# GOVERNMENT OF THE DISTRICT OF COLUMBIA OFFICE OF THE INSPECTOR GENERAL

## DEPARTMENT OF HUMAN SERVICES NEW YORK AVENUE MEN'S EMERGENCY SHELTER

#### REPORT OF SPECIAL EVALUATION

May 2013



CHARLES J. WILLOUGHBY INSPECTOR GENERAL

OIG No. 13-I-0055JA

# ${\bf Inspections\ and\ Evaluations\ Division}$

# **Mission Statement**

The Inspections and Evaluations (I&E) Division of the Office of the Inspector General is dedicated to providing District of Columbia (D.C.) government decision makers with objective, thorough, and timely evaluations and recommendations that will assist them in achieving efficiency, effectiveness and economy in operations and programs. I&E's goals are to help ensure compliance with applicable laws, regulations, and policies, identify accountability, recognize excellence, and promote continuous improvement in the delivery of services to D.C. residents and others who have a vested interest in the success of the city.

# GOVERNMENT OF THE DISTRICT OF COLUMBIA Office of the Inspector General

**Inspector General** 



May 7, 2013

David A. Berns Director Department of Human Services 64 New York Avenue, N.E., 6th Floor Washington, D.C. 20002

Sue Marshall
Executive Director
The Community Partnership for the Prevention of Homelessness
801 Pennsylvania Avenue, S.E., Suite 360
Washington, D.C. 20003

Dear Mr. Berns and Ms. Marshall:

This report is part of a special evaluation addressing the conditions and services provided at select District homeless shelters. This report covers the Office of the Inspector General's (OIG) observations from fieldwork conducted at New York Avenue Men's Emergency Shelter (New York Avenue) from November 2012 through March 2013. New York Avenue is a low-barrier, emergency shelter for men 18 years of age or older, located at 1355-57 New York Avenue, N.E., Washington D.C. 20002. (See the Appendix for photographs of the shelter). Catholic Charities operates New York Avenue through a contract with The Community Partnership for the Prevention of Homelessness (TCP), and the fiscal year (FY) 2012 budget for the shelter was \$1,337,368. Thirty-one employees are assigned to New York Avenue; 7 are parttime. The shelter's capacity is 360 men (plus an additional 25 overflow beds), and it is open from 7:00 p.m. to 7:00 a.m. daily. If there is a hypothermia or hyperthermia alert, the shelter is

<sup>&</sup>lt;sup>1</sup> A low-barrier shelter is defined as "an overnight housing accommodation for individuals who are homeless, provided directly by, or through contract with or grant from, the District, for the purpose of providing shelter to individuals without imposition of identification, time limits, or other program requirements." D.C. Code § 4-751.01(26) (2008). Seeking transitional or permanent housing, employment, education, or training is optional for clients rather than a requirement.

<sup>&</sup>lt;sup>2</sup> Catholic Charities is a social service organization under the Archdiocese of Washington, D.C. that assists individuals and families in need. It partners with other providers, as well as government agencies, foundations, businesses, and other entities. *See http://www.catholiccharitiesdc.org/page.aspx?pid=444* (last visited Mar. 12, 2012).

<sup>&</sup>lt;sup>3</sup> According to its website, TCP was established in 1989 with the mission of "serv[ing] as a focal point for efforts to reduce and prevent homelessness in the District of Columbia." <a href="http://www.community-partnership.org/cp\_aboutUs.php"><u>Http://www.community-partnership.org/cp\_aboutUs.php</u></a> (last visited Dec. 5, 2012).

<sup>&</sup>lt;sup>4</sup> A hyperthermia alert occurs "whenever the actual or forecasted temperature or heat index rises above 95 degrees Fahrenheit." D.C. Code § 4-751.01(20). A hypothermia alert occurs "whenever the actual or forecasted

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open to clients until the alert has ended. In addition to housing, this shelter offers an evening meal (catered by D.C. Central Kitchen and Henry's Soul Café), 5 shower facilities, case management services, clothing, and on-site healthcare.

#### **Objectives and Methodology**

The team's primary objectives were to assess: 1) the quality of services provided at the shelter; 2) the physical condition of the facility; 3) the quality of the Office of Shelter Monitoring's (OSM)<sup>6</sup> oversight; and 4) shelter management's adherence to applicable laws, regulations, and contracts. This report identifies areas of concern that the OIG team (team) believes warrant OSM management's attention. The team conducted multiple on-site observations; reviewed personnel and shelter client case files; and conducted 27 interviews with employees, clients, security personnel, and TCP managers. OIG inspections comply with standards established by the Council of Inspectors General on Integrity and Efficiency and pay particular attention to the quality of internal control.<sup>7</sup>

#### **Quality of Services**

Intake. Clients are admitted into the shelter for intake at 7:00 p.m., and special police officers (SPO)<sup>8</sup> screen them for prohibited items such as alcohol, illegal drugs, drug paraphernalia, and weapons. Confiscated items are disposed of or maintained behind the security officer's desk until the Protective Services Police Department (PSPD) 9 or the D.C. Metropolitan Police Department (MPD)<sup>10</sup> retrieves them. (See photographs 3 and 4 in the Appendix). There are 16 dormitories in the shelter, and once screened, clients are assigned a bed on a first-come, first-served basis. (See photograph 5 in the Appendix). Clients can request a specific bed, and New York Avenue employees provide clients a bed sheet, disposable towel,

temperature, including the wind chill factor, falls below 32 degrees Fahrenheit." Id. § 4-751.01(21). The hypothermia season lasts from November 1 to March 31.

<sup>&</sup>lt;sup>5</sup> "Through job training, healthy food distribution, and local farm partnerships, DC Central Kitchen offers pathbreaking solutions to poverty, hunger, and poor health." Http://www.dccentralkitchen.org/mission (last visited Dec. 5, 2012); see also http://www.henryssoulcafe.com (last visited Dec. 19, 2012).

<sup>&</sup>lt;sup>6</sup> OSM is a division of the Department of Human Services (DHS) that monitors shelters and the services they provide to homeless clients.

<sup>&</sup>lt;sup>7</sup> "Internal control" is synonymous with "management control" and is defined by the Government Accountability Office (GAO) as comprising "the plans, methods, and procedures used to meet missions, goals, and objectives and, in doing so, supports performance-based management. Internal control also serves as the first line of defense in safeguarding assets and preventing and detecting errors and fraud." STANDARDS FOR INTERNAL CONTROL IN THE FEDERAL GOVERNMENT, Introduction at 4 (Nov. 1999).

<sup>&</sup>lt;sup>8</sup> TCP has a contract with Professional 50 States Protection, LLC (Pro50) to provide security services at New York Avenue. SPOs have the authority to detain and arrest clients whereas security officers do not. The majority of security officers at New York Avenue are SPOs, therefore the term SPO is used in this report to collectively refer to both positions. According to its website, Pro50 "is a fast paced, growing security company that is well positioned to provide all surveillance and security services needs today and into the future. We use the latest technology and train our staff to ensure thorough and comprehensive knowledge about our clients and their security needs." Http://callpro50.com/about-us.html (last visited Dec. 5, 2012).

<sup>&</sup>lt;sup>9</sup> PSPD is responsible for managing and providing security and law enforcement at District-owned and -leased properties. See <a href="http://dgs.dc.gov/node/198762">http://dgs.dc.gov/node/198762</a> (last visited Jan. 17, 2013).

10 MPD is the District's primary law enforcement agency. See <a href="http://mpdc.dc.gov/page/about-mpdc">http://mpdc.dc.gov/page/about-mpdc</a> (last visited Jan.)

<sup>17, 2013).</sup> 

and soap. Fleece blankets are issued during hypothermia season. Sheets are washed daily, but the clients are responsible for cleaning and maintaining the blankets. The team observed the supply storage area and noted that it appears that the shelter has enough supplies for all clients. Clients entering for the first time meet with a New York Avenue case worker, receive a copy of the program rules, and complete an intake form. Overall, employees reported that the intake process runs smoothly.

In March 2013, the team observed the intake process during a hypothermia alert. Upon arrival, intake for the night had already begun, and the team observed Pro50 SPOs screen clients and their belongings prior to shelter entry. Although clients were patted down by security, the physical pat-downs did not seem thorough. For example, when the metal detector sounded, the SPOs conducted brief pat-downs of clients but did not continue to search them to identify the cause of the alarm. Furthermore, SPOs did not use hand-held wands as required by post orders.

The team then observed clients obtain their bed assignment for the night. A shelter employee asked each client his name and assigned him a bed. Because beds are assigned on a first-come, first-served basis, clients who arrive early to the shelter can select specific dorms and beds to sleep in if they are available. If a client cannot remember the location of his bed assignment, the employee will write down the dorm and bed number on a sheet of paper and give it to the client. Although bed assignments ran smoothly during the intake process, the team had concerns regarding security, which is addressed later in this report.

Accommodations. Following intake, clients can have dinner and may leave the building only for "smoke breaks" or "fresh air breaks" in the immediate vicinity of the building. SPOs monitor these breaks and clients who leave the immediate vicinity for more than 15 minutes will receive a written warning notice. Any client away from the building for more than 30 minutes is considered to have left for the night, and his bed may be reassigned. Employees ensure that all clients have an assigned bed. If the shelter reaches capacity, employees begin a waiting list. Clients must be in bed by 10:00 p.m. Sunday through Thursday and 11:00 p.m. on Friday and Saturday, and any vacant beds are reassigned to individuals on the waiting list. If the shelter reaches capacity and additional men need overnight accommodations, employees call the United Planning Organization (UPO) shelter hotline 11 to determine where spaces are available. A UPO van will then transport clients to another site. If the shelter is not at capacity, employees will continue assigning walk-in clients bed accommodations throughout the night.

Case Management.<sup>12</sup> Case management for clients is not required because this is a low-barrier shelter, but it is available upon request. New York Avenue has three case managers and

<sup>11</sup> UPO "provide[s] residents with comprehensive resources for early childhood education; youth development; employment and training; family and community services; case management and referrals to other supportive services." <a href="http://www.upo.org/AU1-h.php"><u>Http://www.upo.org/AU1-h.php</u></a> (last visited Mar. 27, 2013). The Shelter Hotline program is "an integral part of the continuum of care for the homeless in the District of Columbia offering services seven days a week, including year-round transportation, outreach, and referral services." <a href="http://www.upo.org/fc1-sa.php"><u>Http://www.upo.org/fc1-sa.php</u></a> (last visited Mar. 27, 2013).

<sup>&</sup>lt;sup>12</sup> "Case management refers to the coordination of services on behalf of a party." <u>Http://en.wikipedia.org/wiki/</u> <u>Case management</u> (last visited Mar. 21, 2013) (emphasis in original). At New York Avenue, services are provided by an appropriately trained, qualified, and supervised case manager.

one case worker. 13 Intake counselors, the clinical director, and residential counselors refer clients to case workers when they need assistance with obtaining resources or services. Clients can also walk-in to receive services. Case workers engage clients to determine their needs and goals and provide guidance on how to attain them (e.g., moving out of the shelter). The shelter does not provide employment and substance abuse assistance on-site. Rather, case workers refer clients to agencies that provide assistance in these areas. 14 According to a case worker, clients typically need assistance with social service-related matters such as jobs, unemployment benefits, addiction counseling, financial assistance, the Supplemental Nutrition Assistance Program (formerly known as the food stamps program), and identification cards. The most common reasons clients request assistance is to replace lost or stolen identification cards and obtain birth certificates. The team observed that case management occurs in the shelter, but did not assess the quality of these services due to confidentiality concerns and the absence of case notes.

Employment Program. 15 Although not required by either the D.C. Code or the contract with TCP, the shelter also offers an "employment program" for clients who obtain outside employment working 30 hours or more per week. The program does not provide employment, but functions as a "residency program." For those clients who independently obtain employment outside of the shelter and desire to participate, it provides a separate dormitory and 24-hour access to the facility. Clients in the program also can use the on-site laundry room. According to the employment program client contract, there are no specifications regarding the type of employment except that "Residents must be employed **LEGALLY**, meaning clients are paid by a company check, with **ALL** appropriate deductions taken off each pay period (state and federal taxes, Medicare, Social Security)." (Emphasis in original). According to a shelter employee, the goal for clients who participate in the employment program is to work and learn to save money to become self-sufficient. Client success in the program varies; some clients may "drop out" 16 within weeks whereas others take full advantage of the 6-month program. <sup>17</sup> For example, one program participant saved over \$10,000.

The team conducted a file review of program participants to assess the completeness of these files. Employment program client case files must contain: 1) employment program contracts; 2) psychosocial history and assessment forms; 3) service plans; 4) pay stubs; and 5) bank statements. Additionally, shelter employees use a record of savings form to calculate the amount of money each client must save from each pay check. Clients in the employment program must submit their pay stubs within 48 hours of receiving them and bank statements within 72 hours "from the time of calculation of savings with staff." According to a manager, 21

<sup>13</sup> A case worker must have a high school diploma; however, 2 years of college education and prior human service experience working with the homeless population is preferred. Case managers must have a Master's of Social Work or Master's degree in another relevant clinical discipline. This report uses the term "case worker" to collectively reference case workers, case managers, and social workers.

<sup>&</sup>lt;sup>14</sup> When clients visit a provider or referral agency, case workers request that they provide feedback or documentation of the visit. The documentation is used as evidence that the client received assistance.

<sup>&</sup>lt;sup>15</sup> This program is also sometimes referred to as the "Work Program."

<sup>&</sup>lt;sup>16</sup> The team uses the term "drop out" to signify when clients stop working and therefore are no longer eligible for the program. These clients can still use the shelter from 7 p.m. until 7 a.m., but they are no longer granted 24-hour access to it.

17 Participants can reapply for the program after the 6-month timeframe.

clients were enrolled in the program during the week of January 3 through January 10, 2013. The team reviewed 13 files to assess whether: 1) they were complete; 2) each participant worked the requisite 30 hours per week; and 3) the record of savings form reflected all relevant pay stubs and bank statements. The team observed the following missing documents in two files:

- 1 file lacked a bank statement; and
- 1 client was able to remain in the program for 2 months without having a bank account because he had difficulty obtaining an identification card required to open a bank account.

*Health Care Services.* Unity Health Care <sup>19</sup> manages an on-site clinic from 5:30 p.m. to 9:00 p.m. on weekdays. <sup>20</sup> (See photograph 10 in the Appendix). The team conducted an on-site observation at the clinic in March 2013 and spoke with clinic staff. According to a clinic employee, a doctor and medical assistant are usually on duty and see approximately seven to eight clients on a busy night. This employee noted that the staffing level is sufficient to meet client demand. This clinic employee stated that clients are treated for the flu, pneumonia, asthma, and skin infections, but the clinic is equipped to handle an emergency. For example, they have a crash cart <sup>21</sup> for assisting an individual in cardiac arrest.

#### **Physical Condition of the Facility**

Both the D.C. Code and Catholic Charities' contract with TCP state that all homeless shelter providers will maintain "safe, clean, and sanitary facilities" for shelter clients. During the team's initial observation of the shelter, it appeared to be in good physical condition. A number of employees praised the maintenance and noted that recurring problems (e.g., toilet- and shower-related problems caused by clients misusing the facilities) were timely reported and fixed. One facility improvement was the installation of new walls throughout the facility. A maintenance employee reported that in the past, clients punched holes in the shelter's walls. This employee reported that durable wall coverings were installed to prevent clients from punching holes in the walls.

The shelter has several reporting mechanisms in place for identifying and reporting items needing repair. The maintenance staff emails detailed daily reports to shelter managers informing them of shelter conditions and any damage within the building. Residential

<sup>&</sup>lt;sup>18</sup> The team learned that 3 of the 13 files were for general population clients.

<sup>&</sup>lt;sup>19</sup> Unity Health Care's mission is to "[p]romot[e] healthier communities through compassion and comprehensive health and human services, regardless of ability to pay." <a href="http://www.unityhealthcare.org/AboutMission.html"><u>Http://www.unityhealthcare.org/AboutMission.html</u></a> (last visited Dec. 5, 2012).

The website incorrectly states that the clinic is open until 9:30 p.m. See <a href="http://www.catholiccharitiesdc.org/newyorkave">http://www.catholiccharitiesdc.org/newyorkave</a> (last visited Dec. 5, 2012). Although the clinic is not staffed on the weekends, clients can seek treatment at one of Unity Healthcare's other 28 clinics. <a href="http://www.unityhealthcare.org/HealthCenters.html">http://www.unityhealthcare.org/HealthCenters.html</a> (last visited Mar. 27, 2013).
A crash cart is a "cart stocked with emergency medical equipment, supplies, and drugs for use by medical

<sup>&</sup>lt;sup>21</sup> A crash cart is a "cart stocked with emergency medical equipment, supplies, and drugs for use by medical personnel especially during efforts to resuscitate a patient experiencing cardiac arrest." <a href="http://www.merriam-webster.com/dictionary/crash%20cart"><u>Http://www.merriam-webster.com/dictionary/crash%20cart</u></a> (last visited Mar. 27, 2013).
<a href="https://www.merriam-webster.com/dictionary/crash%20cart">20cart</a> (last visited Mar. 27, 2013).

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counselors conduct hourly rounds during their shifts and report any building-related issues. Shelter managers also conduct rounds three to four times per week, and TCP's contractor inspects the facility twice a month to identify any damage. Clients also report broken items in the shelter.

The team observed several physical deficiencies that did not result in findings because they did not impede shelter operations and repairs are underway: the team observed water damage to the tile in Dorm 7, warped tile in stairway 5, missing tile in the laundry room ceiling, and a leaking pipe in an employee's office. Employees noted recurring maintenance issues caused by client misconduct, such as broken toilets, shower heads, and sinks. The team randomly checked toilets, faucets, and shower heads during its site visits and did not observe any deficiencies.

The team observed a leaking hot water heater that did not result in a finding because it was repaired prior to the conclusion of fieldwork. The team also observed two facility issues that were not repaired prior to the conclusion of the team's fieldwork: cracks in the shelter's foundation and a leaking roof. The team spoke with a Department of General Services (DGS)<sup>23</sup> representative who informed the team that the cracks in the foundation were the result of the recent earthquake and were reported to the Federal Emergency Management Agency (FEMA)<sup>24</sup> for assessment. FEMA determined that it would be responsible for funding the repairs; however, the repairs had not begun as of January 2013. This employee also noted that roof repairs were underway, but a definitive timeframe for completion had not been established. In March 2013, this DGS employee informed the team that repairs to the roof should be completed within a "couple" of weeks.

#### **Health Conditions**

#### Finding: Mice and pest infestation create health risks.

Employees and shelter clients reported that there is a mice and pest problem. One employee informed the team that mice run around on the desks and floors, and the team observed first-hand a mouse in the shelter's office area as well as rodent droppings and fruit flies throughout the shelter. Another employee stated that "it's a party in here" for pests. Although the majority of employees and some shelter clients reported only mice, one maintenance employee noted that the problem extends beyond mice to other pests such as fruit flies, roaches, termites, and bedbugs.

<sup>&</sup>lt;sup>23</sup> DGS "[p]rovides building services for facilities owned and occupied by the District government, including engineering services, custodial services, security services, energy conservation, utilities management, maintenance, inspection and planning, repairs and non-structural improvements . . . ." <a href="http://dgs.dc.gov/page/department-general-services"><u>Http://dgs.dc.gov/page/department-general-services</u></a> (last visited Mar. 4, 2013).

<sup>&</sup>lt;sup>24</sup> "FEMA's mission is to support our citizens and first responders to ensure that as a nation we work together to build, sustain, and improve our capability to prepare for, protect against, respond to, recover from, and mitigate all hazards." Http://www.fema.gov/about-fema (last visited Mar. 28, 2013).

Pest Services Company and Orkin pest control company service the shelter. <sup>25</sup> The team reviewed pest control invoices from September through December 2012 and determined that these companies visited the shelter nine times. Table 1 on the following page details the pest abatement activities during this timeframe. The invoices noted that New York Avenue's offices, kitchen, dining, and storage areas were treated but did not indicate whether dormitories or hallways (where the clients' lockers are) were treated. However, a New York Avenue employee reported that the pest control companies do treat the dormitories and hallways. The team also observed two invoices noting that exterior doors and windows are not rodent/insect proof.

According to shelter employees, mice are an ongoing issue at this shelter because: 1) clients bring food and store it in the shelter; <sup>26</sup> 2) there is a daily accumulation of 20 to 25 bags of garbage; 3) trash bins are in close proximity to shelter entrances; 4) there is trash in nearby alleys; and 5) mice have quick breeding cycles. <sup>27</sup> One shelter employee reported that the mice traps currently used are useless because the mice know how to manipulate the traps. A contractor collects trash 3 times per week; however, a New York Avenue manager recommended trash collection 5 days a week if the budget would accommodate the increase.

The Centers for Disease Control and Prevention (CDC)<sup>28</sup> suggest a three-pronged approach to controlling a mice problem: 1) seal up holes inside and outside the facility to prevent entry;<sup>29</sup> 2) trap rodents inside the facility; and 3) clean rodent food sources and nesting sites. This cleaning approach includes, among other measures, storing food in containers with tight lids and using a thick plastic or metal garbage can with a tight lid.

Mice can carry certain diseases and therefore pose health and safety risks to shelter employees and clients. According to the CDC and the Humane Society of the United States, mice carry a number of transmittable diseases, including:

- Hantavirus;
- Salmonellosis;
- Bubonic plague;
- Lyme disease;
- Hemorrhagic Fever with Renal Syndrome;

<sup>25</sup> In the past, the Department of Health (DOH) also provided pest abatement services to the shelter. However, DGS did not sign the memorandum of understanding with DOH to continue these services because they decided to use third-party contractors instead of DOH services for pest abatement.

<sup>&</sup>lt;sup>26</sup> According to one shelter employee, clients store food in their lockers even though it is prohibited

<sup>&</sup>lt;sup>27</sup> According to a shelter manager, there is nowhere else to put the shelter's trash; it needs to be stored on the shelter's property until disposed.

<sup>&</sup>lt;sup>28</sup> The CDC's mission is "to collaborate to create the expertise, information, and tools that people and communities need to protect their health – through health promotion, prevention of disease, injury and disability, and preparedness for new health threats." <a href="http://www.cdc.gov/about/organization/mission.htm"><u>Http://www.cdc.gov/about/organization/mission.htm</u></a> (last visited Jan. 14, 2013).

<sup>&</sup>lt;sup>29</sup> According to the CDC, "[m]ice can squeeze through a hole the size of a nickel, and rats can squeeze through a hole the size of a half dollar!" <u>Http://www.cdc.gov/rodents/prevent\_infestations/seal\_up.html</u> (last visited Jan. 17, 2013).

The Humane Society of the United States "is the nation's largest and most effective animal protection organization." <u>Http://www.humanesociety.org/about</u> (last visited Jan. 9, 2013).

- Lassa Fever;
- Leptospirosis;
- Lymphocytic Chorio-meningitis;
- Omsk Hemorrhagic Fever;
- Rat-Bite Fever;
- South American Arenaviruses; and
- Tularemia.

Table 1: September - December 2012 Pest Control Services Provided at New York Avenue

Date/Service Provider	Service Provided	Areas	Comments
9/17/2012	Set traps and used	Kitchen, dining area,	
<b>Pest Services Company</b>	tracking powder	storage room	
10/1/2012	Set traps in areas of	Kitchen, bathroom,	
Pest Services Company	potential activity	offices	
10/9/2012 Orkin	No activity found; used pest control products	Not specified	The invoice notes that exterior doors and windows are not rodent/insect proof
10/15/2012 Pest Services Company	Set traps in areas of activity and cleaned up dead rodents from kitchen	Kitchen and offices	
11/05/2012 Pest Services Company	Set traps in areas of "heavy rodent activity" and cleaned up dead rodents	Kitchen and offices	
11/13/2012 Orkin	Not specified	Not specified	
11/19/2012 Pest Services Company	Set traps in areas of potential activity	Not specified	
12/3/2012 Pest Services Company	Set traps in areas of potential/known activity and reset different traps	Kitchen and offices	
12/11/2012 Orkin	Found droppings in offices that must be cleaned up; used pest control products	Not specified	The invoice notes that exterior doors and windows are not rodent/insect proof

When asked about the ongoing mice problem, a TCP interviewee stated that New York Avenue managers had not submitted a service request to TCP for additional abatement services. A New York Avenue manager confirmed that he/she had not submitted a request for additional abatements services because DGS had initiated these services. The team spoke with a DGS representative who confirmed that DGS had initiated additional abatement services in February 2013 to remedy a mice problem in the shelter and this individual was not aware of a current pest problem at the shelter as of March 2013. However, a New York Avenue employee informed the team that despite the increased abatement treatments, mice and insects were still a problem in the shelter in March 2013.

#### **Recommendation:**

That the Director of DHS (D/DHS) work with TCP, Catholic Charities, New York Avenue management, and third-party contractors to find a solution to the pest problem at the shelter, conducting a decontamination and treatment of lockers.

#### **Security**

TCP contracts with Pro50 to provide security services at New York Avenue 24 hours a day, 7 days a week, including holidays. Pro50 assigns SPOs who monitor and secure the shelter entrances; ensure that clients seeking shelter assemble in an orderly fashion outside of the building; screen clients and their belongings for weapons and contraband; and ensure that clients inside the building remain orderly and in authorized locations. SPOs monitor the main entrance, exit, lobby, dining hall, dormitories, and laundry areas by making rounds<sup>31</sup> and watching closed circuit television monitors.

#### Finding: Confiscated weapons and other contraband were not stored securely.

On February 7, 2013, the team visited New York Avenue and observed the locked bin where confiscated weapons are stored until they are disposed. One side of the bin was locked with a combination lock, and the other side was "popped" open, rendering the combination lock useless. A New York Avenue employee reported that the weapons storage bin would be replaced with another bin requiring a key, but he/she was not sure about the logistics or timing of the replacement. Given the dangerous nature of confiscated items stored in this bin, the team notified Catholic Charities, DHS, and TCP of the issue on February 14, 2013, so that corrective actions could be implemented immediately. The team recommended that the agencies: (1) immediately take steps to procure a container to safeguard confiscated items; and (2) conduct periodic inspections of the container to identify ongoing or potential malfunctions. On the following day, a DHS manager informed the team that a new storage bin was installed and they were developing a protocol for periodic inspections of the container. The team observed the

<sup>&</sup>lt;sup>31</sup> SPO rounds entail patrolling the inside and perimeter of the facility and identifying any prohibited activities (e.g., drug use, alcohol consumption, physical altercations, etc.), hazardous conditions, property damage, vandalism, and security breaches.

<sup>&</sup>lt;sup>32</sup> Although the bin is unlocked, clients do not have access to the bin because it is behind the security desk.

new, secure weapons bin in use at the shelter in March 2013. However, the key for the bin was prominently posted on an adjacent wall with a note stating "New York Avenue Security Locker Key Only." Although this key placement is easily accessible to SPOs, it may pose a security risk if clients breach security. The team believes that the key should be in a discrete and secure location.

#### **Recommendation:**

That the Director of DHS (D/DHS) immediately remove the storage bin key from its visible location and determine how to more effectively better secure the bin to prevent any potential security breach (e.g., using a combination lock).

#### Finding: Additional SPOs appear to be needed during crowded hypothermia season.

When hypothermia alerts are issued, New York Avenue remains open until the alert is cancelled. Several employees noted that the shelter typically reaches capacity (360 clients) on hypothermia alert days, and additional SPOs are needed to ensure that adequate security staffing is in place. The security shifts are as follows:

- 2 SPOs during the morning shift between 7:00 a.m. and 3:00 p.m.;
- 4 SPOs during the afternoon shift between 3:00 p.m. and 11:00 p.m.;
- 1 SPO during the first evening shift between 5:00 p.m. and 1:00 a.m.;<sup>33</sup> and
- 2 SPOs during the overnight shift between 11:00 p.m. and 7:00 a.m.

During the morning shift, one SPO must remain posted at the shelter's entrance while the other monitors the dining hall where most of the clients congregate. Due to staffing levels, the latter SPO must leave his/her post to conduct rounds alone. Conducting rounds alone can compromise shelter security and make addressing suspicious activities more challenging. For example, if a physical altercation requiring SPO intervention arises while the officer is conducting rounds, he/she may not be able to respond quickly to resolve it. Additionally, an interviewee stated that a guard may observe someone selling drugs in the alley, but he/she may be less inclined to take action because others in the alley might pose a threat. If two SPOs are present, the clients are less likely to challenge them. Although Pro50's post orders require that four SPOs be on duty during the overnight shift when the shelter is typically at capacity, comparable security staffing levels are not required during the day when the shelter also is at full capacity due to a hypothermia alert.

<sup>&</sup>lt;sup>33</sup> This SPO augments staffing levels during the evening and overnight shifts.

<sup>&</sup>lt;sup>34</sup> New York Avenue personnel will monitor clients until the SPO resumes his/her post.

<sup>&</sup>lt;sup>35</sup> Post orders establish policies and procedures for security posts and provide officers with detailed instructions on how to execute tasks at a specific location.

<sup>&</sup>lt;sup>36</sup> The team noted that three SPOs (including the "floater" SPO) are on duty during the overnight shift. Four SPOs should be on duty according to Pro 50's post orders.

Employees reported that PSPD officers previously visited New York Avenue daily, but ceased daily visits at the end of 2012. Employees value PSPD officers' presence because they are armed. They also help deter illegal activity, and clients are reportedly less likely to cause an altercation when another law enforcement entity is on-site.<sup>37</sup>

Overall, employees and clients opined that New York Avenue provided a relatively safe environment. However, the number of assaults, misconduct, and theft reports tend to increase during the hypothermia season, which may indicate a need for an additional guard to manage the influx of clients during this period. The team reviewed unusual incident reports<sup>38</sup> completed between September 2012 and December 2012 and observed a gradual increase in assault, misconduct, and theft incidents (see Table 2 below). When comparing the total number of incidents reported in September and October to the number reported during hypothermia season (November and December), there was a 45 percent increase.

Table 2. Number of Assaults, Misconduct, and Theft Incidents Documented in Unusual Incident Reports (September 2012 – December 2012)

	Non-Hypothermia Season (September 2012 - October 2012)	Hypothermia Season (November 2012 - December 2012)
Assaults <sup>39</sup>	11	14
Misconduct <sup>40</sup>	11	19
Theft	11	15
Total	33	48

Interviewees opined that another evening shift SPO throughout the year would be beneficial and improve security. A New York Avenue manager stated that he/she submitted a request to TCP for an additional evening shift guard. TCP must approve any changes to security staffing levels, and as of January 2013, a decision had not been made. A TCP senior manager reported that the staffing request is still under consideration and identifying available funding will be a major factor in TCP's decision.<sup>41</sup>

<sup>38</sup> "An unusual incident is an alleged, suspected, or actual event or occurrence involving a DHS customer, employee, contractor, subcontractor, or volunteer that adversely affects or compromises the integrity of DHS programs or which threatens the health or safety of a DHS customer, District employee or the general public, or District property." <a href="http://dhs.dc.gov/incidents">Http://dhs.dc.gov/incidents</a> (last visited Jan. 29, 2013).

<sup>39</sup> Examples of assaults include: physical altercations between clients, a physical assault on a SPO who attempted to regain order in the facility's lobby, an irate client who verbally assaulted an SPO, and an altercation between two clients in which one of the clients was stabbed.

<sup>&</sup>lt;sup>37</sup> A PSPD employee reported, "Patrol officers are expected, as part of their regular duties, to check the shelters and anywhere else in District buildings where contract security is posted. This is part of our duties in the city-wide security contract." This individual noted, however, that there is no written mandate on how often post checks should be conducted. PSPD is reportedly revising its General Orders to include post check protocols.

<sup>&</sup>lt;sup>40</sup> Examples of misconduct include: a client refusing to adhere to SPO's request to end a telephone call, a verbal altercation between two clients, a client who made inappropriate gestures toward a female SPO, client altercations, illegal entry, hostile/disrespectful clients, a terminated client reentering the facility, irate and confrontational clients, loitering in an adjacent business, and not following bed-check protocols.

<sup>&</sup>lt;sup>41</sup> This interviewee did not provide a definitive timeframe for when TCP would make its decision.

#### **Recommendations:**

- (1) That the D/DHS work with TCP, Catholic Charities, New York Avenue managers, and Pro50 to assess security staffing levels during hypothermia season and the evening shift to determine if additional SPOs are needed to ensure adequate security.
- (2) That the D/DHS collaborate with PSPD to ensure that the revised General Order regarding post checks meets the needs of both agencies.

#### Safety

#### Finding: Some deficiencies noted in fire safety and emergency preparedness.

The team evaluated the shelter's fire safety and emergency preparedness. DGS completed installation and testing of a new fire alarm and sprinkler system in October 2012, and the team observed smoke detectors in communal areas, dormitories, the kitchen, dining areas, and the laundry room. Additionally, a shelter manager reported that a contractor conducts quarterly inspections of fire extinguishers. In March 2013, the team randomly observed 10 fire extinguisher tags and noted that they were last inspected in February 2013. These fire extinguishers were inspected in accordance with TCP's contract, which states that "[a]ll fire extinguishers are to be serviced yearly by a licensed professional [fire extinguisher company. When serviced, each fire extinguisher will be] tagged and dated."

According to its contract with TCP, New York Avenue must conduct fire drills every 30 to 60 days to ensure the safety of residents and staff. During a December 12, 2012, review of the fire drill log, the team observed that the most recent fire drills occurred on October 8, 2012, and November 28, 2012, which complied with contract requirements. However, the team noted that these drills occurred during the day when the shelter was not at full capacity. The most recent evacuation of the shelter while at full capacity occurred approximately 7 months prior on May 22, 2012, and this was the only full capacity fire drill conducted that year. According to the fire drill log, clients were not searched upon re-entry into the facility, which created a safety concern. However, a New York Avenue manager stated that when fire drills are conducted, clients reenter the building in the front or the rear and are subject to screenings of personal items and patdowns. The team reviewed TCP's contract with Catholic Charities, New York Avenue's program rules, and Pro50 post orders and their protocols requiring client searches upon entry into the facility but none of these documents specifically address client re-entry. The post orders note that clients should be "screened for weapons and contraband" upon entry while the shelter's program rules state that security may do a search of a person and his/her belongings. TCP's contract with Catholic Charities states that "[t]he Contractor shall inspect the personal belongings of those entering the shelter . . . . "

<sup>&</sup>lt;sup>42</sup> The prior inspection took place in March 2012.

The shelter appeared adequately prepared for other emergencies. The team reviewed New York Avenue's "Continuity of Operations Plan (COOP)." This plan is accessible to all staff and details how the shelter will operate in case of an emergency. Important phone numbers and protocols for the shelter's safe rooms are listed. Dorms 1, 3, and 5 are designated as "safe rooms" in case of an emergency, and can accommodate 360 individuals (for sitting only, not sleeping) at a given time. A shelter employee noted that Dorm 5 has telephones for use in an emergency. The team observed numerous first aid kits in the shelter, as well as an emergency supply of food for each shelter client. Evacuation plan diagrams were posted on each level of the shelter in hallways or by exit signs and fire extinguishers. However, each diagram listed multiple "You Are Here" designations rather than a unique evacuation route for each location. Additionally, the team observed an evacuation plan that was not secured to the wall and could be easily removed. A New York Avenue manager reported that all evacuation plans located throughout the facility will soon be mounted on the walls.

#### **Recommendations:**

- (1) That the D/DHS: 1) complete more frequent evacuations of the entire facility while the shelter is at full capacity to ensure that shelter employees and clients are prepared in the event of a fire; and 2) screen clients for weapons and contraband upon re-entry following a fire drill and memorialize this requirement in contracts, post orders, and policies and procedures.
- (2) That the D/DHS update evacuation plan diagrams to accurately reflect "You Are Here" designations and evacuation routes and ensure that all evacuation plans are mounted on the shelter walls

Overall, however, the team believes that with the fixes noted above, the shelter will be well-prepared for emergency situations.

#### **Client Interviews**

On December 3 and December 5, 2012, the team interviewed 11 clients who were available and willing to comment on their experiences in the shelter. The team used a questionnaire that addressed the quality of services provided, the physical condition of the shelter, safety, and security. Seven of the 11 clients had been residing at the shelter for approximately 6 months. Of the remaining four clients: two resided there for approximately 1 year, one for almost 4 years, and one for 6 years. Overall, clients thought that the quality of services provided was good. Respondents consistently noted that they received hygiene supplies; had suitable accommodations (e.g., availability of medical assistance and access to hot showers); and that the shelter provided a safe environment. However, there were several areas, noted below, that yielded less favorable responses and that warrant shelter management's attention.

• *How does the shelter inform you about services?* There were mixed responses to this question. Four individuals stated that the shelter does not inform them of

services or that clients must inquire about them; one stated that he hears about services from other clients, or they are posted. Others noted that employees post information on the bulletin board rather than notifying clients verbally. 43

Did you receive enough food during the last 7 days? Describe the quality of food. All respondents replied affirmatively regarding the quantity of food; however, many clients reported that food quality is poor, and they purchase food from outside the shelter. Only one client said the food was "okay," but he noted that he preferred eating elsewhere. The other 10 clients said the food was terrible, cold, too much salad is provided, or the food quality is bad. One client noted that the food services contractor visits bi-monthly to discuss food quality with the clients. When clients were asked, "Is there any part of the shelter you would like to change," four individuals stated "quality of food." In contrast, shelter employees did not note any major complaints with the quality of food provided by D.C. Central Kitchen. For example, one shelter employee noted that although clients complain about the food, in his/her opinion, it is fine. Another employee stated that the quality of food is very good and that there will always be complaints about food with a large population. However, one shelter employee stated that the food is not always appetizing to look at and that it is "low-grade" food. This individual noted that the food is always soup or a "one pot meal." Two employees stated that the quality of food has improved; however, the amount of food could be increased.

The team visited the shelter and observed the food service in March 2013. Diabetic clients were served spaghetti, a garden salad, and a wheat roll. Non-diabetic clients were served fish soup and fruit salad. (See photographs 8 and 9 in the Appendix). The contractors did not provide beverages; clients could use the water fountains for water or obtain drinks on their own.

While noting the disparate views about the quality and quantity of shelter food, the team noted that the shelter receives food donations provided by churches and other organizations, which helps ensure that clients have enough food to eat as well as a variety of options. Clients also use their own food stamps to purchase food from outside the shelter, heat food that they have purchased in microwave ovens, and order food from outside using their own money.

• Is drug use common at the shelter? Eight of the 11 clients responded affirmatively. They stated, however, that drug and alcohol use typically occur outside the shelter in the adjacent alley. Clients reported that the most commonly used drug is synthetic marijuana and that alcohol consumption is prevalent. Some employees also reported that drugs are a problem at the shelter (although there were some employees that reported being unaware of a drug problem within or around the shelter). One shelter employee stated that drugs are not "common" at the facility, but drugs are more common than weapons. Another employee stated that clients can conceal drugs on their bodies when entering the building while a third employee noted that sometimes SPOs find small empty bottles of alcohol in the facility, but not drugs. The third employee noted that clients may try to conceal bottles of alcohol in their waistbands

<sup>&</sup>lt;sup>43</sup> Some clients may not be able to read posted notifications because they have minimal literacy skills.

because SPOs may not check the "private area" of their bodies as diligently. Similar to the clients, employees noted concerns about the alley behind the building, where clients often drink and may do drugs. An SPO reported that clients drink alcohol, drugs are sold, and fights occur on occasion in this alley. According to the SPO, this alley is not considered New York Avenue's property.

• Are weapons common at the shelter? Seven respondents replied no, while four respondents replied yes. One respondent said that knives are the most commonly found weapon. Another reported that it is easy to sneak a weapon into the shelter and that SPOs do not require clients to pass through the metal detector multiple times even when the alarm sounds. 44 Likewise, there was a split among New York Avenue employees' opinions about the prevalence of weapons in the shelter. Some New York Avenue employees reported that weapons are a problem at the shelter while others reported that they are not. One employee reported that during rounds, he/she observed a couple instances of weapons in the shelter, such as screwdrivers. When a weapon is discovered, these items are immediately confiscated, an unusual incident report is filed, and a client receives a warning letter.

#### Quality of OSM Oversight of the Shelter

*Monitoring Activities.* On March 14, 2007, the D.C. Code was amended to create OSM within DHS.<sup>45</sup> OSM "monitor[s] shelters and services provided by the District and its contractors to clients who are homeless[,]" including the:

- (1) Health, safety, and cleanliness of shelters;
- (2) Policies, practices, and program rules;
- (3) Accessibility of shelters to clients with disabilities;
- (4) Appropriateness of shelters for families;
- (5) Respect for client rights . . . ;
- (6) Compliance with provider standards . . . ;
- (7) Comments of shelter clients and program staff;
- (8) Ability of the program to facilitate transition from
- homelessness to permanent housing; and
- (9) Any other information deemed appropriate. [47]

According to internal DHS policies and procedures, OSM must conduct annual inspections of all District homeless shelters within the Continuum of Care, <sup>48</sup> and all shelters

<sup>47</sup> *Id.* § 4-754.52(a).

<sup>&</sup>lt;sup>44</sup> As noted in the intake section of this report, the team observed first hand that SPOs do not require clients to go through the metal detector multiple times.

<sup>&</sup>lt;sup>45</sup> See D.C. Code § 4-754.51 (2008).

<sup>&</sup>lt;sup>46</sup> *Id*.

<sup>&</sup>lt;sup>48</sup> The "Continuum of Care" is "the comprehensive system of services for individuals and families who are homeless or at imminent risk of becoming homeless and [is] designed to serve clients based on their individual level of need. The Continuum of Care may include crisis intervention, outreach and assessment services, shelter, transitional

funded by either the District or federal government if the funds are administered by DHS. 49 OSM may conduct more than one inspection per year and may conduct announced or unannounced inspections. 50 Following each site visit, OSM must issue a report summarizing its findings. 51 According to DHS internal policies and procedures (Policy no. FSA-HSRA-003-FY07, p.5), these reports must provide "a list of deficiencies and required corrective action." Providers must: 1) correct safety-related deficiencies within 7 days and non-safety-related deficiencies within 30 days; and 2) submit documentation to DHS of corrective actions taken within required timeframes.

According to OSM records reviewed by the OIG team, in July and August 2012, OSM monitors visited New York Avenue and completed a Monitoring Inspection Form. <sup>52</sup> Monitors reviewed case records and personnel files, interviewed clients and employees, and conducted a general physical inspection of the facility. Monitors noted New York Avenue's compliance with applicable requirements and stated that this shelter exhibited:

"[e]xceptional efforts in outreach to the other providers in the Continuum of Care . . .; [e]xceptional communication between the clients and the staff that permit modifications to policy that benefit both the clients and the program; and [commended them for] [e]stablishing and maintaining an electronic database to track Work Orders[.]"

However, this Monitoring Inspection Form also listed 10 deficiencies at New York Avenue, including:

- fire alarm system not fully functional;
- approved Fire Watch Plan<sup>53</sup> not provided during inspection;
- no documentation of a current annual tuberculosis test in eight random employee records inspected;
- no documentation of a current performance evaluation within 1 year in the random employee records inspected;
- two toilets on the second level needed repairs;
- twenty mattresses were cut or damaged and required replacement during followup inspection (approximately 40 were identified as such during a July 2, 2012, inspection);
- three showers needed repairs;

housing, permanent supportive housing, and supportive services." *Id.* § 4-751.01(8); *see also* 29 DCMR § 2544.1; D.C. Code § 4-754.52(c).

<sup>&</sup>lt;sup>49</sup> See D.C. Code §§ 4-754.52(b), 4-754.01; see also 29 DCMR § 2543.17.

<sup>&</sup>lt;sup>50</sup> See 29 DCMR § 2543.3.

<sup>&</sup>lt;sup>51</sup> D.C. Code § 4-754.53(a); see also id. § 4-754.52(d).

<sup>&</sup>lt;sup>52</sup> OSM's Monitoring Inspection Form assesses both services provided and conditions at homeless shelters.
<sup>53</sup> A fire watch entails several employees, equipped with walkie-talkies, conducting an internal and external inspection of the building and identifying any potential fire hazards. If a fire hazard is identified (e.g., smoke coming from a trash can), the individual communicates the observed hazard to the other fire watch participants and remains on-site until the hazard is abated.

- employment program case management records for clients did not reflect current savings account balances or information;
- case management record samples indicated a pattern of clients in the employment program not in compliance with program rules; and
- provider replaced clients on the DHS approved work detail program<sup>54</sup> with individuals performing community services with the D.C. Superior Court Offender Services Program,<sup>55</sup> without the knowledge or approval of DHS.

Monitors instructed New York Avenue employees to address all deficiencies by October 18, 2012, prior to the team's inspection of the facility. The team found that New York Avenue had:

- repaired the fire alarm system, toilets, and showers;
- replaced all mattresses on September 20, 2012, and they appeared to be in good condition; and
- completed sufficient documentation of employee performance evaluations.

The work detail program was suspended in February 2012. Consequently, the deficiencies noted related to this program were no longer applicable. New York Avenue management reported that the fire alarm system was fully functional and therefore an approved Fire Watch Plan was no longer required. The team conducted a file review of client case files and personnel files and observed some deficiencies, which are addressed in the Introduction and Adherence to Applicable Laws, Regulations, and Contracts sections of this report.

The team noted that OSM performed its oversight responsibilities for the New York Avenue shelter in accordance with the D.C. Code and DCMR. The team also recognized improvements in oversight since the OIG's August 2012 issuance of *Report of Special Evaluation: Office of Shelter Monitoring* (OIG No. 12-I-0049JA).

#### Adherence to Applicable Laws, Regulations, and Contracts

Numerous provisions, such as the Homeless Services Reform Act and DCMR sections mandating shelter performance, govern operations and conditions at New York Avenue. Additionally, contracts with DHS and TCP define requirements for employees and contractors. The team noticed some statutory, regulatory, or contractual deficiencies that are noted below.

<sup>&</sup>lt;sup>54</sup> The work detail program provided 24-hour access to the facility for clients who assisted the shelter with the upkeep of the building. The program was suspended following a stabbing that occurred on February 17, 2012, outside the New York Avenue facility because shelter management felt that they could not provide sufficient security in the building during the day to continue this program. Furthermore, they did not have additional funding available to increase the number of SPOs.

<sup>&</sup>lt;sup>55</sup> See, e.g., <a href="http://www.csosa.gov/supervision/programs\_services.aspx">http://www.csosa.gov/supervision/programs\_services.aspx</a> (last visited Dec. 19, 2012).

#### Finding: Contracts, program rules, and policies and procedures contained inaccurate and outdated information.

TCP contracts with the District to manage the provision of services to the District's homeless population and subcontracts with various entities to deliver these services. TCP's contracts specify the contract period, price, services to be provided, and expectations.

In addition to contracts, program rules and policies and procedures dictate operational requirements and expectations among employees and clients of the District's homeless shelters. The GAO cites a need that "[a]ppropriate policies, procedures, techniques, and mechanisms exist with respect to each of [an] [agency's] activities" and that "[c]ontrol activities described in policy and procedure manuals are actually applied and applied properly."56 Control activities should be "regularly evaluated to ensure that they are still appropriate and working as intended."<sup>57</sup> In addition to the control activities detailed in policies and procedures, each homeless shelter has its own program rules that communicate program requirements to shelter clients. These are a powerful tool for shelters to use when administering services because repeated violations of program rules can lead to sanctions (transfer, termination, or suspension) for homeless shelter clients.

During interviews and observations, the team noted the following instances where employees' performance of duties and responsibilities and program operations were inconsistent with contractual requirements, policies and procedures, or program rules. When the team inquired about the inconsistencies, employees reported that the governing documents were outdated and no longer reflected current practices.

a. TCP does not require providers to complete annual performance plans. TCP's contract with Catholic Charities states that Catholic Charities must submit an annual performance plan (containing quantifiable data elements) to TCP for review and approval. Furthermore, Article VI of this contract states that TCP and DHS will "monitor the Contractor's performance as set forth in the Annual Performance Plan . . and compliance with all applicable local and federal laws and regulations . . . . " The team asked TCP for a copy of Catholic Charities' annual performance plan to determine whether performance goals were met. A TCP representative responded that TCP does not require this document from providers any longer. TCP stated that it will remove this language from its contracts because it is no longer accurate.

In order to evaluate vendor performance, TCP conducts quarterly evaluations using "scorecards" that assess finance, client, learning, and internal operations. The team reviewed New York Avenue's first quarter 2013 evaluation and observed that most of the score card assessment factors were noted as "not applicable" to New York Avenue. This performance scorecard template does not adequately assess contractor performance, and TCP should establish a new performance evaluation metric for New York Avenue going forward.

<sup>&</sup>lt;sup>56</sup> INTERNAL CONTROL MANAGEMENT AND EVALUATION TOOL, Control Activities at 34 (August 2001).

- b. Pro50's contract with TCP contained inaccurate information regarding SPO staffing during hypothermia alerts. TCP's contract (Section I, Article I, paragraph 8) with Pro50 states that Pro50 "must provide security coverage for on call days during the Hypothermia Season." The team asked TCP whether this contractual clause allows New York Avenue to request additional SPOs when hypothermia alerts are issued. A TCP representative replied that in the past, due to client overflow, shelter management had the option to request additional security during hypothermia season. However, this on-call option has since been discontinued. When this option was available, the cost for the on-call SPO was included in the contract. The on-call option was discontinued because it became cumbersome to manage the hours and days when the on-call SPO worked. This interviewee said that TCP will remove this contract clause because it is no longer accurate.
- c. SPO post orders contained outdated language. When reviewing Pro50's post orders for New York Avenue, the team observed that they were out of date. The orders reflected inaccurate staffing levels and tours of duty for SPOs and noted that armed SPOs were assigned to the facility. The team alerted Pro50 of these discrepancies, and a representative updated the post orders accordingly.
- d. Program rules contain references to discontinued case management and employment services. Program rules establish the rights and responsibilities that clients and New York Avenue personnel must uphold. They also identify the services and resources that are available to clients. In March 2012, DHS approved New York Avenue's program rules, but the rules inaccurately state that clients can meet with "wrap-around" service providers and participate in a Client (Work) Detail Program. A New York Avenue employee reported that wrap-around services was a comprehensive case management approach where New York Avenue employees assisted clients with obtaining resources (e.g., food stamps, veterans affairs assistance, employment services, and vocational rehabilitation services) at the shelter, rather than having them access services on their own at various sites throughout the District. New York Avenue reportedly stopped offering wrap-around services approximately 7 years ago, and the program rules were not updated accordingly. Likewise, the program rules erroneously state that clients can participate in the Work Detail Program. This program was suspended in February 2012 following a stabbing that occurred outside the shelter.

When contractual agreements, policies and procedures, and program rules contain inaccurate information, the District may be at risk of legal liability; employees may not uniformly perform duties and responsibilities; clients may receive disparate levels of service; and clients and employees may have different expectations. In each instance identified above, employees either were not aware of the outdated language or simply had not taken steps to update it. The respective entities, however, stated that they would take appropriate measures to update the documents to reflect current practices. For example, Pro50 updated the post orders by removing references to armed guards and inserting the correct staffing levels and tours of duty for SPOs.

#### **Recommendation:**

That the D/DHS, TCP, and Catholic Charities immediately review existing contractual agreements and policies and procedures to determine whether they contain requirements that are no longer implemented in practice. Upon completion of this evaluation, the respective entities should: 1) convene to discuss and update documents as necessary; and 2) conduct more frequent and comprehensive reviews of contractual agreements and policies and procedures so that they do not reflect inaccurate requirements.

#### Finding: Required information missing from shelter's personnel records.

According to its contract with TCP, Catholic Charities must maintain an individual locked personnel file for each employee. Personnel files must contain: 1) the employee's application for employment; 2) a resume; 3) professional and personal references; 4) applicable credentials/certifications; 5) personnel actions; 6) training history; 7) annual evaluations; 8) any allegations of professional or other misconduct; 9) any action with respect to any allegations; 10) the date and reason for any employee termination; and 11) documentation of a current tuberculosis test.<sup>58</sup>

On November 30, 2012, the team reviewed personnel files for 15 (approximately 50 percent) New York Avenue employees. Overall, the personnel files were well-maintained and stored in a secured personnel file room with restricted access. Although well-organized, the files lacked some required information. Out of the 15 personnel files reviewed:

- 5 lacked annual tuberculosis test results:
- 2 contained expired first aid training confirmations;
- 7 lacked evidence of an employment reference check; and
- 2 contained expired CPR training confirmations.

The team contacted a Catholic Charities' employee regarding the missing documents and learned that employees missing tuberculosis tests, CPR, and first aid training will receive the requisite tests and training in February 2013. However, the team observed that two first aid certifications expired in October and February 2011, over a year prior to the team alerting Catholic Charities to this deficiency. The team also inquired about the missing employee reference checks, and a Catholic Charities employee stated, "[f]or staff hired prior [to] our merger in 2007 references may be less than two or missing. It was determined, by the Agency[] that tenured staff's annual performance evaluations would suffice instead of seeking old references."

Catholic Charities is responsible for ensuring that personnel files are updated and contain all required documentation in accordance with the terms cited in its contract with TCP. The lack of tuberculosis testing for five employees is of particular concern because homeless shelter

<sup>&</sup>lt;sup>58</sup> This contract does not define what "current" means. However, according to TCP's subcontract with Catholic Charities, tuberculosis tests must be completed annually and within 30 days of a new employee's hiring date.

employees and clients may be at risk of contracting tuberculosis, placing the District at risk of legal liability. <sup>59</sup> Without current CPR and first aid certifications, employees may not be prepared to respond to a client or employee needing emergency assistance. Furthermore, professional and personal reference checks are a vital part of the employment screening process. As such, reference checks must be conducted during pre-employment screening in order to determine whether an applicant is suitable for employment.

#### **Recommendation:**

That the D/DHS, TCP, and Catholic Charities ensure that: 1) personnel files for employees located at New York Avenue are updated and contain all required documentation in accordance with the contract; and 2) all employees receive tuberculosis tests, CPR training, and first aid training within required timeframes.

## **Additional Areas of Concern**<sup>60</sup>

Shelter personnel perceive a need for armed guards due to safety concerns. An employee stated that he/she was uncertain of the protection level that would be provided in a crisis situation because SPOs do not carry firearms, and only have pepper spray, night sticks, and handcuffs. Another employee noted that anyone can walk into the shelter because the entrance is unlocked. This employee stated that an angry client could come to the shelter with a gun and shoot clients and employees.

According to an interviewee, it is common practice within the District government not to station armed guards in shelter facilities. This individual reported that at least 5 years have elapsed since shelters employed armed SPOs. He/she stated that homeless advocacy groups, providers, and legal aides indicated that clients felt intimidated by armed guards. As a result, shelters removed armed SPOs from all shelter facilities. According to this interviewee, the consensus at the time was that "[w]e're not running a prison; therefore, we do not need armed security guards." A Pro50 representative commented that SPOs should be able to handle any situation with their non-lethal gear and therefore do not need to be armed.

Employees stated that some clients act more aggressively with SPOs because they do not carry weapons. Moreover, one employee stated that clients may be less inclined to challenge a security guard's authority if they know that the guard not only has arrest powers, but also is armed. An interviewee stated that the "world has changed" since the decision was made to remove armed SPOs from shelter facilities, and perhaps the matter should be revisited. Recommendation: Given employee concerns, the team recommends that this matter should be reassessed by New York Avenue and homeless advocacy groups.

<sup>&</sup>lt;sup>59</sup> See http://washingtonexaminer.com/local/dc/2011/06/metroaccess-riders-exposed-tuberculosis-sue-transit-agency (last visited Jan. 29, 2013).

60 Areas of concern are issues that warrant management's attention but do not rise to the level of a finding.

A case worker reported potential safety concerns when alone with clients. Case workers meet with clients to assess their needs, provide referrals for services, and discuss progress toward established goals. One case worker reported that meetings with clients typically occur behind closed doors, and it would be helpful if there was a panic button in his/her office in case a client became confrontational. Currently, there is no discrete way of alerting staff when case workers need assistance. Employees may be at risk of bodily harm if they cannot quickly alert others of potential dangerous situations. Recommendation: Given the potential safety risks, the team recommends that Catholic Charities assess this matter further and coordinate with TCP and DHS as needed.

Additional diabetic meals are needed to accommodate demand. New York Avenue's program rules state that if a client needs a reasonable accommodation for a disability, he must notify a staff member and provide documentation (e.g., a doctor's note) of his disability. New York Avenue recognizes diabetes<sup>61</sup> as a disabling condition, and Henry's Soul Café provides the shelter 30 diabetic meals each day. The team observed New York Avenue's food service in March 2013. Diabetic clients were served first, and they acknowledged receipt of their meal by signing the diabetic client list. This list contained 63 diabetic clients and is updated as requests are submitted. Although the number of clients on the diabetic meals list exceeds the number of diabetic meals available, the team did not observe any diabetic clients who did not receive a diabetic meal. Not all of the 63 clients arrive for dinner service daily; as a low-barrier shelter, they are not required to do so.

A New York Avenue manager reported that he/she submitted a request to TCP for an increase in the number of diabetic meals; however, a TCP employee reported that a request was not received. A TCP employee informed the team that there would not be any impediments to increasing the number of diabetic meals and that New York Avenue needs to send a request via email. Therefore, it appears that there was miscommunication regarding the request for additional meals. *Recommendation*: The team recommends that New York Avenue resubmit a request for more diabetic meals to ensure that they can meet client demand.

Unsanitary items observed in kitchen area. On February 7, 2013, the team conducted a site visit at New York Avenue. During the walk-through of the kitchen area, the team observed two plastic razors on what appeared to be an ice chest or refrigeration system. While the team acknowledges that clients are allowed to have plastic razors at the facility for the purpose of grooming, under no circumstances should razors or any other personal grooming items be left in the kitchen. According to the D.C. Department of Health (DOH), 62 Staphylococcus aureus-Foodborne Intoxication is a food-borne virus that is easily transmitted by food handlers. The bacteria can be found on the skin, in infected cuts, on pimples, noses, and in throats. It is transmitted from people to food and can cause severe nausea, abdominal cramps, vomiting, and diarrhea. Recommendation: The team recommends that the shelter ensure that the kitchen area is cleaned and properly maintained.

<sup>&</sup>lt;sup>61</sup> "Diabetes mellitus (MEL-ih-tus), or simply, diabetes, is a group of diseases characterized by high blood glucose levels that result from defects in the body's ability to produce and/or use insulin." <a href="http://www.diabetes.org/diabetes-basics/?loc=GlobalNavDB"><u>Http://www.diabetes.org/diabetes-basics/?loc=GlobalNavDB</u></a> (last visited Feb. 20, 2013).

<sup>62</sup> See http://doh.dc.gov/node/170752 (last visited Feb. 14, 2013).

Employees cite need for an additional case worker. There are approximately 360 clients at New York Avenue and only 4 case workers. One case worker noted that sometimes it can be overwhelming to serve the shelter's clients. For example, it can be difficult when this individual is meeting with one client and another client requests assistance. According to this case worker, when the clinical team is busy, sometimes clients feel that employees are not trying to help them. A second case worker noted that although he/she thinks there is adequate staffing within the shelter, an additional case worker would be helpful. A third case worker reported that the current number of case workers:

is not adequate because there is a group of residents who do not receive case management services at all, mainly because case management is not a requirement to live at New York Avenue Housing Assistance Center. If we had more case managers we could do more outreach and effective[ly] engage the residents . . . . [and] [b]ecause we are understaffed, case managers can be overloaded with serving the clients.

The fourth case worker reported that an additional case worker would be useful, but they have been managing with existing staff levels. A New York Avenue manager reported to the team that "funding for Case Management at New York Avenue is fundamentally inadequate." *Recommendation*: The team recommends that New York Avenue and TCP assess the current case management staffing levels and determine whether an additional case worker is warranted.

#### Conclusion

During the special evaluation, all New York Avenue employees were cooperative and responsive. They appear to be dedicated and doing a good job serving clients with available resources. Employees expressed concern about the well-being of their clients, strive to maintain an orderly facility, and link clients to resources upon request.

The team identified six findings and several areas of concern related to health and safety, building conditions, and management compliance with contractual and regulatory guidelines. The findings of greatest concern were the insufficiency of security personnel during the hypothermia season and evening shift, and the severe and ongoing rodent problem.

The team made 12 recommendations to improve service delivery to clients and shelter monitoring and oversight, including: assessing security staffing levels to ensure adequate coverage; collaborating in finding a solution to the pest infestation; ensuring that contractual requirements and policies and procedures are updated and adhered to; and ensuring that staff personnel files contain all required information. The team believes that if these larger problems and other smaller deficiencies are resolved satisfactorily, the quality of shelter services, operations, and condition of the facility will be enhanced to a higher level.

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The findings and recommendations in this report will necessitate OIG follow-up. Consequently, I request that you provide information and periodic updates to this Office regarding any corrective actions that you direct. If you have any questions about the report, please contact Gabrielle Aponte Henkel, Director of Planning and Inspections, on (202) 727-2540.

Sincerely,

Charles J. Willoughby

Inspector General

CJW/ldm

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# **APPENDIX**

**Photographs of New York Avenue** 

1: Street view of the shelter from New York Avenue



2: Lobby and security desk



**3:** Rear entrance to shelter where intake occurs



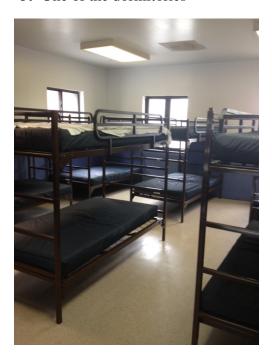
## **4:** Examples of confiscated items



**6:** Lockers for storing client belongings



**5:** One of the dormitories



**7:** Kitchen area where dinner is served



## **APPENDIX**

**8:** Example of a diabetic meal catered by Henry's Soul Café



(Mixed vegetables)



(Spaghetti)

# **9:** Example of a meal catered by D.C. Central Kitchen for non-diabetic clients



(Fish soup)



(Fruit salad)

10: Unity Health Care Clinic

