



DISTRICT OF COLUMBIA
OFFICE OF THE INSPECTOR GENERAL

CHARLES J. WILLOUGHBY
INSPECTOR GENERAL

INSPECTIONS AND EVALUATIONS DIVISION
MANAGEMENT ALERT REPORT

D.C. DEPARTMENT OF HOUSING & COMMUNITY DEVELOPMENT,
ADDICTION PREVENTION AND RECOVERY ADMINISTRATION (APRA),
AND
THE COMMUNITY PARTNERSHIP
FOR THE PREVENTION OF HOMELESSNESS

APRA EMPLOYEE IMPROPERLY CERTIFYING
SUBSTANCE ABUSE DISABILITIES ON
FEDERALLY-FUNDED “SHELTER + CARE”
PROGRAM APPLICATIONS

MAR 08 - I - 006

JUNE 17, 2008

GOVERNMENT OF THE DISTRICT OF COLUMBIA
Office of the Inspector General

Inspector General



June 17, 2008

Leila Finucane Edmonds
Director
D.C. Department of Housing and Community Development
801 North Capitol Street, N.E., Suite 8000
Washington, D.C. 20002

Tori Fernandez Whitney
Senior Deputy Director
Addiction Prevention and Recovery Administration
D.C. Department of Health
1300 First Street, N.E., Suite 319
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 Ms. Edmonds, Ms. Whitney, and Ms. Marshall:

This is a Management Alert Report (**MAR 08-I-006**) to inform you that the District of Columbia (District) Office of the Inspector General (OIG) recently learned of an employee within the Department of Health's Addiction Prevention and Recovery Administration (APRA) who has been improperly certifying substance abuse disabilities on applications for the federally funded Shelter Plus Care (S+C) program. The employee's activities were both unknown to APRA management and not in accordance with program regulations. This issue came to our attention during the course of a special evaluation. The OIG provides these reports when we believe a matter requires the immediate attention of District government officials.

Background

The U.S. Department of Housing and Urban Development (HUD) awards S+C program funds to state and local governments "to serve a population that has been traditionally hard to reach – homeless persons with disabilities such as serious mental illness, chronic substance abuse, and/or AIDS and related diseases."¹ The S+C program aims to provide participants with both financial

¹ [Http://hudhre.info/index.cfm?do=viewSpResourceManSec1-1](http://hudhre.info/index.cfm?do=viewSpResourceManSec1-1) (last visited June 5, 2008).

assistance for rental housing (e.g., permanent monthly rent payments) and supportive services, such as counseling, treatment, and education to help participants maintain their housing and enhance their life skills.

The District's Department of Housing and Community Development (DHCD) directly receives federal S+C program funds and is considered the grant recipient for the District, or grantee.² The Community Partnership for the Prevention of Homelessness (TCP), a nonprofit organization that has a contract with the District to provide management oversight for the District's network of homeless services providers, is considered a program sponsor and responsible for applications to and administration of the District's participation in the S+C program.

HUD's S+C Resource Manual provides specific guidelines with respect to disabilities targeted by the program. It states:

Persons with disabilities are those who have a disability that:

- Is expected to be of long-continued and indefinite duration;
- Substantially impedes his or her ability to live independently;
and
- Is of such a nature that the disability could be improved by more suitable housing conditions.

. . .

There are several disabilities specifically targeted by the S+C program. These targeted disabilities are:

- Serious mental illness,
- Chronic alcohol and/or other drug abuse, and
- AIDS or related diseases.³

Section 2.2 of the Resource Manual provides additional detail regarding program eligibility:

Key to the definition [of disability] is determining that the impairment is of long-continued and indefinite duration AND **substantially impedes** the person's ability to live independently... Written documentation that a person's disability meets the program definition must come from a credentialed psychiatric or medical professional trained to make such a determination. The possession of a title such as case manager or

² Grantees are responsible for the grant, but may delegate program responsibilities to one or more sponsors. Sponsors are usually nonprofit organizations that provide housing and/or supportive services that enable participants to maintain their housing and address treatment needs. *See*

<http://hudhre.info/index.cfm?do=viewSpResourceManSec1-4> (last visited June 5, 2008).

³ [Http://hudhre.info/index.cfm?do=viewUnderstandingSpPolicyPart](http://hudhre.info/index.cfm?do=viewUnderstandingSpPolicyPart) (last visited June 5, 2008).

substance abuse counselor does not by itself qualify a person to make that determination. "Self-certification" is also unacceptable.⁴

Observations

Since at least 2006, an APRA Medical Director has been certifying substance abuse disabilities for S+C program applications unbeknown to APRA management and in violation of program guidelines.

During an interview with the special evaluation team, a TCP employee stated that the Medical Director for APRA's Women's Services Center (Medical Director) is responsible for certifying substance abuse disabilities for S+C program applicants. The employee said that when TCP receives an S+C application for a candidate who claims substance abuse as a qualifying disability, it forwards the application to the Medical Director for review.

The OIG special evaluation team (team) interviewed the Medical Director and learned that he is certifying substance abuse disabilities in violation of S+C program requirements. The Medical Director stated that there are instances when he certifies an applicant either based on information that was self-reported by the applicant or on observations from an applicant's case manager. The Medical Director claimed that he was not certifying S+C applicants as having a substance abuse disability; rather, he believed he was only attesting that an applicant should receive substance abuse treatment once accepted into the S+C program. Furthermore, the Medical Director said that he has not maintained records or documentation of his certifications, which would allow the evaluation team to determine the number and specifics of S+C program applications he has certified during his tenure at APRA.

Subsequently, the team met with several senior managers at APRA to inquire about the agency's relationship with TCP and to identify any supportive services that APRA provides to S+C program participants. The team provided the managers with a copy of HUD S+C regulations and TCP S+C guidelines and informed them that the Medical Director has been reviewing S+C applications and certifying substance abuse disabilities. APRA managers stated that they were not familiar with the S+C program and were unaware of the Medical Director's involvement in the application certification process. In addition, APRA management questioned whether their agency should certify applicants for this program; APRA considers substance abuse to be a disease, not a disability as HUD defines it. Lastly, APRA management appeared concerned to learn that the Medical Director has certified candidates for the S+C program without reviewing key documentation such as drug screen results or substance abuse assessments from trained medical physicians as required by federal program regulations.

Recommendations

The conditions cited above may jeopardize the District's compliance with the criteria set forth by HUD for the federally funded S+C program. Accordingly, the OIG recommends that the Senior Deputy Director of APRA take the following actions:

⁴ [Http://hudhre.info/index.cfm?do=viewSpResourceManSec2-2](http://hudhre.info/index.cfm?do=viewSpResourceManSec2-2) (last visited June 5, 2008).

1. Immediately suspend the practice of certifying substance abuse disabilities related to the S+C program application process, and meet with TCP's Executive Director to discuss their respective roles in the S+C program application and administration processes.
2. Provide the OIG with a list of names, addresses, and telephone numbers of all current S+C program participants who were certified by APRA as having a substance abuse disability. The list should also indicate all supportive services provided to each individual and the organization responsible for each service.
3. Work with TCP, in consultation with DHCD, to determine whether APRA should resume the practice of certifying substance abuse disabilities for S+C applicants. If APRA determines that it will resume certification of substance abuse disabilities, APRA and TCP should establish a formal agreement that identifies APRA's duties and responsibilities with respect to the application process and S+C program administration.

Please provide your comments to this MAR no later than June 27, 2008. Each of your responses should include actions taken or planned, dates for completion of planned actions, and the reason(s) for any disagreement with the concerns and recommendations presented.

Should you have any questions prior to preparing your response, please contact Edward Farley, Deputy Assistant Inspector General for Inspections and Evaluations, at (202) 727-9249 or Edward.Farley@dc.gov.

Sincerely,


Charles J. Willoughby
Inspector General

CW/lm

cc: The Honorable Adrian M. Fenty, Mayor, District of Columbia
Daniel M. Tangherlini, City Administrator and Deputy Mayor
Peter Nickles, Interim Attorney General, Office of the Attorney General
The Honorable David Catania, Chairperson, Committee on Health, Council of the District
of Columbia
Dr. Pierre Vigilance, Acting Director, Department of Health