

DEBRA K. DAVENPORT, CPA AUDITOR GENERAL

WILLIAM THOMSON DEPUTY AUDITOR GENERAL

April 12, 2004

The Honorable John Huppenthal, Chair Joint Legislative Audit Committee

The Honorable Robert Blendu, Vice Chair Joint Legislative Audit Committee

Dear Representative Huppenthal and Senator Blendu:

Our Office has recently completed a 12-month followup of the Department of Health Services—Health Start Program regarding the implementation status of 9 audit recommendations (including sub-parts of the recommendations) presented in the performance audit report released in December 2002 (Auditor General Report No. 02-11). As the attached grid indicates:

- 7 of the 9 recommendations have been implemented; and
- 2 recommendations are no longer applicable.

Since all of the applicable recommendations have been implemented, and unless otherwise directed by the Joint Legislative Audit Committee, this report concludes our follow-up work on the Department of Health Services —Health Start Program.

Sincerely,

Debbie Davenport Auditor General

DD/jw Attachment

cc: Ms. Catherine R. Eden, Ph.D., Director Department of Health Services

Health Start Program 12-Month Follow-Up Report To Auditor General Report No. 02-11

FINDING I: Information on program goals

Recommendation	Status of Implementing Recommendation	Explanation for Recommendations That Have Not Been Implemented
1. The Department should collect complete and reliable data and report progress on its five statutory goals.	Implemented at 12 months.	

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FINDING II: Program administration needs improvement

	Recommendation	Status of Implementing Recommendation	Explanation for Recommendations That Have Not Been Implemented
1.	To help ensure the program's limited resources are being used for women most in need of services, the Department should require providers to use the risk assessment tool to help determine program eligibility.	Implemented at 6 months	
2.	The Department should provide additional instructions to contracted service providers on the purpose of the risk assessment tool and how to use it to measure program eligibility.	Implemented at 6 months	
3.	The Department should ensure that all site visits are conducted annually as required.	Implemented at 6 months	
4.	The Department should develop a process for reviewing the quality of providers' program data during its site visits.	Not Applicable ¹	

The Department has centralized the data entry function to its Office of Women and Children's Health effective February 14, 2003, so there is no longer a need to check the providers' data during site visits.

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FINDING II: Program administration needs improvement (Concl'd)

	Recommendation	Status of Implementing Recommendation	Explanation for Recommendations That Have Not Been Implemented
5. Th	e Department should:		
a.	Strengthen policies and procedures guiding postpartum enrollment.	Implemented at 6 months	
b.	Ensure data quality and entry, both by continuing its efforts to develop data quality assurance standards and by developing additional procedures for how to enter postpartum clients.	Implemented at 12 months.	
C.	Develop a policy for what constitutes appropriate in-kind contributions and require providers to update their budgets and in-kind contribution estimates as award amounts change.	Not Applicable ¹	

¹ The Department eliminated the in-kind requirement for providers beginning with fiscal year 2004 contracts.

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FINDING III: Information on program participants and services

Recommendation	Status of Implementing Recommendation	Explanation for Recommendations That Have Not Been Implemented
1. The Department should either require providers to use the <i>Arizona Family Resource Guide</i> or to develop a Department-approved substitute.		