January 7, 2013

The Honorable Brian Sonntag
Washington State Auditor
P.O. Box 40021
Olympia, WA 98504-0021

Dear Auditor Sonntag:

Thank you for the opportunity to respond to the State Auditor’s Office (SAO) performance audit report on Initiative 1163 (I-1163). The Office of Financial Management worked with the Department of Social and Health Services (DSHS) and Department of Health (DOH) to provide a consolidated response.

The implementation of I-1163 requires new training and certification requirements for individuals who provide personal care in community-based settings. It is important to note that the training requirements have more than doubled and certification is now required for this workforce.

Initiative 1163 specified responsibilities shared by DSHS and DOH for the training and certification of home care aides. DSHS oversees programs that employ long-term care workers. In addition, DSHS has responsibility for conducting federal and state background checks on these workers. DSHS shares the background check results with DOH, which is responsible for home care aide certification activities.

DSHS has worked with DOH and stakeholders to meet the deadline for I-1163 implementation. They have identified changes to comply with I-1163 and ensure that workers are qualified to provide care as explained in the attached coordinated audit response.

DSHS will continue to work with DOH, stakeholders, and providers to ensure our system meets the requirements of I-1163 and that Washington continues to have a well-trained, certified long-term care workforce.

The SAO worked very collaboratively with DSHS and DOH during this audit. We thank your office and the audit team for their work.

Sincerely,

[Signature]
Stan Marshburn
Director

Enclosure
(Copies noted on next page)
cc: Chuck Pfeil, Director of State and Local Audits, SAO
Francis McElroy, Assistant Audit Manager, SAO
Mary Selecky, Secretary, DOH
Robin Arnold-Williams, Secretary, DSHS
Marty Loesch, Chief of Staff, Office of the Governor
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Kathy Marshall, Chief Financial Officer, DSHS
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Alan Siegel, External Audit Compliance Manager, DSHS
Karen Jensen, Assistant Secretary, Health Systems Quality Assurance, DOH
Lynda Karseboom, Office of Internal Audit, DOH
OFFICIAL STATE CABINET AGENCY RESPONSE TO THE PERFORMANCE AUDIT ON INITIATIVE 1163

This coordinated management response to the audit report received on December 28, 2012, is provided by the Office of Financial Management on behalf of the Department of Health and the Department of Social and Health Services.

RECOMMENDATION 1: The Department of Social and Health Services (DSHS) should review the list of 288 provider applicants that did not meet certification requirements to determine whether they have completed the process since the conclusion of our audit work. If these applicants are not certified, we recommend the agency take appropriate action in accordance with the initiative directives, which may include:

- Preventing the provider from serving clients.
- Terminating their individual provider contracts.
- Taking enforcement action against the private agency or facility that employed them.

Additionally, we recommend DSHS take the same measures for any providers that applied for certification after April 30, 2012 and missed certification deadlines.

RESPONSE

DSHS concurs with the State Auditor’s Office audit finding that the agency has implemented the requirements of I-1163 and put in place the processes required to ensure long-term care workers are qualified to provide care. We also note that we are actively working to make improvements in the system we developed to monitor and take action, when necessary, to ensure compliance with I-1163.

We further acknowledge the number of long-term care workers who did not complete training or certification in a timely manner is unacceptable. DSHS has taken numerous actions to improve the process for qualifying long-term care workers and ensuring compliance with I-1163. These include:

- Promulgating administrative rules in January 2012 that require home care agencies, adult family homes and assisted living facilities to ensure employees complete the 75 hours of required training within 120 days from their date of hire.
- Monitoring home care agencies, adult family homes and assisted living facilities to ensure providers are in compliance with I-1163. Intermittent monitoring of providers focuses on meeting I-1163 requirements. Enforcement actions are taken if providers have not met the obligation to ensure they employ qualified long-term care workers.
- Distributing numerous publications and conducting a number of meetings and webinars since January 2012 to educate home care agencies, adult family homes and assisted living facilities about the FBI background checks, increased training, and certification requirements required in I-1163.
• Issuing Multiple Management Bulletins beginning in December 2011 directing the Area Agency on Aging (AAA), Home and Community Services (HCS), Division of Developmental Disabilities (DDD) and home care agency providers to implement fingerprinting, increased training and certification requirements for long-term care workers hired on or after January 7, 2012.

• Approving programs across the state to provide adequate training options for long-term care workers to complete the 75-hour course. There are 53 community instructor programs and 106 adult family homes or assisted living facilities approved to provide training. These programs support 578 training instructors.

• Developing a flow chart and including it in a Management Bulletin for AAA/HCS/DDD to use with individual providers during the contracting process. The flow chart is also used by home care agencies to explain the new long-term care worker requirements to employees.

In addition, we note the following:

• The timing of the audit required by I-1163 meant that the audit period coincided with the implementation of a major change in how the state qualifies long-term care workers. This was very unfortunate because it did not allow time for DSHS, DOH, providers and other entities to monitor and make adjustments to ensure the system is working as intended.

• The audit doesn’t take into account the turnover rate for long-term care workers, which has been approximately 25 percent. This would seem to indicate that some of the workers in the audit sample didn’t complete I-1163 requirements because either: (1) they did not follow through on their contract and did not provide care, or (2) they did contract with DSHS but their status as a care provider terminated before the deadline for training/certification was reached.

Action Steps and Time Frame

Í DSHS has reviewed and acted on the list of individual providers in the audit sample. Individual providers who are not qualified do not have a contract and will not be paid by the department. Complete.

RECOMMENDATION 2: DSHS should review processes designed and used to identify providers who have missed Initiative deadlines (including those hired by external parties) and ensure these processes are sufficient to ensure these unqualified providers are restricted from serving clients until they have met all certification requirements.

RESPONSE

DSHS contracts with the AAA’s to ensure that individual providers are qualified under I-1163 and that Medicaid home care agencies determine that their employees meet I-1163 requirements. In addition to licensing adult family homes and assisted living facilities, Residential Care Services in DSHS’s Aging and Disability Services Administration also monitors any of these facilities that employ long-term care workers to ensure the termination of the employment of any worker who does not complete training and is not certified by the deadline.

HCS, DDD and AAA receive a notice from the Northwest Training Partnership (the entity responsible for training individual providers) that informs them when an individual provider is on the in-jeopardy list, meaning that his or her training deadline is getting close. The case manager
sends a written notice to the individual provider letting the provider know that he/she will be terminated for non-compliance if training is not completed by the 120-day deadline.

DOH provides a monthly report from Prometric (its testing vendor) with the pass/fail rates of providers taking the certification examination. This report is sent to the community instructors in the training programs to indicate where a student was deficient. This allows instructors to follow up with the student and assess if additional training is needed.

When the Training Partnership has an issue with an individual provider’s training deadline or questions they can’t answer, they can email DSHS staff to investigate and provide information. DSHS is in the process of issuing two new Management Bulletins that reinforce and provide additional instruction regarding the responsibility of staff to inform the provider of their training and certification requirements.

Additionally, DSHS conducts a monthly webinar with HCS/DDD/ASDA and the Northwest Training Partnership to review rules, examples, issues, and questions about training and certification.

**Action Steps and Time Frame**

Í DSHS will continue to use the above-mentioned processes to ensure unqualified providers are prohibited from serving clients until they have met all certification requirements. Now that it is operational, the process will be **ongoing**.

**RECOMMENDATION 3:** DSHS should review methods used to monitor home care agencies and facilities and ensure these methods are sufficient to ensure workers hired by these agencies are certified.

**RESPONSE**

DSHS is very concerned about the number of providers who are not completing training and/or certification requirements, as this will ultimately affect clients and their ability to stay in a community-based setting. DSHS tracks terminations of individual providers at the 120- and 150-day marks. Executive staff from DSHS and DOH have been meeting over the past two months with key stakeholders to discuss and resolve issues related to the ability of long-term care workers to meet the deadlines for FBI checks, increased training, and certification.

**Action Steps and Time Frame**

Í A quality assurance program is being implemented to evaluate training programs with a pass rate of less than 80 percent. These programs will be required to develop a program improvement plan to increase performance related to outcomes. DSHS will also be monitoring training programs with a pass rate of more than 80 percent to determine best practices to share with other training programs. We will evaluate trainer competencies during monitoring visits and facilitate a one-day train-the-trainer session for instructors each quarter. This work will be **ongoing**; the train-the-trainer sessions are scheduled to start in **June 2013**.

Í The Northwest Training Partnership and community instructors who provide training for other long-term care workers have agreed to discuss DOH certification at the beginning of the 70-hour training course. They will also provide access to Prometric’s application for written and skills testing so that long-term care workers can apply earlier in the process to better meet the
150-day deadline. This work will be ongoing. In February 2013, a letter will be mailed to community instructors, adult family homes, boarding homes and the Northwest Training Partnership instructing them to include this information in future trainings.

The Membership Resource Center from the Northwest Training Partnership will contact all individual providers required to complete the 70-hour course and encourage them to register. This should increase the number of students who complete their training on time. The Northwest Training Partnership has already completed the first round of these calls and plans to continue this work for Fiscal Year 2013.

RECOMMENDATION 4: The Department of Health (DOH) should obtain each applicant’s hire date and enter this date into its licensing system. DOH should require applicants to submit an employer verification form to ensure this date is accurate.

RESPONSE

Today, DOH regulates 83 health professions in Washington. Major activities performed by the agency include licensing, rules and policy development, and enforcement.

Normally, DOH does not capture the date of hire as a standard data field because it is not critical to licensing activities. Most health care professionals cannot work until they are licensed or certified by DOH. This is different with home care aides who must be certified within 150 days of being hired.

During the early phases of implementing the home care aide certification process, DOH realized the need to record the date of hire for applicants. Configuration changes were made to its licensing system in early July to allow the hire date to be recorded.

Action Steps and Time Frame

Effective December 1, 2012, the DOH Home Care Aide Certification application form was updated to include the date of hire. For many of the individuals who applied before that date, DOH obtained the date of hire from the Employment Verification Form submitted by the applicant or from the work section of the application. DOH has now retroactively recorded the date of hire for 3,372 of the 3,883 applications submitted prior to December 1, 2012.

Complete.

As of December 26, 2012, 3,776 of the 4,291 home care aide records in the DOH licensing system include the date of hire. In addition, the date of hire will be recorded for all future home care aide applicants. Ongoing.