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HUMAN RIGHTS AUTHORITY - PEORIA REGION
REPORT OF FINDINGS

Case #16-090-9021
ResCare

INTRODUCTION

The Human Rights Authority (HRA) opened an investigation after receiving complaints of possible rights violations involving services at ResCare. The allegations were as follows:

1. Inadequate financial procedures for residents, including lack of access to finances.

If found substantiated, the allegations would violate the Community-Integrated Living Arrangements Licensure and Certification Act (210 ILCS 135) and the Mental Health and Developmental Disabilities Code (405 ILCS 5/2). The Peoria ResCare office has 6 homes in Peoria and Pekin and has 22 residents along with 44 staff members including management and nursing.

Complaint Statement

The complaint states that residents are not able to access their money. A resident has paychecks from the day training program that she is unable to cash because she does not have an ID and the checks are stored in a locked medication room. The complaint states a staff member told a guardian that it takes 2 weeks for residents to be able to access money because everything is processed at the Tilton office because they are unable to print checks in the Peoria office. When a guardian requested that bank accounts be opened for residents so they can easily access their finances, they were told that it could not be done. A second staff member stated that the Peoria office was able to print out checks since last year but only one staff member had the knowledge to print checks. Also the staff member explained that they can overnight check requests to wards and they receive them in a couple of days. When asked how residents cash checks if they do not have IDs, the staff member said that checks are actually made out to the Qualified Intellectual Disabilities Professionals (QIDP) and not to the resident. The allegations state that when asked about assurance that the QIDPs did not cash a check and keep the money, it was said that there is nothing in place to assure that.

It was also stated that if a resident wants to go out to eat or on an outing, and they have not requested the money in advance, it can be put on the corporate credit card. With that, the

guardian allegedly has printouts for two wards showing no money deducted from their accounts as far back as 10/15, indicating no reimbursements.

Interview with staff (5/19/2016)

The staff began by discussing the resident's checks and admitted that recipients had little or no control over money and no way to access the money. They stated that there was mismanagement with money and not enough communication with the main office in Tilton where the money is managed. The checks were printed with staff and recipient's names and there were stacks of checks in the former administrator's office. They said that it is not customary to have two names on a check. The facility does have a process for watching residents' money. Previously there was a request sent to the business manager in the main office and the checks were sent to Peoria. They said the process may have taken days or weeks. When the problem was realized a system was put in place. They discovered checks as far back as the summer of 2015. They stated money was not taken out for the cost of care. They said that residents did not have identification cards and some still do not have identification cards. They put a process in place in which the recipients did not need to have identification. Now the individuals' names are on the account and through a specific bank; the house manager can verify the resident and does not need identification. This is for the entire account, not just for social security income. The recipients also have signature cards to verify who they are. The resident and staff members both have their names on an identification card.

They said that the changes have been established for approximately one month. They now have a printer only for checks. If residents want money, they inform staff and they fill out the request. The money has to be approved by a guardian. Anything over \$100 needs approved by the Executive Director. The request gets scanned into the RFMS (Resident Fund Management System). After all approvals they are scanned. Quarterly statements are printed through the RFMS. If the request is in by 9am, it's usually available by 2pm and after that the requests are taken care of the next day. They are able to print checks and the checks then go to the bank. They stated that the vocational checks go to the bank and one of the recipient's discussed in the interview has checks that are so small they are sent to the business manager and then they are deposited. The Peoria office was holding them all together and they were just sitting there. They did not know what to do before. Now, if they get the checks, they send them to the business manager and have them deposited. Some people receive larger checks and they did not have a bank to go to, but now they can go to a specific bank.

Staff explained that each person has their own account in the RFMS system but staff were not sure if the RFMS money was being held in an actual bank. RFMS is a fund managing system and keeps track of their money. They stated that cashing smaller checks can be deposited into the RFMS account but you can also go to the specific bank to cash checks. More substantial money can still go into RFMS and they have choices as to what they do. Someone that does not have a guardian just goes to the bank, cashes the check and keeps the money. The bank does not actually have accounts for people, they just cash checks. Social Security checks are treated the same. The resident receives \$50 and then the rest is for the cost of service. The \$50 is put into the RFMS account. They were unsure as to whether the RFMS account was a facility account or "through the back." The residents can only accumulate two thousand dollars through the system. Staff did not know if the residents were receiving interest income. If the resident wants money

in his/her packet they go to the bank and if they want it in an account, they send it to the main office.

Staff said that money is not kept at the CILA location. For urgent situations, they have purchase cards. The purchase cards are credit cards. Staff would take them to lunch, use the card which is reimbursed from their account. Residents can also plan ahead of time and go through the process. If they receive the receipt and notification they go through the process of obtaining money. The business manager receives statements from all those cards. For anything over \$25 they notify the executive director. It could have been the case that the money was not being reimbursed and the residents could not have been charged but they believe that would have been caught. The checks were not being made out to the QIDP but rather to a staff person or the resident. The administrators saw this process and thought it looked like financial exploitation. They do not know how that process worked and it was being done for convenience. From what they saw, they do not think money was taken because checks were not cashed. They took all the checks back to the business manager. The old checks never left the account; they were still in the account. The day training checks were put in the accounts and it did not lead to any overages on the two-thousand-dollar limit. Staff also stated that all the auditing is done by the business manager and she can print a quarterly report at any time.

FINDINGS

The HRA reviewed resident records and facility policy that pertain to the allegations in this case. With an adequate release, the HRA received records for three different residents receiving services at ResCare.

Complaint #1 – Inadequate financial procedures for residents, including lack of access to finances.

Records for resident #1

The HRA was provided a document titled “Request for Client Funds” for resident 1 dated 4/1/2016 and the form states that the funds were needed “ASAP” in the amount of \$100 to pay a phone bill. The form reads “Please send in cash. [Resident] does not have an ID to cash a check.” The HRA reviewed a daily progress note dated 4/14/2016 which read that the resident asked to “go pay her phone bill and staff agreed.” The HRA reviewed another progress note dated 5/2/2016 which stated that the resident went with the staff to try and cash a check but “the place wouldn’t cash it” which started a behavior with the individual. There is a 4/12/2016 request for client funds for \$25 and the money was for activities in the community. There was another request for \$500 on 5/10/2016 for a summer wardrobe and tennis shoes that was approved by the guardian.

The HRA also reviewed an “RFMS Check Request Form” dated 10/19/2015 for clothing, room décor, and personal items and the amount was \$1000. The Payee of the check lists the resident or the program manager. On 4/12/2016 there was an “RFMS Check Request Form” amounting to \$25 for the resident to go on outings.

The HRA reviewed part of a 2/2016 program plan which stated that the resident had a goal of improving financial independence and the objective was for the resident to track spending her money using a ledger. This objective goal has a date of 7/31/2015. The methodology states that staff will ask the resident if she is ready to balance her account and she

will grab the needed materials to complete the goal which is the practice ledger, receipts and leftover money. Staff will walk the resident through the steps and provide needed assistance to balance the ledger. The HRA also reviewed part of an individual service plan which states "ResCare is payee of [Resident's] SSI checks and helps [Resident] manage her money as [Resident] is not capable of managing her own accounts." The plan also reads "[Resident's] money is kept in a secure account managed by ResCare. Should [Resident] need money for outings or spending cash, staff assist [Resident] in getting her money and budgeting how much money she spends. [Resident] is on a money and self-medication program to increase her independence in these areas." The HRA reviewed another program plan on 3/2016 in which the goal is to increase community independence and the objective is to plan an outing of her choice weekly. Part of the methodology of this plan is budgeting money for the outing.

A "Monthly Q Note" dated March 2016 reads that one of the outings the resident went on was to the bank to cash her check. The HRA also reviewed a progress note dated 2/3/2016 that reads "She talked to me about how she will be upset at the Program Director if she can't go out for her bday as she requested a while ago. I explained to her they have to wait for her personal money to come in."

The HRA reviewed an outing log for 5/2016 which indicates the resident went on 15 outings between 4/1/2016 and 4/24/2016. Some of the outings involved walking or being transported but on one occasion there was an item purchased and on another it reads "got ice cream/own money." There were other outings with opportunities to spend money, such as a trip to Walmart, a trip to a fast food restaurant and a trip to the cell phone store. The HRA reviewed another community outing log for the resident for February where the resident went on 8 outings. No outing stated that the resident spent money but the resident did go to stores during the month. Another community outing form for May 2016, documents when the resident went to a location where money could be spent but did not indicate that money was spent. The HRA was not provided any other outing forms for the individual.

The HRA reviewed a resident account family member statement that ranged from 8/8/2015 until 7/1/2016. On 8/18/2015, two SSI checks were credited to the account, one for \$2,198.31 and the other for \$3,702.50. On 9/8/2015, there was a charge with the description "8/15" but the charge was the same price as other care cost charges. On 10/14/2015 there were two other SSI checks deposited into the account and then on 11/3/2015 the care cost for April, May, June and July were all taken out of the account. Additionally on 11/2/2015 there was \$1000 taken out for "CLTHING/DECOR/PER ITM" and on 12/21/2015 there was \$500 taken out for "CLTHES/XMASGIFTS/SPPY." On 1/14/2016 \$1000 was taken out of the account with the description of "Unused funds" and the balance still stayed above \$2000 for the rest of the time. On 1/22/2016 the January care cost was taken from the account, but the on 3/8 and 3/16 the care cost was taken out for February and March. The HRA reviewed that on 2/5/2016 \$35 was removed for dining and skating and then on 3/4/2016 \$500 was taken out for personal items. On 4/22/2016 there was \$25 taken out for an outing; on 5/12/2016 there was \$500 taken out for clothes; and on 6/1/2016 \$70 was taken out for a phone. Also the May and June care cost was deducted in June. The HRA saw no money reimbursed from the account to the facility credit card. The HRA saw 4 occasions in which the payee for money deducted from the account was listed as the resident or a staff member.

Records for resident #2

The HRA reviewed a community outing log for resident #2 and there is no mention of spending money but, like resident #1, the individual went to places where money can be spent like fast food establishments, dollar stores and grocery stores. The log shows the individual went on 14 outings between 2/1/2016 through 3/25/2016. Another one for 2/17/2016 through 2/24/2016 is very similar but there is an additional calendar that indicates the resident went clothes shopping, bath and body shopping, the zoo, a movie, out for ice cream and also another instance of clothes shopping. The HRA saw a data sheet for "Improving Community Awareness" where it appeared the resident did not go on outings or only went on outings that were van rides or times where money was not needed. There was another data sheet for "Improving my Financial Awareness" which was not dated and there were only 3 times on a sheet with 29 entries where the resident had 75 cents to use for the goal. The rest of the entries read "No Money" and one has a line through the entry. The HRA was provided sections of a program plan with no date that indicates that the individual wants to increase their community involvement and then another dealing with improving financial awareness that deals with matching coins to their corresponding picture. The HRA was provided the plan from March 2016 that had the same community involvement goals and out of 26 logged occasions there were 17 times she did not go on outings. The financial awareness goal indicated that the individual often reviewed the coins but sometimes refused. The HRA was also provided other months indicating that the resident participated in community involvement and those were February 2016 and January 2016 (which had no log and only read "100% met"). The HRA was provided the log for June but it consists mostly of lines with some initials but no real indication that anything had been done. Also, there is no indication of the year. There was a "Review of Formal Programs" sheet provided which has zeroes, zero percent and ND (no data) marked for the months of July through November. The objective is that the resident "will identify the correct value of each coin" by 6/30/2015 but there is no actual date on the form. The comments read "Staff claimed that they did not know the data sheets were for the month of November and thusly did not track data. Staff has been retrained on how to properly run the programs and track data."

The HRA reviewed a progress note on 7/7/2015 where the resident counted money with a staff member. Another progress note on 12/13/2015 reads that the resident "... did not get a perm she had \$3.75 'lent' out and her money receipts are in the lock box." The HRA was provided an operating petty cash form for February 2015 which did indicate that the resident was provided money from a petty cash fund that began with a balance of \$50 and they are for items such as fast food and going to the dollar store.

The HRA reviewed the resident statement for 7/3/2015 until 7/1/2015. On 7/3/2015 there were 4 social security checks deposited into the resident's account for May, June, and July and then one was for "INS." On 8/13/2015 there were another 3 social security checks deposited and on 10/14/2015 there were two more. Both the September and October care cost was paid in October and the December care cost was paid in January. Also, on 1/22/2015 the September and October 2014 care cost was deducted from the account as well as the January 2016 care cost. Both the February and March care cost were deducted in March, the April care cost was deducted in May and the May and June care cost were deducted in June. There were two occasions in the statement when money from clothes could be deducted from the account and the payee is the resident or the program administrator. For two other occasions, money was taken out and the resident was the only payee. The only examples of money being taken out for the individual was for clothing on 9/18/2015 for \$300, 3/4/2016 for \$250, 4/22/2016 for \$150 and

5/12/2016 for \$500. There were two dates when the only description for a debit was another date, 7/30/2015 which the description was "6/15" and the other was 9/8/2015 and that date was "8/15." The money withdrawn from the second date looked to be the same rate as care cost. Also, throughout the statement the resident's money exceeded \$2000 and the HRA saw no signs of reimbursement on the facility credit card.

The HRA reviewed another progress note dated 3/31/2015, between 5:30am and 8:30am which reads "... It was told to me by staff that there was a fire around 1am this morning in the outlet to the left of the tv in the living room. Due to it not being reported, I called the on call and was told someone would be there today to check it out." The same passage also reads "I came downstairs and staff asked me to check the thermostat due to it being chilly in the house. When I checked it said 'change filter.' I went downstairs to check the filter and nobody ever put the new filter in when [staff] bought them. They were just sat at the bottom of the stairs."

Records for resident #3

The resident reviewed in this section is the one involved in the complaint. The HRA reviewed a progress note for the 3rd resident which reads that they went to the circus and "When we got ready to go, she noticed a stuffed tiger she wanted but explained to her that it was \$25 and we could not get it." Another client progress note for 11/14/14 reads "I picked [Resident] up from Woodfern the other clients go to cash their checks today and [Resident] was a little upset she didn't have money." Another progress note dated 2/11/2015 stated that the resident counted and recorded her money and locked it in a lock box and another on 2/20/2015 stated the resident went to a grocery store to cash her check; on 3/10/2015 there was another instance when the individual was taken to the grocery store to cash her check. Another instance on 3/11/2015 states that the resident wanted to go to the dollar store the next day to spend her link money and on 3/19/2015 there is another instance when she cashed her check at a grocery store. No money was requested with any of the outings. There was a progress note dated 11/14/2015 which states that the staff member writing the passage bought the resident a sandwich from a fast food restaurant. It was never indicated what money was used for the sandwich.

The HRA received a resident statement landscape for the resident from the RFMS system. The dates covered on the statement are 7/1/2015 until 6/10/2016. According to the statement, the resident had the social security check for May credited to the account on 7/3/2015 and another one on 7/22/2015 and each check was for \$741.00. There were also two checks that were called SSI for June and July; both were credited on 7/3/2015. There is also a debit for \$693.00 on 7/30/2015 that was only called "6/15." On 8/15/2015 there was a debit of 703.00 and the description is "08/15" but that is the same price as later care costs. It appears that there was care cost taken from the account on 10/7/2015 and then 10/28/2015 for September and October. The December care cost and January care cost are both taken out in January, and the February and March care costs are taken out on 3/8/2016 and 3/16/2016. The April care cost is taken out in May and the May care cost is deducted in June.

On 8/18/2015 there are two work earnings checks deposited and on 8/27/2015 there were five work earnings checks deposited. The next time work earnings checks were deposited was on 12/4/2015 and there were 5 deposited. The next work earnings checks deposited were on 5/17/2016. The HRA also saw no indication that money was being taken from the account to reimburse credit cards. The HRA only saw three occasions when money was removed for personal reasons; one was on 11/2/2015 and money was deducted for "Clthng/tablet" for \$750 and the payee listed on the document was the resident or the facility administrator. On

4/22/2016 \$25 was withdrawn for an "Outing" and \$300 was withdrawn for "Personal Spending." There was no payee indicated for that money withdrawn. The HRA was also presented the petty cash ledgers for the resident for 1/1/2015 through 1/31/2015 and then a second one with the dates of 2/17/2015 until 2/23/2015. These represented some money the resident used to buy snacks at work, buy fast food, and go to the dollar general; the resident used the money 11 times during that timeframe.

The HRA was also provided a progress report from the resident's vocational program which indicated that the resident brought \$1.78 into the program and spent \$1 on snacks. The HRA was also provided outing request forms. One form requested a van ride to a fast food establishment dated 1/18/2015, one was to church on 7/26/2015, and one was to a grocery store to cash a check, the library and the dollar store.

The HRA also reviewed a daily communication log dated 2/6/2015 which reads that they picked up checks but put the checks in a lock box and there is an additional note that read "doesn't have SSN#." Another daily communication log from the same day but for third shift indicated that the house did a "money count" and logged the counts for the residents, but in the count, resident #3 had only a dash and no money. Another daily communication log on 2/12/2015 stated that they counted and logged the resident's money and on the next day they also completed money sheets. The HRA reviewed another client progress note dated 1/12/2015 that reads that the resident had to wash her clothes and clean urine out of her bed and that "she's been laying in a nasty bed for a couple days."

The HRA reviewed the facility "Individual Finance Management" policy which reads that "Community Alternatives Illinois conforms to all ResCare and Illinois Department of Human Services requirements related to the the management of funds for the individuals that we support" and "ResCare approved accounting software is used to record all financial transactions related to individual accounts." The policy states that "Individual funds are maintained in a joint trust fund account. Separate electronic financial ledgers are maintained for each individual which provides detail of all deposits and withdrawals, and indicates the current balance of each individual's funds. The Trust Fund Account is reconciled monthly by the Business Office Manager or designee." Policy goes on to state that a quarterly statement is provided to the individual or legal representative and that quality assurance audits are conducted according to policy. The practices also state that "Consent and approval is obtained from the individual and/or legal representative of each consumer regarding the use of his or her respective funds." This is the only area of the policy regarding accounts. There is another section of the policy which deals with cash procedures. This states that personal funds are available in each group home location in personal money boxes. No consumer cash mixes together and when there is a purchase, they obtain a receipt and record the purchase in the "Client Trust Fund Petty Cash Sheet." The policy states that they make "every attempt" to obtain a receipt and it includes the vendor's name. The policy also states that consumers are not allowed to borrow from each other's petty cash funds and the money boxes are to be reconciled by staff and replenished." The facility provided no further policy regarding funds to the HRA and this specific policy made no mention of cashing checks, printing checks, signature cards for identification or using credit cards and reimbursing the cards.

The Community-Integrated Living Arrangements Licensure and Certification Act reads "(a) To protect a recipient's funds, a service provider: (1) May accept funds from a recipient for safekeeping and management if the service provider receives written authorization from the

recipient or the recipient's guardian. (2) Shall maintain a written record of all financial arrangements and transactions involving each individual recipient's funds and shall allow each recipient, or the recipient's guardian, access to that written record. (3) Shall provide, in order of priority, each recipient, or the recipient's guardian, if any, or the recipient's immediate family member, if any, with a written itemized statement of all financial transactions involving the recipient's funds or a copy of the recipient's checking or savings account register for the period. This information shall be provided at least quarterly ... (5) Shall keep any funds received from a recipient in an account separate from the service provider's funds for safekeeping, and shall not withdraw all or any part of the recipient's funds unless the service provider is (i) returning the funds to the recipient upon the request of the recipient or any other person entitled to make the request, (ii) paying the recipient his or her allowance, or (iii) making any other payment authorized by the recipient or any other person entitled to make that authorization. (6) Shall deposit any funds received from a recipient in excess of \$100 in an interest-bearing account insured by agencies of, or corporations chartered by, the State or the federal government. The account shall be in a form that clearly indicates that the service provider has only a fiduciary interest in the funds and that any interest earned on funds in the account shall accrue to the recipient. The service provider may keep up to \$100 of a recipient's funds in a non-interest-bearing account or petty cash fund, to be readily available for the recipient's current expenditures ... (8) Shall (i) place any monthly allowance that a recipient is entitled to in the recipient's personal account or give the monthly allowance directly to the recipient, unless the service provider has written authorization from the recipient, the recipient's guardian, or the recipient's parent if the recipient is a minor, to handle the monthly allowance differently, (ii) take all steps necessary to ensure that a monthly allowance that is placed in a recipient's personal account is used exclusively by the recipient or for the recipient's benefit, and (iii) require any person other than the recipient who withdraws funds from the recipient's personal account that constitute any portion of the recipient's monthly allowance to execute an affidavit that the funds will be used exclusively for the benefit of the recipient" (210 ILCS 135/9.1). The Mental Health and Developmental Disabilities Code reads "A recipient of services may use his money as he chooses, unless he is a minor or prohibited from doing so under a court guardianship order. A recipient may deposit or cause to be deposited money in his name with a service provider or financial institution with the approval of the provider or financial institution. Money deposited with a service provider shall not be retained by the service provider. Any earnings attributable to a recipient's money shall accrue to him" (405 ILCS 5/2-105).

Complaint #1 – Conclusion

The facility staff admitted in the interview that the recipients had little to no control over money and had no way to access the money. In reviewing the documentation, the residents did have some access to money but also there was an instance logged when resident #1 needed cash sent ASAP to pay for a phone bill and she could not cash a check because she did not have identification. There was another instance when the same resident was nervous that she would not receive money to go out for her birthday in time and was told that she must wait for her personal money. That same resident went to a location where they would not cash her check, although they did not state why. Additionally, resident #3 has documentation that she was upset because she did not have any money but there was also documentation that the resident was able to go and cash some check at a store. These would be violations of the Mental Health and

Developmental Disabilities Code due to the residents not being allowed to use their money (405 ILCS 5/2-105). The resident's statement also shows that work earnings checks were cashed into the account in August 2015 and again in December 2015 and then not again until May 2016. There is also a situation when a resident wanted a \$25 dollar item from an event but was told he/she could not have the item and gave no real reason as to why.

The facility financial process lacks any of the information described in the staff interview regarding cashing checks, financial systems, and reimbursing the facility credit cards. There is no documentation about how long it takes for residents to receive their money and no indication as to what happens with checks whatsoever. The Community-Integrated Living Arrangements Licensure Act (210 ILCS 135/9.1) states that the facility shall maintain a written record of all financial arrangements and transactions but the HRA saw no indication that reimbursement is occurring. The Act also states that they shall keep any funds received from a recipient in a separate account for safekeeping and shall only withdraw money under certain listed circumstances but staff indicated this was not being done with checks that were left in the office. The staff was unsure about interest bearing accounts and this was not mentioned in the policy but it is a requirement in the Act (210 ILCS 135/9.1). Although there does appear to be instances when the residents use money, the HRA was not provided any direct documentation to prove that residents have complete access to their finances and were also told that the residents did not have access via staff. Because of this, the HRA finds the complaints **substantiated** and the HRA makes the following **recommendations**:

- The facility update all policy and practices to comply with the Community-Integrated Living Arrangements Licensure Act (210 ILCS 135/9.1) and the Mental Health and Developmental Disabilities Code (405 ILCS 5/2-105) and assure that residents are awarded complete, unimpeded and timely access to all of their finances and ensure that work checks are deposited in a timely manner so that recipient can have timely access to their deserved earnings or interest on the funds deposited. Provide the HRA evidence that this occurred. The HRA would also like to state that the confusion as to how the process works that was displayed during the interview process and the discrepancy between the explanation of procedures and the actual policy is alarming. The facility staff need to be informed as to what is going on with residents' funds and their role in facilitating resident access to those funds.

The HRA also makes the following **suggestions**:

- During the conversation, it was stated that the Director must approve any spending over \$100 but the HRA is concerned that this may restrict the individual or conflict with the resident's guardian. The HRA **suggests** the facility discontinue this process but change it to the Director being made aware of purchases over \$100.
- The HRA **strongly suggests** that the residents receive IDs as soon as possible. These are not only needed for cashing checks but also for safety reasons, such as identification if the resident is lost or identification by the authorities.
- For resident #1, the program plan date is February 2016 but the date of one of the goals is July 2015. The HRA **suggests** the facility review goal dates to assure they are being tracked accurately and updated so they are current with the program plan.
- In reviewing the resident's funds, the HRA saw multiple occasions when the resident's

funds exceeded \$2000 dollars. The HRA **suggests** that the facility track all resident funds to assure that they do not exceed the amount of money that they should have in the account. Additionally, Review the practice of delaying the cost of care postings and the potential impact on accruing more than the \$2000 allowed to still be eligible for public benefits.

- The HRA reviewed \$500 dollars was taken out of resident #1 account for “Personal Reasons.” The HRA believes this is not a descriptive reason for needing that amount of money. The HRA **strongly suggests** the facility use descriptive terms for what money was used on, to assure properly tracking the money.
- In resident #2 progress notes, it indicates that there was a fire that was not reported in the house and additionally a furnace filter was purchased but not installed, causing the house to be cold. The HRA **strongly suggests** that staff report all maintenance issues and those steps are taken to maintain each house.
- In reviewing resident #2 record, there is a note stating that staff did not have data sheets so they did not track progress for the month of November but the HRA’s review indicated this could have even been longer. It states that staff was retrained but HRA **suggests** that there is some form of quality control that monitors tracking to assure that it is occurring.
- Review whether or not to enlist a locally based community bank for resident accounts to assure the accrual of interest, resident access to funds and enhanced resident interaction with community based resources.
- Ensure and document adequate checks and balances when staff are assisting residents with purchases, withdrawals, check-cashing and money management.