2011 YEAR-END COUNTY COMPLIANCE PROGRESS REPORT

BACKGROUND.

Federal and State funding agreements have evolved in the last decade to expand accountability for fraud and abuse, causing local governments to look more closely at regulatory compliance and to expect the same from its vendors and grant sub-recipients. The increased need for transparency in government operations coupled with the need to minimize vulnerability made it necessary to review current practices and develop an internal control infrastructure that helps to detect and protect against waste, fraud, and abuse.

Tompkins County has a long tradition of established policies and practices that underscore the importance of ethical standards and stewardship in governmental operations. In February 2011, the County Legislature approved the steps necessary to develop a formal compliance program, desiring a plan that integrates legal and internal compliance efforts throughout county government to mitigate risk, assure quality, and improve internal monitoring systems. The County Compliance Program was developed and successfully set in place within six months of the legislative order. The Program was formally adopted by resolution in August 2011.

YEAR AT A GLANCE.

The County Administrator appointed an eight-member County Compliance Committee to develop and guide implementation of the Program, and appointed a County Compliance Officer to ensure organizational accountability. In addition, the County engaged the services of an experienced private consulting firm to provide the needed expertise to help lessen the "guess work" and launch the project well.

Initial activities of the Committee included action plan development, designing and delivering a countywide compliance training plan, establishing policies and monitoring procedures, establishing a Compliance Program WebPage, and developing a protected communications venue for reporting of suspected improper activities.

The completed Program includes the following core components:

- Written policies and procedures
- Documented disciplinary procedures
- Training for staff and governing board(s)
- Routine identification of compliance risk areas
- System/steps for corrective action
- Whistleblower/non-retaliation protections
- Confidential reporting

Program deliverables included the following:

1. 2011 Action Plan (to guide program design and initial steps for implementation)

2. County Compliance Program Document
   http://www.tompkins-co.org/ctyadmin/documents/CompliancePlan.pdf

3. Development and adoption of an Exclusion Screening Policy (01-46) and a Whistleblower Policy (01-45)
    http://www.tompkins-co.org/ctyadmin/policy/section1.htm

4. External, toll-free, confidential "Whistleblower" HelpLine: 877-348-1396

5. Training Slide Presentation
    http://www.tompkins-co.org/employee_only/TompkinsCompliance.pdf

6. Training of all staff, County legislature, and other governing boards

7. Public WebPage
    http://www.tompkins-co.org/departments/detail.aspx?DeptID=65

KEY ACCOMPLISHMENTS.

Milestones.
A significant milestone achieved in 2011 was the creation and maintenance of a compliance program that includes all departments and looks at the County as a single entity as opposed to separate units. Prior to 2011, there were two departments (Mental Health and Public Health) that instituted internal compliance programs. *It is a major milestone to have a compliance program in place that supports the entire organization.* Local governments in general deal with a range of compliance matters that encompass various roles across the organizational structure. However, recent attention at the state and federal levels put an increased emphasis on Local Governments to now enforce and regulate various legislative requirements. This calls for assessment, monitoring, and enhanced quality controls at the local level that would not be possible without a comprehensive framework. Our compliance program, including the appointment of a County Compliance Officer and Committee, provides that framework for effective guidance and oversight countywide. This is very significant.

Actions that significantly enhanced project success.
1. Organized an inventory of current activity by individual departments (Public Health, Mental Health, and DSS) in the area of corporate compliance.
2. Retained a consultant through the New York-based Bonadio Group for the initial phases of structuring the plan, committee, and action steps to kick off this initiative in a comprehensive way.
3. Formed the County Compliance Committee, involving key staff from a variety of disciplines to develop the County-wide plan and initiate key steps for the first year plan.
4. Appointed a County Compliance Officer with previous expertise, which was helpful in getting the project on track quickly and in providing the first-round orientation/training to legislators, department heads, and other senior staff.
5. Personnel department revised the New Employee Orientation to include a thorough overview of the County Compliance Program.
6. Department heads encouraged staff in senior staff meetings and general staff meetings to be mindful of both the legal responsibilities of County Compliance and the spirit of the requirement as it pertains to waste, fraud and abuse.
7. Informal consultation with Ontario County Human Resources for information sharing, including documents and resources.
8. Ethics Advisory Board, chaired by legislator Kiefer, researched and developed the County's Whistleblower policy.

Problem(s) Resolved.
In 2010, the County Health Department was unable to immediately meet the compliance certification requirements of the State Office of the Medicaid Inspector General (OMIG). Changes in department leadership and the need to give attention to other matters related to the quality of internal operations caused a delay in meeting the OMIG requirements fully. The Office approved a six-month extension, and

with guidance from the OMIG Compliance Assessment Tool, a development plan was set in motion. The compliance plan for the Health Department mirrors the overall County Compliance Program, but also includes components specific to departmental procedures, service delivery, and third-party contracts. For example, a consultant was brought in to perform a risk assessment of Medicaid programs administered by the department. The results are currently being used to influence policy and enhance procedures. Also, health department staff and board members were trained according to OMIG guidelines. During the 2011 calendar year the Health Department was able to achieve full completion of its OMIG plan of action and OMIG compliance certification was confirmed.

ISSUES AND OPPORTUNITIES.

IT Security and Policy.
The use and continued advancement of technology-based systems and forms of communication by Tompkins County government has advanced significantly in recent years, increasing our need to focus on the development of related IT policy and security procedures to guide appropriate use of these systems. Our "Use of County Communications Systems" policy was established in 1981 and last reviewed in 2001. The policy is limited in scope and does not take into account all the ways in which we currently use technology or the inherent vulnerabilities. The County needs an IT compliance plan that focuses on identifying risks, raising awareness, and implementing best practices through sound policies and security measures.

Internal Risk Assessment.
The County Compliance Program calls for "ongoing review and monitoring" to help detect non-compliance and to identify potential risk. A routine risk assessment process also helps staff effectively integrate compliance program requirements into their daily work. To begin designing the process, the Compliance Committee has launched a survey of all County departments requesting feedback on the quality controls they have in place to identify waste and abuse, steps to ensure that controls are adequate, and areas in need of improvement. These responses will help the Compliance Committee determine if existing control measures are sufficient or if more should be done.

WHAT TO EXPECT IN 2012.

Develop an Internal Risk Assessment Protocol based on department survey results. At a minimum, the Protocol will help to:
- Create awareness of potential vulnerability and risks
- Identify who or what may be at risk (employees, clients, program outcomes, etc.)
- Recognize opportunities for improved efficiencies
- Underscore the organization's commitment to integrity and accountability
- Ensure the County Compliance Program is an integrated part of all County operations.

Assist with Developing an Approach to Implementing a County IT Security and Policy Compliance Plan that guides and monitors appropriate use of IT systems across the County organization. The Compliance Committee will work closely with the County IT Director and a (to be determined) professional services contractor to help evaluate the efficacy of current governance policies and procedures, and to develop an approach for ensuring best practice in the management of data protection, integrity, confidentiality and operational security. The 2012 budget includes funds to support this critical IT need. Throughout this process the education of personnel throughout the County organization will be paramount toward maximizing IT security awareness based on the findings and recommended policy, procedure and practice modifications. The County IT Director will be in charge of this project, but will use the Compliance Committee as a resource for policy review and for organization outreach.

Develop a Procedure for Investigating and Reporting "Whistleblower" Complaints based on current County policy and best practice. These procedures are intended to provide implementing guidelines for handling Whistleblower retaliation cases which may arise.

Design and Launch "Compliance and Ethics Week" Campaign (May 6–12), an education and outreach activity to further promote the County Compliance Program, share updates on specific issues, and recognize employee commitment.

COUNTY COMPLIANCE COMMITTEE

Paula E.F. Younger
Deputy County Administrator
County Compliance Officer
Chair, County Compliance Committee

Committee Members

Patricia Carey, Commissioner
Department of Social Services

Greg Potter, Director
Department of Information Technology Services

Betsy Doling, Compliance Officer
Department of Mental Health Services

David Squires, Director
County Finance Department

Anita Fitzpatrick, Commissioner
County Personnel

Jonathan Wood
County Attorney

Frank Kruppa, Director
County Health Department