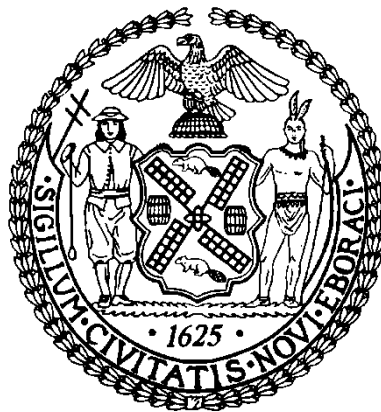


**CITY OF NEW YORK
OFFICE OF THE COMPTROLLER**

**John C. Liu
COMPTROLLER**

BUREAU OF MANAGEMENT AUDIT

**H. Tina Kim
Deputy Comptroller for Audit**



**Audit Report on the Program Compliance of the
Harlem Dowling-West Side Center for
Children and Family Services with Its
Administration for Children's Services
Preventive Service Agreement**

MH09-093A

March 18, 2010



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

John C. Liu
COMPTROLLER

To the Residents of the City of New York:

Contained herein is a report detailing an audit conducted by my office that determined the compliance of Harlem Dowling-West Side Center for Children and Family Services (Harlem Dowling) with key service provisions of its preventive service agreement with the New York City Administration for Children's Services (ACS). The audit concentrated on the controls of the Queens Outreach Center, one of four centers covered in the agreement.

The audit found that Harlem Dowling did not comply with significant provisions of its preventive service agreement or its own procedures. Therefore, there is no reasonable assurance that Harlem Dowling properly helped families at the Queens Outreach Center to obtain the preventive services needed to become stabilized and to reduce the risk that their children might be placed in foster care. A major factor that allowed deficiencies to exist was Harlem Dowling's failure to adequately oversee the operations at its Queens Outreach Center. The conditions found include the following: case records did not contain all required service plans and progress notes, the required number of contacts with the families was not always conducted, and some families' needs do not appear to have been met. In addition, Harlem Dowling could not provide evidence that personnel provisions related to required work experience, fingerprinting, and criminal-history record reviews were met for some of its employees. Based on the findings, the audit recommended that Harlem Dowling strengthen its oversight of the Queens Outreach Center and that it comply with the personnel provisions of its preventive service agreement.

The results of the audit have been discussed with ACS and Harlem Dowling 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 or call my office at 212-669-3747.

Sincerely,

A handwritten signature in black ink, appearing to read "JCL", with a large flourish extending to the right.

John C. Liu

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

**Audit Report on the Program Compliance of the
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Services with Its Administration for Children's Services
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MH09-093A

AUDIT REPORT IN BRIEF

The objective of this audit was to determine whether Harlem Dowling-West Side Center for Children and Family Services (Harlem Dowling) complied with certain key service provisions of its preventive service agreement with the New York City Administration for Children's Services (ACS) and its own procedures with regard to the preventive services provided at the Queens Outreach Center.

Harlem Dowling, a not-for-profit child welfare agency, provides preventive services to families under a purchase-of-service agreement with ACS. The general preventive services provided by Harlem Dowling, either directly or by referral, address the following areas: day care, homemaking, parent training, domestic violence, housing, job training, and health coverage. Harlem Dowling's four-year agreement with ACS covers the period January 1, 2006, through December 31, 2009. The agreement totals \$12,179,654 and requires Harlem Dowling to provide general preventive services to a maximum of 300 families (75 families at each of its four sites). There are four centers, two in Manhattan (the Central Harlem Center and the West Side Center) and two in Queens (the Far Rockaway Center and the Queens Outreach Center). This audit concentrated on the controls of the Queens Outreach Center.

Audit Findings and Conclusions

Harlem Dowling did not adequately comply with significant provisions of its preventive service agreement with ACS or its own procedures. Therefore, there is no reasonable assurance that Harlem Dowling properly helped families at the Queens Outreach Center to obtain the preventive services needed to become stabilized and to reduce the risk that their children might be placed in foster care. We believe that a major factor that allowed deficiencies to exist was Harlem Dowling's failure to adequately oversee the operations at its Queens Outreach Center. The conditions noted include the following:

- General preventive service case records did not contain all required Family Assessment and Service Plans (FASPs) and Progress Notes;
- The required number of minimum casework contacts with the families was not always conducted;
- Casework Supervisors did not always document their review of case records in case record review forms, as required;
- Some families' needs do not appear to have been met;
- No evidence that some of the employees had the required work experience when hired; and
- No evidence that some of the employees required to be fingerprinted were in fact fingerprinted when hired and, for those employees who could not be fingerprinted, that the required criminal-history records reviews were conducted.

We believe that the City, and more important, the families served, may not have received the full contractual benefit from the preventive service agreement because of problems noted in the audit.

Audit Recommendations

Based on our findings, we make six recommendations, three of which are listed below. Harlem Dowling should:

- Strengthen its oversight of the Queens Outreach Center to ensure that it improves Case Planners' performance with regard to the adequate and timely preparation of all required FASPs and Progress Notes. FASPs and Progress Notes should be maintained in CONNECTIONS and/or the hard-copy case record, as required, based on the type of case. In addition, Harlem Dowling should ensure that it improves the performance of the Casework Supervisor and the Director in overseeing Case Planners' review and signing all required FASPs. It also should ensure that the Case Planners make the minimum number of casework contacts with the families and document in the case records their diligent attempts to address the needs of the families identified in the FASPs.
- Strengthen its oversight of the Queens Outreach Center to ensure that case record reviews are conducted and documented monthly, as required, for the duration of the cases and that administrative-level reviews are conducted and documented for cases that remain open 24 months or longer. In addition, it needs to ensure that the needs of the families identified in the FASPs have been met and Plan Amendments are approved prior to closing the general preventive service cases and discontinuing services.

- Comply with the personnel provisions of its preventive service agreement with ACS and ensure that all current and prospective employees have the related work experience required for their positions and that it submits fingerprints of all prospective employees to State Division of Criminal Justice Services (DCJS).

ACS and Harlem Dowling Response

ACS and Harlem Dowling officials generally agreed with the audit's recommendations and have either implemented them or plan to implement them.

INTRODUCTION

Background

ACS was created in January 1996 to help protect the children in New York City from abuse and neglect through the provision of various types of services. Harlem Dowling, a not-for-profit child welfare agency, provides preventive services to families under a purchase-of-service agreement with ACS.

Preventive services include supportive and rehabilitative services provided to children under 18 years of age and their families for the purpose of: (1) averting an impairment or disruption of a family that will or could result in the placement of a child in foster care and (2) enabling a child who has been placed in foster care to return to his or her family at an earlier time than would otherwise be possible.

The general preventive services provided by Harlem Dowling, either directly or by referral, address the following areas: day care, homemaking, parent training, domestic violence, housing, job training, and health coverage.

Harlem Dowling's agreement with ACS is for a four-year term covering the period January 1, 2006, through December 31, 2009. The agreement totals \$12,179,654 and requires Harlem Dowling to provide general preventive services to a maximum of 300 families (75 families at each of its four sites). There are four centers, two in Manhattan (the Central Harlem Center and the West Side Center) and two in Queens (the Far Rockaway Center and the Queens Outreach Center).

In general, the agreement states that each of the families is to be served for a period not to exceed 24 months unless there is a need for continued services. Longer periods are to be justified and documented by Harlem Dowling on Administrative Review forms. In addition, the agreement requires that Harlem Dowling maintain at least a 90 percent utilization rate (the number of families that Harlem Dowling actually serves divided by 300, the maximum number of families that can be served under the agreement).

At each center, Harlem Dowling staff members function as Case Planners and are responsible for developing FASPs. A FASP is the document that is prepared by Harlem Dowling staff to record its assessment of a family's needs, including goals and activities necessary to achieve the goals, as well as updates regarding goal achievements. FASPs must be completed within a certain time period of a Case Initiation Date: the Initial FASP within 30 days, the Comprehensive FASP within 90 days, and the Reassessment FASP within 6 months and every 6 months thereafter.¹

Progress Notes are prepared by Harlem Dowling staff at each center to document a family's chronological progress and adherence to the FASPs and to discuss the current condition

¹ A Case Initiation Date is the first date a family initially receives any type of service from ACS.

of a family. Progress Notes should be prepared soon after casework contacts have been made with a family to provide an accurate account of pertinent information and to preserve the integrity of the information discussed during the contacts.

In addition to developing FASPs and preparing Progress Notes, Harlem Dowling staff is responsible for providing the required number of minimum casework contacts with a family, consistent with assessed needs. The staff at each center is required to maintain adequate documentation in case records to support the services provided.

According to its agreement, ACS staff members function as Case Managers and are responsible for approving eligibility of services, authorizing the provision of services, monitoring casework contacts, and providing review and written approval of the FASPs.

ACS monitors and evaluates the performance of Harlem Dowling through two separate computer systems—CONNECTIONS, a New York State (State) system of statewide records of child welfare cases, and the Preventive Organization Management Information System (PROMIS), an ACS system of records of preventive service cases.² Harlem Dowling staff at each center are required to record detailed case information (FASPs and Progress Notes) in CONNECTIONS and general case information (e.g., dates casework contacts made with a family and types of casework contacts) in PROMIS. Through PROMIS, ACS is able to track the duration of each case and the utilization rate of a preventive service organization. ACS can also generate statistical reports in PROMIS.

This audit concentrated on the controls of the Queens Outreach Center, since in 2006 the ACS VENDEX performance evaluation indicated that this center needed improvement.

Objective

The objective of this audit was to determine whether Harlem Dowling complied with certain key service provisions of its preventive service agreement with ACS and its own procedures with regard to the preventive services provided at the Queens Outreach Center.

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 objectives. 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.

² According to ACS officials, these two systems have been linked since January 2009.

The audit covered the period from July 2007 through February 2009.

To obtain an understanding of the responsibilities, goals, and regulations governing Harlem Dowling, we reviewed and used as criteria:

- The general preventive service agreement between ACS and Harlem Dowling,
- State Office of Children and Family Services *CONNECTIONS Case Management Step-By-Step Guide*,
- ACS *PROMIS Instructional Guide for Case Planners, Program Directors, and Supervisors*,
- ACS *Preventive Services Quality Assurance Standards & Indicators* (ACS Standards & Indicators),
- ACS memorandums issued on April 7, 2000, and March 8, 2007, clarifying the Family Casework Contact Requirements,
- ACS memorandums issued on August 3, 2000, and October 3, 2000, on conducting the criminal-history record checks of prospective employees,
- June 2008 Revised Minimum Supervision Standards for Preventive Service Providers, and
- Harlem Dowling *Preventive Services Program Policies and Procedures Manual*.

We visited each of the four Harlem Dowling centers to obtain a general understanding of their practices and procedures in handling general preventive cases for which they were responsible. In addition, we interviewed the following Harlem Dowling employees: the Executive Director, the Deputy Executive Director, the Chief Operating Officer, the Director of Quality Assurance and Management Information Systems, and the Directors, Casework Supervisors, and one Case Planner at each of the four centers.

ACS officials were also interviewed, including: the Assistant Commissioner of the Office of Research and Evaluation, Director of Preventive Agency Measurement System (PAMS) of the Office of Research and Evaluation, the Deputy Agency Chief Contracting Officer, Assistant Director of Internal Reviews, Deputy General Counsel, Assistant Commissioner of the Office of Policy Development and Program Planning, the Director of Family Support Services, the Deputy Director of Family Support Services, a Case Supervisor from Family Support Services, the Assistant Commissioner of Agency Program Assistance, the Supervisor of Agency Program Assistance, the Director of Child Welfare Programs and the Deputy Director of PROMIS.

We queried the City's Vendor Information Exchange System (VENDEX) to check whether the general preventive service agreement was registered with the Comptroller's Office. We also determined whether ACS conducted any performance evaluations of the compliance of Harlem Dowling with its preventive service agreement during calendar years 2006 through 2007 and, if so, we reviewed the performance ratings (Satisfactory, Unsatisfactory, or Needs Improvement).

Reliability of Systems Data

PROMIS Data Reliability

ACS provided 12 Excel spreadsheets extracted from PROMIS containing monthly data pertaining to the general preventive service cases provided by Harlem Dowling during the period July 2007 through June 2008. These spreadsheets contained data for 584 general preventive service cases—136 cases for the Central Harlem Center, 169 for the Westside Center, 139 for the Far Rockaway Center, and 140 for the Queens Outreach Center.

To test the reliability of the case information in PROMIS, we performed the following tests:

- From the spreadsheet containing the Queens Outreach Center's general preventive service cases, we randomly selected 20 of the 57 cases that had been closed during the period of July 2007 and November 2008. Specifically, the 20 cases included 15 cases that had been open for at least one year and 5 cases that had been open less than a year. We determined whether the information recorded in PROMIS matched information in the hard-copy case records of the Queens Outreach Center, a test of PROMIS data accuracy, and
- We selected all general preventive service cases from the cabinets that were closed during the period of July 2007 and November 2008 (there were 57 cases) and determined whether they were recorded in PROMIS, a test of PROMIS data completeness.

CONNECTIONS Data Reliability

We relied on the 2006 determination of the New York State Comptroller that CONNECTIONS was reliable. Its April 6, 2006 audit report, *Implementation of CONNECTIONS* (2004-S-70), concluded that controls had been implemented to verify that the system was being used as designed.

Documentation in Case Records

For all of the 15 general preventive service cases we randomly selected from a population of cases in PROMIS for the Queens Outreach Center that were reported closed during July 2007 and November 2008 and open for at least one year, we determined whether the case records contained:

- All required documentation necessary for the Queens Outreach Center Case Planner process (e.g., forms for Intake, Contract for Service, Incoming Referral, FASPs, and Progress Notes). For those case records that had FASPs, we determined whether the Queens Outreach Center Case Planners had completed the FASPs within the required time period. In addition, we determined whether each of the FASPs was appropriately approved.

- Evidence that the needs of the families were assessed at the beginning of the case histories, that the goals of the families were clearly stated, and that Queens Outreach Center Case Planners made diligent attempts to involve the families to achieve the stated goals, and
- Evidence that the Queens Outreach Center staff made the two face-to-face casework contacts with the families each month, one of which must occur in the home (based on Progress Notes and visit confirmation forms found in the case records).³

Supervision of Cases

For each of the sampled 15 general preventive service cases, we determined whether the Casework Supervisor documented her review of the case records on the case record review forms at least once every two weeks for the duration of cases, as required. Based on the June 2008 Revised Minimum Supervision Standards for Preventive Service Providers, for those cases still open after June 2008, we determined whether the Casework Supervisors documented the review of the case records on the case record review forms each month.

Of the sampled 15 general preventive service cases, we determined that 5 cases remained active 24 months or longer. For these cases, we determined whether the required Administrative Review forms were appropriately prepared.

Qualifications of Case Planners and Their Superiors

We reviewed the employee personnel files for all 48 employees involved with preventive service cases (including case planners, supervisors, and administrative assistants) who were on Harlem Dowling's payroll as of December 1, 2008. We determined whether 42 of the 48 employees who required specific education and prior work experience fulfilled their job specifications. We also determined whether all 48 employees had clearances from the Statewide Central Register of Child Abuse and Maltreatment and had criminal-history record checks conducted through DCJS. Of the 48 employees, 38 employees had been hired after Harlem Dowling entered into its agreement with ACS and after Harlem Dowling had signed its Use and Dissemination Agreement with DCJS (February 11, 2002). For these 38 employees, we determined whether there was evidence on file to document that fingerprints had been sent to DCJS.

The results of our testing of the above-noted samples, while not projected to their respective populations, provided a reasonable basis to satisfy our audit objective.

³ For a portion of the time that 2 of the 15 cases were active, the only face-to-face casework contact requirement was for a total of 12 face-to-face contacts in a six-month period (no minimum monthly requirement).

Discussion of Audit Results

The matters covered in this report were discussed with ACS and Harlem Dowling officials during and at the conclusion of this audit. A preliminary draft report was sent to ACS and Harlem Dowling officials and discussed at an exit conference held on November 12, 2009. On December 31, 2009, we submitted a draft report to ACS and Harlem Dowling officials with a request for comments. We received a written response from ACS and Harlem Dowling officials on January 27, 2010. In their response, ACS and Harlem Dowling officials generally agreed with the audit's recommendations and have either implemented them or plan to implement them.

The full text of the ACS and Harlem Dowling response is included as an addendum to this report.

FINDINGS AND RECOMMENDATIONS

Harlem Dowling did not adequately comply with significant provisions of its preventive service agreement with ACS and its own procedures. Therefore, there is no reasonable assurance that Harlem Dowling properly helped families at the Queens Outreach Center to obtain the preventive services needed to become stabilized and to reduce the risk that their children might be placed in foster care. We believe that a major factor that allowed deficiencies to exist was Harlem Dowling's failure to adequately oversee the operations at its Queens Outreach Center, which resulted in the following conditions:

- General preventive service case records did not contain all required FASPs and Progress Notes.
- FASPs and Progress Notes were not always prepared on time, and FASPs did not always contain the required signatures.
- The required number of minimum casework contacts with the families was not always conducted.
- Casework Supervisors did not always document their review of case records in case record review forms, as required.
- General preventive service cases open for more than 24 months lacked the required Administrative Review forms.
- Some families' needs do not appear to have been met, and the general preventive service cases were not properly closed.

It should be noted that subsequent to the completion of our field work, we were notified by Harlem Dowling officials that the services of both the Director and the Casework Supervisor of the Queens Outreach Center had been terminated for poor work performance. However, we are concerned that we found no evidence that Harlem Dowling officials were aware of the extent of the problems at the Queens Outreach Center until issues were brought to their attention by ACS.

We also found that the central office of Harlem Dowling, which maintains the personnel files, could not provide us evidence that some of its employees had the required work experience when hired, that some of the employees required to be fingerprinted were in fact fingerprinted when hired, and that the required criminal-history records reviews were conducted for those employees who could not be fingerprinted. We also found that data contained in the monthly PROMIS reports for general preventive service cases was not always reliable.

We believe that the City, and more important, the families served, may not have received the full contractual benefit from the preventive service agreement because of problems noted in the audit. The major findings are discussed in greater detail in the following sections of the report.

Inadequate Performance of Duties by Staff

Based on our review of 15 general preventive service case records, we found that Harlem Dowling staff assigned to the Queens Outreach Center did not adequately perform their duties in handling the preventive service cases under their care. This was evident by their failure to comply with significant case-practice provisions of the general preventive service agreement with ACS. Specifically, some FASPs and Progress Notes were not in the case records, some were not prepared in a timely manner, and some FASPs lacked the required signatures to document supervisory review and approval. Even more significant, the required number of minimum casework contacts with the families was not made.

FASPs Lacking, Late, or Not Signed

As stated previously, FASPs are prepared by Case Planners to record their assessment of a family's needs, including goals and activities necessary to achieve the goals, as well as updates regarding goal achievements. FASPs must be completed within a certain time period of a Case Initiation Date and are required to be signed by the Case Planner, the Casework Supervisor, and the ACS Case Manager. These signatures demonstrate that the FASPs have been reviewed for the validity and accuracy of the reported assessments and goals achieved.

We found that 10 (71 percent) of the 14 case records in our sample randomly selected from PROMIS did not contain all of the FASPs that were required to be prepared by the Queens Outreach Center.⁴ Ten cases lacked at least one six-month Reassessment FASP, one case lacked the Comprehensive 90-day FASP, and one case lacked the Initial 30-day FASP. Table I, following, details the cases that lacked one or more of the required FASPs.

Table I

Number of Missing FASPs

Type of FASP	Number of FASPs Not Required*	Number of FASPs Required	Number of FASPs Lacking	Number of Cases Lacking FASPs
Initial FASP (30-day)	12	2	1	1
Comprehensive FASP (90-day)	7	7	1	1
Reassessment FASP (every six months)	22	60	14	10
Total FASPs	41	69	16	

* Queens Outreach Center was not responsible for these FASPs (e.g., the cases were assigned to the Queens Outreach Center after the FASPs were due).

Further, we reviewed the 53 FASPs in the case records and found that 33 FASPs (62 percent) were not completed in a timely manner. The number of days that elapsed between the

⁴ According to Harlem Dowling officials, one of the 15 cases was an Exception to Policy whereby the mother received preventive services while the children were in foster care. The foster care agency had the responsibility for completing the FASPs for this case.

dates that the FASPs were due and dates the Case Planners completed them ranged from seven days to 327 days. For example, one case (sample #10) was referred by ACS to the Queens Outreach Center because of inadequate parental supervision of the children. This case was referred to Harlem Dowling in July 2003 and was closed in July 2007. The six-month Reassessment FASP, which was due in August 2006, was not completed by the Case Planner until almost six months later, the same day that the next six-month Reassessment FASP was completed. Table II, following, illustrates the 33 FASPs that were late and the range of time that elapsed.

Table II

Length of Time Elapsed between FASP Due Dates and Completion

Type of FASP	Number of FASPs Reviewed	Number of Overdue FASPs	Number of Days FASPs Were Overdue			
			6-15	16-30	31-60	Over 60
Initial FASP (30-day)	1	0	0	0	0	0
Comprehensive FASP (90-day)	6	4	1	0	0	3
Reassessment FASP (every six months)	46	29	4	9	5	11
Total	53	33	5	9	5	14

In addition, 39 (74 percent) of the 53 FASPs lacked one or more of the required three signatures. For instance, 22 (56 percent) lacked all signatures and 8 (21 percent) lacked only the signature of the ACS Case Manager. These signatures are important for oversight since they demonstrate that the FASPs have been reviewed and approved by the next level of supervision as well as by ACS.

Since the Queens Outreach Center either did not prepare the required documents or did not prepare them in a timely manner, neither the center nor ACS can demonstrate that these families' needs and the achievement of their goals were regularly assessed and that the families were properly served. In addition, the absence of the required signatures indicates a failure on the part of the Casework Supervisor (and ACS Case Manager) to properly monitor these cases.

Minimum Number of Required Casework Contacts Not Always Made

According to ACS procedures, Case Planners are required to make two face-to-face contacts with the families each month, one of which must occur in the home. The Queens Outreach Center was not in compliance with this requirement for all 15 general preventive service cases in our sample. The Queens Outreach Center, on average, failed to conduct 28 percent of the required face-to-face contacts. Regular interaction between Case Planners and families receiving preventive services is vital to ensure that appropriate living conditions are maintained in the home and to monitor the children's health, safety, and development. Table III, following, details for each of the 15 cases the number of face-to-face casework contacts that

were made by the Queens Outreach Center Case Planners compared to the number of face-to-face contacts that should have been made.

Table III

Number of Face-to-Face Casework Contacts That Were Conducted Versus
Number of Face-to-Face Casework Contacts That Should Have Been Conducted

Sample Number	Number of Months Case was Active	Required Number of Contacts That Should Have Been Conducted	Number of Contacts Conducted	Number of Required Contacts Not Conducted	Percent of Required Contacts Not Conducted
1	34	68	54*	16	24
2	17	34	22	12	35
3	16	31	25*	8	26
4	17	33	11	22	67
5	12	24	15	9	38
6	26	51	42	9	18
7	25	49	34	15	31
8	19	38	32*	8	21
9	39	77	54*	24	31
10	47	93	80*	30	32
11	19	38	35	3	8
12	62	124	99*	29	23
13	17	34	31*	5	15
14	21	41	25	16	39
15	31	61	43*	19	31
Total		796	602	225	28%

* In these cases, the Case Planners exceeded the two monthly contacts in certain months, but failed to meet the minimum two contacts for other months.

As shown in Table III, in one case (sample #4) the Case Planner failed to conduct 67 percent of the face-to-face contacts. This case was an Advocate Case, the result of the visit of a parent or guardian who comes to the Queens Outreach Center and requests preventive services. In this case, the mother requested family counseling and assistance with housing.

Furthermore, many of the 602 face-to-face contacts made were not adequately documented with a Progress Note.

Progress Notes Lacking or Late

Progress Notes document a family's chronological progress and adherence to the FASPs and discuss the current condition of a family. At a minimum, Case Planners should prepare Progress Notes soon after they have made casework contacts with a family to provide an accurate account of pertinent information and to preserve the integrity of the information discussed during the contacts.

Twelve (80 percent) of the 15 case records reviewed in our random sample did not contain Progress Notes for all of the casework contacts documented with a visit confirmation

form. These forms indicate that a face-to-face contact took place between the family and the Case Planner. The resulting Progress Notes, however, are to document what actually took place at the meeting.

For 12 of the 15 cases, there were 65 visit confirmation forms for which there were no corresponding Progress Notes. For example, the case record for sample #15 indicated that 43 face-to-face contacts were made with the family. However, 12 (28 percent) lacked Progress Notes documenting the contact. These 12 visits occurred intermittently from April 18, 2005 through August 16, 2007.

In addition, Case Planners did not always complete Progress Notes in a timely manner. Of the 827 Progress Notes we reviewed, 796 had both the Event Date and the Entry Date, enabling us to determine whether they were completed in a timely manner (within one week of the Event Date). We found that 297 (37 percent) of the 796 Progress Notes were prepared more than a week after the Event Date.⁵ Therefore, important information that occurred during the contact could have been forgotten and omitted from the Progress Notes.

At the exit conference, ACS officials gave us an Administrative Directive issued by the New York State Office of Children & Family Services on April 19, 2005, regarding the case management changes associated with CONNECTIONS. ACS officials stated that according to the Administrative Directive, CONNECTIONS is the official system of record for all child welfare information, including Progress Notes. They stated that once an agency starts using CONNECTIONS, Progress Notes for child welfare service cases must be entered into CONNECTIONS but are not required to be printed and placed in a hard-copy case record. In fact, the Administrative Directive states that “Printing should be employed judiciously for specific purposes, not as maintenance of a second ‘back-up’ paper record.” After the exit conference, ACS officials told us that CONNECTIONS was implemented for Queens on October 22, 2005. It should be noted that we had accepted all Progress Notes that were presented to us from Harlem Dowling that were printed from CONNECTIONS, even though the Progress Notes were not in the hard-copy case record. However, we had also accepted all hard-copy Progress Notes for child welfare service cases that had not been originally prepared in CONNECTIONS (i.e., prepared off-line) after October 22, 2005. At the exit conference, we asked whether the Progress Notes prepared off-line after October 22, 2005, should have been entered in CONNECTIONS at a later time and were told that yes, they should have been. ACS and Harlem Dowling officials stated that the Queens Outreach Center had not had immediate full access to CONNECTIONS because of a shortage of CONNECTIONS computers. We therefore divided the 165 Progress Notes prepared off-line into two groups—156 Progress Notes that were prepared from October 24, 2005, to December 28, 2006, and 9 Progress Notes that were prepared from January 4, 2007, to December 18, 2008.⁶

⁵ While there is no requirement as to when Progress Notes are to be prepared, based on our discussions with Harlem Dowling officials, Case Planners are suppose to submit Progress Notes on a weekly basis to their Casework Supervisors. Therefore, we used a one week criteria for the preparation of Progress Notes.

⁶ Since ACS did not provide us a date of when the Queens Outreach Center obtained full access to CONNECTIONS, we decided to divide the population into these time frames.

To determine whether those Progress Notes prepared off-line were in fact entered in CONNECTIONS, we sampled 50 of these 165 Progress Notes. We selected all 9 of the Progress notes prepared in 2007 and 2008 and randomly selected the remaining 41 Progress Notes from the 156 prepared in 2005 and 2006. Our review revealed that only 10 of the 50 Progress Notes were actually entered into CONNECTIONS. The 10 Progress Notes that were found in CONNECTIONS were all from the 41 Progress Notes prepared in 2005 and 2006, and none of the Progress Notes prepared in 2007 and 2008 were in CONNECTIONS. The Queens Outreach Center should ensure that all Progress Notes are maintained in CONNECTIONS as required.

Without Progress Notes, an accurate account of pertinent information, as well as the integrity of the information discussed during the contacts, is lacking. Furthermore, without these Progress Notes, Harlem Dowling is compromised in its ability to determine the degree to which Case Planners assessed the current condition of families, saw the children, and determined that they were safe.

Lack of Oversight to Meet Families' Need

Our review of the 15 case records showed that in five general preventive service cases, the Queens Outreach Center appears not to have met the needs of the families or required a long time to address their needs. According to the documentation in the case records for 2 of the 15 general preventive service cases, the families came into the Queens Outreach Center and requested general preventive services for their families (Advocate cases). In one case (sample #4), the family requested housing assistance and family counseling, and in the other case (sample #6), the mother requested an ACD day care voucher and housing assistance. In both instances, the Queens Outreach Center failed to obtain a required ACS case number for over a year and, therefore, could not adequately assist the families.

While Queens Outreach Center staff had some contact with the families, either through meetings or phone calls, they did not adequately address the families' needs since they did not obtain an ACS case number promptly. For the case that needed an ACD day care voucher to enable the parent to enroll in school, the voucher could not be obtained until ACS assigned a case number, which took them more than 14 months. In the other case (sample #4), the Queens Outreach Center approved the case to be closed 10 months after the family had come for housing and counseling services, but it took another four months for the Queens Outreach Center to obtain an ACS case number.

In the third case (sample #10), ACS referred the case to the Queens Outreach Center in July 2003 because of inadequate parental supervision. The Queens Outreach Center determined that the family required individual and family counseling, parenting skills classes, a substance abuse program, and housing assistance. While this case was open for almost four years, our review of the case record did not find that the Queens Outreach Center addressed the family's needs regarding parenting skills classes or housing assistance (the family was living in a shelter).

In the fourth case (sample #14), ACS referred the case to the Queens Outreach Center in November 2006 as a result of a court order to provide this family with preventive services that was to include family counseling and drug treatment for the birth father. According to the

documentation in the case record, there was a referral for family counseling for the grandmother. However, we found no evidence that the birth father was referred for the required family counseling. This case was closed in August 2008.

In the fifth case (sample #12), ACS referred the case to the Queens Outreach Center in December 2003 because of domestic violence in the home. Although the mother received mental health services deemed necessary by the Case Planner, we found no evidence that her son's educational needs were addressed in a timely manner. According to documents in the case record, it appears that her son had been having problems with his academics and attendance at school since the beginning of the case. The son had been recorded as being in the ninth grade for four years and had completed only five credits during that time. According to documents in the case record, it took more than three years from the beginning of the case for the Queens Outreach Center to respond to this issue with an appropriate referral for the son. However, the referral was not made until there was less than three months remaining before his 18th birthday, at which time the Queens Outreach Center would no longer be required to address his needs.

We believe that inadequate supervision and monitoring of the Case Planners by the Queens Outreach Center's Casework Supervisor and Director was a major contributing factor for the above-mentioned deficiencies. Adequate oversight would have helped ensure that FASPs and Progress Notes were completed in a timely manner, that the minimum number of required casework contacts was made, and that there was evidence that families' needs were addressed.

Recommendation

1. Harlem Dowling should strengthen its oversight of the Queens Outreach Center to ensure that it:
 - Improves Case Planners' performance with regard to the adequate and timely preparation of all required FASPs and Progress Notes. FASPs and Progress Notes should be maintained in CONNECTIONS and/or the hard-copy case record, as required, based on the type of case.
 - Improves the performance of the Casework Supervisor and the Director in overseeing Case Planners' review and signing all required FASPs.
 - Sees that the Case Planners make the minimum number of casework contacts with the families.
 - Sees that the Case Planners document in the case records their diligent attempts to address the needs of the families identified in the FASPs.

Harlem Dowling Response: Harlem Dowling agreed stating, "Harlem Dowling-West Side Center (HDWC) has implemented several managerial tools including a Monthly Casework Contact Log (used to track weekly casework contacts) and Monthly Supervisory Summary Log (used to track completion of supervisor monthly summaries)

that is maintained by the Administrative Supervisor and Program Director, and reviewed by the Deputy Executive Director. Progress notes are reviewed weekly and discussed in supervision to assist the Case Planners in addressing the needs of the families. The Quality Assurance Specialist tracks and reviews FASPs. Since mid-November 2009 all FASP have been submitted to ACS on time, have been printed and signed by the managerial staff, and are filed in the case record.”

Inadequate Supervision of Preventive Service Case Planners

We believe the deficiencies identified above were allowed to occur largely because of the inadequate supervision and monitoring of the Case Planners by the Queens Outreach Center’s Casework Supervisor and Director. In addition, the Casework Supervisor and Director did not prepare the case record review forms and the Administrative Review forms, as required.

According to ACS’s June 2008 Revised Minimum Supervision Standards for Preventive Service Providers, “The central goal of preventive service supervisors is to actively guide and support the work of frontline staff in strengthening families to provide for the safety and well-being of their children. By coaching, supporting, and guiding staff to make accurate comprehensive assessments; to act effectively on those assessments; and to provide a high quality of services, supervisors have a positive impact on the outcomes achieved for children and families.”

Lacking Documentation of Case Record Review

According to ACS Standards and Indicators, all preventive cases are required to be reviewed at least once every two weeks by a supervisory level staff person.⁷ The review should include monitoring of Service Plan task performance and ensuring that Reassessment FASPs properly account for previously set goals. The results of these supervisory reviews should be documented in the case record review forms.

There was no documentary evidence that the Casework Supervisor prepared 500 (59 percent) of the 842 case record review forms required for the 15 general preventive service cases in our sample. The case records for each of the 15 cases lacked 15 or more case record review forms—ranging from 15 to 72. For example, one of the cases (sample #5) required 22 case record review forms, but there was no documentary evidence that any of these were prepared.

Without properly completed forms, the Queens Outreach Center cannot demonstrate that the Casework Supervisor adequately reviewed the case records to ensure that Case Planners addressed the needs of the families in their care.

⁷ As of June 2008, ACS revised its standards and now requires case record reviews to be conducted monthly.

Administrative Review Forms Were Missing

Preventive service cases that remain open 24 months or more require an administrative-level review by someone above the immediate supervisor level and are to be documented on an Administrative Review form and filed in the case records. These reviews begin when a family has been receiving Preventive Services for 18 months, and the provider believes the case will remain active past 24 months. In addition, administrative reviews are conducted every six months following the initial 18-month administrative review. Administrative reviews are necessary to assess the progress of the case, to determine whether there is a continued need for services, and, if so, to identify the services needed to attain the goals and estimate the closure date.

Of our sample of 15 general preventive service cases, 5 cases remained active more than 24 months. They remained active from 31 months to more than five years. These five cases had no documentary evidence that 11 (48 percent) of the 23 Administrative Review forms required for the cases were ever prepared. The case records for each of the five cases lacked one to five Administrative Review forms. For example, the case record for sample #12 lacked five of the required eight Administrative Review forms.

In the absence of the Administrative Review forms, the Queens Outreach Center cannot demonstrate the conduct of vital reviews and necessary oversight.

Cases Not Closed Properly

Once a provider determines that it is appropriate to close a general preventive service case, the provider is required to complete a Plan Amendment. The Plan Amendment justifies the reasons for closing the general preventive service case (e.g., family's needs were met, family moved out of area, case transferred to another provider, or noncompliance of family.) The Plan Amendment is prepared by the Case Planner and is approved by the Casework Supervisor or Director and the ACS Case Manager. Once approved, either the provider or ACS closes the general preventive case in PROMIS.

While all 15 general preventive service cases in our sample were reported closed in PROMIS between July 2007 and November 2008, according to Harlem Dowling, one case (sample #12) was still active as of September 17, 2009, and should not have been closed in PROMIS on December 20, 2007. Of the remaining 14 cases, 4 (29 percent) lacked an approved Plan Amendment in the case records to document the reason for either closing the case (3 of the cases) or transferring the case to another provider (1 of the cases). As a result, we cannot be assured that these cases should have been closed or transferred. In fact, two of the cases mentioned above (sample #4 and #6), which were advocate cases, were closed without having an approved Plan Amendment in the case record and without evidence that the needs of the families were addressed.

Furthermore, while the case records for the remaining 10 cases had approved Plan Amendments, 5 of them were closed in PROMIS prior to the approval of the Plan Amendment.

For example, one case (sample #11) was closed in PROMIS on January 30, 2008. However, the Plan Amendment was not approved until March 21, 2008.

In addition, in 3 of the 14 cases that were closed in PROMIS, the Queens Outreach Center continued to engage the families after the cases were closed. For example, sample #5, which was closed in PROMIS on October 16, 2008, had documentation in its case record showing that the Case Planner continued to meet with the family both at the mother's home and at the mother's place of employment until March of 2009.

Once again, proper oversight by the Queens Outreach Center's Casework Supervisor and Director would have provided assurance that all cases closed in PROMIS had approved Plan Amendments to justify their closing.

In conclusion, Harlem Dowling's Queens Outreach Center did not adhere to significant case-practice provisions of its general preventive service agreement with ACS. Furthermore, based on the above-mentioned findings regarding the FASPs, Progress Notes, and casework contacts, and the lack of case record review forms and Administrative Review forms, we believe that the primary cause of these deficiencies was the failure of Harlem Dowling management to oversee its operations properly.

Recommendation

2. Harlem Dowling should strengthen its oversight of the Queens Outreach Center to ensure that:
 - Case record reviews are conducted and documented monthly, as required, for the duration of the cases.
 - Administrative-level reviews are conducted and documented for cases that remain open 24 months or longer.
 - The needs of the families identified in the FASPs have been met prior to closing the general preventive service cases and discontinuing services.
 - Plan Amendments are approved prior to closing the general preventive service cases.

Harlem Dowling Response: Harlem Dowling agreed stating, "HDWC restructured its oversight of the Queens Outreach Prevention program prior to the receipt of the draft audit report. Several managerial tools were implemented by the Deputy Executive Director (DED) that includes tracking of casework contacts, progress notes, FASPs, monthly supervisory summaries and administrative reviews."

Harlem Dowling Needs to Improve Its Oversight of the Queens Outreach Center

Harlem Dowling did not have adequate controls in place to ensure that its staff at the Queens Outreach Center adhered to significant case-practice provisions of its general preventive service agreement with ACS. As a result, deficiencies were allowed to exist until they were brought to the attention of Harlem Dowling by ACS.

Subsequent to the completion of our field work, we were notified by Harlem Dowling officials that the services of both the Director and the Casework Supervisor of the Queens Outreach Center had been terminated for poor work performance. However, the conditions that led to the terminations were not identified through Harlem Dowling's regular oversight but were brought to Harlem Dowling's attention by ACS as part of its oversight.

According to Harlem Dowling officials, they received a PAMS report from ACS in August 2008 that contained safety alerts in reference to cases at the Queens Outreach Center. The Harlem Dowling Deputy Executive Director was on vacation at the time the PAMS report was received. As a result, the Queens Outreach Center Director and Casework Supervisor responded to ACS's concerns. Harlem Dowling provided us with copies of three PAMS Preventive Serious Risk Case Concern Alerts (PAMS Alerts), each one covering a specific general preventive service case assigned to a different Case Planner. Every one of these PAMS Alerts noted that a review of Progress Notes revealed that there was no documentation that the children were seen for varying periods of time during the review period December 1, 2007, to May 31, 2008. For example, one PAMS Alert stated that there was no documentation that the children were seen for most of the review period (from December 15, 2007, until May 21, 2008).

According to the PAMS Alerts, the Queens Outreach Center Director responded that in all three cases, the respective Case Planner had left the agency and failed to submit Progress Notes before leaving. This assertion was not accurate, since two of the three Case Planners who were assigned to the cases mentioned above were still working at the Queens Outreach Center as of October 14, 2009.

ACS contacted Harlem Dowling regarding its concerns with the Queens Outreach Center's response. In addition, upon her return, the Harlem Dowling Deputy Executive Director reviewed the response that the Queens Outreach Center submitted to ACS and determined that it was not appropriate. The Deputy Executive Director stated that this situation initiated her own review into the Queens Outreach Center that uncovered many of the issues discussed in this audit. Nevertheless, we are concerned that Harlem Dowling did not detect these conditions until ACS brought safety issues at the Queens Outreach Center to their attention. Harlem Dowling officials stated that they had relied too heavily on statistical data from PROMIS and the agency's own internal tracking systems. They also acknowledged that the periodic random review of a limited sample of cases by Harlem Dowling's Quality Assurance Unit did not reveal the deficiencies noted by the auditors.

Based on the Deputy Executive Director's review, corrective actions were taken, which included terminating the services of both the Director and the Casework Supervisor. Harlem Dowling also developed a Queens Outreach Improvement Plan that the agency submitted to ACS

in January 2009. This plan included many of the issues that are discussed in this audit. Harlem Dowling officials stated that as of March 2009, Harlem Dowling has a Quality Assurance staff person assigned solely to preventive services to track timeliness of FASPs and to conduct case record reviews at one of the four centers each week. Additional checks and balances are now in place for case closings, administrative reviews, casework contacts, and timeliness of Progress Notes. Harlem Dowling officials stated that CONNECTIONS is the system of record upon which Harlem Dowling is relying for all its data, reviews and management oversight.

Recommendation

3. Harlem Dowling should continue to improve its oversight of the Queens Outreach Center and should assess the effectiveness of its Queens Outreach Improvement Plan.

Harlem Dowling Response: Harlem Dowling agreed stating, “HDWC will continue to assess the effectiveness of the Queens Outreach Improvement Plan through the monthly quality assurance process, review of all managerial tools by the Program Director and the Deputy Executive Director, as well as through feedback from ACS.”

Lack of Compliance with Key Personnel Provisions

While all 48 employee personnel files contained the required clearances from the Statewide Central Register of Child Abuse and Maltreatment, the central office at Harlem Dowling, where all employee personnel files are maintained, did not adequately comply with other key personnel provisions of its preventive service agreement with ACS. All of the 42 Harlem Dowling employees, whose title required it, had the required educational credentials. However, six (14 percent) of them did not have the required work experience when they were hired. In fact, two of the employees, Case Planners, were required to have two years’ related work experience in social work but had no such experience.

In addition, of the 38 Harlem Dowling employees that were required to be fingerprinted, there was no evidence for 3 (eight percent) employees that Harlem Dowling had sent fingerprints to DCJS for a criminal-history record check when it hired these employees. As of December 2008, the employees had been working with clients from two to six years without a criminal-history record check. We brought this matter to Harlem Dowling officials’ attention, and as of March 2009, Harlem Dowling had sent the employees’ fingerprints to DCJS and had received the results of the criminal-history record check.

Even though 10 employees did not have their fingerprints sent to DCJS because they were hired prior to the signing of the Use and Dissemination Agreement with DCJS, Harlem Dowling was nevertheless required to conduct a criminal-history records review for them through DCJS. There is no evidence that Harlem Dowling conducted the records review. All these employees have contact with clients and include Case Planners, Program Directors, the Deputy Executive Director, and the Executive Director. After the completion of fieldwork, Harlem Dowling officials stated that since they could not conduct the criminal-history

background checks using fingerprints through DCJS, they hired a private company to conduct criminal-history background checks for all 10 employees. They provided us with evidence that the checks were completed.

It is important for Harlem Dowling to comply with these provisions of the agreement because failure to do so could present a potential risk to the safety and well-being of both the parents and children served.

At the exit conference, Harlem Dowling officials and ACS officials stated that they had discussed the issue of the 10 employees for whom no criminal-history records review was conducted and ACS had decided that Harlem Dowling would do a criminal-history check through the Office of Court Administration (OCA). Harlem Dowling has completed this check and presented us with the results from OCA, which revealed that none of the 10 employees had any criminal convictions.

Since ACS has determined that the criminal-history records review should be conducted through OCA instead of DCJS, as required by the preventive service agreement, ACS should amend this section in the preventive service agreement to reflect the change in policy.

Recommendations

4. Harlem Dowling should comply with the personnel provisions of its preventive service agreement with ACS and ensure that all current and prospective employees have the related work experience required for their positions and that it submits fingerprints of all prospective employees to DCJS.

Harlem Dowling Response: Harlem Dowling agreed stating, “HDWC has resolved the fingerprint issue for existing employees, all (3) of the employees that were cited in the report were cleared, having no history of arrests or convictions. All newly hired personnel possess the requisite related work experience required and have been fingerprinted as prescribed.”

5. ACS should amend the section of the preventive service agreement to reflect the change in using OCA instead of DCJS for the conduct of criminal-history record reviews for current employees.

ACS Response: ACS agreed stating, “On September 3, 2009, ACS issued Guidance # 2009/08, clarifying the policy with regard to criminal background checks for prospective employees and current staff (in the case of transfer or promotions) for any position that involves direct contact with children. This Guidance is incorporated into ACS’s current preventive service contracts pursuant to the provisions of Article III, Section A, paragraphs 1 and 3 of those contracts.”

Provider Data in PROMIS for Preventive Service Cases Is Not Always Reliable

Upon our review of the 12 monthly PROMIS reports, we found that the data for general preventive service cases was not always reliable or complete.⁸ One of the 57 closed general preventive service cases was not recorded in PROMIS as being assigned to the Queens Outreach Center, although the case record was kept and maintained within the closed case files at the Queens Outreach Center. The case was referred to the Queens Outreach Center on November 17, 2006, and was closed on February 28, 2008. According to ACS officials, this case was inadvertently left off the case lists submitted to us in response to our initial inquiry.

Furthermore, the PROMIS data on the 140 general preventive service cases assigned to the Queens Outreach Center either lacked case information or contained inaccurate information. There were:

- Three cases in which information for the “case number” and the “case initiation date” fields were lacking in PROMIS. In addition, one of these cases had incorrectly recorded a closing date even though the case was still active, which also resulted in the case being recorded multiple times within the same month.
- Two cases in which information was recorded in the “case status” field for more than 30 days as “pending engagement”—two months for one case and six months for the second case. A case should be identified as “pending engagement” no longer than 30 days.
- The case number recorded in PROMIS for one case did not match the case number listed on documents maintained in the case record.
- Fifteen instances in which the case initiation date recorded in PROMIS postdated both the referral date and the case responsibility date. The case initiation date recorded in PROMIS should obviously be earlier than other dates listed.

Moreover, for 8 (40 percent) of the 20 randomly selected general preventive service cases in our sample, case record information from the hard-copy case records of the Queens Outreach Center did not always match information recorded in PROMIS. Discrepancies included the Referral Dates, Case Responsibility Dates, or Closing Dates.

While conducting this test, we found that the Queens Outreach Center could not find the hard-copy case record for 1 of the 57 closed general preventive service cases listed in PROMIS as being assigned to the center. Both the Director and the Case Planner stated that this case was assigned to the center and they could offer no reason for the inability to find the case record.

According to ACS officials, most of the errors listed above regarding PROMIS data not being accurate were caused by data entry errors. They stated that prior to January 2009, providers had the ability to enter data for cases in PROMIS. If an individual came to the Queens

⁸ We did not conduct a technical review of the features of PROMIS.

Outreach Center requesting services (advocate case) then the Queens Outreach Center was able to enter that case into PROMIS. However, if the case had not yet been approved by ACS, a “case number” or a “case initiation date” would not have been assigned and that data would not be available in PROMIS. For those cases “pending engagement” for more than one month, ACS stated that it is the responsibility of the provider to accept or reject the case within 30 days and that PROMIS will reflect this information only after it is entered by the provider.

With regard to those 15 instances in which the case initiation date recorded in PROMIS postdated both the referral date and the case responsibility date, ACS gave us three reasons for this to occur. One applies to advocate cases in which the provider has to submit the application for services to ACS. In those cases, a significant difference in dates could be a result of delayed submission by the provider of all required information or a backlog within the former ACS Applications Unit. The second reason they stated for the case initiation date postdating referral and case responsibility dates may have been that a worker in the ACS Borough Office simply neglected to open a service case in CONNECTIONS promptly. The third reason they cited was the conversion of a case from either advocate to child welfare services or child welfare services to advocate causing the case to be closed and reopened. There are restrictions in place in CONNECTIONS that make it impossible for a long-running case to keep the original case initiation date once it closes. The new case initiation date that is issued to the case is recalculated to go back no more than six months from the date the case is being reopened.

Harlem Dowling is ultimately responsible for ensuring that all information in PROMIS is complete and accurate and is responsible for contacting ACS for assistance in resolving any discrepancies. However, ACS officials stated that with the launch of the CONNECTIONS/PROMIS feed in January 2009, a case cannot be entered into PROMIS without opening the case in the system of record (CONNECTIONS) and submitting the proper documentation to the Application Unit. The ACS officials also stated that the issues reported above should not occur in the future due to the CONNECTIONS/PROMIS feed.

Recommendation

6. Harlem Dowling should ensure that all information regarding preventive service cases that have been assigned to it are recorded in PROMIS promptly, completely, and accurately. If there are any discrepancies in the data recorded, Harlem Dowling should immediately inform ACS so that modifications can be made.

Harlem Dowling Response: Harlem Dowling agreed stating, “As part of the Queens Outreach Improvement Plan, HDWC will centralize PROMIS data entry. This task will be completed by the support staff that is supervised by the Program Director. . . . Data discrepancies shall be discussed with ACS as needed.”

ACS Response: ACS agreed stating, “ACS will continue to work with staff at the Harlem Dowling Queens Outreach Center to address data entry issues in the PROMIS system through the support of the PROMIS helpdesk.”



Susan Nuccio
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January 27, 2010

Ms. H. Tina Kim
Deputy Comptroller for Audit
City of New York
Office of the Comptroller
1 Center Street, Room 1100
New York, New York 10007-2341

**Re: Audit Report on the Program Compliance of the Harlem Dowling-
West Side Center for Children and Family Services with Its
Administration for Children's Services Preventive Service Agreement
Audit Report: MH09-093A**

Dear Ms. Kim:

Attached please find ACS' response to the Draft Report for the above captioned audit. As requested, our response addresses each recommendation made in the audit and includes the corresponding Agency Implementation Plan (AIP).

Sincerely,

A handwritten signature in black ink, appearing to read "Julie Bittman". The signature is fluid and cursive, with a long horizontal line extending to the right.

Julie Bittman
Director, ACS External Audit

Attachments

ACS RESPONSE TO AUDIT RECOMMENDATIONS

New York City Office of the Comptroller
Audit Report on the Program Compliance of the Harlem Dowling-West Side Center for Children and Family
Services with Its Administration for Children's Services Preventive Service Agreement
MH09-093A

RECOMMENDATION # 1 – *Harlem Dowling should strengthen its oversight of the Queens Outreach Center to ensure that it:*

- *Improves Case Planners' performance with regard to the adequate and timely preparation of all required FASPs and Progress Notes. FASPs and Progress Notes should be maintained in CONNECTIONS and/or the hard-copy case record, as required, based on the type of case.*
- *Improves the performance of the Casework Supervisor and the Director in overseeing that Case Planners review and sign all required FASPs.*
- *Sees that the Case Planners make the minimum number of casework contacts with the families.*
- *Sees that the Case Planners document in the case records their diligent attempts to address the needs of the families identified in the FASPs.*

HARLEM DOWLING RESPONSE

Harlem Dowling-West Side Center (HDWC) has implemented several managerial tools including a Monthly Casework Contact Log (used to track weekly casework contacts) and Monthly Supervisory Summary Log (used to track completion of supervisor monthly summaries) that is maintained by the Administrative Supervisor and Program Director, and reviewed by the Deputy Executive Director. Progress notes are reviewed weekly and discussed in supervision to assist the Case Planners in addressing the needs of the families. The Quality Assurance Specialist tracks and reviews FASPs. Since mid-November 2009, all FASP have been submitted to ACS on time, have been printed and signed by the managerial staff, and are filed in the case record.

RECOMMENDATION # 2 – *Harlem Dowling should strengthen its oversight of the Queens Outreach Center to ensure that:*

- *Case record reviews are conducted and documented monthly, as required, for the duration of the cases.*
- *Administrative-level reviews are conducted and documented for cases that remain open 24 months or longer.*
- *The needs of the families identified in the FASPs have been met prior to closing the general preventive service cases and discontinuing services.*
- *Plan Amendments are approved prior to closing the general preventive service cases.*

HARLEM DOWLING RESPONSE

HDWC restructured its oversight of the Queens Outreach Prevention program prior to the receipt of the draft audit report. Several managerial tools were implemented by the Deputy Executive Director (DED) that includes tracking of casework contacts, progress notes, FASPs, monthly supervisory summaries and administrative reviews. On 9/21/09, the new Program Director and Administrative Supervisor began working in the program. Since 10/09, monthly managerial reviews have been conducted and documented. In 11/09 and 12/09, administrative reviews were completed for over 80% of the cases that have been open for over 18 months or longer, with the remaining to be completed by 1/31/2010. Prospectively, these reviews will be completed quarterly as prescribed. In 5/09, HDWC implemented our revised case closure process that ensures and includes case record reviews by program and quality assurance staff, involvement of families through the Family Team Conferencing process, and prevents the closure of cases without an approved plan amendment.

ACS RESPONSE TO AUDIT RECOMMENDATIONS

New York City Office of the Comptroller
Audit Report on the Program Compliance of the Harlem Dowling-West Side Center for Children and Family
Services with Its Administration for Children's Services Preventive Service Agreement
MH09-093A

RECOMMENDATION # 3 – *Harlem Dowling should continue to improve its oversight of the Queens Outreach Center and should assess the effectiveness of its Queens Outreach Improvement Plan.*

HARLEM DOWLING RESPONSE

HDWC will continue to assess the effectiveness of the Queens Outreach Improvement Plan through the monthly quality assurance process, review of all managerial tools by the Program Director and the Deputy Executive Director, as well as through feedback from ACS.

RECOMMENDATION # 4 – *Harlem Dowling should comply with the personnel provisions of its preventive service agreement with ACS and ensure that all current and prospective employees have the related work experience required for their positions and that it submits fingerprints of all prospective employees to DCJS.*

HARLEM DOWLING RESPONSE

HDWC has resolved the fingerprint issue for existing employees, all (3) of the employees that were cited in the report were cleared, having no history of arrests or convictions. All newly hired personnel possess the requisite related work experience required and have been fingerprinted as prescribed.

RECOMMENDATION # 5 – *ACS should amend the section of the preventive service agreement to reflect the change in using OCA instead of DCJS for the conduct of criminal-history record reviews for current employees.*

ACS RESPONSE

On September 3, 2009, ACS issued Guidance # 2009/08, clarifying the policy with regard to criminal background checks for prospective employees and current staff (in the case of transfer or promotions) for any position that involves direct contact with children. This Guidance is incorporated into ACS's current preventive service contracts pursuant to the provisions of Article III, Section A, paragraphs 1 and 3 of those contracts. These contracts expire on June 30, 2010. ACS currently has issued an RFP for child welfare services, including preventive services, and new preventive service contracts will be entered into with those providers chosen through that process. Those new contracts will also contain language that will provide that preventive service agencies conduct criminal background checks pursuant to the provisions of law and of Guidance #2009/08.

ACS RESPONSE TO AUDIT RECOMMENDATIONS

New York City Office of the Comptroller
Audit Report on the Program Compliance of the Harlem Dowling-West Side Center for Children and Family
Services with Its Administration for Children's Services Preventive Service Agreement
MH09-093A

RECOMMENDATION # 6 – *Harlem Dowling should ensure that all information regarding preventive service cases that have been assigned to it are recorded in PROMIS promptly, completely, and accurately. If there are any discrepancies in the data recorded, Harlem Dowling should immediately inform ACS so that modifications can be made.*

HARLEM DOWLING RESPONSE

As part of the Queens Outreach Improvement Plan, HDWC will centralize PROMIS data entry. This task will be completed by the support staff that is supervised by the Program Director. Implementation of this process has been delayed pending the staff completion of PROMIS training that will occur in January 2010. As a result, centralized data entry will begin in February 2010. Data discrepancies shall be discussed with ACS as needed.

ACS RESPONSE

ACS will continue to work with staff at the Harlem Dowling Queens Outreach Center to address data entry issues in the PROMIS system through the support of the PROMIS helpdesk.

In addition, ACS would like to make a clarification to more accurately reflect the procedures in place prior to January 2009. The report says that providers were able to open advocate cases on their own, without link to an ACS-assigned case number. In fact, prior to January 2009, providers had the ability to open *both* child welfare services and advocate cases in PROMIS. And if the application for service had not yet been processed by ACS, a "case number" or a "case initiation date" would not have been assigned and that data would not be available in PROMIS through the reconciliation process. There has since been an enhancement to the PROMIS system, which prevents the opening of cases without case numbers having been assigned.

HARLEM DOWLING-WEST SIDE CENTER FOR CHILDREN AND FAMILY SERVICES
AUDIT IMPLEMENTATION PLAN

Audit Report on the Program Compliance of the Harlem-Dowling-West Side Center for Children and Family Services with Its Administration
for Children's Services Preventive Service Agreement
Audit Number MH09-093A

Audit Implementation Plan – January 27, 2010

RECOMMENDATION # 1 – HARLEM DOWLING SHOULD STRENGTHEN ITS OVERSIGHT OF THE QUEENS OUTREACH CENTER TO ENSURE THAT IT:
 • IMPROVES CASE PLANNERS' PERFORMANCE WITH REGARD TO THE ADEQUATE AND TIMELY PREPARATION OF ALL REQUIRED FASPS AND PROGRESS NOTES. FASPS AND PROGRESS NOTES SHOULD BE MAINTAINED IN CONNECTIONS AND/OR THE HARD-COPY CASE RECORD, AS REQUIRED BASED ON THE TYPE OF CASE.

RESPONSIBLE MANAGER'S NAME – DOROTHY WORRELL

CORRECTIVE ACTIONS TO BE TAKEN	RESPONSIBLE PERSON	DATES		COMMENTS
		START	END	
1. Case Planners will submit monthly casework calendars and appointment letters to the Administrative Supervisor.	Case Planners	11/1/09	Monthly thereafter	Review of calendars and appointment letters ensure that visits are scheduled for each case. Additionally, calendars will include scheduled FTCs, FASPs due dates and collateral contacts.
2. Managerial staff (Admin. Sup. & Director) will review calendar to ensure that all cases are scheduled with the appropriate number and types of contacts.	Administrative Supervisor Program Director	11/1/09	Monthly thereafter	
3. The Admin. Sup. will utilize the Monthly Casework Contact Log to enter all scheduled contacts for each case.	Admin. Supervisor Program Director	12/1/09	Monthly thereafter	Daily use of the Monthly Casework Contact Log will allow the Admin. Sup. to assess cases. All Case Planners must have at least two (2) contacts on each case by the 20 th day of each month.
4. Case Planners will submit the Contact Confirmation Form to the Admin. Sup. within 24 hours of the contact.	Case Planners	12/1/09	Daily thereafter	
5. Program Director will review the log in weekly supervision with the Admin. Sup.	Program Director Administrative Supervisor			Logs will be maintained by the Admin. Sup. Admin. Sup. will also utilize log to track progress notes completion.
Note: PROMIS data entry will not occur until all progress notes have been finalized in Connections by the Administrative Supervisor.				

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- RECOMMENDATION # 1 CONTINUED - HARLEM DOWLING SUPERVISOR AND THE DIRECTOR IN OVERSEEING THAT CASE PLANNERS REVIEW AND SIGN ALL REQUIRED FASPs.**
- IMPROVES THE PERFORMANCE OF THE CASEWORK SUPERVISOR AND THE DIRECTOR IN OVERSEEING THAT CASE PLANNERS REVIEW AND SIGN ALL REQUIRED FASPs.

RESPONSIBLE MANAGER'S NAME – DOROTHY WORRELL

CORRECTIVE ACTIONS TO BE TAKEN	RESPONSIBLE PERSON	DATES		COMMENTS
		START	END	
1. Case planners will enter progress notes within 48 hours of the event.	Case Planners	10/1/09	Ongoing	Progress notes shall include a detail account of the type of contact including the role of each participants and an assessment of safety and well-being.
2. Case planners will submit progress notes to the Administrative Supervisor weekly.	Case Planners	10/1/09	Weekly thereafter	
3. The Administrative Supervisor will review the progress notes, return if necessary for corrections, and/or approve the progress notes in Connections. Participants and type of contact should be consistent with the Contact Confirmation Form.	Administrative Supervisor	10/1/09	Weekly thereafter	Failure to submit progress notes by the end of the week will result in a discussion in supervision and another request for submission within the 48 hours. Case planners that are not in compliance after two attempts shall be placed on a progressive disciplinary action with Human Resources that can result in termination.
4. The Admin. Sup. will review the progress notes, discuss case dynamics and document next steps in the Monthly Summary in Connections.	Administrative Supervisor	10/1/09	Ongoing	
5. The Program Director shall review the monthly summaries. Administrative reviews will be done quarterly.	Program Director	10/1/09	Monthly & Quarterly thereafter	Each case planner will have weekly supervision that will include the review of progress notes and FASPs, case dynamics, staff developmental issues, etc.
6. The DED will review one third of the cases monthly to ensure that monthly summaries are completed.	Deputy Executive Director	11/1/09	Monthly thereafter	An administrative review will be conducted and documented in the Connections system for each case 12 months and older. The outcome of the review will be addressed with the Program Director during one of two bi-weekly supervision sessions with the DED.

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RECOMMENDATION # 1 CONTINUED - HARLEM DOWLING SHOULD ... ENSURE THAT IT:
RESPONSIBLE MANAGER'S NAME – DOROTHY WORRELL

CORRECTIVE ACTIONS TO BE TAKEN	RESPONSIBLE PERSON	DATES		COMMENTS
		START	END	
1. Quality Assurance (QA) will generate the monthly Family Team Conference (FTC) schedule for all preventive programs.	QA Specialist	9/1/09	Monthly thereafter	FTC schedule is generated by the 15 th day of the previous month by QA. QA will generate weekly list FASP due/overdue.
2. Invitation letters will be forwarded to families and follow up phone calls 48-72 hours prior to the conference will be facilitated.	Case Aide Family Worker	10/1/09	Ongoing	Case Aide and Family worker will generate the invitation letter at least 14 days prior to the conference. Reminder phone calls will be facilitated in order to improve attendance.
3. The FASP document will contain a thorough assessment of service needs and implementation, monitoring of participation and an assessment of safety and well-being.	Case Planners	10/1/09	Ongoing	Case planners will begin completing the FASP as they are due to the Admin. Sup. two weeks from the launch date. Case planners can begin completing the document pending the completion of the FTC conference
4. Completed FASPs will be submitted to the Admin. Sup. for review by deadline outlined by QA.	Administrative Supervisor	10/1/09	Ongoing thereafter	QA Specialists will ensure that FASP documents diligent efforts to address the needs of the families.
5. FASPs approved by QA & the Program Director will be submitted to ACS for approval.	Program Director QA Specialist	10/1/09	Ongoing thereafter	
6. Approved FASPs will be printed, signed and filed in the case record along with FTC form.	Case Aide – Prints FASPs Case Planner – Signs Admin. Sup. – Signs Case Aide – files in records	10/1/09 10/1/09	Ongoing thereafter Weekly thereafter	

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- RECOMMENDATION # 1** CONTINUED - HARLEM DOWLING SHOULD ... ENSURE THAT IT:
- SEES THAT THE CASE PLANNERS DOCUMENTS IN THE CASE RECORDS THEIR DILIGENT ATTEMPTS TO ADDRESS THE NEEDS OF THE FAMILIES IDENTIFIED IN THE FASPs.

RESPONSIBLE MANAGER'S NAME - DOROTHY WORRELL

CORRECTIVE ACTIONS TO BE TAKEN	RESPONSIBLE PERSON	DATES		COMMENTS
		START	END	
1. Quality Assurance will facilitate monthly quality improvement meetings with each prevention program.	QA Specialist	7/09	Monthly thereafter	Case planners, the Case Aide and Family Worker, the Admin. Sup. and Program Director will participate in this meeting. Staff development, programmatic challenges and performance issues will also be addressed. This meeting is also attended by the DED. One case will be reviewed for each case planner monthly.
2. Cases will be randomly selected for review of progress notes and casework contacts, managerial summaries, education and health/mental health documentation, FTC conferences and FASP completion.	QA Specialist	7/09	Monthly thereafter	
3. Quality Assurance will issue safety alerts consistent with the format used by ACS when indicated.	Quality Assurance Dept.	7/09	Ongoing	This process is done in conjunction with the monthly quality improvement activities. QA will provide written documentation of case record reviews.
4. Program Director will facilitate weekly program meetings wherein case presentations will be conducted.	Program Director All Program Staff	10/09	Weekly thereafter	DED provided the Program Director with managerial expectations for preventive services.

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RECOMMENDATION # 2 – HARLEM DOWLING SHOULD STRENGTHEN ITS OVERSIGHT OF THE QUEENS OUTREACH CENTER TO ENSURE THAT:

- CASE RECORD REVIEWS ARE CONDUCTED AND DOCUMENTED MONTHLY, AS REQUIRED, FOR THE DURATION OF THE CASES.

RESPONSIBLE MANAGER'S NAME – DOROTHY WORRELL

CORRECTIVE ACTIONS TO BE TAKEN	RESPONSIBLE PERSON	DATES		COMMENTS
		START	END	
1. The Admin. Sup. will review the progress notes, discuss case dynamics and document next steps in the Monthly Summary in Connections.	Administrative Supervisor	10/1/09	Weekly & Ongoing	Each case planner will have weekly supervision that will include the review of progress notes and FASPs, case dynamics, staff developmental issues, etc.
2. The Program Director shall review the monthly summaries. Administrative reviews will be done quarterly.	Program Director	10/1/09	Monthly & Quarterly thereafter	Administrative review will be conducted and documented in the Connections system for each case 12 months and older.
3. The DED will review one third of the cases monthly to ensure that monthly summaries are completed.	Deputy Executive Director	11/1/09	Monthly thereafter	The outcome of the review will be addressed with the Program Director during one of two bi-weekly supervision sessions with the DED.

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RECOMMENDATION # 2 – CONTINUED - HARLEM DOWLING SHOULD ... ENSURE THAT:

- ADMINISTRATIVE-LEVEL REVIEWS ARE CONDUCTED AND DOCUMENTED FOR CASES THAT REMAIN OPEN 24 MONTHS OR LONGER.

RESPONSIBLE MANAGER'S NAME – DOROTHY WORRELL

CORRECTIVE ACTIONS TO BE TAKEN	RESPONSIBLE PERSON	DATES		COMMENTS
		START	END	
1. Quality Assurance will facilitate monthly quality improvement meetings with each prevention program.	QA Specialist	7/1/09	Monthly thereafter	Case planners, the Case Aide and Family Worker, the Admin. Sup. and Program Director will participate in this meeting. Staff development, programmatic challenges and performance issues will also be addressed. This meeting is also attended by the DED. One case will be reviewed for each case planner monthly.
2. Cases will be randomly selected for review of progress notes and casework contacts, managerial summaries, education and health/mental health documentation, FTC conferences and FASP completion.	QA Specialist	7/1/09	Monthly thereafter	
3. Quality Assurance will issue safety alerts consistent with the format used by ACS when indicated.	Quality Assurance Dept.	7/1/09	Ongoing	This process is done in conjunction with the monthly quality improvement activities. QA will provide written documentation of case record reviews.
4. Program Director will facilitate weekly program meetings wherein case presentations will be conducted.	Program Director All Program Staff	10/1/09	Weekly thereafter	

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- RECOMMENDATION # 2 – CONTINUED - HARLEM DOWLING SHOULD ... ENSURE THAT:**
- THE NEEDS OF THE FAMILIES IDENTIFIED IN THE FASPS HAVE BEEN MET PRIOR TO CLOSING THE GENERAL PREVENTIVE SERVICE CASES AND DISCONTINUING SERVICES.
 - PLAN AMENDMENTS ARE APPROVED PRIOR TO CLOSING THE GENERAL PREVENTIVE SERVICE CASES.

RESPONSIBLE MANAGER'S NAME – DOROTHY WORRELL

CORRECTIVE ACTIONS TO BE TAKEN	RESPONSIBLE PERSON	DATES START END	COMMENTS
<ol style="list-style-type: none"> 1. Case planners will identify cases ready for closure each month during individual weekly supervision. During supervision, the case planner will be advised to initiate preliminary case closure activities. 2. The Admin. Sup. will conduct a case record review to determine whether service plan goals have been achieved and the family has demonstrated appropriate changes in behavior, coping mechanisms, problem solving and advocacy skills. 3. The Prevention Quality Assurance Specialist will conduct a case record review. 4. If the case is deemed ready for closure, a Case Closing conference will be facilitated with the family. 	Case Planners	10/1/09	<p>Ongoing thereafter</p> <p>Discussion with family regarding case issues including a review of presenting/emerging/current issues, their perception of case issues services implemented and level of participation, goals achievement and safety and well being of the children.</p>
	Administrative Supervisor	10/1/09	<p>Ongoing thereafter</p> <p>The Admin. Sup. will discuss all cases for closure with the Program Director. The Program Director will review case and forward to QA for additional assessment of case readiness.</p>
	QA Specialist	10/1/09	<p>Ongoing thereafter</p> <p>QA completes record review to ensure all appropriate service provisions and documentation is on file.</p>
	Case Planner Administrative Supervisor Program Director	10/1/09	<p>Ongoing thereafter</p> <p>This conference will be attended by HDWC case planning staff, the family and other collaterals, other providers and relevant ACS staff when indicated.</p>

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- RECOMMENDATION # 2 – CONTINUED - HARLEM DOWLING SHOULD ... ENSURE THAT:**
- THE NEEDS OF THE FAMILIES IDENTIFIED IN THE FASPS HAVE BEEN MET PRIOR TO CLOSING THE GENERAL PREVENTIVE SERVICE CASES AND DISCONTINUING SERVICES.
 - PLAN AMENDMENTS ARE APPROVED PRIOR TO CLOSING THE GENERAL PREVENTIVE SERVICE CASES.
- RESPONSIBLE MANAGER'S NAME – DOROTHY WORRELL**

CORRECTIVE ACTIONS TO BE TAKEN	RESPONSIBLE PERSON	DATES		COMMENTS
		START	END	
5. The Case Planner will submit the completed Plan Amendment to the Administrative Supervisor no later than 48 hrs from conference.	Case Planners Administrative Supervisor	10/1/09	Ongoing thereafter	
6. QA and Program Director will review and approve plan amendments.	Program Director QA Specialist ACS	10/1/09	Ongoing thereafter	
7. Once case closure is approved, the plan amendment will be submitted to ACS for system approval.		10/1/09	Ongoing thereafter	
8. The Program Director will enter the closure in PROMIS once ACS approval is received.	Program Director	10/1/09	Ongoing thereafter	The Program Director will report on all closures in the monthly report to the DED.
9. Once the closure is approved in Connections and PROMIS, a formal Case Closing letter will be sent to the family.	Program Director	10/1/09	Ongoing thereafter	

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RECOMMENDATION # 3 – HARLEM DOWLING SHOULD CONTINUE TO IMPROVE ITS OVERSIGHT OF THE QUEENS OUTREACH CENTER AND SHOULD ASSESS THE EFFECTIVENESS OF ITS QUEENS OUTREACH IMPROVEMENT PLAN.

RESPONSIBLE MANAGER'S NAME – DOROTHY WORRELL

CORRECTIVE ACTIONS TO BE TAKEN	RESPONSIBLE PERSON	DATES		COMMENTS
		START	END	
1. In addition to previously listed oversight activities, Quality Assurance will review the Queens Outreach Improvement Plan during the monthly meeting.	Quality Assurance Program Director Deputy Executive Director	11/1/09	Monthly thereafter	PPR meetings are a monthly programmatic review that is attended by the Executive Director, all Program Directors, the Deputy Executive Director, the QA/MIS Director and Training Department.
2. DED will also review the Queens Outreach Quality Improvement Plan in the month Program, Planning and Review (PPR) meeting.	Program Director Deputy Executive Director	11/1/09	Monthly thereafter	The ED and DED will meet monthly to discuss all aspects of the quality improvement plan. Programmatic and administrative adjustments will be made immediately as indicated.
3. The Executive Director (ED) will review the quality improvement plan with the Deputy Executive Director and Program Director monthly.	Executive Director Deputy Executive Director Program Director	12/1/09	Monthly thereafter	

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RECOMMENDATION # 4 –HARLEM DOWLING SHOULD COMPLY WITH THE PERSONNEL PROVISIONS OF ITS PREVENTIVE SERVICE AGREEMENT WITH ACS AND ENSURE THAT ALL CURRENT AND PROSPECTIVE EMPLOYEES HAVE THE RELATED WORK EXPERIENCE REQUIRED FOR THEIR POSITIONS AND THAT IT SUBMITS FINGERPRINTS OF ALL PROSPECTIVE EMPLOYEES TO DCJS.

RESPONSIBLE MANAGER'S NAME – DOROTHY WORRELL

CORRECTIVE ACTIONS TO BE TAKEN	RESPONSIBLE PERSON	DATES		COMMENTS
		START	END	
<p>Harlem Dowling will comply with the personnel provisions of the Preventive Service Agreement. All prospective employees will be hired with the relevant work experience and all fingerprints of prospective employees will be submitted to DCJS.</p>	<p>Chief Operating Officer</p>	<p>11/2/09</p>	<p>Ongoing</p>	<p>Our ability to fill open positions is often impeded by the lack of qualified candidates who do not meet the qualification of two years of documented work experience in social services. This lack of available qualified candidates makes it necessary for us to consider and hire candidates who only meet the degree requirement. We hire and train these candidates, both at internal and external training seminars to address the lack of social services work experience. As written in April 1998, this policy addendum prevents the hiring of college graduates who have acquired social work degrees but do not meet the criteria of two years of documented experience working with a child welfare population. This problem raises the question, "Why should anyone study or attain a higher level of education in social services, if you can't obtain a job in this field upon graduation?"</p>
<p>When a staff member is hired who does not have the required work experience but meets all other criteria, a waiver will be sought from ACS.</p>	<p>Chief Operating Officer</p>	<p>11/2/09</p>	<p>Ongoing</p>	<p>However, we have not hired any additional staff that does not meet the requisite related work experience.</p>

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RECOMMENDATION # 5 – ACS SHOULD AMEND THE SECTION OF THE PREVENTIVE SERVICE AGREEMENT TO REFLECT THE CHANGE IN USING OCA INSTEAD OF DCJS FOR THE CONDUCT OF CRIMINAL-HISTORY RECORD REVIEWS FOR CURRENT EMPLOYEES.

RESPONSIBLE MANAGER'S NAME – NANCY MARTIN (POLICY & PLANNING) AND SUSAN FOJAS (QUALITY ASSURANCE)

CORRECTIVE ACTIONS TO BE TAKEN	RESPONSIBLE PERSON	DATES START END	COMMENTS
Action already taken as noted in the ACS response to this item. With regard to the issuance of clarifying guidance for provider agencies, ACS released a policy memorandum that gives direct and updated information about expectations for background checks and steps to be taken by provider agencies to meet those expectations.	Nancy Martin	Sept 2009	
When new contracts are developed for preventive services providers, ACS will ensure that appropriate language is included in them to reflect and link to the September 2009 policy.	Nancy Martin	Spring 2010	July 2010 expected contract start date
Technical assistance and oversight are being provided to provider agencies to help ensure that they understand the current policy and are taking appropriate steps to comply with it.	Susan Fojas	Ongoing	Ongoing

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RECOMMENDATION # 6 – HARLEM DOWLING SHOULD ENSURE THAT ALL INFORMATION REGARDING PREVENTIVE SERVICE CASES THAT HAVE BEEN ASSIGNED TO IT ARE RECORDED IN PROMIS PROMPTLY, COMPLETELY, AND ACCURATELY. IF THERE ARE ANY DISCREPANCIES IN THE DATA RECORDED, HARLEM DOWLING SHOULD IMMEDIATELY INFORM ACS SO THAT MODIFICATIONS CAN BE MADE.

RESPONSIBLE MANAGER'S NAME – DOROTHY WORRELL

CORRECTIVE ACTIONS TO BE TAKEN	RESPONSIBLE PERSON	DATES		COMMENTS
		START	END	
1. Program Director and the Director of QA/MIS will verify accuracy of cases and case information in PROMIS.	Program Director Director, QA/MIS	12/1/09	2/28/10	Historical data clean up will be done by QA and the Program Director. We anticipate it will take 90 days to verify and clean up data on all current and active cases
2. All data entry in PROMIS will be centralized to minimize errors and discrepancies.	Case Aide	1/31/2010	Ongoing	Program Director will verify case information on all new cases.
3: The Program Director will reconcile monthly PROMIS data with the Monthly Casework Contact Log.	Program Director	12/1/09	Monthly thereafter	PROMIS data entry will not occur until all progress notes have been finalized in Connections by the Administrative Supervisor.