



DEPARTMENT OF
**WORKFORCE
SERVICES**

The Road Home – Downtown Shelter

For the Period November 19, 2018 – January 10, 2019

Report No. 2019-10



State of Utah

GARY R. HERBERT
Governor

SPENCER J. COX
Lieutenant Governor

**Department of
Workforce Services**

JON S. PIERPONT
Executive Director

CASEY CAMERON
Deputy Director

GREG PARAS
Deputy Director

January 30, 2019

Mr. Jon Pierpont, Executive Director
Department of Workforce Services

Dear Mr. Pierpont:

We have completed our audit of The Road Home – Salt Lake Community Shelter and Resource Center for the period November 19, 2018 to January 10, 2019 unless otherwise stated. The scope of this audit is outlined in the procedures section of this report. The audit was conducted in accordance with the *International Standards for the Professional Practice of Internal Auditing*, issued by the Institute of Internal Auditors.

The Board and Management of The Road Home are responsible for adopting sound policies and establishing and maintaining effective internal control. Our responsibility is to conduct the audit tests considered necessary to meet the objective of the audit to reach stated conclusions. The resulting recommendations identified in the audit are presented in this report.

We recognize and appreciate the cooperation and assistance of the personnel of The Road Home during the course of our audit. Please contact me if you have any questions regarding this report.

Sincerely,

Van Christensen, CPA, CFE
Director of Internal Audit
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cc: Casey Cameron, Deputy Director
Greg Paras, Deputy Director
Division Directors
Chris Acton, President, The Road Home
Matt Minkevitch, Executive Director, The Road Home
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DEPARTMENT OF
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INTRODUCTION

The Office of the Legislative Auditor General (OLAG) issued Report No. ILR 2018-A in May 2018 identifying safety, security, and sanitation concerns at shelters operated by The Road Home (TRH). At the time of their audit, the Salt Lake Community Shelter and Resource Center (Downtown Shelter) operated by TRH was owned by Shelter the Homeless (STH) who leased the building to TRH. On October 31, 2018, STH agreed to sell and the State of Utah agreed to purchase the Downtown Shelter. On November 9, 2018, an amendment to the building lease was signed making the State of Utah TRH’s landlord.

The OLAG recommended that STH, as the landlord, “consider what standards of conduct will be required of those residing in their facilities and how to enforce those standards.” With the transfer of ownership and lease amendment, the Department of Workforce Services (Department) is now the landlord for the Downtown Shelter and assumes related responsibilities previously held by STH.

This audit was designed to determine whether recommendations made by OLAG have been implemented and whether safety, security, and sanitation conditions at the Downtown Shelter have improved. This audit does not address TRH’s contract compliance and performance, which will be reviewed in a separate audit. Because the State of Utah does not own other shelters operated by TRH, the scope of this audit only includes the Downtown Shelter. This audit only addresses activity within the shelter and does not address conditions outside of the shelter.

PROCEDURES

We performed the following procedures:

1. We evaluated TRH’s policies and procedures over safety, security, and sanitation to determine whether they are effectively designed.
2. We determined whether TRH policies and procedures have been implemented and are operating effectively by conducting 34 separate onsite observations from December 4, 2018 to January 8, 2019. These visits were conducted during all hours of the day and night and included weekends. We also reviewed security camera footage during the month of December 2018 for 144 hours and check-in procedures for 200 individuals.
3. We surveyed 28 individuals currently staying at the Downtown Shelter who have stayed at the shelter over the past eight months and asked them whether safety conditions have improved or deteriorated.
4. With the assistance of the Department of Public Safety, we conducted a guest feedback meeting in the men’s and women’s shelter areas to determine whether conditions have improved or deteriorated over the past 12 months.

5. We surveyed individuals who have worked in the Downtown Shelter over the past eight months to determine whether conditions have improved or deteriorated.
6. We reviewed the Department’s lease with TRH to determine whether expectations for standards of conduct have been clearly defined including whether safety, security, and sanitation within the Downtown Shelter meet expectations.

FINDINGS AND RECOMMENDATIONS

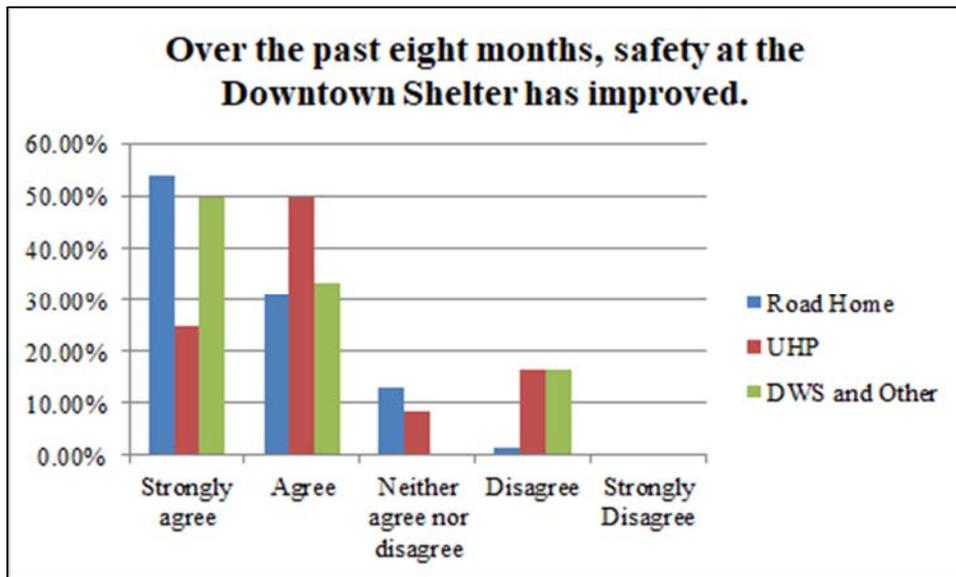
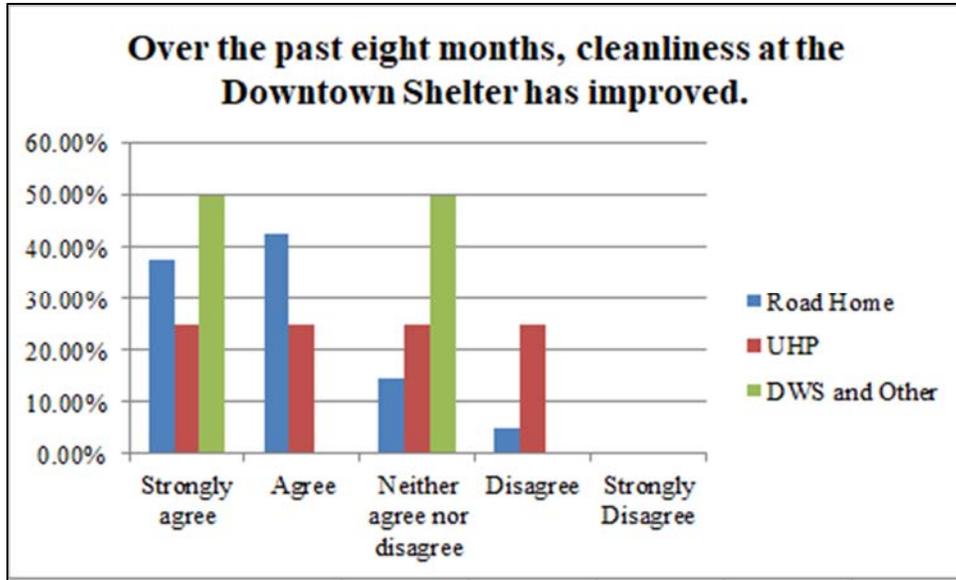
1. SAFETY, SECURITY AND SANITATION IN THE DOWNTOWN SHELTER APPEARS IMPROVED BUT STILL NEEDS PROGRESS

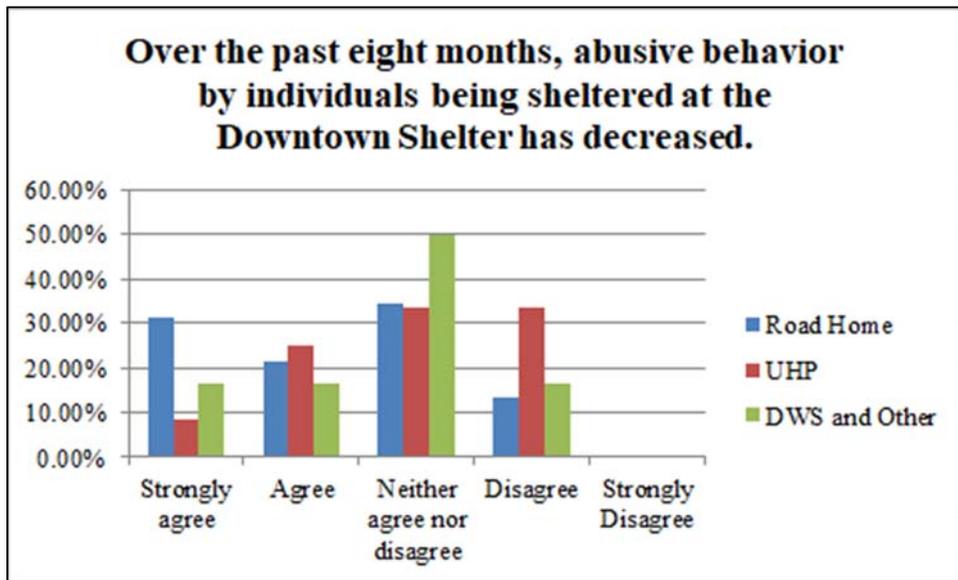
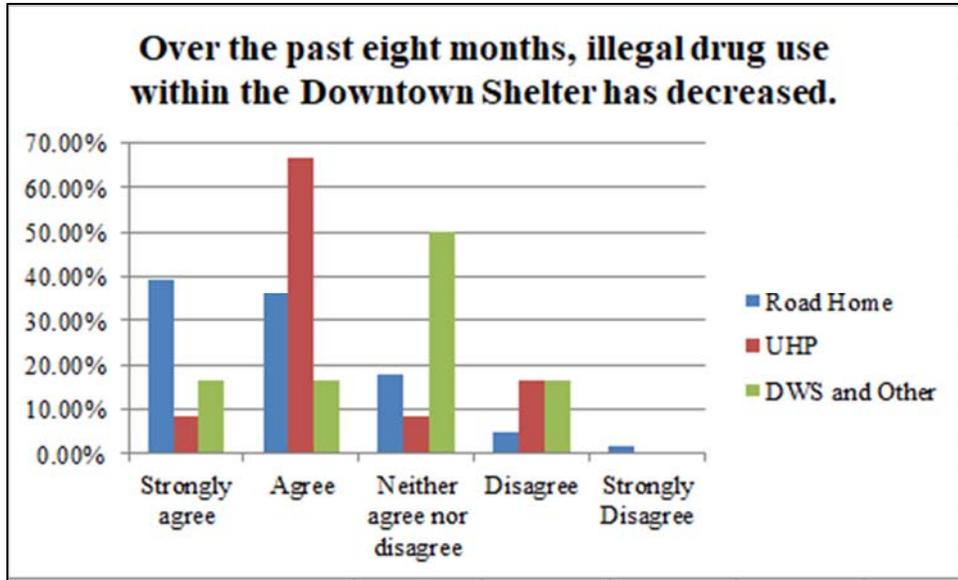
The Road Home, Kane Security, and Department of Public Safety (DPS) each prepare incident reports for certain activity that occurs within the Downtown Shelter. Incident reports identify things such as drugs/needles, alcohol/smoking, weapons, unruly behavior, medical incidents, etc. Ideally, comparing incident reports before TRH safety and security procedures were implemented and after would be the best way to measure if conditions have improved within the Downtown Shelter. However, TRH staff explained that the criteria for what to report and when has changed resulting in a greater awareness and reporting, therefore, comparisons would not necessarily indicate improvement or deterioration, but may be the result of greater staff awareness and increased reporting.

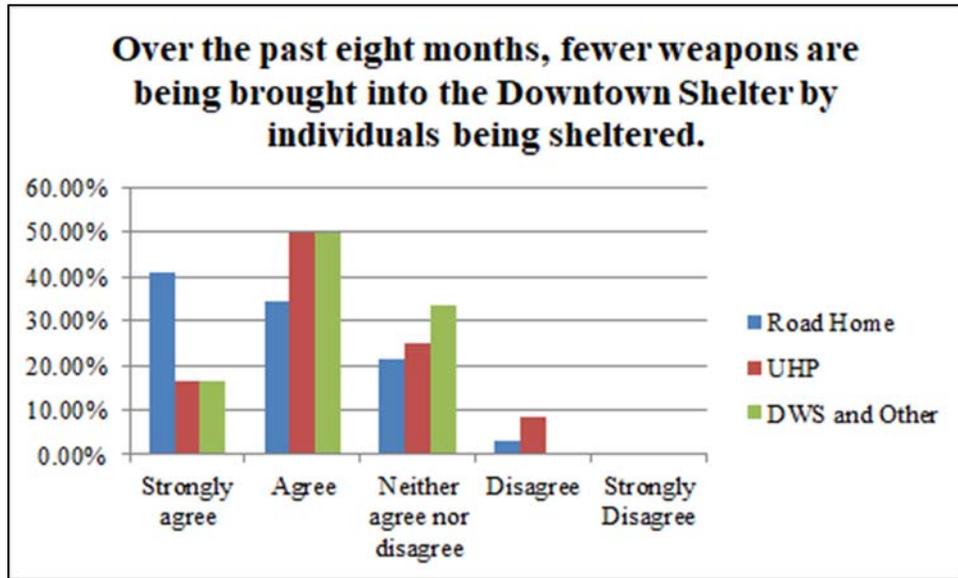
Because conclusions could not be reached using incident reports, we conducted the following surveys:

- We surveyed 28 individuals currently in the Downtown Shelter who have stayed at the shelter over the past eight months and asked them if safety conditions have improved or deteriorated. Twenty-six said conditions have improved, while two individuals indicated no improvement in conditions.
- With the assistance of the Department of Public Safety, a guest feedback meeting was held in each of the men’s and women’s shelter areas. Generally, residents reported that safety and sanitary conditions within the Downtown Shelter, including drug use, have improved over the past eight months. However, theft was still considered a significant problem.
- We also surveyed TRH (61 responded), Department of Public Safety (12 responded), and Department of Workforce Services employees and certain volunteers (6 responded) who have worked in the shelter over the past year. Kane Security officers were not included in the survey because Kane Security did not provide the requested contact information for officers. Survey results are noted below:

The Road Home – Downtown Shelter
 For the period November 19, 2018 to January 10, 2019







We also conducted 34 unannounced onsite observations in the Downtown Shelter from December 4, 2018 through January 8, 2019 on varying days and times, ensuring that observations occurred during all hours. We observed the following:

- a. Four items of drug paraphernalia.
 - o One roach (one end of a rolled-up-marijuana cigarette).
 - o One filled syringe and needle under a mattress in the men’s main dorm.
 - o One needle in the men’s restroom.
 - o One empty small plastic bag previously containing drugs as identified by the DPS K-9.
- b. Nine instances of significantly dirty conditions in the men’s restroom. For example, we observed human waste on and around toilets, clogged toilets, and excess garbage and cigarette butts on the floor.
- c. Five instances of significantly dirty conditions in the men’s dorm area consisting of mostly excess garbage.
- d. Four instances of significantly dirty conditions in the women’s crisis dorm area. For example, clogged toilets and excess garbage on the floor.
- e. One instance when a door from the men’s to women’s area was not locked.
- f. Employees not wearing puncture resistant gloves, or using flashlights or wooden dowels during bag searches.

TRH Safety and Security Procedures state that TRH staff will, “search each bag and contents utilizing provided tools, including puncture resistant gloves, flashlights, and wooden dowels, as deemed necessary and helpful for performing a thorough bag check [and] check outwear for additional items.” These searches are designed to limit drugs, weapons and other unwanted items from entering the shelter. TRH Building Cleaning Procedures require frequent cleaning at regular intervals to maintain sanitary conditions.

Our surveys and observations generally indicate that conditions have improved since the OLAG audit. However, TRH incident reports from September through November, reported 82 instances of drugs or needles and 10 weapons found in the shelter which were not identified by check-in procedures. Also, as noted in the findings below, we found a number of instances where TRH's Safety and Security Plan and policies and procedures are not being followed. Increased compliance with TRH's Safety and Security Plan could further improve conditions in the Downtown Shelter.

Recommendation:

We recommend that the TRH Board of Trustees provide appropriate oversight to ensure that management is effectively implementing the Safety and Security Plan.

Management's Response:

Bimonthly, the Board President and/or Executive Committee will review the Executive Director's progress report on the agency's execution of the security plan. The TRH Board will provide any input each month after reviewing our management team's progress and Management will follow their input and recommendations.

Responsible Individual: The Road Home Board President

Anticipated Completion Date: February 15, 2019 and monthly thereafter

2. CUSTODIANS ARE NOT REPORTING DRUG PARAPHERNALIA FOUND DURING CLEANING

While conducting onsite observations, custodians explained that they regularly find drug paraphernalia usually in discrete locations, such as under mattresses, and do not prepare an incident report due to a lack of time. Because custodians do not prepare incident reports, the amount of drug paraphernalia found in the Downtown Shelter included in monthly reports to TRH's Board of Trustees is understated. In order to accurately determine whether security procedures are effective, all prohibited items found in the Downtown Shelter should be included in incident reports.

Recommendation:

We recommend that management ensure that custodians complete incident reports for prohibited items found in the Downtown Shelter.

Management's Response:

We agree with this recommendation. The Operations Director has immediately implemented the requirement for all custodial staff to report to shelter management every instance when prohibited items are found. We have amended the custodial checklists to include this line item to make sure that custodial staff can easily document each occurrence efficiently and are amending our cleaning Procedure to reflect this

requirement. Management will be reviewing this process weekly and the information will be included in the monthly report.

Responsible Individual: Executive Director, Matt Minkevitch
Anticipated Completion Date: February 1, 2019

3. CHECK IN SCREENING PROCEDURES ARE NOT CONDUCTED AS REQUIRED IN THE SAFETY AND SECURITY PROCEDURE

We viewed security camera footage during the month of December 2018 and observed 100 women and 100 men checking into the Downtown Shelter and found that 162 check-ins did not follow at least one TRH Safety and Security Procedure. For example:

- a. 60 individuals did not empty pocket contents into bins or onto the screening table or demonstrate that their pockets were empty.
- b. 26 individuals did not remove their outerwear for inspection.
- c. 58 individuals did not have outerwear inspected.
- d. 5 individuals walked through without any inspection.
- e. 119 of 120 individuals entering the shelter with bags did not empty contents into provided bins or onto the screening table and 10 of those bags were not inspected at all.
- f. Of 47 instances when an individual set off the metal detector, Kane Security did not pat down or wand 33 of the individuals.
- g. During 83 check-ins on the men's side and 19 check-ins on the women's side, there was insufficient Kane Security or TRH staffing.

TRH Safety and Security Procedures states that:

As individuals enter the screening area, they will be asked to:

- *Place bags open on screening table*
- *If bag is full, empty bag contents into provided bins and/or onto screening table*
- *Empty pockets into provided bin,*
- *Remove outerwear*

Proceed through a walk-through metal detector

- *If deemed necessary after proceeding through the walk-through metal detector submit to personal security screening.*

The Road Home Staff will:

- *Check outerwear for additional items.*

The Safety and Security Plan also requires three Road Home staff and two Kane Security officers at the men's entrance and two Road Home staff and one Kane Security officer at the women's entrance. Screening procedures may not be conducted in accordance with policy due to TRH's lax monitoring and enforcement of policies and procedures. Not following screening procedures allows unwanted items to enter the Downtown Shelter without detection.

Recommendation:

We recommend that TRH frequently monitor check-in procedures and provide corrective action as appropriate to ensure compliance with the Safety and Security Plan.

Management's Response:

We agree with this recommendation. We are revising our Oversight Procedure to assign a lead compliance staff person to provide oversight for each shift at both the men's and women's check in desks, and creating a written agreement with private security regarding roles and expectations. TRH Management and the team will report staffing levels to Shelter the Homeless and Kane Security at our weekly security meetings, which will be a standing agenda item. Staff will be held accountable for ensuring procedures are being executed properly, and staff issues and management response will be documented.

Responsible Individual: Executive Director, Matt Minkevitch
Anticipated Completion Date: February 1, 2019

4. MINIMUM SECURITY OFFICER STAFFING FOR THE MEN'S ENTRANCE IS NOT PROVIDED AS REQUIRED BY THE SAFETY AND SECURITY PLAN

We conducted 34 unannounced onsite observations from December 4, 2018 through January 8, 2019 on varying days and times and noted that the men's check-in entrance had only one security officer present for 24 observations. The Safety and Security Plan requires a minimum of two Kane Security officers present at the men's entrance at all times. We also selected a 24-hour period to observe the men's exit door to the lobby and noted 40 individuals, who did not appear to be TRH staff, enter the men's dorm area through this exit, by-passing security check-in procedures.

Security officers may not be staffing the entrance due to TRH's lax monitoring and enforcement of policies and procedures. Not having two security officers at the men's entrance especially during times of high activity compromises the quality of security checks allowing individuals to enter the Downtown Shelter with prohibited items.

Recommendation:

We recommend that TRH frequently monitor to ensure that two security officers are stationed at the men's check-in as outlined in the Safety and Security Plan.

Management's Response:

We agree with this recommendation. The Road Home management will work with Shelter the Homeless and the security team managers to create a written agreement outlining roles and expectations. The Road Home will monitor that Security personnel levels are meeting the required standards, share this information with Shelter the Homeless at the weekly security

meeting, and include it in our monthly security report that is shared with both Shelter the Homeless and The Road Home’s Board of Trustees.

Responsible Individual: Executive Director, Matt Minkevitch
Anticipated Completion Date: January 30, 2019

5. STAFF AND SECURITY ROUNDS ARE NOT CONDUCTED AS FREQUENTLY AS OUTLINED IN THE SAFETY AND SECURITY PLAN

We reviewed security camera footage outside of the men’s dorms and men’s restrooms for three randomly selected 24-hour periods in December 2018 and found that Kane Security officers passed by the entrance to the dorms significantly less than what is required at only 86 times and rarely entered the dorms from this location. We also noted that Kane Security officers entered the restroom only 19 times during the 72-hour period. Further, we noted large gaps in time between rounds. TRH’s Safety and Security Plan states that the number of dorm walkthroughs will be tracked “with a goal of every 15 minutes.” TRH Safety and Security Procedures titled “Security Rounds” states that the “Contract Security Team will conduct building interior rounds every 30 minutes.” With the policy requiring rounds every 30 minutes, we would expect to observe Kane Security officers at least 144 times at these locations over the three-day period.

TRH Safety and Security Procedures titled “Security Rounds” further states that “Client Advocates assigned to each desk will conduct rounds every 30 minutes.” Therefore, TRH policy requires a combined total of 96 rounds each 24-hour period. We were unable to determine the number of times TRH staff entered the dorms or men’s restrooms because they were not easily identifiable.

We obtained the “Rounds Tracking” summary schedule from TRH. This schedule combines both TRH employee and Kane Security rounds and is used to present rounding data in the monthly Security Report. We found that the schedule incorrectly measures compliance at 48 rather than 96 rounds in a 24-hour period as required by policy. Further, we selected 5 days in November 2018 and compared the summary schedule to the detail “Daily Round Logs” for each day and found that the daily logs did not agree to the summary schedule for all 5 days, and portions of the daily logs did not exist for 4 of the 5 days.

We also compared Kane Security’s rounds logs to our physical observation of Kane Security’s rounds viewed through the security cameras outside of the men’s restrooms for three randomly selected 24-hour periods in December. We found that Kane Security’s round logs for the men’s restrooms were overstated by 21, 14, and 19 times each day, respectively. Our physical observations were from midnight to midnight, while the Kane Security written rounds logs are for a 24-hour period beginning at 7 a.m., which may account for some of the variance; however, the differences are still considered significant.

Rounds may not be conducted as outlined in policy due to employees being unaware of what the policy requires and TRH’s lax monitoring and enforcement of policies and procedures. Because

security cameras are not in the dorm and restroom areas, rounds create a perception of detection and are an effective deterrent to unwanted behavior.

Recommendation:

We recommend that TRH management review security cameras, adequately monitor, and enforce the Safety and Security Plan and Safety and Security Procedures to ensure that:

- **Rounds of dorms and restrooms are conducted as required by both TRH staff and Kane Security.**
- **The “Rounds Tracking” summary reports compliance criteria consistent with the frequency outlined in policy.**
- **The “Rounds Tracking” summary report is reviewed to ensure that amounts are accurate and agree to supporting “Daily Round Logs”.**

Management’s Response:

We agree with this recommendation. The Road Home personnel will conduct rounds consistent with the frequency outlined in the Safety and Security Plan. Additionally, the rounds tracking summary will be reviewed both internally by the Road Home Management Team, and collectively with Kane Security and Shelter the Homeless at its weekly safety and security meeting.

Responsible Individual: Executive Director, Matt Minkevitch
Anticipated Completion Date: February 15, 2019

6. FULL-TIME RESTROOM ATTENDANTS HAVE NOT BEEN HIRED AS REQUIRED BY THE SAFETY AND SECURITY PLAN

TRH has not hired full-time restroom attendants for the men’s and women’s restrooms as outlined in the Safety and Security Plan. The Safety and Security Plan identifies restrooms as a particularly challenging location for violations. The restroom attendant would be responsible for maintaining the cleanliness of the restroom areas, performing continuous observations and reporting any issues, resulting in increased oversight to help prevent theft, smoking, and other unwanted behavior.

TRH explained that full-time restroom attendants have not been hired due to the difficulty of hiring people in these positions. Not hiring restroom attendants could allow unwanted behavior and unsanitary conditions to exist within the restrooms.

Recommendation:

We recommend that TRH hire restroom attendants as outlined in its Safety and Security Plan.

Management's Response:

We agree with this recommendation. In addition to continued efforts to hire for these direct positions, TRH Management has engaged Advantage Services to assist in the upkeep of the men's and women's restroom areas, in order to ensure that a) the agency has adequate staffing to increase the frequency that the restrooms are maintained between scheduled cleanings, and b) there is a greater number of times throughout each day that there are personnel frequenting the restrooms in addition to staff rounds.

Responsible Individual: Executive Director, Matt Minkevitch

Anticipated Completion Date: February 11, 2019

7. THE ROAD HOME STAFF DO NOT WEAR IDENTIFYING UNIFORMS AS REQUIRED BY THE SAFETY AND SECURITY PLAN

TRH employees do not wear identifying uniforms. TRH's Safety and Security Plan states in two places that "The Road Home staff will wear identifying uniform and/or Name Badge always in the facility." In another location in the plan, it states that "Our team members will wear shirts that identify them as working for The Road Home. This will also help our guests, security, and law enforcement more easily recognize Road Home personnel." In the first two references, the use of "and/or" is contradictory. For example, are TRH employees required to wear a uniform and name badge? OR are TRH employees required to wear a uniform or name badge? The third reference indicates that TRH employees will wear identifying shirts.

It is unclear why TRH has not implemented the policy to have employees wear identifying uniforms. Identifying uniforms could act as a deterrent to unwanted activity as it may increase a guest's perception that improper activity would be identified.

Recommendation:

We recommend that TRH staff wear identifying uniforms and that the policy be clarified to indicate that uniforms are required.

Management's Response:

We agree with this recommendation. We will update the plan to indicate that all TRH staff must wear name badges and shelter desk staff are required to wear identifying uniform tops. All shelter staff will be equipped with uniform tops.

Responsible Individual: Executive Director, Matt Minkevitch

Anticipated Completion Date: March 8, 2019

8. CAMERA FOOTAGE REVIEWED BY SENIOR MANAGEMENT, SHELTER DIRECTOR AND SHELTER SUPERVISORS NOT LOGGED AS REQUIRED BY THE SECURITY SCREENING QUALITY ASSURANCE POLICY

We requested a log of who reviews security cameras, which cameras were reviewed and any actions taken as a result of the camera reviews and were told that TRH does not maintain any documentation of security camera reviews. TRH’s Security Screening Quality Assurance policy states the following:

To ensure security screenings are being conducted consistently, the process will be reviewed in a variety of ways:

- *Shelter Supervisors will view 10-15 minutes of live footage from their office 3-5 times per shift and log footage watched.*
- *Shelter Supervisors will review 15-30 minutes of taped footage per week and log footage reviewed.*
- *Shelter Director will view 10-15 minutes of live footage from their office per week and log footage watched.*
- *Shelter Director will review 15-30 minutes of taped footage per week and log footage reviewed.*
- *Senior Management (Executive Director, Associate Executive Director, and others) will conduct periodic reviews of live and recorded footage.*

If staff are found to be performing security screenings in a manner inconsistent with agency protocols, supervisors will take the following actions:

- *Re-training - Supervisors will conduct one-on-one thorough and in-depth trainings on the security screening process.*
- *Counseling - Supervisors will provide one-on-one counseling around the need for complete and thorough security screenings and work to resolve any presenting barriers.*
- *Disciplinary Action - If inconsistencies continue after counseling and re-training, disciplinary action, up to and including termination, may occur.*

The Safety and Security Plan also states that the Security, Staffing and Training Officer “will conduct random quality checks for check-in consistency including viewing randomly selected 5-10 minutes of taped check-ins every week.” The Safety, Security and Training Officer explained that she looks at cameras periodically during the day, and addresses any issues noted with the individual concerned at that time; however, she does not document this review.

Security cameras reviewed may not be logged due to employees being unaware of the requirement and TRH’s lax monitoring and enforcement of policies and procedures. Management reviews of security cameras help ensure that security protocols are occurring consistently and as expected. Because we observed significant differences between actual check-in screening practices and policy, it appears unlikely that these camera reviews are occurring or if they are occurring, the review is not effective in identifying and correcting differences between policy and actual check-in screening practices.

Recommendation:

We recommend that TRH management review camera footage of check-in security procedures and document the footage reviewed and corrective actions taken.

Management's Response:

We agree with this recommendation. Management has developed a shared online log to record the frequency of instances that management is reviewing the check-in processes and the rounding throughout the shelter. Reviewing footage will be conducted consistent with the Safety and Security Plan. Management will include this data as a regular part of the security update reported at each board meeting.

Responsible Individual: Executive Director, Matt Minkevitch
Anticipated Completion Date: February 15, 2019

9. RESTROOMS ARE NOT CLEANED AS FREQUENTLY AS OUTLINED IN THE SAFETY AND SECURITY PLAN

We reviewed security camera footage outside of the men's restrooms for three randomly selected 24-hour periods and found that the men's restrooms was not cleaned as frequently as required in the Safety and Security Plan on one of those days. The Safety and Security Plan states that "custodial staff cleans these restrooms five times in a 24-hour period."

The Building Cleanliness Procedures require that the men's restrooms be cleaned four times and decluttered three more times in a 24-hour period. Our security camera observations found that custodial staff did not enter the men's restrooms as frequently as outlined in this policy on any of the three days we observed.

These policies are inconsistent with one requiring five cleanings in a 24-hour period and the other requiring four cleanings and three decluttering's in a 24-hour period. These policies should be aligned to match the number of cleanings expected. Also, the Building Cleanliness Procedures has cleaning and decluttering times that overlap or are scheduled at the same time. For example, the procedure states that cleaning should occur between 9 p.m. and 10 p.m. and that a decluttering should occur at the same time.

As noted in a finding above, we found that the men's restrooms were significantly dirty 9 out of the 34 times observed, which may be caused by not cleaning them as frequently as outlined in procedure. Restrooms may not have been cleaned as frequently as required due to inconsistent procedures and TRH's lax monitoring and enforcement of policies and procedures. Not frequently cleaning the restrooms allows unsanitary conditions to exist in the shelter.

Recommendation:

We recommend that:

- **Procedures be aligned for consistency.**

- **Scheduled times for cleaning and decluttering not overlap.**
- **Restrooms be cleaned as outlined in procedures.**
- **TRH management monitor and enforce compliance with this policy.**

Management's Response:

We agree with this recommendation. TRH Management will align our cleaning procedures with the security plan to assure that the restrooms are cleaned at a minimum of four times within a 24-hour period. We will update the security plan to ensure cleaning and decluttering times do not overlap and the Operations Director will monitor and report on compliance with the procedures.

Responsible Individual: Executive Director, Matt Minkevitch

Anticipated Completion Date: February 11, 2019

10. LEASE AGREEMENT BETWEEN THE DEPARTMENT OF WORKFORCE SERVICES AND THE ROAD HOME DOES NOT DEFINE EXPECTATIONS REGARDING STANDARDS OF CONDUCT IN THE SHELTER

The Office of the Legislative Auditor General's Report No. ILR 2018-A recommended that "...the board of trustees for the Road Home and the board of trustees for Shelter the Homeless consider what standards of conduct will be required of those residing in their facilities and how to enforce those standards." As noted in this report, on October 31, 2018, STH agreed to sell and the State of Utah agreed to purchase the Downtown Shelter. On November 9, 2018, an amendment to the building lease was signed making the State of Utah TRH's landlord. Because the Department now fulfills the role of landlord previously held by Shelter the Homeless, the Department and The Road Home board should agree on the standards of conduct within the Downtown Shelter and how to enforce those standards. The best place to capture these expectations would be in the lease agreement. The current amendment to the lease agreement signed by the Department and The Road Home does not define these standards.

The lease agreement appears to have not been updated due to the expedited nature of the transition from STH to the Department. Clearly defined expectations help ensure that results are achieved and including them in the lease agreement helps provide a mechanism to enforce accountability.

Recommendation:

We recommend that the Department and the Board of Trustees for The Road Home amend the TRH's lease agreement to include standards of conduct within the shelter and how to enforce those standards.

Management's Response:

We agree with this recommendation. The Road Home will work with DWS to include the standards of conduct that will be included in the lease.

The Road Home – Downtown Shelter
For the period November 19, 2018 to January 10, 2019

Responsible Individual: DWS, Jonathan Hardy; The Road Home Board President
Anticipated Completion Date: February 22, 2019



DEPARTMENT OF
**WORKFORCE
SERVICES**

Follow-up Review of The Road Home – Downtown Shelter

As of February 27, 2019

Report No. 2019-13a



State of Utah

GARY R. HERBERT
Governor

SPENCER J. COX
Lieutenant Governor

**Department of
Workforce Services**

JON S. PIERPONT
Executive Director

CASEY CAMERON
Deputy Director

GREG PARAS
Deputy Director

February 29, 2019

Mr. Jon Pierpont, Executive Director
Department of Workforce Services

Dear Mr. Pierpont:

We have completed a follow up of our audit of The Road Home – Salt Lake Community Shelter and Resource Center as of February 27, 2019. The scope of this audit is outlined in the procedures section of this report. The audit was conducted in accordance with the *International Standards for the Professional Practice of Internal Auditing*, issued by the Institute of Internal Auditors.

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We recognize and appreciate the cooperation and assistance of the personnel of The Road Home during the course of our audit. Please contact me if you have any questions regarding this report.

Sincerely,

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Director of Internal Audit
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Preston Cochrane, Executive Director, Shelter the Homeless



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INTRODUCTION

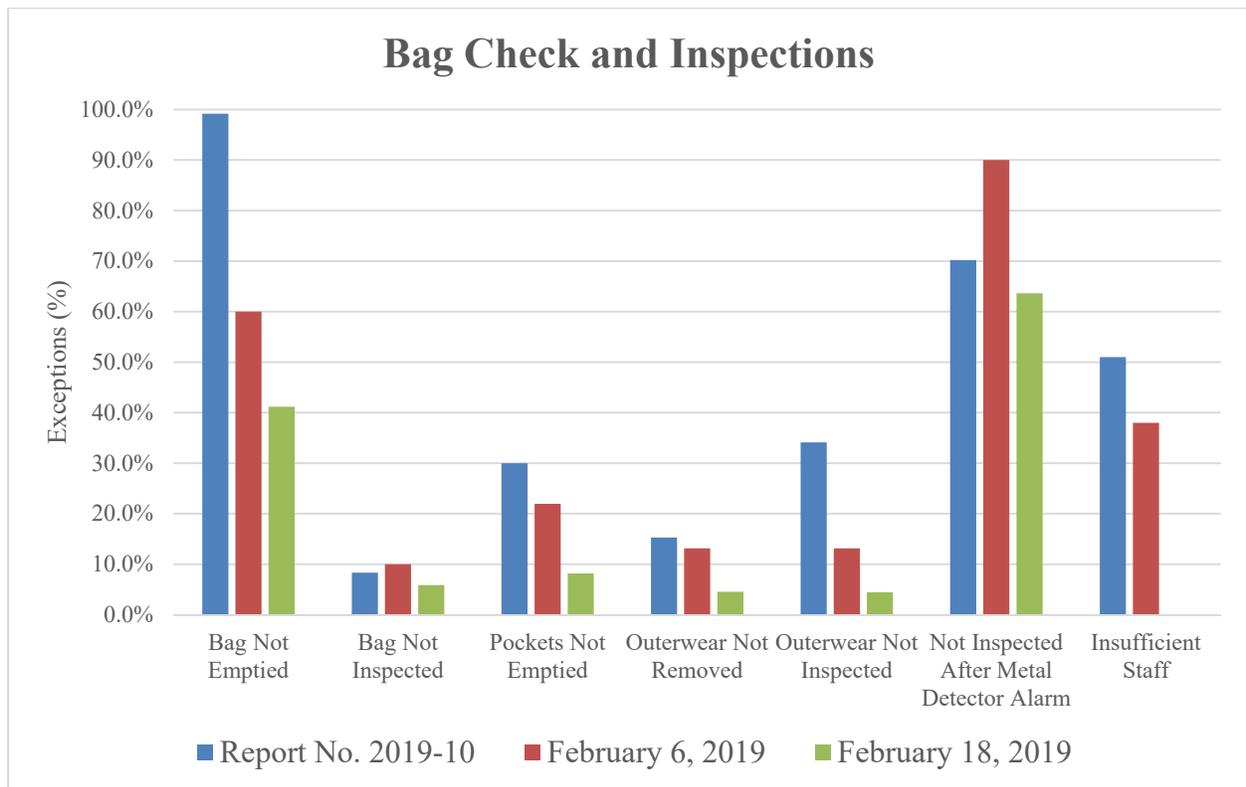
The Internal Audit Division issued Report No. 2019-10 dated January 30, 2019 which identified, among other things, that controls designed to improve safety, security, and sanitation conditions in the Salt Lake Community Shelter and Resource Center (Downtown Shelter) were not operating consistently. This audit was designed to determine whether improvements are being made.

PROCEDURES

The specific procedures performed and results of those procedures are noted below. Procedures were performed using security cameras.

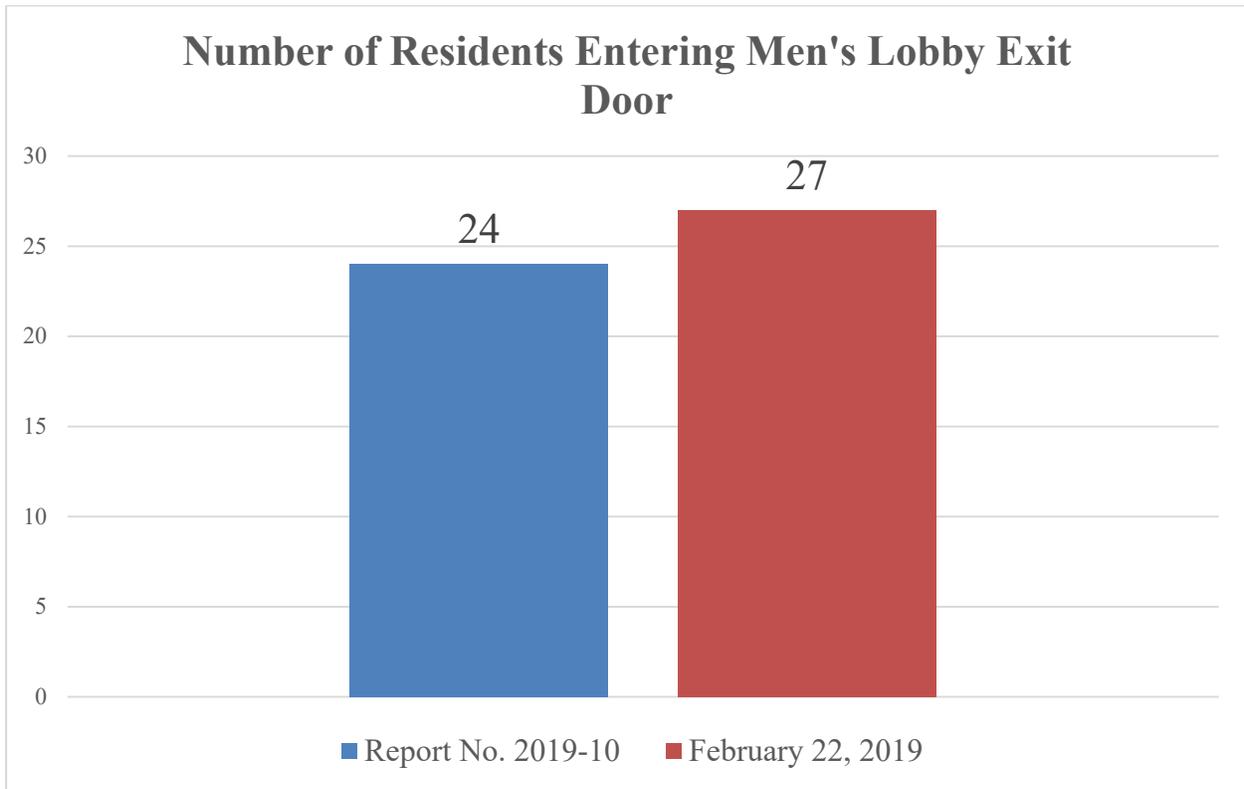
1. BAG CHECK AND INSPECTIONS

We observed 50 bag check inspections from the men’s entrance, and an additional 50 from the women’s entrance at various times on February 6 and 18, 2019 to determine whether bag, coat and individual inspections are consistent with policy. The chart below compares error percentage rates from Report No. 2019-10, February 6, 2019 and February 18, 2019. The general downward trend indicates improvement. (Note: no exceptions were found on February 18, 2018 related to insufficient staff.)



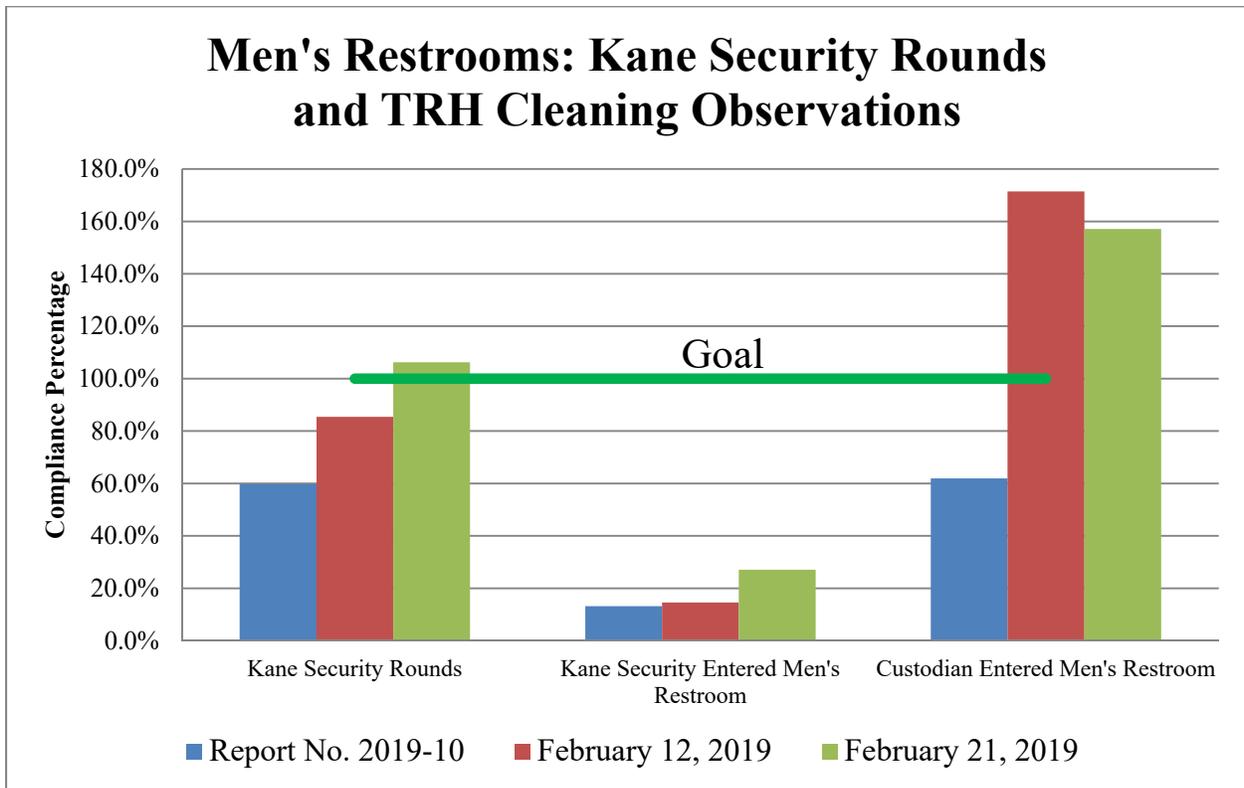
2. EXIT DOOR TO MEN’S LOBBY

We observed the exit door from the men’s dormitory to the lobby for 12 hours to determine whether residents were bypassing security screening and improperly entering the dorm. The chart below compares error numbers from Report No. 2019-10 to observations on February 13, 2019. Because a 24-hour period was observed for Report No. 2019-10 and a 12-hour period was used for this observation, we selected a period from 9:00 a.m. to 9:00 p.m. from the prior report and compared it to the same time period on February 22, 2019. The increase in exceptions indicates that staff are not watching this door and directing individuals through the screening process as required.



3. MEN’S RESTROOM SECURITY ROUNDS AND CLEANING

We observed the entrance to the men’s restroom for the two 24-hour periods of February 12 and 21, 2019 to determine whether contract security officers were conducting rounds and custodian staff were cleaning restrooms according to the frequency outlined in policy. The increasing trend indicates improvement, with security officer rounds in the men’s restroom the only area of noncompliance.



4. CUSTODIANS REPORTING DRUG PARAPHERNALIA FOUND DURING CLEANING

We obtained eight days of incident reports in February 2019 from one of the custodians and noticed drugs and drug paraphernalia being reported. Therefore it appears that custodians are now reporting this information.



DEPARTMENT OF
**WORKFORCE
SERVICES**

Follow-up Review of The Road Home – Downtown Shelter

As of March 27, 2019

Report No. 2019-13b



State of Utah

GARY R. HERBERT
Governor

SPENCER J. COX
Lieutenant Governor

**Department of
Workforce Services**

JON S. PIERPONT
Executive Director

CASEY CAMERON
Deputy Director

GREG PARAS
Deputy Director

April 25, 2019

Mr. Jon Pierpont, Executive Director
Department of Workforce Services

Dear Mr. Pierpont:

We have completed a follow up of our audit of The Road Home – Salt Lake Community Shelter and Resource Center as of March 27, 2019. The scope of this audit is outlined in the procedures section of this report. The audit was conducted in accordance with the *International Standards for the Professional Practice of Internal Auditing*, issued by the Institute of Internal Auditors.

The Board and Management of The Road Home are responsible for adopting sound policies and establishing and maintaining effective internal control. Our responsibility is to conduct the audit tests considered necessary to meet the objective of the audit to reach stated conclusions. The results identified in the audit are presented in this report.

We recognize and appreciate the cooperation and assistance of the personnel of The Road Home during the course of our audit. Please contact me if you have any questions regarding this report.

Sincerely,

Van Christensen, CPA, CFE
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801-526-9953

cc: Casey Cameron, Deputy Director
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INTRODUCTION

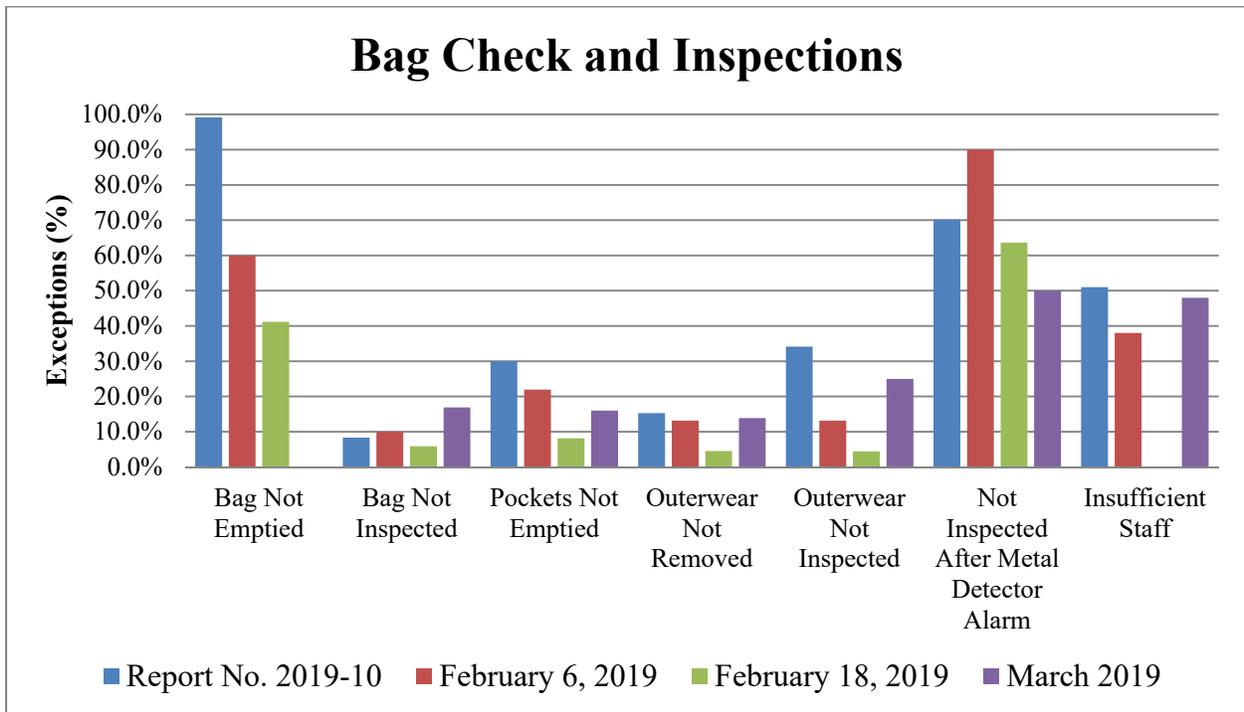
The Internal Audit Division issued Report No. 2019-010 dated January 30, 2019 which identified, among other things, that controls designed to improve safety, security, and sanitation conditions in the Salt Lake Community Shelter and Resource Center (Downtown Shelter) were not operating consistently. The Internal Audit Division also issued Report No. 2019-013a dated February 28, 2019 which reported on our follow-up of the first report. This audit was designed to determine whether improvements are being made.

PROCEDURES

The specific procedures performed, and results of those procedures are noted below. Procedures were primarily performed using security cameras.

1. BAG CHECK AND INSPECTIONS

We observed 50 bag check inspections from the men’s entrance and an additional 50 from the women’s entrance at various times and dates within the month of March 2019 to determine whether bag, coat and individual inspections were consistent with policy. The chart below compares error percentage rates from Report No. 2019-010, February 6, 2019, February 18, 2019, and March 2019.

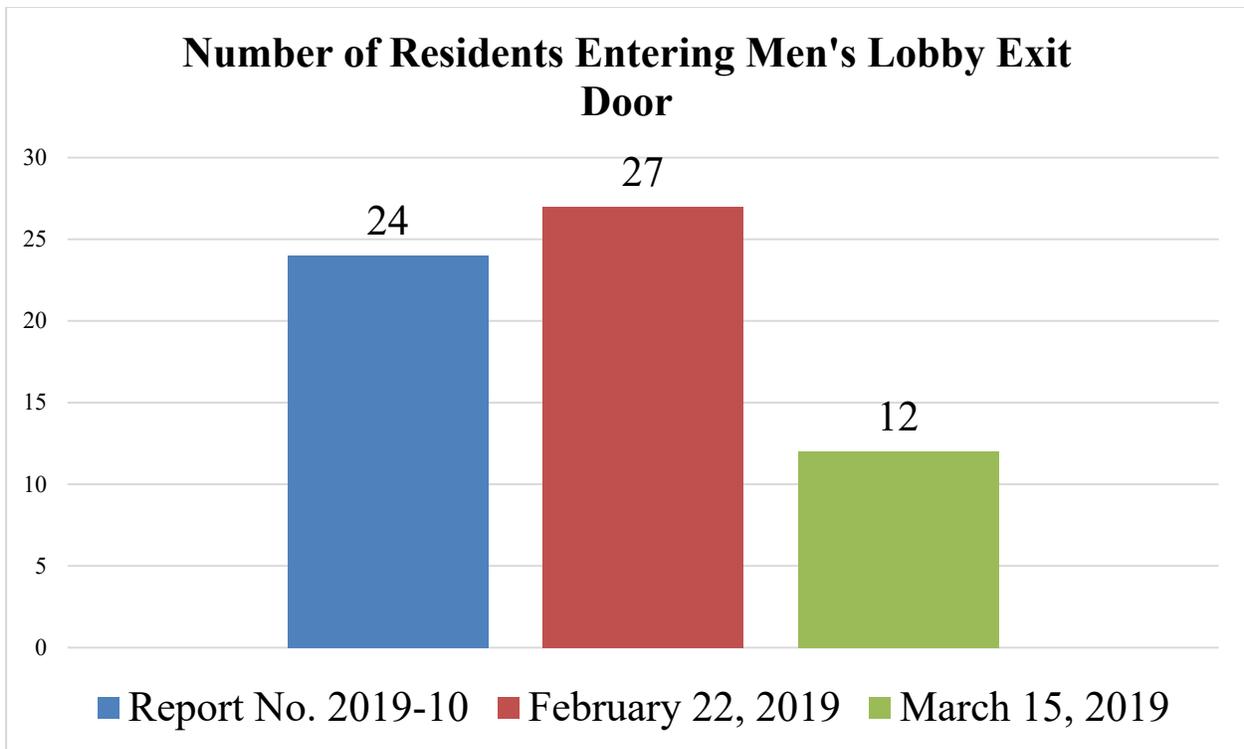


The following items should be considered when reviewing the chart above:

- Effective March 4, 2019, TRH modified their policy to no longer require that bags be emptied as long as all contents can be seen; therefore, we did not look for this procedure during March observations.
- No exceptions were found on February 18, 2018 related to insufficient staff.
- Four of the exceptions in the “Bag Not Inspected” category for the month of March included three wheelchairs with bags and storage compartments and one large dog pack that were not inspected. While current TRH policies require ALL bags to be searched, TRH may want to consider defining specific procedures to inspect wheelchair occupants and compartments as well as bags carried by animals.

2. EXIT DOOR TO MEN’S LOBBY

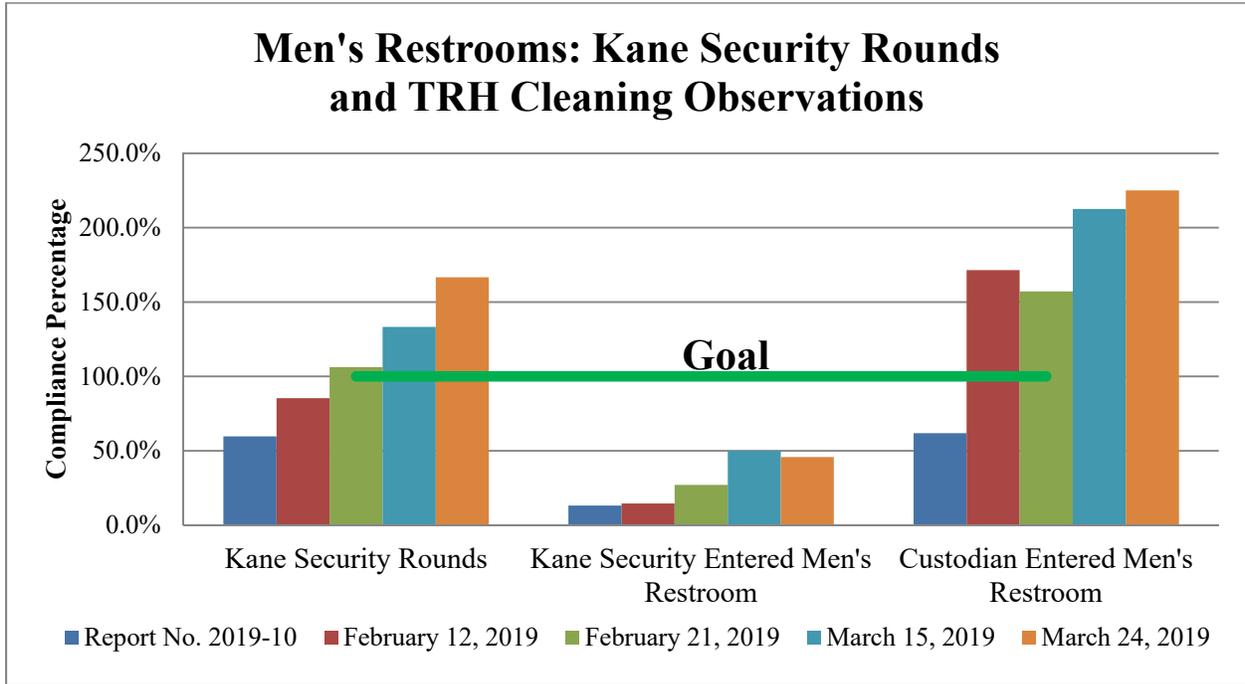
We observed the exit door from the men’s dormitory to the lobby for 12 hours on March 15 to determine whether residents were bypassing security screening and improperly entering the dorm. The chart below compares numbers from Report No. 2019-010 and February 13, 2019 to our observations on March 15, 2019. We noted a decrease in the number of individuals entering this door and bypassing screening procedures.



3. MEN’S RESTROOM SECURITY ROUNDS AND CLEANING

We observed the entrance to the men’s restroom for two 24-hour periods on March 15th and 24th, to determine whether contract security officers were conducting rounds and custodian staff were cleaning restrooms according to the frequency outlined in policy. We compared our results to

those noted in our previous reports. The only area of noncompliance is security officer rounds entering into the men’s restroom.



Effective March 4, 2019, TRH modified their policy reducing by half the required frequency of “Kane Security Rounds” from 48 to 24 in a 24-hour period. While the chart shows an increase in “Kane Security Round” compliance, the actual number of rounds observed decreased from 92 in February to 72 in March.

4. WOMEN’S RESTROOM SECURITY ROUNDS AND CLEANING

We observed the cameras near the Women’s Crisis restrooms for two 24-hour periods on March 15th and 24th, to determine whether contract security officers were conducting rounds and custodian staff were cleaning restrooms according to the frequency outlined in policy. We have not conducted observations in this area during previous reviews but chose this area to evaluate whether TRH is complying with their policy in all areas and not just those that are known to be observed.

We found that contract security officers completed the minimum number of rounds on March 15, but only completed 14 of the required 24 rounds on March 24. We also found that the contract security officers did not enter the Women’s Crisis restrooms the minimum number of times for both days (5 times on the 15th and 13 times on the 24th). We found that that the cleaning staff entered this restroom 9 and 10 times on March 15th and 24th respectively, while TRH policy only required two cleanings each day.

5. REFERENCED TRH POLICIES AND PROCEDURES DO NOT APPEAR TO EXIST

When we began our initial audit, we noted several references to other policies in the *TRH Guiding Principles Policy*, the *TRH Universal Safety Policy* and the *Safety and Security Procedures* that TRH staff has been unable to provide. We have been told that they are being worked on by TRH's Human Resources Director. References to policies that are no longer relevant or do not exist indicates that policies need further development.

6. ROUNDS TRACKING SCHEDULE IS INACCURATE AND INCOMPLETE

As noted in Finding No. 5 from Report 2019-010, staff rounds were not being conducted as frequently as outlined in TRH's Safety and Security Plan. Effective March 4, 2019 TRH revised their policy to reduce the number of required staff rounds from once every 30 minutes to once every hour.

We obtained the most recent "Rounds Tracking" summary schedule from TRH and compared it to "Daily Round Logs" for five days in February 2019. We found multiple instances of missing daily rounds and over and understatement of daily rounds when compared to the "Daily Round Logs" for all five days reviewed. This resulted in an inaccurate summary of rounds reported in the "Rounds Tracking" summary report used by management to verify whether staff rounds are being completed as frequently as outlined in policy.

7. ALL TRH STAFF ARE NOT WEARING IDENTIFYING UNIFORMS AS REQUIRED BY THE SAFETY AND SECURITY PLAN

As noted in Finding No. 7 from Report 2019-010, we found that not all TRH staff was wearing identifying uniforms as required by TRH's Safety and Security Plan. During our most recent review, we found that Shelter Advocates wore gray shirts or blue vests with the TRH logo, but we also noted other TRH employees who were not wearing either of these identifying uniforms.

8. CAMERA FOOTAGE NOT REVIEWED BY SENIOR MANAGEMENT, SHELTER DIRECTOR AND SHELTER SUPERVISORS AS REQUIRED BY THE SECURITY SCREENING QUALITY ASSURANCE POLICY

As noted in Finding No. 8 from Report 2019-010, we found that senior management and others were not logging security camera screenings as required by TRH's Security Screening Quality Assurance policy. While we noted that a log is now being maintained, where one was not in the past, the frequency of screenings is not occurring as outlined in policy. We reviewed the log for the period of January 20, 2019 through March 4, 2019 (a period of 6 weeks) and found that Shelter Supervisors reviewed on average only 2.9% of the required live footage and 13.5% of recorded footage required each week. Senior Management conducted the required reviews 5 of the 6 weeks, while the Security, Staffing & Training Officer only reviewed footage for two of the

Follow-up Review of The Road Home – Downtown Shelter
As of March 27, 2019

6 weeks. TRH policy requires that senior management and others observe and log security camera footage to ensure that security procedures are being conducted as outlined in policy.

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