

## Public Guardian

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Improve procedures to  
reduce risk

October 2000



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**MEMORANDUM**

Date: 09/27/2000

To: Beverly Stein, Multnomah County Chair  
Diane Linn, Commissioner, District 1  
Serena Cruz, Commissioner, District 2  
Lisa Naito, Commissioner, District 3  
Sharron Kelley, Commissioner, District 4

From: Suzanne Flynn, Multnomah County Auditor

Subject: Audit of the Public Guardian/Conservator Program

The attached report covers our audit of the Public Guardian Program in the Department of Aging and Disability Services. This audit was included in our FY99-00 Audit Schedule.

The Public Guardian Conservator Program assumes responsibility for incapacitated adults who cannot afford private guardian or conservator services. We found the clientele to be among the most vulnerable that the County serves. The Public Guardian Program administrator is appointed, bonded, and assigned by state law to have final responsibility for decisions regarding the care and safety of clients. Although the Program takes this responsibility seriously, it is our conclusion that improvements could be made.

The Program has chosen to take a collaborative approach to managing any potential risk to clients. While collaborative approaches can lead to innovation and better quality services, this must be balanced with a clear assignment of responsibility and accountability. We believe that this balance has not been achieved.

We have discussed our findings and recommendations with the Director of Aging and Disability Services, the Public Guardian Program Administrator, and the County Chair and included their responses in the report. Pursuant to our new practice we will follow up in 6 – 12 months and issue a report at that time.

We appreciate the cooperation extended to us by the management and staff of the Public Guardian Program.

# Table of Contents

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Summary .....	1
Background .....	3
Scope and Methodology .....	5
Audit Results .....	6
Better procedures needed to monitor potential risk .....	6
Organizational structure limits management involvement .....	7
Client records and property not always secured .....	8
File review process could improve oversight .....	9
Clear policies and procedures are lacking .....	9
Better data collection and analysis needed .....	10
Workload is difficult to determine .....	11
Prioritization of activities could improve analysis .....	12
Better analysis could improve planning .....	12
Recommendations .....	14
Responses to the Audit .....	15
Beverly Stein, County Chair .....	16
Jim McConnell, Aging and Disability Services .....	17
Holly Berman, Public Guardian	

## Summary

Clients of the Public Guardian Program are among the most vulnerable citizens in the county. They are unable to make decisions that will protect their health and welfare or their financial resources. They are isolated by circumstance or through victimization, and they have few advocates. Because these clients often have no personal or community ties, we applied a high level of scrutiny to our review of this Program.

Since 1971, Multnomah County has assumed responsibility for incapacitated adults who require a guardian or conservator, but cannot afford private services. The Public Guardian Program attempts to maintain a delicate balance between helping clients remain independent for as long as possible and acting in the best interest of those clients. This requires staff to make crucial decisions that can alter the lives of those adults. Risks to clients must be weighed and controlled. There is also a need to consider the liabilities associated with those risks.

In 1988, a former Public Guardian was found guilty of embezzling client monies. The County Auditor's Office performed an audit of the Program in 1989, resulting in stricter controls over the financial resources of clients. Since then, a number of other positive changes have occurred, but we found problems with the organizational environment and the collection and reporting of data. These have resulted in limited monitoring of staff by management and inadequate use of data when making decisions.

The audit team observed open and collaborative staff interactions and group decision-making. These reflect the Program's response to the County's RESULTS initiative and efforts to improve communication and empower staff. We view these as generally positive. Yet, we found that Program accountability, which is also an integral part of organizational improvement, is not consistently present.

We consider the staff members who work directly with clients to be skilled professionals. They are capable advocates for clients, but they often make decisions with little management support or scrutiny. This can ultimately place client assets and well-being at great risk, particularly when staff changes occur.

Policies and procedures lack clarity, they are not accessible, and they are not used consistently to guide decisions. The work environment at Public Guardian is generally disorganized, which weakens management controls. Full review of client files by management also does not occur on a regular and formal basis.

Data collection methods are not standardized, so information used by the Program to describe the population, community need, and changes may

not be accurate. In addition, management has not developed the skills to use their client database effectively. Using data as a management tool could allow the Program to verify client characteristics and trends and better allocate resources.

## Background

Due to severe physical or mental impairment, some adults are not able to make decisions to protect themselves or their financial assets. When this happens, a Probate Court judge may pronounce them incapacitated and appoint a guardian and/or conservator to make important life decisions.

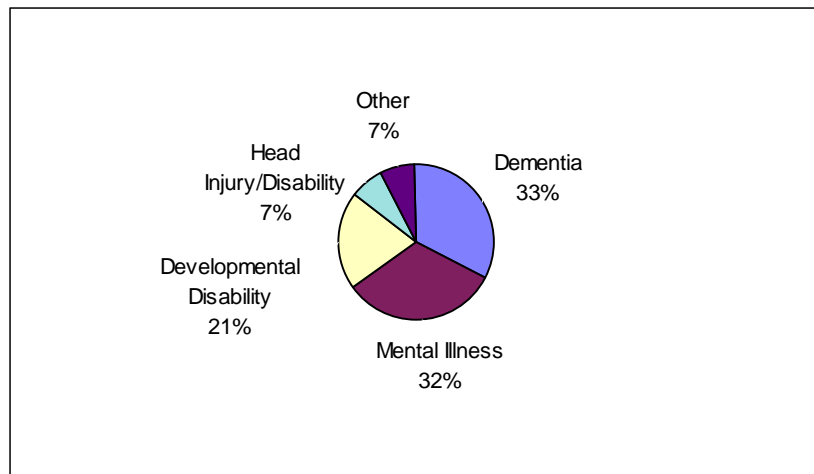
The Multnomah County Public Guardian/Conservator (Public Guardian) Program, part of the Department of Aging and Disability Services, was established in 1971 to act as the guardian and/or conservator (financial manager) when no other option is available. Unique in Oregon, the Program manages the legal, financial, and social service care decisions for these clients. In May 2000, there were 155 active cases in the Program.

Current staff working in the Public Guardian Program are the Program Administrator, Senior Deputy Guardian, four Deputy Guardians (deputies), a paraprofessional, a Clerical Supervisor, and two support staff. The mission of the Program is to “protect the most vulnerable and incapacitated citizens in Multnomah County from abuse, exploitation, and self-neglect through a quality program of legally substituted decision-making for persons and property.”

Most Public Guardian clients receive Medicaid and have few financial resources. Nearly all clients receive services from other parts of the County’s human services system. For most clients incapacitation is established on the basis of dementia, mental illness, developmental disability, or some other disease or disability. The chart that follows depicts the breakdown of primary diagnoses for current clients. However, many have multiple diagnoses that complicate case management.

Exhibit 1

Current diagnoses of clients  
March 2000

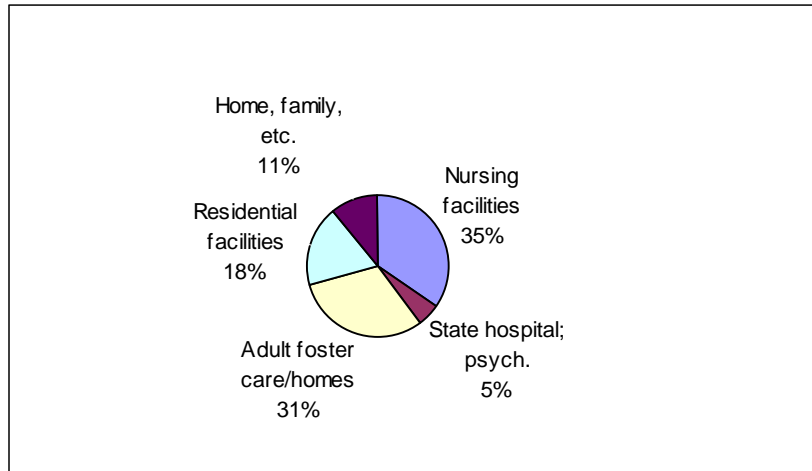


Source: Public Guardian database (PG Track)

Most clients live in care facilities or in their own homes or apartments. The goal of the Public Guardian Program is to keep clients as independent as possible for as long as possible, but sometimes living alone poses too great a risk. If clients own property or have other assets and are able to live alone, the Program may contract with private organizations for the upkeep of their homes and for social services.

Exhibit 2

*Living situation of clients  
March 2000*



Source: Public Guardian database (PG Track)

Public Guardian clients are often victims of abuse or exploitation. Or they may have made poor decisions about their own care. This is a highly vulnerable, generally isolated population that cannot function without assistance. Their ability to prevent or remove themselves from harm is limited. They often lack advocates with personal knowledge and time to act on their behalf, and they are not capable of advocating for themselves.

The importance of making appropriate decisions for the clients served by the Public Guardian Program is a tremendous responsibility. The risk to clients is great, and the County's role in mitigating that risk is significant. In 1988, the former Public Guardian was found guilty of embezzling funds from Program clients. Important controls were missing, and client assets were left unprotected.

In 1989, the County Auditor's Office conducted an audit of the Public Guardian Program. Steps were taken to improve financial controls, and responsibility for client income and expenditures was transferred to the Finance Division. These changes brought about protections that are still in place, however other management weaknesses identified in the 1989 audit remain.

## **Scope and Methodology**

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The purpose of this audit was to assess the systems in place to protect clients and their resources. We reviewed pertinent State laws, County ordinances, and ethical and professional standards. We also reviewed the history of the Program and a previous audit conducted by this office.

The audit team met with the Director of the Department of Aging and Disability Services, the Deputy Director of the Division of Aging Services, the Public Guardian, and all staff working in the Program. We conducted field visits with the four deputies, attended a Court proceeding with the Senior Deputy, observed a Multidisciplinary Team meeting and a focus group. In addition, audit team members interviewed the Probate Court Judge, Court administrative staff, and staff from ADS Protective Services program.

The Program's policies and procedures were analyzed, as were the following program operation systems: medical appointment alerts and prompts, client property disposition, end-of-life code status, supervision and management, and annual accounting to the Court. We reviewed randomly selected files or files that were identified for review because of unusual circumstances. A copy of the Program's client database (PG Track) was analyzed to determine a profile of clients and to understand possible uses of the database for decision-making. Systems for the distribution of client monies and the controls for protecting those funds were also reviewed. Public Guardian statistics and reports were examined to determine service and staffing trends.

This audit was included in our FY 99-00 audit schedule and was conducted in accordance with generally accepted government auditing standards.



## Audit Results

Better procedures  
needed to monitor  
potential risk

Public Guardian's current management practices impact the Program's ability to monitor potential risk to clients and their property. In 1995 under the County's RESULTS initiative, Public Guardian began to redesign organizational processes. Through these efforts, staff participation in decision-making increased. Many of these process improvement activities have strengthened the Program, but a number of other changes are needed to improve accountability efforts.

We found Program staff to be highly professional and skilled. Further, we found no evidence of client harm. But responsibility for clients in this particular program is so great that additional steps are needed to ensure their safety and the security of their property. Delegation of decision-making carries with it a need for a high level of employee competence and greater accountability. It also requires effective procedures for management to monitor results.

The Program Administrator is appointed, bonded, and assigned by state law to have final responsibility for decisions regarding the care and safety of clients. This responsibility for clients represents a liability for the County that requires thoughtful and diligent supervision. Our examination of management practices did not bring assurance that supervisory review of case decisions and monitoring of staff-client interactions is adequate to protect clients.

The County's labor relations guide for managers specifically warns that most substandard performance occurs "outside the knowledge and contemplation" of management. The guide also suggests that managers must model program values, monitor activities, trust staff to effectively carry out tasks, yet stay deeply involved with the work. Management of Public Guardian must be strengthened to meet these criteria.

The Senior Deputy guides deputies in day-to-day decisions and meets with them in practitioner team meetings to review cases. Communication regarding cases regularly occurs between the Program Administrator and the Senior Deputy, but this should not substitute for direct management monitoring and review. The Program Administrator does not attend practitioner team meetings and may not be informed of all case decisions.

Currently, the Program Administrator meets monthly with each deputy and maintains brief, informal notes of these meetings. The Program Administrator stated that staff is not aware that routine review of all cases

occurs. The Program Administrator also reported that ongoing discussions with deputies regarding clients take place frequently and are essential for providing on-call services. (Twenty-four hour on-call responsibilities are shared equally between the Program Administrator and the Senior Deputy.) But management was unable to demonstrate that each and every case receives regular, in-depth supervisory scrutiny.

Review of the Program by ADS upper management is also minimal. The Aging Services Deputy Director supervises the Program Administrator, but is only marginally involved with Public Guardian operations. Policy guidance is viewed as the primary role of the Deputy Director who relies upon the accuracy of information coming from the Program Administrator.

Staff interactions with clients are guided by standards established by the National Guardian Association, as well as program and department policy. They also operate under a legal mandate to make reasonable determinations about what is best for clients. Our observations of direct service personnel found them to be ethical, thoughtful, caring, and highly collaborative and supportive of one another. The work of the Program is dependent on their integrity and ability to make informed decisions about the medical, legal, financial, and social service needs of clients.

As fiduciaries, deputies often make critical decisions while in the field, without benefit of peer and supervisory support, guidance, or oversight. For example, a client's serious illness or possible victimization could require deputies to act independently and immediately. This level of autonomy is important if deputies are to carry out their work effectively. But because of the ultimate risk to clients, ongoing supervisory review by the Program Administrator is essential.

The potential exists for wrong judgment by a deputy due to stress, carelessness, or poor decision-making. There is also the need to be vigilant against theft of client property and assets. Regular monitoring by management can minimize risk to clients, as well as decrease the County's liability and assist in meeting the fiduciary obligations of the Program Administrator.

Organizational structure  
limits management  
involvement

Staff responsibilities at Public Guardian limit the involvement of management in direct services. Three of the ten Program personnel have supervisory responsibilities. This style of supervision may undermine the ability of the Program Administrator to fully monitor staff-client interactions and case decisions, as well as use valuable staff resources. Most importantly, the current organizational structure is not conducive to maintaining a high level of involvement with the work of deputies and the lives of clients.

Management should review the assignment of supervisory responsibilities. Significant reorganization may not be necessary, but if staff resources are being expended without benefiting clients or the Program, changes in staff assignments should be considered. This includes the possibility of returning some direct supervision responsibilities to the Program Administrator.

Previous Public Guardians managed the Program and carried all or part of a caseload. The Program Administrator states that it is not possible to manage the Program effectively and be responsible for a caseload. Indeed, the ability to oversee service and administration of Public Guardian could be undermined if the Program Administrator had to spend considerable time with clients away from the office. If an organizational review results in a shift of more supervisory responsibilities to the Program Administrator, then caseload responsibilities may not be possible. But if no shift occurs, then the option of managing a caseload should be considered.

Client records and  
property not always  
secured

Procedures that protect client records and property are weak. We found an environment of disorganization and confusion. Confidential legal documents and other materials were stacked on a cabinet in the corridor for a prolonged period. In the course of reviewing office hard files, we found a number of filing errors. In the files themselves, case histories were generally difficult to follow. This was compounded by the fact that staff notes to file are not standardized or clearly differentiated from other information, such as updates from caregivers.

Medical, legal, and financial information must be accurate and available. Client and program data should be readily accessible. A disorganized environment, lack of attention to maintaining security, and inconsistent or poor record keeping increase the risk that clients will not be adequately served or their property protected.

While the Program is improving the safety deposit box process, there are still areas that leave Public Guardian exposed to loss due to lack of organization. Currently, client property of sentimental or real value is kept in the program's safety deposit box. However there are no clear guidelines on dollar value to determine what should go in the safety deposit box or can be kept in less secure areas. While there was jewelry of rather small value in the safety deposit box, we found a ring and watch set with a replacement value of \$4,000 that was in a less secure office file cabinet.

Client property, whether of real value or not, should be treated with care. Staff often makes the decision as to which property should be kept, sold, or otherwise disposed. Deputies indicated that they use client input whenever possible in making these decisions. Whichever decision for disposition of property is made, policies and procedures for handling that property need to be clear and consistent.

	<p>While we saw no evidence of loss or theft of client property, we did observe client property in less secure areas such as office bookcases and deputy cubicles. Disposition of client property was not always clearly indicated in the file documentation. There is no process in place to follow-up on safety deposit box activity for additional oversight. However, two deputies did a recent comparison of safety deposit box items listed in the log to what was actually in the box. The Program Administrator did not question incomplete entries or unaccounted items and in some cases log sheets were merely adjusted. A process needs to be in place to follow up on questions as to the value and disposition of client property.</p>
<p>File review process could improve oversight</p>	<p>The Program plans to develop a process for quality review of files, but this process has not yet been implemented. A good model currently exists in the Program. Staff developed a checklist for peer and supervisor quality review of court reports prior to submitting required annual accountings (AAs) to the Court. The audit team found this to be an effective tool for meeting the Program's goal of timely court filings. Development of a full file review checklist and process, similar to the one used for AAs, could significantly improve management oversight.</p> <p>Peer review of files to verify quarterly visit documentation does occur, but in-depth management review of individual case files happens only by exception. The Program Administrator reported that a more thorough examination of other file documents might be triggered during the annual review process for filing of AAs. This does not guarantee thorough examination on a yearly basis. If the current process for review of AAs were expanded to include full file review by management, annual scrutiny would be ensured and supervision controls strengthened. It would also provide an opportunity for regular, comprehensive discussion of cases and reinforcement of standards and policies.</p>
<p>Clear policies and procedures are lacking</p>	<p>Policies and procedures should provide guidance when direct management support is not available. We found that policies and procedures are not easily accessible and do not clearly state information necessary for staff to make good decisions. Poorly organized policies and procedures can result in weak and inconsistent controls, ultimately putting clients at risk. Lack of organization and accessibility can also waste staff time and prevent their use as guidance.</p> <p>The Program has moved to an electronic format for the office policies and procedures. While an electronic version could be useful, each staff member should have a current hard copy they can easily reference. Furthermore, some staff have expressed reluctance to using electronic documentation. While hard copies are available, the Program</p>

Administrator indicated that these copies are outdated. In addition, the electronic version is poorly organized and it is difficult to find information needed in a timely manner. The electronic manual consists of one main file folder, 12 sub-file folders, and 68 files that are not linked, nor is there a table of contents.

The content of the policies and procedures manual is inconsistent in its clarity and organization. Sections of the manual appear to be well organized, comprehensive, and concise while other sections are poorly organized and lack sufficient information.

The manual also contains outdated policies and procedures. It is difficult to determine which policies are valid. For example, some policies are identified as old policies, but there is no indication if the policies are deleted or revised. Other policies indicate they are old and have been revised or updated, but it is not clear which is the revised policy.

Clear and accessible policies and procedures should provide guidance in decision-making. When the specific guidance does not exist, decisions should not go forward. For instance, staff have consulted with professionals before making some complex decisions for clients, yet no policy has been created for those occasions. This may mean there are risky approaches to client service for which there is no decision-making framework or follow-up. Using policies and procedures as guidance for service decisions and then following up to clarify the results and ramifications of those decisions improves control for risk.

Better data collection and analysis needed

Data collection and analysis are critical to monitoring results both by management and policy-makers. Current systems are inadequate and do not promote effective planning and management. Improved use of data, including analysis of functioning levels, living situations, and diagnoses, would better inform Program decisions. Management could identify the level of staff resources required for various client types and develop an objective client classification structure.

A historical description of client characteristics could clarify changes in caseload over time so that the effect on resources could be evaluated. Trend analysis would also assist the Program in projecting future demands. As the characteristics of the client population change, the Program could plan how to allocate resources and services to maximize Program impact.

Public Guardian relies primarily on anecdotal information to describe its performance and to request additional resources. The Program has not established standards for collecting, analyzing, or reporting data on caseload, Program demand, or workload trends. Client characteristics have been drawn from tally sheets that have been adjusted as clients enter and leave the Program. In addition, data categories have not been consistently defined over time, making trends from year-to-year difficult or impossible to track.

The type and interval of information collected have also changed over time. Until 1997, client demographic data was collected monthly. Tracking of monthly statistics ended when the Program decided that the time and resources spent in collecting the information did not justify its value. Since that time, some broad Program data related to key indicators has been collected and reported on a quarterly basis.

A consistent approach to data definitions, collection, and analysis can assist in projecting need for resources and services in addition to providing support for future budget requests. Analysis comparing client characteristics with resources and time expended would also provide data to determine if specific client populations require more resources than others.

Workload is difficult  
to determine

Using available Program data we concluded that some information used by the Public Guardian Program is not supported. Some staff indicate that community-based, younger, and/or chronically mentally ill and developmentally disabled clients are generally more resource intensive. Utilizing monthly statistical reports covering the period July 1994 to November 1997, we found a trend showing an increase of younger, lower income, community-based clients. While a 1993 time study supports that community-based clients may take more time, data does not confirm the assertion that all these client populations require more staff resources.

It is likely that the number and severity of problems experienced by incoming clients have increased due to Program-restricted intake criteria. Criteria have been narrowed to require some type of victimization or critical level of self-neglect. However, there is no data available to prove or disprove this theory. The Program does not track the severity and care requirements of clients coming into the Program or any resulting demand on resources.

Accurate tracking of client diagnosis or incapacitation type may assist the Program in planning future caseload capacity, resources, and staff training. According to some staff, a client's diagnosis or diagnoses can be an indicator of the amount of time and resource a client needs.

Despite the importance of client diagnosis it appears to be determined inconsistently and at times arbitrarily. The primary, secondary, and other relevant diagnoses are not drawn from a consistent source. While each client entering the Program receives a psychological evaluation required by the Court, the Program Administrator does not consider that a reliable source of information. In addition, at this time the Program only tracks staff-determined primary diagnoses. Compounding the problem, the Program does not have formal written definitions for diagnosis categories.

Prioritization of activities could improve analysis

To improve management of staff resources, efforts to determine workload requirements should be made. Analysis of client characteristics factored with living situation and general stability would promote Program efficiency and better justify requests for new resources.

The Program has not prioritized how resources should be allocated. How much staff time should be utilized for consultation, information and referral (I&R), client management, or community education is not clearly defined. For instance, the Program Administrator and Senior Deputy handle I&R responsibilities, but I&R demand has not been measured to determine its impact on other services.

Staff is responsible for most, if not all, aspects of clients' lives. Because of this serious responsibility, it is critical that the Program allocate their resources in an effective and equitable manner while keeping controls in place to protect the clients and meet Court requirements.

Deputy and support staff time is limited, and there is concern about the amount of time they must spend on some administrative tasks. Deputies would like to give priority to direct service and are concerned that documentation and administrative demands will take time away from clients.

Public Guardian caseload policy states that "the total number of clients served by the Public Guardian's office will be in direct proportion to the number of professional staff funded in the Public Guardian's office, and to caseload abilities per professional staff position." Staff has established an optimum caseload number of 40 cases per deputy. They contend this general guideline allows them to meet Court deadlines and maintain quality service. It is based on their collective experience, not analysis of data.

The Program has not set thresholds for allocation of time for specific duties. For example, they have not determined the maximum amount of time that should be spent on administration, file review, documentation, or other such non-direct service tasks. Review of the workload and prioritization of work activities could bring about better use of staff resources. Tracking these numbers might validate or allow change of the caseload standard.

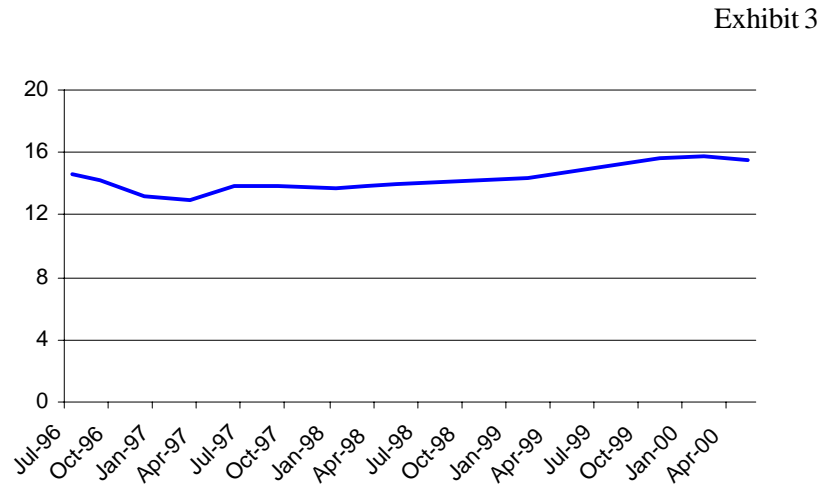
Better analysis could improve planning

Distribution of staff resources should be analyzed. Efforts to expand the Program require an understanding of its current capacity to serve, as well as the ability to assess need. Such analysis is not presently being conducted.

Public Guardian has provided some evidence that the need for their services is growing and the functioning level of those needing service is lower. We found that the capacity to serve more clients may currently exist in the Program. At the very least, data is available that could identify areas to study. For example, the audit team examined the ratio of clients to total staff as a measure of resources expended for number of clients served.

According to Public Guardian records, staff-to-client ratios fluctuated between 1991 and 1996. After reaching current staffing levels, the ratio seems to have risen slightly in the past two years.

Staff-to-client ratios,  
1996-2000



Source: Public Guardian Records

Additional analysis could improve management strategies. By answering the following questions, Program improvements could result.

- Is the recent growth in total client numbers a reflection of growing need and greater client severity?
- Is it an indication of greater Program efficiencies?
- Is the effort to better define who is served and how they are served having a positive effect on utilization of staff resources?
- Or, has the stabilization of staffing levels, more experienced personnel, and process improvement efforts allowed client numbers to grow?

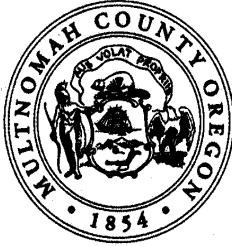


## Recommendations

- 1) Improve management systems to strengthen internal controls and reduce risk to client safety, well-being, and property. Areas in which to focus efforts include:
  - a) Strengthen management review of client services.
  - b) Implement a formal system for tracking client case review between management and deputies.
  - c) Improve the clarity and accessibility of policies and procedures in order to assure their use as a guide in decision-making.
  - d) Implement standards that improve the organization and accessibility of information captured in hard files.
  - e) Expand the Annual Accounting quality review process to include full file reviews so that management scrutiny of each file occurs annually.
- 2) Review supervision assignments to determine if direct supervision responsibilities are appropriately placed.
- 3) Prioritize how staff resources should be allocated and monitor regularly.
- 4) Analyze workload expended and match client characteristics to improve allocation of staff resources.
- 5) Improve collection and use of data to strengthen management decisions. Areas in which to focus efforts include:
  - a) The Program Administrator should receive the training and support necessary to allow the appropriate collection, use, and reporting of data.
  - b) Improve the use and accessibility of PG Track data by the Program Administrator and other staff. With adequate training, this system could provide valuable information.

## **Responses to the Audit**

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## Beverly Stein, Multnomah County Chair

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### MEMORANDUM

To : Suzanne Flynn  
From : Beverly Stein *Beverly*  
Date : September 22, 2000  
Re : Public Guardian program

Thank you for your audit of the Public Guardian program. Before I took office, the Public Guardian program had been audited and had come under extensive criticism because of the actions of the previous Administrator. Fortunately, those issues are behind us. I am pleased that you shared my view that the **staff are "highly professional and skilled"**, **that you found "no evidence of client harm"**, and that the **highly vulnerable nature** of this population underlay your recommendations concerning increased management controls.

Multnomah County is responsible for services for a great number of vulnerable populations – the mentally ill, developmentally disabled, incarcerated offenders, child victims of abuse. The clients of the Guardian program are perhaps unique in the degree of their dependency on us. Any time you assume that kind of relationship to clients, you have a heavy obligation. I am proud of the efforts the Public Guardian management and staff have made in providing protection for these very vulnerable clients. I also believe that **your reminders of the seriousness of our role with these clients can be used to continue to improve the quality and consistency of those services.**

At the request of the Public Guardian, Jim Carlson and the Evaluation and Quality unit worked extensively with the Guardian program beginning in 1996 with the RESULTS program. In his work, he found a dedicated staff working at a high level of productivity. The last customer satisfaction survey rated the Guardian services very high. The main concern of the survey is high caseloads and the need to increase staffing. The efforts of staff and the additional of three new staff over the past five years, have made Multnomah County a leader statewide in the extent and depth of services provided.

I share your concern about the vulnerability of this population and the additional administrative oversight you feel is appropriate. As I understand the Guardian's work plan, several of the items you recommend are in progress, included the **improved use of data** as they convert to a new data collection system. The Guardian's office will continue to review every case plan and financial transactions annually. With the new data system, we should be able to **better document and expand the scope of those annual client reviews and annual court reviews of financial transactions.**



# MULTNOMAH COUNTY OREGON

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SHARRON KELLEY • DISTRICT 4 COMMISSIONER

Date: September 25, 2000

To: Suzanne Flynn, Auditor

From: Jim McConnell, Director *JM*  
Holly Berman, Public Guardian *HB*

Re: Response to Public Guardian Audit

We appreciate the thoughtful analyses and recommendations contained in the report of the Audit on the Public Guardian Program by the Auditor's office. The report addresses issues that are important to us as we work to continuously improve the Public Guardian Program and other programs within the Department.

We are extremely pleased to read that the Auditors "found no evidence of client harm." The report also "found Program staff to be highly professional and skilled."

We accept all of the recommendations in the audit as valuable for the program. They are also in line with our continuous improvement goals. We are already working on some of them.

### Response to audit recommendations

Following are our responses to the audit and the audit recommendations:

*Recommendation 1: Improve management systems to strengthen internal controls and reduce risks to client safety, well-being, and property.*

*Recommendation 1a): Strengthen management review of client services*

**Current:** ADS has invested significant time and effort in "re-inventing" the Public Guardian system over the past three years. The audit report highlights the "high risk" nature of the Public Guardian clients. ADS management and staff are acutely aware of the risk levels. However, we find the emphasis on **management** involvement in each and every case to be excessively dependent on that one

approach for “reducing risk”. In our selection and training of staff for this program, we have focused on the need for vigilance and monitoring of risk factors for this very vulnerable population. The Public Guardian risk management system is built on checks and balances that are based also on teamwork and collaboration between management, staff, and others. Case Managers in other parts of the ADS and County systems are intimately involved in the lives of Public Guardian clients, providing extra “eyes and ears” for reducing risk to clients. The Program Administrator meets on a weekly basis with the staff. The Deputy Director of ADS meets bi-weekly (and more frequently as needed) with the Public Guardian to provide coaching, and to discuss difficult decisions faced by the program staff. We believe that the collaborative approach between management, staff, and other program partners has paid off in terms of reducing risk to both the Clients and the County.

**Plan:**

1. Review again the checks and balances in the system.
2. Formalize and document the tracking of clients by case managers, and by case reviews by management. We would like to continue with our current risk management approach, and make adjustments to that based on our review.

*Recommendation 1 b): Implement a formal system for tracking client case review between management and deputies.*

**Current:** All group supervision meetings, staffings and staff meetings have formal minutes. All annual case reviews are documented on a standard form.

**Plan:** Improve the case review system, including methods for filing and retrieval.

*Recommendation 1 c) Improve the clarity and accessibility of policies and procedures.*

**Current:** The PG policies and procedures are now up-to-date, computerized and easily available and accessible to staff.

**Plan:** ADS will:

- review and improve the organization and accessibility of policies and procedures.
- clarify any issues that may be confusing to staff
- clarify policies related to valuation and storage of property.

*Recommendation 1 d): Implement standards that improve the organization and accessibility of information captured in hard files.*

**Current:** Filings are up-to-date, files have been purged to archive outdated material, and we have assigned extra staff to improve filing efficiency and accuracy.

**Plan:** Develop a standardized format for file notes to assure that information is easier to locate and read.

*Recommendation 1e) Expand the Annual Accounting quality review process to include full file reviews so that management scrutiny of each file occurs annually.*

**Current:** Management reviews each client file on an annual basis.

**Plan:** ADS will implement a formal system for full file review on an annual basis to improve safety for clients and their property.

*Recommendation 2: Review supervision assignments to determine if direct supervision responsibilities are appropriately placed.*

**Current:** Managing the program with a combination of two managers, both of whom also have significant direct service responsibilities enables the program to cover 24 hours a day, 365 days a year.

**Plan:** Re-evaluate job responsibilities on an annual basis.

*Recommendation 3. Prioritize how staff resources should be allocated and monitor regularly.*

**Current:** Periodic time studies have allowed us to evaluate time required for mandated functions.

**Plan:** ADS will set up a formal process to prioritize and monitor use of staff resources, based on an updated evaluation.

*Recommendation 4: Analyze workload expended and match client demographics to enhance analysis of staff resources.*

**Current:** Our historical focus has been to measure ourselves against similar programs, and focus on client satisfaction and potential risk.

**Plan:** ADS is initiating a department wide system of case management that will improve the ability to identify clients at higher risk. Will refine the tools that we use to mesh with this system.

*Recommendation 5: Improve collection and use of data to strengthen management decisions.*

**Current:** The data collection and use has been enhanced considerably since the time of the audit. The program collects and uses electronic data for client tracking, processing activities on behalf of the client, and for documenting and reporting on program activities. The Program Administrator is conversant with the data system, and uses it extensively.

**Plan:** ADS will increase training for management and staff of the program. The Program is in the process of migrating existing programs onto compatible software. Data will be fully transferred by June 30, 2001.

cc: Beverly Stein, Chair of the Board  
Bill Farver