

Audit Highlights



Highlights of performance audit report on the Supported Living Arrangement Program issued on March 19, 2019.

Legislative Auditor report # LA20-06.

Background

The Aging and Disability Services Division is a division within the Department of Health and Human Services. Its mission is to ensure the provision of effective support and services to meet the needs of individuals and families, helping them lead independent, meaningful, and dignified lives. The Division offers programs for infants and toddlers with disabilities, persons with physical disabilities, and persons with intellectual or developmental disabilities.

The focus of this audit was the Division's SLA program. The SLA program is authorized by NRS 435 to serve those whose diagnosis is an intellectual or developmental disability. SLA providers that contract with regional centers offer residential support to help individuals with intellectual or developmental disabilities live in the least restrictive community setting possible.

Three regional centers oversee SLA providers. These regional centers were legislatively approved for 457 full-time positions. As of October 2018, there were 428 filled positions. SLA services are funded through State General Fund or Medicaid Home and Community-Based Waiver dollars. The regional centers' expenditures for fiscal year 2018 exceeded \$190 million.

Purpose of Audit

The purpose of this audit was to determine whether SLA provider homes served individuals with intellectual or developmental disabilities as defined in NRS 435.3315, and to evaluate the living conditions at SLA provider homes. The scope of our audit included the verification of client eligibility for the Division's SLA program, a review of client diagnoses and evidence of treatment, and the placement of clients in SLA provider homes. Specifically, our work included a review of client eligibility and client diagnoses during fiscal year 2018, and SLA home placements and home conditions as of January 2019.

Audit Recommendations

This audit report contains two recommendations to help ensure SLA providers are certified to serve individuals with additional diagnoses related to mental health and to improve the Division's record keeping practices.

The Division accepted the two recommendations.

Recommendation Status

The Division's 60-day plan for corrective action is due on June 12, 2019. In addition, the six-month report on the status of audit recommendations is due on December 12, 2019.

Supported Living Arrangement Program

Aging and Disability Services Division

Summary

The Aging and Disability Services Division's (Division) processes help ensure providers of Supported Living Arrangement (SLA) homes serve the intended population, as defined in statute. While all of the Division's clients have a primary diagnosis of an intellectual or developmental disability, many clients also have mental health diagnoses. Documentation showed these clients were receiving treatment for their mental health diagnoses. Although the public has expressed concerns that SLA providers are housing clients outside of their statutory authority, we found SLA providers are housing only Division clients with a primary diagnosis of an intellectual or developmental disability. To improve operations, we found the Division can take steps to strengthen its record keeping practices regarding the location of homes and the accuracy of active client placements. Finally, our unannounced visits to 87 provider homes found these homes were generally clean, safe, and in good repair.

Because NRS 435 does not specifically indicate whether SLA providers are authorized to also serve individuals with additional diagnoses related to mental health, we obtained a legal opinion. Based on how the statutes are currently written, it is the opinion of the Legislative Counsel Bureau's Legal Division that SLA providers need to also be certified as community-based living arrangement (CBLA) providers when serving intellectually or developmentally disabled individuals who also have mental health diagnoses. Because dual certification as an SLA and CBLA provider may not be an efficient practice, the Legislature may want to consider amending statute to allow SLA providers to serve clients who also have mental health diagnoses, provided that SLA staff receive adequate training to care for these clients.

Key Findings

All of the Division's active clients in fiscal year 2018 had a diagnosis of an intellectual or developmental disability as defined under NRS 435. Many of these clients had other diagnoses, including mental health related diagnoses, for which the Division also provided support. Besides ensuring only qualified clients are served by the Division, the application process helps ensure the Division places intellectually or developmentally disabled clients with its certified SLA providers. (page 6)

Although the SLA program serves individuals with a primary diagnosis of an intellectual or developmental disability, many of the individuals served have multiple diagnoses, including mental health diagnoses. For 53 of 100 client files tested, there was evidence that these clients had at least 1 mental health related diagnosis. Because many individuals in the SLA program also have mental health diagnoses, the Division helps ensure services are obtained to support these diagnoses. These services help ensure individuals with mental health diagnoses receive services, either through medication management or periodic visits with a psychiatrist or psychologist. We examined all 53 client files and found that their mental health diagnoses were either being medically managed or they visited with professionals to address their mental health needs. (page 7)

Providers of 24-hour SLA homes housed only Division clients. We physically inspected 87 of 379 (23%) SLA homes certified by the Division, and located throughout the State, and did not find any evidence of non-division clients residing in the homes. The Division's quality control processes help ensure SLA providers' 24-hour homes house the intended population. (page 9)

The Division did not always have up-to-date information regarding SLA client placements. While the Division had two systems for tracking client placements, neither system contained accurate placement information. Based on our testing, the error rates for both systems exceeded 12%. The Division's policies and procedures did not address record keeping practices related to client placement. Strong record keeping practices are needed to reduce the risk that clients' locations will be unknown and SLA provider homes will not be inspected. (page 10)

The Division's contracted SLA provider homes were generally clean, safe, and in good repair. We performed unannounced visits at 24-hour SLA homes throughout Nevada. For 76 of 87 (87%) homes inspected, we did not observe any conditions that would affect the health or safety of the individuals living in the homes. For the other 11 homes inspected, most of the issues observed were minor or were not frequently present in multiple homes. The Division has implemented controls to help ensure SLA homes meet certain standards. Based on our review, these controls are working as intended. (page 12)