

Performance Audit Recommendations Status- June 2023

Agency Name	Department of Education
Audit Name	Bureau of Vocational Rehabilitation, Performance Audit Report
Audit Period	State Fiscal Years 2017 through 2019
Status Report Date	6/19/23

Summary

The Bureau of Vocational Rehabilitation completed the LBA performance audit in February 2021. Actions on all observations have been taken with most observations fully resolved with the exception of continuing monitoring by the Quality Assurance Unit.

Observation 1 Improve NHVR Internal Control Structure

We recommend NHVR management strengthen its internal control system by:	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
creating and maintaining a strategic plan with measurable goals, objectives, targets, and timelines for completion;			x		Contract completed with Berry Dunn contractor; strategic plan expected to be completed by October 2023
assessing current and future workforce needs, identifying staffing gaps, and establishing a plan to ensure future staffing needs are met;				x	Assessment & recommendations is completed; pending plan finalized and implementation.
developing and implementing a performance measurement system with measures tied to the strategic plan, establishing agency-wide targets and quantifiable outcomes, measuring performance, and comparing against targets;				x	Performance metrics and expectations communicated to team. Monthly data being reviewed on service performance.
assigning accountability for implementation and performance of the strategic plan;			x		Contract pending for strategic plan
establishing, documenting, and implementing formal risk management policies and processes tied to the strategic plan and objectives			x		Risk management plan completed, awaiting finalized strategic plan
conducting periodic risk assessments to identify, analyze, and respond to program risks, and establish risk tolerances;			x		Implement risk assessment plan on an ongoing basis and respond to areas that require action
reviewing existing controls to ensure they are sufficiently designed, operating as intended, not bypassed, and regularly monitored;			x		Quality assurance monitoring for internal controls, documentation of results and respond to areas that require action
ensuring managers understand and demonstrate the importance of adequate controls through their own adherence, establishing procedures to follow up on identified deficiencies, and timely addressing deviations;			x		Response and action by supervisors on an ongoing basis
ensuring information used for making management decision is reliable, accurate, and timely; and				x	Review of performance dashboards at monthly leadership and federal data.
establishing and implementing policies to continuously monitor and evaluate the effectiveness of the internal control structure, incorporating procedures for resolving results of audits and other assessments, and clearly assigning responsibility for timely resolution.				x	Reviewing policies and controls each year to ensure effective design and implementation

Observation 2 Further Develop The Maturity Of Fiscal Processes–

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend DOE management continue its efforts to mature its NHVR fiscal management processes beyond the reactive status by ensuring:				x	Processes developed to proactively manage grant funds; weekly financial meetings to monitor grant funds
the selected NHVR grant planning, budgeting, and monitoring process is comprehensively documented and repeatable for current and future personnel involved in the process;				x	Mapping of processes completed
those responsible for managing and overseeing the VR grant have clearly defined and documented roles;				x	Roles identified in process; procedures for contract workflow drafted.

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the fiscal management processes include metrics to evaluate and monitor the financial health and effectiveness of the program established in policy and procedures; and			x		Comprehensive financial policy being developed; Form 11 budgeting process monitors grant fund spending
a documented formal assessment process takes place to incorporate feedback and new information into the budget development and monitoring processes and the information is used to improve procedures and policy, if needed.				x	Policies and procedures document as needed

Observation 3 Improve Supervisory Review Over The Eligibility Process–

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management improve eligibility signature authority and supervisory review and approval processes by:					This entire observation, in each area will now be monitored by the quality assurance plan, and amendments will be completed as necessary to policies, processes and procedures
tracking who has signature authority and when authority is rescinded or restored;				x	
formally assigning appropriate signature authority and supervisory review responsibility to counselors, supervisors, and managers;				x	
developing, implementing, and refining written requirements for supervisory review, including guidance on what should be considered when reviewing counselors’ eligibility recommendations and disability priority assignments;				x	
ensuring eligibility signature authority and supervisory review processes are clearly communicated to staff;				x	
developing training materials on eligibility signature authority and supervisory review processes and incorporating into training sessions;				x	
identifying data and information necessary for monitoring compliance with eligibility signature authority and supervisory review requirements;				x	
developing, implementing, and refining processes to routinely collect, monitor, and analyze compliance data and information; and			x		
routinely assessing staff compliance with signature authority and supervisory review requirements, analyzing information to identify trends and potential issues, and timely remediating deficiencies identified.				x	

Observation 4 Address Backdated Eligibility Determination Dates–

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Status Feb 2023
We recommend NHVR seek and obtain guidance from the Rehabilitation Services Administration to assess whether backdating official eligibility determination dates is permissible, and if so, under what circumstances. If there are circumstances under which backdating is permissible, then the Commissioner and NHVR management must properly control the use of backdating and ensure compliance with federal requirements and applicable State laws on records management by:				x	Backdating of eligibility determinations is no longer allowed
developing, implementing, and refining written requirements on recording official eligibility determination dates;				x	
revising, implementing, and refining written criteria for situations when backdating eligibility determination dates may be appropriate;				x	
developing, implementing, and refining written processes for staff to utilize and request backdating of eligibility determination dates, including establishing clear timeframes for when backdating may be requested,				x	

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by whom, and what information is needed to request backdating, including a process for requesting backdating outside of established timeframes; and					
developing, implementing, and refining processes to assess the validity and accuracy of official eligibility determination dates and to address inaccurate date in a timely and formal manner.				x	

Observation 5 Ensure Eligibility Determinations Are Made As Soon As Possible –

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management better ensure eligibility determinations are made as soon as possible by:					
developing, implementing, and refining written guidance on internal performance targets;				x	Policy and procedures completed; performance metrics designed
developing, implementing, and refining written guidance on obtaining necessary documentation, including medical records, in a timely manner;				x	
developing, implementing, and refining written guidance on counselor and support staff roles during the eligibility process; and				x	
identifying data and information necessary for monitoring compliance with internal targets and developing, implementing, and refining processes to routinely collect, monitor, and analyze compliance data and information.				x	Quality assurance plan to monitor

Observation 6 Improve Data Accuracy And Compliance With Federal 60-Day Time Limit–

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management ensure compliance with the federal time limit for making eligibility determinations by:					
developing, implementing, and refining written requirements for timelines on supervisory review and approval of eligibility determinations;				x	Performance metrics and expectations completed
routinely measuring staff compliance with federal and program requirements on meeting time limits and analyze information to identify trends and potential issues with compliance; and				x	Monthly data review
remediating deficiencies among individual counselors, regional offices, or agency- wide, as needed.				x	Ongoing quality assurance review and performance evaluations

Observation 7 Ensure Eligibility Determination Extensions Are Valid–

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management ensure backdating of official eligibility determination extensions aligns with its assessment of whether backdating is generally permissible, as recommended in Observation No. 4.					
We also recommend NHVR management seek and obtain guidance from the Rehabilitation Services Administration to determine whether multiple extensions may be completed for each “exceptional and unforeseen circumstances” exemption, and if so, whether subsequent extensions are valid if made after a prior extension had expired. If multiple extensions are permissible, NHVR management should properly control the use of multiple extensions and ensure compliance with federal requirements by developing, implementing, and refining written guidance on the use of multiple extensions. Guidance should include how multiple extensions should be documented in the hardcopy and electronic case files and how it should be monitored by the counselor, RL, and central office management to ensure information is accurate, complete, and in compliance with all requirements.				x	The Rehabilitation Services Administration confirms that extensions are allowable.

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We also recommend NHVR management improve compliance with federal and internal extension requirements by:					
developing, implementing, and refining written guidance on internal performance targets;				x	Performance metrics and expectations completed
developing, implementing, and refining written guidance on obtaining necessary documentation, including applicant signatures, in a timely manner;				x	Policy and Procedure Completed
ensuring administrative rules, policies, and procedures clearly and comprehensively describe the extension process;				x	Policy and Procedure Completed
refining training materials to fully align with federal and internal requirements and incorporating into training sessions;				x	Training materials Completed
identifying data and information necessary for monitoring extension requirements and timeliness of extensions and eligibility determinations made under extensions, and developing, implementing, and refining processes to routinely collect, verify, monitor, and analyze compliance data and information;			x		Quality assurance plan monitoring, performance metrics and performance expectations
routinely measuring staff compliance and analyzing information to identify trends and potential issues with compliance; and			x		Quality assurance plan monitoring
remediating deficiencies, by addressing noncompliance in a timely, formal, and equitable manner and refining performance expectations and processes as needed.			x		Quality assurance plan monitoring

Observation 8 Ensure The Use Of Exemptions For “Exceptional And Unforeseen Circumstances” Is Consistent With Federal Regulations –

We recommend NHVR management ensure exemptions are consistent with federal regulations by:	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
defining “exceptional and unforeseen circumstances” beyond the control of NHVR in administrative rules and providing adequate guidance through policy and procedure on when this exemption may be appropriate;				x	Policy and Procedure completed
fully aligning training materials with federal and internal requirements on the use of exemptions and incorporating requirements into training sessions;				x	Training Plan Completed
identifying data and information necessary for monitoring frequency and appropriateness of exemptions, as well as developing, implementing, and continually improving processes to routinely collect, monitor, and analyze compliance data and information;				x	Quality assurance plan monitoring
routinely measuring staff compliance and analyzing information to identify trends and potential issues with compliance; and			x		Quality assurance plan monitoring
remediating deficiencies, by addressing noncompliance in a timely, formal, and consistent manner and refining processes as needed.			x		Quality assurance plan monitoring

Observation 9 Improve Consistency Of Disability Priority Assignments –

We recommend NHVR management develop a more robust process for ensuring disability priority assignments are compliant and consistent by:	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
assessing the effectiveness of the current process of requiring RLs review disability priority assignments completed by their own staff;				x	Consensus training with Supervisors and quality assurance monitoring
determining how to incorporate routine review or audits of cases by other regional leaders or managers in a timeframe that would allow modifications to the disability priority assignment, if needed; and				x	Quality assurance plan monitoring
addressing noncompliance in a timely, formal, and consistent manner.				x	Quality assurance plan monitoring
We also recommend NHVR improve its monitoring of disability priority assignments by:					

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identifying data and information necessary for monitoring compliance with disability priority assignment requirements and developing, implementing, and refining processes to routinely collect, monitor, and analyze compliance data and information;				x	Quality assurance plan monitoring
routinely assessing staff compliance, analyzing information to identify trends and potential issues with compliance, and remediating deficiencies with management controls as identified; and				x	Quality assurance plan monitoring
developing training to address areas of noncompliance.				x	Quality assurance plan monitoring, In-Service Training Plan

Observation 10 Improve Guidance On Eligibility Documentation And Requirements--

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management ensure guidance on eligibility requirements, disability priority criteria, and related documentation are accurate and comprehensive. When reviewing guidance for completeness and accuracy, NHVR management should ensure administrative rules, policy, procedure, and training materials accurately and clearly reflect federal law and regulations and provide guidance and definitions externally consistent with federal requirements and internally consistent with one another.				x	Recommendations completed

Observation 11 Ensure Documentation Fully Supports Eligible Determinations--

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management develop a process to ensure adequate documentation of eligibility determinations are contained in the files. As part of the process, NHVR should:					
identify data and information necessary for monitoring compliance with federal and NHVR eligibility documentation requirements and develop, implement, and refine processes to routinely collect, monitor, and analyze compliance data and information;				x	Quality assurance plan monitoring
routinely measure staff compliance with requirements and assessing information to identify trends and potential issues with compliance; and				x	Quality assurance plan monitoring
remediate deficiencies, by addressing noncompliance in a timely, formal, and consistent manner and refine processes as needed.				x	Quality assurance plan monitoring

Observation 12 Ensure Case Records Contain Documentation Required For Ineligible Determinations--

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management ensure case records contained documentation required to support ineligible determinations by:					
identifying data and information necessary for monitoring ineligible determinations and associated documentation requirements;				x	Quality assurance plan monitoring
developing, implementing, and refining processes to routinely collect, verify, and monitor compliance data and information;				x	Quality assurance plan monitoring
routinely assessing staff compliance and analyzing information to identify trends and potential issues with compliance;				x	Quality assurance plan monitoring
remediating deficiencies, by addressing noncompliance in a timely, formal, and consistent manner and refining processes as needed; and				x	Quality assurance plan monitoring

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refining training materials to fully align with federal and program requirements and incorporating into training sessions.				x	Quality assurance plan monitoring
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Observation 13 Ensure Use Of Trial Work Experiences Is Consistent With Federal Requirements–

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR obtain guidance from the federal Rehabilitation Services Administration to determine how to ensure compliance with federal requirements to conduct trial work experience when NHVR is unable to find employers willing to provide them.				x	Updated trial work policy, procedure and training
We also recommend NHVR management improve compliance with trial work experience requirements by:					
ensuring administrative rules incorporate trial work experience processes and all trial work requirements binding on customers, vendors, and employers;			x		Administrative Rules to be amended within one year
ensuring administrative rules and guidance in policy, procedures, and training materials is comprehensive and aligns with federal requirements, including improving guidance on when to use trial work experiences;				x	Work completed
fully aligning training materials with federal and State program requirements on the use of trial work experiences and incorporating requirements into training sessions; and				x	Training plan completed
developing policies and procedures to ensure cases that will be closed as ineligible due to disability severity contain all required documentation of a trial work experience prior to closure.				x	Policy and Procedure completed
We also recommend NHVR management improve its monitoring of trial work experiences, including federal and program requirements, by:					
identifying data and information necessary for monitoring use of trial work experiences;				x	Quality assurance plan monitoring
developing, implementing, and continually improving processes to routinely collect, monitor, and analyze compliance data and information;				x	Quality assurance plan monitoring
routinely measuring staff compliance and analyzing information to identify trends and potential issues with compliance; and				x	Quality assurance plan monitoring
remediating deficiencies, by addressing noncompliance in a timely, formal, and consistent manner and refining processes as needed.				x	Quality assurance plan monitoring
Finally, we recommend NHVR consider whether trial work experience could be expanded to other customers to assess VR service needs, as permitted by federal regulations.				x	Policy and procedure completed

Observation 14 Improve Supervisory Review Over The IPE Development Process–

We recommend NHVR management improve the IPE supervisory review and approval processes by:	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
tracking which counselors have signature authority and when signature authority is rescinded or restored;				x	Case management system signature authority list
assigning appropriate signature authority and supervisory review responsibility to counselors, supervisors, and managers;				x	Case management system signature authority list and policy and procedure
developing a process to monitor whether those without signature authority are approving IPEs;				x	Quality assurance plan monitoring
developing, implementing, and refining written requirements for supervisory review of IPEs and amendments;				x	Consensus work – Quality assurance component
developing procedures to ensure counselors timely and accurately address issues identified during supervisory reviews; and				x	Quality assurance plan monitoring

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routinely assessing effectiveness of NHVR controls with signature authority and supervisory review requirements, analyzing information to identify trends and potential issues, and remediating deficiencies identified.				x	Quality assurance plan monitoring
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Observation 15 Expand The Use Of Supervisory Review For Certain Cases–

We recommend NHVR management improve oversight by establishing:	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
a process to compare actual costs against IPE estimates;				x	Quality assurance plan monitoring
margins for which actual costs may reasonably deviate from IPE estimates and a process to identify and review cases that fall outside of these limits;				x	Quality assurance plan monitoring
thresholds for when lengthy cases should be automatically flagged for review by a supervisor or other NHVR management and a process to identify and review cases reaching these thresholds;				x	Quality assurance plan monitoring
a process to identify cases which have had little activity or gaps in communication between the counselor and the customer; and				x	Quality assurance plan monitoring
a process to ensure issues identified are addressed and rectified timely.				x	Quality assurance plan monitoring
NHVR should also consider the level of review that should be conducted for these cases, what reviewers should consider, when a review should be triggered, how it should be documented, and whether reviews should be conducted by supervisors or staff other than the person responsible for the daily case processing.				x	Quality assurance plan monitoring

Observation 16 Ensure Internal Controls Over Supervisory Review Thresholds Are Operating As Designed–

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management assess its current practices to ensure reasonable cost estimates are captured for each case and ensure all cases meeting cost estimate thresholds are flagged for required review. As part of this assessment, NHVR management should:					
determine whether the case management system can accurately calculate and track cumulative cost estimates for each case when multiple IPEs are developed;			x		The system is built where the plan cost approval threshold is looking at the plan being approved not the cumulative costs of all the plans. If we'd want that change, we could get a statement of work for the change. Our plan for this was to add it into QA developing a report that outlines the differences between estimated plan costs and actual expenditures and reviewing the higher quartiles.
ensure the case management system appropriately flags for review all cases with cumulative estimated costs meeting the thresholds;			x		The system is built where the plan cost approval threshold is looking at the plan being approved not the cumulative costs of all the plans. If we'd want that change, we could get a statement of work for the change. Our plan for this was to add it into QA developing a report that outlines the differences between estimated plan costs and actual expenditures and reviewing the higher quartiles.

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ensure all services intended to be provided by a vendor have reasonable cost estimates, develop a method to identify vendor-provided services that have been put into an IPE with an estimated cost of \$0, and ensure these cost estimates are corrected prior to an IPE being approved;				x	Policy and Procedure completed
develop guidance on how new IPEs should be handled, including when it is appropriate for cost estimates from previous IPEs to be included in current IPEs; and				x	Policy and Procedure completed
ensure services already paid for under previous IPEs are retained as part of the cumulative cost estimate for the case.				x	To be incorporated into updated training

Observation 17 Improve Timeliness Of IPE Development And Address Compromised Data–

We recommend NHVR management ensure compliance with the federal time limit for developing IPEs and ensure IPEs are developed as soon as possible by:	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
seeking and obtaining guidance from the Rehabilitation Services Administration on how to comply with the federal 90-day time limit to develop an IPE when customers are placed on a waitlist;				x	Policy and Procedure Completed
developing, implementing, and refining written requirements for timelines on supervisory review and approval and guidance on timeliness performance targets;				x	Regional leader performance metrics and expectations
routinely measuring staff compliance with federal and program requirements on meeting time limits and analyzing information to identify trends and potential issues with compliance;				x	Monthly data review
remediating deficiencies among individual counselors, regional offices, or agency- wide, as needed;				x	Quality assurance plan monitoring
identifying data and information necessary for monitoring compliance with timeliness targets; and				x	Data dashboard and monthly monitoring
developing, implementing, and refining processes to routinely collect, monitor, and analyze compliance data and information.				x	Quality assurance plan monitoring
We recommend NHVR seek and obtain guidance from the Rehabilitation Services Administration to determine whether backdating effective IPE dates is permissible, and if so, under what circumstances. If there are circumstances under which backdating is permissible, then the Commissioner and NHVR management must properly control the use of backdating and ensure compliance with federal requirements and applicable State laws on records management by:				x	Backdating is allowable
revising, implementing, and refining written criteria for situations when backdating IPE dates may be appropriate;				x	Policy and procedure completed
developing, implementing, and refining written requirements on recording effective IPE dates to reflect federal requirements and guidance that an IPE not be “effective” until both a qualified counselor and the customer have signed and dated the IPE;				x	Policy and procedure completed
developing, implementing, and refining written processes for staff to utilize and request backdating of IPE dates, including establishing clear timeframes for when backdating may be requested, by whom, what information is needed to request backdating, and a process for requesting backdating outside of established timeframes; and				x	Policy and procedure completed
developing, implementing, and refining processes to assess the validity and accuracy of effective IPE dates and to address inaccurate date in a timely and formal manner.				x	Quality assurance plan monitoring

Observation 18 Ensure Compliant Use Of IPE Extensions -

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management improve compliance with federal and program extension requirements by:					

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developing, implementing, and refining written guidance on obtaining necessary documentation, including applicant signatures, in a timely manner;				x	Policy, Procedure and training completed
ensuring administrative rules, policies, and procedures clearly and comprehensively describe the extension process including referring customers to the CAP at the appropriate time; and				x	Policy, Procedure and training completed
refining training materials to fully align with federal and program requirements and incorporating them into training sessions.				x	Yearly training offered in this area
We recommend NHVR management seek and obtain guidance from the federal Rehabilitation Services Administration to determine whether multiple extensions may be completed for each IPE exemption. If multiple extensions are permissible, NHVR management should properly control the use of multiple extensions and ensure compliance with federal requirements by developing, implementing, and refining written guidance on the use of multiple extensions.				x	Policy and Procedure completed; additional supervisory review required
We also recommend NHVR management improve its monitoring efforts by:					
identifying data and information necessary for monitoring extension requirements and timeliness of extensions and IPEs made under extensions, and developing, implementing, and refining processes to routinely collect, verify, monitor, and analyze compliance data and information;				x	Quality assurance plan monitoring
<ul style="list-style-type: none"> routinely measuring staff compliance and analyzing information to identify trends and potential issues with compliance; and 				x	Quality assurance plan monitoring
<ul style="list-style-type: none"> remediating deficiencies, by addressing noncompliance in a timely, formal, and equitable manner and refining performance expectations and processes as needed. 				x	Quality assurance plan monitoring
We further recommend NHVR management ensure backdating of IPE extensions aligns with its determination of whether backdating is generally appropriate, as recommended in Observations No. 4 and No. 17.				x	RSA approves backdating with documentation

Observation 19 Ensure IPEs And Amendments Are Signed By The Customer And Signed Timely--

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management continue its efforts to explore an electronic signature process. These efforts should include: consulting the Rehabilitation Services Administration to verify any new technology is compliant with federal laws and regulations; and				x	RSA does not dictate technology requirements for reporting
analyzing the workflow of an electronic signature process to identify gaps in policies, procedures, and training which could result in an IPE being enacted without a customer signature.				x	Signature approval policy completed, OIT policies
We also recommend NHVR management ensure current IPE development processes are compliant with federal laws and regulations by developing policies, procedures, and training materials that include:					
a process to ensure that only IPEs that are signed and dated by the customer are finalized and become effective in the case management system;				x	Policy and procedure completed
ensuring services are only authorized for cases with an effective IPE or amendment;				x	Regional Supervisor review requirement
methods authorized by management to obtain a customer's signature, and procedures associated with each method;				x	Signature approval policy completed

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a description of when it is appropriate for NHVR staff to write on the customer’s signature and date section of the IPE form or a prohibition of such activity; and				x	Quality assurance plan monitoring and ethics training
a description of what is considered a valid signature and a process for providing accommodations when appropriate.				x	Quality assurance plan monitoring and ethics training

Observation 20 Clarify When An IPE, Amendment, Or Internal Correction Is Appropriate–

20		Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
	We recommend NHVR management develop and clarify policy, consistent with federal requirements, for when a new IPE, amendment, or internal correction is appropriate. In determining the appropriate method to use, management should ensure estimated costs for services added to the IPE are included in the total estimated cost of that case:					
	When developing policy for counselors, NHVR management should include:					
	clear guidance on when counselors should use each type of correction to address substantive changes to employment goal, services to be provided, or the providers of the services;				x	Policy and procedure completed
	procedures to ensure vendors are updated through amendments prior to customer’s receiving services and internal corrections are limited to technical changes which do not conflict with federal requirements; and				x	Policy and procedure completed
	monitoring procedures to verify internal controls prompting supervisory review are operating effectively.			x		Quality assurance plan monitoring
	After developing and clarifying policy, NHVR management should update training materials by incorporating related changes and conduct trainings for timely implementation.				x	Training plan completed

Observation 21 Ensure Employment Goals Are Appropriately Supported–

		Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
	We recommend NHVR management ensure customers’ IPE goals are consistent with the customer’s unique strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice by:					
	ensuring counselors clearly document the rationale for employment goals and retain copies of additional assessments in the case record;			x		VR 101 training on comprehensive assessment (CA) occurring July 2023 through June 2024
	ensuring counselors are aware of, and properly utilize, available procedures such as including additional criteria on IPEs and periodically providing information on fair hearing and mediation to more effectively and timely address dissatisfaction or disagreements related to employment goals; and				x	Policy and Procedure completed
	establish a process to periodically review counselors’ compliance with requirements.			x		Quality assurance plan monitoring
	In establishing a review process, NHVR management should require RLs to periodically verify employment goals appropriately align with federal criteria by reviewing required assessments when approving or reviewing IPEs.				x	Assuring CA done properly, part of Supervisory review process & VR 101 training
	We also recommend NHVR management improve accuracy of customer records by developing a review process to ensure IPE goals accurately reflect the intended employment goal or are changed when necessary.			x		VR 101 training; Quality assurance plan monitoring

Observation 22: Ensure Services Provided Contribute To Achievement Of The Employment Goal–

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We recommend NHVR management:	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
clarify whether goods and services not directly related to the employment goal are allowable under federal guidance, and if allowable, provide guidance to ensure counselors document explanations for why these purchases are necessary to achieve the employment goal;				x	Signature authority policy
clarify when maintenance payments are appropriate and develop procedures to determine whether costs are in excess of the customer's normal expenses;				x	Signature authority policy
incorporate supervisory review over required assessments to ensure services appropriately reflect the customer's strengths, capabilities, and cost-effectiveness of the service;				x	Signature authority policy
review usage of pre-IPE services and develop guidance to ensure counselors utilize existing information to the maximum extent possible and include all other necessary services on the IPE; and				x	Assessment policy,
improve accuracy of customer records by clarifying when to delete services which were determined to be unnecessary and were not provided to obtain the employment goal.			x		Training guidance to be developed;

Observation 23 Document Comparable Benefits--

We recommend NHVR management:	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
develop guidance for documenting whether comparable services and benefits were available;				x	Policy and procedure completed
include all VR services necessary to achieve the employment outcome on the IPE and corresponding costs, regardless of the program providing the service or payment;			x		Will require an amendment to our case management system, will be melded into new contract
ensure all IPEs exceeding threshold amounts receive supervisory review, regardless of payment source; and					Will require an amendment to our case management system, will be melded into new contract
ensure comparable benefit cost data reported to all external entities is valid and accurate.				x	Cost data for comparable benefits not reported

Observation 24 Formalize And Document Vehicle Modification Process--

We recommend NHVR management improve its vehicle modification process by:	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
reviewing its current policies, guidance documents, and practices to clarify areas that appear to conflict and incorporate activities which may be missing from the process;				x	Policy and Procedure Completed
adopting comprehensive policies including outlining forms it requires counselors to complete, other documentation requirements, and other criteria necessary when approving a vehicle modification; and				x	Policy and Procedure Completed
documenting and retaining all forms, reports, records, and approvals used in the vehicle modification process in the customer's file to ensure procedures have been followed as well as to ensure thorough, accurate, consistent, and well-informed decision-making.				x	Policy and Procedure Completed
We also recommend NHVR management determine if any administrative rules are needed for vehicle modifications, especially for requirements it imposes that are binding on those outside of NHVR employees.				x	VRNH does not recommend inclusion of this area in administrative rules

Observation 25 Improve Monitoring Efforts And Strengthen Policies For College Training Cases--

We recommend NHVR management improve its monitoring of college cases and ensure requirements are applied consistently by:	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status

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developing a standard process for regional offices to track and monitor that all required documentation, including the FATF and transcripts, are received before providing funding for subsequent semesters;			x		Develop process, procedure & training. Counselor manual checklist
developing a process to periodically review customers enrolled in college part-time, ensure medical documentation justifying part-time enrollment status is included in the file, ensure continued part-time enrollment is justified, and update enrollment status as needed;			x		Quality assurance plan monitoring
clarifying policies to ensure those addressing minimum grade point average and academic probation are aligned and do not provide conflicting guidance;			x		probation is not in policy specifically; policy is broad; policy to be refined
tracking courses funded by NHVR for each customer to ensure funding is not provided for customers to retake a failed class;			x		Quality assurance monitoring and training
establishing a formal process for obtaining waivers for deviations from policies, including providing proper justification, ensure all required documentation is present, and approvals to deviate from policies are documented; and				x	Policy to be developed to incorporate deviation language
ensuring staff counseling and monitoring college cases are trained on policies affecting customers attending college.				x	Training on policy; Training plan, annual refresher
We also recommend NHVR management address potential gaps in overseeing college cases by developing policies:					
on justification, criteria, and documentation needed to approve funding for graduate studies;				x	Policy and Procedure completed
to document and ensure that degrees funded by NHVR are clearly required for the employment goal identified in the customer's IPE;				x	Policy and Procedure completed
to document labor market research was conducted for college cases prior to committing college funding; and				x	Policy and Procedure completed, VR 101 training to reinforce concepts
on considering the impact of degenerative disabilities and addressing changes in disability while enrolled in college.				x	VR 101 training to reinforce concepts
NHVR management should also consider designating a coordinator to address college activities to help increase monitoring and ensure consistency.				x	Quality assurance plan monitoring

Observation 26 Ensure Consistent Documentation For Computer Technology Purchases--

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management develop a standardized checklist or adopt a detailed form to be completed prior to the approval of a computer technology purchase. Additionally, we recommend NHVR periodically review computer technology purchases for compliance and incorporate any areas of noncompliance into future training.				x	Computer Hardware and Software policy updated. Quality

Observation 27 Improve Case Monitoring Efforts--

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management ensure counselors holistically assess customer progress toward achieving an employment outcome by:					
assessing whether allowing substitutions to the annual review is compliant with federal law, considering requiring all annual reviews occur from the date of the initial IPE;				x	Annual reviews occur every year after the initial IPE
ensuring all annual reviews are conducted timely;				x	Training implemented
developing procedures and training counselors on how to develop adequate criteria that can be used to measure a customer's progress and ensure criteria remains relevant through the entire case;				x	Policy, Procedure and training completed

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developing and formalizing procedures for counselors to effectively assess customer progress against criteria;			x		VR 101 training will reinforce this area
assessing current minimum requirements for case monitoring and documentation to remedy conflicts within NHVR procedures and other internal controls;				x	Quality assurance plan monitoring
incorporating supervisory review processes into annual reviews to ensure procedures are implemented effectively; and				x	Quality assurance plan monitoring
reviewing current internal controls for monitoring case progress and developing more effective controls to ensure case note documentation meet minimum expectations.				x	Quality assurance plan monitoring

Observation 28 Evaluate Gaps In Authorization Control Structure–

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management reassess its internal controls over issuing authorizations to ensure the objectives to both manage expenditures and provide timely service delivery are achieved in a balanced and risk-based manner. The assessment should consider whether allowing authorizations to be issued for services not on the most current IPE and allowing vendors to start services before authorizations are issued is appropriate.				x	Decision not to change system relative to this: but to train staff to continue to keep services in plans moving forward

Observation 29 Improve The FNA Process–

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR clarify with the Rehabilitation Services Administration whether customers receiving retirement and survivor benefits from the SSA are exempt from the FNA. Once clarified, we recommend NHVR management clearly define in its administrative rules, which financial benefits programs qualify customers for an exemption from the FNA process and align the FNA form, NHRV policy, and internal training materials with these rules.				x	RSA confirmed that only individuals receiving services for themselves are exempt from the FNA.
We also recommend NHVR develop a mechanism to remind counselors to complete the FNA when applicable services are added to the IPE and a system to monitor that all customers who require an FNA complete one timely.				x	This concept will be infused into training and quality assurance plan monitoring
We further recommend NHVR management ensure the FNA is consistently applied by:					
ensuring administrative rules, the FNA form, policies, and training materials clearly outline the process for determining whether the customer is considered a dependent and, when applicable, identifying those financially responsible for the customer;				x	Policy and procedure completed; form also amended
developing and documenting a methodology to determine whether customer contribution towards the cost of services should be applied at once or over an extended period, and if applicable, the monthly contribution amount customers will contribute as well as the number of payments; and				x	The bureau no longer accepts contributions. All services are paid to the vendor
developing a method to track customer payments towards the cost of their services.				x	Financial needs assessment does this task

Observation 30 Ensure Exemptions From The FNA Are Properly Documented–

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status

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We recommend NHVR management strengthen its process for ensuring award letters or other evidence of SSI, SSDI, Temporary Assistance for Needy Families, or Aid to the Permanently and Totally Disabled eligibility are in customer files before paying for services which require the customer to demonstrate financial need. If customers cannot provide verification of SSI or SSDI, NHVR should ensure counselors verify eligibility directly with the Social Security Administration, as required by federal regulations and its own rules.				x	Policy and Procedure Completed
In improving its process, NHVR should:					
develop clear and comprehensive guidance regarding the types of documentation required for <i>each</i> type of program under which customers could qualify for an exemption from the FNA;				x	Policy and procedure completed
assess the effectiveness of existing processes to verify required documentation that a customer demonstrates financial need before authorizing payment for services, and improve or develop processes as needed;				x	Policy, procedure and training completed
consider requiring the <i>File Review Form</i> be reviewed by personnel in a different regional office than where the case was processed;			x		Quality Assurance team assessing all protocols
continually monitor for compliance and ensure deficiencies are corrected timely; and				x	Quality assurance plan monitoring
provide additional training if monitoring efforts reveal continued noncompliance.				x	

Observation 31 Improve Vendor Management–

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management improve oversight and management of CRP vendor approval and setup processes by: <ul style="list-style-type: none"> developing policies and procedures and adopting administrative rules to ensure all requirements imposed on CRP vendors are consistently enforced, transparent and clearly defined, and tracked. revising the service agreements to include signatures for both parties and provide clear instructions for CRP vendors with multiple employees entering into a service agreement. modifying vendor setup procedures to be based on a completed service agreement and reassign vendor creation responsibilities to segregate incompatible duties; and exploring options to manage the list of active vendors from the electronic case management system instead of external spreadsheets.	x				2 unsuccessful RFP attempts; CRP committee developing application process for Community rehabilitation programs, internal workgroup formed to assign tasks/responsibilities and next steps. This whole observation will be a priority in the next year.
We recommend NHVR management assess the risk associated with allowing vendors who have not received a background check to work directly with customers and develop procedures to mitigate the risk a vendor with a questionable background is approved. In developing the process, we recommend NHVR management:	x				
research commonly implemented background check procedures for CRPs,	x				
contact CRP vendors already conducting background checks to determine their processes,	x				
explore incorporating similar procedures to ensure consistent vetting of CRP vendors, and	x				
establish a process to collect information on CRP vendors receiving background checks.	x				
We also recommend NHVR management improve CRP vendor performance monitoring by:					
<ul style="list-style-type: none"> complying with federal regulations and developing CRP vendor performance metrics to be disseminated to both customers and NHVR staff; 	x				
developing procedures to require CRP vendor reports prior to payment and a process to assess the quality of the reports provided;	x				

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clearly defining the CRP vendor incentive program in policy and routinely analyzing the outcomes of vendors receiving incentive payments;	x				
incorporating complaint and disciplinary procedures in both administrative rule and services agreements; and	x				
disseminating the results of any disciplinary action taken against a CRP vendor when misconduct has been confirmed after performing an investigation.	x				

Observation 32 Improve Controls Over Customer Payments--

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management implement the statutory requirement to recover costs from customers receiving awards or settlements related to their disabilities in administrative rules. These rules should include a process for identifying potential future awards and settlements, and a process for identifying State and federal portions of recovered costs.				x	HB640 repealed this language
In implementing the statutory requirements, NHVR management should determine whether payment plans are allowable under its existing statute. If not, NHVR should consider whether such authority should be granted, and petition the Legislature to amend its statute accordingly. If NHVR determines payment plans are allowable under its current statute, it should:					HB640 repealed this language
adopt administrative rules to describe the repayment process and required forms;				x	N/A due to legislative action
develop internal policies on when NHVR could take legal action against noncompliant customers; and				x	N/A due to legislative action
develop a tracking system to record repayment efforts.				x	N/A due to legislative action
We also recommend NHVR management improve controls over payments made directly to customers by modifying its existing procedure to limit the number of reimbursements and advance payments and require all payments include proper documentation prior to reimbursing customers.				x	Fees and expenditure policy completed, quality assurance plan monitoring

Observation 33 Institute Controls Over Goods Purchased For Customers--

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management improve controls over the transfer of tangible goods purchased for customers by developing policies and procedures requiring the transfer of goods is documented through customers acknowledging receipt of goods and follow-up conversations with customers are documented in case notes.				x	Fees and expenditure policy completed, quality assurance plan monitoring

Observation 34 Improve Monitoring Of Cases For Timely Closure--

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management improve guidance on case closure timeliness by:					
developing, implementing, and refining rules, policies, procedures, and training on reviewing caseloads to identify potentially inactive cases and on closing cases deemed inactive, including criteria for "unavailable" and "non-cooperative" customers and timelines				x	Policy, procedure and training completed

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identifying ways to assist counselors, such as through the use of support staff to timely send the second closure notice if no contact is made after the first closure notice is sent, and developing appropriate policies and procedures;and				x	Policy, procedure and training completed
ensuring guidance on closures is comprehensive and consistent across rules, policies, procedures, and training;				x	Policy and procedure completed
We recommend NHVR management improve monitoring of case closure timeliness by:					
identifying data and information necessary for monitoring inactive cases, as well as developing, implementing, and continually improving processes to routinely collect, monitor, and analyze compliance data and information;				x	Quality assurance plan monitoring
routinely measuring staff compliance, such as through random review of a certain percentage of cases on a counselor’s caseload, and analyzing information to identify trends and potential issues with compliance; and				x	Quality assurance plan monitoring
remediating deficiencies, by addressing noncompliance in a timely, formal, and consistent manner and refining processes as needed.				x	Quality assurance plan monitoring

Observation 35 Improve Employment Verification–

We recommend NHVR management ensure counselors verify a customer’s employment and obtain documentation required by federal requirements. As part of its process, NHVR should ensure:	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
hourly wages are accurately captured and reported,				x	Training completed
all personnel understand the criteria for what should be closed as a rehabilitation, and				x	Training completed
written policy and procedures include how supervisors should verify this information is being collected.				x	Policy and procedure on employment verification. No requirement for supervisor verification.

Observation 36 Ensure Closures For Rehabilitation Are Supported By All Required Documentation–

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management ensure all cases closed as rehabilitated contain all documentation required by federal regulations and its own requirements. In ensuring this, management should provide additional guidance through administrative rules, policy, procedure, and training materials on the requirements that must be met before closure.				x	Policy and procedure completed
We also recommend management develop a process to monitor compliance by:					
identifying data and information necessary for monitoring rehabilitated closures and associated documentation requirements;			x		Quality assurance plan monitoring
developing, implementing, and refining processes to routinely collect, verify, and monitor compliance data and information;			x		Quality assurance plan monitoring
routinely assessing staff compliance and analyzing information to identify trends and potential issues with compliance; and			x		Quality assurance plan monitoring
remediating deficiencies, by addressing noncompliance in a timely, formal, and consistent manner and refining processes as needed.			x		Quality assurance plan monitoring

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Observation 37 Ensure Closure Reasons For Cases That Are Not Rehabilitated Are Used Accurately–

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management ensure cases are appropriately closed as non- rehabilitated and contain all documentation required by federal regulations and its own requirements. In ensuring this, management should provide additional guidance on ineligible and non-rehabilitated closure by defining closure reasons in its administrative rules, policy, procedure, and training materials on the requirements that must be met before closure.				x	Policy and procedure completed
We also recommend NHVR management develop a process to monitor compliance by:					
identifying data and information necessary for monitoring non-rehabilitated closures and associated documentation requirements;				x	Quality assurance plan monitoring
developing, implementing, and refining processes to routinely collect, verify, and monitor compliance data and information;				x	Quality assurance plan monitoring
routinely assessing staff compliance and analyzing information to identify trends and potential issues with compliance; and				x	Quality assurance plan monitoring
remediating deficiencies, by addressing noncompliance in a timely, formal, and consistent manner and refining processes as needed.				x	Quality assurance plan monitoring

Observation 38 Ensure Compliance With PES Requirements–

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management improve compliance with PES requirements and ensure appropriate use by:					
ensuring administrative rules incorporate post-employment processes;				x	Changes in RSA guidance relative to the PES definition and delivery
ensuring guidance on post-employment in administrative rules, policy, procedures, and training materials is comprehensive, including how to determine when service needs are too complex or comprehensive for post-employment;				x	Changes in RSA guidance relative to the PES definition and delivery
developing guidance to ensure cases originally closed as rehabilitated are appropriately opened to provide PES and implementing monitoring of original closures to ensure vendors have been paid prior to closure; and				x	Changes in RSA guidance relative to the PES definition and delivery
developing policies and procedures to ensure cases opened for PES contain all required documentation to support the necessity of services and to support closure.				x	Changes in RSA guidance relative to the PES definition and delivery
We also recommend NHVR management improve its monitoring of post-employment, including case progression and timeliness of closure, by:					
identifying data and information necessary for monitoring post-employment, as well as developing, implementing, and continually improving processes to routinely collect, monitor, and analyze compliance data and information;				x	Changes in RSA guidance relative to the PES definition and delivery

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implementing controls in the case management system or developing a report to monitor when PES cases open, to ensure PES cases are opened timely after the original rehabilitation closure;				x	Changes in RSA guidance relative to the PES definition and delivery
implementing controls in the electronic case management system or developing a report to monitor how long PES cases have been open, to ensure services are provided in a timely manner;				x	Changes in RSA guidance relative
routinely measuring staff compliance, such as through inclusion of post-employment service compliance on the weekly case monitoring report or the purposeful selection of PES cases for inclusion in a routine internal audit process, and analyzing information to identify trends and potential issues with compliance; and				x	Changes in RSA guidance relative to the PES definition and delivery
remediating deficiencies, by addressing noncompliance in a timely, formal, and consistent manner and refining processes as needed.				x	Changes in RSA guidance relative to the PES definition and delivery

Observation 39 Update Administrative Rules–

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management ensure it promulgates adequate rules for all:					
activities under its authority as outlined in RSA 200-C,				x	Updated Rules 7/2021
any requirements it imposes on persons external to its own personnel including applicants, customers, and CRP vendors, and				x	Updated Rules 7/2021
forms it requires applicants, customers, and CRP vendors to use to provide information.				x	Updated Rules 7/2021
As part of the rulemaking process, NHVR management should conduct a comprehensive assessment of its current rules and determine whether they adequately reflect all current federal laws and regulations, as well as align with and address all its current practices.	x				The bureau will do a review of the administrative rules in the next year
The Department of Education (DOE) should consider seeking legislation to move rulemaking authority for all VR services administered by NHVR from the Board of Education to the Commissioner. This would more clearly link the authority and responsibilities for operating the VR program to one entity.					The bureau will not be addressing this area
Finally, NHVR should ensure it implements all requirements RSA 200-C and implement a program to provide telecommunication equipment and subsidies for personal care services and adopt corresponding administrative rules. If NHVR determines the programs are not needed, it should petition the Legislature to amend this statute.				x	2021 Omnibus Bill – Repealed 10/9/2021

Observation 40 Update Policy and Procedures

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management improve policies and procedures by:					
formally updating the <i>Policy Manual</i> with all policies which govern the provision of rehabilitation services;				x	Policies and procedures updated 9/2022
ensuring all existing policies, procedures, guidance, and practices which do not govern the provision of rehabilitation services are converted into more manageable documentation that is comprehensive, centrally located, and easily accessible for personnel;				x	All policies and procedures are on our intranet with other valuable resources

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only issuing additional guidance to personnel for clarifying policies, procedures, and practices which have already been appropriately adopted and formalized;				x	
ensuring policies and procedures are subjected to the required public comment process and input from the State Rehabilitation Council;				x	This is the process for promulgating policy
transmitting all policies, procedures, guidance, and written practices provided to or used by rehabilitation personnel to the State Rehabilitation Council;				x	Process for promulgating policy
incorporating a periodic review process to ensure internal controls remain relevant;				x	3-year review included in policy process
developing formal communication processes in policy to ensure directives are issued and retained efficiently and effectively;				x	Policy Transmittal form developed
complying with federal requirements by documenting interpretations of federal law, regulations, and guidelines; and				x	
implementing policies and procedures consistently and objectively.				x	

Observation 41 Develop And Adopt Standardized Waivers

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management develop and adopt, in administrative rules, a consistent and standardized process for customers to request a waiver from requirements imposed by NHVR. The process should include:					
an application form for customers to formally petition for a waiver;				x	Waiver policy completed
requirements for how waiver requests should be documented, including what records should be retained in the customer's files, the outcome of the waiver request, and who reviewed the request;				x	Waiver policy completed
clear and specific criteria for circumstances which may warrant a waiver; and				x	Waiver policy completed
requirements to demonstrate criteria was applied consistently and approved by management.				x	Waiver policy completed
We also recommend better integrating the FNA process into the waiver process when considering waivers associated with customer costs.				x	Waiver policy completed

Observation 42 Review Signature Authority Structure

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management reevaluate its signature authority structure and review process by conducting a formal assessment of responsibilities delegated to counselors and RLs. The formal assessment should consider:					
the risks associated with increasing the proportion of activities that do not receive review;				x	Signature authority policy and procedure completed
the complexity of each delegated activity; and				x	Signature authority policy and procedure completed
opportunities to prioritize upper management's role in higher risk activities and delegate further responsibilities for lower risk activities.				x	Signature authority policy and procedure completed

Observation 43 Clarify Counselor Performance Expectations

We recommend NHVR management improve compliance with counselor education requirements by:	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status

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reviewing whether current educational requirements are appropriate, especially given NHVR’s long-standing practice of hiring candidates with bachelor’s degrees;				x	Personnel standard and HR certification
ensuring its educational requirements are met by all counselors upon hire; and				x	HR certification
ensuring any requirements to obtain a graduate degree in order to retain employment or be promoted is monitored and enforced.				x	Personnel standards-seeking reclassification
We recommend NHVR management improve caseload management and performance measurement by:					
developing, implementing, and refining objective, quantifiable performance expectations, and acceptable ranges of performance that are clearly linked to NHVR goals and objectives and clearly communicated to staff;				x	Performance metrics and expectations completed 2/2023
developing a measure of case complexity and use that information to more appropriately allocate caseloads across counselors;				x	Quality assurance plan monitoring
routinely measuring staff performance against expectations and analyzing information to identify trends, potential issues with performance expectations, and deviations from acceptable performance levels; and				x	Quality assurance plan monitoring
developing, implementing, and refining systems to identify staff noncompliance with federal law, federal regulations, rules, policies, procedures, and other performance expectations and address noncompliance in a timely and equitable manner.				x	Quality assurance plan monitoring

Observation 44 Develop A Strategic Training Program

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management develop a strategic training program by linking training efforts to agency goals, assessing training and staff needs to allocate resources effectively, and establishing processes to utilize performance and other data to proactively enhance ongoing training and development efforts. As part of a strategic training plan, NHVR should assess whether having one part-time training position is adequate for all staff training needs.				x	In-service training plan completed
We also recommend NHVR management develop training policies and procedures, incorporate federally required training activities into the <i>State Plan</i> , and establish periodic evaluation processes to ensure training materials remain relevant and adequate.				x	Quality assurance plan monitoring

Observation 45 Ensure Data Are Accurate And Reliable

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR develop a comprehensive data governance strategy that includes:			Backup		
developing organizational objectives, determining the data elements needed to support these objectives, and aligning them to the data collected in the information system;				x	Contracted with CAI to assess and assist with security and data governance plan Quality assurance plan completed
developing policies, procedures, and training that communicate a commitment to quality information and data needs and priorities of NHVR;and			x		Contracted with CAI to assess and assist with security and data governance plan
fully developing procedures to improve data quality for both regulatory compliance and other key organizational objectives.			x		Contracted with CAI to assess and assist with security and data governance plan

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Observation 46 Improve Records Management

	Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved	Current Status
We recommend NHVR management continue its efforts to transition customer records to a comprehensive electronic records system. Until the transition occurs, NHVR should develop policies and procedures providing guidance on what records are required to be electronically uploaded and set standards defining a complete file.				x	Fully electronic case management
We also recommend NHVR management develop policies and procedures to address:					
securing customer files, tracking file movement outside of State offices, and ensuring staff oversight of files;				x	Confidentiality policy /fully electronic records.
routinely reviewing files for misfiled documents, remedying issues found, and ensuring confidential information is not disclosed when an external party is seeking to access NHVR files; and				x	Quality assurance plan monitoring
appropriately limiting access to third-party records contained in NHVR files when requested by customers.				x	Confidentiality policy

Status Legend Status	
Unresolved	No Activity/No Progress
Partially Resolved	Some Activity but Major Activities Not Completed
Substantially Resolved	All Activity but Quality Assurance Monitoring is Completed
Fully Resolved	All Activities Completed