Outstanding Recommendations

Assessment of Implementation Report

Alberta Community and Social Services

Systems to Manage the Assured Income for the Severely Handicapped (AISH) Program

(October 2016)

Summary of Recommendations

In January 2021, we completed our assessment of implementation from our October 2016 audit of Alberta Community and Social Services' *Systems to Manage the Assured Income for the Severely Handicapped (AISH) Program*. We found that two of our three recommendations have been implemented:

IMPLEMENTED Recommendation:
Improve program accessibility

REPEATED Recommendation:
Set service standards and improve eligibility procedures and guidelines

IMPLEMENTED Recommendation:
Improve reporting on efficiency

Introduction

In 2016, we audited whether the department could demonstrate:

- services provided are accessible to eligible Albertans with disabilities
- eligibility decisions are timely and align with program objectives
- the program is efficient

We found in 2016 that the department was unable to demonstrate that the AISH program was efficient. The AISH application process favoured people who were good at completing forms and who were persistent. Assessing eligibility took too long and the department could not be sure if staff decisions were consistently applied. The reporting process did not provide sufficient information to allow the department to know what it needed to change to improve the program.

In our 2016 audit, we made three recommendations to the department:[37]

- ensure its application processes are user-friendly
- set service standards for application processing times and regularly monitor against these standards and improve procedures and guidelines to ensure staff apply policy in a consistent manner
- improve its processes to measure, monitor and report on the efficiency of the AISH program

In January 2021, we completed our assessment of implementation and found the department has implemented two of our three recommendations. The department has improved program accessibility and processes to measure, monitor and report on the efficiency of the AISH program. However, the department has not set service standards for application processing times or made enough improvements to procedures to ensure staff apply policy in a consistent manner. We again recommend that the Department of Community and Social Services set service standards for application processing times and regularly monitor against these standards and improve procedures and guidelines to ensure staff apply policy in a consistent manner.

Recommendation:
Improve program accessibility

IMPLEMENTED

Context

Albertans applying to the AISH program have severe handicaps and some may have difficulty obtaining the information and completing the forms the application process requires.

In our 2016 audit, we found access to the AISH program through the intake process was complex and not supported by user-friendly guides or resources. The program had several accessibility barriers in the intake process:

- online resources for the application process were hard to find
- the application form was onerous
- there was inadequate prescreening
- the process for triaging applicants was inefficient

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[37] *Report of the Auditor General of Alberta—October 2016*, page 35

Our current findings

The department implemented our recommendation to ensure its application processes are user-friendly. While the department has identified that further enhancements to the application process can still be made, it has implemented an ongoing process for continuous improvement.

The department made AISH program information more accessible and user-friendly, simplified the AISH application form and improved the internal AISH application process.

We found management has:

- updated the AISH website for easier access and understandability and they included links to current and relevant information

- developed user-friendly guides for Albertans and physicians, which provide applicants and doctors with eligibility information and step-by-step instructions on how to complete the forms[38]

- simplified the AISH application form making it shorter, easier to understand and customizable to the applicant's situation[39]

- combined three medical forms into one, which can now be submitted with the AISH application

- shortened the medical section of the AISH application form and removed redundant medical information

- launched an online AISH application form, making it easier and faster for Albertans to apply

- implemented a centralized AISH application process to improve prescreening and triaging of applicants

- introduced an assessor role, which is responsible for completing the initial review and working with applicants to ensure the proper information is submitted

- revised the Notice of Appeal form so it is standardized and easier to understand; the form now contains information and links to additional resources to support the appeals process

The department evaluated its improved processes and concluded the majority of processes were implemented and operating effectively. Management's assessment identified areas that required improvement, such as further enhancing accessibility and user-friendliness of web information, the online application process, and the process to ensure completeness of forms. Management performs ongoing assessments of continuous improvement of the AISH application process through its monthly variance reporting, the AISH Continuous Improvement Committee, and the AISH Continuous Improvement Working Group.

Recommendation:
Set service standards and improve eligibility procedures and guidelines

REPEATED

We recommend that the Department of Community and Social Services:

- set service standards for application processing times and regularly monitor against these standards

- improve procedures and guidelines to ensure staff apply policy in a consistent manner

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[38] The guides were developed with input from community partners, health service organizations, medical professionals, AISH clients and applicants, and program staff from across the province.

[39] The application form was field tested with AISH applicants and clients, families, community organizations, provincial associations, ministry staff, and physicians.

Context

Consistent, efficient and accurate eligibility decisions are critical when they affect Albertans with disabilities.

In our original audit of the AISH program, we found:

- the department did not have standards to regularly monitor its application processing times against
- AISH workers have to use considerable judgment in their assessment of applications and receive inadequate training and guidance
- the department treats applicants and clients differently when applying its policy on "earning a livelihood"[40]

In 2016, we recommended the department:

- set service standards and regularly monitor against these standards
- improve procedures and guidelines to ensure staff apply policy in a consistent manner

We repeat our recommendation to set service standards and improve eligibility procedures and guidelines, as the department has yet to develop standards to monitor against or made sufficient improvements to procedures to ensure staff apply policy in a consistent manner.

Our current findings

The department has not yet:

- set service standards for application processing times
- improved procedures and guidelines to ensure staff apply policy in a consistent manner

Service standards

In our 2016 audit report, we found the department only actively monitored application timelines for the medical review stage and did not monitor against standards.

The department has improved its tracking of application processing times by identifying eight measures it regularly monitors for various stages of the application process. However, we found the department still does not have service standards for application processing times. Currently, the department is comparing monthly results in these application process areas to prior-period results and performing a variance analysis.

Standards provide a critical link between organizational strategy and day-to-day operations. Comparing results to established standards provides stakeholders with a clear sense of operating effectiveness.

Results compared to prior periods rather than to service standards may not provide adequate information about whether processes are operating effectively. The department is not able to say if the processing times are acceptable or if they need improvement. It also does not provide employees with an aspirational or motivational target.

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40 Clients are approved program participants whereas applicants are those being assessed for approval.
In 2016, the department's policy defined "earning a livelihood" as being employed a minimum of 30 hours per week at a reasonable wage.

Management told us it has not established service standards yet as the recently improved AISH application processes had a significant impact on the measures, making it difficult to establish a baseline. Management indicated that it anticipates setting service standards in April 2021.

Improve eligibility procedures and guidelines

The department has implemented several processes to improve its eligibility procedures and guidelines to assist staff in applying program policy in a consistent manner. However, we found the department's training processes are not operating effectively and it has not implemented a process to respond to internal audit recommendations.

We found the department has enhanced its training program and updated its core training curriculum across all roles. Nonetheless, the department has not finished implementing its provincial training strategy nor does it have effective processes for accurately assigning, tracking, and monitoring employee training completion.

In our 2016 audit, we found management was not responding promptly to internal audit recommendations to improve AISH program processes. In 2017, management designed a process for responding to internal ministry audit recommendations, but implemented minimal change. Internal audit and management client file reviews continue to find deficiencies, such as discrepancies in benefit payments and documentation errors. Data provided to us by internal audit indicated total monetary and compliance error rates per client file increased by 61 per cent from 2016 to 2018.[41]

In November 2019, the department designed a new process to assess and prioritize audit criteria and respond to internal audit recommendations. In February 2020, the department created a terms of reference for an AISH and Income and Employment Supports (IES) Internal Working Group with the purpose of improving the department's response to internal audit recommendations. Management delayed the launch of the working group as staff were diverted to the COVID-19 pandemic response and redeployed to support remote service delivery. Management told us they will be convening the working group in February 2021 and implementing the new process in March 2021.

The department implemented the following:

● an AISH Adjudication Guide and complementary training to support consistent assessment of medical eligibility

● standardized denial letters, which include individualized descriptions of why the applicant is not eligible, information on how to submit additional information or appeal, and contact information for other resources

● a process and tracking tool to capture reasons for overturned eligibility decisions, analyze data, and identify opportunities for improvement

● a centralized Appeals Secretariat responsible for the appeals process

● a review of the 'severe handicap' and 'earning a livelihood' policies, leading to the removal of the previous policy that restricted applicants from working more than 30 hours/week

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41   We were unable to confirm the 2019 internal audit findings, as they were unavailable at the time of our audit.

Consequences of not taking action

Until management implements a process to ensure staff take mandatory training and to respond to internal audit recommendations, there may continue to be inconsistent application of policies resulting in repeated errors at the eligibility stage, possibly delaying benefits for applicants who need it most.

Without service standards for application processing times to regularly monitor against, the department is unable to say if it is achieving its desired results.

Recommendation:
Improve reporting on efficiency

IMPLEMENTED

Context

Before an organization can know what it needs to improve to achieve desired outcomes, it must measure and analyze the results it is achieving.

In 2016, we found the department had inadequate performance measures and processes to monitor and report on the operating efficiency of the AISH program.

Our current findings

The department implemented our recommendation to improve its processes to monitor and report on the efficiency of the AISH program.

Senior management receive monthly and quarterly reports on AISH program activities. Quarterly reporting covers 13 different performance measures and indicators[42] related to the application and appeals process. Monthly reporting focuses on eight measures.

As previously noted, the measures currently focus on comparing actual results to prior-period results rather than to a standard and are time metrics such as average time between:

- receipt of application and initial review
- receipt of application and application completion
- application completion and eligibility decision
- receipt of application and eligibility decision

The indicators look at items such as the number of eligibility decisions for both applications and appeals.

Management tested the operating effectiveness of its new monitoring processes and identified a data integrity issue that impacted the reported processing times. To improve operating effectiveness and mitigate the data integrity issue, management inserted a new date field in the application processing system and provided additional training to program employees. The department continues to use its monthly processing time variance analysis to detect further data issues along with other targeted improvements to its processes.

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[42]   Definitions provided by Community and Social Services:
Performance Measures: Serve as a management and decision-making tool, providing information that can be used to make improvements in policy program design and service delivery.
Performance Indicators: Provide supporting information to help understand the context of the other measures.

Management can consider other mitigating controls to prevent data issues from occurring, such as limiting who can initiate data changes, what changes can be made, and when changes can be made within the program's information technology system.

The department's AISH action plan[43] indicated the department would enhance its public reporting on AISH program outcomes. From July 2017 to June 2018, the department publicly reported its AISH program performance measures and indicators. Subsequently, the department decided to not publicly report AISH outcomes. Public reporting of program outcomes is not a Government of Alberta requirement but is determined by organizations, typically based on program stakeholder needs.

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[43] The AISH action plan was created in response to the recommendations made in the *October 2016 Report of the Auditor General of Alberta.*