

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

Seniors, Community and
Social Services

Report of the Auditor General
December 2023

**Assessment of
Implementation Report**

**Auditor
General**
OF ALBERTA

The logo for the Auditor General of Alberta, featuring a stylized orange and white graphic element resembling a corner or a bracket.

About our Assessment of Implementation Report

Management is responsible for implementing our recommendations. We examine implementation plans and perform procedures to determine whether management has implemented our recommendations when management has asserted they have been implemented. We repeat our recommendations if we do not find evidence they have been implemented. We may also issue new recommendations for matters that come to our attention during our assessment.

Our assessments of implementation are conducted under the authority of the *Auditor General Act*. The Office of the Auditor General applies Canadian Standard on Quality Management 1. Accordingly, we have maintained a comprehensive system of quality control, including documented policies and procedures regarding compliance with applicable professional standards and applicable ethical, legal, and regulatory requirements.

Our office complies with the independence and other ethical requirements of the Chartered Professional Accountants of Alberta Rules of Professional Conduct, which are founded on fundamental principles of integrity and due care, objectivity, professional competence, confidentiality, and professional behaviour.

Assessment of Implementation Report

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

Seniors, Community and Social Services

(October 2016)

Summary of Recommendations

We have completed our assessment of implementation of the outstanding recommendation relating to our 2016 audit *Systems to Manage the Assured Income for the Severely Handicapped (AISH) Program*.

IMPLEMENTED Recommendation:

Set service standards and improve eligibility procedures and guidelines

Introduction

Albertans should be confident the Department of Seniors, Community and Social Services (the department) has processes in place to effectively administer the Assured Income for the Severely Handicapped (AISH) Program. When someone has a disability that limits their ability to work, they need income to meet their basic needs. If the department does not have processes to ensure staff consider applications in a consistent and timely manner, there is a risk that Albertans who need support do not receive it, or receive it too late.

In 2016, our audit assessed whether the department could demonstrate that:

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

We found the department was unable to demonstrate that the AISH program was efficient:

- The 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 its staff's decisions were consistent.
- The reporting process did not provide sufficient information to allow the department to know what it needs to change to improve the program.

We made three recommendations to the department:³²

- 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 had implemented two of our three recommendations. The department had improved program application processes and processes to measure, monitor, and report on the efficiency of the AISH program. However, the department had not set service standards for application processing times or made enough improvements to ensure staff apply policy in a consistent manner, so we repeated that recommendation.

Recommendation:

Set service standards and improve eligibility procedures and guidelines

IMPLEMENTED

Context

Consistent, efficient, and accurate eligibility decisions are critical to provide support to eligible Albertans with disabilities.

Our current findings

Based on our 2023 assessment of implementation, we found the department has implemented our recommendation to set service standards and improve eligibility procedures and guidelines.

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 any service standards.

³² *Report of the Auditor General—October 2016, page 35.*

The department has implemented processes to improve its tracking of AISH application processing times by developing measures and the following four service standards:

1. Median time between receipt of application and sent for adjudication
2. Median time between sent for adjudication and eligibility decision³³
3. Median time between eligibility decision and commencement
4. Median time between receipt of application and commencement

The department reports results of the application processing measures to program management on a monthly basis. Management utilizes the monthly reports to assist in identifying which stages of the application processes may be causing delays.

The department measures results against the four service standards and reports to management and a steering committee on a quarterly basis. We reviewed meeting minutes and supporting documentation from the steering committee's meetings and found regular discussion of:

- service standards results
- root causes where standards were not met
- recommended actions to bring results in line with standards
- progress against recommended actions

Eligibility procedures and guidelines

In our January 2021 assessment of implementation, we found the department had improved its eligibility procedures and guidelines to assist staff in applying program policy consistently; however, the department did not have effective processes for accurately assigning, tracking, and monitoring employee training completion.

Since then, the department has improved processes relating to employee training completion. We found management has:

- developed and implemented role-specific training plans which include:
 - › the listing of all mandatory, core, and recommended courses
 - › timeframes for completion
 - › the format of training
- implemented processes to confirm training completion
- developed a self-serve training compliance reporting tool which management utilizes to track and monitor employee training completion. The tool allows for improved monitoring of training completion as results may be generated at any time and are automatically updated from the training system on a monthly basis.

The department reports training completion quarterly to a steering committee and on an ad hoc basis to senior management. We examined meeting minutes from the steering committee and found regular discussion of training compliance results and identification of potential areas for improvement to increase training compliance. Our review of minutes from senior management's meetings found evidence that staff training compliance updates were presented to senior management.

³³ Department indicated the service standard is reflective of internal ministry activities only.

The department has an internal audit function that conducts reviews of the AISH program and makes recommendations. In our 2016 audit, we found that while management had a process to review the internal audit recommendations, implementing the recommendations had been ineffective.

In October 2021, the department established a steering committee which provides feedback on internal audit plans and reports, and monitors actions to respond to internal audit recommendations. We examined meeting minutes and supporting documentation from the committee's meetings and found discussion of:

- formalizing a process to respond to internal audit recommendations
- an internal audit report completed on the AISH program
- an action plan to address recommendations from an internal audit report
- progress on action plan items