



Office of Inspector General Independent Living Older Blind Program

Report #A-1920-032

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Executive Summary

In accordance with the Department of Education's fiscal year (FY) 2020-2021 audit plan, the Office of Inspector General (OIG) conducted an audit of the Division of Blind Services (DBS) Independent Living Older Blind (OB) Program. The purpose of this audit was to determine whether DBS effectively manages and monitors the Independent Living Older Blind Program and whether the Community Rehabilitation Providers (CRP) are delivering services in accordance with contractual terms. During this audit we noted that, in general, the CRPs met the contractual requirements for initial intake, assessment, and timely rendering of services for older blind clients; and DBS effectively monitored the CRPs to ensure they met contractual standards and service delivery requirements. However, there were instances where improvements could be made to strengthen some of these controls. For example, we cited instances where Comprehensive Functional Assessments occurred after the client's individualized plan was developed and signed. We additionally determined DBS could enhance the CRP Risk Assessment and subsequent monitoring. The Audit Results section below provides details of the instances noted during our audit.

Scope, Objectives, and Methodology

The scope of this audit included an examination of the DBS Independent Living Older Blind Program from July 1, 2019, to June 30, 2020. Our objectives for the audit included:

1. Determining if DBS is effectively monitoring the contracts for the Independent Living Older Blind Program;
2. Determining if DBS has sufficient internal controls in place to ensure the Community Rehabilitation Providers are delivering services in accordance with contractual terms; department policies and procedures; and applicable laws, rules, and regulations; and
3. Determining if payments are made in accordance with contractual terms and applicable laws.

To accomplish our objectives, we reviewed applicable laws, rules, and regulations; interviewed appropriate department staff; reviewed policies, procedures, and related documentation; reviewed a sample of CRP contracts and related documentation; reviewed a sample of client files; reviewed the risk assessments; and reviewed a sample of monitoring reports.

Background

The mission of the Division of Blind Services (DBS) is to help blind and visually impaired individuals achieve their goals and live their lives with as much independence as possible. The Independent Living Older Blind Program was established to help blind and visually impaired individuals age 55 and older learn how to cope with their vision loss and maintain their independence. Title 34 Code of Federal Regulations (CFR) section 367.5 defines an older blind individual as, “55 or older and has significant visual impairment which makes competitive employment extremely difficult to attain but for whom independent living goals are feasible.” The primary goal of the OB program is to provide instruction and guidance to help individuals with blindness or visual impairments to acquire the skills and knowledge they need to manage their daily lives in their own homes and communities. The majority of the clients in these programs lost their vision late in life.

Services under this program are provided through DBS district offices and Community Rehabilitation Providers (CRP). CRPs are private, not-for-profit service organizations that provide or facilitate the provision of services enabling individuals with bilateral visual impairments to maximize their opportunities to function independently in their community. DBS contracts with CRPs to provide services to eligible clients. The services provided may include: assessment, advocacy training, adjustment to blindness counseling, personal and home management, adaptive aids, and device training. District staff conduct monitoring of the CRPs through review of invoices and program deliverables submitted through the Accessible Web-based Activity Reporting Environment (AWARE) Case Management System. The DBS Rehabilitation Specialists and District Administrators collaborate with CRP staff to facilitate service delivery, ensure case file documentation, provide outreach activities, and monitor the program. During fiscal year (FY) 2019-2020, DBS entered into contracts with 18 CRPs for provision of Older Blind Program services for a total amount of \$4,167,606.00.

Audit Results

Finding 1: Comprehensive Functional Assessments occurred after the client's individualized plan was developed and signed.

According to the CRP contracts, “Client-specific services shall be individualized, based on a client’s assessed need, and his/her individualized plan.” Attachment A, Section I.E.6, Needs Assessment, of the CRP contract states,

- “i. Assessment(s) to be Completed: Comprehensive Functional Assessment (“CFA”).
- ii. Due Date: Contractor shall complete the required initial assessment(s) within sixty (60) days from the date of eligibility determination for each client, unless documentation demonstrates that compliance is beyond the Contractor’s control.
- iii. Frequency of Assessment:
 - i. Assessments shall be conducted with the following frequency: An assessment shall be administered and/or updated: 1) at the start of the client’s case and within the timeframe established above; 2) annually, while the client is receiving services from the Contractor and within thirty (30) days from the client’s anniversary date; and 3) at the time of the client’s case closure and/or upon completion of the services that the client is receiving under contract from the Contractor.”

Attachment A, Section I.E.7, Plan Development, of the CRP contract states the “Contractor shall develop an individualized plan based upon assessment results and input from the client or client’s legal representative.” Comprehensive Functional Assessments (CFA) involve the CRP staff evaluating and measuring through observation and interviews the client’s level of independence in their home and community.

During FY 2019-2020, DBS contracted with 18 CRPs for the provision of services for the Independent Living Older Blind Program. We selected 6 of the 18 CRPs for review. For those six CRPs, we reviewed a sample of 38 cases whose initial intake, referral, eligibility determination, and initial CFAs took place within FY 2019-2020. We reviewed the CFAs for the sampled cases and located assessments in 36 of the 38 client files (95%). In two of the client files, we found no CFA documentation to demonstrate that the client’s full CFA was completed. We additionally compared the CFA dates to the eligibility determination dates and determined the 36 CFAs occurred within 60 days of eligibility determinations in accordance with the contract.

During the review of the CFAs, we noted inconsistencies between the DBS program manual and the CRP contracts in relation to the timing of the CFAs. Per the DBS manual, “CRP completes a Comprehensive Functional Assessment (CFA) on each eligible client referred or requesting IL [Independent Living] Skills (ILS) training at a minimum *prior to plan development*¹ and at the completion of services. Assessments are to be administered in a face to face meeting. The assessment will be entered at the start of the case, at closure and annually on anniversary date. All exceptions must be documented.” The language requiring the CFA to occur prior to the plan development was not as clearly defined in the CRP contracts. DBS interpreted the contract language to mean that a CFA should be completed after eligibility and before plan development, which correlates with the manual.

We compared the date the CFA was created to the date the plans were signed and found in 27 of the 38 (71%) sampled cases, the CRPs created the CFAs after the signature of the plan ranging from 1 day to 54 days. We noted inconsistencies for recording CFAs by one CRP in particular. For the particular CRP, we identified three cases where the CRP case manager entered a CFA notation under the heading of Actual Services, and subsequently created an additional entry of an initial CFA at a later date. This indicates training and technical assistance may be needed to ensure that CRP case managers record initial CFAs in accordance with contract terms and that the CFAs are reflected early in a client’s case.

Overall, we determined that the six contractors in our sample are performing initial CFAs with a few exceptions where case managers did not submit CFAs or completely fill out CFA fields in the AWARE system. However, lack of clarity and inconsistent language between the contracts and the manual for timely completing assessments could result in case managers completing assessments differently from one CRP to another and renders monitoring of those programs more difficult. The practice of completing CFAs after the signed plan may also hinder clients from receiving needed services based on their level of independence.

¹ Emphasis added.

Recommendation

We recommend the Division clarify requirements for the recording of CFAs through its program manual and its contracts to better direct CRP case managers completing the CFAs. We recommend DBS monitor the CRPs to ensure the needs assessments are completed prior to the plans. DBS may also consider conducting training and technical assistance following these adjustments to ensure services rendered to older blind clients are offered through consistent application of assessment tools.

DBS Management Response

Concur. The action items to be taken are as follows:

1. Clarify requirements:
 - Update program manual to match contract language.
 - Update AWARE Pages for CFA reporting consistency.
2. Contract Monitoring: The Contract Management and Compliance Team provides monthly reviews of client assessments and valid plans. However, beginning 1.1.2021, the team will begin to review and monitor the dates of completed assessments to ensure alignment with the Program Manual.
3. Technical Assistance
 - Draft memo clarifying requirements (to include updated manual language) and AWARE changes.
 - Set up training via TEAMS to review updates/requirements.

Finding 2: DBS could enhance the CRP Risk Assessment and subsequent monitoring.

Per Section 287.057(14) (a) of the Florida Statutes, “For each contractual services contract, the agency shall designate an employee to function as contract manager who is responsible for enforcing performance of the contract terms and conditions and serve as a liaison with the contractor.

- (a) Each contract manager who is responsible for contracts in excess of the threshold amount for CATEGORY TWO must, at a minimum, complete training conducted by the Chief Financial Officer for accountability in contracts and grant management. The Chief Financial Officer shall establish and disseminate uniform procedures pursuant to s. 17.03(3) to ensure that contractual services have been rendered in accordance with the contract terms before the agency processes the invoice for payment. The procedures must include, but need not be limited to, procedures for monitoring and documenting contractor performance, reviewing and documenting all deliverables for which payment is requested by vendors, and providing written certification by contract managers of the agency’s receipt of goods and services.”

DBS has developed administrative monitoring requirements for contractors. Required elements for monitoring include accreditation, fire inspections, health inspections, various policies and procedures, and staff qualifications. DBS also created an on-site checklist outlining its process for initiating, monitoring, and completing reviews of the CRPs. The checklist summarizes monitoring processes for the reviews and ends with initial findings and the development of the

final report. DBS began conducting reviews of its 20 contracted Community Rehabilitation Providers (CRPs) in fiscal year (FY) 2019-2020. This was the first time the CRPs were monitored in the past three years. To evaluate the risks of the CRPs and determine monitoring requirements, DBS created risk assessment weight tables and assigned the CRPs an average risk score. In FY 2019-2020, CRPs receiving a score between 0-35 were considered low risk, 36-50 were medium risk, and 51-70 were high risk. The risk scores assigned ranged from 28.2 to 38. Of the 20 CRPs, 18 were identified as providing services for the Older Blind Program.

The FY 2019-2020 monitoring schedule reflected that up to two CRPs were to be reviewed, by region, for each month of the fiscal year starting in October 2019. According to the monitoring schedule, all 18 CRPs that provided services for the Older Blind Program were to be monitored. DBS conducted on-site visits for 12 of the 18 CRPs between October 2019 and March 2020. DBS was unable to conduct site visits for the remaining six CRPs. Per DBS staff, the delays in monitoring were a result of changes in CRP management and the effects of the coronavirus pandemic. The Contract Managers were instructed to leave the monitoring reports in draft format until further notice. Since DBS did not complete an onsite monitoring or desk review for any of the CRP's in over three years, DBS used the 2019-2020 draft monitoring results as a baseline for future monitoring efforts. If a non-compliance concern was identified, DBS discussed it at the exit interview and noted the concern in the monitoring report.

For FY 2020-2021, the Division modified its risk assessment instrument to include prior service delivery and financial consequences. The risk assessment scores were also modified to reflect CRPs receiving a score 29 or less were considered low risk, 30-59 were medium risk, and 60 and above were considered high risk. As a result of the changes, DBS reassessed the scores for FY 2020-2021 to ensure they were more evenly distributed and placed each CRP into a spreadsheet that would calculate and provide a score automatically. DBS continues to develop its monitoring system for annual reviews of CRPs.

We noted that while the FY 2019-2020 and FY 2020-2021 risk assessments included definitions for what constitutes a high risk, medium risk, and low risk contract, the monitoring required is vague. For example, the risk assessment states a high risk contract requires more stringent monitoring than the medium or low risk contracts and a medium risk contract requires less monitoring than the high risk contracts but more than the low risk contracts. The risk assessment does not quantify what more "stringent" monitoring would require. The risk assessment also does not state which of these risk categories would require an onsite visit versus a desktop monitoring.

We additionally noted in the risk assessment that while the CRPs receive a score for provider history, the assessment does not include whether the CRP was monitored in the last year, last three years, etc. Unless all CRPs are monitored each year, without including a field of past monitoring, DBS may not review those CRPs with lower risk scores due to the other categories causing the CRPs to score higher. DBS could also enhance its tracking of contractor monitoring by implementing a mechanism to identify the findings, dates of final reports, subsequent corrective actions taken by CRPs, and the dates on which corrective actions are completed. Documenting this as part of a process flow chart or spreadsheet would provide DBS management a more comprehensive view of the results of monitoring across the CRPs. DBS currently has a

template including these data elements and could merge these onto a working spreadsheet. This practice would allow DBS to track findings and CAPs across all providers and recommend areas in which providers may need training and additional technical assistance based on identified findings.

Recommendation

We recommend in future monitoring, DBS finalize the monitoring reports and provide the reports and results to the CRPs. We recommend DBS modify the risk assessment to include a numerical score for previous monitoring (monitored in the last year, 3 years, etc.). We additionally recommend DBS clearly define the type of monitoring that should be conducted based on the risk category. DBS should also consider developing a monitoring tracking system that displays the timing of its monitoring process to include scheduled visits, summarized results of visits, findings identified, and the dates corrective actions were implemented and completed.

DBS Management Response

Concur. The action items to be taken are as follows:

1. The Contract Monitoring and Compliance Team will finalize and send monitoring reports and results to CRP's for the 2020-2021 fiscal year.
2. The Contract Monitoring and Compliance Team updated the risk assessment to include a score for previous contract monitoring visits.
3. The Contract Monitoring and Compliance Team updated the risk assessment to include the type of monitoring (desk or on-site) that is recommended based upon risk score and previous corrective action plans.
4. The Contract Monitoring and Compliance Team created a tracking report for all desk and on-site monitoring visits.

Closing Comments

The Office of the Inspector General would like to recognize and acknowledge the Division of Blind Services and staff for their assistance during the course of this audit. Our fieldwork was facilitated by the cooperation and assistance extended by all personnel involved.

To promote accountability, integrity, and efficiency in state government, the OIG completes audits and reviews of agency programs, activities, and functions. Our audit was conducted under the authority of section 20.055, F.S., and in accordance with the International Standards for the Professional Practice of Internal Auditing, published by the Institute of Internal Auditors, and Principles and Standards for Offices of Inspector General, published by the Association of Inspectors General. The audit was conducted by James Russell and supervised by Tiffany Hurst, CIA, and Deputy Inspector General.

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