


*City of Alexandria, Virginia***MEMORANDUM**

DATE: NOVEMBER 6, 2024

TO: JIM PARAJON, CITY MANAGER

FROM: ROBERT SNYDER, CHIEF INTERNAL AUDITOR 

SUBJECT: DCHS SNAP MANAGEMENT EVALUATION REVIEW (FS25-03)

Background

On January 5th, 2024, the Virginia Department of Social Services (VDSS) contacted the Department of Community and Human Services (DCHS) and informed them of their intent to schedule a Supplemental Nutrition Assistance Program (SNAP) Management Evaluation (ME) for March 17th, 2024. The ME included an evaluation and observation of the following target areas:

- Initial Certification Processes and Access – Applications approved and denied/withdrawn
- Program Access/Customer Service
- Able-bodied Adults without Dependents
- SNAP E & T, Civil Rights
- National Voter Registration (NVR)
- Recipient Claims Management
- EBT and Data Matches (SV¹ES, eDRS, NDNH)ⁱ

Discussion

On April 16th, 2024 VDSS sent their Findings Letter to the City with the Case Review and Casual Factor Summary reports. They requested that DCHS issue a Quality Improvement Plan (QIP) within 60 days of the Findings Letter (June 16th, 2024) addressing all of the errors and findings. There are over 6,000 SNAP cases. Out of those 6000 there were 26 cases that were reviewed and 19 had errors. Errors included things such as:

- Missing/incomplete documentation
- Untimely interviews, screenings, and notices
- Incorrect work registration status
- Benefits issued untimely or incorrectly

Additionally, there were two deficiencies in the following areas.

1. Not all staff were in compliance with annual voter registration training
2. Not all staff were in compliance with annual Civil Rights training

¹ EBT – Electronic Benefits Transfer
SVES – State Verification Electronic System
eDRS – Electronic Disqualification Recipient System
NDNH – New Directory of New Hires

On June 16th, 2024, the Benefits Program Division submitted the Quality Improvement Plan with regards to the Management Evaluation letter addressing the issues mentioned above. On July 1st, 2024, VDSS sent DCHS a “ME Review Completion Letter” informing the City that the QIP was acceptable. They informed us that they reviewed materials and validated implementation of the required corrective actions and said that they believe that the actions will result in a significant reduction in errors and have a positive impact on the SNAP program. They informed us that because of the accepted QIP the ME review is closed.

Conclusion

Based on the information from the Review Completion Letter and our review of the documentation provided to us by the Public Benefits Programs Chief we consider this review closed. Our review of this engagement will end effective the date of this memorandum. Please contact us at internalaudit@alexandriava.gov should you have any questions.



COMMONWEALTH of VIRGINIA

DEPARTMENT OF SOCIAL SERVICES

July 1, 2024

██████████ Director
City of Alexandria Department of Community and Human Services
4850 Mark Center Drive
Alexandria, VA 22311

Dear ██████████

We have received the revised Quality Improvement Plan (QIP), submitted by your agency in response to the findings report of the Management Evaluation (ME) conducted for your agency for the Federal Fiscal Year 2024. The purpose of this letter is to inform you that the revised QIP is acceptable as submitted.

We reviewed the materials and validated implementation of all required corrective actions. The refresher trainings, desk tools and increased monitoring will result in a significant reduction in errors and have a positive impact upon the implementation of the SNAP program. Therefore, the ME Review is closed as of the date of this letter.

We would like to thank you and your staff, especially ██████████ as our point of contact, for assisting us while conducting the ME. The cooperation and communication throughout the review process were greatly appreciated.

Sincerely,

████████████████████
SNAP ME Reviewer

Cc: cc: ██████████ Benefit Programs Division Chief
██████████ Associate Director Sr., Benefit Programs – Strategic Outcomes
██████████ ME Reviewer – Strategic Outcomes

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Quality Improvement Plan

Agency: Department of Community and Human Services - Alexandria

Date: 05/01/2024

Finding

These are the specific causal factors cited in Rushmore or error findings for target areas outside Rushmore.

- Case Documentation – Voter Registration/NDNH/Lack of Case Documentation
- Case Processing – Initial Application Processing
- System Searches – SVES/eDRS

Identification of the root cause(s) of the error

- SVES inquiries not performed timely by the Admin Team.
- eDRS searches not performed by BPS and lack of documentation of the searches.
- Voter Registration was not addressed or acted on when processing the application.
- Cases were not completely documented, or there was no documentation to support case processing.
- NDNH was not inquired or documented at the time of processing.
- several processing errors (timely processing; ABAWD/Work Registration errors; intake screening errors; interview error (ESAP Applications); notice errors; Benefit Allotment Errors)

Outline of the corrective action(s) necessary to address the root cause(s)

SVES-The Agency has implemented quality assurance steps to help eliminate future non-compliance in this area, which include:

- All cases cited for no SVES have been uploaded to DMIS on 3/22/2024.
- The Admin Support team will be re-trained to ensure basic operations continue without interruption.
- The Administrative Team will maintain the existing "SVES Log" to track timely input and retrieval of SVES responses and send email reminders upon completion.
- Benefits Program Specialists/Supervisors will review the SVES Log to ensure that SVES is pulled and uploaded monthly (see sample SVES log screen shot).
- Supervisors and senior workers will continue conducting case reviews and tracking SVES compliance in Rushmore case reviews.
- eDRS-The Agency has implemented quality assurance steps to help eliminate future non-compliance in this area, which include:
 - Compliance in this area includes Targeted Reviews on Required System Inquiries twice a year.
 - Supervisor/Senior Worker case reviews monthly.
 - Refresher system searches/case documentation training semi-annually.

Case Documentation

- Semi-annual documentation training is conducted twice a year for all BPS staff to address all errors.

Case Processing

- Refresher training on income, income calculation/ABAWD/Immigration by [REDACTED] NR SNAP Practice Consultant on May 7, 2024 (See attached power points)
- Other refresher training will be held throughout the year.
- Case Reviews in Rushmore will be conducted monthly (full) and twice a year (Targeted).

Timeframes related to each corrective action.

- There will be ongoing training within the agency quarterly, semi-annually, and annually.

Identify a point of contact for each corrective action.

- [REDACTED], Quality Performance Improvement (QPI) Team Supervisor

Basis for management decisions on planning, implementing, and evaluating corrective actions.

- Monitoring including ABAWD/NDNH will be done through conducting full Rushmore case reading monthly at the senior worker and supervisor levels.
- Targeted (quarterly) and full (monthly) reviews will be completed to track progress.
- BPS will be provided with tools and desk aids reference materials to assist with case processing.

Documentation/evidence for any corrective action that has been implemented.

- Various desk aids such as SNAP renewals, SNAP IRs, and SNAP Intake/Case Read Checklists have been sent to BPS staff.
- A refresher training has been taking place, and the deficits from the review will continue to be outlined.
- Various desk aides have been provided to all BPS to help in the SNAP processing and documentation. (See attached).

Quality Improvement Plan

Agency Department of Community and Human Services - Alexandria

Date May 10, 2024

Finding

These are the specific causal factors cited in Rushmore or error findings for target areas outside of Rushmore.

- Voter Registration – Training
 - Not all staff members are followed the annual Voter Registration Training
- Civil Rights – Training
 - Not all staff members followed the annual Civil Rights Training

Identification of the root cause(s) of the error

- Five staff did not complete the annual Voter registration training in 2023.
- The director was not included among the staff required to complete the civil training annually.

Outline of the corrective action(s) necessary to address the root cause(s)

- All five staff members must enroll and complete the Voter registration training.
- All staff members will complete the Voter registration training annually.
- The Director has completed the Civil Rights training.

Timeframes related to each corrective action.

- All five staff enrolled and completed the Voter registration in January/February 2024.
- The director completed the Civil rights training and will be reminded annually to complete it between July and August as required.
- All new hires will complete the Voter registration and Civil training within 14 days of their onboarding date.

Identify a point of contact for each corrective action

- [REDACTED] BP Division Chief
- [REDACTED] BP Supervisor (Quality Improvement and Performance Team)

Basis for management decisions on planning, implementing, and evaluating corrective actions.

- The agency has compiled a list of staff required to complete the training annually.
- Auto alert training notifications have been created and scheduled to notify all staff members required to take the Civil Rights and National Voters Registration Act on June

15, and training must be completed by July 31 of the year. (See sample auto email alert attached)

- All staff members will email their certificate of completion to their immediate supervisor, who will submit their respective team's certificates to [REDACTED], Administrative Team Supervisor, for cross-checks.

Documentation/evidence for any corrective action that has been implemented.

- In late February, the ME Review team received an updated list, including the five people who completed their training.
- The director's certificate of completion is attached to show the date she completed the Civil Rights training.

Agency: Department of Community & Human Services - Alexandria
Office of Fraud Prevention & Investigation Unit

Date: May 10, 2024

Finding

These are the specific causal factors cited in Rushmore or error findings for target areas outside Rushmore. For Example:

According to the Reporting Changes Requirement for Household Composition, the claim was established incorrectly.

Identification of the root cause(s) of the error

The claim was made one month before the Reporting Changes Requirement for the Supplemental Nutrition Assistance Program (SNAP); therefore, no claim should have been established.

Outline of the corrective action(s) necessary to address the root cause(s)

The claim was removed from VACMS/Claims. The Benefits Program Division Chief will review claims entered by the assigned staff.

The was entered in an error. The requirements for Reporting Changes in accordance with SNAP guidance, Part XIV. A (Changes During the Certification Period) 1 b. explaining the household reporting requirements based on the certification period noted in the RUSHMORE claim review.

Part XIV. A 1b states:

Certification periods – five months or longer

Except for households that receive benefits through the Transitional Benefits component for former TANF recipients or certified through VaCAP, households certified for five months or longer must report the following items:

- Receipt of lottery or gambling winnings of \$4,250 or more.
- Change if the number of hours worked per week for persons who are subject to time-limited benefits is less than 20 hours per week and
- The total income exceeds the gross income limit based on household size as established as of certification, the Interim Report evaluation, or a change reported during the certification period.

Timeframes related to each corrective action.

The claim was removed from VACMS/Claims on March 18, 2024.

Identify the point of contact for each corrective action.

██████████ BP Division Chief
██████████, Fraud Investigator

Basis for management decisions on planning, implementing, and evaluating corrective actions.

The DCHS Benefit Program Supervisors and BP Division Chief will review case claim actions. The review process will aid in preventing errors.

Documentation/evidence for any corrective action that has been implemented.

SNAP Refresher training (Self-employment and Income) – May 20, 2024. (See attached power point)
Establishing Claims – TANF/SNAP Fraud Investigations – online