



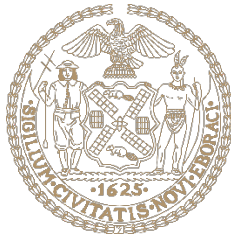
NEW YORK CITY COMPTROLLER
BRAD LANDER

Report to the Mayor and City Council on City Comptroller Audit Operations Fiscal Year 2025

BUREAU OF AUDIT AND INVESTIGATIONS

DECEMBER 30, 2025





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The City of New York
Office of the Comptroller
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December 30, 2025

The Honorable Eric Adams, Mayor
City of New York
City Hall
New York, NY 10007

The Honorable Adrienne Adams, Speaker
New York City Council
250 Broadway, Suite 1850
New York, NY 10007

New York City Council
City Hall
New York, NY 10007

Dear Mayor Adams, Speaker Adams, and Members of the City Council:

Attached is the Annual Report on the Operations of the Audit Bureau of the New York City Comptroller's Office for Fiscal Year 2025. As mandated by the City Charter, this report summarizes the work my office completed in FY2025. Given the end of my administration, I have also taken the opportunity to reflect on the past four years of transformation and progress.

Audits and investigations are vital tools for improving how New York City serves its residents, and with this in mind, there has been a new focus on driving change. This has meant more complex audits that seek to answer big questions focused on outcomes and effectiveness, in subject areas designed to advance our strategic objectives—to strengthen the City's operations; increase/prioritize equity and inclusion; improve the City's fiscal position; mitigate risk; and deepen public engagement and education. In keeping with this, we have introduced key changes in the way the Audit Bureau selects audit topics, audit planning and testing, and in how we measure our work once it is completed.

We now measure our impact by contribution to these objectives, based on findings and recommendations; we track media coverage, as a key indicator of public interest in our work, and other outcomes in City government, such as law and policy changes as they occur. We track the implementation rate of recommendations, and since January 2022, we have moved from a “once and done” approach to continual tracking of implementation until final status is known. To increase public awareness, a public facing Recommendations Tracker was created, and perhaps most importantly, we have significantly increased direct engagement with New York City residents through participatory auditing.

Actual Change

The work of the Audit Bureau over the past four years has led to real change. Almost immediately after the **NYC Ferry** audit (see Appendix) was released, the administration responded by re-evaluating and issuing a new fee structure; the **Homeless Sweeps Audit** (see Appendix), which was released with a policy brief proposing that the City adopt a **Housing First** model to tackle homelessness, informed Mayor-elect Mamdani’s decision to put an end to sweeps from January 2026; the audit of **Speed Cameras** (see Appendix), which identified over \$100M in foregone revenue due to massive increases in the number of ghost and obscured license plates, led to the announcement of a joint City and State Taskforce to crack down on offenders; the recent audit of the **Doula pilot program**, which overwhelmingly found that the program is improving outcomes for Black and Latino birthing people, provided an impetus for the City Council to expand the program and move it from pilot status to a permanent program; our audit of **NYPD’s Oversight of Its Agreement with ShotSpotter** (see Appendix), not only won a national performance award from the Association of Local Government Auditors, but it contributed strongly to the national debate concerning the effectiveness of a tool that continues to be used in over 160 cities nationwide. The audit found that despite its \$51M price tag, ShotSpotter only identified actual shootings 13% of the time, leading to the waste of precious officer hours. Our investigation into the City’s so-called “**60-Day Rule**” (see Appendix) which imposed limits on shelter stays for newly arrived asylum-seeking families and allowed eviction after 60 days, found the administration’s policy was executed in a

haphazard and profoundly reckless manner, destabilizing vulnerable families and impeding pathways to education, work authorization, housing stability, and self-sufficiency. In response to the report, the administration modified its application of the Rule to reduce its impact on particularly vulnerable families.

In many instances our audits and investigations have been the subject of City Council hearings and testimony, and in every instance, they have improved transparency in City government.

People-(Em)powered Audits

In 2022, we spearheaded “**People-Powered Audits**,” a new form of civic engagement that amplifies the voices of those most often not heard, focusing on two groups: New York City Housing Authority (NYCHA) residents and individuals with disabilities. In both cases my office engaged with stakeholders at all stages of the process—before, during and after project completion—listening to their lived experiences, asking what issues we should focus on, and involving residents themselves through committees of stakeholders and the use of survey techniques to obtain qualitative evidence from those who matter most—those we serve.

In the case of the **MTA Express Bus** project, in a first-of-its-kind initiative, auditors partnered with volunteer wheelchair users to test wheelchair ramps in real conditions, and during 2025 we began other projects based on input from Roundtable participants. These projects are slated for completion in 2026.

The People-Powered initiative for NYCHA included significant audits and the **Doors Observations** (see Appendix)—another first-of-its-kind initiative that sent “all hands” from the Audit Bureau into the field for one week, to examine every NYCHA door, window, and external lock to assess the security of NYCHA housing. The focus on security came out of months of engagement with residents who identified security as a key concern. In FY2025, audits of **NYCHA’s contractor repairs and PACT eviction practices** were also completed; both audits were started by a vote by NYCHA Resident Audit Committee members. The first Resident Audit Committee was formed in 2022, leading to the

issuance of four reports that revealed hundreds of doors and windows systemwide were broken; inaccurate rent calculations at Redhook Houses; millions in unsupported payments for questionable work by small vendors; and poor oversight over PACT housing development eviction practices, leading to fewer services and higher eviction rates by certain property managers. I am pleased to report that a second Resident Audit Committee was recently seated in 2025 and one new audit selected by a vote by new Committee members is now underway.

Other forms of participation and resident engagement have been incorporated in any number of audits during my tenure, driving the selection of audit subjects, informing audit objectives, and incorporating the views of residents to assess the effectiveness of the services provided by the agencies under review. These efforts have been striking in highlighting the correlation between resident experience and the results of traditional quantitative testing and data analysis. The data, audit evaluation of documentation and outcomes, and what residents tell us about how they experience City services have aligned to a striking degree, validating the value of the People-Powered approach.

Effectiveness & Efficiency

My office has worked hard over the past four years to assess the effectiveness and efficiency of City programs and to suggest concrete recommendations designed to improve service delivery.

In FY2025, we examined the **Behavioral Health & Emergency Assistance Response Division (B-HEARD)**, a pilot program that sends social workers and emergency medical teams, instead of uniformed police, to assist people in crisis. Our audit uncovered a program marked by systemic gaps in deployment and coordination, deficient tracking and accountability, and a fundamental inability to meet the needs of the community it is intended to serve.

Our audit of the Department of Education's services for **English Language Learners (ELL)** (see Appendix) revealed unacceptable failures and inequities in service delivery. Most notably, DOE systematically denied legally mandated services: 48% of sampled

ELL students did not receive required courses or instructional minutes, and 40% were taught by teachers lacking proper certifications in language instruction.

Our audit of the **Administration for Children's Services (ACS)** found systemic weaknesses in how the City oversees the safety of children in foster care. Although ACS has monitoring tools in place, and although the audit found that incidents of neglect and abuse in foster care decreased between 2020 and 2023, it also found that over this period more than 1,600 children were victimized, with more than three-quarters of incidents taking place during visits with birth families—a critical area where ACS oversight is limited. Following this audit, my office wrote to the Chief Judge of the New York State Court of Appeals urging closer collaboration with ACS to prevent instances of neglect and abuse during familial visits.

Our review of the City's implementation of **Commercial Waste Zones** (see Appendix) (CWZ), a radical overhaul of how the Department of Sanitation (DSNY) collects waste from New York City's businesses, found that DSNY awarded contracts to carting companies with significant violation histories, and huge differences in pricing, despite claiming that compliance and pricing were significant factors in its Request for Proposals process. On average, each of the 18 selected carters had 241 safety, environmental, or labor violations over the prior four years. The carters selected by DSNY included eight of the 10 worst performers in the new CWZ system, with one company alone (Action Carting) racking up over 1,000 violations.

Our audit of **Department of Education's (DOE) Asbestos Management Program** found longstanding oversight failures. From March 2021 to March 2024, just 18% of City school buildings known to contain asbestos were inspected by the agency on a triennial basis, and just 22% of schools underwent mandated six-month checks. These findings exposed system-wide noncompliance with the federal Asbestos Hazard Emergency Response Act (AHERA), stretching back decades.

Our **Body-Worn Camera** (see Appendix) review of NYPD found long delays in the release of camera footage in response to FOIL requests, poor internal accountability over body worn camera policies and procedures, and inconsistent activation rates by officers in the field.

The audit of **DOB's Enforcement** of the City building code found that enforcement efforts and the imposition of penalties were almost completely complaint-driven, with the result that the imposition of violations and penalties correlated strongly to lower-income neighborhoods of color.

The audit of the **Department of Housing Preservation and Development's Affordable Neighborhood Cooperative Program (ANCP)**, a program designed to provide a pathway to ownership for income eligible individuals and families, found multi-year delays caused largely by poor planning and lack of proactive problem solving to target expected causes of delay.

The audit of **DOE's Oversight Over School Bus Vendors** (see Appendix) found DOE's processes wholly inadequate. Despite significant investment in new technologies and repeated promises to parents and students, DOE does not hold vendors accountable for woeful service. Despite spending \$1.7B to meet transportation needs, students—disproportionately Special Education Students—continue to experience tremendous disruption and inconvenience which negatively impacts school performance and participation and creates additional burdens for families and other caregivers. Complaints have grown at appalling rates from a base of nearly 90,000 during the 2021-22 school year to almost 155,000 during the 2023-24 school year, disproportionately impacting children with special needs. This audit comes at a time when existing bus contracts are due to expire, providing DOE and the City with a rare opportunity to overhaul a system that is clearly not working.

Good Governance, Integrity & Accountability

Strong governance is the foundation of an accountable and effective city. This past four-year term has examined how agencies manage public resources and oversee vendors and identified significant deficiencies. These potentially erode public trust and undermine service quality.

Following allegations raised in the federal indictment against Mayor Eric Adams regarding the **City's Approval of Turkish House** (the headquarters of the Turkish Consulate), my office launched an investigation. We found that Turkish House was the only office building

of its size and category allowed to open without an approved Fire Protection Plan (FPP), and that FDNY and DOB cut serious corners that compromised the safety of both the occupants and neighbors of the building. The investigation uncovered much larger management deficiencies at DOB that prompted recommendations to increase agency transparency and to ensure that safety is never sacrificed.

Our follow-up audit of the **47th Street Business Improvement District's (BID) operating practices** (see Appendix) found persistent failures in governance by the BID, which serves Manhattan's Diamond District. Despite prior warnings in 2019, the BID continued to mismanage hundreds of thousands of dollars in public funds and implemented fewer than half of our earlier recommendations. The audit found inadequate board oversight, unchecked executive authority, and weak internal controls.

Our audit of the **Department of Housing Preservation & Development's (HPD) \$432 million emergency contract with DocGo** found that almost 80% of the \$14M paid to the vendor between May and June of 2023 was not adequately supported by evidence before payment was made. The audit found that DocGo used nearly 67% of the amount it received to pay unauthorized subcontractors; and routinely understaffed hotels with caseworkers and social workers, failing to provide much-needed services to asylum-seeking families. When auditors visited these hotel rooms, 80% had at least one deficiency, and several posed serious health and safety hazards.

Our audits of **Oversight Over Subcontractors by DFTA, ACS, DOHMH, DHS, and HRA** (see Appendix) highlighted frequent areas of non-compliance with contract terms and conditions and with Procurement Policy Board Rules which require agencies to pre-approve the use of subcontractors by prime vendors. Unless this crucial area of non-compliance is addressed, the City will continue to have no idea who we are doing business with and who is providing social services on our behalf.

Audits by the Numbers

This office issued 785 recommendations to agencies between 2022 and 2025. Of these recommendations, agencies have agreed to implement 478 (61%), and based on our tracking throughout this four-year period, 361 (46%) have already been implemented, 29

(4%) were partially implemented and 316 (40%) remain pending. Based on data collected during this term, which shows that agencies need up to two years to implement the recommendations they intend to implement, we can expect the overall implementation rate to continue to grow through the end of 2027.

The total above includes 284 recommendations that were issued during FY2025, of which agencies agreed to implement 160 (56%) and partially implement a further 36 (13%). The data shows that although agencies take time to implement recommendations, most are ultimately implemented or partially implemented, even when in response to the draft they decline to provide a response or indicate they will not implement the recommendation. Further details follow in this Report's Summary section, along with the data on impact by Strategic Objectives. Overwhelmingly, and fittingly, the findings and recommendations impact Effectiveness and Efficiency of agency operations.

We have worked to ensure that New York City's fiscal standing is strong, and through innovative audits and public engagement, we are helping to build a fairer City accountable to its residents.

I am deeply grateful to the agencies that engaged constructively with our work and to the thousands of New Yorkers who shared their voices, experiences, and ideas. Together, we've raised the bar for what government accountability can be.

Sincerely,

A handwritten signature in black ink, appearing to read "B. Lander", with a stylized, flowing script.

Brad Lander

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Summary of Audit Bureau Results

This Annual Report includes summaries of major reports issued during this period.

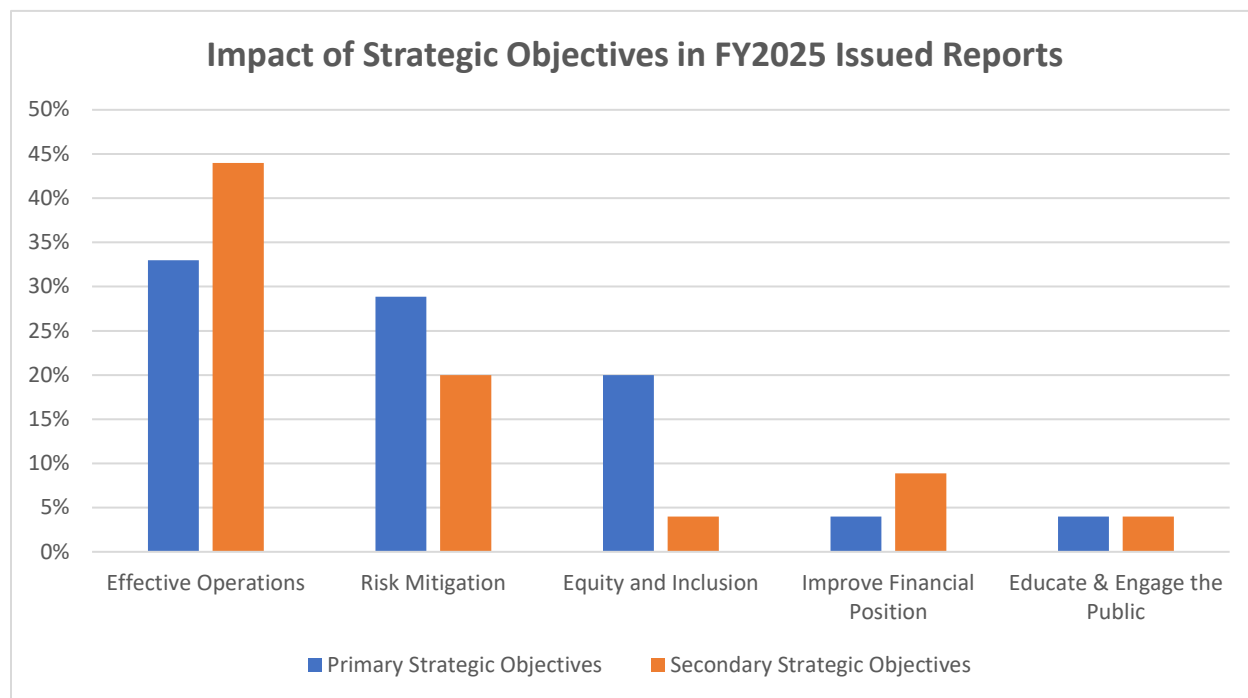
All audits were performed in accordance with Generally Accepted Government Auditing Standards (GAGAS) as required by the New York City Charter. Certain non-GAGAS reports are also included.

FY2025 Contributions by Strategic Objective

The Audit Bureau categorizes reports by their primary and secondary contributions to strategic objectives, based on the nature of identified findings and recommendations. As indicated in Chart I below, primary strategic objectives identified in the reports issued during FY2025 showed that 33% identified issues that if addressed will improve the effectiveness of agencies; nearly 29% identified risks that should be mitigated; 20% will improve equity and inclusion; 4% will improve the City's financial position; and 4% engaged the public in some way. Every audit issued increased transparency and helped inform the public about City operations and programs.

In terms of secondary impacts over the same period, 44% offered recommendations for increasing the effectiveness of operations; 20% to mitigate risks; 9% to improve the City's financial position; and 4.4% were drawn from engaging New York City residents.

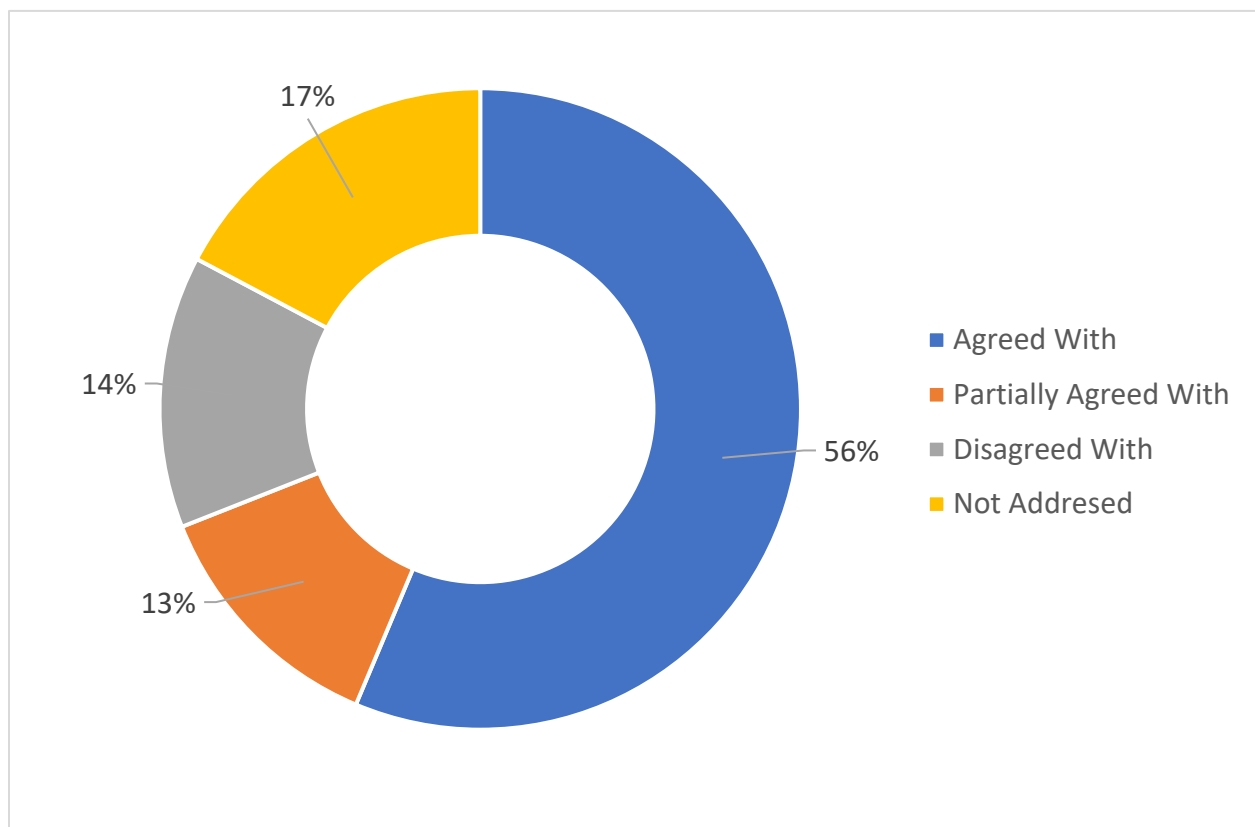
Chart I: Impact of FY2025 Reports - by Strategic Objectives



FY2025 Recommendations – Responses and Implementation to Date

The reports issued in FY2025 included 284 recommendations that were issued to agencies. As shown below in Chart II, in their responses to the Draft Reports, agencies agreed to implement approximately 56% of the recommendations, partially agreed to implement 13%, disagreed with 14%, and did not address 17%.

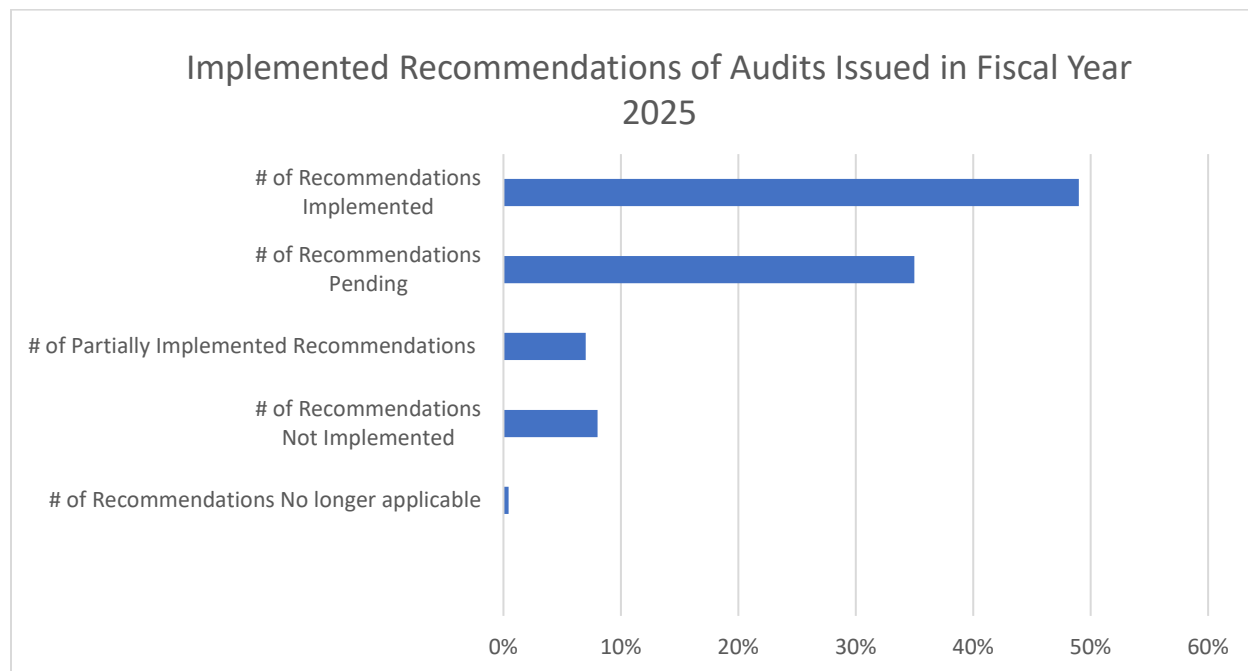
Chart II: Agency Responses to Recommendations Issued in FY'2025 by Percentage



Note: Agency agreement is captured at response.

Chart III below shows the implementation rate of recommendations issued in FY2025, as reported to date: 49% of recommendations issued during FY2025 have been implemented so far; 35% remain pending; and 7% have been partially implemented.

Chart III: Implementation Rate of FY2025 Audit Recommendations

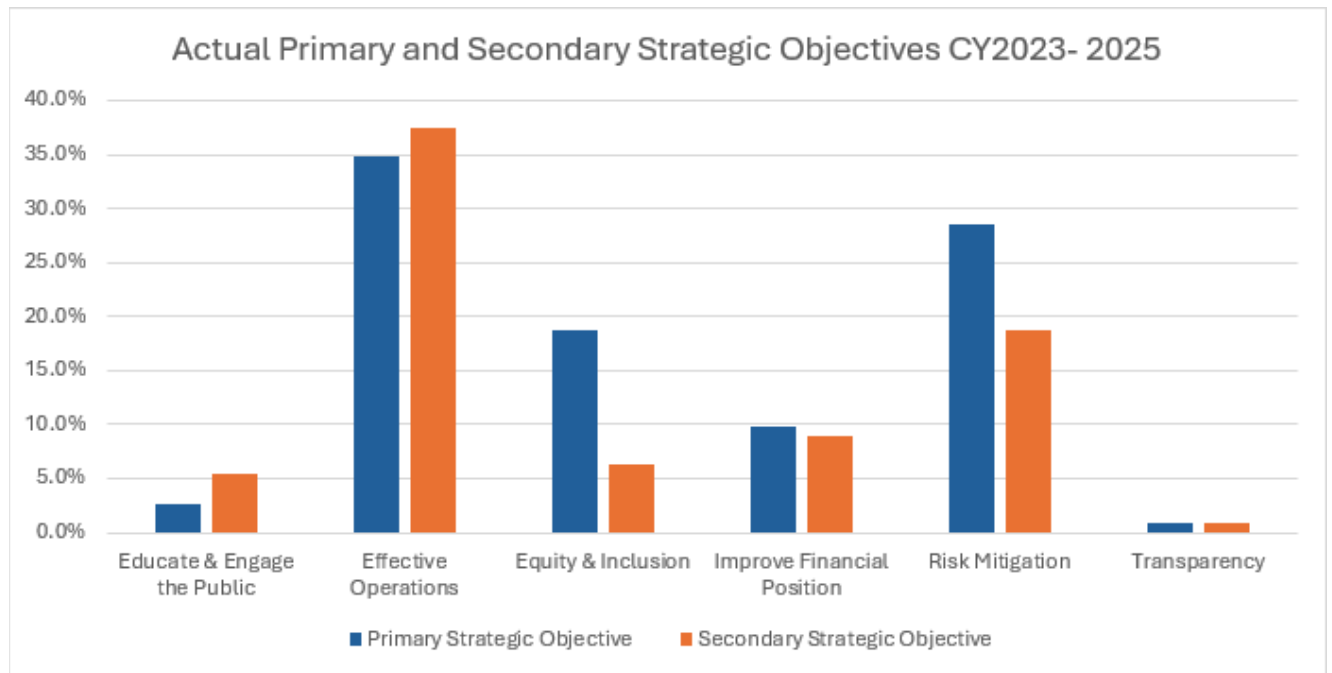


Contributions by Strategic Objective for Reports Issued 2023 to 2025

Beginning in CY2023 to present, reports issued have been categorized by their contributions to primary and secondary strategic objectives. As shown in Chart IV below, reports issued between CY2023 to CY2025 were aligned with the following primary strategic objectives: 35% found issues that if addressed would improve the effectiveness of agencies operations; 29% identified risks that should be mitigated; 19% would improve equity and inclusion; 10% would improve the City's financial position; and 3% engaged the public in some respect.

The secondary impacts aligned with the following strategic objectives: 38% offered recommendations for increasing the effectiveness of operations; 19% to mitigate risks; 9% to improve the City's financial position; 6% to improve equity and inclusion; and 5% related to engagement with New York City residents.

Chart IV: CY2023 to CY2025 Contributions by Strategic Objectives



Recommendations Issued Between 2022 – 2025: Responses and Implementation to Date

Agency willingness to implement audit recommendations continues to remain high.

Based on agency responses to draft reports issued during this four-year term, agencies agreed with 61% of all recommendations, and partially agreed with a further 9%, as shown in Chart V below. Agencies also disagreed with 16%, did not address 13%, and were non-responsive for 2%.

Unsurprisingly, agency implementation rates of audit recommendations are highest for those issued in CY2022 (76.62%). The implementation rate for recommendations issued in FY2023 and FY2024 are similar, at 56% and 55% each, while it is lowest for audits issued in CY2025, at 22%. This is to be expected; the data shows that agencies tend to complete their implementation efforts approximately two years after reports are issued. See Chart VI below.

The average implementation rate for all recommendations issued between 2022-2025 is 52%. Based on agency responses covering all four years, a further 4% have been partially implemented; 30% are still to be implemented; and 14%, based on agency follow-up to date, will not be implemented.

The data over this four-year period also shows that agencies tend to implement recommendations, even when they disagreed with or declined to address them, when responding to the draft report.

As shown in Chart VII below, agencies implemented or partially implemented 15% of all recommendations initially disagreed with, and at least partially implemented 33% of all recommendations not addressed by the agency when they responded to the draft report.

Chart V: Agency Responses by Calendar Year

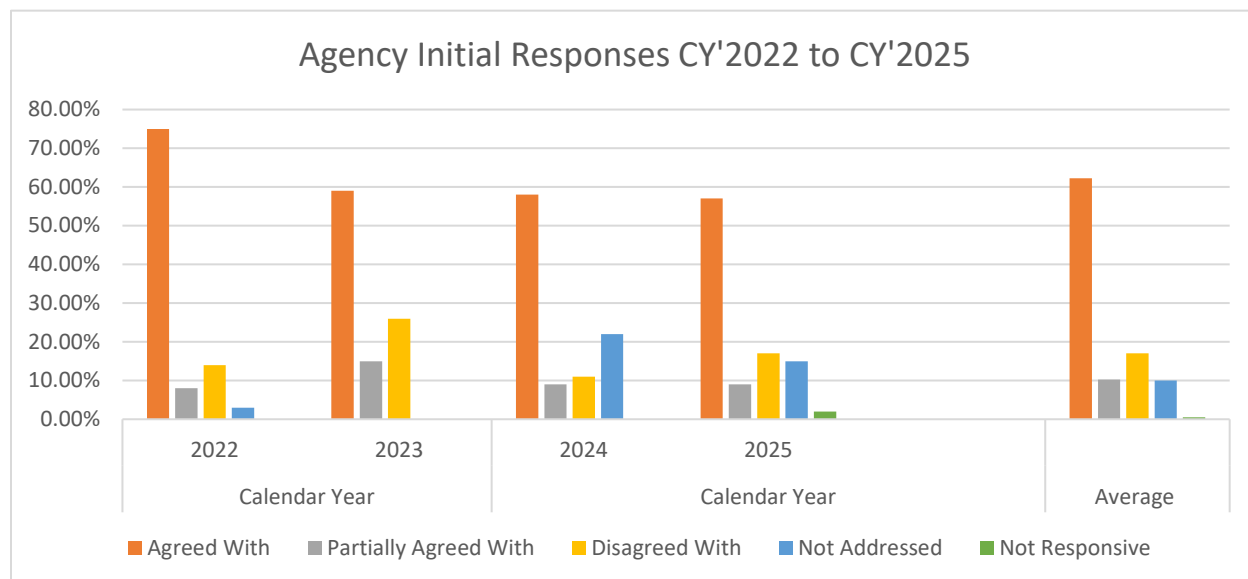


Chart VI: Agency Implementation of Recommendations by Calendar Year

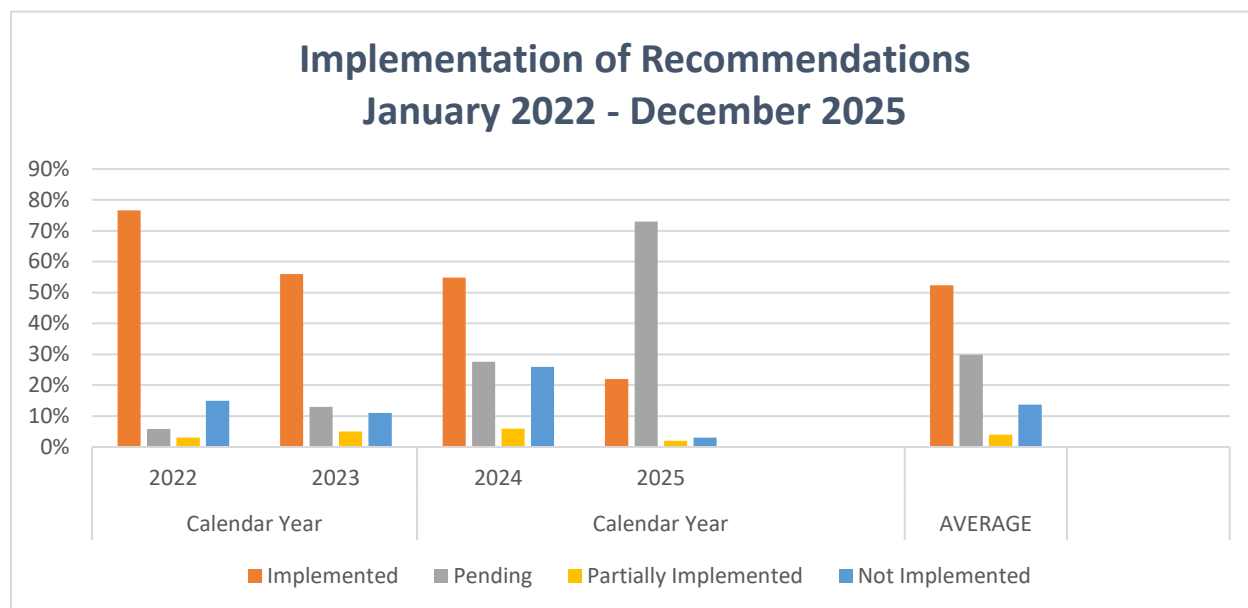
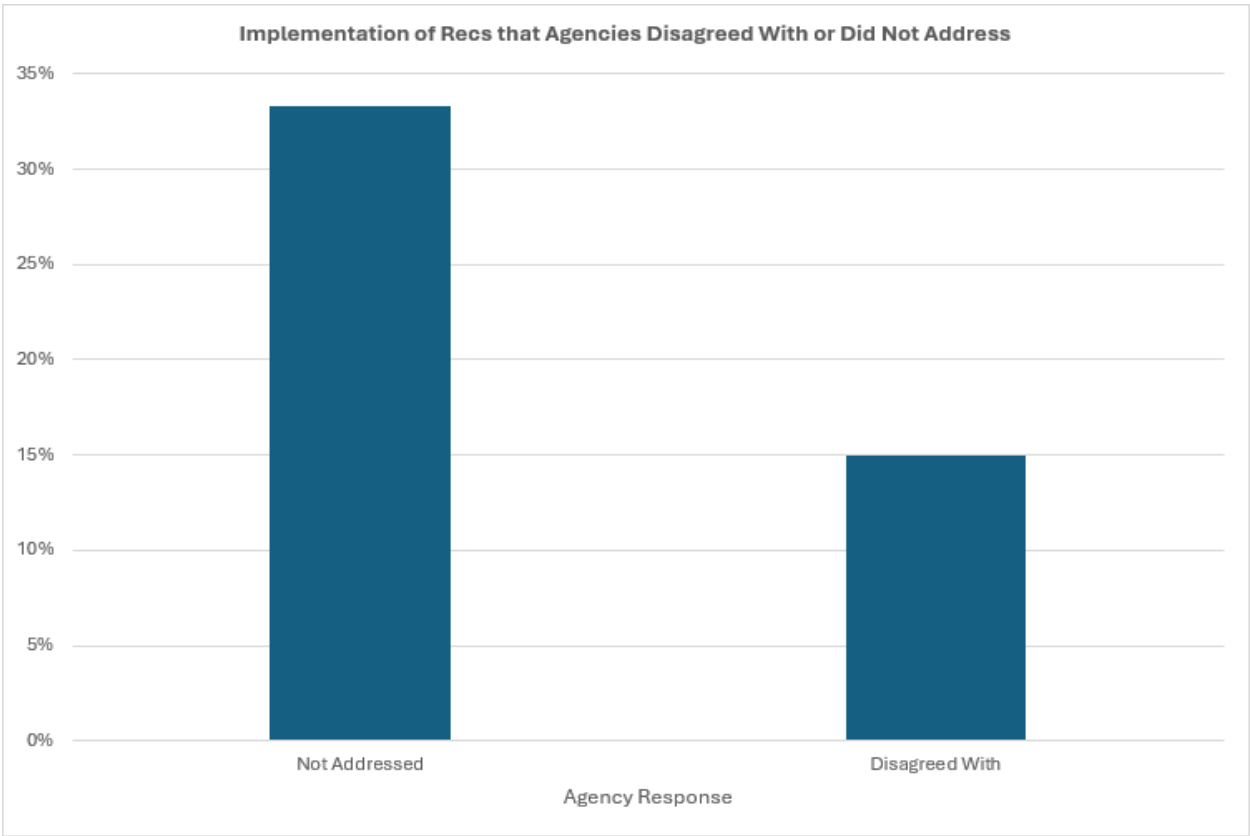


Chart VII: Implementation of Recommendations that Agencies Disagreed With or Did Not Address

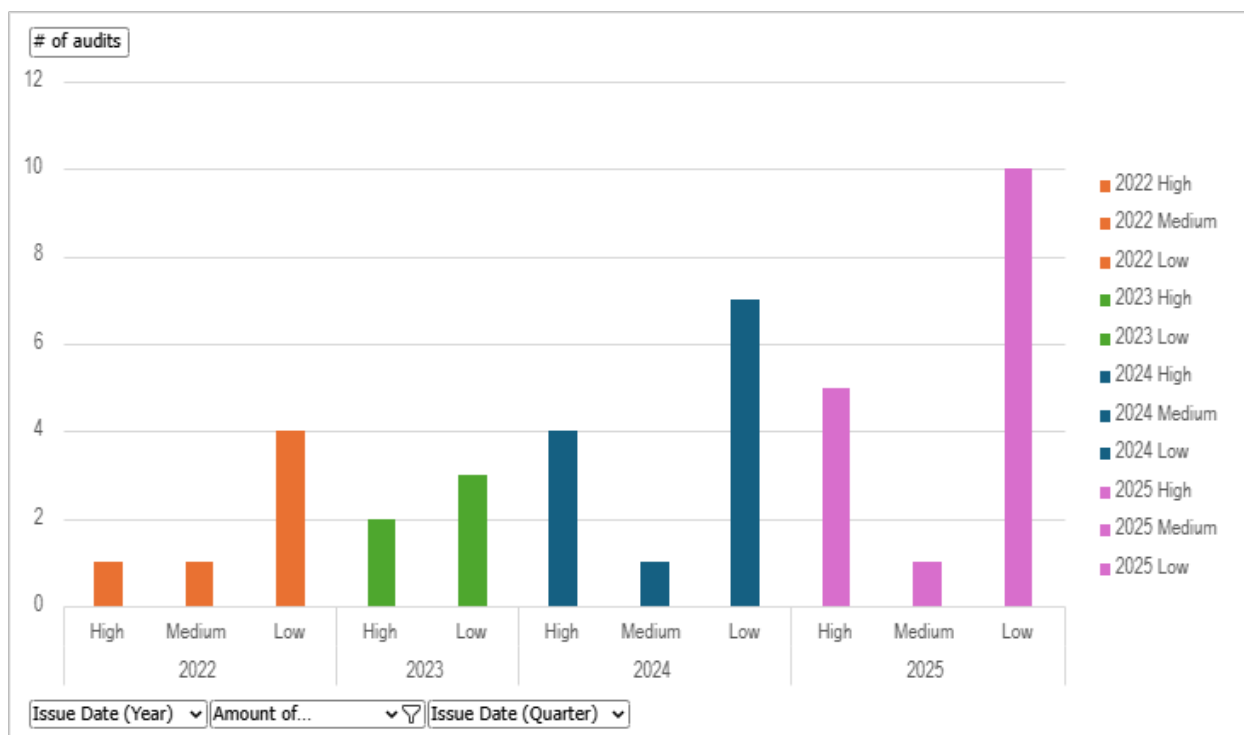


Press Coverage of Audits Issued Over Time

The work of the Audit Bureau over the past four years has led to real change due in part to steadily increasing media coverage between 2022 and the present. Excluding restricted reports, 15.8% of reports issued in 2022 were covered by at least one press outlet. The percentage increased to 21.7% in CY2023 and again to 48% in CY2024. The percentage of audits that received coverage remained high in CY2025. As of December 19, 2025, 45% of reports issued this calendar year were covered by press. By year’s end, this figure is expected to surpass CY2024.

In total, nearly one third of the 119 reports released from CY2022 through December 2025 were covered by a media outlet. In terms of volume, the number of reports that were covered by 7 or more outlets also increased over time, as demonstrated in Chart VIII below. The number of audits that received a “high” volume of coverage peaked in CY2025.

Chart VIII: Increased Press Coverage of Audit Reports



Annual Report Structure

Summaries of reports issued in FY2025 follow. They are divided into the following six sections: Engage the Public; Effective Operations; Equity and Inclusion; Improve Financial Position; and Risk Mitigation. Reports appear in these sections based on their primary contribution to a related strategic objective.

Summaries for reports referenced in the Comptroller's letter that were issued prior to or after FY2025 appear in the Appendix.

Engage the Public

Audit Report on the New York City Housing Authority's Eviction Processes (FK23-095A)

Audit at a Glance

What questions did the audit look at?

- Do Permanent Affordability Commitment Together (PACT) Property Managers comply with established eviction policies?
- Do eviction rates differ at New York City Housing Authority (NYCHA) conventional public housing developments and PACT developments?

Why does it matter for New Yorkers?

- In 2022, the Comptroller's Office surveyed NYCHA residents to identify their most significant concerns about the agency and guide "resident-powered audit" processes in the coming years. Based on residents' input, the Comptroller presented potential audit topics to the Committee and members voted for two audit subjects, one of which was to examine PACT Property Manager's compliance with eviction policies and assess eviction rates.
- NYCHA provides public housing to NYC residents through conventional developments, the PACT Program, and other programs. PACT converts the federal subsidy supporting developments from the public housing program to the Housing Choice Voucher Program (known as Section 8 housing), which provides access to new funding sources that can be used to preserve and rehabilitate apartments and keep them affordable. NYCHA identifies developments with the highest capital needs and residents vote on whether to participate in the PACT program.
- The audit found that the eviction rate at PACT developments greatly outpaced that at conventional NYCHA developments and is nearly on par with the Citywide rate. Additionally, eviction and eviction filing rates varied dramatically between PACT developments, due in part to NYCHA's inadequate guidelines. Finally, the audit found that PACT Property Managers did not conduct outreach to tenants and report evictions, eviction filings and pre-eviction notices and outreach to NYCHA. Since NYCHA was not aware of all eviction proceedings, NYCHA did not ensure that tenant rights were protected.
- The purpose of NYCHA is to provide safe, affordable housing to New Yorkers. However, the audit found that PACT tenants were more likely to be evicted or the subject of eviction proceedings than their public housing counterparts. The frequency with which

PACT Property Managers evict or petition to evict tenants contradicts NYCHA's stated goals.

What changes did the agency commit to make following the audit?

- NYCHA agreed to regularly review and compare eviction, eviction filing, and eviction notice rates at both PACT and conventional NYCHA developments.
- NYCHA agreed to strengthen reporting requirements and procedures and periodically inspect resident files to ensure pre-eviction outreach is accurately recorded and complies with NYCHA's Guidelines.

Audit Findings

- ⚠ Eviction rates at PACT properties significantly increased from Fiscal Year 2023 to FY2024.
- ⚠ PACT eviction rates greatly exceeded NYCHA's rate and was nearly as high as the Citywide rate.
- ⚠ PACT eviction filing rates exceeded both NYCHA and the Citywide rate.
- ⚠ NYCHA's eviction guidelines are inadequate.
- ⚠ PACT Property Managers failed to report all eviction filings and executed evictions.

Audit Recommendations		Agency Response
1	Perform trend analyses of Citywide, NYCHA, and PACT Property Managers' eviction and pre-eviction activity rates, and track PACT Property Managers' performance and associated eviction risk.	DISAGREED
2	Consider PACT Property Managers' performance, including compliance with NYCHA's Guidelines for PACT Partners as well as eviction, eviction filing, and pre-eviction notice issue rates, before awarding new developments. Ensure PACT Developers and residents are provided with accurate performance data.	DISAGREED
3	Post annualized eviction and eviction filing rates for PACT Property Managers and NYCHA conventional public housing on NYCHA's website. These should be provided each year.	DISAGREED
4	Ensure NYCHA's Leased Housing Department shares eviction certifications with NYCHA's Asset Managers.	DISAGREED
5	Regularly review publicly available reports and websites, such as the NYC Open Data Evictions dataset and the Displacement Alert Portal, to identify evictions that occur at PACT Developments and compare to reported monthly legal proceedings for completeness.	DISAGREED
6	Regularly obtain data from the NYS Office of Court Administration for all eviction filings for PACT Property Managers and compare to reported monthly legal proceedings for completeness.	DISAGREED
7	Regularly review and compare eviction and eviction filing rates at PACT Projects to NYCHA rates to determine if rates are excessive.	AGREED
8	Regularly review and compare eviction notice rates across PACT Projects to determine whether PACT Property Managers are initiating evictions at higher rates and investigate why.	AGREED
9	Require PACT Property Managers to provide arrears reports and review for escalating balances and corresponding outreach to impacted tenants.	DISAGREED
10	Require PACT Property Managers to maintain supporting documentation of pre-eviction outreach (e.g., letters, appointments to discuss, social service referrals, etc.) in resident files.	AGREED
11	Periodically inspect a sample of resident files to ensure that pre-eviction outreach is accurately and completely recorded, and that it conforms to NYCHA's Guidelines.	AGREED

12	Restrict column data to specific values for Monthly Legal Proceedings Reports to ensure data received from Property Managers are valid and entered in a consistent format (e.g., dates [including month, day, and year], arrears amount, contact information [phone number, email address], etc.) to minimize data entry errors.	AGREED
13	Ensure that Monthly Legal Proceedings Reports include dedicated fields to track at least the minimum requirements of NYCHA's Guidelines.	AGREED
14	Include fields in Monthly Legal Proceedings Reports that indicate when a pre-eviction outreach or pre-eviction notice is added to the report to track how long it takes for cases to be added. Save monthly reports for comparison purposes.	DISAGREED

Implementation Status

NYCHA reported that three recommendations have been implemented, five are pending, and the remaining six recommendations will not be implemented. NYCHA anticipates that the pending recommendations will be implemented by the end of the calendar year 2025.

Audit Report on the New York City Housing Authority's Monitoring of Contractor Repairs (MH23-094A)

Audit at a Glance

What questions did the audit look at?

- How does the New York City Housing Authority (NYCHA) select and monitor the contractors it hires to conduct repairs and maintenance at its residential developments?

Why does it matter for New Yorkers?

- In 2022, the Comptroller's Office surveyed NYCHA residents to identify their most significant concerns about the agency and guide "resident-powered audit" processes in the coming years. Based on residents' input, the Comptroller presented potential audit topics to the Committee and members voted for two audit subjects, one of which was to examine NYCHA's oversight of contractors hired to perform maintenance and repairs.
- The survey found that NYCHA residents had an overall dim view of NYCHA's contractors. While less than half of residents rated contractors' work as "good" or better, 30% of respondents said the work was "poor." A survey of Tenant Association presidents garnered similar results. The auditors examined purchase orders relating to work performed in apartments and common areas and found that many had no supporting documentation. This raised questions about whether these jobs were even completed at all.
- Many of these issues could be resolved if NYCHA strengthens its vetting process for outside vendors. This includes improving oversight of its contracts, ensuring that payments are not rendered before verifying that work has been completed, and proactively gathering resident feedback about contractor work.

What changes did the agency commit to make following the audit?

- NYCHA agreed to improve oversight of the procurement and payment process by taking a firmer stance on bid splitting, strengthening internal controls, and ensuring that NYCHA personnel complete required documentation.
- NYCHA agreed to improve accountability by preventing vendors from acquiring more than one vendor ID number and establishing uniform policies and procedures regarding collection and maintenance of supporting documentation.
- NYCHA agreed to better evaluate vendors by reviewing prior work before awarding new contracts, developing standard rating criteria, and tracking feedback about contractors.

Audit Findings

- ⚠ 30% of surveyed NYCHA residents said that contractor work was poor.
- ⚠ Residents said that NYCHA does not seek feedback regarding repairs conducted in their own apartments.
- ⚠ Some repair jobs lacked supporting documentation and may not have been completed at all.
- ⚠ Only 57% of Tenant Association presidents rated the quality of large-scale work as good or better.

Audit Recommendations		Agency Response
1	Investigate the instances identified in this report for which auditors were unable to find evidence that work was performed before payment was rendered. If sufficient evidence of satisfactory work is not found, make efforts to recover the funds expended from vendors.	DISAGREED
2	Make all reasonable efforts to identify the micro purchases requisitioned by individuals named in the federal indictment and determine whether there is adequate evidence of satisfactory work pertaining to those purchases.	DISAGREED
3	Take a firmer stance to prevent bid splitting and implement regular sample-based testing of micro purchases to ensure micro purchase processes are only allowed when strictly appropriate.	AGREED
4	Strengthen internal controls by ensuring that policies and procedures include an adequate segregation of duties when procuring micro purchases and incorporate training and sample-based reviews to ensure compliance.	AGREED
5	Ensure that a Statement of Services is completed and signed by authorized NYCHA personnel prior to paying invoices submitted for work performed.	AGREED
6	Establish mechanisms to detect and prevent vendors from acquiring more than one vendor ID number by regularly conducting “fuzzy” matching of addresses and vendors with similar names and routinely conducting ownership record searches.	AGREED
7	Establish uniform policies and procedures regarding the maintenance of supporting documentation for all units at NYCHA administering and overseeing DECAR contracts to follow.	AGREED
8	Establish uniform policies and procedures for collecting and maintaining documentation of work performed, and for storing such documentation electronically, in an orderly and accessible fashion.	AGREED

9	Require that prior work performed by prospective vendors be formally considered and documented in all subsequent contract award decisions.	AGREED
10	Develop a standard format with standard criteria for rating vendors in evaluations, covering the areas of timeliness of performance, fiscal administration and accountability, and overall quality of performance.	AGREED
11	Ensure that contractor evaluations are conducted in a timely manner and that they demonstrate in sufficient detail the vendor's performance.	AGREED
12	Develop a mechanism for soliciting and tracking resident feedback on repairs and maintenance of work performed, and for capturing and sharing the evaluation of micro and small vendors.	AGREED

Implementation Status

NYCHA reported that two recommendations are partially implemented, six recommendations have been implemented, and the remaining four recommendations are pending implementation.

Effective Operations

Audit of the Behavioral Health Emergency Assistance Response Division's Effectiveness in Responding to Individuals with Mental Health Crises with Mental Health Crises and Meeting Its Goals (MG24-060A)

Audit at a Glance

What questions did the audit look at?

- To what degree is the Behavioral Health Emergency Assistance Response Division (B-HEARD) effectively providing health-centered care to individuals experiencing non-violent mental health crises, in accordance with the program's goals?

Why does it matter for New Yorkers?

- In New York City, incidents involving people experiencing mental health emergencies are traditionally handled by uniformed police officers. This setup can escalate situations and pose risks to both individuals and first responders. The B-HEARD pilot program was developed by FDNY, New York City Health + Hospitals (H+H), NYPD, and the Mayor's Office of Community Mental Health (OCMH) to pair licensed social workers from H+H with EMTs from FDNY to de-escalate crises safely and support follow-up care.
- The audit found significant limitations in the current model. First, the pilot suffers from limited availability and insufficient coverage; B-HEARD responders only operate from 9am to 1am and cover just 31 of 78 total police precincts. This means that at the time of the audit, mental health calls received outside of this timeframe/geographic area are instead routed to a traditional police response.
- Additionally, the auditors found that 911 operators often failed to dispatch B-HEARD teams to eligible calls. Of 37,113 eligible calls during the audit scope, 13,042 (35%) did not receive a B-HEARD response for reasons unknown. Even in cases when B-HEARD is dispatched, the percentage of on-scene assessments has fallen since the pilot began in 2022. OCMH does not track why calls might go unserved or why on-scene assessments are not conducted.
- Without robust dispatch, triage, and follow-up tracking, B-HEARD cannot ensure that it is reducing police involvement, enhancing access to care, or improving outcomes—the core promises of the pilot initiative.

What changes did the agency commit to make following the audit?

- OCMH agreed to improve its tracking of B-HEARD, and work with FDNY to explore additional recruitment opportunities and identify cases when teams did not respond to eligible calls.

Audit Findings

- ⚠ B-HEARD's operating hours are limited, with 14,200 eligible overnight calls going unserved.
- ⚠ B-HEARD only covers 31 of 78 precincts, or 40% of the City.
- ⚠ 35% of eligible calls did not receive a response for reasons unknown.
- ⚠ B-HEARD does not adequately track calls, or whether individuals in crisis are assessed on-site or connected to follow-up care.
- ⚠ The percentage of on-site mental health assessments have steadily declined since 2022.

Audit Recommendations		Status
1	Formally assess the Citywide need for B-HEARD mental health response teams.	AGREED
2	Work with partner agencies to expand the reach of the program and the number of B-HEARD teams in line with established need, and to cover the overnight hours.	PARTIALLY AGREED ¹
3	Work with FDNY to explore additional methods (e.g., tuition assistance, livable wages or loan forgiveness) for recruiting additional qualified EMS responders needed to ensure that all eligible calls are triaged and responded to.	AGREED
4	Work with partner agencies to develop appropriate performance metrics and ensure data necessary to fully evaluate program performance against its goals is collected. This includes: <ul style="list-style-type: none">a. The number of ineligible calls received by reason of ineligibility;	PARTIALLY AGREED ²

¹ OCMH stated that “as part of our ongoing efforts to assess the need for citywide expansion, we will continue to prioritize resources based on the identified needs, and the potential for overnight coverage will be carefully evaluated as part of this assessment to ensure responsible and sustainable growth.”

² OCMH stated that “FDNY continues to provide data on the number of ineligible calls received for the B-HEARD program. In addition, OCMH will work with FDNY to identify instances where a traditional response (NYPD and EMS) is dispatched due to the unavailability of B-HEARD units. We also agree to work with FDNY and New York Health + Hospitals to track the number of instances and the reasons mental health assessments are not conducted during B-HEARD team responses.” However, OCMH does not agree with the recommendation to collaborate with partner agencies to develop performance metrics and collect data on the reasons for call ineligibility or untriaged 911 calls. These areas fall outside the scope of the B-HEARD program and are more appropriately addressed within the broader 911 operations framework by FDNY, not OCMH.”

	<ul style="list-style-type: none"> b. The reasons B-HEARD eligible calls do not receive a B-HEARD response or are not triaged; c. The number of times NYPD responds to a non-violent EDP call due to the unavailability of B-HEARD teams; and d. Quantifying the number of times and the specific reasons contact is not made and/or mental health assessments are not performed when a B-HEARD team responds. 	
5	Work with FDNY to establish the requirement that EMS responders consistently update the final call type on every call, to more accurately and reliably quantify the number of eligible calls received, irrespective of the methods of communication used to update the call types.	DISAGREED
6	Continue to develop and implement innovative ways to increase contact with and conduct assessments of patients when B-HEARD teams respond.	PARTIALLY AGREED³
7	Continue to work with the New York State Office of Mental Health and Health Department to expand the network of community-based care centers across all five boroughs. This would provide equitable access to post-crisis mental health services, regardless of geographic location.	AGREED

Implementation Status

At the time this report was prepared, B-HEARD did not provide follow-up information.

³ OCMH stated that, “We agree with the objective of increasing patient contact and mental health assessments during B-HEARD responses and have consistently worked with B-HEARD agency partners to address this objective. ... While we continue to explore and test innovative deployment strategies, it is important to acknowledge that improving patient contact during emergency responses remains a broader system-wide challenge. ... Despite these limitations, our focus remains on deploying teams to calls where there is the greatest likelihood of connecting with individuals in crisis and providing timely, on-site support.”

Audit Report on the New York City Department of Education/School Construction Authority's Asbestos Management Program (SE23-103A)

Audit at a Glance

What questions did the audit look at?

- Did the New York City Department of Education (DOE) and School Construction Authority (SCA) comply with the Asbestos Hazard Emergency Response Act (AHERA)?

Why does it matter for New Yorkers?

- Asbestos is known to be carcinogenic. Federal law under AHERA mandates periodic inspections of school buildings to protect students and staff where asbestos-containing materials (ACM) are present.
- As the City's designated local education agency, DOE is responsible for inspecting schools, documenting ACM, and developing management plans. DOE handles minor ACM abatement projects, but SCA is mainly responsible for removing or mitigating ACM.
- New York City has approximately 1,400 public school buildings with known asbestos risks. Under AHERA, these buildings are subject to regular inspection cycles to ensure that the ACM present in the buildings has not become friable (and thus more dangerous). However, during the audit's scope period, only 18% of all schools underwent triennial inspections and 22% underwent six-month inspections. Since AHERA was enacted almost 40 years ago, at current inspection levels, DOE has inspected just 11% of schools on average.
- Widespread noncompliance jeopardizes the health of students, teachers, and staff by increasing the risk of asbestos exposure. Unless inspection resources and processes are urgently improved, school occupants are at risk of exposure to ACM, an avoidable public health threat.

What changes did the agency commit to make following the audit?

- DOE and SCA agreed to enhance recordkeeping and training, improve awareness of AHERA compliance, develop comprehensive asbestos management policies, and develop a detailed plan to increase inspection staffing and scheduling in order to meet AHERA's inspection mandate.

Audit Findings

- ⚠ DOE/SCA have not complied with AHERA regulations for many years.
- ⚠ On average, only 11% of all schools containing asbestos completed required inspections.
- ⚠ Only 18% of schools underwent the recent triennial cycle of required inspections.
- ⚠ DOE conducted just 200–250 inspections per year, far less than necessary.

Audit Recommendations		Agency Response
1	Improve the awareness and understanding of AHERA compliance for school officials and the LEA-designated person.	AGREED
2	Develop and adopt comprehensive policies and procedures for asbestos management in schools, including internal reporting and review mechanisms to ensure full compliance with AHERA requirements.	AGREED
3	<p>Develop a plan with specific milestones to ensure that the triennial and periodic inspections are brought up to date, and maintain timely completion of the required inspections. Specifically, DOE should:</p> <ul style="list-style-type: none"> a. Conduct a historical review and reconciliation of Triennial and Periodic Inspections to ensure accurate data exists. b. Develop a phased inspection plan, prioritizing buildings with the longest gaps in triennial and periodic inspections and those at higher risk of ACM deterioration. c. Evaluate and allocate resources to meet inspection demands, including securing additional inspection consultants and expanding internal capacity. d. Develop a detailed inspection schedule to ensure that all 1,431 buildings receive the required triennial and periodic inspections moving forward. 	AGREED
4	Implement a recordkeeping system with reporting features to ensure accountability and compliance with AHERA regulations.	AGREED
5	Demonstrate compliance efforts by documenting ongoing efforts to conduct inspections, update management plans to minimize potential penalties, and demonstrate good-faith efforts to comply with AHERA requirements.	AGREED
6	Ensure that all custodians and asbestos handlers have adequate training to carry out their duties safely; maintain adequate evidence of this training.	AGREED
7	Ensure that all stakeholders are adequately notified of asbestos-related activities.	AGREED

8	Develop a standard procedure for timely determination of a school's asbestos status, and where applicable, timely receipts of Non-ACM Letters from SCA and close monitoring of the status of these letters.	AGREED
Audit Recommendations		SCA Response
1	Ensure that the ACM statuses of all new school buildings and additions are current. Also, investigate and address delays in promptly providing Non-ACM Letters to DOE.	AGREED

Implementation Status

DOE and SCA are both in the process of implementing the audit recommendations.

Audit Report on the Department of Housing Preservation and Development's Administration of the Affordable Neighborhood Co-operative Program (MG22-102A)

Audit at a Glance

What questions did the audit look at?

- Was the Affordable Neighborhood Co-operative Program (ANCP) effective in creating affordable co-ops for tenants?

Why does it matter for New Yorkers?

- The Department of Housing Preservation and Development (HPD) manages ANCP, which rehabilitates and converts City-owned residential buildings that were part of the Tenant Interim Lease (TIL) program into affordable, resident-owned co-operatives. The program's mission is to promote long-term housing stability and homeownership for low-to moderate-income tenants.
- The audit found that ANCP has struggled to meet its goals. Since 2012, only 13 of 126 TIL buildings have been successfully converted to co-ops under the program. Project timelines far exceeded HPD's own benchmarks, with delays ranging from 15 to 87 months. In total, conversion times ranged from six to 11 years. Of the 113 buildings still awaiting conversion, 45 (consisting of 802 units) have not yet been assigned developers and rehab work has not even started.
- The audit identified key causes of delays, including staffing shortages, outdated technology and data management systems, and inadequate interagency coordination. In surveys, tenants expressed frustration with aspects of the program, including post-conversion mortgage and maintenance costs. However, the auditors found that fees remain affordable under federal affordability guidelines.
- ANCP plays a vital role in preserving the City's affordable housing stock and offers tenants a viable path to home ownership. Program delays and inefficiencies stall these opportunities, and HPD should make every effort to mitigate them.

What changes did the agency commit to make following the audit?

- HPD agreed to develop a centralized mechanism to identify delays and regularly evaluate project progress against benchmarks.
- HPD agreed to improve communication with tenants about the ANCP conversion process and encourage collaboration between stakeholder agencies.

- HPD agreed to collect and review all building information after conversion to monitor maintenance fee.

Audit Findings

- ⚠ Conversion timelines far exceeded expectations, with some projects taking up to 11 years to complete.
- ⚠ Only 13 of 113 buildings have been successfully converted to co-ops.
- ⚠ 45 buildings (containing 802 units) do not have an assigned developer.
- ⚠ HPD lacks a centralized tracking system to monitor project progress.

Audit Recommendations		Agency Response
1	Develop a centralized mechanism to readily identify specific issues delaying the completion of projects.	AGREED
2	Analyze the most commonly recurring causes of delays and develop strategic approaches to addressing these, making programmatic and contractual changes to remove obstacles upfront.	PARTIALLY AGREED ⁴
3	Regularly evaluate project progress against time benchmarks and proactively and timely implement mitigation strategies to address individual project delays as they occur.	AGREED
4	Update the ANCP brochure listed on its website to include the most recent timeframes for benchmarks and targets for the different stages of conversion.	PARTIALLY AGREED ⁵
5	Develop and share with tenants new conversion completion targets for each pending conversion, based on new benchmarks HPD has indicated it is in the process of developing. HPD should also track and report progress against such benchmarks to tenants.	PARTIALLY AGREED ⁶

⁴ HPD stated that “deliberat[ive] processes misconstrued as ‘delays’ in the report are invaluable in bolstering resident autonomy and improving housing quality.” Additionally, HPD stated that it “has already developed various strategic approaches, including making programmatic and contractual changes to improve efficiency, expediency, and coordination with other City agencies.” As an additional note, HPD stated that, “The Comptroller claims that reasons for delay are ‘common, known, and otherwise established or routine parts of the process’ and criticizes HPD for not innovating solutions to such predictable challenges. If solutions to these delays are so within grasp, HPD would have appreciated A) recommendations that reference specific feedback on the evidence of changes that the Agency has made and shared with the Comptroller’s team, and/or B) novel recommendations, rather than a generic suggestion of ‘changes’.”

⁵ HPD stated that “project benchmarks are not uniform” and the agency already provides updated timeframes and targets to residents. However, HPD stated that it “agrees that also updating materials on ANCP’s webpage would help convey current information to the public.”

⁶ HPD stated that it already follows this recommendation. HPD stated that “if unforeseen challenges emerge that lengthen timelines, HPD and project sponsors communicate these changes to residents.”

6	Continue to explore methods that can be used to establish better communication and relationships with its tenants about the ANCP conversion process (including the possibility of surveys) and continue its ongoing efforts to solicit tenant feedback.	AGREED
7	Work with different City entities (City Council, OMB, DOB) to encourage interagency collaboration and cooperation towards a more streamlined approval process.	AGREED
8	Collect and review all information required after conversion to facilitate financial solvency of each building and to help ensure that maintenance fees are increased based on the needs of the buildings.	AGREED

Implementation Status

HPD reported that seven recommendations have been implemented and one recommendation is pending. HPD stated that it is in the process of implementing a large-scale integrated project management system. The funding has been secured and the contract has been registered. HPD anticipates that the system release will occur by the end of 2026.

Audit Report on the New York City Board of Elections' Oversight of the Distribution and Processing of Absentee Ballots (MG22-106A)

Audit at a Glance

What questions did the audit look at?

- Does the New York City Board of Elections (BOE) adequately oversee the distribution of absentee ballots to voters?
- Does BOE process absentee ballots equitably across the five boroughs?

Why does it matter for New Yorkers?

- BOE is responsible for enfranchising voters and overseeing elections in New York City. As part of this mission, the agency is charged with delivering, processing, and tracking absentee ballots.
- The audit examined BOE's oversight of absentee voting during the 2022 General Election and found that the agency generally fulfilled its obligations. However, the audit found several areas that need improvement.
- The audit identified numerous instances in which absentee ballots were issued to voters without proper authorization, potentially leading to fraudulent voting and disenfranchisement.
- Additionally, the audit found several statistically small (but nonetheless important) recordkeeping errors, including 484 voters with duplicate records and 29 voters who requested but did not receive absentee ballots.
- Finally, the audit found problems within the absentee voting system that BOE should make efforts to remedy in the future, including the low usage rate of absentee ballots among voters living in residential care facilities and disparities in rejection rates by borough.

What changes did the agency commit to make following the audit?

- The Queens Borough President's Office agreed to implement the best practices detailed in the report, improve reporting and recordkeeping, and map applicants and appointees' addressees prior to appointment.
- BOE agreed to look at ways to modify the NYS Election Law to address weaknesses in the balloting system.
- BOE agreed to ensure that agency staff visit residential care facilities to collect absentee ballots and analyze ballot rejection rates by borough.

Audit Findings

- ✓ BOE generally fulfills its obligations when issuing absentee ballots.
- ⚠ Weaknesses in the absentee voting process have led to ballots being issued improperly.
- ⚠ Some duplicate voter records were found and some requested ballots were never delivered.
- ⚠ There are disparities in rejection rates by borough.
- ⚠ Absentee ballots distributed to residential care facilities are underused.

Audit Recommendations		Agency Response
1	Track public access to registered voter information needed to obtain absentee ballots by requiring individuals seeking access to public portals to first create accounts.	AGREED
2	Conduct integrity reviews when individuals request multiple absentee ballots be mailed to a single address, and/or are arranged to be picked up in person, particularly in high volume.	AGREED
3	Conduct reviews of affidavit ballots and rejected attempts to vote in person based on submission of an absentee ballot to identify potential unauthorized ballot requests, prior to certifying the vote.	AGREED
4	Continue to work with NYS BOE on modifications to the NYS Election Law to tighten identified weaknesses in the balloting system.	AGREED
5	Examine the current process for identifying duplicates and ensure that the process leads to a timelier and more accurate identification and correction of duplicate voter records.	AGREED
6	Ensure that staff visit residential facilities to collect absentee ballots as required by the NYS Election Law or make alternative arrangements to facilitate the collection of completed ballots. BOE should document when visits, failures to visit, and alternate efforts to pick up ballots are made.	AGREED
7	Analyze the ballot rejection rates on a borough-by-borough basis to identify the underlying reasons for disparities (e.g., voters' knowledge about the process, level of training and scrutiny of BOE staff at borough offices) and take corrective measures, when warranted.	AGREED

Implementation Status

BOE reported that recommendation #1 was not implemented, but the remaining six recommendations have been implemented.

Audit Report on Estate Asset Identification and Management Practices of the Bronx County Public Administrator's Office (FP23-099A)

Audit at a Glance

What questions did the audit look at?

- Did the Bronx County Public Administrator's Office (BCPA) adequately research, identify, and secure decedents' assets?

Why does it matter for New Yorkers?

- Every borough has a Public Administrator who is responsible for administering the estates of people who intestate. When a person without a will dies, or if no heir is willing or able to administer the estate, the Public Administrator steps in. These officials have a fiduciary responsibility to estates that require them to conduct thorough investigations of all assets, pay outstanding debts and taxes, maintain documentation, and distribute estate proceeds to heirs. BCPA serves this role in Bronx County.
- The audit found that BCPA generally conducted adequate research to identify assets. However, the auditors found multiple instances where BCPA did not properly administer estates or safeguard the personal property of decedents. These included not properly maintaining inventory records, not following New York State procedures when searching decedents' homes, and not properly segregating duties when collecting and storing assets.
- These deficiencies put decedents' assets at risk. In one extreme case widely reported in the press, a BCPA investigator was found to have illegally entered a decedent's apartment and allegedly stole numerous items, including cash and jewelry. The auditors found that this same investigator performed another improper search of a residence without a second witness present and without documenting the contents of the residence.

What changes did the agency commit to make following the audit?

- BCPA agreed to strengthen its internal policies, including those guiding inventory records, segregation of duties, and searches of residences.
- BCPA agreed to promptly cash check and credit estate accounts.
- BCPA agreed to fill all agency vacancies, hire an in-house accountant, and provide employees with enhanced training.

Audit Findings

- ✓ BCPA generally identified decedents' assets.
- ⚠ BCPA failed to safeguard decedents' personal property.
- ⚠ BCPA did not follow existing policies and procedures when searching decedents' homes.

Audit Recommendations		Agency Response
1	Periodically update the inventory record to maintain a comprehensive and accurate inventory list reflecting the entire population of personal property being held in its possession.	AGREED
2	Designate employees who are independent of the inventory process to conduct periodic physical inventory counts of the personal property maintained in the safe.	AGREED
3	Segregate duties so that staff involved in the search and collection of personal property are not involved in maintaining the inventory list of such items.	AGREED
4	Always document searches through photographs and video footage taken during inspections at decedents' residences, to ensure that conditions and contents and all personal property are clearly identified with physical evidence.	AGREED
5	Ensure compliance with NYS PA Guidelines and BCPA Procedures when administering the estate cases by: a. Searching a decedent's residence as soon as possible after notice of the decedent's death is received. b. Ensuring that at least two persons (preferably employed by BCPA) are present with an authorization letter during the initial search. If only one BCPA employee is available, an independent witness should also be present. c. Voucher the items collected immediately.	AGREED
6	Promptly and properly cash checks and credit estate accounts.	AGREED
7	Fill all vacancies, including hiring an in-house accountant, and properly train the employee who currently prepares the bank reconciliation to ensure that appropriate adjustments to estates' accounts are completed if checks bounce.	AGREED

Implementation Status

BCPA reported that all of the audit recommendations have been implemented

Audit Report on Estate Asset Identification and Management Practices of the Kings County Public Administrator's Office (MJ23-102A)

Audit at a Glance

What questions did the audit look at?

- Did the Kings County Public Administrator's Office (KCPA) adequately research, identify, and secure decedents' assets?

Why does it matter for New Yorkers?

- Every borough has a Public Administrator who is responsible for administering the estates of people who die intestate. In certain cases, when a person without a will dies, or if no heir is willing or able to administer the estate, the Public Administrator steps in. These officials have a fiduciary responsibility to estates that require them to conduct thorough investigations to identify, account for, and safeguard all assets (real and personal property), pay outstanding debts and taxes, maintain documentation, and distribute estate proceeds to heirs. KCPA serves this role in Kings County (Brooklyn).
- The audit found that KCPA did not adequately identify, collect, or safeguard decedents' assets on a consistent basis, which put them at risk. Additionally, KCPA's management practices were inadequate, with more than 70% of active estates remaining open for more than five years. In fact, KCPA has an active backlog of over 14,000 cases. This is due in part to the fact that KCPA does not maintain all necessary case-related information in its electronic case management system, which makes monitoring and tracking estates challenging. Finally, KCPA failed to adequately comply with State and City reporting requirements.
- These deficiencies put the assets of decedents at risk of loss, depreciation, and theft. As of June 2023, these gross assets totaled over \$94 million. This is a sizable sum, and KCPA has a fiduciary duty to carefully manage the estates of decedents with care and attention. A key factor contributing to the identified deficiencies was KCPA's lack of sufficient policies and procedures to govern its estate administration processes.

What changes did the agency commit to make following the audit?

- KCPA agreed to work to clear its backlog of 14,000 cases.
- KCPA agreed to improve its oversight of the search, collection, and safeguarding of decedents' personal property and financial assets.
- KCPA agreed to improve its recordkeeping and inventory practices, as well as its controls over the accounting, closing, and reporting of estates.

Audit Findings

- ⚠ KCPA did not adequately document searches of decedents' residences.
- ⚠ KCPA failed to identify and claim estate assets as required.
- ⚠ More than 70% of estates active during the audit scope period have been open for more than five years.
- ⚠ KCPA does not maintain all necessary case information in its electronic case management system.
- ⚠ KCPA's backlog totals over 14,000 cases.
- ⚠ KCPA does not adequately comply with reporting requirements.

Audit Recommendations		Agency Response
1	Develop a systematic process for clearing the backlog of pending cases.	AGREED
2	If feasible, consider hiring vendors to facilitate the clearing of the backlog of cases.	AGREED
3	Consider requesting OMB to increase the KCPA budget to support the hiring of additional needed staff.	AGREED
4	Maintain an accurate and detailed master inventory listing of all decedents' personal property (historical and present information) and record all personal property in the decedents' accounts in CompuTrust.	AGREED
5	Ensure that all personal property is inventoried and tagged with the PA number or decedents' names when placed into the vault and warehouse, stored in an organized manner, and safeguarded against damage.	AGREED
6	Ensure KCPA staff adhere to policies and procedures over its estate administration.	AGREED
7	Employ a locksmith to open the safe with the unknown combination to ensure that the inventoried coins are accounted for and to identify other stored decedent personal property (if any).	AGREED
8	As funding levels allow, consider obtaining appraisals for decedents' personal property and record the appraised value in the inventory records and in CompuTrust.	AGREED
9	Ensure that it routinely checks the New York State Comptroller's Office of Unclaimed Funds.	AGREED
10	Collect and record all personal and real properties known to the decedents in CompuTrust.	AGREED
11	Obtain appraisal for properties prior to selling to determine the fair market values and record and maintain documentation in CompuTrust.	AGREED

12	Maintain all relevant documentation pertaining to funds and other assets in CompuTrust.	AGREED
13	Maintain an accurate and running master property list of all decedents' real estate properties and record all real estate properties in the appropriate estate case files in CompuTrust.	AGREED
14	Ensure that all legal documents are correctly completed during real property sales and that the sales are accurately recorded in the appropriate real property database.	AGREED
15	Maintain all case-related documents and information in the estate case files and in CompuTrust.	AGREED
16	Establish written policies and procedures that include detailed guidance to staff.	AGREED
17	Ensure that it collects the necessary information and utilize its electronic case management system to track cases to better monitor lengthy delays.	AGREED
18	Ensure that it accurately reports the requisite estate information to the Surrogate's Court, NYS Comptroller's Office, and the NYC Comptroller's Office.	AGREED

Implementation Status

KCPA reported that 12 recommendations have been implemented, five recommendations are pending, and the remaining recommendation to conduct unclaimed fund searches has been partially implemented. KCPA stated that it is not feasible to conduct unclaimed fund searches every six months.

Audit Report on Estate Asset Identification and Management Practices of the New York County Public Administrator's Office (ME23-100A)

Audit at a Glance

What questions did the audit look at?

- Did the New York County Public Administrator's Office (NYCPA) adequately identify, account for, and safeguard decedents' assets?

Why does it matter for New Yorkers?

- Every borough has a Public Administrator who is responsible for administering the estates of people who die intestate. In certain cases, when a person without a will dies, or if no heir is willing or able to administer the estate, the Public Administrator steps in. These officials have a fiduciary responsibility to estates that require them to conduct thorough investigations to identify, account for, and safeguard all assets (real and personal property), pay outstanding debts and taxes, maintain documentation to support estate activities, and distribute estate proceeds to heirs. NYCPA serves this role in New York County (Manhattan).
- The audit found several deficiencies in NYCPA's processes. Namely, NYCPA did not: (1) identify and claim assets for several sampled estates; (2) consistently maintain adequate records regarding the disposal and liquidation of assets; and (3) ensure that transactions were consistently documented. NYCPA also did not comply with both State and City Comptrollers' reporting requirements.
- The audit found that many estates remained open for more than two years. Out of 4,702 active estates, 2,005 (43%) were identified as "unassigned," meaning that NYCPA allowed these estates to remain in bureaucratic limbo for years after receiving notification of decedents' death. The auditors also found that NYCPA's poor recordkeeping practices meant that the agency was often unable to fulfill the auditors' requests for records in a prompt manner, with documents arriving months after the initial requests.
- These deficiencies put the assets of decedents at risk of loss, depreciation, and theft. As of June 2023, these gross assets totaled approximately \$119 million. This is a sizable sum, and NYCPA has a fiduciary duty to carefully manage the estates of decedents with care and attention.

What changes did the agency commit to make following the audit?

- NYCPA chose not to directly address any of the audit's recommendations.

- Based on its comments regarding the audit's findings, it appears that NYCPA agreed to: (1) continue to follow the newly implemented practice of securing personal property in tamper-proof clear plastic bags; and (2) investigate three unclaimed accounts identified by the auditors and pursue collections where possible.

Audit Findings

- ⚠ NYCPA did not identify and claim assets for several estates.
- ⚠ NYCPA did not maintain adequate records regarding the disposal of property and liquidation of assets.
- ⚠ NYCPA did not ensure that transactions were consistently documented.
- ⚠ NYCPA did not comply with State and City Comptrollers' reporting requirements.
- ⚠ NYCPA allowed estates to remain open for more than two years.
- ⚠ 43% of active estates remained unassigned.

Audit Recommendations		Agency Response
1	Strengthen its oversight over investigators' searches of decedents' premises to ensure that investigators consistently document their searches on the Investigator's Reports and Decedent's Inventory Records.	DID NOT DIRECTLY ADDRESS
2	Establish target timeframes for (1) conducting initial searches of decedents' premises and (2) appraising personal property that is collected and not on hold.	DID NOT DIRECTLY ADDRESS BUT ARGUMENT SUGGESTS DISAGREEMENT
3	Ensure that it continues to follow the newly implemented practice of securing personal property in tamper-proof clear plastic bags with evident seals.	DID NOT DIRECTLY ADDRESS BUT ARGUMENT SUGGESTS AGREEMENT
4	Ensure that it uses CompuTrust to timely record inventory transactions for each estate pertaining to real estate and personal property as required by the Public Administrator Guidelines and that it adequately itemizes decedents' personal property.	DID NOT DIRECTLY ADDRESS
5	Establish controls to ensure that when assets at a financial institution are identified the agency promptly: (1) contacts the financial institution to obtain the account balance; (2) collects any account funds from the financial institution; and (3) persists in these efforts until all identified amounts have been collected and credited to estate accounts.	DID NOT DIRECTLY ADDRESS

6	Ensure that it routinely checks the Office of the State Comptroller (OSC) website for open cases to identify potential estate assets and pursue collection where possible.	DID NOT DIRECTLY ADDRESS
7	Investigate three unclaimed accounts identified by the auditors and pursue collections where possible and ensure that appropriate documentation of unclaimed funds appears in estate files.	DID NOT DIRECTLY ADDRESS BUT ARGUMENT SUGGESTS AGREEMENT
8	Maintain up-to-date inventory lists of stocks and bonds collected from decedents' estates, liquidate them and deposit the funds in the decedents' estate accounts in a timely manner. Inventory lists should be updated to reflect the current status of stocks and bonds that are inactive or for which there are living beneficiaries.	DID NOT DIRECTLY ADDRESS BUT ARGUMENT SUGGESTS DISAGREEMENT
9	Ensure that all documents are maintained within the estate file to support various stages of its estate administration process, including the initial search and subsequent visit to a decedent's premise, collection of a decedent's assets, sale of real estate property and co-ops, disbursements to pay decedent's creditors, and any issues or delays impacting the timely resolution of estates. For real properties and co-ops not sold for an extended period, there should be documentation in the file explaining sale delays.	DID NOT DIRECTLY ADDRESS BUT ARGUMENT SUGGESTS PARTIAL AGREEMENT
10	Ensure that estate cases are closed in a timely manner with reasons for delays clearly documented in the estate files.	DID NOT DIRECTLY ADDRESS BUT ARGUMENT SUGGESTS DISAGREEMENT
11	Investigate the unassigned cases identified by the auditors to determine whether they should be administered by NYCPA or closed, and their statuses updated accordingly.	DID NOT RESPOND
12	Ensure that payments are adequately supported and that accountings and close-out memos (where applicable) are prepared and maintained in the decedents' estate files.	DID NOT RESPOND
13	Report information concerning its open and closed cases to applicable oversight authorities as required.	DID NOT RESPOND

Implementation Status

NYCPA reported that seven recommendations have been implemented, and six recommendations are partially implemented.

Audit Report on Estate Asset Identification and Management Practices of the Queens County Public Administrator's Office (ME23-101A)

Audit at a Glance

What questions did the audit look at?

- Did the Queens County Public Administrator's Office (QCPA) adequately identify, account for, and safeguard decedents' assets?

Why does it matter for New Yorkers?

- Every borough has a Public Administrator who is responsible for administering the estates of people who die intestate. In certain cases, when a person without a will dies, or if no heir is willing or able to administer the estate, the Public Administrator steps in. These officials have a fiduciary responsibility to estates that require them to conduct thorough investigations to identify, account for, and safeguard all assets (real and personal property), pay outstanding debts and taxes, maintain documentation to support estate activities, and distribute estate proceeds to heirs. QCPA serves this role in Queens.
- The audit found that QCPA generally followed New York State regulations as well as its own internal procedures. However, QCPA did not consistently identify and collect all estate assets, securely store or appraise decedents' property, or maintain adequate records or reports. The audit also identified cases that remained open and unresolved for years, long after notifications were received.
- These deficiencies put the assets of decedents at risk of loss, depreciation, and theft. As of June 2023, these gross assets totaled over \$165 million. This is a sizable sum, and QCPA has a fiduciary duty to carefully manage the estates of decedents with care and attention.

What changes did the agency commit to make following the audit?

- QCPA agreed to improve elements of its internal procedures regarding searches for assets by requiring investigators to take additional photographs and carefully document decedents' residences.
- QCPA agreed to ensure that searches for assets at financial institutions were completed in a timely manner.
- QCPA agreed to review decedents' bank statements to ensure there are no "recurring card purchases" (i.e., subscription withdrawals) after dates of death.

- QCPA agreed to liquidate a stock valued at \$72,584 and credit the decedent's estate account. In addition, QCPA agreed to update inventory lists in a timely manner to reflect the current status of stocks and bonds for which there are living beneficiaries.

Audit Findings

- ✓ QCPA generally followed NYS law and its own internal policies.
- ⚠ QCPA did not always identify or collect estate assets as required.
- ⚠ QCPA did not always store assets securely.
- ⚠ QCPA did not always maintain adequate records of estate assets.
- ⚠ Some QCPA cases remained unresolved years after they were opened.

Audit Recommendations		Agency Response
1	Ensure that investigators consistently document their searches on the Residence Investigation Reports; take photographs of all personal property items inventoried on the reports; bring all electronic devices discovered during searches to the office for safeguarding potential confidential information; and consider reinstating a prior inventory checklist to aid the investigators during residence searches.	PARTIALLY AGREED⁷
2	Establish target timeframes for required initial searches of decedents' premises after notification of their deaths and the appraisal of personal property to ensure that estates are closed in a timely manner.	DISAGREED
3	Adequately secure personal property stored in the office and consider other options for safeguarding.	DISAGREED
4	Ensure complete and accurate inventory records by periodically comparing inventory information contained on the personal property security bags, inventory lists, and appraisal records.	DISAGREED
5	Consider appraising coins that seem unique and valuable.	DISAGREED
6	Ensure it contacts financial institutions to obtain account balances of identified assets and collect account funds in a timely manner.	AGREED
7	Require staff to use the Office of the State Comptroller (OSC) website to search for unclaimed funds as an added measure of identifying possible assets for decedents;	PARTIALLY AGREED⁸

⁷ QCPA partially agreed with this recommendation, stating that the investigators will be instructed to take additional photographs and carefully document the information in the Residence Investigation Reports.

⁸ QCPA partially agreed with this recommendation, stating that they have adopted the recommendation to check unclaimed funds using both the OSC public website as well as the OSC online claiming account.

	maintain search documentation in the estate files that shows the names of decedents searched for; and pursue collection of all claims in a timely manner.	
8	Investigate nine unclaimed accounts identified by the auditors and pursue collections where possible. For the estate identified as lacking the proof required by the OSC, consider using the notarized Report of Death found in the estate file.	PARTIALLY AGREED⁹
9	Thoroughly review decedents' bank statements to ensure there are no "recurring card purchases" (i.e., subscription withdrawals) after dates of death.	AGREED
10	Ensure that the stock with the estimated value of \$72,584 is liquidated so that the estate account can be credited. Inventory lists should be updated in a timely manner to reflect the current status of stocks and bonds for which there are living beneficiaries.	AGREED
11	Ensure that all documents are maintained within the estate file to support various stages of its estate administration process. For properties not sold for an extended period, there should be documentation in the files explaining sale delays.	DISAGREED
12	Work to minimize delays in determining whether estates should be administered by QCPA or closed and update their statuses accordingly with reasons for delays clearly documented in the estate files; and more accurately report information concerning its closed estates to the City Comptroller's Office.	DISAGREED

Implementation Status

QCPA reported that four recommendations have been implemented, one recommendation was not implemented, one recommendation was pending, and the remaining six recommendations were not addressed.

⁹ QCPA partially agreed with this recommendation, stating that they have investigated the nine accounts associated with four estates and determined that: (1) for two estates (associated with three accounts), the QCPA was not responsible for administering the estates because someone else received "Letters from the Court;" (2) for one estate (associated with two accounts), QCPA agreed to pursue collection for those accounts that the auditors found by using the OSC public website; and (3) for one estate (associated with four accounts), the deposits were made after the case was closed.

Audit Report on Estate Asset Identification and Management Practices of the Richmond County Public Administrator's Office (FN23-098A)

Audit at a Glance

What questions did the audit look at?

- Did the Richmond County Public Administrator's Office (RCPA) adequately research, identify, and secure decedents' assets?

Why does it matter for New Yorkers?

- Every borough has a Public Administrator who is responsible for administering the estates of people who die intestate. In certain cases, when a person without a will dies, or if no heir is willing or able to administer the estate, the Public Administrator steps in. These officials have a fiduciary responsibility to estates that require them to conduct thorough investigations to identify, account for, and safeguard all assets (real and personal property), pay outstanding debts and taxes, maintain documentation, and distribute estate proceeds to heirs. RCPA serves this role in Richmond County (Staten Island).
- The audit found multiple instances where RCPA may have put assets at risk by not properly administering estates or acting in decedents' best interests. For example, the audit found that RCPA did not thoroughly document searches of residences by photo or video, nor did it document efforts to identify additional assets and property. Regarding asset sales, RCPA did not adequately oversee its third-party vendor who managed these sales, with many contract elements not documented in writing. Finally, RCPA did not establish its own internal written procedures.
- These deficiencies put the assets of decedents at risk of loss and theft. As of August 2023, these gross assets totaled approximately \$41 million. This is a sizable sum, and RCPA has a fiduciary duty to carefully manage the estates of decedents with care and attention.

What changes did the agency commit to make following the audit?

- RCPA agreed to improve its documentation of estate searches and its research of decedents' finances.
- RCPA agreed to collateralize funds that exceed the FDIC limit.
- RCPA agreed to formalize its contract with its outside vendor.

- RCPA agreed to improve its accounting and administration of estates by updating estate records, checking that all assets are included in estate accounts, ensuring segregation of duties, and introducing a quality assurance process.

Audit Findings

- ✓ RCPA generally conducted research to identify decedents' assets.
- ⚠ RCPA did not thoroughly document searches of residences or its efforts to research decedents' finances.
- ⚠ RCPA has not developed internal procedures as required by state law.
- ⚠ RCPA did not adequately protect bank accounts that exceeded the FDIC-insured limit.
- ⚠ RCPA did not properly oversee its third-party vendor.

Audit Recommendations		Agency Response
1	Maintain sufficient and complete records documenting each residence search to accurately identify decedents' assets.	PARTIALLY AGREED¹⁰
2	Ensure letters are sent to local financial institutions to identify decedents' bank and investment accounts and that correspondence is maintained in case folders.	PARTIALLY AGREED¹¹
3	Ensure that estate funds held in FDIC-insured accounts do not exceed the FDIC limit or ensure that the accounts are properly collateralized with approved government securities.	AGREED
4	Select estate assets to be sold at estate sales and auctions rather than delegating to third-party vendors (in this case, Victorian Brothers).	DISAGREED
5	Require Victorian Brothers to improve its accountability of estate sales and auctioned items.	DISAGREED
6	Implement a solicitation process for selecting estate sales and auction vendor(s) to ensure vendor selection is	PARTIALLY AGREED¹²

¹⁰ RCPA stated that "the office is now equipped with a camera tripod to capture uninterrupted video of the entire search and that photographs will be detailed enough to meet inventory requirements going forward. RCPA has also implemented a log to document subsequent visits of a decedent's residences." However, the agency said that "it is not feasible to handwrite every item found in the residence on the Initial Entry Report due to its staffing limitations. RCPA also contends that Victorian Brothers takes photographs of the items procured and sold."

¹¹ RCPA stated that "many of the estates involved limited administration appointments, citations, foreclosures, or situations where the family took over, making additional asset searches unnecessary. RCPA committed to including a standard memo in such estate files moving forward, explaining why further research is not required."

¹² RCPA stated that "NYS PA Guidelines allows payment to outside vendors based on invoices. RCPA notes past difficulties in finding qualified local auction vendors and emphasizes Victorian Brothers' expertise. To comply with the recommendation, RCPA is negotiating a contract with Victorian Brothers, which will serve as a template for future vendor agreements."

	transparent and enter into a formal written agreement with selected vendor(s) to clearly establish terms and conditions underpinning the scope of work.	
7	Update the estate records in QuickBooks promptly.	AGREED
8	Ensure that all estate assets (including bank accounts and investment accounts) are included in the estate accounts.	AGREED
9	Develop a written plan to ensure segregation of duties.	AGREED
10	Introduce a quality assurance process to conduct sample-based reviews to ensure internal compliance with NYS PA Guidelines, internal written procedures, and internal controls.	AGREED

Implementation Status

RCPA reported that seven recommendations have been implemented, and three recommendations were partially implemented.

Final Audit Letter Report on the New York City Fire Pension Fund's Other Than Personal Services Expenditures (FM24-086A)

Audit at a Glance

What questions did the audit look at?

- Were the New York City Fire Pension Fund's (FPF) other than personal services (OTPS) expenditures necessary, reasonable, properly documented, and in compliance with laws and regulations that govern them?

Why does it matter for New Yorkers?

- The Fire Pension Fund administers benefits to over 28,000 uniformed FDNY employees, retirees, and beneficiaries. In Fiscal Year 2024, the fund's administrative expenses totaled \$11 million, which included \$4.4 million in OTPS expenditures. These costs are not related to employee salaries, wages, or fringe benefits and cover everything from office supplies to consulting services.
- Although the audit found that most OTPS expenditures aligned with FPF's mission and adhered to applicable rules, it found several weaknesses. FPF did not consistently comply with Comptroller's Directive #6, which governs employee travel expenses, among other things. In FY2024, five FPF employees attended two out-of-town conferences, with costs totaling \$11,195. However, FPF did not provide justification for these trips.
- The audit also found that FPF did not accurately report certain expenses because they were either misclassified or not reported in the year they were incurred. In FYs 2023 and 2024, FPF misclassified \$2.4 million of investment-related costs as OTPS expenditures, and in FY2023, misreported \$56,991 of member-related payments as OTPS expenditures. These misallocations overstated OTPS expenditures and gains of its investment portfolio.
- Regarding FPF's internal controls, the audit found that FPF did not always record transactions in the general ledger in a timely manner and did not segregate duties for its OTPS expenditures. Other issues included payment delays to vendors and the absence of formal written procedures related to travel and procurement.

What changes did the agency commit to make following the audit?

- FPF agreed to report OTPS expenditures in the period they are incurred.
- FPF agreed to segregate employee duties for OTPS expenditures or establish mitigating controls, including requiring management review and dual authorization.
- FPF stated that it is testing draft travel policies and procedures.

Audit Findings

- ✓ The Fire Pension Fund's other than personal services expenses were generally necessary and reasonable.
- ⚠ FPF did not provide justification for out-of-town travel costs totaling \$11,195.
- ⚠ FPF misclassified certain expenses, including \$2.4 million of investment-related costs and \$57,000 in member-related payments.
- ⚠ FPF did not segregate employee duties related to OTPS expenditures.
- ⚠ FPF's internal controls could be improved.

Audit Recommendations		Agency Response
1	Obtain post-travel attendance reports from each person who attended out-of-town conferences, to demonstrate how the information learned can be implemented to benefit FPF.	DID NOT ADDRESS¹³
2	Discontinue reporting investment and member-related payments as OTPS expenditures	DID NOT ADDRESS¹⁴
3	Accurately report OTPS expenditures in the period the expenses are incurred.	AGREED
4	Segregate duties for its OTPS expenditures process or implement compensating controls which include requiring management review and dual authorization or establishing other mitigating controls.	AGREED
5	Promptly record payment transactions in the general ledger	DID NOT ADDRESS¹⁵
6	Process payments to vendors within 30 days of receiving the invoices.	DID NOT ADDRESS¹⁶
7	Establish and implement internal procurement and travel policies and procedures.	PARTIALLY AGREED¹⁷

¹³ FPF did not agree or disagree with this recommendation. FPF stated that it will continue to use Comptroller's Directives as a framework in developing its policies and procedures and consider their available resources.

¹⁴ FPF did not agree or disagree with this recommendation, stating that the payments in question were correctly recorded as reimbursements and not misclassified. Specifically referencing that transfer contributions are non-periodic payroll (OTPS) expenses. Additionally, FPF stated that it will separate those payments in future financial statements.

¹⁵ FPF did not agree or disagree with this recommendation, stating that staffing limitations led to delays in posting payments and the Fund is in the process of obtaining a new accounting system that will enhance timely financial reporting.

¹⁶ FPF did not agree and disagree with this recommendation, stating that the Fund makes every effort to process payments within 30 days of receiving invoices.

¹⁷ FPF partially agreed with this recommendation, stating that the Fund follows the PPB rules for procurement to the best extent. With regard to travel, FPF stated that it is testing draft policies and procedures to determine whether there is any room for improvement.

Implementation Status

FPF reported that the recommendation to segregate duties has been implemented and the remaining recommendations are pending.

Final Audit Letter Report on the New York City Police Pension Fund's Other Than Personal Services Expenditures (FM24-087A)

Audit at a Glance

What questions did the audit look at?

- Were the New York City Police Pension Fund's (PPF) other than personal services (OTPS) expenditures necessary, reasonable, properly documented, and in compliance with laws and regulations that govern them?

Why does it matter for New Yorkers?

- The Police Pension Fund administers benefits to over 90,000 uniformed NYPD employees, retirees, and beneficiaries. In Fiscal Year 2024, the fund's administrative expenses totaled \$34 million, which included \$15.7 million in OTPS expenditures. These costs are not related to employee salaries, wages, or fringe benefits and cover everything from office supplies to consulting services.
- Although the audit found that most OTPS expenditures aligned with PPF's mission and adhered to applicable rules, it revealed weaknesses in internal controls. During FYs 2023 and 2024, PPF paid \$69,814 for three leased vehicles and related expenses. PPF stated that these vehicles were used by the fund's executives to attend meetings and transport items. However, PPF did not maintain the required documentation showing that these vehicles were used for official business. This arrangement is unusual, as none of the City's other four pension funds lease vehicles for their executives. Based on a review of sampled transactions, PPF also paid sales tax on certain transactions, did not always process payments to vendors in a timely manner, and properly report expenditures.
- Additionally, PPF did not maintain the required documentation for out-of-town travel expenses totaling \$31,710. When documentation falls short, there is a heightened risk that funds may be misused. PPF has a fiduciary responsibility to its members and the people of New York City to ensure that funds are spent responsibly.

What changes did the agency commit to make following the audit?

- PPF agreed to re-evaluate its vehicle policies and ensure that the uses of vehicles are properly documented.
- PPF agreed to improve recoup prior payments that included sales tax and ensure that future payments exclude sales tax, and process payments to vendors within 30 days of receiving invoices.
- PPF agreed to create an internal policy governing travel expenses.

Audit Findings

✓ The Police Pension Fund's other than personal services expenses were generally necessary and reasonable.

⚠ PPF did not maintain required documentation for leased vehicles totaling \$69,814.

⚠ PPF did not maintain required documentation for out-of-town travel totaling \$31,710.

Audit Recommendations		Agency Response
1	Ensure its OTPS expenditures are economical and necessary to its mission.	DID NOT ADDRESS ¹⁸
2	Reevaluate PPF's vehicle use policies in light of general City requirements and ensure each business use of leased vehicles is documented, noting the time, place, and business purpose of the	AGREED
3	Ensure it is informing vendors of its Sales Tax exemption status and exclude Sales Tax from any payments.	AGREED
4	Review and recoup all prior payments that included Sales Tax.	AGREED
5	Process payments to vendors within 30 days of receiving the invoices.	DID NOT ADDRESS ¹⁹
6	Accurately report OTPS expenditures in the period the expenses are incurred.	DID NOT ADDRESS ²⁰
7	Create an internal travel policy that outlines the process for requesting, approving, funding, and reimbursing travel expenses in compliance with Comptroller's Directive #6.	AGREED
8	Ensure all out-of-town travel expenses are economical, necessary, and in accordance with Comptroller's Directive #6.	DID NOT ADDRESS ²¹

¹⁸ PPF did not explicitly agree or disagree with this recommendation. PPF stated that "the operational need for leased vehicles remains valid and integral to our mission." Further, PPF stated that since the "board of trustees approves our budget we feel that our expenditures are economical and necessary to our mission, but we will review our OTPS expenditures and make changes if we deem it to be necessary."

¹⁹ PPF did not agree or disagree with this recommendation, stating that it will review its current accounts payable processes and see if they can make any improvements

²⁰ PPF did not agree or disagree with this recommendation, stating that it will review its current financial reporting processes and make any necessary changes that they deem material and may impact its stakeholders.

²¹ PPF did not agree or disagree with this recommendation, stating that it will review its current out-of-town travel processes and see if they can make any improvements.

Implementation Status

PPF reported that four recommendations have been implemented and the remaining four recommendations are pending and should be implemented during fiscal year 2028 or 2027.

Audit Report on Controls over Payroll, Personnel, and Purchasing at the 14 Queens Community Boards (FL23-087A)

Audit at a Glance

What questions did the audit look at?

- Did the 14 Queens Community Boards have adequate internal controls over payroll, personnel, and purchasing operations?

Why does it matter for New Yorkers?

- Community Boards are the grassroots of New York City's local government. They shape neighborhood development, influence land use decisions, and address community concerns. Ensuring these boards operate with integrity and efficiency is crucial for maintaining public trust and effective governance.
- The audit found that several Community Boards in Queens did not exercise sufficient control over their payroll, personnel, and/or purchasing operations. Several boards allowed their District Managers and staff to accumulate excessive annual leave, stretching well beyond the thresholds outlined in City policies. These unchecked accruals pose a serious financial risk to the City, as large balances must eventually be paid out, sometimes at higher future salaries. This could lead to significant fiscal liabilities at the expense of taxpayers.
- Additionally, delays in approving employee timesheets (especially those of District Managers) and missing invoices at some boards raised concerns about oversight and control over public funds. Without regular supervisory review, there exists an increased risk of errors, unauthorized payments, or misuse of time reporting.
- Lapses in administrative control may compromise the integrity of the Community Boards. When City funds are disbursed without full documentation, public confidence may weaken, and the risk of duplicate payments, mismanagement, or fraud is heightened.

What changes did the agency commit to make following the audit?

- Most Community Boards agreed to improve oversight of staff leave accruals, timekeeping, and vendor invoicing.
- Community Board 12 agreed to recoup a vendor payment totaling \$827.
- Community Boards 12 and 14 agreed to properly record vendor invoice numbers.

Audit Findings

⚠ 11 of 14 Queens Community Boards had at least one problem with their controls over payroll, personnel, and purchasing operations.

⚠ Seven District Managers had annual leave balances exceeding the maximum allowance, with one accumulating over 1,600 hours of excess leave.

⚠ Half of the Community Board Chairs did not consistently approve District Managers' timesheets in a timely manner, if at all.

⚠ Community Boards 12, 13, and 14 had issues maintaining or recording vendor invoices.

Audit Recommendations		Community Board Response	
1	All Queens Community Board Chairpersons should: <ul style="list-style-type: none"> encourage DMs and non-managerial staff to use their annual leave and reduce the amount of annual leave accruals to help reduce the potential impact on lump sum payments to staff when they separate from service; where practicable, limit the authorizations for employees to carry over excess annual leave balances; and ensure that DMs' timesheets are reviewed and approved in a timely manner and promptly sent to the QBPO in accordance with the established procedure. 	6, 7, 8, 10	AGREED
		1, 3, 5, 9, 11	PARTIALLY AGREED
		2, 12, 14	DID NOT ADDRESS
		4, 13	DID NOT RESPOND
2	All Queens Community Boards should: <ul style="list-style-type: none"> actively monitor annual leave accruals and require employees with annual leave balances exceeding two-year maximums to obtain written authorization or convert excess annual leave to sick leave in accordance with City regulations; ensure that vendor invoices are obtained for all purchases and that each invoice is reviewed and verified by the approver prior to payment; and develop policies and procedures for monitoring and managing employee leave time and the procurement process in alignment with City rules and regulations. 	6, 7, 8, 10	AGREED
		1, 5, 11	PARTIALLY AGREED
		2, 3, 9, 12, 14	DID NOT ADDRESS
		4, 13	DID NOT RESPOND

3	Queens Community Board 12 should ensure that the \$826.82 overpayment is fully recouped.	AGREED	
4	Queens Community Boards 12, 13, and 14 should ensure that each paid invoice number is recorded in FMS.	12, 14	AGREED
		13	DID NOT RESPOND
5	Queens Community Board 13 should consider hiring support staff as needed to support the District Office's operations.	DID NOT RESPOND	

Implementation Status

Queens CBs 1, 2, 7, 8, 10, 11, 13, and 14 report that the audit recommendations have either been implemented or are pending. Letters were also sent to Community Boards in [Brooklyn](#), [Bronx](#), [Manhattan](#), and [Staten Island](#) bringing to their attention District Managers with excess annual leave liability.

Final Audit Letter Report of the Civil Service Practices by the Civil Service Commission (MG25-091A)

Audit at a Glance

What questions did the audit look at?

- Did the New York City Civil Service Commission (CSC) effectively adjudicate civil service appeals?

Why does it matter for New Yorkers?

- The Civil Service Commission plays a critical oversight role in ensuring that City agencies maintain fair and lawful hiring and disciplinary practices. It reviews appeals from applicants disqualified from exams or removed from positions, as well as disciplinary cases, thereby contributing to both workforce stability and procedural justice. CSC's mission is to uphold integrity and trust in the City's employment systems.
- When appeals are handled promptly and correctly: qualified applicants have a path to challenge improper disqualification; public employees are afforded due process in disciplinary matters; and agencies can rely on transparent procedures to fill vacancies and manage their workforce effectively.
- The audit concluded that CSC is meeting its statutory obligations, reviewing and deciding appeals promptly and in accordance with the New York City Charter and applicable Civil Service Law provisions. Although CSC did not establish timeframes for reviewing and processing cases, the audit found that most cases were closed in under three months, and 93% of cases received acknowledgement letters in a week or less.

What changes did the agency commit to make following the audit?

- CSC agreed to establish timeframes for reviewing cases to ensure that cases are processed in a timely manner.

Audit Findings

- ✓ The Civil Service Commission is effectively fulfilling its statutory mandate.
- ✓ The Civil Service Commission reviews appeals in a timely manner.

Audit Recommendations		Agency Response
1	Continue to audit all open cases in Law Manager on a monthly basis to ensure that all cases are processed in a timely and appropriate manner.	AGREED
2	Establish timeframes for reviewing cases to ensure that cases are processed in a timely manner.	AGREED

Implementation Status

CSC reported that both audit recommendations have been implemented.

Audit Report on the New York City Law Department's Timeliness in Reviewing Agency Contracts (SR24-072A)

Audit at a Glance

What questions did the audit look at?

- Did the New York City Law Department review procurement contracts in a timely manner?

Why does it matter for New Yorkers?

- The Law Department plays a critical role in New York City's contracting process, reviewing billions of dollars in agreements each year. Prompt contract review is necessary to prevent disruption of city operations and services, ensure that vendors are paid on time, and the City's compliance with legal mandates.
- The audit found that the Law Department's contract reviews often exceeded the expected four-week timeframe, which caused or contributed to delays in executing contracts. During the audit scope period, the Law Department took more than four weeks to review approximately 38% of non-Mayoral and Mayoral contracts processed outside of PASSPort.
- In one glaring example, the Queens County District Attorney's Office experienced delays in renewing a secure file-sharing software contract essential for compliance with New York State Discovery Law. Despite repeated urgent requests, the Law Department did not approve the renewal until nearly two months after the contract expired, putting agency operations at risk.
- By not consistently monitoring requests and tracking review milestones, the Law Department has allowed delays to persist. Without stronger oversight, New Yorkers face potential service disruptions and reduced efficiency in how government functions, and vendors may wait longer to be paid.

What changes did the agency commit to make following the audit?

- The Law Department agreed to improve contract reviews by adding some additional milestone data in its new tracking system, LegalStratus.
- The Law Department agreed to work with the Mayor's Office of Contract Services (MOCS) to enhance database functionality and address known glitches and reporting capabilities.
- The Law Department agreed to assess its staffing resources to improve the timeliness of contract reviews.

Audit Findings

⚠ It took the Law Department more than four weeks to review approximately 38% of non-Mayoral and certain Mayoral contracts.

⚠ The Law Department did not adequately oversee the contract review process.

⚠ A lack of reporting and a glitch in the City's contract system hindered the Law Department's ability to track contract processing.

Audit Recommendations		Agency Response
1	Record key milestones in Law Manager or LegalStratus or otherwise track them. Milestones should include, but not be limited to, the dates that: agencies submit contracts for review; Law Department attorneys are assigned to review contracts; attorneys return contracts to requesting agencies for revision, provide feedback, or make inquiries; agencies respond to the Law Department; attorneys initially approve contracts and submit for secondary review; senior attorneys are assigned to review contracts; and senior attorneys approve contracts.	PARTIALLY AGREED²²
2	Request that MOCS create canned aging reports and reports of closed contracts detailing key milestone dates.	AGREED
3	Use Law Manager, LegalStratus, and PASSPort to: <ul style="list-style-type: none"> a) generate bi-weekly aging reports, monitor pending requests, and flag requests approaching or past expected timeframe for review; and b) generate historical reports of closed requests to analyze and determine whether and to what extent contracts were not reviewed in a timely manner, identify the causes of the delays, and take appropriate corrective action, as necessary. 	PARTIALLY AGREED²³
4	Assess the adequacy of staffing levels.	AGREED
5	Continue to address issues with MOCS including, but not limited to, the PASSPort glitch related to the Law Department returning contracts and agencies resubmitting them, and reporting capabilities.	AGREED

²² The Law Department stated, "Some key milestones are already recorded in Passport and Law Manager. In fact, we have begun to record Passport contracts within the division so that we can produce our reports. And we agree that we should include some additional milestones. However, recording every single interaction would become unduly burdensome and would likely delay review, rather than improve review times."

²³ The Law Department stated, "While we agree that some additional reports would be useful, as cited above, excessive recording of activities would become very time consuming and defeat the purpose of reducing review times."

Implementation Status

At the time this report was prepared, the Law Department did not provide information.

Equity and Inclusion

Audit Report on the New York City Department of Health and Mental Hygiene's Oversight of Doula Programs in Underserved Neighborhoods (SZ24-063A)

Audit at a Glance

What questions did the audit look at?

- Does the New York City Department of Health and Mental Hygiene (DOHMH) effectively oversee and manage doula programs in underserved neighborhoods?
- Are doula services accessible to residents in these areas?

Why does it matter for New Yorkers?

- Maternal health inequities are a longstanding and urgent issue in New York City. Black and Hispanic birth givers are significantly more likely to die from pregnancy-related causes than white women, and underserved communities often lack access to supportive services that can lead to better outcomes. The City launched the Citywide Doula Initiative (CDI) in targeted neighborhoods to reduce these disparities and improve maternal and infant health.
- The audit found that CDI is largely working. Black and Hispanic participants in the program saw significantly lower rates of C-sections, pre-term births, and low birth weights, compared to Citywide rates. No pregnancy-associated deaths were reported for CDI clients, indicating that doula support may help reduce maternal mortality. Moreover, a survey of CDI clients found overwhelming satisfaction with the program, with 77% rating their pregnancy/birthing experience with a doula as good or excellent.
- However, the audit found some areas that could be improved, including expanding access in shelters, advancing doula-friendly hospital policies, and increasing non-English-speaking doula provider capacity. Although participation rates were low, and available data was limited, Asian American/Pacific Islander (AAPI) and White participants did not see as much improvement.
- The audit underscores that doula services, long championed by reproductive justice advocates, can narrow racial disparities. We urge DOHMH to continue supporting this crucial program and make improvements where necessary.

What changes did the agency commit to make following the audit?

- DOHMH agreed to improve its data collection, increase non-English-speaking capacity, improve shelter access, and promote doula-friendly policies in hospitals.

Audit Findings

✓ The Citywide Doula Initiative (CDI) effectively increases doula access and support in underserved neighborhoods.

✓ Black and Hispanic CDI clients saw significantly better maternal health outcomes.

✓ CDI participants expressed overwhelming satisfaction with the program.

⚠ Some doulas in the program face barriers providing services in City hospitals and shelters.

⚠ Access to CDI for Non-English speakers is limited.

Audit Recommendations		Agency Response
1	Make all reasonable efforts to collect or use available provisional citywide birth outcome-related data, to facilitate a timelier comparison between the rates for CDI clients and the rates for other target populations in the City.	AGREED
2	Consolidate data collection to ensure more efficient data reporting to determine the effectiveness of doula services on the reduction of negative birth outcomes and maternal mortality.	AGREED
3	Increase non-English-speaking doula capacity.	AGREED
4	Continue to work with DHS to increase doula access to clients in shelters.	AGREED
5	Continue to promote doula-friendly policies in NYC maternity hospitals and expand doula incorporation into hospital birthing teams.	AGREED
6	Incorporate client satisfaction surveys into their data collection procedures and evaluate satisfaction by vendor, analyzing differences in practice that may affect satisfaction.	AGREED
7	Conduct additional studies focused on outcomes for Asian (AAPI) and White women to gain an understanding of the apparently lower impact of CDI on birth outcomes.	DISAGREED

Implementation Status

DOHMH reported that it has implemented one recommendation (1), five recommendations are pending, and continues to disagree with the remaining recommendation.

Metropolitan Transportation Authority's Express Bus Accessibility and User Satisfaction (FM25-060S)

Report at a Glance

What questions did the report look at?

- Did the Metropolitan Transportation Authority (MTA) provide accessible express bus service to people with disabilities?
- Are riders satisfied with express bus accessibility, performance, and communication?

What does it matter for New Yorkers?

- The MTA's bus network includes express buses, which travel between Manhattan and parts of the outer boroughs. The report was initiated following a series of Disability Justice roundtables in which advocates expressed frustration with being unable to regularly board express buses. In addition, disability and express bus rider advocacy groups complained about inadequate service.
- During field observations, auditors found that nearly 25% of sampled express buses were inaccessible for a variety of reasons, including malfunctioning wheelchair lifts and drivers' inability to operate lifts. In some cases, drivers simply failed to stop or pick up passengers. Additionally, when wheelchair users were able to board buses, they were often delayed and not properly secured.
- The auditors also found that since 2018, the MTA piloted only one viable alternative bus design and did not adequately engage the accessibility community in decision making. Further, the MTA chose not to move forward with the pilot despite positive feedback from riders—including wheelchair users. The auditors also administered surveys to express bus riders measuring overall satisfaction. These surveys highlighted broader service issues affecting all riders, including buses not adhering to schedules and service cancelations, leading to extended wait times exceeding an hour.
- These findings underscore critical gaps in the City's public transportation system—particularly for individuals with disabilities who rely heavily on accessible services. Many express buses serve transit deserts—neighborhoods that lack rail service—and are the only direct access between the outer boroughs and Manhattan. For many residents, reliable and timely bus service is essential for daily activities, such as commuting to work, attending medical appointments, and participating in community life. The identified deficiencies not only hinder mobility but also impact the quality of life for many people with disabilities. It is vital that the MTA address these issues to ensure equitable access to transportation for all New Yorkers.

Report Findings

⚠ 25% of express buses were inaccessible to wheelchair users.

⚠ Drivers lacked experience and training on wheelchair lifts, leading to delays and safety risks.

⚠ Many express buses were canceled or failed to adhere to experiencing hourlong waits. schedules, with some riders.

⚠ Rider satisfaction was low overall, with complaints about reliability and poor communication.

⚠ Insufficient efforts were made to pilot alternative bus designs and engage the accessibility community.

Report Recommendations	
1	Immediately conduct refresher trainings on wheelchair lift operation, as well as American Disability Act (ADA) and MTA requirements for providing service to people with disabilities. This includes immediately informing Bus Command Center (BCC) of lift issues, safely boarding customers, securing wheelchairs, making bus stop announcements as required, and appropriate etiquette.
2	Ensure that all express bus drivers receive annual hands-on training in operating wheelchair lifts and provide express bus drivers with field instructions for operating wheelchair lifts.
3	Separately report express bus wheelchair lift deployments, including the number of failed deployments and successful deployments.
4	Pilot additional low-floor entry buses or other accessible bus designs and consider implementing those buses as vehicles are retired.
5	Make meaningful efforts to engage the accessibility community on new bus designs, including designs that provide ramp entry. Those efforts should include, but not be limited to, selecting buses to pilot, accessibility features and bus design, and revenue service pilots. When piloting new bus designs, ensure that demonstration buses are equipped with accessibility features that the MTA proposes to implement and that a sufficient number of people with disabilities are engaged so that their feedback is projectable to the population.
6	Compare express bus scheduled pick up and drop off times to actual times and revise bus schedules as necessary to ensure they are realistic and as accurate as possible.
7	Address bus driver shortages and mechanical failures to minimize the impact of service cancellations. If shortages cannot be addressed, revise service schedules to minimize service cancellations.
8	Improve MTA communication applications to ensure that they provide customers with accurate and timely information on service alerts, bus locations, and estimated bus arrival times.

Implementation Status

The MTA reported that it is “working on a range of measures to further enhance service for express bus riders with disabilities, including updates to ongoing training for staff, operational evaluations to ensure compliance, continued exploration of vehicle and service improvements, and upgrades to customer information and communication tools.”

Audit Report on the Five Borough Presidents' Offices' Compliance with the New York City Charter Requirements for Community Board Member Appointments (FK23-067A, FM24-055A, SR23-060A, SR23-061A, and SR23-083A)

Audit at a Glance

What questions did the audit look at?

- Did the five Borough Presidents' Offices comply with City Charter requirements for Community Board member appointments?
- Do Community Boards adequately represent the geographic and demographic makeup of their communities?

Why does it matter for New Yorkers?

- Community Boards are the grassroots of New York City's local government. They serve an advisory role by reporting on neighborhood needs, submitting budget priorities, participating in the land use review process, and advocating for residents. The five Borough Presidents are required to seek out people of diverse backgrounds to apply for membership and consider whether the boards reflect the communities they serve.
- The audit found that all five Borough Presidents' Offices made efforts to seek out people of diverse backgrounds, as required by the City Charter. However, the audit also found that, across each of the five boroughs, certain groups were underrepresented in the aggregate and/or on certain Community Boards, particularly Hispanic/Latino residents, Asian residents, younger residents, residents with less formal education, LGBTQIA residents, and people with disabilities.
- Borough Presidents did not consistently ensure adequate geographic representation within districts, meaning some neighborhoods' voices were underrepresented. In some cases, ineligible candidates were appointed and candidates with poor attendance records were reappointed.
- The strength of New York City's Community Boards is built on diversity. When CBs do not reflect the communities they serve, New Yorkers—particularly those belonging to historically marginalized groups—may lose a crucial avenue to influence decision-making and amplify their voices. It is essential that the Borough Presidents' Offices fulfill their commitments to ensuring that Community Boards reflect the diversity of the communities that they serve.

What changes did the agency commit to make following the audit?

- The Queens Borough President's Office agreed to implement the best practices detailed in the report, improve reporting and recordkeeping, and map applicants and appointees' addressees prior to appointment.

Audit Findings

✓ The Borough Presidents' Offices made efforts to seek out people of diverse backgrounds to apply to Community Boards.

⚠ Certain demographic groups were underrepresented on Community Boards.

⚠ Some neighborhoods were overrepresented on certain Community Boards.

⚠ Some ineligible candidates were appointed to Community Boards.

Audit Recommendations	Queens BP Response	Manhattan BP Response	Brooklyn BP Response	Bronx BP Response	Staten Island BP Response
1 Coordinate, pool resources, and seek assistance from other agencies to raise awareness and develop Citywide outreach strategies for such groups, including for LGBTQIA individuals.	AGREED	DID NOT RESPOND	DID NOT RESPOND	DID NOT RESPOND	DID NOT RESPOND
2 Implement the best practices detailed throughout the report aimed at ensuring that Community Boards reflect the diversity of the communities that they serve.	AGREED	DID NOT RESPOND	DID NOT RESPOND	DID NOT RESPOND	DID NOT RESPOND
3 Fill Community Board vacancies.	AGREED	DID NOT RESPOND	DID NOT RESPOND	DID NOT RESPOND	DID NOT RESPOND
4 Publicly report a comparison of Community Board member composition to community district composition.	AGREED	DISAGREED	DID NOT RESPOND	DID NOT RESPOND	DID NOT RESPOND

5	Ensure that the Demographic Report is issued by July 1 each year, and contains all information required by the City Charter.	AGREED	DID NOT RESPOND	DID NOT RESPOND	DID NOT RESPOND	DID NOT RESPOND
6	Map applicants' and appointees' addresses prior to appointment or reappointment.	AGREED	DISAGREED	DID NOT RESPOND	DID NOT RESPOND	DID NOT RESPOND
7	Require existing Community Board members who are seeking reappointment to complete membership applications.	AGREED	DID NOT RESPOND	DID NOT RESPOND	DID NOT RESPOND	DID NOT RESPOND
8	Develop a policy for Community Boards to consistently record attendance for general board meetings, collect and review attendance records to identify members who do not attend more than half of the meetings in the preceding year, and interview them to obtain a reasonable justification of absenteeism and to assess their interest in continued membership.	AGREED	DISAGREED	DID NOT RESPOND	DID NOT RESPOND	DID NOT RESPOND
9	Monitor attendance for those Community Board members who did not attend more than half of the general board meetings in the preceding calendar year and were subsequently reappointed and consider removing members if their attendance does not improve.	AGREED	DISAGREED	DID NOT RESPOND	DID NOT RESPOND	DID NOT RESPOND

Implementation Status

The Bronx Borough President's Office reported that it is implementing the audit recommendations.

The Queens Borough President's Office reported that six recommendations have been implemented and the remaining three recommendations are in process.

The Manhattan Borough President's Office reported that six recommendations are being implemented and the remaining three recommendations (4, 8, and 9) are not legally permissible.

The Brooklyn Borough President's Office and the Staten Island Borough President's Office did not provide follow-up information.

Audit of the New York City Department of Buildings' Enforcement of Building Codes (ME24-059A)

Audit at a Glance

What questions did the audit look at?

- Does the New York City Department of Buildings (DOB) enforce building codes for one- and two-family houses in an equitable manner?

Why does it matter for New Yorkers?

- DOB regulates the safe and lawful use of more than a million buildings and over 40,000 active construction sites under its jurisdiction by reviewing and approving plans, issuing permits and licenses, conducting inspections, and enforcing relevant laws and codes.
- The audit found that most of DOB's enforcement actions stem from anonymous 311 complaints. As a result of this approach, lower income communities were disproportionately impacted by DOB's code enforcement; seven of the 10 districts with the highest dollar amount of assessed penalties had median household incomes below the Citywide median. Areas with the highest fines (accumulated penalties of \$20,000 or more) were concentrated in low-income and predominantly Black and Hispanic community districts, raising concerns of unequal impact. Penalties for illegal conversions and default ("no show") judgments accounted for a significant portion of these violations. Although DOB has several initiatives intended to provide support to burdened homeowners (such as the Homeowner Relief Program), the efficacy of these programs is unclear.

The audit also found that the average number of days that DOB took to review plan documents greatly increased from 2022 to 2024. This is significant because penalties continued to accrue in that time.

What changes did the agency commit to make following the audit?

- DOB partially agreed to improve its education and engagement in impacted communities, establish performance metrics for the Homeowner Relief Program (HRP), and conduct surveys of property owners who participate in DOB programs.

Audit Findings

- ⚠ DOB's enforcement actions are almost entirely driven by anonymous 311 complaints.
- ⚠ Seven of the 10 districts with the highest total fines were located in low-income communities.

⚠ Plan review times rose by 80% Citywide from 2022 to 2024, as the number of applications.

⚠ DOB's Homeowner Relief Program lacks comprehensive performance assessment.

Audit Recommendations		Agency Response
1	Re-evaluate the 100% reliance on complaints as the driver of code enforcement and consider other additional approaches.	DISAGREED
2	Consider options to track the source of complaints and other remedies that could be taken to ensure the 311-complaint system is not abused to target certain communities.	DISAGREED
3	Implement process changes to ensure that “Failure to Comply” summonses are not issued while plans to correct the underlying violation(s) are still pending review by DOB, and not within 60 days of DOB approving a plan needed to correct the underlying violation(s).	DISAGREED
4	Establish education and engagement strategies in the communities most affected by illegal conversions to emphasize the financial impact of code violations, fines, and penalties.	PARTIALLY AGREED²⁴
5	Work with OATH to educate the public concerning the financial consequences of defaulting on summonses issued to address DOB violations.	AGREED
6	For transparency, restore the practice of reporting and updating the service levels including plan approval times to the tracker on the agency’s website.	PARTIALLY AGREED²⁵
7	Identify the reasons for the variances in review time among the boroughs and make reasonable efforts to reduce those variances, minimize plan review times, and establish time targets for the agency’s review of plan submissions.	DISAGREED
8	Set Key Performance Indicators for the HRP initiative to assess the effectiveness of the program.	AGREED
9	Formally survey persons who participate in initiatives designed to assist property owners to identify their satisfaction with the initiatives and potentially identify areas for improvement.	AGREED

²⁴ DOB did not identify the portion of the recommendation that it did not agree with.

²⁵ DOB did not identify the portion of the recommendation that it did not agree with.

Implementation Status

DOB reported that it is committed to addressing the audit recommendations.

Final Audit Letter Report on the New York City Independent Budget Office's Provision of Language Access Services (MH25-057AL)

Audit at a Glance

What questions did the audit look at?

- Is the New York City Independent Budget Office (IBO) providing adequate language access services to the Non-English Language Preference (NELP) population?
- Do those services meet the needs of the NELP population?

Why does it matter for New Yorkers?

- Nearly one-half of all New Yorkers speak a language other than English at home, and almost 25% of City residents over the age of five are not proficient in English. For these NELP residents, interacting with City government and gaining access to services can be a challenge.
- The City has enacted a series of laws intended to strengthen its language access, allowing agencies to reach a greater number of New Yorkers and opening doors that might have otherwise remained closed. This audit—which is focused on the IBO—is one of a series that our office initiated to assess the language access services provided by City agencies.
- IBO provides non-partisan information on the City budget and revenue. This can range from a review of a particular agency's spending to in-depth analysis of program costs, historical trends, debt, etc. IBO also produces various reports and materials for elected officials, community boards, civic groups, and other organizations. Further, it testifies at public hearings and City Council meetings.
- The audit found that IBO's website is compliant with Local Law 25 and allows NELP users to translate the text into languages other than English. The website is translatable into 249 languages, including English and the top 10 designated citywide languages. The website's main purpose is to provide the public with information about IBO's main functions and responsibilities and to publish the reports and studies it produces.
- Additionally, the audit team found that even though IBO's reports, studies, and testimonies are not required to be translated into languages other than English (because the agency does not provide direct or emergency services to the public), IBO is prepared to translate as needed.

Audit Findings

✓ IBO's website is compliant with Local Law 25, offering translation capability into 249 languages.

✓ IBO is able to provide translations of reports and testimonies in NELP languages when requested.

Audit Recommendations		Agency Response
1	Continue to ensure that IBO's website remains accessible to NELP populations by maintaining the translation feature that supports the top 10 designated citywide languages.	AGREED

Implementation Status

IBO reported that it continues to maintain an accessible website which provides access to over 200 languages.

Improve City's Financial Position

Audit of the Department of Housing Preservation and Development's Oversight of Its Contract with Rapid Reliable Testing NY LLC (aka DocGo) (MD24-062A)

Audit at a Glance

What questions did the audit look at?

- Did the New York City Department of Housing Preservation & Development (HPD) adequately monitor its contract with DocGo for asylum seeker services?

Why does it matter for New Yorkers?

- In 2022, New York City received a rapid increase of new arrivals. In response, HPD negotiated a one-year, no-bid emergency contract with the vendor DocGo in May 2023 to provide asylum seekers with temporary housing and services. The Comptroller rejected the \$432 million contract because DocGo lacked experience providing emergency housing and failed to offer clear insight into its nearly half-billion-dollar budget. City Hall moved forward with the contract despite our objections.
- The audit found that HPD did not properly manage the contract. A detailed review of two-months' worth of invoices found that nearly 80% of payments—\$11 million of \$13.8 million—were not adequately supported by documentation and should thus be recouped. The City paid almost \$1.7 million for vacant hotel rooms with no occupancy during this period. Additionally, 67% of the amount claimed for this period was used to pay unauthorized subcontractors who were not approved by HPD, as required.
- The auditors visited 189 hotel rooms and found that 80% had at least one deficiency. Some hotel rooms posed serious health and safety hazards, including mold, water damage, and peeling paint. The auditors also found that DocGo failed to staff hotels with the appropriate number of caseworkers and social workers.
- The DocGo contract was marred by fiscal mismanagement, the uneven provision of services, and, in some cases, unsafe conditions. The City should do everything in its power to recoup inappropriate payments, hold DocGo accountable, and ensure that similar emergency contracts are managed better in the future.

What changes did the agency commit to make following the audit?

- HPD agreed to review documentation and recoup some expenses; implement additional reviews of invoices; hold back at least 15% of invoices not yet paid; hold DocGo to the terms of the contract; and retroactively review all subcontractors used by DocGo.

Audit Findings

⚠ Nearly 80% of the \$13.8 million paid to DocGo in May and June 2023 were not allowed or adequately supported.

⚠ 67% of the amount claimed in May and June 2023 was paid to unauthorized subcontractors.

⚠ 80% of sampled hotel rooms had at least one deficiency.

⚠ DocGo failed to staff asylum seeker hotels with the appropriate number of caseworkers and social workers.

Audit Recommendations		Agency Response
1	Recoup \$4.7 million in unallowable expenses claimed by and paid to DocGo.	PARTIALLY AGREED²⁶
2	Obtain appropriate documentation to substantiate the over \$6.3 million in claimed costs that were not appropriately supported by documentation. Where not provided, recoup all unsupported payments to DocGo.	DISAGREED
3	Undertake second level reviews of all invoices paid to date (totaling \$168.1 million as of June 12, 2024) and hold DocGo to contract terms and conditions, agency, and City fiscal policy. HPD should recoup all unallowable and/or inadequately supported payments identified during this review.	PARTIALLY AGREED²⁷
4	Hold back a minimum of 15% of the total contract value from DocGo until all second level invoice reviews are completed,	PARTIALLY AGREED²⁸

²⁶ HPD partially agreed with this recommendation, stating that the agency will recoup as it considers appropriate. Notably, HPD disagreed with the audit's finding that certain expenses were unallowable.

²⁷ HPD partially agreed with this recommendation, stating, "While HPD already conducts multiple levels of invoice and payment review and has procedures to ensure that payments are made only for substantiated costs, the Agency will conduct another round of review of invoices paid as of June 12, 2024; note that it will do so not because it believes its existing procedures are unsound, but as an extra measure of due diligence. Based on the additional round of review, HPD will recoup if necessary."

²⁸ HPD partially agreed with this recommendation, stating that the agency "agrees with holding back a minimum of 15% of the invoiced amount approved for payment for invoices not yet paid as of July 2024 through the end of the contract term (not 15% of the total contract value) until additional reviews are completed and any overpayments are identified and recouped where appropriate (per Recommendation 3)."

	and the extent of total overpayments identified, to ensure the City's capacity to recoup.	
5	Hold DocGo to the terms of the contract and enforce agency and fiscal policy to ensure all invoices submitted for the remaining period of the contract are authorized, reasonable, and fully supported by appropriate documentation, before approving payment.	AGREED
6	Retroactively review all subcontractors in use by DocGo and conduct required vetting and approval.	AGREED
7	Ensure that vendors provide all activity and performance reports required under the contract and utilize them when reviewing invoices submitted by the contractor.	AGREED
8	Conduct unannounced inspections of accommodations (both within and outside of the City) used in connection with contracts of this nature.	AGREED

Implementation Status

HPD reported that four recommendations have been implemented, two recommendations are pending, continues to disagreed with and will not implement one recommendation, and has not yet started to recoup the \$4.7 million from DocGo.

Audit Report on the New York City Department of Finance's Administration of the Cooperative and Condominium Tax Abatement Program (FP24-056A)

Audit at a Glance

What questions did the audit look at?

- Did the New York City Department of Finance (DOF) effectively oversee the Cooperative/Condominium Tax Abatement program?
- Did DOF ensure that co-op and condo owners receiving the abatement met eligibility requirements?

Why does it matter for New Yorkers?

- DOF administers New York City's tax laws, including the Co-op/Condo Tax Abatement Program. Under this program, owners of eligible condos and co-ops receive tax abatements that reduce their annual property taxes. The audit set out to determine whether DOF ensures that residents who are receiving the abatement are meeting eligibility requirements. Though the vast majority of condo and co-op owners did comply with the law and were eligible to receive the abatement, the audit found serious problems with DOF's management of the program.
- The auditors reviewed abatements granted in Fiscal Year 2023 and found 720 units (678 condos and 42 co-ops) that should not have received the abatement. These ineligible apartments included almost 300 condos owned by businesses instead of families. The audit found that between 2019 and 2024, the City lost approximately \$6.5 million in tax revenue.
- The purpose of the Co-op/Condo Tax Abatement Program is to make the prospect of home ownership more feasible for regular New Yorkers, not to pad the profits of businesses. DOF should do everything in its power to make sure that this tax benefit does not go to actors who don't deserve it.

What changes did the agency commit to make following the audit?

- DOF agreed to remove the abatement from ineligible units, attempt to recoup lost tax revenue, and conduct testing to ensure that ineligible units do not receive the abatement.
- DOF agreed to ensure that submitted prevailing wage affidavits are accurate.
- DOF agreed to correct inaccurate tax eligibility codes in its database.

Audit Findings

✓ Most condo/co-op owners are eligible to receive the tax abatement.

⚠ In 2023, 720 ineligible units—678 condos and 42 co-ops—received the tax abatement.

⚠ Ineligible abatements cost New York City approximately \$6.5 million in tax revenue between 2019 and 2024.

Audit Recommendations		Agency Response
1	<p>Remove the Co-op/Condo Abatement from condo units that are:</p> <ul style="list-style-type: none">not classified as Tax Class 2 or do not have building classification code R1, R2, or R4.receiving the UDAAP exemption.owned by a business.receiving the clergy exemption.violating primary residency requirements.	AGREED
2	<p>Recover as much as is feasible of the approximately \$6.5 million in abatements that should not have been granted:</p> <ul style="list-style-type: none">\$989,793 granted to owners within developments that are not Tax Class 2, have an ineligible building classification code, or are receiving the UDAAP exemption from Fiscal Years 2019 to 2024.\$4,918,373 granted to condo units owned by businesses or receiving clergy exemptions from Fiscal Years 2019 to 2024.\$293,408 granted to condo units violating primary residency requirements from Fiscal Years 2019 to 2024.\$264,318 granted to condo and co-op developments that did not submit the correct prevailing wage affidavit in Fiscal Year 2023.	AGREED²⁹
3	<p>Ensure that submitted prevailing wage affidavits are saved, reviewed for correctness, and associated with the correct development.</p>	AGREED

²⁹ Though DOF agreed with the recommendation, the agency stated that it will only attempt to recover the value for abatements granted to condo units owned by businesses.

4	Ensure the error from the XY eligibility code has been corrected and is no longer in use to prevent Property Tax System eligibility checks from being bypassed and to ensure that ineligible developments and owners are not granted the Co-op/Condo Abatement. In addition, update the ineligibility coding in the Property Tax System to prevent developments receiving UDAAP from concurrently receiving the abatement.	AGREED ³⁰
5	Conduct periodic sample-based testing to check for ineligible units receiving the Co-op/Condo Abatement.	AGREED

Implementation Status

DOF reported that four recommendations have been implemented, and the remaining recommendation has been partially implemented. DOF stated that it has recouped \$5,683,516 of the \$6.5 million recommended by the audit and has opted not to pursue recouping the remaining \$816,484.

³⁰ Though DOF agreed with the recommendation, the agency did not specify in its response whether the system was or will be updated to prevent developments receiving the UDAAP exemption from also receiving the Co-op/Condo Abatement.

Risk Mitigation

Audit Report on the Administration for Children's Services' Monitoring of the Safety of Children in Foster Care (MJ22-064A)

Audit at a Glance

What questions did the audit look at?

- Did the New York City Administration for Children's Services (ACS) ensure the safety of children in foster care?

Why does it matter for New Yorkers?

- The mission of ACS is to protect and promote the safety and well-being of New York City's children and families. As part of this mission, ACS oversees the City's foster care efforts to provide safe and stable out-of-home care for children until they can be either safely returned home or placed in another permanent arrangement.
- The audit found that ACS' mechanisms for monitoring the safety of children in foster care were generally adequate, with the exception of its oversight of residential care facilities. ACS did not conduct site visits at the sampled residential care facilities in a timely manner, as called for in its own policies.
- Although incidents of neglect and abuse have trended downward in recent years, an unacceptable number of children in foster care still suffer neglect and/or abuse. Between 2020 and 2023, 2,154 incidents of neglect and/or abuse involving 1,641 children in foster care occurred.
- The audit found that over 76% of these incidents happened while children were visiting their birth families. In some cases, ACS or the foster care agencies with whom ACS contracts did not make the decisions concerning visitation and supervision. Instead, New York State Family Court did.
- The audit made several recommendations to ACS to better improve its monitoring of residential care facilities. Additionally, in a letter to the Chief Judge of the New York State Court of Appeals, Comptroller Lander urged the courts to review the report's recommendations and coordinate with ACS to prevent instances of neglect and abuse during familial visits.

What changes did the agency commit to make following the audit?

- ACS agreed to improve its data collection, aggregation, and analysis efforts to better track substantiated incidents that occur during familial visits.

- ACS agreed to analyze why substantiated incidents have decreased and take steps to continue that trend.
- ACS agreed to ensure that the required number of residential site visits are actually conducted and perform regular unannounced visits.

Audit Findings

- ✓ The number of substantiated incidents of neglect/abuse decreased between Fiscal Years 2020 and 2023...
- ⚠ ...however, there were still 2,154 incidents involving 1,641 children in foster care during that time period.
- ⚠ ACS did not conduct required site visits to sampled residential care facilities in a timely manner.

Audit Recommendations	Agency Response
<p>1 Make all reasonable efforts to collect, aggregate, and analyze data that would allow the agency to track substantiated incidents that occur during unsupervised visitations, court-ordered visitations, and trial discharges to better identify and track the occurrence of incidents over which ACS and foster care agencies have a greater degree of control and to evaluate outcomes from Family Court decisions. Use related data and analysis to identify risk factors to inform future decisions and recommendations.</p>	<p>AGREED</p>
<p>2 Require any parent found to engage in neglect or abuse during a visitation undergo mandatory counseling to address underlying factors (e.g., substance abuse, anger management) that are a contributing cause of the behavior leading to the maltreatment.</p>	<p>DISAGREED</p>
<p>3 Identify the factors contributing to the decrease in the rate of substantiated instances of neglect or abuse and, where feasible, take steps to continue that trend.</p>	<p>AGREED</p>
<p>4 Ensure that the required number of residential site visits are conducted at all residential care facilities, and that those visits are done in-person and at reasonable intervals.</p>	<p>AGREED</p>
<p>5 Perform unannounced visits to all foster care agency-run residential care facilities on a regular basis to ensure that the children at those facilities continue to receive appropriate care.</p>	<p>AGREED</p>

Implementation Status

ACS reported that four recommendations have been implemented and continues to disagree with the remaining audit recommendation. Of note, a letter was issued to the Chief Judge Wilson which is included below.



THE CITY OF NEW YORK
OFFICE OF THE COMPTROLLER
BRAD LANDER

December 2, 2024

Via electronic mail

The Honorable Rowan D. Wilson
Chief Judge of the Court of
Appeals New York State Court of
Appeals Albany, NY 12207

Re: Monitoring the Safety of Children in Foster Care

Dear Chief Judge Wilson:

As the Chief Accountability Officer of New York City, I want to share the results of an audit recently completed by my office concerning the Administration of Children's Services' (ACS) Monitoring of the Safety of Children in Foster Care. The report is attached for your consideration.

During the period of review, from FY2020 through FY2023, there were over 2,100 substantiated cases of neglect and/or abuse involving 1,641 children living in foster care. The audit found the overwhelming number of incidents occurred during familial visits — including supervised visits, unsupervised visits, and trial discharges with birth family or close family members.

ACS noted Family Court judges have authority to order a foster child to be temporarily returned to their birth family on a trial discharge at any stage of the child protective proceeding/court process, or to order a child to be released to their birth family with ACS supervision. It is for this reason I write to you today. My office has made several recommendations to ACS; ACS has agreed to implement 4 of the 5 recommendations contained in the audit report. However, ACS alone cannot reduce or prevent instances of neglect and abuse during familial visits.

With the utmost respect, I ask the Family Court to evaluate the impact of foster care visitation decisions, particularly in instances when ordered familial visits have resulted in substantiated cases of maltreatment. Collecting and analyzing the impact of past judicial decisions granting familial visits in foster care cases could assist the Family Court to identify additional key risk factors. This information could further inform a judge's assessment of the best interest of the child and improve outcomes for one of New York City's most vulnerable populations.

Thank you for your consideration of this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "B. Lander", written in a cursive style.

Brad Lander
NYC Comptroller

Report on the New York City Sheriff's Office Overtime (FK24-093S)

The following letter was issued to the Sheriff's Office regarding the overtime budget and spending.



THE CITY OF NEW YORK
OFFICE OF THE COMPTROLLER
BRAD LANDER

September 30, 2024

Preston Niblack Commissioner
New York City Department of Finance 1 Centre Street, 5th Floor
New York, NY 10007

Re: Report on the New York City Sheriff's Office Overtime (Report Number FK24-093S)

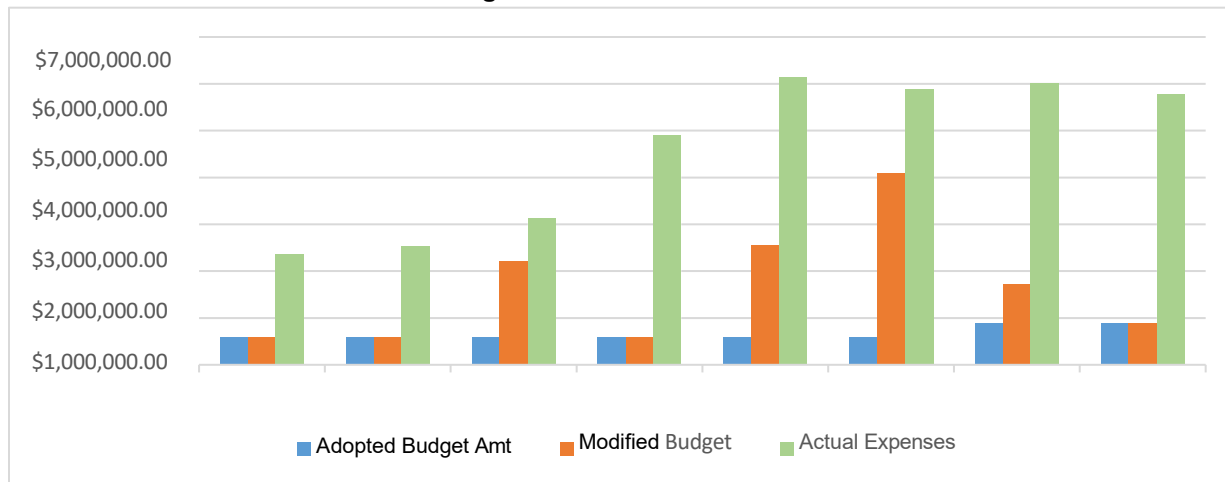
Dear Commissioner Niblack:

The Comptroller's Office has reviewed overtime budget and spending for the New York City Sheriff's Office.¹ Based on our review, the Sheriff's Office has exceeded its adopted and modified overtime budgets by significant and growing amounts in recent years. As detailed in the Table I and Chart I below, between Fiscal Year 2017 and 2023, the Sheriff's Office overtime spending increased by 156%.

Table I: Sheriff's Office Overtime Budgeted vs Actual Amounts

Fiscal Year	Adopted Budget	Modified Budget	Actual Expenses	% Increase over Adopted Budget	% Increase over Modified Budget
2017	\$589,280	\$589,280	\$2,348,562	298.5%	298.5%
2018	\$589,280	\$589,280	\$2,529,664	329.3%	329.3%
2019	\$589,280	\$2,200,000	\$3,122,434	429.9%	41.9%
2020	\$589,280	\$589,280	\$4,904,424	732.3%	732.3%
2021	\$589,280	\$2,554,783	\$6,140,271	942.0%	140.3%
2022	\$589,280	\$4,082,064	\$5,877,577	897.4%	44.0%
2023	\$897,064	\$1,732,064	\$6,013,359	570.3%	247.2%
2024 ²	\$897,064	\$897,064	\$5,767,166	542.9%	542.9%

Chart I: Sheriff's Office Overtime Budgeted vs Actual Amounts³



Based on historical overtime spending, it appears the Sheriff's Office's is not appropriately planning for or controlling overtime spending. The Sheriff's Office does not set realistic overtime budgets and does not limit overtime spending to adopted budget amounts. Further, the Sheriff's Office does not properly manage and modify the budget on an ongoing basis during the fiscal year.

For example, for Fiscal Year 2023, the Sheriff's Office's adopted budget for overtime was \$897,064. The Sheriff's Office overtime budget was modified and increased by \$835,000 to \$1,732,064 in November 2022. However, at that time, actual overtime spending already exceeded that amount and totaled \$2,188,829. Furthermore, although actual overtime spending continued to increase to \$6,013,359, the Sheriff's Office did not make any other budget modifications during the year.

These budget and spending issues continued in Fiscal Year 2024. As of July 3, 2024, actual overtime expenses recorded in the City's Financial Management System (FMS) totaled

\$5,767,166. These expenses included payments totaling \$63,091 made to 127 employees for 1,117 overtime hours worked on one day, Saturday, December 9, 2023, nearly nine hours per employee.

Nevertheless, the Adopted Budget for Fiscal Year 2025 overtime amount for the Sheriff's Office remains the same as last year's budget, at \$897,064, just 15% of the amount the office has spent in any of the last four years. Meanwhile, given the Sheriff's Office's increased work to address the proliferation of illegal cannabis stores, there is reason to anticipate that overtime could increase even further.

To comply with responsible budgeting practices, the Sheriff's Office should set realistic overtime budgets based on historical data and planned activities and only modify budgets as necessary in response to changing conditions. I urge you to address what appear to be systemic issues with overtime budgeting, spending and controls at the Sheriff's Office.

Thank you for your attention to this matter.

Sincerely,

Brad Lander
New York City Comptroller

Final Letter Report on the Review of City Agencies' Compliance with Terms and Conditions of M/WBE Contract Award Method 72 (FP24-078S)

Report at a Glance

What questions did the report look at?

- Did New York City agencies comply with the terms and conditions of Award Method 72 (AM 72) when awarding contracts to Minority- and Women-owned Business Enterprises (M/WBE)?

Why does it matter for New Yorkers?

- AM 72 allows agencies to award small purchase contracts (up to \$1.5 million) to certified M/WBE vendors without going through a competitive bidding process. To do this, agencies must follow strict terms: they must register contracts in the City's Financial Management System within 30 days and submit documentation proving that vendors are certified M/WBEs and in compliance with Procurement Policy Board Rules.
- The Mayor's Office of Contract Services (MOCS) is responsible for ensuring that City agencies comply with AM 72 provisions.
- The auditors sampled almost 200 AM 72 contracts self-registered by a wide variety of agencies during Calendar Year 2023. Although all contracts were found to be issued to certified vendors, agencies did not submit complete contract packages to the Comptroller's Office. Every sampled contract was missing at least one required document, and 16% of sampled parent contracts and 3% of modified contracts were submitted without *any* supporting documentation.
- AM 72 was created to level the playing field and expand economic opportunities for historically marginalized business owners. Noncompliance with the terms and conditions of the award method may threaten the fairness and effectiveness of the program.

What changes did the agency commit to make following the audit?

- MOCS agreed to remind City agencies of the AM 72 terms and conditions and provide refresher training sessions to agencies.
- MOCS agreed to remedy the issues identified in the review and check and verify future uses of AM 72 by the Board of Elections (BOE) and the Department of Small Business Services (SBS).

Report Findings

✓ All sampled contracts were awarded to certified M/WBEs

⚠ Every sampled contract was missing at least one required document.

⚠ 16% of sampled parent contracts and 3% of modified contracts were submitted without any supporting documentation.

Report Recommendations		Agency Response
1	Send reminders to all City agencies regarding the terms and conditions that must be met if using AM 72 award method to self-register all contracts and contract modifications.	AGREED
2	Provide refresher training sessions on AM 72 requirements to all agencies.	AGREED
3	Ensure the deficiencies identified in this review are cured by collecting and submitting all required documents and contract packages to OASIS as soon as possible. Please provide notice as these are entered to the Office of the Comptroller's Bureau of Contract Administration at email address ocamailbox@comptroller.nyc.gov .	AGREED
4	Communicate with BOE and SBS regarding their noncompliance with the requirements of the Conditional Delegation and ensure future uses of AM 72 by these agencies are checked and compliance verified.	AGREED

Implementation Status

MOCS reported that all of the audit recommendations have been implemented.

Turkish House (SR25-064S)

Report at a Glance

What questions did the report look at?

- Did the Turkevi Center (“Turkish House”) undergo all necessary safety inspections by the New York City Fire Department (FDNY) and Department of Buildings (DOB) before being approved for occupation?

Why does it matter for New Yorkers?

- The Federal indictment of Mayor Eric Adams in 2024 contained damning allegations that called into question the structural safety of Turkish House—a 36-story skyscraper located in Midtown Manhattan that serves as the Turkish consulate. In response to the unsealing of the indictment, the Comptroller’s Office launched an investigation of the City’s inspections and approval process of the building.
- The investigation found that the City bypassed safety standards and allowed Turkish House to open without an approved Fire Protection Plan (FPP), the only building of its size and category allowed to do so. This represented a glaring departure from routine processes. Despite rejecting a deficient FPP, FDNY allowed DOB to issue a Temporary Certificate of Occupancy (TCO) for the building on September 17, 2021, just in time for a diplomatic ribbon-cutting ceremony.
- The building was subsequently granted an additional 12 TCOs, with extensions approximately every ninety days, until September 26, 2024, when the last one expired. As of January 8, 2025, Turkish House was operating without a TCO or final Certificate of Occupancy (CO).
- Perhaps more alarmingly, a broader analysis found that 637 office buildings throughout New York City were operating without the necessary TCO or CO. Among these, 88 buildings had “immediately hazardous” violations that remain unresolved.
- This investigation highlights systemic failures in building oversight. When public safety protocols are circumvented (whether for political optics or bureaucratic delay) occupants, neighbors, and public trust are jeopardized. Exposing these gaps is a critical step toward keeping every New Yorker safe and preserving integrity in City governance.

Report Findings

- ⚠ The City granted certificates of occupancy to Turkish House despite rejecting a deficient Fire Protection Plan.
- ⚠ Over 600 buildings are operating without valid certificates of occupancy.
- ⚠ 88 buildings have violations categorized as “immediately hazardous.”

Report Recommendation

1

DOB should immediately review the buildings identified in this investigation as lacking a valid TCO or CO and establish a process for identifying and clearing major code violations and bringing such buildings into compliance.

Implementation Status

DOB did not provide follow-up information.

Audit Report on the Development and Implementation of the New York City Fire Department's Fire Inspection Revenue and Enforcement System (SI23-105A)

Audit at a Glance

What questions did the audit look at?

- Did the Fire Inspection Revenue and Enforcement System (FIRES) achieve its goals of replacing FDNY's legacy system, streamlining revenue collection, automating mobile inspections process, and implementing a public self-service portal?

Why does it matter for New Yorkers?

- In addition to fighting and responding to fires, FDNY is responsible for conducting inspections to ensure that buildings comply with the New York City Fire Code. As part of this mission, FDNY is authorized to issue violations and collect revenue from fines.
- The audit examined FDNY's FIRES system, which was implemented to modernize the fire inspection process. While FIRES replaced an outdated legacy system and introduced mobile inspection capabilities and a public self-service portal, the audit found that it did not fully achieve its goals of automating and streamlining operations.
- Key inspection and enforcement functionalities were never implemented, forcing staff to rely on manual "paper-and-pen" processes. Also, surveys revealed dissatisfaction among FDNY staff regarding FIRES' usability, and members of the public reported challenges with the system's self-service features.
- For New Yorkers, these shortcomings impact the efficiency and effectiveness of fire inspections, potentially delaying efforts to identify and resolve dangerous issues. It is crucial that FDNY address these deficiencies to improve the department's ability to protect lives and property across the City.

What changes did the agency commit to make following the audit?

- FDNY agreed to conduct refresher training for all FIRES users.
- FDNY agreed to consider survey results and solicit feedback from users.
- FDNY agreed to ensure that future systems meet contract requirements before deployment.
- FDNY agreed to ensure that systems continue to receive updates to improve functionality and optimize workflow.

Audit Findings

✓ FIRES replaced FDNY's outdated legacy system.

⚠ FIRES did not achieve its major goals of automating processes and improving efficiency.

⚠ Approximately one-third of FDNY staff found FIRES difficult to use, time-consuming, and inefficient.

⚠ Public users expressed dissatisfaction with the self-service portal.

⚠ FIRES operated in an unsupported environment for two years without necessary updates.

Audit Recommendations		Agency Response
1	Consult with legal counsel regarding available contract remedies for FIRES functionalities that were to be provided under the contract but were not developed and tested by GCOM or approved by FDNY.	DISAGREED
2	Consult with BFP and Fire Ops on business needs and fully implement an automated inspection scheduling and routing solution within FIRES based on inspector availability and profiles and require all business units to use for scheduling inspections.	DISAGREED
3	Implement the feature to automatically alert units that an inspection requires scheduling and disable the feature that cancels inspections that are not assigned within a specified time.	DISAGREED
4	Consult with Legal Affairs on business needs and implement functionalities and bi-directional interfaces to automate summons issuance and transmission, track and schedule court dates and inspector appearances through an online calendar, update hearing dispositions, and process appeals.	PARTIALLY AGREED³¹
5	Conduct refresher training for all FIRES users.	AGREED
6	Consider survey results, solicit additional feedback from internal and external users, and promptly address concerns related to FIRES' ease of use, functionality, connectivity, and customer service.	AGREED

³¹ FDNY acknowledged that "the OATH outbound interface has not yet been fully developed and implemented, which is due to unforeseen circumstances such as the COVID-19 pandemic and subsequent reduction in FDNY's workforce. In the foreseeable future, we aim to allocate and mobilize resources to facilitate the completion of this task."

However, FDNY stated that the department "implemented both hearing scheduling and appeals functionality that it demonstrated to the auditors and created with the input of the FDNY Enforcement Unit ("EU"). In addition, FDNY stated that "There is a daily inbound interface that updates FIRES enforcement records based on OATH's events...Once OATH makes a decision, information such as disposition, adjournment, and rescheduled dates are updated in FIRES automatically as intended."

7	Ensure that future information system development and testing contract requirements are fully met and results are approved and documented prior to system deployment.	AGREED
8	Ensure FDNY information systems continuously receive updates to improve system functionality and optimize business workflow.	AGREED

Implementation Status

FDNY reported that it has implemented four recommendations, continues to disagree with and will not implement three recommendations, and the remaining recommendation is pending.

Final Letter Report on the Audit of the Brooklyn Public Library's Emergency Preparedness (SR24-082A)

Audit at a Glance

What questions did the audit look at?

- Is the Brooklyn Public Library (BPL) adequately prepared to plan for and respond to emergencies to ensure the continuity of its operations and serve the public?

Why does it matter for New Yorkers?

- BPL is made up of 60 branch locations across the borough of Brooklyn. Given their established role in the community and borough-wide locations, libraries can provide the public with information and serve as an access point for services during emergencies.
- The audit found that BPL served the public in numerous ways during emergencies, by acting as cooling/warming centers during extreme weather, staging areas or command posts during emergencies, and providing resources to asylum seekers and refugees. In addition, QPL has Wi-Fi at all branches and back-up power at certain locations which would allow them to serve as an emergency hub. QPL officials also stated that branches may serve as temporary shelters for displaced individuals.
- Certain gaps in preparedness exist related to flood protection, emergency preparedness and business continuity plans and tests, fire drills, and training and communication.
- Although BPL implemented flood protection and mitigation measures at certain branches, it did not do so for three branches located within the floodplain—Brighton Beach, Gerritsen Beach, and Sheepshead Bay.
- Additionally, BPL lacks a comprehensive emergency plan and did not annually review, update, and test its Business Continuity Plan. This plan has not been reviewed or updated since 2021.
- Some branches did not conduct biannual fire drills as required (13.5% in CY2023 and 7.7% in CY2024) and some branches reported that they did not receive active shooter or other emergency trainings and emergency alerts.
- Neighborhood libraries are critical resources during emergency situations. These gaps in preparedness threaten BPL's ability to serve when it matters most.

What changes did the agency commit to make following the audit?

- BPL agreed to ensure that facility assessments are conducted ahead of summer cooling and winter heating seasons, consider installing generators or other backup power

systems at additional branches, and consider installing flood protection and mitigation measures at the three vulnerable branches.

- BPL agreed to create comprehensive emergency plan.
- BPL agreed to train all staff on emergency and business continuity plans, regularly test and evaluate those plans, and update them as necessary. BPL also agreed to ensure that biannual drills are conducted at all sites.
- BPL agreed to implement a centralized notification system to relay information to all branch managers and staff.

Audit Findings

✓ BPL branches provided services during emergencies.

⚠ BPL did not implement flood protection measures at three branches which are vulnerable to flooding.

⚠ BPL lacks a comprehensive emergency plan.

⚠ BPL's Business Continuity Plan has not been reviewed or updated since 2021.

⚠ 7.7% of branches did not conduct biannual fire drills during 2024.

⚠ Several branches reported that they did not receive emergency trainings or emergency alerts.

Audit Recommendations		Agency Response
1	Ensure facility assessments are conducted at all branches ahead of summer cooling and winter heating seasons to ensure HVAC systems are properly maintained and functioning.	AGREED
2	Consider installing generators or other backup power systems at additional BPL branches to ensure continuity of operations and enable libraries to serve the public during emergencies.	AGREED
3	Consider installing flood protection and mitigation measures at Brighton Beach, Gerritsen Beach, and Sheepshead Bay due to their floodplain location and past storm impacts.	AGREED
4	Create a comprehensive public safety and emergency plan that assigns responsibilities for carrying out specific actions to protect people, property, operations, and the environment in an emergency and provides incident stabilization.	AGREED
5	Train all staff on the comprehensive public safety and emergency plan and Business Continuity Plan, test and	AGREED

	evaluate plans at least once per year, and update them as necessary.	
6	Ensure that biannual drills are conducted for all BPL locations.	AGREED
7	Implement a centralized notification system or platform to quickly relay information to all branch managers and staff, including local emergency updates and BPL instructions related to public health, weather conditions, or security situations.	AGREED

Implementation Status

BPL reported that six recommendations have been implemented and the remaining recommendation to create a comprehensive public safety and emergency plan is pending. BPL anticipates implementing the recommendation in early 2026.

Audit of the New York Public Library's Emergency Preparedness (SR24-083A)

Audit at a Glance

What questions did the audit look at?

- Is the New York Public Library (NYPL) adequately prepared to plan for and respond to emergencies to ensure the continuity of its operations and serve the public?

Why does it matter for New Yorkers?

- NYPL is made up of 92 locations across Manhattan, the Bronx, and Staten Island. Given their established role in the community and borough-wide locations, libraries can provide the public with information and serve as an access point for services during emergencies.
- The audit found that NYPL served the public in numerous ways by acting as cooling/warming centers during extreme weather, staging areas or command posts during emergencies, and providing resources to support asylum seekers. In addition, NYPL may provide Wi-Fi access or serve as temporary shelters during emergencies.
- Certain gaps in preparedness exist related to business continuity, disaster recovery, and incident response plans and tests, fire drills, other documents that help libraries ensure that they are adequately prepared for emergencies, and emergency alerts. The auditors requested copies of NYPL's Business Continuity, Disaster Recovery, and IT Incident Response Plans and documentation to show that these plans were tested, but NYPL did not provide them citing security risks.
- Although all NYPL sites are required to conduct annual fire drills, in 2024, 86% of branches did not do so. Additionally, only eight of 17 (47%) sampled sites submitted their Life Safety/Physical Plant Surveys, Location Security Plan and Checklists, and Internal and External Resource lists. NYPL submitted some but not all documents for seven branches and did not submit any documents for two branches. Also, over 20% of branches reported that the Central Office did not inform them of emergencies in their area. Finally, Aguilar Library—which is located in the 500-year floodplain—has not implemented any flood protection and mitigation measures during renovation.
- Neighborhood libraries are critical resources during emergency situations. These gaps in preparedness threaten NYPL's ability to serve when it matters most.

What changes did the agency commit to make following the audit?

- NYPL agreed to work with the Cybersecurity and Infrastructure Security Agency to assess its overall security and resilience.

- NYPL agreed to test, review, and update its business continuity, cybersecurity, and IT incident response plans on at least an annual basis and ensure that branches are conducting fire drills.
- NYPL agreed to establish a centralized tracking and reporting system to ensure that all branches are fulfilling their emergency preparedness responsibilities.
- NYPL agreed to ensure that critical alerts are promptly relayed to all branch managers and staff.
- NYPL agreed to consider installing flood protection measures at Aquilar Library.

Audit Findings

- ✓ NYPL branches provided services during emergencies.
- ⚠ NYPL's Central Office did not provide auditors with various emergency plans and tests.
- ⚠ 86% of branches failed to conduct annual fire drills.
- ⚠ Only 47% of sampled branches submitted all required emergency prep documents.
- ⚠ 20% of branches reported that they did not receive emergency alerts.
- ⚠ Aguilar Library is vulnerable to flooding and has not implemented protection or mitigation measures.

Audit Recommendations		Agency Response
1	Request that the Cybersecurity and Infrastructure Security Agency conduct an Infrastructure Survey Tool assessment to identify and document NYPL's overall security and resilience. The Infrastructure Survey Tool is a web-based tool designed to assess and record a facility's overall security and resilience.	AGREED
2	Test, review, and update the Business Continuity Plan, Cybersecurity Plan, and IT Incident Response Plan on at least an annual basis.	AGREED
3	Consider implementing mesh Wi-Fi network which supports communications in hard-to-reach areas and can be used in emergency response communications.	DISAGREED
4	Ensure that annual drills are conducted for all NYPL locations.	AGREED
5	Establish a centralized tracking and reporting system to ensure all branches submit their Location Security Plan, Location Security Checklist, Life Safety/Physical Plant Survey, and Internal and External Resources list.	AGREED

6	Ensure that critical emergency alerts from NYCEM, including those related to public health, severe weather, and security events, are promptly relayed to all branch managers and staff.	AGREED
7	Consider installing flood protection and mitigation measures at Aquilar Library due to its floodplain location.	AGREED

Implementation Status

NYPL did not provide follow-up information.

Audit of the Queens Borough Public Library's Emergency Preparedness (SR24-081A)

Audit at a Glance

What questions did the audit look at?

- Is the Queens Public Library (QPL) adequately prepared to plan for and respond to emergencies

Why does it matter for New Yorkers?

- QPL is made up of 66 branch locations across the borough of Queens. In addition to serving as community gathering places, they act as cooling/warming centers during extreme weather, provide Wi-Fi access, and have provided essential resources and programming to asylum seekers and refugees.
- The audit found that QPL serves the public in numerous ways during emergencies, though certain gaps in preparedness do exist, including flood mitigation efforts and fire drill compliance, as well as issues with planning, training, and communication.
- QPL implemented flood mitigation measures at two of three vulnerable branches (Arverne and Hunters Point), but QPL did not provide documentation that it did so at the third branch (Seaside). Although QPL had a Disaster Recovery Plan, it could be improved by formally mandating annual tests, reviews, and updates. Similarly, QPL did not provide documentation showing that all branches conducted biannual fire drills, as required by its Emergency Evacuation Plan. Finally, the audit found potential problems with QPL's communication and training: several branches responded to a survey and said that they did not receive active shooter and other emergency preparedness training, while others stated that they did not receive emergency alerts from the Central Office.
- Neighborhood libraries are critical resources during emergency situations. These gaps in preparedness threaten QPL's ability to serve when it matters most.

What changes did the agency commit to make following the audit?

- QPL agreed to consider installing flood mitigation measures at Seaside branch, as well as backup generators at other branches.
- QPL agreed to enhance its Disaster Recovery Plan.
- QPL agreed to implement a centralized notification system to relay information to all branch managers and staff.

Audit Findings

- ✓ QPL branches effectively provided services during emergencies.

⚠ One QPL branch is vulnerable to flooding.

⚠ QPL did not document whether branches conducted biannual fire drills.

⚠ Several branches did not receive required training or emergency alerts.

Audit Recommendations		Agency Response
1	Consider installing flood protection and mitigation measures at Seaside due to its floodplain location.	AGREED
2	Consider installing generators or other backup power systems in additional QPL branches to ensure continuity of operations and enable libraries to serve the public during emergencies.	AGREED
3	Request that the Cybersecurity and Infrastructure Security Agency (CISA) conduct an Infrastructure Survey Tool assessment to identify and document QPL's overall security and resilience. The Infrastructure Survey Tool (IST) is an optional, web-based tool designed to assess and record a facility's overall security and resilience.	DID NOT ADDRESS ³²
4	Ensure the Disaster Recovery Plan includes a requirement to test, review, and update the Plan at least annually.	AGREED
5	Address areas of improvement noted in Disaster Recovery Test Reports.	PARTIALLY AGREED ³³
6	Ensure that biannual drills are conducted for all QPL branches and implement a centralized process for maintaining documentation for each completed drill.	AGREED
7	Implement a centralized notification system or platform to quickly relay information to all branch managers and staff, including local emergency updates and QPL instructions related to public health, weather conditions, or security situations.	AGREED

³² QPL did not address this recommendation instead indicating that the Library already conducts its own independent cybersecurity assessment on a periodic basis using vendors certified in cybersecurity protocols. QPL also indicated it would welcome OTI's participation in additional cybersecurity testing.

³³ QPL partially agreed with this recommendation, stating that it will address areas for improvement detected in a Disaster Recovery Test, but did not commit to addressing all identified issues. QPL indicated it was not feasible to make improvements in all instances.

Implementation Status

QPL reported that four recommendations have been implemented and one recommendation is pending and did not provide a response to the remaining two recommendations.

Audit Report on the Board of Education Retirement System's Financial and Operating Practices and Board Governance (FM23-088A)

Audit at a Glance

What questions did the audit look at?

- Does the Board of Education Retirement System (BERS) have adequate financial and operating internal controls?
- Does the BERS Board of Trustees exercise adequate oversight over the pension system?

Why does it matter for New Yorkers?

- BERS is one of five New York City pension systems, providing benefits to retired employees of the Department of Education (DOE). To fulfill its duties, BERS must responsibly steward City funds and comply with applicable regulations and guidance, including the Comptroller's Directives. In Fiscal Year 2023, BERS' administrative expenses totaled \$37 million.
- The audit found that BERS maintained appropriate oversight over its investment practices. However, the audit also found that, overall, BERS was poorly governed, and the Board lacked adequate oversight of financial and operating practices.
- BERS' bylaws did not sufficiently outline Board responsibilities including the appointment of trustees and officers, Board duties, and rules and regulations. BERS lacked written guidance in key areas such as the use of the agency's credit card, long-distance travel, and procurement practices, which could lead to delays and cost overruns when procuring goods and services.
- Additionally, the audit found that BERS violated Citywide travel policies and did not perform bank reconciliations, which could lead to heightened risk of fraud or misuse of City resources.

What changes did the agency commit to make following the audit?

- BERS agreed to update its bylaws.
- BERS agreed to draft internal policies and procedures governing procurement and agency credit cards.
- BERS agreed to create an internal travel policy and designate a managerial-level employee to pre-approve travel requests.
- BERS agreed to perform bank reconciliations each month.

Audit Findings

✓ BERS adequately oversees pension investments.

⚠ BERS' bylaws were inadequate and did not sufficiently outline Board responsibilities.

⚠ BERS lacked internal policies and procedures regarding procurement, agency credit cards, and agency travel.

⚠ BERS did not perform monthly bank reconciliations as required.

Audit Recommendations		Agency Response
1	Update its Bylaws and include, among other things: (1) rules and regulations governing the pension system; (2) membership/appointment to the Board; (3) duties of the Board; (4) appointment and duties of committee members (i.e., fiscal and investment); (5) authority to hire an executive director and other executive members; (6) order of business; (7) financial matters; and (8) rules defining conflicts of interest.	AGREED
2	Create internal procurement policies and procedures specific to its operations. Those policies and procedures should include the recommendations cited in BERS' 2022 Internal Audit Report.	AGREED
3	Establish internal policies and procedures regarding the use of agency credit cards.	AGREED
4	Create an internal travel policy that outlines the process for requesting, approving, funding, and reimbursing travel expenses in compliance with Comptroller's Directive 6.	AGREED
5	Designate an agency-approved, executive managerial-level employee to pre-approve travel requests made by the Executive and Deputy Executive Directors.	AGREED
6	Perform bank reconciliations each month.	AGREED

Implementation Status

BERS reported that two recommendations have been implemented, three recommendations are pending, and the remaining recommendation is no longer applicable. BERS stated that it does not have a credit card for agency use.

Appendix

The reports issued before or after the end of FY2025 are listed below in the order they are referenced in the cover letter to this report.

Audit Report on the New York City Economic Development Corporation Administration of the NYC Ferry Operation (FM20-071A)

Audit at a Glance

What questions did the audit look at?

- Did the New York City Economic Development Corporation (EDC) report all costs associated with the NYC Ferry system?
- Did EDC effectively manage contracting, oversight, vessel acquisition, and subsidy transparency for the ferry system?

Why does it matter for New Yorkers?

The NYC Ferry system is a transportation initiative intended to connect New York City's waterfront communities. Because the system offers low fares while heavily subsidized by taxpayers, it is essential that the full costs of providing the service are transparently reported, properly managed, and aligned with sound fiscal stewardship.

The audit found that EDC drastically underreported costs, meaning that the public subsidy was much higher than publicly disclosed. In Fiscal Year 2021, EDC reported the subsidy per rider as \$8.59, but the audit found it was actually \$12.88.

In total, EDC's audited financial statements recognized about \$534 million in ferry-related expenditures between July 1, 2015 and December 31, 2021; however, the auditors determined the actual costs were at least \$758 million, meaning that a whopping \$224 million went unreported. The audit also found that EDC's financial decisions resulted in over \$66 million in unnecessary expenditures and did not efficiently collect and reimburse landing fees to the ferry operator.

These gaps undermine the transparency of the NYC Ferry system and raise concerns about whether public resources are being used efficiently. When costs are hidden or understated, it diminishes public trust in how the City manages major infrastructure and transit investments, impeding informed decision-making about fare policy, expansion, and subsidy levels.

What changes did the agency commit to make following the audit?

- EDC agreed to issue new competitive Request for Proposals (RFP) for the operation of the ferry system.
- EDC agreed to provide enhanced financial reporting on its website, increasing transparency around ferry operations and costs.

Audit Findings

⚠ The New York City Economic Development Corporation (EDC) underreported operating costs of the NYC Ferry system by \$224 million.

⚠ EDC understated the per-rider taxpayer subsidy of the ferry system.

⚠ EDC did not enforce contract terms and conditions or adequately oversee its ferry operator.

⚠ EDC spent over \$66 million on unnecessary expenditures.

⚠ EDC did not ensure that payments made to the operator were accurate or justified.

⚠ EDC did not ensure that the operator accurately tracked or reported ferry ridership or revenue.

Audit Recommendations		Agency Response
1	Disclose all ferry related expenditures under the NYC Ferry and NYC Ferry Fleet, LLC in NYCEDC's audited financial statements, regardless of the funding source and the recipient of the funds.	PARTIALLY AGREED³⁴
2	Calculate and report the dollar amount subsidized by the City per rider using the true total net operating losses of the ferry program.	PARTIALLY AGREED³⁵
3	Expediently initiate an open competitive bidding process to procure and select a succeeding operator at the minimum reasonable cost. EDC should use this opportunity to reduce operating losses to the extent possible.	AGREED
4	Perform and document cost/benefit analyses to determine whether proposed changes to the ferry operation and the Agreement are cost effective and in the best interests of the City.	CURRENT PRACTICE

³⁴ EDC stated that, "NYCEDC will not change its audited financial statements but will provide alternative annual reporting to be made publicly available through NYCEDC's website which will include all costs paid to the operator, allocation of NYCEDC personnel, and landing maintenance costs. This enhanced reporting will be released annually following the issuance of NYCEDC's annual audited financial statements."

³⁵ EDC stated that, "NYCEDC will include non-Operator costs in the subsidy-per-rider calculation in new annual reporting discussed in Response 1, but will not include capital asset depreciation."

5	Revise Section 3.01(C) of the Agreement and to indicate what is paid for under the Fare Policy Fee. EDC should determine the true cost of implementing a discount program.	DISAGREED
6	Discontinue the process of collecting and reimbursing landing fees.	DISAGREED
7	<p>Enforce the agreement terms to:</p> <ul style="list-style-type: none"> require the Operator to submit the documentation regarding general operating expenses and fuel costs for review related to the early activation; ensure the Operator complies with the insurance requirements; ensure the Operator complies with the ferry and shuttle bus trip summary reporting requirements; and ensure the service requests to the Operator are properly authorized, documented, and reviewed prior to granting approval for payment. 	PARTIALLY AGREED³⁶
8	<p>Recoup from the Operator:</p> <ul style="list-style-type: none"> the overpayment of \$2,812,610 for the BNY Vessel; the \$3,059,528 in excessive VSH payments for 2019 and 2021; the \$4,301,579 in Fare Policy payments and preclude the Operator from charging any Fare Policy payments in the future; the \$1,205,400 in excessive Homeport payments; the \$87,680 in Shuttle Bus Component Fee that exceeded the cost of operating the shuttle bus service for October 2017, 2018, and 2019; the overpayment of \$12,400 for the 10% mark-up on vessel repair costs and for the DTFR pilot program costs that exceeded the itemized expenditure limits; and a percentage of the \$540,000 in Milestone payments where Milestones were not met. 	DISAGREED
9	Conduct proper review of the Management Incentive Fee calculation and related data.	CURRENT PRACTICE
10	Consider replacing the current GPS device for more accurate tracking of arrival/departure times.	DISAGREED

³⁶ EDC stated that, "NYCEDC will ensure the Operator complies with insurance requirements, trip summary reporting requirements, and service request approvals. NYCEDC will not revisit payments or documentation related to the Early Activation."

11	<p>Ensure the Operator:</p> <ul style="list-style-type: none"> establishes a protocol to confirm that the "On" and "Off" counts match and that the ferry and shuttle bus ridership is accurately reported; properly accounts for gaps and missing ticket order numbers; and conducts continuous reviews to ensure the accuracy and completeness of reported ticket revenue. 	AGREED
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Implementation Status

EDC reported that eight recommendations have been implemented and the remaining three recommendations (5, 8, and 10) were not implemented.

Audit of the Department of Homeless Services' Role in the "Cleanups" of Homeless Encampments (ME23-059A)

Audit at a Glance

What questions did the audit look at?

- Does the Department of Homeless Services (DHS) accurately track and report the results of homeless encampment sweeps?
- How effective is DHS in directing homeless people at these sites to temporary shelter, permanent housing, and support services?

Why does it matter for New Yorkers?

In March 2022, the Mayor created an interagency task force to dismantle and remove homeless encampments in the five boroughs, and to provide people living in these encampments with housing, social services, and other assistance. DHS is responsible for coordinating the City's response, answering service requests and assigning outreach teams before the encampments are actually dismantled. These operations are called "sweeps" (or "cleanups").

According to DHS, between March 21 and November 30, 2022, the task force conducted over 2,000 sweeps. The audit found that DHS' outreach attempts during this time met with limited success.

Of the 2,308 people that DHS reported interacting with during these sweeps, only 119 accepted temporary shelter, and only three were able to attain permanent housing. Of the people who went into shelter, many did not even spend one night. When the auditors visited a sampling of these sites in April 2023, they found that homeless activity had resumed at 31% of them. The audit also found that DHS did not track people who refused shelter placement, nor did it document the support services the outreach teams provided to those people.

This lack of data or documentation makes measuring the efficacy of DHS' activities extremely difficult. However, the results of the audit suggest that DHS sweeps bear little tangible impact beyond disrupting the lives of homeless New Yorkers. In its mission to provide shelter and services to people living on the street—one of New York City's most vulnerable populations—it appears that DHS is failing.

Notably, the results of this audit, together with data released by other City agencies, informed Mayor-elect Mamdani's December 2025 announcement that his administration will be putting an end to homeless encampment sweeps.

What changes did the agency commit to make following the audit?

- DHS will “explore [the] feasibility” of updating its case management software to track encampment sweep reports.

Audit Findings

⚠ Only 119 people living in encampments accepted temporary shelter from DHS outreach teams.

⚠ Only three people attained permanent housing.

⚠ 31% of swept encampments saw homeless activity resume by April 2023.

⚠ DHS did not track homeless people who did not accept shelter placement.

⚠ DHS did not document the support services it provided to people living in encampments who did not accept shelter placement.

⚠ DHS did not adequately track placement referrals.

Audit Recommendations		Agency Response
1	In addition to tracking the referral of homeless individuals to temporary shelters as a result of sweeps, DHS should also consistently track its key activities and outcomes.	PARTIALLY AGREED
2	DHS should publicly report key indicators that provide transparency relating to the effectiveness of its outreach efforts in connection with homeless encampments and other homeless sites.	DISAGREED
3	DHS should re-assess how it engages with homeless individuals at the homeless encampment and pop-up sites to improve its success rate in encouraging temporary shelter.	DISAGREED
4	DHS should re-configure its systems so that the agency can readily capture all shelter entry and re-entry dates for each individual.	DISAGREED
5	DHS should consult with other localities and establish effectiveness best practices for engaging, and tracking and reporting encounters with, individuals living at homeless sites.	DISAGREED

Implementation Status

DHS reported that it implemented one recommendation and continues to disagree with the remaining four recommendations.

Audit Report on the New York City Department of Transportation's Speed Camera Program (FN22-095A)

Audit at a Glance

What questions did the audit look at?

- Does the New York City Department of Transportation (DOT) adequately monitor its speed camera program?
- Does DOT accurately issue tickets for violations detected by speed cameras?
- Are speed cameras functioning and maintained properly?

Why does it matter for New Yorkers?

Since 2013, the New York City Department of Transportation has overseen an automated speed enforcement program using cameras to deter speeding. Under state law, the City is allowed to impose fines of up to \$50 on drivers traveling at a speed of more than 10 MPH in a school speed zone. DOT now has over 2,000 cameras—including 40 mobile cameras mounted to vehicles—deployed in 750 speed zones. Cameras operate 24 hours a day, seven days a week.

The audit found that DOT complied with state law in its designation of speed zones and placement of cameras, which are widely distributed throughout the City. However, the audit found that DOT did not adequately review speeding events captured by cameras and that some of the events were improperly rejected by its contractor, Verra Mobility Corporation. Auditors found errors in almost 12% of sampled events. In addition, the high number of speeding vehicles with no license plates, temporary plates, or obstructed plates make speed cameras less effective and potentially costs the City at least \$108 million in lost revenue.

Speed cameras are proven to deter speeding, improve road safety, and save lives. By allowing speeding to go unchecked, DOT is not only forgoing much-needed revenue that could be used to expand the program, but also allowing drivers to easily circumvent the law.

What changes did the agency commit to make following the audit?

- DOT agreed to modify its contract with Verra and request greater access to camera footage and data.
- DOT agreed to regularly review and analyze data to identify problematic cameras.
- DOT agreed to work with law enforcement and other government agencies to identify solutions to the problem of obscured/missing license plates.

Audit Findings

✓ DOT placed speed cameras in accordance with NYS Vehicle and Traffic Law and accurately issued tickets to drivers.

✓ DOT ensured that cameras were functioning and properly maintained.

⚠ DOT did not properly review speeding events rejected by its contractor, potentially costing the City over \$100 million.

⚠ DOT does not use mobile speed cameras efficiently, with just 62.5% deployed on average during last quarter of 2021.

⚠ DOT overpaid for maintenance services, totaling \$107,500.

Audit Recommendations		Agency Response
1	Modify the existing contract and all future contracts to ensure DOT has full access to data related to rejected speeding events, including images and videos.	AGREED
2	Request access to camera footage for all rejected speeding events in the AXSIS system on a regular basis and conduct sample-based reviews to determine whether rejections were appropriate, and if not, reverse the rejections and issue NOLs to vehicle owners.	AGREED
3	Provide Verra and its subcontractor with additional guidance and training on DOT's rejection criteria.	AGREED
4	Regularly review and analyze rejection data to identify underperforming and inactive cameras and address them as they occur	AGREED
5	Work with law enforcement, State agencies, and other cities experiencing problems with missing, temporary, and obscured license plates (impacting speeding, red light, and bus lane cameras, and tolls) to identify potential solutions to this growing problem.	AGREED
6	Determine whether it is cost effective to maintain all 40 mobile speed camera vehicles.	AGREED
7	Obtain a list of cameras being billed by Verra and carefully reconcile these to the active camera list before approving payment.	AGREED
8	Recoup \$107,483 from Verra in overcharged maintenance fees and determine whether any additional amounts should be recouped if Verra overcharged the same relocated camera beyond December 2021.	AGREED

Implementation Status

DOT reported that six recommendations have been implemented and the remaining two recommendations (1 and 2) are pending.

Audit Report on the New York City Police Department's Oversight of Its Agreement with ShotSpotter Inc. for the Gunshot Detection and Location System (FP23-074A)

Audit at a Glance

What questions did the audit look at?

- Did the New York City Police Department (NYPD) properly monitor and evaluate the ShotSpotter program?
- Did NYPD properly review ShotSpotter invoices?
- Were ShotSpotter sensors placed in neighborhoods with the highest shooting rates, as NYPD claims?

Why does it matter for New Yorkers?

In 2014, NYPD implemented ShotSpotter, a gunshot detection and location System. The system uses strategically placed sensors to detect gunshot activity and sends an alert to officers on patrol, potentially allowing NYPD to precisely pinpoint the location of suspected gunfire within covered areas.

ShotSpotter has courted controversy since its inception. Critics have expressed concerns that use of the technology may lead to over-policing in communities of color. Others have questioned the efficacy of ShotSpotter as a crimefighting tool.

The audit found that NYPD generally exercised appropriate oversight over the ShotSpotter contract. ShotSpotter is expected to report 90% or more of probable shootings, thus giving them a strong incentive to over-report loud noises that do not turn out to be confirmed shootings.

The formula used by NYPD fails to account for the number of confirmed shooting incidents. When the auditors measured this number against ShotSpotter performance metrics for two sampled months, the product's performance rate plummeted, with less than 20% of alerts leading to actual confirmed shootings. In June 2023, for example, officers responded to 940 ShotSpotter alerts; only 13% (122) were confirmed shootings.

Since 2014, the department has spent over \$45 million on the product and committed an additional \$9 million. This expense can also be measured in time; in June 2023, NYPD personnel spent almost 427 hours investigating alerts that ended up being unconfirmed. The audit calls on NYPD to critically assess ShotSpotter's performance and determine whether its continued use is in the City's best interests.

What changes did the agency commit to make following the audit?

- NYPD agreed to pay its invoices within 30 days and ensure that ShotSpotter upholds its part of the contract regarding performance rates.

Audit Findings

- ✓ NYPD exercises adequate oversight over the ShotSpotter program.
- ✓ ShotSpotter sensors are placed in neighborhoods with high shooting rates.
- ⚠ Performance standards adopted by NYPD result in over-reporting loud noises that are not confirmed shootings.
- ⚠ Fewer than 1 in 5 ShotSpotter alerts result in a confirmed shooting.
- ⚠ NYPD officers spend hundreds of hours responding to unconfirmed shootings every month.
- ⚠ NYPD does not analyze or publish comprehensive ShotSpotter data.
- ⚠ NYPD does not pay invoices in a timely manner.

Audit Recommendations		Agency Response
1	Decline to renew the ShotSpotter contract when it expires in December 2024 without first conducting a more thorough performance evaluation, considering the very low rates of confirmed shooting incidents detected, and factoring in the extensive NYPD officer time spent responding to alerts not ultimately confirmed as shootings.	DISAGREED
2	Develop more meaningful performance standards of ShotSpotter's accuracy that better factor in the very high rate of alerts not ultimately confirmed as shootings.	DID NOT AGREE OR DISAGREE³⁷
3	To increase transparency, NYPD should collect and publish relevant data, including the number of published alerts, percentage of alerts which result in confirmed shootings, the number of false negatives and missed incidents, time and staff costs spent responding to alerts that are not ultimately confirmed as shootings, and the relative response times to ShotSpotter alerts versus 911 reports of shots fired outside.	DID NOT AGREE OR DISAGREE³⁸

³⁷ NYPD stated: "NYPD is limited in what it can consider a 'confirmed shooting' in conjunction with a ShotSpotter alert by the nature of police work and alerts which don't result in the recovery of evidence (i.e. ballistics, property damage, shell casings/live ammunition, firearms, video, ear or eyewitnesses and/or victims). As discussed in previous meetings, the Department is open to any auditor recommendations for improved standards calculations but have not received a recommended standard."

³⁸ NYPD stated: "Shooting numbers are ever changing based on investigations and other factors that follow the shootings and therefore, parties that are not familiar with the data could misinterpret the information. In addition, this would need to go through various channels to determine feasibility and legality of such information request."

4	Continue to follow up with ShotSpotter, Inc. on coverage areas where the 90% performance rate is not met and ensure that ShotSpotter, Inc. is upholding the agreed upon Service Level Agreement Performance Rate.	AGREED
5	Pay its invoices within 30 days after the invoice receipt or acceptance date per the Procurement Policy Board Rules § 4-06.	AGREED

Implementation Status

NYPD reported that two recommendations have been implemented, (4 and 5) two are in process, (2 and 3) and the remaining recommendation is not implemented.

Report on the Investigation of the Implementation of the “60-Day Rule” for Asylum-Seeker Families (FK24-079S)

Report at a Glance

What questions did the report look at?

- What are the effects of New York City’s 60-day shelter stay limit on asylum-seekers and their families?
- What protocols and processes did the City follow when setting the 60-day rule?

Why does it matter for New Yorkers?

As New York City began to receive a rapid increase in new arrivals, in October 2023, Mayor Eric Adams announced that his administration would soon begin limiting shelter stays to 60 days for newly asylum-seeker families. This policy—the “60-Day Rule”—went into effect in January 2024, and as of April 14, 2024, the City reported that almost 10,000 families consisting of 37,000 individuals—19,192 adults and 17,926 children—were impacted.

The Comptroller’s Office launched this investigation to review the protocols undertaken by the city and to determine the actual effects of the 60-Day Rule on asylum-seeker families and the fiscal health of the City.

The investigation found that the policy was implemented haphazardly, with little notice or information provided to families, inadequate staff training, and no written policies in place for key elements of the program. The report found that relocations forced by the 60-Day Rule disrupt families’ pathways to work authorization, legal status, employment, benefits, and stable public education. Moreover, the City failed to track outcomes or monitor program effectiveness.

The 60-Day Rule was implemented quickly and with little regard for the extremely vulnerable population targeted by the policy. Although the rule has reduced the City’s shelter population, it has wreaked havoc on asylum-seeker families, causing shelter instability and unnecessary stress and uncertainty.

Members of the Adams Administration have pointed to the high cost of providing shelter to asylum-seeker families. But as the Comptroller’s Office has repeatedly recommended, cost savings could be achieved if the City moved away from emergency procurement to competitive bidding among qualified service providers.

Report Findings

⚠ The City has implemented the 60-Day Rule in a haphazard manner, without adequate policies or training in place.

- ⚠ 60-Day Notices fail to provide families with critical information.
- ⚠ Case management services are limited and do little to help families achieve self-sufficiency.
- ⚠ The 60-Day Rule undermines new arrivals' ability to obtain work authorization and stable employment
- ⚠ Families with elementary school-aged children are subjected to more frequent moves.
- ⚠ The City does not evaluate program effectiveness or impact of the 60-Day Rule.

Report Recommendations	
1	The City should end the 60-Day Rule and instead implement a policy that genuinely coordinates temporary shelter, legal assistance toward immigration status and work authorization, workforce development that enables people to obtain work, and case management that enables people to achieve self-sufficiency. Other jurisdictions are adopting more humane and effective long-term policies of this type.
2	While the City continues to implement the 60-Day Rule, it must immediately correct critical shortcomings in the implementation of the policy, including promulgating clear written policies and procedures, amending the 60-Day Notice to add critical missing information, providing the “intensive case management” promised when the policy was announced, and allowing families with elementary school aged children to be placed in DHS shelters upon re-intake.
3	To achieve cost savings, the City must move away from emergency procurement to competitive bidding among qualified service providers, as the Comptroller’s Office has repeatedly recommended.
4	The City should track and evaluate program effectiveness, including overall cost savings, and outcomes for families toward immigration status, work authorization, housing stability, and self-sufficiency.

Implementation Status

The Office of the Mayor reported that three recommendations have been implemented, and the remaining recommendation has been partially implemented. The City implemented many aspects of recommendation #1 but has not agreed to end the 60-Day Rule.

Observations of Building Doors in NYCHA Developments (FK23-069S)

Report at a Glance

What questions did the report look at?

- Were New York City Housing Authority (NYCHA) entrance doors in public housing complexes secured?

Why does it matter for New Yorkers?

NYCHA is the biggest landlord in New York City, providing housing to hundreds of thousands of New Yorkers. As part of its mandate, NYCHA provides security for its residents.

In 2018, the Audit Bureau conducted a review of NYCHA's exterior doorways and found that security was largely inadequate. The auditors observed numerous unlocked doors and damaged locks.

Following complaints from residents, a 2022 follow-up review found that NYCHA did not implement prior report recommendations, and the overall percentage of residential building entrance doors which were open and/or had broken door locks increased dramatically from 23.5% in 2018 to 57.9% in 2022.

Auditors visited 262 NYCHA developments and found that 36.8% of building entrance doors were open and 40.1% of entrance door locks were broken. Similarly, 37.5% of rear or side doors were open, and 28.5% of rear or side door locks were broken. In all five boroughs, the percentage of broken locks increased between 2018 and 2022—with increases ranging from 20.1% to 32.2%.

Some residents informed the auditors that doors were propped open because intercoms, locks, keys, and door release buttons did not work. In one instance, a resident said that their building's intercom had been broken for 10 years. Additionally, residents said that replacements for lost keys are expensive.

We recommend that NYCHA repair or replace damaged and missing exterior doors, conduct regular inspections to ensure doors and locks are in good working order, and conduct a top-to-bottom review of its security and maintenance systems and procedures.

We acknowledge that NYCHA has many urgent repair and maintenance needs. However, ensuring the security of residents should be a high priority.

Report Findings

⚠ 36.8% of residential entrance doors in NYCHA developments were open and 40.1% of locks were broken.

⚠ 37.5% of rear/side doors were open and 28.5% of locks were broken.

⚠ The number of open doors/broken locks significantly increased across the board between 2018 and 2022.

Report Recommendations	
1	Repair or replace damaged and missing exterior doors and equip them with sturdy, functional hardware.
2	Repair or replace damaged and missing door-closer mechanisms, door release buttons, intercoms, locks, and keys.
3	Engage with NYCHA residents and authorized visitors and NYCHA employees and contractors and communicate the importance of securing exterior doors.
4	Regularly inspect all exterior doors and maintain all doors and locks in good working order.
5	Conduct a top-to-bottom review of its security and maintenance systems and procedures to ensure that when exterior doors are obstructed and unsecured, maintenance staff are made immediately aware of the conditions, and the doors are promptly fixed.

Implementation Status

NYCHA reported that all recommendations have been implemented.

Audit Report on the Department of Education's Compliance with Regulations Regarding English Language Learners (SR23-057A)

Audit at a Glance

What questions did the audit look at?

- Did the New York City Department of Education (DOE) comply with state law and its own policies when identifying and providing instruction to English Language Learners (ELL)?

Why does it matter for New Yorkers?

New York City's public schools serve a growing population of ELLs, or students whose home language is not English. It is essential that these students are identified promptly, placed in the right instructional program, taught by qualified educators, and given mandated instructional time and courses.

State law, the New York State Education Department's Commissioner's Regulations Part 154 (CR Part 154), and the Aspira Consent Decree govern this process, but the audit found that DOE was not in compliance. DOE failed to provide required ELL courses or the minimum number of instructional minutes for 48.2% of sampled ELL students and placed 9.7% of sampled students in the incorrect program. Moreover, approximately 40% of sampled students had one or more teachers who were not properly certified for ELL instruction. Other issues included DOE's failure to implement bilingual education programs, provide parents/guardians with ELL program information, and consistently administer the ELL identification process as required.

Because DOE failed to identify or promptly identify ELLs, create bilingual education programs, and provide qualified instruction and mandated services, ELL students may not have received the support they needed to become proficient in English. Delays and inadequate instruction may also undermine equal access to education and widen achievement gaps.

What changes did the agency commit to make following the audit?

- DOE agreed to improve tracking systems to ensure ELL students receive the required instructional time, are properly placed in programs, and are taught by appropriately certified teachers.
- DOE agreed to increase the availability of bilingual and dual-language programs in high-demand areas and ensure parents are fully informed of their rights and options.
- DOE agreed to monitor the ELL identification process, audit schools to ensure that they maintain ELL records, and enhance data monitoring and compliance citywide.

Audit Findings

- ⚠ DOE did not provide required instruction to 48.2% of sampled ELL students.
- ⚠ Approximately 40% of sampled ELL students were not taught by certified ELL teachers.
- ⚠ DOE placed 9.7% of sampled ELL students in incorrect programs.
- ⚠ DOE did not maintain required documentation for 31.5% of sampled ELL students.
- ⚠ DOE often failed to administer standardized tests to students or administered them late.

Audit Recommendations	Agency Response
1 Finalize rules for implementing a tracking and monitoring system for Bilingual Education and English as a New Language Programs to ensure students are being adequately served.	AGREED
2 Implement and further develop a system to monitor ENL units of study to ensure that students are receiving all required ENL minutes by a certified ENL teacher, in compliance with CR-Part 154.	AGREED
3 Continue their efforts to recruit more qualified teachers for English Language Learners program classes and encourage current DOE personnel to obtain the required certifications to become ELL certified educators.	AGREED
4 Develop a centralized system for tracking teachers Continuing Teacher and Leader Education (CTLE) hours, to ensure that they receive the minimum 50% of required professional development hours, as outlined in CR Part 154. Additionally, DOE should designate a team to monitor CTLE compliance and provide periodic status reports.	DISAGREED
5 Continue to conduct regular audits and inspections during ML/ELL School Support Survey visits to ensure that all required school level ELL-critical documentation is completed, retained in students' cumulative records, and accurately entered in ATS.	AGREED
6 Improve oversight of waiver requests, evaluate recruitment efforts, and expand bilingual programs in high-demand districts to reduce reliance on waivers and ensure ELL students receive appropriate language services.	AGREED
7 Implement standardized procedures to ensure that all schools provide complete and accurate ELL program information to parents/guardians in Parent Survey and Program Agreement Forms.	AGREED

8	Establish a centralized process to collect, analyze, and act on data from the Parent Survey and Program Agreement Forms across all schools.	AGREED
9	Develop and implement a centralized tracking system for waitlist and transfer requests in ATS and enhance oversight to ensure all bilingual program preferences are honored timely.	AGREED
10	Implement a school level monitoring system to ensure that the ELL identification process is being completed in accordance with their Policy and Reference Guide and CR Part 154.	AGREED

Implementation Status

At the time this report was prepared, the status of recommendations are still pending.

Review of the Department of Sanitation's Commercial Waste Zone Request for Proposals and Carter Selection Process (FP25-065S)

Report at a Glance

What questions did the report look at?

- Did the New York City Department of Sanitation's (DSNY) vendor selection process for the Commercial Waste Zone (CWZ) program comply with local law?
- Did the selected vendors have acceptable safety, labor, environmental, and customer service records?

Why does it matter for New Yorkers?

New York City's commercial waste hauling industry has long been fragmented and inefficient, with dozens of private carters covering overlapping routes. Local Law 199 of 2019 aimed to reform this system by establishing up to 20 CWZs throughout the City.

CWZs are designated zones where a limited number of licensed private carters are authorized by DSNY to collect waste from businesses. The goal of this initiative was to drive down truck mileage, improve safety, reduce emissions, enhance customer service, and deliver more transparent and fair pricing.

If the Request for Proposals (RFP) (or selection process) is weak, these core goals may not be realized. For businesses, confusing or inconsistent pricing affects their cost burden; for residents, weak oversight means truck traffic, serious road hazards, and pollution could persist.

The review found significant issues with DSNY's carter selection process. Many selected carters had long histories of violations and carters with fewer violations were not advantaged in the selection process. Additionally, pricing differences within zones varied and went unexplained; a handful of carters were awarded a disproportionate number of zones; and implementation has been slower than expected. These issues raise questions about whether the program will deliver its promised benefits to New Yorkers.

What changes did the agency commit to make following the audit?

- DSNY agreed to closely monitor some carters (including those with the most violations).
- DSNY agreed to better enforce its monitoring of vendor performance, especially regarding safety and compliance metrics.

Report Findings

⚠ 8 of the 10 carters with the most safety, labor, or environmental violations were still awarded zones.

⚠ Maximum prices varied widely within zones, with no clear explanation.

⚠ Pricing was heavily emphasized during the selection process, while safety and labor standards were less of a concern.

⚠ Four large companies received over 70% of all zone assignments, reducing competition and diversity among carters.

⚠ Rollout of the CWZ program has been delayed with just one zone operational at the beginning of 2025.

Report Recommendations		Agency Response
1	Track various indicators (e.g., vehicle miles traveled, safety violations, complaints received, vehicle inspections) to ascertain the extent to which the intended purposes of LL199 are being realized. These should be incorporated into the Mayor's Management Report and published quarterly to ensure transparency.	PARTIALLY AGREED³⁹
2	Investigate the reasons for the wide price differences charged by carters within certain zones and determine whether such differences hinder the ability of businesses to obtain carting services at a reasonable rate.	DISAGREED
3	Closely monitor the performances of Cogent and New York Recycling to ensure compliance with the CWZ agreement.	AGREED
4	Ensure that the monitor assigned to Cogent and New York Recycling submits required reports to DSNY updating the agency of its investigations.	AGREED

Implementation Status

At the time this report was prepared, the status of recommendations are still pending.

³⁹ DSNY agreed that tracking the various indicators is critical to monitoring the success of the CWZ program. However, it stated that "LL 199 already imposes nearly identical tracking and reporting requirements on DSNY. Specifically, Section 16-1011 of the New York City Administrative Code requires the Department to issue an annual report to Council and the Mayor and post such report on DSNY's website. [...] Therefore, incorporating these indicators into the Mayor's Management Report as suggested by the Comptroller would be unnecessarily duplicative."

Review of the New York City Police Department's Body Worn Camera Program (MD24-071S)

Report at a Glance

What questions did the report look at?

- Is NYPD's body-worn camera (BWC) program effectively implemented and monitored?
- Does NYPD respond to public requests for BWC footage (FOIL requests) in a timely, transparent manner?

Why does it matter for New Yorkers?

Body-worn cameras are a critical tool for ensuring that law enforcement acts with transparency and accountability, and for improving trust between the public and police. In 2019, all NYPD patrol officers began wearing BWCs. Under the Freedom of Information Law (FOIL), the public has the right to access government records, and anyone can request BWC footage by submitting a FOIL request.

The review found that NYPD was chronically delayed in responding to FOIL requests for BWC footage. Over a four-year period (2020–2024), the department did not respond to 4,591 (85%) of 5,427 requests within a 25-business-day timeframe. More than half the time, NYPD did not meet its own internal goal to grant or deny requests within 95 business days. On average, it took NYPD 133 business days to grant or deny requests.

The review found that BWC activation rates are inconsistent. In a sample of over 12,000 videos on file, NYPD could not find footage for 4,319 (36%) of them. Similarly, officers either activated late or stopped recording early in 1,436 (18%) of almost 8,000 instances.

Finally, NYPD's own internal oversight needs improvement. Over half of precinct self-inspections were missing in sampled months, completion of stop report reviews (802 Worksheets) was limited, and use-of-force incidents were not always properly tracked through Threat, Resistance, or Injury (TRI) reports.

When BWCs are not activated or activated improperly, oversight of police actions can be weakened, especially in high-stakes situations like stops, searches, and uses of force. Additionally, delayed or denied access to footage can frustrate efforts by community advocates and oversight bodies to hold law enforcement accountable.

What changes did the agency commit to make following the review?

- NYPD agreed that there is a need to boost staffing of its Legal Bureau to address FOIL requests promptly.
- NYPD agreed to ensure that all officers on patrol are provided with cameras and investigate causes of lower activation rates in certain boroughs.

- NYPD agreed to ensure that all use-of-force incidents are adequately documented.

Report Findings

⚠ NYPD's FOIL response times are extremely slow and regularly exceed standard timeframes.

⚠ BWC activation rates are inconsistent—36% of sampled incidents had no corresponding footage.

⚠ Use-of-Force incidents are not always tracked properly.

Report Recommendations		Agency Response
1	Increase Legal Bureau staffing levels and make additional efforts to address FOIL requests timely.	AGREED
2	Provide timely notice to requesters that a required 160.50 waiver document is missing.	AGREED
3	Take steps to ensure that all officers who perform patrol duties are immediately provided with cameras.	AGREED
4	Formalize a policy for conducting ICAD reviews including the number, frequency, and sampling plan of reviews, and include in the methodology that ICAD interactions that are not required to be recorded be excluded from the reviews and replaced with additional samples.	AGREED
5	Investigate causes of lower activation rates in certain boroughs and precincts and take steps to ensure they continue to improve across the City.	AGREED
6	Conduct an overall assessment of its BWC program to determine whether the program has improved compliance with policies, regulations, and laws, including respectful interaction with the public.	AGREED ⁴⁰
7	Aggregate the results of its various BWC reviews (e.g., ICAD reviews, Self-Inspections, 802 Worksheets, etc.) to identify anomalies or trends and address them accordingly.	AGREED
8	Ensure that Self-Inspections are completed monthly as required.	AGREED
9	Ensure independent reviews of Self-Inspections are conducted by PSD.	AGREED

⁴⁰ NYPD essentially agreed with this recommendation, indicating that it reflects its current practice.

10	Ensure that 802 Worksheets are completed monthly as required.	AGREED
11	Take additional steps to ensure compliance with its Stop/Frisk policy by identifying improper stops.	AGREED⁴¹
12	Review a sample of BWC footage from Level 2 and Level 3 Investigative Encounters to determine whether force was used and whether a TRI Report was completed, as required.	UNDER CONSIDERATION
13	Ensure that TRI reports are completed for all use-of-force incidents.	AGREED⁴²

Implementation Status

At the time this report was prepared, the status of recommendations was still pending.

⁴¹ NYPD essentially agreed with this recommendation, indicating that it reflects its current practice.

⁴² NYPD essentially agreed with this recommendation, indicating that it reflects its current practice.

Audit of the Department of Education's Oversight over its Contracted School Bus Services (FM25-PAR20002)

Audit at a Glance

What questions did the audit look at?

Did the New York City Department of Education (DOE) have proper operational controls to ensure that school bus service providers delivered timely, reliable transportation and complied with laws, regulations, and contract terms?

Why does it matter for New Yorkers?

DOE's school bus system transports more than 125,000 students each day to public, charter, and nonpublic schools, including students with disabilities who may rely on specialized services. Families depend on these services and failures in the system directly affect student attendance and access to mandated services.

The audit found that DOE did not adequately oversee school bus vendors or hold them accountable for poor performance. DOE did not proactively use readily available GPS and complaint data to identify trends and address problems. Instead, DOE relied on investigations of individual complaints to assess vendor performance but did not promptly investigate them or take effective corrective action to resolve them. In addition, DOE did not ensure that GPS devices were installed and used, or that practice runs were conducted for bus routes.

The audit also found that bus routing and student tracking technology was not implemented.

These lapses caused students to miss class time, support services, and free school meals, with special education students disproportionately impacted. These issues undermine educational equity and students' academic performance and progress may suffer as a result. Moreover, delays inconvenienced families and weakened public trust in DOE's ability to manage basic transportation services.

What changes did the agency commit to make following the audit?

- DOE agreed to better analyze trends by assigning contract managers to monitor vendors, reviewing prior complaints as part of investigations, conducting GPS reviews, and comparing planned route start and end times to actual arrival times for students.
- DOE agreed to strengthen vendor accountability by incentivizing good performance and providing greater accountability for poor performance, assessing damages for noncompliance based on GPS data, taking routes away from poor performers, and collecting route information from vendors at the beginning of the school year.

- DOE agreed to improve administrative oversight by establishing guidance on methods and tools staff should use when reviewing complaints and documenting all performance discussions with vendors.

Audit Findings

⚠ DOE did not use readily available data to monitor school bus vendor performance and identify problems.

⚠ DOE did not adequately and promptly investigate no show/late service complaints or take effective action to address chronic issues.

⚠ Special education students were disproportionately impacted by unreliable bus service, including excessive delays and problem runs.

⚠ Routing technology aimed at improving bus services delayed for four years due to development issues, with no timeframe for implementation.

Audit Recommendations		Agency Response
1	Assign contract managers to vendors contracts to proactively conduct routine reviews and assessments of complaint data and vendor-reported delays to identify problematic routes and vendors that are performing poorly, discuss issues with vendors, implement corrective action plans, monitor progress until performance improves, and assess liquidated damages if vendors do not improve timely.	AGREED
2	Review and use prior complaints made regarding transportation issues as part of its investigation process to identify trends in vendor's poor performance.	AGREED
3	Consistently maintain vehicle numbers that service school bus routes and use them to systematically perform a GPS review for all complaints related to no/late service.	AGREED
4	Routinely compare planned route start and end times to actual times for students to determine whether vendors comply with key contract performance standards and IEPs, and issue violations and penalties as appropriate.	AGREED
5	Consider implementing enhanced minimum performance standards for timely and reliable service and adding minimum performance standards related to ride times and complaints in its new school bus vendor contracts. This should include:	PARTIALLY AGREED ⁴³

⁴³ DOE stated that it is currently working on different methods to develop and implement performance standards for timely and reliable service outside of the contract, but DOE did not agree to implement performance standards for ride times.

	a. Setting minimum monthly performance metrics for on-time performance, no service, and ride times based on GPS data, and complaints relative to the number of routes, scheduled trips, or completed trips;	
	b. Establishing a structure that incentivizes good performance and provides greater accountability for poor performance and escalation including a tiered scale of penalties based on monthly performance metrics and increased penalties for repeated violations;	AGREED
	c. Assessing liquidated damages for noncompliance based on GPS data; and	
	d. Taking routes away from the poorest performers or terminating their contracts.	
6	Collect Curb-to-School route information, including pick-up and drop-off times, from the vendor at the beginning of each school year and not solely depend on the vendor to maintain this information.	AGREED
7	Fully enforce the terms of school bus contracts and assess penalties when GPS devices are not operational when buses are in service.	AGREED
8	Ensure that it is recovering any monies distributed to Via Transportation for required work that was not performed.	DID NOT AGREE OR DISAGREE⁴⁴
9	Establish comprehensive policies and procedures that provide guidance on (1) the methods and tools staff should use and consider when reviewing complaints, and (2) requiring supervisory review before resolving complaints.	AGREED
10	Provide vendors with reports detailing planned and actual route start and end times, discuss those reports with vendors, and document those discussions.	PARTIALLY AGREED⁴⁵
11	Formally document and maintain a record of all performance discussions with vendors.	AGREED
12	Formally document amendments made to Via Transportation's new delivery dates and work plan and submit that amendment for registration.	DID NOT AGREE OR DISAGREE⁴⁶

⁴⁴ DOE stated that it will take this recommendation under advisement and that it expects VIA to fully comply with the terms of the contract.

⁴⁵ DOE stated that it engages in dialogue and provides vendors with updated reports/route sheets as needed.

⁴⁶ DOE stated that it will take the recommendation under advisement.

Follow-Up Audit of the Financial and Operating Practices of the 47th Street Business Improvement District (FK23-080F)

Audit at a Glance

What questions did the audit look at?

- Did the 47th Street Business Improvement District (BID) and the Department of Small Business Services (SBS) implement recommendations made in a 2019 Comptroller's audit?

Why does it matter for New Yorkers?

In 2019, the Office of the Comptroller issued an audit of the 47th Street BID—a public-private partnership that covers a portion of Manhattan's West 47th Street between 5th and 6th Avenues, commonly known as the Diamond District. This audit found serious issues with governance and oversight and made 23 recommendations to the BID and four recommendations to SBS, which oversees the BID's contract. The follow-up audit found that the BID has partially implemented nine recommendations and did not implement 14 recommendations. SBS implemented two recommendations, partially implemented one, and did not implement another.

Additionally, the follow-up found several new concerning problems: most notably, issues with board governance, BID membership, and payments to its Executive Director. According to the 47th Street BID's Annual Report to SBS, fewer than 3% of businesses in the district are members of the BID. Also, the BID failed to monitor the attendance and leave of the Executive Director. In the end, the BID overpaid this executive almost \$33,000.

The follow-up also found that the BID did not seek or obtain approval from the City before allowing Netflix to film a project in the district. Netflix paid the BID more than \$100,000, which included a "donation" for filming and security. The auditors could not determine whether the BID reported all revenue associated with this agreement.

The initial audit in 2019 found serious governance issues with the 47th Street BID. The new findings indicate that these issues were not resolved, and have, in fact, gotten worse. In response, we have made 14 new recommendations to improve BID governance, compliance, and accountability. We recommend that SBS place the BID's assessments in escrow until the BID agrees to change its by-laws and leadership and agrees to implement the audit's recommendations.

What changes did the agency commit to make following the audit?

- SBS agreed to work with the 47th Street BID to ensure that the BID follows New York State law, help oversee BID elections, and provide guidance on membership drives.

- SBS agreed to consult with the New York City Law Department and the Department of Finance and consider placing the BID's finances in escrow until a new contract is signed and the BID changes its by-laws and leadership and agrees to implement the report's recommendations.

Follow-up Audit Findings

- ⚠ The 47th Street BID did not implement 14 of 23 recommendations made by the auditors in 2019.
- ⚠ The BID's committee member appointments violate NYS law.
- ⚠ The BID's amended by-laws allow the Board Chair to centralize power over district operations.
- ⚠ Fewer than 3% of district businesses participate in the BID.
- ⚠ The BID allowed filming on City streets without informing or seeking approval from the City.
- ⚠ The BID paid the Executive Director almost \$33,000 for time not worked.
- ⚠ The BID did not require a subcontractor to submit required background information.

Initial Audit Recommendations – 47th Street BID		Status
1	Cease providing supplemental security services that do not principally benefit property within the District.	NOT IMPLEMENTED
2	Immediately seek reimbursement for security services that were incurred for Building 1.	PARTIALLY IMPLEMENTED
3	Separate the duties for administering the security program or implement compensating controls and update its policies and procedures.	NOT IMPLEMENTED
4	Monitor budgeted and actual expenditures to identify variances	NOT IMPLEMENTED
5	Ensure that the 47th Street BID Executive Director obtains the Board's approval for budget modifications.	NOT IMPLEMENTED
6	Ensure that its Annual Report includes narrative explanations for budget variances greater than 10 percent.	PARTIALLY IMPLEMENTED
7	Determine and document employee compensation in accordance with IRS regulations.	NOT IMPLEMENTED
8	Maintain records of employee attendance and time.	PARTIALLY IMPLEMENTED
9	Maintain records to show that personnel actions are properly approved.	NOT IMPLEMENTED
10	Monitor payroll transactions to ensure that they have been properly approved.	NOT IMPLEMENTED

11	Obtain a fidelity bond or insurance to protect the organization from embezzlement and other fraudulent acts.	NOT IMPLEMENTED
13	Independently review and monitor purchase and payment documentation.	NOT IMPLEMENTED
14	Competitively procure goods and services whenever possible.	NOT IMPLEMENTED
15	Maintain procurement documentation.	NOT IMPLEMENTED
16	Maintain copies of vendor contracts and invoices.	PARTIALLY IMPLEMENTED
17	Immediately adopt and oversee the implementation of a conflict of interest policy.	PARTIALLY IMPLEMENTED
18	Obtain annually and maintain conflict of interest disclosures for all directors, officers, and employees.	PARTIALLY IMPLEMENTED
19	Ensure that its directors, officers, and employees comply with the conflict of interest policy.	NOT IMPLEMENTED
20	Review member information to ensure that individuals are qualified for membership in each of their respective classes.	NOT IMPLEMENTED
21	Ensure that property owners who pay assessments comprise the majority of the Board.	NOT IMPLEMENTED
22	Immediately hold elections to fill the Board Vice Chairman and Vice President positions or, in the alternative, take required action to eliminate the positions.	PARTIALLY IMPLEMENTED
23	Maintain complete and accurate records of all Board and Board committee meetings.	PARTIALLY IMPLEMENTED
26	Immediately post on its website current information required by its contract.	PARTIALLY IMPLEMENTED
Initial Audit Recommendations – SBS		Agency Response
12	Consider requiring BIDs to obtain fidelity bonds or insurance to protect them from embezzlement and other fraudulent acts.	IMPLEMENTED
24	Consider the findings of this report when evaluating the 47th Street BID's past performance and making future contracting decisions.	IMPLEMENTED
25	Give written notice to the 47th Street BID of its breach of contract and ensure that it cures issues cited in this report within a reasonable period of time.	NOT IMPLEMENTED
27	Review annual reports to ensure that BIDs include required budgetary and other requested information.	PARTIALLY IMPLEMENTED

Follow-up Audit Recommendations – SBS		Agency Response
1	Instruct the Department of Finance to place the 47th Street BID's assessments in escrow until the BID signs a new contract, changes its by-laws and leadership, and agrees to	AGREED

	a schedule to implement the audit's recommendations by March 31, 2025.	
2	Ensure that the 47th Street BID immediately appoints an Executive Committee in accordance with NPCL 712(a).	AGREED
3	Oversee the 47th Street BID's membership drive and elections of Directors and Officers.	AGREED
4	Consult with legal counsel to determine whether SBS, as an oversight body, is authorized under NPCL Section 602 to amend the 47th Street BID's by-laws	AGREED
5	Determine the total revenue associated with the Netflix agreement, coordinate with MOME to determine the consideration to be paid to the City, and deduct this amount from the 47th Street BID's assessments.	AGREED
6	Ensure that the 47th Street BID's security subcontractor submits required questionnaires and conducts background checks and determine whether proposed vendors are responsible.	AGREED
Follow-up Audit Recommendations – 47th Street BID		Agency Response
7	Consult with SBS and legal counsel and amend the by-laws to comply with NPCL and best practices.	AGREED
8	Cease its practice of allowing non-voting Directors to vote to elect Officers and conduct business.	AGREED
9	Undertake an annual membership drive to distribute information to all local property owners, and commercial and residential tenants, to inform them of their right to register as a member of the BID and to be eligible to vote for Board Directors and other BID matters.	DISAGREED
10	Recoup inappropriate payments, totaling \$32,846, made to the Executive Director for time not worked during Calendar Year 2022.	DISAGREED
11	Review the Executive Director's time and attendance records for Calendar Year 2023, determine whether the Executive Director took leave he was not entitled to, and if so, recoup additional payments for time not worked.	AGREED
12	Monitor leave usage to ensure that employees do not exceed vacation and sick day allowances.	AGREED
13	Review time and attendance records to verify employees' time worked and approve wages prior to issuing payment.	AGREED
14	Immediately require subcontractors who are paid more than \$100,000 to submit background information to SBS.	AGREED

Implementation Status

SBS reported that two recommendations (3 and 6) have been implemented, and the remaining four recommendations addressed to SBS are pending.

The 47th Street BID reported that five recommendations (8, 11, 12, 13 and 14) have been implemented, two recommendations (7 and 9) are pending, and the remaining recommendation (10) will not be implemented. The Board stated that it affirmed the Executive Director had prior approval for an extended sick leave and will not seek reimbursement from the Executive Director.

A Compilation of Audits of Agencies' Oversight of Prime Vendors' Use of Subcontractors on Health and Human Services Contracts (FP26-057S)

Report at a Glance

What questions did the review look at?

- Did New York City's four Health and Human Services (HHS) agencies properly oversee prime vendors' subcontractors, including approval, vetting, and payment?

Why does it matter for New Yorkers?

New York City's HHS agencies provide critical services to New Yorkers, typically through contracts between agencies and non-profit providers. These organizations (prime vendors) sometimes enter into subcontract agreements with other vendors (subcontractors).

Due to a history of risks in the City's subcontracting process, the Comptroller audited the City's HHS agencies to examine their subcontractor relationships, including the Department of Health and Mental Hygiene (DOHMH), Administration for Children's Services (ACS), Department for the Aging (NYC Aging), and the Department of Social Services (DSS) agencies, which is comprised of the Human Resources Administration (HRA) and the Department of Homeless Services (DHS).

The audit found that, from Fiscal Years 2022 to 2024, prime vendors paid a total of more than \$8.6 million to unauthorized subcontractors. Agencies could not provide evidence showing that subcontractors were consistently vetted or tracked. Also, each agency had different practices for payment terms, with no standard requirements for primes to pay subcontractors quickly. Use of M/WBE subcontractors was also very low, with less than 5% of dollars going to M/WBE firms.

Because subcontractors do not deal directly with the City, it is critical that primes ensure that their subcontractors are competent, properly vetted, and paid fairly. Without adequate oversight, the City risks overpaying and supporting unapproved or under-qualified organizations, potentially undermining service quality and wasting taxpayer dollars.

What changes did the agencies commit to make following the audit?

- In general, the four agencies agreed to strengthen oversight by ensuring that subcontractors are properly approved, documented, vetted, and fully entered into City systems before payments are made.

Report Findings

⚠ The City's prime vendors paid \$8.6 million to unauthorized subcontractors.

⚠ Guidance concerning subcontractor payment is inconsistent.

⚠ Agencies did not ensure that subcontractors were paid on time.

Report Recommendations	Agency Responses			
	DOHMH	NYC Aging	ACS	DSS
1 Prevent payments to unapproved subcontractors by carefully reviewing invoices submitted by the prime vendors, periodically reviewing prime vendors' general ledgers, and requesting and reviewing subcontractors' agreements and invoices.	AGREED	AGREED	DISAGREED	DISAGREED
2 Ensure that prime vendors are submitting subcontractors' information including sub agreements and payment information as required in PASSPort (previously PIP and HHS systems).	AGREED	AGREED	AGREED	PARTIALLY AGREED
3 Document the process of vetting and conducting background checks of proposed subcontractors.	AGREED ⁴⁷	AGREED	AGREED	DISAGREED
4 Ensure that competitive bidding is conducted by prime vendors when selecting subcontractors.	AGREED	AGREED	NOT APPLICABLE	DISAGREED

⁴⁷ DOHMH agreed with this recommendation and stated that it has already been implemented.

5	Review subcontract agreements for prompt payment stipulations and ensure that prime contractors are paying their subcontractors in accordance with those stipulations.	AGREED	AGREED	DID NOT ADDRESS	PARTIALLY AGREED
6	Ensure costs for goods and services provided by subcontractors are actually incurred by prime vendors as a condition of reimbursement from the City.	NOT APPLICABLE	AGREED	NOT APPLICABLE	NOT APPLICABLE
7	Implement DOI's 2021 recommendations to City agencies and comply with MOCS' policies and directives created to provide guidance for their implementation.	NOT APPLICABLE	AGREED	AGREED	DISAGREED
8	Consider increasing their use of M/WBE contractors and encourage their prime vendors to increase their use of M/WBE subcontractors.	PARTIALLY AGREED⁴⁸	AGREED	AGREED	DISAGREED

⁴⁸ DOHMH found this recommendation unnecessary, arguing that it already uses M/WBE vendors.





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