



CITY OF SAN ANTONIO

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December 20, 2013

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**SUBJECT: Follow-up Audit of the Department of Human Services
Haven for Hope Program Management**

Mayor and Council Members:

We are pleased to send you the final report of the Follow-up Audit of the Department of Human Services Haven for Hope Program Management. This audit began in July 2013 and concluded with an exit meeting with department management in November 2013. Management's verbatim response is included in Appendix B of the report. The Department of Human Services management and staff should be commended for their cooperation and assistance during this audit.

The Office of the City Auditor is available to discuss this report with you individually at your convenience.

Respectfully Submitted,

Kevin W. Barthold, CPA, CIA, CISA
City Auditor
City of San Antonio

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CITY OF SAN ANTONIO
OFFICE OF THE CITY AUDITOR



Follow-up Audit of the Department of Human Services
Haven for Hope Program Management

Project No. AU13-F04

December 20, 2013

Kevin W. Barthold, CPA, CIA, CISA
City Auditor

Executive Summary

As part of our annual Audit Plan, we conducted a follow-up audit of Haven for Hope Program Management. The initial report was dated August 28, 2012. Our audit objective follows:

Has the Department of Human Services (DHS) effectively implemented action plans in response to the recommendations made in the initial audit?

Yes, DHS has effectively implemented action plans to address the recommendations in the aforementioned report.

DHS has implemented internal controls to ensure appropriate monitoring of delegate agencies. Specifically:

- Data validity checks are performed to ensure the accuracy of data entered into the Homeless Management Information System (HMIS).
- Adequate training for HMIS users is being conducted.
- Performance measures are clearly defined and are directly related to the corresponding services provided by the agencies.
- Monthly and quarterly reviews to monitor performance are conducted by the contract monitors.

DHS Management's verbatim response is in **Appendix B** on page 5.

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Background

In August of 2012, the Office of the City Auditor completed an audit of the Department of Human Services (DHS). The objective of that audit was as follows:

Are select Haven for Hope programs complying with contract terms to include balance scorecard performance plans?

The Office of the City Auditor issued a report that found the controls for monitoring performance measures of Haven for Hope programs as well as the data reliability in the HMIS were not in place or were not working as intended. In addition, performance measures were neither clearly defined nor developed prior to initiation of contracts or were not updated prior to the renewal of contracts.

Audit Scope and Methodology

The audit scope was limited to the recommendations made in the original report and the corresponding action plans.

We selected a judgmental sample of the programs from the top 3 delegate agencies on campus. This included: Haven for Hope, Center for Health Care Services, and the San Antonio Food Bank.

We interviewed DHS and Haven for Hope staff members to gain an understanding of the department's processes. We reviewed COSA contracts, defined balanced scorecard performance plans, monthly Contract Monitoring Reports (CMR), and quarterly Program Performance Reviews (PPR). Additionally, we verified HMIS support documentation maintained by the delegate agencies to support the data that is used in the above mentioned reports.

Lastly, we performed testing to determine whether HMIS system application controls for entering data in the system were implemented.

We conducted this follow-up performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

Prior Audit Recommendations and Status

A. Performance Measure Results

Prior Recommendation - A.1:

Haven for Hope management should develop and implement adequate controls for the HMIS system to ensure that reliable information is captured and a sufficient audit trail is created. A few examples of IT controls are adequate user training, periodic monitoring of user access, and edit and validity checks. Edit and validity checks should be incorporated into the system to prevent end users from inputting bad or invalid data and to prevent end users from skipping over required fields.

Status: Implemented

Adequate application controls of HMIS have been implemented and are working as intended to ensure security, timeliness, completeness and accuracy of data.

System edit checks were implemented and are validated via system generated exception reports from HMIS. The checks identify missing and/or invalid data that is required to be reported by regulatory agencies such as: date of birth, registration date and validity of social security numbers.

In addition, security settings are in place for user access to maintain the security, confidentiality, and integrity of the data, including: periodic monitoring, end user inactivity and recovery back up.

Haven for Hope provides adequate user training for HMIS end users. The training is conducted annually and HMIS users are required to sign a system security agreement as evidence that they completed training.

Prior Recommendation - A.2:

DHS management should require Haven for Hope and its partner agencies to maintain alternate records to support performance measure results until Haven for Hope has resolved the issues in the HMIS system.

Status: Implemented

DHS has a monitoring process in place to ensure the accuracy of the data reported for performance measures. They perform monthly and quarterly reviews to monitor performance measures are in compliance with contract requirements.

On a monthly basis, DHS contract monitors ensure that the delegate agencies are meeting their projected annual performance goals. They implemented a tracking process that ensures the accuracy of the data reported to monitor projected measures. If current projections indicate that measures are not on track to be met, below 90% or above 110% of goal, the agencies are required to provide an explanation of the variance. Their explanation identifies the issue as well as details for remediation and a planned date of completion.

On a quarterly basis, Program Performance Reviews (PPR) are conducted. During these reviews, assessments are conducted of the data to ensure that accurate support is in place. In addition interviews and fiscal information is validated. If there are major compliance, performance and/or fiscal issues, management is required to submit a corrective action plan letter to DHS. The corrective action plan provides an explanation that must be accepted by DHS.

B. Balance Scorecard Performance Plans

Prior Recommendation:

DHS management should create a performance plan for each agency that receives funding from (or through) COSA. The performance measures in each plan should be clearly defined, and they should be directly related to the services being provided by the agency. DHS should be aware of the agencies' methodologies for obtaining each performance measure count to ensure the appropriate data is being reported. Finally, the performance plan should be developed prior to initiation (or renewal) of the contract.

Status: Implemented

Haven for Hope and its partner agencies have implemented a performance plan titled "Haven for Hope FY13 Performance Measures Definitions".

This document is reviewed periodically to ensure that measures are related to the program goals and describes the methodology to include:

- How the information will be used
- The population included
- Details for how the count (i.e. # of individuals) will be obtained
- Process used to monitor/audit the counts
- Other notes/parameters such as issues noted

Any updates to program goals must be agreed upon by DHS and Haven for Hope. Note: During the fiscal year, changes to certain performance measures occurred that required the approval of DHS and Haven for Hope.

We verified that in June of 2013, a contract amendment containing the changes made to the performance measures was signed indicating both parties agreement to the changes.

Appendix A – Staff Acknowledgement

Sandra Paiz, CFE, Audit Manager
Rosalia Vielma, CFE, Auditor in Charge
Christina Liguori, MACY, Auditor

Appendix B – Management Response



CITY OF SAN ANTONIO

SAN ANTONIO TEXAS 78283-3966

November 18, 2013

Kevin W. Barthold, CPA, CIA, CISA
City Auditor
San Antonio, Texas

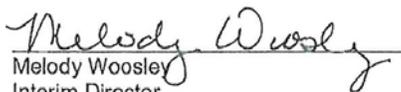
RE: Management's Corrective Action Plan for the Follow-up Audit of Haven for Hope Program Management

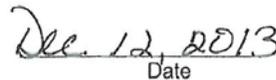
Department of Human Services and Haven for Hope have reviewed the audit report and provided comments to the auditors. As there are no recommendations for management, no management responses are required.

Department of Human Services & Haven for Hope:

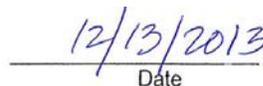
- Fully Agrees (provide detailed comments)
DHS and Haven for Hope program management will continue to implement processes and actions taken to ensure the accuracy of data being reported and maintained. DHS would like to thank Haven for Hope staff for their collaborative efforts in implementing these audit recommendations.
- Does Not Agree (provide detailed comments)

Sincerely,

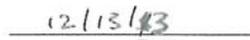

Melody Woosley
Interim Director
Department of Human Services


Date


Gloria Hurtado
Assistant City Manager
City Manager's Office


Date


Mark Carmona
CEO, Haven for Hope


Date