



DISTRICT OF COLUMBIA
OFFICE OF THE INSPECTOR GENERAL
CHARLES J. WILLOUGHBY
INSPECTOR GENERAL

Inspections & Evaluations Division

Summary of Compliance Activities

October 2012

COMPLIANCE

OCTOBER 5, 2012

GOVERNMENT OF THE DISTRICT OF COLUMBIA
Office of the Inspector General

Inspector General



October 5, 2012

The Honorable Muriel Bowser
Chairperson
Committee on Government Operations
Council of the District of Columbia
1350 Pennsylvania Avenue, N.W., Suite 110
Washington, D.C. 20005

Dear Councilmember Bowser:

I am writing to provide you with a summary of the Office of the Inspector General (OIG) Inspections and Evaluations Division's (I&E's) work over the past 18 months¹ to monitor agencies' compliance with recommendations presented to them in reports of inspection (ROIs), reports of special evaluation, Management Alert Reports (MARs), and Management Implication Reports (MIRs).

Background

The OIG monitors agencies' compliance with published recommendations to ensure a continued effort to mitigate deficient conditions noted in our reports and improve service delivery to District residents and others who have a vested interest in efficient and effective government operations.

Upon publication of a final ROI or special evaluation, the I&E inspection team sends the agency a compliance form (see Attachment 1 for a sample) for each recommendation presented in the report that has not been fully implemented, i.e., is still considered to be "open." Agencies are instructed to use the forms to provide: (1) a narrative regarding corrective actions the agency has taken; and (2) the name and contact information of the agency management official responsible for the corrective action(s). We ask agencies to furnish an initial response 60 days after the date of report publication; thereafter, I&E uses the contact information provided to send targeted requests to the responsible manager for additional information, if needed. Similarly, when the OIG issues MARs and MIRs to District agencies and other entities, they are asked to respond to the conditions cited and the recommendations presented in the reports.

¹ The first *Summary of Compliance Activities* report issued by I&E was published in February 2011.

Methodology

To determine the status of an individual recommendation, I&E considers several sources of information. First, I&E reviews the original ROI, report of special evaluation, MAR, or MIR, paying particular attention to the specific conditions cited in the report and any comments provided by the head of the inspected agency in response. An agency's comments often provide an indication of actions it expects to take to correct a condition cited in the report and/or comply with an OIG recommendation. I&E then assesses all materials submitted by the inspected agency (e.g., compliance forms, copies of policies and procedures implemented since completion of the inspection).

In some instances, I&E closes out recommendations based on written comments provided by the inspected agency following its review of a MAR, MIR, or draft report. In others, I&E closes out a recommendation based on the information presented in the compliance form submitted by the agency. In certain instances, after considering the criticality of the condition cited and the agency's corrective actions, I&E does not close out a recommendation even though the inspected agency's reported actions appear to have either met the intent of the OIG's recommendation or mitigated/corrected the condition cited by the OIG.² In these instances, I&E will request information (e.g., a copy of a procedure that an agency reportedly implemented) from an agency to verify its action before closing out the recommendation. Finally, there are instances where I&E closes out a recommendation based on the agency's narrative and other information provided, but plans to contact the agency in the future to spot check continued compliance.

From February 2011 to present, I&E reviewed over 200 compliance forms. Table 1 on the next page presents a summary of I&E's analysis. For any agency with one or more open recommendations, I have identified the open recommendations in a series of agency-specific attachments to this letter.

² If, for example, the OIG found that an agency had failed to conduct statutorily-required criminal background checks on its employees and recommended that it immediately do so, I&E would not close out the recommendation simply because the agency reported that it had complied with the recommendation. This is an instance where, given the criticality of the condition cited, the OIG would request documentation that the checks had been conducted and the results analyzed, before closing out the recommendation.

Table 1 – Status of I&E Recommendations

<u>Inspected Agency</u> (Report Number; Date of Publication) ³	<u>Recommendations</u>		
	Total	Closed	Open
Department of Human Services, Office of Shelter Monitoring (12-I-0049JA; 8/31/12)	14	6	8
Department of Human Services, D.C. General Shelter (12-I-0048JA; 8/20/12)	2	0	2
Department of Human Services, 801 East Shelter (12-I-0047JA; 8/1/12)	7	0	7
Department of Employment Services – Office of Unemployment Compensation – Part II (12-I-0046CF; 7/13/12)	21	8	13 ⁴
Executive Office of the Mayor; Department of Youth Rehabilitation Services – <i>Juvenile Abscondence Review Committee Has Not Convened in Accordance with A District Law That Went Into Effect in March 2011</i> (MAR 12-I-003; 4/30/12)	2	0	2 ⁵
D.C. Public Schools; Department of Human Resources; Office of the Attorney General – <i>D.C. Public Schools Does Not Conduct Mandatory Drug and Alcohol Testing of Employees in Safety-Sensitive Positions as Required By Law</i> (MAR 12-I-002; 4/27/12)	3	0	3 ⁶

³ Readers viewing the electronic version of this compliance report may access additional content by clicking the report numbers/dates of publication in the table, which are hyperlinks to oig.dc.gov.

⁴ This figure includes two recommendations cited in MAR 11-I-001, *Computer Programming Safeguards for Accurate Issuance of Unemployment Benefits Were Inappropriately Turned Off Due to Inadequate Internal Controls*, which is both summarized in report # 12-I-0046CF and available on the OIG’s website [here](#).

⁵ An update on the status of these recommendations will be included in the final Report of Special Evaluation pertaining to DYRS that I&E is currently drafting. (See page 106 of the OIG’s FY 2013 Audit and Inspection Plan, which is available at oig.dc.gov and [here](#), for more information about I&E’s special evaluation of DYRS.)

⁶ An update on the status of these recommendations will be included in the final Report of Special Evaluation pertaining to mandatory drug and alcohol testing programs in District agencies that I&E is currently drafting. (See page 108 of the OIG’s FY 2013 Audit and Inspection Plan for more information on this special evaluation.)

<u>Inspected Agency</u> (Report Number; Date of Publication) ³	<u>Recommendations</u>		
	Total	Closed	Open
Fire and Emergency Medical Services Department – D.C.’s Primary Fireboat is 50 Years Old and In Need of Thorough Assessment; FEMS Apparently Has No Strategy For Replacing This Critical, Outdated Apparatus (MAR 12-I-001; 3/13/12)	3	0	3 ⁷
Department of Human Services – Adult Protective Services – Sufficiency of District Agency Services Provided to a District Resident (12-I-0045; 2/1/12)	13	7	6
Metropolitan Police Department – Youth Investigations Division (11-I-0044FA; 11/9/11)	18	14	4
Department of Health – Addiction Prevention and Recovery Administration – Excerpt of Report of Special Evaluation – Detoxification and Stabilization Center (11-I-0043HC; 9/14/11)	24	0	24
Fire and Emergency Medical Services Department; Office of Unified Communications – Number of FEMS Personnel Stationed at OUC Not Justified in Light of Many Operational Vacancies (MAR 11-I-003; 8/10/11)⁸	2	0	2 ⁹
Metropolitan Police Department – Special Operations Division – Approval and Conduct of Non-Dignitary Escorts (11-I-0041FA; 7/12/11)	11	9	2
Office of Administrative Hearings – District Government Agency Representatives’ Failure To Appear at OAH Proceedings May Result in Rulings Unfavorable to the District (MAR 11-I-002; 6/15/11)	4	4	0

⁷ An update on the status of these recommendations will be included in a final Report of Re-Inspection regarding conditions in FEMS fire stations that I&E is currently drafting.

⁸ The highlighted dates of publication in the table are intended to call the reader’s attention to those OIG recommendations that have been open for more than 1 year.

⁹ An update on the status of these recommendations will be included in a final Report of Re-Inspection regarding conditions in FEMS fire stations that I&E is currently drafting.

<u>Inspected Agency</u> (Report Number; Date of Publication) ³	<u>Recommendations</u>		
	Total	Closed	Open
Fire and Emergency Medical Services Department – Review of FEMS December 2, 2008, “No Transport” Response (11-I-0040FB; 6/2/11)	8	4	4
Child and Family Services Agency – Child Protective Services Administration (11-I-0039RL; 4/20/11)	23	19	4
Office of the City Administrator; D.C. Superior Court – Lack of Awareness, Policies, and Procedures, Training Requirements, and Oversight Mechanisms Regarding the Reporting of Suspected Abuse and Neglect of Elders and Other Vulnerable Adults (MIR 11-I-003; 3/31/11)	9	0	9 ¹⁰
Department of Employment Services – Office of Unemployment Compensation – Part I Part I (11-I-0038CF; 2/10/11)	8	1	7
Office of the City Administrator – District Agencies Without Comprehensive, Up-to-Date, or Written Policies and Procedures Have Increased Risk of Poor Performance, Safety and Security Issues, as Well As Fraud, Waste, and Abuse (MIR 11-I-002; 12/20/10)	3	0	3 ¹¹
Office of the City Administrator – Lack of Awareness, Policies and Procedures, Training Requirements and Oversight Mechanisms Regarding the Reporting of Suspected Child Abuse and Neglect in District Entities (MIR 11-I-001; 10/8/10)	8	0	8 ¹²
Department on Disability Services – Part I (10-I-0037JM; 9/16/10)	18	15	3

¹⁰ The OIG sent copies of the MIR to the Office of the City Administrator, Department of Human Resources (DCHR), Department of Human Services (DHS), and the D.C. Superior Court (DCSC). The OIG received responses from DCHR, DHS and DCSC, but not the OCA.

¹¹ Despite multiple requests for comment, the OIG did not receive a response from the OCA.

¹² The OIG acknowledges receipt of OCA’s response dated November 19, 2010. It also acknowledges receipt of the Department of Human Resources (DCHR) response dated October 22, 2010, which outlined proposed steps DCHR would take in order to satisfy open recommendations. The OIG recognizes that many of the proposed actions are collaborative efforts.

<u>Inspected Agency</u> (Report Number; Date of Publication) ³	<u>Recommendations</u>		
	Total	Closed	Open
Office of the City Administrator – Inadequate Safeguarding of Sensitive Employee, Customer, and Client Information in District Agencies: A Recurrent Failure (MIR 10-I-001; 9/2/10)	5	0	5 ¹³
Department of Health – Health Regulation and Licensing Administration – DOH Not Complying With District Law That Requires Health Professional License Applicants to Undergo a Criminal Background Check (MAR 10-I-004; 8/30/10)	1	1	0
Department of Real Estate Services¹⁴ – Protective Services Police Department (10-I-0036AM; 5/14/10)	21	11	10
Homeland Security & Emergency Management Agency (10-I-0035BN; 4/22/10)	5	5	0
Public Service Commission (10-I-0033DH; 2/2/10)	19	19	0
<u>Total</u>	<u>252</u>	<u>123</u>	<u>129</u>

Ongoing Compliance Activity and Reporting

For all the reports referenced in Table 1, I&E tracks the status of each recommendation and documents subsequent communications with and planned compliance activities at the inspected agency.

Procedures are in place to ensure consistent, periodic follow-up with inspected agencies. Upon publication of a report, I&E’s compliance officer receives a copy of the report and the compliance forms sent to the inspected agency. Sixty days after publication, if the inspected agency has not submitted completed compliance forms or contacted the OIG regarding the status of its submission, I&E’s compliance officer will contact the agency. Depending on available resources and priorities imposed by ongoing inspection projects, the compliance officer will engage inspected agencies through various follow-up activities, such as requests for written

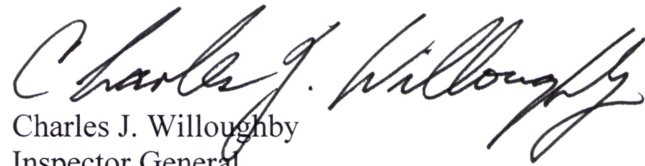
¹³ The OIG acknowledges receipt of OCA’s October 13, 2010 response. In this letter, OCA noted that the issues cited had been referred to the Office of Risk Management, which would address the recommendations.

¹⁴ Effective October 2011, duties of the Department of Real Estate Services were assumed by the newly-created Department of General Services.

updates and documentation, in-person interviews, and on-site observations, until all recommendations are closed.

If you have questions or require additional information, please contact me at (202) 727-2540.

Sincerely,



Charles J. Willoughby
Inspector General

CJW/ef

Attachments

cc: See Distribution List

DISTRIBUTION:

The Honorable Vincent C. Gray, Mayor, District of Columbia
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The Honorable José E. Serrano, Ranking Member, House Subcommittee on Financial Services and General Government, Attention: Laura Hogshead (via email)

The Honorable Daniel K. Inouye, Chairman, Senate Committee on Appropriations,

Attention: Charles Houy

The Honorable Thad Cochran, Ranking Member, Senate Committee on Appropriations

The Honorable Richard Durbin, Chairman, Senate Subcommittee on Financial Services and
General Government, Attention: Marianne Upton (via email)

The Honorable Jerry Moran, Ranking Member, Senate Subcommittee on Financial Services and
General Government, Attention: Dale Cabaniss (via email)

Attachment 1 – Sample Compliance Form

Use this form to report actions on recommendations made by the Office of the Inspector General (OIG) following an inspection of your agency, program, or other matters. Read the OIG Inspection Report for details about OIG findings and recommendations. Include all information necessary to show compliance with the recommendation. *Fax and then mail* the completed form and any attachments to Office of the Inspector General, Attention: Compliance Officer. The OIG fax number is 202/727.9903. The address is 717 14th Street, Northwest, Washington, D.C. 20005. Telephone: 202/727.2540.

SPECIAL EVALUATION OF: Metropolitan Police Department, Youth Investigations Division

DATE OF REPORT PUBLICATION: November 9, 2011

OIG REPORT NUMBER: OIG No. 11-I-0044FA

Summary of Management Alert Report 3: Policy and training deficiencies hinder MPD officers' responses to suspected child abuse and neglect.

RECOMMENDATION:

That the Chief of Police update the Inspector General on MPD's efforts to work with CFSA to:

- a. develop additional training for all affected MPD members (beyond CFSA's online mandated reporter training) to ensure that officers understand their specific responsibility to recognize, respond to, and report suspected child abuse and neglect;
- b. receive accurate information regarding which MPD officers have completed CFSA online training for mandated reporters; and
- c. provide the Inspector General with the current percentage of MPD employees who have taken CFSA's online training for mandated reporters.

RESPONSE DUE TO THE January 9, 2012
OIG: _____

AGENCY ACTION TAKEN (attach additional information as necessary):

Attachment 2 – Department of Human Services – Office of Shelter Monitoring (OSM)

This report of special evaluation was published on August 31, 2012. The agency has not yet submitted compliance forms for the recommendations contained in the report.

- That the Director of the Department of Human Services (D/DHS) finalize its draft policies and procedures to guide the work of OSM employees and provide OSM monitors with training on these policies.
- That the D/DHS develop and implement an electronic system for tracking homeless provider deficiencies and corrective actions, train employees on how to use the system, and ensure that providers take corrective actions.
- That the D/DHS develop and implement an automated system for tracking homeless shelter complaints and train employees on the use of the new system.
- That the D/DHS ensure that OSM conducts and documents annual site visits, as required by law, at all District homeless shelters.
- That the D/DHS amend OSM's Monitoring Inspection Form to include an assessment of: 1) whether shelters are handicap accessible; 2) the security of clients' prescription medications; 3) the adequacy of first aid supplies; 4) the effectiveness of on-site security; 5) subcontractors' contractual requirements and requirements found in providers' program rules; 6) the adequacy of policies and procedures inside the shelter; 7) the availability of healthcare and substance abuse treatment on-site for clients; and 8) whether OSM's contact information is posted on-site.
- That the D/DHS consider posting OSM's monitoring report findings publicly (e.g., on DHS's website).
- That the D/DHS and homeless services providers collaborate to amend homeless shelter program rules to attach timeframes to the provision of key services to homeless shelter clients and monitor homeless shelter providers' compliance with these timeframes.
- That the D/DHS, in collaboration with The Community Partnership for the Prevention of Homelessness, propose amendments to the Homeless Services Reform Act that would attach timeframes and client service goals to the provision of critical services.

Attachment 3 – Department of Human Services – D.C. General Shelter

This report of special evaluation was published on August 20, 2012. The agency has not yet submitted compliance forms for the recommendations contained in the report.

- That the Director of the Department of Human Services (D/DHS) collaborate with The Community Partnership for the Prevention of Homelessness and DHS's Contracting Officer's Technical Representative to: 1) obtain and evaluate background checks, substance abuse screenings, and tuberculosis tests for all D.C. General employees; and 2) ensure that D.C. General personnel files contain all contractually required information and that OSM monitors accurately evaluate and record personnel file practices at homeless shelters.
- That the D/DHS ensure that D.C. General updates its posted evacuation signs to improve readability.

Attachment 4 – Department of Human Services – 801 East Shelter

This report of special evaluation was published on August 1, 2012. The agency has not yet submitted compliance forms for the recommendations contained in the report.

- That the Director of the Department of Human Services (D/DHS): 1) collaborate with the Department of General Services (DGS), The Community Partnership for the Prevention of Homelessness (TCP), and 801 East management to determine the optimal building configuration that would provide separate doors for egress and ingress, thereby ensuring a functional space for a magnetometer at 801 East; and 2) ensure that the magnetometer is repaired once 801 East's building can accommodate it.
- That D/DHS collaborate with DGS to: 1) assess the capabilities and limitations of 801 East's backup electric power generator; and 2) determine whether the generator needs to be repaired or replaced.
- That D/DHS coordinate with DGS to conduct a thorough security evaluation of the 801 East facility.
- That D/DHS, TCP, and 801 East management, in consultation with qualified medical professionals, implement a system for labeling, securing, logging, and providing residents access to their prescription medications.
- That D/DHS coordinate with TCP, United Planning Organization, and 801 East management to determine the shelter population's transportation needs and address them to the satisfaction of all parties.
- That D/DHS collaborate with TCP and Catholic Charities to ensure that 801 East personnel files contain all contractually required information and ensure that OSM accurately evaluates and records personnel file practices at homeless shelters.
- That D/DHS collaborate with TCP and Catholic Charities to ensure that 801 East employees maintain adequate fire drill records.

**Attachment 5 – Department of Employment Services – Office of Unemployment
Compensation (DOES-OUC)**

This report of inspection (ROI) was published on July 13, 2012. The agency has not yet submitted compliance forms pertaining to the report's recommendations.

- That the Director of DOES (D/DOES) ensure that DOES expeditiously completes its investigation of claimants affected by the safeguards that were turned off and update the Inspector General on the outcome of this investigation. This should include the number and amount of overpayments established as well as the number and amount of restitution made.
- That the D/DOES update the Inspector General on the results of the audit of its computer systems, including any programming mechanisms or internal control weaknesses identified and actions taken to correct any deficiencies that may allow unemployment benefits to be issued in violation of current laws and regulations.
- That the D/DOES ensure that DOES expeditiously implements strategies to educate employers and to enhance the Separation form to improve employers' responses to requests for separation information.
- That the D/DOES expeditiously gain access to and use State Information Data Exchange System (SIDES).
- That the D/DOES ensure that DOES promptly complies with U.S. Department of Labor recommendations regarding implementing internal controls.
- That D/DOES ensure that DOES implements a system to automatically check whether claimants have claims in other states when they file a new claim, regardless of how the claim is filed, and document these verifications. If DOES is unable to automate these verifications, the D/DOES should ensure that employees consistently conduct and document these verifications for all claims.
- That the D/DOES ensure that DOES electronically records the results of all verifications conducted to determine whether claimants are already receiving District unemployment benefits at the time of filing new claims.
- That the D/DOES ensure that OUC has detailed written procedures for conducting and documenting Systematic Alien Verification for Entitlements (SAVE) verifications.
- That the D/DOES work with DHS to fully automate SAVE verifications and documentation of these verifications.

Attachment 5 – Department of Employment Services-Office of Unemployment Compensation (DOES-OUC) - continued

- That the D/DOES ensure that standard operating procedures are finalized and implemented expeditiously for adjudications and all other unemployment claims processes and update the OIG on the progress of this recommendation. The report of special evaluation issued in February 2011 included a similar recommendation.
- That the D/DOES ensure that DOES implement verifications of unemployment benefits with public assistance and workers' compensation benefits, as recommended by the April 2010 Management Alert Report.
- That the D/DOES implement a quality assurance mechanism to ensure that DOES conducts and records all required verifications prior to issuing unemployment benefits.
- That the D/DOES assess current verification processes for unemployment claims to identify and implement ways to further use automation to conduct and record verifications.

**Attachment 6 – Executive Office of the Mayor;
Department of Youth Rehabilitation Services**

This MAR was published on April 30, 2012. An update on the status of these recommendations will be included in the final Report of Special Evaluation pertaining to DYRS that I&E is currently drafting.

- That the Mayor and the D.C. Council determine and document all essential roles and individual responsibilities of the members of the Juvenile Abscondence Review Committee (JARC).
- That the Mayor ensure that the Department of Youth Rehabilitation Services identifies office space sufficient for JARC meetings and provides administrative support.

**Attachment 7 – D.C. Public Schools (DCPS); Department of Human Resources (DCHR);
Office of the Attorney General (OAG)**

This Management Alert Report was published on April 27, 2012. An update on the status of these recommendations will be included in the final Report of Special Evaluation pertaining to mandatory drug and alcohol testing (MDAT) programs that I&E is currently drafting.

- That the D.C. Public Schools (DCPS) Chancellor provide the OIG with a written summary of all actions DCPS has taken to comply with the Child and Youth, Safety and Health Omnibus Amendment Act of 2004 and subsequent E-DPM (electronic District Personnel Manual) instructions, including a description of any collaboration or communication with DCHR.
- That the DCPS Chancellor develop a detailed MDAT program implementation plan that defines major milestones (e.g., conduct collective bargaining with the Washington Teachers Union, if necessary; finalize DCPS's MDAT policy; disseminate the MDAT policy to DCPS employees who occupy safety-sensitive positions; and institute comprehensive testing procedures) and assign deadlines and responsibility for meeting those milestones.
- That DCPS collaborate regularly with DCHR and the Office of the Attorney General to implement a mandatory drug and alcohol testing program at DCPS and provide regular progress updates to the OIG.

Attachment 8 – **Fire and Emergency Medical Services Department**

This Management Alert Report was published on March 13, 2012. An update on the status of these recommendations will be included in a final Report of Re-Inspection regarding conditions at FEMS fire stations that I&E is currently drafting.

- That the Chief of FEMS formulate expeditiously a plan and timeline to have the John H. Glenn (the District's primary fire boat) thoroughly inspected, out of the water, for mechanical and structural deficiencies, and request an assessment of its serviceability and overall seaworthiness;
- That the Chief of FEMS request an analysis of the Glenn's anticipated remaining service life and devise a plan for its periodic inspection, maintenance, and repair to ensure its ability to fulfill its stated mission during its remaining service life; and
- That the Chief of FEMS prioritize: (1) submission of a FY 2012 Port Security Grant Program application, (2) assessment and pursuit of other federal funding opportunities, and (3) development of a detailed plan – to include milestone dates, projected costs, and anticipated funding sources – for the eventual replacement of the Glenn.

Attachment 9 – Department of Human Services (DHS) – Adult Protective Services (APS)

This special evaluation was published on February 1, 2012. On April 6, 2012, DHS submitted a response for each recommendation. Based on a review of the information provided by the agency, the OIG concluded that the following recommendations are still open. Before closing them, the OIG will request and evaluate additional information.

- That the Executive Office of the Mayor and the City Administrator expeditiously implement the Health and Human Services Integrated Case Management Initiative and consider including the Metropolitan Police Department, Fire and Emergency Medical Services Department, Office of the Attorney General, and hospital representatives on the Initiative's executive committee. Client data from these agencies, when appropriate, should also be incorporated in the integrated case management system.
- That the Director of DHS (D/DHS) update its policies and procedures to require a designated number of attempted face-to-face visits within set timeframes.
- That the City Administrator and agencies involved in these kinds of cases collaborate on and implement an operational strategy for interdisciplinary intervention that includes: (a) identifying, based on objective criteria, who should take ownership for directing, coordinating, and documenting case-related actions, from beginning to end; and (b) a process for developing and executing case management and treatment plans, establishing an interagency communication plan, completing outcome evaluations, and compiling related documentation to be used for official reviews, lessons learned, and quality assurance monitoring.
- That the D/DHS update its policies and procedures regarding interviewing collateral contacts and provide regular training on conducting effective collateral interviews.
- That the EOM and the D.C. Council consider modifying D.C. Code § 21-521 to incorporate language on involuntary commitment, similar to that in Virginia or other jurisdictions, that would accommodate "gray area" cases such as this one where existing language impedes efforts to provide the type of assistance called for by the severity of the conditions.
- That the D/DMH train and certify APS social workers as FD-12 Officer-Agents and monitor their certification status.

**Attachment 10 – DC Metropolitan Police Department –
Youth Investigations Division (MPD-YID)**

This report of inspection was published on November 11, 2011. On December 11, 2011, MPD submitted a response for each recommendation. Based on a review of the information provided by the agency, the OIG concluded that the following recommendations are still open. Before closing them out, the OIG will request and evaluate additional information.

- That the Chief of Police ensure that YID develop and implement written policies and procedures for conducting case record reviews and other quality assurance mechanisms to ensure that there is consistent supervisory oversight of investigative practice in the Missing Persons Section.
- That the Chief of Police ensure that written procedures are developed for missing persons administrative functions at YID and that missing persons administrative staff, particularly limited duty officers, receive training on these procedures.
- If MPD intends to continue with the implementation of the Juvenile Case Management System that the Chief of Police assess barriers to its timely implementation in order to expedite its completion.
- That the Chief of Police ensure that performance goals are established and measured for the Missing Persons Section, including, at a minimum, timeliness with completion of PD Forms 252, follow-up activities, and case closure.

**Attachment 11 – Department of Health –
Addiction Prevention and Recovery Administration (DOH-APRA)**

This report of inspection was published on September 14, 2011. On November 1, 2011, DOH submitted a response for each recommendation. Based on a review of the information provided by the agency, the OIG concluded that the following recommendations are still open. Before closing them, the OIG will request and evaluate additional information.

- That the Director of the Department of Health (D/DOH) ensure that APRA monitors substance abuse treatment facilities' adherence to D.C. and federal record retention standards and follows established protocols to address facilities' non-compliance with these standards, specifically:
 - a. That substance abuse treatment facilities promulgate and adhere to written policies and procedures for maintaining patient records, including the process for maintaining patient records following a facility's closure.
- That the D/DOH ensure that APRA monitors substance abuse treatment facilities' adherence to established protocols and addresses facilities' non-compliance with these standards, specifically:
 - a. That intake facilities in the District collect and document all required information and patient consent during intake, pursuant to federal and District requirements.
 - b. That substance abuse treatment facilities thoroughly document patient care in a legible format that provides a clear, detailed report of all events and care rendered.
 - c. That substance abuse treatment facilities document all medication administered to patients, as well as missed dosages.
- That the D/DOH ensure that APRA monitors substance abuse treatment facilities' adherence to established protocols and addresses facilities' non-compliance with these standards, specifically:
 - a. That Level III substance abuse treatment facilities promulgate explicit procedures regarding 24-hour monitoring for those patients who warrant it.
 - b. That in-patient substance abuse treatment facilities establish and promulgate policies and procedures for conducting and documenting patient rounds and other forms of on-site monitoring.

Attachment 11 – **Department of Health – Addiction Prevention and Recovery Administration (DOH-APRA)** - continued

- That the D/DOH ensure that APRA monitors substance abuse treatment facilities' adherence to established protocols and addresses facilities' non-compliance with these standards, specifically:
 - a. That substance abuse treatment facilities develop and implement rehabilitation plans for their patients.
 - b. That substance abuse treatment facilities promulgate and adhere to policies and procedures dictating the requirements for rehabilitation planning.

- That the D/DOH ensure that APRA monitors substance abuse treatment facilities' adherence to established protocols and addresses facilities' non-compliance with these standards, specifically:
 - a. That substance abuse treatment facilities and the Assessment and Referral Center obtain and record laboratory tests for patients in accordance with federal and District requirements.
 - b. That substance abuse treatment facilities utilize patient laboratory test results to develop treatment plans and inform physicians about potential drug interactions.

- That the D/DOH ensure that APRA monitors substance abuse treatment facilities' adherence to established protocols and addresses facilities' non-compliance with these standards, specifically:
 - a. That substance abuse treatment facilities promulgate and adhere to policies and procedures for transporting patients to off-site appointments.

- That the D/DOH ensure that APRA monitors substance abuse treatment facilities' adherence to established protocols and addresses facilities' non-compliance with these standards, specifically:
 - a. That substance abuse treatment facilities promulgate and strictly enforce policies and procedures for searching patients and their personal belongings.

- That the D/DOH ensure that APRA monitors substance abuse treatment facilities' adherence to established protocols and addresses facilities' non-compliance with these standards, specifically:
 - a. That substance abuse treatment providers promptly safeguard and preserve the scene following any client deaths.

Attachment 11 – **Department of Health – Addiction Prevention and Recovery Administration (DOH-APRA)** - continued

- That the D/DOH ensure that APRA monitors substance abuse treatment facilities' adherence to established protocols and addresses facilities' non-compliance with these standards, specifically:
 - a. That substance abuse treatment providers promptly report all unusual incidents in accordance with APRA policies and procedures.
- That the D/DOH disseminate and adhere to updated internal guidelines that explicitly define the protocol for conducting impartial investigations following unusual incidents.
- That the D/DOH ensure that APRA monitors substance abuse treatment facilities' adherence to established protocols and addresses facilities' non-compliance with these standards, specifically:
 - a. That substance abuse treatment providers promptly respond to APRA's Office of Certification and Regulation's requests.
- That the D/DOH ensure that APRA monitors substance abuse treatment facilities' adherence to established protocols and addresses facilities' non-compliance with these standards, specifically:
 - a. That substance abuse treatment providers have adequate policies and procedures that are readily available to all employees in accordance with DCMR.
 - b. That substance abuse treatment facilities establish a regular schedule and standardized process for updating policies and procedures.
- That the D/DOH ensure that APRA monitors substance abuse treatment facilities' adherence to established protocols and addresses facilities' non-compliance with these standards, specifically:
 - a. That substance abuse treatment facilities maintain adequate nursing staff in compliance with the mandatory nurse-to-patient ratio set forth in the DCMR.
 - b. That detoxification centers maintain 24-hour a day on-site physician coverage in accordance with the DCMR.
 - c. That substance abuse treatment facilities accurately track and document their daily patient populations to ensure staff-to-patient ratio requirements are consistently met.

Attachment 11 – **Department of Health – Addiction Prevention and Recovery Administration (DOH-APRA)** - continued

- That the D/DOH ensure that APRA monitors substance abuse treatment facilities' adherence to established protocols and addresses facilities' non-compliance with these standards, specifically:
 - a. That substance abuse treatment facilities provide and document effective employee supervision.
- That the D/DOH ensure that APRA monitors substance abuse treatment facilities' adherence to established protocols and addresses facilities' non-compliance with these standards, specifically:
 - a. That substance abuse treatment facilities provide employees both the initial and ongoing training needed to competently fulfill their job responsibilities.
- That the D/DOH establish and promulgate clear criteria for closing substance abuse treatment facilities that do not meet the District's standards, and define conditions and events that would automatically trigger the closure of a substandard facility.

**Attachment 12 – Fire and Emergency Medical Services Department;
Office of Unified Communications**

This MAR was published on August 10, 2011. An update on the status of these recommendations will be included in a final Report of Re-Inspection regarding conditions in FEMS fire stations that I&E is currently drafting.

- That the Chief of FEMS (C/FEMS) and the OUC Interim Director immediately execute a short-term formal, dated, and signed MOU pending an assessment of FEMS staffing at OUC by C/FEMS. The MOU should explicitly define roles and responsibilities of FEMS employees and FEMS-OUC employee interaction at all levels. Any permanent, long-term Memorandum of Understanding adopted after the C/FEMS assessment should be updated as necessary each calendar or fiscal year.

- That the C/FEMS: (a) immediately assess the justification, cost benefit, and operational benefit of continuing to detail the current number of FEMS employees to OUC; (b) determine which FEMS positions, if any, should continue at OUC; and (c) provide the results of the assessment and any action taken to the City Administrator, the Committee on the Judiciary, and the Inspector General.

Attachment 13 –Metropolitan Police Department – Special Operations Division

This report of special evaluation was published on July 12, 2011. On November 22, 2011, and January 31, 2012, MPD provided updates on actions it had taken following publication of the report.

- That Chief/MPD collaborate with the Office of the Attorney General to determine the legal authority for MPD to be reimbursed for non-dignitary escorts.
- That the Chief/MPD in consultation with the appropriate legal authority consider developing and using a standardized contract with an indemnification clause to address MPD's and the escorted party's respective responsibilities.

Attachment 14 – **Fire and Emergency Medical Services Department (FEMS)**

This report of special evaluation was published on June 2, 2011. On January 12, 2012, FEMS submitted a response for each recommendation. Based on a review of the information provided by the agency, the OIG concluded that the following recommendations are still open. Before closing them, the OIG will request and evaluate additional information.

- That FEMS amend its protocol on "Patient Initiated Refusal of Treatment" to include explicit guidance on how FEMS responders should communicate to patients: (1) FEMS leadership's philosophy and expectations regarding patient transport; and (2) that transport to a hospital is not an "offer" but rather the action FEMS is expecting and prepared to take to ensure that the patient receives a more thorough medical assessment than can be provided in the field.
- That FEMS develop a means of providing each patient, family, or caregiver in a no-transport event with a document explaining the details related to the on-scene care and non-transport decision. This information should include the reason for the call to FEMS; the physical assessment and findings; recommendations for follow-up; risks and consequences of non-transport; and procedures to follow if further FEMS involvement is required.
- That FEMS revise its April 2010 "Chest Pain" and "12 Lead EKG" protocols to include explicit instructions regarding: (1) how providers should use the features of the cardiac monitor (e.g., the screen and capability to print a paper EKG strip) to assess a patient; and (2) the acquisition and preservation of paper EKG strips for both event documentation and quality assurance purposes.
- That FEMS implement and/or more rigidly enforce quality assurance procedures to ensure that all relevant, documented information concerning each emergency call – whether documented electronically or in hardcopy – is retained and retrievable in accordance with District laws and regulations, and FEMS regulations, policies and procedures, and national best practices.

**Attachment 15 – Child and Family Services Agency –
Child Protective Services Administration (CFSA-CPS)**

This report of inspection was published on April 20, 2011. On July 8, 2011, CFSA submitted a response for each recommendation. Based on a review of the information provided by the agency, the OIG concluded that the following recommendations are still open. Before closing them, the OIG will request and evaluate additional information.

- That the Director of CFSA (D/CFSA) update performance goals, policies and procedures, and performance standards when an expanded timeframe for investigations is agreed upon and implemented.
- That the D/CFSA continue to develop a differential response system that allows social workers to complete, on an as-needed basis, family safety assessment of reports that do not meet the criteria for abuse and neglect.
- That the D/CFSA ensure that sufficient funding is identified to obtain and implement a CPS-specific investigations curriculum during FY 2011.
- That the D/CFSA establish and adhere to a definitive timeline for implementing the CPS-specific investigations curriculum once it is confirmed that it comports with the completed Investigations Practice Guide.

Attachment 16 – Office of the City Administrator (OCA)

This Management Implication Report (MIR) was published on March 31, 2011. To date, the OIG has not received a response from the OCA. Therefore, the OIG concluded that the following recommendations are still open.

- That the Mayor issue an executive order requiring each District agency with mandated reporters to:
 - a. assign an employee to identify the agency's mandated reporters; keep an updated roster of such reporters; and provide this roster to the Department of Human Services – Adult Protective Services (APS) on an agreed-upon timetable;
 - b. ensure that mandated reporters are aware of their status;
 - c. coordinate closely with APS to develop and implement internal agency policies and procedures for reporting abuse, neglect, self-neglect, and exploitation of elders and other vulnerable adults; and
 - d. coordinate closely with APS on the requirements for and the provision and monitoring of training for mandated reporters.

- That the Mayor collaborate with the D.C. Council to amend D.C. Code § 7-1903 to include:
 - a. a requirement that agencies with mandated reporters coordinate with APS to develop and implement internal policies and procedures for recognizing abuse, neglect, self-neglect, and exploitation, and reporting suspected or actual cases to APS; and
 - b. an APS-coordinated training requirement for mandatory reporters that will be enforced either through the licensing process or the employee's agency.

- That the City Administrator recommend amending DCMR Title 29 – Public Welfare to include provisions requiring:
 - a. training for all mandated reporters on recognizing at-risk and harmful situations for vulnerable adults and reporting them to APS;
 - b. mandated reporters to sign an Acknowledgement of Mandated Reporter Status form to be maintained in the employee's personnel file; and
 - c. mandated reporters to immediately report and cooperate with APS and other officials investigating allegations of abuse, neglect, self-neglect, and exploitation.

- That the Director of the D.C. Department of Human Resources (D/DCHR) update the District Personnel Manual and promulgate an issuance aligned with the above-mentioned amendments to the DCMR that includes a list of every District government position (with agency name, position title, and occupation series number) occupied by a mandated reporter of abuse of vulnerable adults.

Attachment 16 – **Office of the City Administrator (OCA)** – continued

- That the Director of APS (D/APS) consider collaborating with the D/DCHR to develop a mandated reporter training curriculum and training course offered through DCHR’s Workforce Development Administration (WDA).
- That the Director of the Department of Health recommend that the Health Occupation Boards, which oversee the licensing of mandated reporter occupations, consider a requirement that applicants take mandated reporter training prior to obtaining or renewing their professional licenses.
- That the D/APS consider publishing a brochure on mandated reporting and collaborating with the Department of Insurance, Securities, and Banking on disseminating it to all banks and thrifts with a physical presence in the District to ensure that employees designated as mandated reporters are aware of their responsibilities and opportunities for mandated reporter training.
- That the D/APS collaborate with D.C. Superior Court’s (DCSC) Probate Division to inform court-appointed guardians and conservators of their mandated reporter responsibilities and opportunities for mandated reporter training.
- That the D/APS collaborate with DCSC’s Family Court Operations Division to inform court-appointed mental retardation advocates of their mandated reporter responsibilities and opportunities for mandated reporter training.

**Attachment 17 – Department of Employment Services –
Office of Unemployment Compensation (DOES-OUC)**

This report of special evaluation was published on February 10, 2011. DOES recently informed the OIG that it will submit compliance forms pertaining to these recommendations when it submits compliance forms for Part II of the special evaluation, which was published on July 13, 2012.

- Employee Survey: That the Director of DOES (D/DOES) review survey results and task OUC managers and employees to collaborate in order to develop and implement strategies to improve the cited deficiencies.
- That the D/DOES expeditiously ensure the completion and issuance of a comprehensive policies and procedures manual for processing unemployment claims, and formalize a mechanism by which it will be periodically reviewed and updated.
- That the D/DOES provide adequate on-the-job training on processing initial claims to its claims examiners and adjudicators.
- That the D/DOES identify and implement strategies to increase employee retention in senior positions to minimize the impact of departures on agency operations.
- That the D/DOES implement a policy requiring DOES' human resources employees to conduct formal exit interviews upon an employee's departure, as practicable, or consider routinely requesting the results of exit interviews from the District's Department of Human Resources.
- That the D/DOES identify and implement strategies to ensure that there is an ongoing quality assurance and performance monitoring program, and that progressive disciplinary actions are taken promptly as needed in accordance with the District Personnel Manual.
- That the D/DOES implement enhancements to its management information system to routinely and quickly produce real time reports of aggregate division and individual employee performance data.

Attachment 18– Office of the City Administrator (OCA)

This MIR was published on December 20, 2010. To date, the OIG has not received a response from the OCA. Therefore, the OIG concluded that the following recommendations are still open.

- Direct each agency head to: identify a senior official who will determine the status of all agency policies and procedures; provide the official's name to the Office of the City Administrator and the Office of Risk Management; and provide the name of each agency's designee to the OIG in order to assist this Office's follow-up activities. Where deficiencies in agency policies and procedures are noted, the selected official, under the direct authority of the agency head and in collaboration with affected agency managers and employees, as required and appropriate, will devise an action plan to correct all deficiencies found.
- Direct that the agency's action plan be carried out with due consideration given to the exigencies of the agency's workplace, but also with a consistent, continuous, and expeditious effort that results in elimination of the most serious deficiencies within 3-6 months of the start date, and all deficiencies within a year.
- Direct that both prior to and subsequent to the elimination of all deficiencies in an agency's policies and procedures, agency managers' performance plans will require that managers are responsible and accountable for: periodic updates and as-needed revisions to policies and procedures in their areas of responsibility; periodic reporting on their status; and ensuring that affected employees have opportunities for comments and suggestions and easy access to the final product.

Attachment 19 – Office of the City Administrator (OCA)

This MIR was published on October 8, 2010. To date, the OIG has not received a response from the OCA. Therefore, the OIG concluded that the following recommendations are still open.

- That the Mayor issue an executive order that establishes:
 - a. safety-sensitive and covered positions, as defined by the Child and Youth, Health and Safety Omnibus Act of 2004, as mandated reporters;
 - b. requirements for agencies that employ mandated reporters to develop and implement internal policies and procedures for reporting abuse and neglect;
 - c. annual training requirements for all mandated reporters regarding how to recognize and report child abuse and neglect; and
 - d. requirements for agencies that employ mandated reporters to develop an oversight mechanism to track how and when mandated reporters receive training.

- That the Mayor ensure that legislation is drafted and submitted to the D.C. Council to amend the D.C. Code to include:
 - a. those in safety-sensitive and covered positions, as defined by the Child and Youth, Health and Safety Omnibus Act of 2004, as mandated reporters;
 - b. requirements for agencies that employ mandated reporters to develop and implement internal policies and procedures for reporting abuse and neglect;
 - c. annual training requirements for all mandated reporters regarding how to recognize and report child abuse and neglect; and
 - d. requirements for agencies that employ mandated reporters to develop an oversight mechanism to track how and when mandated reporters receive training.

- That the City Administrator recommend amending DCMR Title 29 - Public Welfare to include provisions requiring:
 - a. annual training for all mandated reporters regarding how to recognize and report child abuse and neglect; and
 - b. mandated reporters to immediately report and cooperate with officials investigating child abuse or neglect allegations.

Attachment 19 – **Office of the City Administrator (OCA)** - continued

- That the Director of the D.C. Department of Human Resources (D/DCHR) update the DPM and promulgate an issuance aligned with the above mentioned amendments to the DCMR that includes a list of every District government position (with agency name, position title, and occupation series number) considered as a mandated reporter.
- That the City Administrator direct every District agency that employs mandated reporters to designate a mandated reporter training coordinator who will:
 - a. identify all agency positions that are mandated reporters and routinely inform employees of their mandated reporter status;
 - b. develop and implement internal policies and procedures for mandated reporting;
 - c. ensure annual training requirements for all mandated reporters regarding how to recognize and report child abuse and neglect;
 - d. develop an oversight mechanism to track how and when mandated reporters receive training; and
 - e. submit annual reports to the City Administrator and the Director of the Child and Family Services Agency (D/CFSA) that detail which employees have received mandated reporter training, and the dates and method of training.
- That the D/CFSA collaborate with the D/DCHR to develop a mandated reporter training curriculum and training course offered through DCHR's Workforce Development Administration (WDA). In anticipation of a surge in District employees needing mandated reporter training, a WDA training course would supplement CFSA's instructor-led training and online training. Such a course would also create a forum in which mandated reporters could learn from and ask questions of their peers and knowledgeable instructors.
- That the City Administrator and the D/DCHR ensure that position descriptions for mandated reporters state that employees are required to be knowledgeable of and report signs of abuse and neglect observed in children and youth.
- That the Director of the Department of Health recommend that the Health Occupations Boards overseeing the licensing of mandated reporter occupations consider a requirement that applicants receive mandated reporter training on their professional duties and responsibilities prior to obtaining or renewing their license.

Attachment 20 – **Department on Disability Services (DDS)**

This report of inspection was published on September 16, 2010. On December 14, 2010, DDS submitted a response for each recommendation. Based on a review of the information provided by the agency, the OIG concluded that the following recommendations are still open. Before closing them, the OIG will request and evaluate additional information.

- That the Director of DDS (D/DDS) finalize detailed, goal-oriented Memoranda of Agreement and Memoranda of Understanding with the Court Services and Offender Supervision Agency, D.C. Public Schools (DCPS), Department of Mental Health, and the Income Maintenance Administration.
- That the D/DDS develop outreach initiatives designed to increase the number of providers available to conduct psychological assessments and employers able to provide services to Rehabilitation Services Administration clientele who have limited English proficiency.
- That D/DDS finalize formal interagency agreements with the Office of the State Superintendent of Education, DCPS, and any other necessary entity pertaining to transition services.

Attachment 21 – Office of the City Administrator (OCA)

This MIR was published on September 2, 2010. On October 13, 2010, OCA submitted a response for each recommendation. Based on a review of the information provided by the agency, the OIG concluded that the following recommendations are still open. Before closing them, the OIG will request and evaluate additional information.

- That OCA collaborate closely with the Office of the Secretary, the Office of Risk Management (ORM), the Department of Human Resources, and the Office of the Chief Technology Officer to promulgate District-wide government information security policies and procedures that define: a) criteria for sensitive information; b) how to properly use, protect, and dispose of such information; and c) steps an employee should take if he/she thinks sensitive information may have been compromised;
- That OCA collaborate with the Office of the Secretary and ORM, and other District agencies as necessary (e.g., the Workforce Development Administration), to develop or recommend training on the promulgated information security policies and procedures;
- That OCA direct District agency heads to:
 - designate an information security official who will monitor the handling, maintenance, and proper disposal of sensitive information. This official might also ensure that employees are trained on how to carry out these responsibilities.
 - report semi-annually to the City Administrator and the District's Office of Risk Management regarding agency compliance with information security policies and procedures, any violations or deficiencies identified, and any planned or corrective actions taken to address these items.
- That the OCA develop an oversight mechanism to assess agency compliance with information security policies, procedures, and training requirements. The mechanism should include annual and unscheduled inspections, and the results of these inspections should be reported to the City Administrator and the respective agency head with recommendations for improvement.

Attachment 22 – **Department of Real Estate Services (DRES) –
Protective Services Police Department (PSPD)**

This report of special evaluation was published on May 14, 2010. On May 9, 2011, DRES submitted a response for each recommendation. Based on a review of the information provided by the agency, the OIG concluded that the following recommendations are still open. Before closing them, the OIG will request and evaluate additional information.

- That the D/DRES ensure that all officers receive the required annual law enforcement and annual training needed to fulfill their job responsibilities and document all training in personnel files.
- That the D/DRES develop a control mechanism that tracks officers' training hours and notifies managers and officers when training is required.
- That the D/DRES ensure that officers requalify twice annually with their firearms, and document all training in personnel files.
- That the D/DRES develop a tracking system that alerts managers and officers when they are required to requalify with their weapons.
- That the D/DRES develop a plan for disseminating the results of the background checks to appropriate PSPD personnel for review.
- That the D/DRES ensure that background check results are in all officers' personnel files.
- That the D/DRES develop and implement a policy to ensure that PSPD senior management is alerted in writing to all issues that may require disciplinary action.
- That the D/DRES ensure that complete and current written policies and procedures exist for all PSPD operations.
- That the D/DRES ensure that PSPD develops a policies and procedures manual and disseminates this manual to all PSPD employees.
- That the D/DRES create a schedule for reviewing policies and procedures to ensure they function as intended and are up-to-date.