained if the Fire Department has not been able to carry out the inspection. Where the landlord, not the DFTA center, maintains such records, we will encourage centers to maintain their own log of inspection or request."

6. Maintain well-lit and unobstructed exit passageways, and provide adequately illuminated exit signs as needed.

<u>DFTA Response</u>: "We agree that unobstructed and well-lit exits are essential for the safety of senior participants. We already require this; DFTA program staff checks each site at least once a year and we will encourage staff to note the condition of exits at each visit."

7. Immediately resolve the specific fire and personal safety problems noted in this audit concerning the 39 centers we visited.

<u>DFTA Response</u>: "DFTA staff is actively following up on each of the problems found during the course of this audit.

"Please note that fire alarm systems are not required by code for senior centers (See Article 5 27-968 of the NYC Building Code). Also note that sprinkler systems are typically required only in spaces below grade, exceeding certain heights depending on

type of construction, or lacking a required 'free openable area' (See Article 4 27-954 and Table 4-1 of NYC Building Code). Most of our senior centers are below the height limits and have adequate operable windows and, as such, are not required by code to be sprinklered."

<u>Auditors' Comments</u>: By referring to the need for fire alarms and sprinklers in the wide variety of building types in which its senior citizen centers are located, DFTA raises issues beyond the scope of this audit. We suggest that DFTA confirm its interpretations of Building Code requirements concerning these safety systems with the Fire Department and the Department of Buildings.

Some Cleanliness and Physical Condition Concerns Noted during Visits to Senior Citizen Centers

Most of the 39 centers we visited were clean and in reasonable physical condition. However, we had concerns about the cleanliness and physical condition of some of the centers.

These concerns related to sanitary and food storage conditions in the kitchens of some of the centers, and to the sanitary conditions in the bathrooms of one center. Specifically, the kitchens of two of the centers had less than proper sanitary conditions. At one center, there was an open bag filled with refuse that was placed on top of a kitchen counter while meals were being prepared. At another center, a stove and a dishwasher top were unclean, and there was evidence of the presence of mice. In addition, two centers' refrigerators and freezers did not have internal thermometers; four centers' refrigerators did not maintain temperatures from 35 to 40 degrees F; and three centers' freezers did not maintain a temperature from zero to minus 10 degrees F. Further, the bathrooms of one center were unsanitary—the facilities were unclean, and there was debris on the floors.

The physical condition concerns we noted at a total of 14 centers related to missing ceiling tiles at six centers; ceilings and walls needing to be painted or wallpapered at five centers; floors or steps requiring repair at five centers; cracked windows at two centers; and a broken entrance door-closer⁴ at one center. The following photographs show six examples of these types of conditions.

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⁴A door-closer is a mechanical metal arm that is attached to the top of a door; it forces an opened door to close when released.



Photograph No. 8, Unsanitary condition: open bag filled with refuse was placed on top of a kitchen counter at Selfhelp Clearview Senior Center in Queens.



Photograph No. 9, Loose and damaged floor tiles at Decatur Grant Square Senior Center in Brooklyn.



Photograph No. 10, Missing and damaged ceiling tiles at Schomberg Senior Center in Manhattan.



Photograph No. 11, Damaged ceiling and wall-plaster, and a broken door-closer at Decatur Grant Square Senior Center in Brooklyn.



Photograph No. 12, Damaged wallpaper in a program room at IPR HE Corona Senior Center in Queens.



Photograph No. 13, Missing ceiling tiles at Swinging 60's Senior Center in Brooklyn.

DFTA's monitoring and follow-up efforts regarding cleanliness and physical condition problems are discussed later in this audit report in a section entitled "DFTA Survey and Assessment Process Needs Improvement."

Recommendation

8. DFTA should ensure that the senior citizen centers take immediate action to correct the cleanliness and physical condition problems noted in this audit.

<u>DFTA Response</u>: "We agree with this recommendation. Concerning cleanliness, there is no reason why senior center staff cannot maintain a clean and sanitary site and we will continue to enforce these requirements. DFTA Nutrition staff visits each center four times per year, while DFTA Program staff visits at least once. At each of these visits, cleanliness is checked.

"Concerning physical condition, we must note that centers do not always have full control over their surroundings. Physical changes in sites that are owned by NYC Housing Authority must be made by NYCHA. Likewise, physical changes in sites that are owned or leased by NYC must be made or negotiated by the Department of Citywide Administrative services and the Department of Design and Construction."

Some Accessibility Problems Noted during Visits to Senior Citizen Centers

DFTA categorized only 10 of the 39 centers we visited as being compliant with Americans with Disabilities Act (ADA) guidelines. We reviewed the accessibility of these centers to the handicapped in terms of center entrances, bathrooms, elevators, and lifts. While all 10 of these centers had entrances, bathrooms, elevators, and lifts that appeared to be accessible, we had some concerns in this area.

During our visits, there were two centers with automated lifts to accommodate wheelchairs at the front entrance that had not been inspected for more than three years. The elevator at another center did not have an interior light, and three centers had no documentary evidence that their elevators had been recently inspected. In addition, at a center not categorized as being ADA-compliant, there was a toilet that had a handrail for the handicapped on only one side, because the handrail on the other side had broken off and had not been replaced.

DFTA's monitoring and follow-up efforts regarding accessibility problems are discussed later in this audit report in a section entitled "DFTA Survey and Assessment Process Needs Improvement."

Recommendation

9. DFTA should ensure that the senior citizen centers take immediate action to correct the accessibility problems noted in this audit.

<u>DFTA Response</u>: "The report noted that 2 automated lifts had not been inspected in more than 3 years. DFTA will remedy as required by code. Please note that there are no code required inspections for open lifts, only for lifts with shaft enclosures. It was indicated that the interior light in one elevator did not work. We are unclear as to the center where this was noted. Please advise as to which center and DFTA will remedy. One center, Pomonok, was identified in the survey as not having a current elevator inspection. We will notify NYCHA to remedy.

"The survey noted that a second handrail at a toilet in a non ADA compliant site was broken off. Since this center does not meet ADA, the handrail serves as a convenience item only. When ADA construction projects are performed all required handrails are installed in the ADA toilet stall or at the ADA unisex toilet as per ANSI standards. Audit report was not clear as to specific location."

<u>Auditors' Comments</u>: We did not base our recommendation that automated lifts for the handicapped be periodically inspected on a code requirement, but rather on the position that periodic inspections of the lifts would help ensure their safe operation. Similarly, we did not base our recommendation that the broken second handrail for a toilet in a non-ADA compliant center be repaired on a code requirement, but on the position that centers should maintain their physical conditions, including, in this case, a fixture that helped

make the center more accessible to the handicapped. We have provided extensive documentation to DFTA identifying the centers at which we observed the safety, cleanliness, physical condition, and accessibility concerns noted in this report. We will provide any additional clarifications DFTA needs to ensure that all of these concerns are addressed.

<u>Several Community Districts Lack</u> an ADA-Compliant Senior Citizen Center

Federal regulations require that programs, such as DFTA's senior citizen center program, make reasonable accommodations for their facilities to be accessible to the handicapped. Federal regulations do not require that every senior citizen center in the City be ADA-compliant. However, the regulations do state that if the cost of making a particular center ADA-compliant is prohibitive, reasonable accommodations should be made so that disabled seniors have alternative centers to visit. DFTA initially informed us that its senior citizen center program met this standard by ensuring that there was at least one ADA-compliant center in each of the 59 community districts in the City.

We reviewed DFTA's list of ADA-compliant senior citizen centers and noted the community districts in which they are located. We concluded that eight community districts—three in Manhattan, three in the Bronx, one in Queens, and one in Brooklyn—lacked an ADA-compliant senior citizen center. We also reviewed a DFTA list of active renovation projects (see Table II below) which showed that projects were underway to upgrade the accessibility of centers located in four of the community districts that did not have an ADA-compliant center. If the renovation projects render these centers ADA-compliant, there will still be four community districts in the City that lack an ADA-compliant center.

Table II

<u>List of Community Districts Lacking ADA Compliant Centers and Projects Underway to Upgrade ADA Accessibility Compliance</u>

No.	Community District Lacking an ADA- Compliant Center		ADA Compliance Upgrade Projects Underway At Senior Centers per Community District	
	Borough	Community District #	No. of Projects	Senior Center Being Upgraded
1	Bronx	2	0	
2	Bronx	9	1	RAIN Parkchester Sr Ctr
3	Bronx	12	1	Williamsbridge Sr Ctr
4	Brooklyn	4	0	
5	Manhattan	4	0	
6	Manhattan	5	1	Project Find Woodstock Sr Ctr
7	Manhattan	12	1	RAIN Inwood Sr Ctr
8	Queens	11	0	

DFTA argued that it does not need to have an ADA-compliant center in each community district because it provides handicapped senior citizens with transportation to ADA-compliant centers in nearby community districts. Better compliance with federal ADA regulations could be achieved by DFTA by upgrading the accessibility of at least one of the centers in each community district that will continue to lack a compliant center after all of the active accessibility-upgrade projects are completed.

Recommendation

10. DFTA should ensure that Community District No. 2 in the Bronx, Community District No. 4 in Brooklyn, Community District No. 4 in Manhattan, and Community District No. 11 in Queens have at least one ADA-compliant senior citizen center.

<u>DFTA Response</u>: "Bronx CD 2: Casa Boricua will be made ADA compliant as part of the Landlord's Lease Renewal Scope of Work. Brooklyn CD 4: Hope Gardens and Ridgewood Bushwick are ADA compliant. Manhattan CD 4: Newly funded project to make Project Find Clinton to commence in September. Queens CD 11: BFFY Bayside, an ADA compliant site, has been temporarily relocated so that upgrades can be performed to the building systems. Hence, it did not appear on the report furnished to the audit team."

<u>Auditors' Comments</u>: The list of ADA compliant senior centers that DFTA provided us did not include Hope Gardens or Ridgewood Bushwick. In addition, the list of active renovation projects that DFTA provided us did not indicate that these centers were scheduled to receive accessibility upgrades.

DFTA Survey and Assessment Process Needs Improvement

The Department for the Aging's survey and assessment process for its senior citizen centers needs improvement concerning the safety, cleanliness, physical condition, and accessibility of the centers.

Fire and Personal Safety Problems

During its most recent inspections, DFTA did not note most of the fire and personal safety problems described earlier, that we found in the 39 centers we visited. DFTA cited only one of the four centers that we noted lacked a current place-of-assembly permit, one of the 22 centers that lacked exit signs or had exit signs that were not illuminated, one of the 21 centers that had an obstructed exit passageway, six of the 18 centers that had no smoke detectors, and two of the nine centers that did not have all of their fire extinguishers inspected at least every six months.

Table III below compares DFTA's survey results with those of our field visits pertaining to fire and personal safety conditions for the 39 centers we visited.

Table III

Comparison of DFTA Survey Results Against Our Findings for Fire and Personal Safety Conditions Found at 39 Centers

Fire and Personal Safety Conditions	No. of Centers Auditors Found with Condition	No. of Centers Where DFTA Also Found this Condition
Lack of documentary evidence that two fire drills are conducted every year	26	0
Lack of exit signs, or signs were not illuminated	22	1
Obstructed exit passageways	21	1
Lack of smoke detectors	18	6
Lack of clear evacuation diagram (but had a written plan)	15	0
Lack of both a written evacuation plan and a clear diagram showing exits	12	0
Fire extinguishers not inspected every six months	9	2
No policy of forwarding reports of major injuries to DFTA	8	0
Lack of Place-of-Assembly permits	4	1
Lack of directional exit signs pointing to means of egress	4	0
Locked exit doors	4	0
Doors that do not open in the direction of exit travel	2	0
No "Choking Victim" poster visible in the dining room area	2	0
Lack of a written evacuation plan (but had a diagram)	2	0
Stairways that lacked handrails	2	0
Exit doors that could not be easily opened from the inside	1	0
Exits not properly lit	1	0
Lack of portable fire extinguishers	1	0
Broken fire extinguishers	1	0
Lack of emergency lighting	1	0
Accumulation of empty boxes and other refuse for disposal	1	0
Paint cans and other flammable material stored near a hot-water heater	1	0

Cleanliness and Physical Condition Problems

In addition, DFTA did not note in its most recent inspections some of the cleanliness and most of the physical condition problems we observed at the centers. DFTA did cite both kitchens that were less than properly sanitary and the floors or steps of two of the five centers that needed repair, but it did not cite the other problems.

Table IV below compares DFTA's survey results with those of our field visits pertaining to cleanliness and physical condition problems at the 39 centers we visited.

Table IV

Comparison of DFTA Survey Results Against Our Findings
for Cleanliness and Physical Condition Concerns at 39 Centers

Cleanliness and Physical Condition Problems	No. of Centers Auditors Found with Condition	No. of Centers Where DFTA Also Found this Condition
Missing ceiling tiles	6	0
Ceilings and walls needing repair	5	0
Floors and steps needing repair	5	2
Refrigerators did not maintain temperature from 35 to 40 degrees F.	4	0
Freezers did not maintain temperature from zero to minus 10 degrees F.	3	0
Kitchens that were less than sanitary	2	2
Refrigerators and freezers did not have internal thermometers	2	0
Cracked windows	2	0
Unsanitary bathroom condition, the facility was unclean and there was debris on the floors	1	0
Evidence of presence of mice	1	0
Broken entrance door-closers	1	0

Accessibility Problems

DFTA did not note the ADA accessibility problems we observed in its most recent inspections of the centers we visited.

Table V below compares DFTA's survey results with those of our field visits pertaining to ADA accessibility problems observed at the 39 centers we visited.

Table V

Comparison of DFTA survey results against our findings for ADA Accessibility

Maintenance Problems found at 39 centers we visited

ADA Accessibility Maintenance Problems	No. of Centers Auditors Found with Condition	No. of Centers Where DFTA Also Found this Condition
Centers lacked documentary evidence that elevators were recently inspected	2	0
Automated lift that accommodates wheelchairs had not been inspected in over 3 years	1	0
Elevator missing an interior light	1	0
Broken handrail at a non ADA-compliant center toilet	1	0

Given the fact that DFTA did not note so many of the safety, cleanliness, physical condition, and accessibility concerns that we observed at the 39 centers we visited, we must conclude that DFTA survey efforts are inadequate and in need of improvement.

Recommendations

DFTA should enhance its survey efforts concerning

- 11. The maintenance of safe conditions at the centers.
- 12. The presence of thermometers showing the maintenance of the proper temperature ranges in its centers' refrigerators and freezers.
- 13. The physical conditions of its centers' ceilings, walls, floors, steps, windows, and doors.
- 14. The proper maintenance of ADA-compliant features at its centers.

<u>DFTA Response to Recommendations 11 - 14</u>: "DFTA is looking again at its system of monitoring and assessing senior centers. Since DFTA staff cannot possibly check each center each day, we must rely on sponsors to maintain safe conditions, proper food storage temperatures, appropriate physical conditions and proper maintenance."

(Note: Recommendations related to the safety, cleanliness, physical condition, and accessibility problems at 39 senior citizen centers were made earlier in this report.)

DFTA's Program Assessment System Needs to be Upgraded

Upon completion of a survey and assessment of a senior citizen center by a program officer or a nutritionist, the surveyor enters the results into DFTA's computerized Program Assessment System (PAS). These results show the problems noted during the survey and the dates by which centers are expected to correct the problems. As evidence is presented to the surveyor, either through a reinspection or a mailed document, that a problem has been corrected, the surveyor enters into PAS the date that correction of the problem is confirmed. However, when a new assessment year begins during the first few months of a new fiscal year, all of the results of the surveys conducted during the previous year are placed into a read-only state in PAS. Thus, with the beginning of each new assessment year, all the centers start with a clean ratings slate. Therefore, DFTA is unable to update information in PAS on outstanding problems

⁵Reinspections are not mandatory. A center may submit evidence to a surveyor by mailing proof that a noted problem has been corrected. For example, if a center can prove with a photograph that a repair has been done, then that photograph can be mailed to the surveyor as evidence that the problem has been remedied.

because the previous year's results are placed in a read-only state at the beginning of the new assessment year.

In reviewing the fiscal year 2001 survey assessment reports generated by PAS for the 39 centers we visited, we noted that there was no indication that 472 (66%) of the 717 deficiencies cited by the surveyors (relating to both services and maintenance) had ever been corrected. DFTA argues that once it began a new assessment year in fiscal year 2002, the previous year's findings were not relevant because each center would receive a new formal survey and assessment. However, for some of these centers, this formal survey would not be performed for many months, during which time problems could easily continue uncorrected. Monitoring of a center's efforts to correct outstanding deficiencies should be a process that continues until the next formal survey at the center, and should not be discontinued at the start of a new assessment year.

In a related matter, we noted that PAS does not contain a field in which the surveyors can enter the dates of their surveys. The program officers and nutritionists are expected to enter their survey results in PAS within two weeks of the survey and are instructed to provide the center at least an additional four weeks to correct identified problems. Because the survey date cannot be recorded in PAS, the system cannot be used by DFTA management to track surveyor compliance with these timetables. Furthermore, a clear record of the date of the survey would enhance the validity of a surveyor's observations at a center.

Recommendations

15. DFTA should continue to monitor, through its Program Assessment System, the correction of outstanding deficiencies at each center until the time of the next formal survey.

<u>DFTA Response</u>: "We plan to continue this monitoring."

<u>Auditors' Comments</u>: DFTA does not address the recommendation. Our position is that DFTA should modify its Program Assessment System to be better able to track outstanding deficiencies at each center up until the time of the next formal survey.

16. DFTA should record the dates of its senior center surveys in its Program Assessment System.

<u>DFTA Response</u>: "The Program Assessment System (PAS) has been revised for FY 03 to include the date of each visit by DFTA program staff and DFTA nutrition staff. Also, in FY 03 PAS allows notes related to any DFTA standard, not just problems."

⁶The four weeks start from the date the results are entered into PAS. Once the survey results are entered into PAS, the center is notified in writing of the identified problem areas.

APPENDIX I

Checklist Used by Auditors for Visits to DFTA Senior Citizen Centers

Name of Senior Citizen Center:						
Address of Center:						
Date of Visit:						
Time of Visit:						
Names of Center Representative(s) Interviewed:				Tel:		
Names of Auditors:						
Maximum Number of Senior Citizens Served at Center:						
Interview Questions	Yes	No	Not		Comments	

T	tourious Oscations	Yes	No	Not	Comments
III	Interview Questions		110	App.	Comments
1	Does center have a written evacuation plan? If yes, get copy.			Арр.	
	Does plan identify emergency exits? Is it posted on a public bulletin board?				
2	Is emergency lighting for means of egress and exit signs tested regularly? If yes, do they have documentary evidence? If yes, get copy.				
3	Does the center possess any required place- of-assembly permit (if a program room serves more than 75 participants)? Is the place-of-assembly permit posted in the room?				
4	If a center is not required to have a place-of-assembly permit (because its program rooms serve less than 75 persons), has the center requested an annual fire inspection through the local firehouse? If yes, is there any documentary evidence that the request has been made? If yes, get copy. Is there any documentary evidence that the annual fire inspection has been done?				

Int	erview Questions (cont'd)	Yes	No	Not App.	Comments
5	If the center has a fire alarm system, is it tested regularly?			1100	
	If yes, do they have any documentary evidence?				
	If yes, get copy.				
6	If the center has sprinklers, are they inspected regularly?				
	If yes, do they have any documentary evidence? If yes, get a copy.				
7	Does the center have smoke detector(s)?				
	Are they checked regularly?				
	If yes, do they have any documentary evidence? If yes, get copy.				
	in yes, get copy.				
8	Are fire drills conducted regularly (at least twice yearly)?				
	If yes, is there any documentary evidence?				
	If yes, get copy.				
9	Does the facility have an emergency first aid kit?				
	If yes, check to make sure.				
10	If the center has received any notices of violation, how many? If yes, get copies.				
	If yes, has the center made appropriate corrections?				
11	Are accident and incident reports kept on file? If yes, check to make sure.				
	Are reports of major injuries filed with DFTA?				
	If yes, is there any documentary evidence? If yes, get copy.				

Em	ergency Exits & Signs	Yes	No	Not App.	Comments
12	Does the center provide unobstructed, well-lit exit passageways from the facility?				
13	Do emergency exit doors open in the direction of exit travel?				
14	Can emergency exit doors be easily opened from the inside without a key?				
15	Are all emergency exit signs clearly illuminated?				
16	Do emergency exit signs point to means of egress?				
Sta	irways	II.	l .		
17	Are internal stairways equipped with handrails to ensure safety of seniors?				

Spr	inklers and Fire Extinguishers	Yes	No	Not App.	Comments
18	Are sprinkler-heads unobstructed?			1499.	
19	Does the center have fire extinguishers?				
	How many?				
	Do tags indicate that they are inspected every 6 months?				
20	Are the fire extinguishers sealed with hoses intact?				
	vators and Lifts for the Handicapped	1			
21	Are elevators in working order? Are they inspected regularly? If yes, is there any documentary evidence? If yes, get copy. Are the elevators accessible to the handicapped?				
22	Are lifts for the handicapped in working order?				
	Are they inspected regularly? If yes, is there any documentary evidence? If yes, get copy.				

AD	A Compliance	Yes	No	Not App.	Comments
23	Is the entrance to the center accessible to the handicapped? Are ramps and/or lifts for the handicapped present, if needed?			- App.	
	Are entrance stairs equipped with handrails?				
24	Are the bathrooms accessible to the handicapped?				
	neral Cleanliness and Maintenance				
25	Are the bathrooms clean, well maintained, and well ventilated?				
26	Are kitchens well maintained?				
	Are stoves kept clean?				
	Did the kitchen appear to be pest free?				
27	Are refrigerators and freezers in working order?				
	Does each refrigerator and/or freezer have a working internal thermometer?				
	Does each refrigerator maintain temperatures at 35-40 degrees F?				
	Does each freezer maintain temperatures from 0 to minus 10 degrees F?				
28	Are paint and plaster maintained in good condition (no serious breaks or cracks)?				
29	Are the walls well maintained?				
	Is the wall paint in good condition?				

	neral Cleanliness and Maintenance	Yes	No	Not App.	Comments
	nt'd)	<u> </u>		ւ դրի.	Comments
30	Are ceilings well maintained?				
	Is the ceiling paint in good condition?				
	Are all ceiling tiles in place and in good condition?				
31	Are the windows well maintained?				
32	Are floors and carpets sound and well maintained?				
33	Are the center's dining and program areas comfortable and well maintained?				
34	Is the facility well ventilated?				
	Is the center's temperature within a comfortable range on date of visit?				
35	Is a "Choking Victim" poster visible in the dining room area?				
Ger	neral Comments	1			
	Describe any other safety, sanitation, accessibility, or maintenance concerns observed at the center.				

APPENDIX II

Listing of the 39 Senior Centers Visited

4 0 77 11 0 1 0 1	
	City Owned
	Sponsor Owned
	Sponsor Leased
4 Stanley Isaacs Senior Center 415 E. 93 rd Street	NYCHA **
5 Community Lounge Senior Center 155 E. 22 nd Street	Sponsor Leased
6 Schomburg Senior Center 1309 Fifth Avenue	Sponsor Leased
7 Drew Hamilton Senior Center 220 W. 143 rd Street	NYCHA
	NYCHA
9 Project Find Hamilton House 141 W. 73 rd Street	Sponsor Leased
10 Washington Heights Community Service, Inc. 650 W. 187 th Street	Sponsor Leased
11 Ennis Francis 2070 A C Powell Blvd.	Sponsor Leased
Brooklyn Senior Centers	•
1 Farragut Houses Senior Center * 228 York Street	NYCHA
	Sponsor Owned
3 Sephardic Multi Service Senior Center 485 Kings Highway	Sponsor Leased
	City Leased
5 Red Hook Senior Center 6 Wolcott Street	NYCHA
6 Young Israel of Bedford Bay Senior Center 2114 Brown Street	Sponsor Owned
7 Marcus Garvey Senior Center 1440 East New York Avenue	NYCHA
8 Decatur Grant Square Senior Center 19 Grant Square	City Leased
9 Bridge Street Senior Citizen Program 277 Stuyvesant Avenue	Sponsor Leased
	Sponsor Leased
	Sponsor Leased
Queens Senior Centers	•
1 BFFY Ozone Park Senior Center 103-02 101 Avenue – Ozone Park	Sponsor Leased
2 Brookdale Village Senior Center 131 Beach 19 th St. – Far Rockaway	Sponsor Leased
	Sponsor Leased
4 IPR HE Corona Senior Center 108-74 Roosevelt Ave Corona	Sponsor Leased
5 Selfhelp Clearview Senior Center 208-11 26 th Ave Bayside	Sponsor Leased
	Sponsor Leased
7 Elmcor Senior Center 98-19 Astoria Blvd. – East Elmhurst	Sponsor Leased
8 Pomonok Senior Center 6709 Kissena Blvd Flushing	NYCHA
Bronx Senior Centers	
1 PSS/Davidson Senior Center 950 Union Avenue	NYCHA
2 RAIN Gunhill Senior Center 3445 Holland Avenue	NYCHA
3 Einstein 135 Einstein Loop	Sponsor Leased
4 Mechler Hall Senior Center 2158 Watson Avenue	Sponsor Leased
5 East Concourse Luncheon Club 236 East Tremont Avenue	City Owned
6 JASA – Parkchester 2000 Benedict Avenue	Sponsor Leased
7 PIO Mendez 1291 Lafayette Avenue	Sponsor Leased
Staten Island Senior Centers	
1 S.I. Community Services Friendship Clubs 11 Sampson Avenue	Sponsored leased
2 Mariners Harbor Senior Center 22 Roxbury Street	NYCHA

^{*} Judgmentally selected senior centers** New York City Housing Authority



DEPARTMENT FOR THE AGING

2 LAFAYETTE STREET New York, New York 10007-1392 (212) 442-1100

Edwin Méndez-Santiago, MSW, CSW Commissioner

June 21, 2002

Mr. Roger D. Liwer Assistant Comptroller for Audits Office of the Comptroller 1 Centre Street, Room 1100 North New York, NY 10007-2341

> RE: Draft Audit Report on the Monitoring of Senior Citizens Center Conditions by the Department for the Aging-Audit Number MG01-

194A

Dear Mr. Liwer:

This is in response to your letter dated June 5, 2002. Attached you will find comments regarding your findings and our responses to your recommendations.

If you have any questions, please contact Ed Grant, Assistant Commissioner, Bureau of Administration and Budget at (212) 442-1061.

Sincerely,

NEW YORK CITY DEPARTMENT FOR THE AGING AUDIT RESPONSE

June 14, 2002

Audit Number MG01-194A

Recommendation # I - 7: The Department For The Aging should ensure that all senior citizen centers:

 Have written emergency evacuation plans that are posted on public bulletin board on each floor. These plans should include diagrams showing the designated exit passageways at the center, and written instructions that include, among other things, the roles of employees and volunteers during an emergency.

Currently, we require written emergency procedures, but not their posting. We also do not now require diagrams, other than at sites with elevators where signs at each landing must display a diagram showing stairs with instructions to use the stairs in case of fire. The more ways participants are reminded of emergency actions, the more likely it is that emergencies will be handled appropriately. Employees should be thoroughly familiar with emergency plans so that they can conduct evacuation in a safe and orderly manner. While volunteers at some centers could also assist in emergency evacuation, senior volunteers are as likely as other participants to require assistance themselves.

DFTA will revise its requirements for emergency evacuation plans to include diagrams and posting. We will send more reminders to center staff of their responsibility for the safety of their participants.

Conduct fire drills at least twice yearly and maintain documentary evidence of such drills.

We already require programs to keep records of fire drills. Program records can be checked during any DFTA staff visit. The number of drills per year is determined by the New York City Fire Department and we will follow their requirements.

3. Regularly inspect and test their emergency safety systems. The centers should possess documentary evidence of such inspections and tests, or, at the very least, maintain a log showing the dates of such inspections and tests, and the names of the individuals or organizations performing them. These systems should be

inspected and tested by individuals possessing the applicable certificates of fitness issued by the New York City Fire Department.

We agree that safety systems should be tested regularly to assure good operation. This includes fire alarms, emergency lighting, sprinklers and smoke detectors. We do not now require tests at specific intervals; rather, all systems should be in good working order at all times, including whenever any DFTA staff chooses to conduct a test. We will revise our requirements, but we think the "we can test at any time" approach has merit in that it lets programs know they must always be ready. Where the landlord, not the DFTA center, maintains such records, we will encourage centers to maintain their own log of inspection or request.

Regarding certification of persons inspecting and testing such systems, DFTA follows requirements of the New York City Fire Department and will continue to do so.

4. Possess current place-of-assembly permits (for those centers that are required to have such permits).

The Department already requires current Place of Assembly Permits, including public posting of such Permit. This is one of the items checked annually and we will continue to do so and to follow-up with any site found not in compliance. DFTA considers having Place of Assembly (PA) Permits for programs with room occupancy of greater than 75 persons to be of utmost importance. The code compliance items required to have a PA permit ensure the safety of our seniors in event of fire.

The audit cited five sites as not having PA Permits. Two of these sites, Elmcor and JASA Parkchester have attendance of less than 75 persons per day and are not required to have a PA Permit.

SNAP of Eastern Queens is in a State Office of Mental Health building at the former Creedmore complex. This facility was renovated in accordance with the New York State Building Code. There are features in the Dining Room similar to those required by the NYC Department of Buildings, but filing was handled as a state job. No PA is required.

SI Comm Svees Friendship has an expired PA for 160 persons (PA permits must be renewed annually). We have advised the program to renew their PA.

City Hall, a newly relocated center, has filed for a PA and was constructed in strict accordance with PA code requirements. Awaiting final Fire Department inspection and issuance of actual permit.

 Maintain documentary evidence, or at least a log, of annual Fire Department inspection, or a request for such inspection (for those centers that are not required to have place-of-assembly permits).

As with the previous recommendation, we already require annual Fire Department inspection. Senior centers can only request such inspection, so the record of request must be maintained if the Fire Department has not been able to carry out the inspection. Where the landlord, not the DFTA center, maintains such records, we will encourage centers to maintain their own log of inspection or request.

 Maintain well-lit and unobstructed exit passageways, and provide adequately illuminated exit signs as needed.

We agree that unobstructed and well-lit exits are essential for the safety of senior participants. We already require this; DFTA program staff checks each site at least once a year and we will encourage staff to note the condition of exits at each visit.

7. Immediately resolve the specific fire and personal safety problems noted in this audit concerning the 39 centers we visited.

DFTA staff is actively following up on each of the problems found during the course of this audit.

Please note that fire alarm systems are not required by code for senior centers (See Article 5 27-968 of the NYC Building Code).

Also note that sprinkler systems are typically required only in spaces below grade, exceeding certain heights depending on type on construction, or lacking a required "free openable area" (See Article 4 27-954 and Table 4-1 of the NYC Building Code). Most of our senior centers are below the height limits and have adequate operable windows and, as such, are not required by code to be sprinklered.

Recommendation #8: DFTA should ensure that the senior citizen centers take immediate action to correct the cleanliness and physical condition problems noted in this audit.

We agree with this recommendation. Concerning cleanliness, there is no reason why senior center staff cannot maintain a clean and sanitary site and we will continue to enforce these requirements. DFTA Nutrition staff

visits each center four times per year, while DFTA Program staff visits at least once. At each of these visits, cleanliness is checked.

Concerning physical condition, we must note that centers do not always have full control over their surroundings. Physical changes in sites that are owned by NYC Housing Authority must be made by NYCHA. Likewise, physical changes in sites that are owned or leased by NYC must be made or negotiated by the Department of Citywide Administrative Services and the Department of Design and Construction.

Recommendation #9: DFTA should ensure that the senior citizen centers take immediate action to correct the accessibility problems noted in this audit.

The audit noted that 2 automated lifts had not been inspected in more than 3 years. DFTA will remedy as required by code. Please note that there are no code required inspections for open lifts, only for lifts with shaft enclosures.

It was indicated that the interior light in one elevator did not work. We are unclear as to the center where this was noted. Please advise as to which center and DFTA will remedy.

One center, Pomonok, was identified in the survey as not having a current elevator inspection. We will notify NYCHA to remedy.

The survey noted that a second handrail at a toilet in a NON ADA compliant site was broken off. Since this center does NOT meet ADA, the handrail serves as a convenience item only. When ADA construction projects are performed all required handrails are installed in the ADA toilet stall or at the ADA unisex toilet as per ANSI standards. Audit report was NOT clear as to specific location.

Recommendation # 10: DFTA should make sure that Community District No. 2 in the Bronx, Community District No. 4 in Brooklyn, Community District No. 4 in Manhattan, and Community District No. 11 in Queens have at least one ADA-compliant senior citizens center.

Bronx CD 2

Casa Boricua will be made ADA compliant as part of the Landlord's Lease Renewal Scope of Work.

Brooklyn CD 4

Hope Gardens and Ridgewood Bushwick are ADA compliant.

Manhattan CD 4

Newly funded project to make Project Find Clinton to commence in September.

Queens 11

BFFY Bayside, an ADA compliant site, has been temporarily relocated so that upgrades can be performed to the building systems. Hence, it did not appear on the report furnished to the audit team.

Recommendations #11-14: DFTA should enhance its survey efforts concerning

- 11. The maintenance of safe conditions at the centers.
- 12. The presence of thermometers showing the maintenance of the proper temperature ranges in its centers' refrigerators and freezers.
- The physical condition of its centers' ceilings, walls, floors, steps, windows and doors.
- 14. The proper maintenance of ADA-compliance features at its centers.

DFTA is looking again at its system of monitoring and assessing senior centers. Since DFTA staff cannot possibly check each center each day, we must rely on sponsors to maintain safe conditions, proper food storage temperatures, appropriate physical conditions and proper maintenance.

Recommendation # 15: DFTA should continue to monitor through its Program Assessment System the correction of deficiencies noted at each center until the time of the next formal survey.

We plan to continue this monitoring.

Recommendation #16: DFTA should record the dates of its senior center surveys in its Program Assessment System.

The Program Assessment System (PAS) has been revised for FY 03 to include the date of each visit by DFTA program staff and DFTA nutrition staff. Also, in FY 03 PAS allows notes related to any DFTA standard, not just problems.