

REPORT DIGEST

**ANDREW McFARLAND MENTAL HEALTH CENTER
COMPLIANCE AUDIT
FOR THE TWO YEARS ENDED JUNE 30, 1993**

{Expenditures and Activity Measures are summarized on the reverse page.}

FINDINGS, CONCLUSIONS, AND RECOMMENDATIONS

UNTIMELY PERFORMANCE EVALUATIONS

The facility did not conduct employee performance evaluations on a timely basis. Nine of 25 employees' files tested did not have an evaluation performed on a timely basis or had no evidence of an evaluation. Upon further review, the facility's personnel officer provided us a list of 76 overdue performance evaluations since July, 1992.

The State's Personnel Rules and the Department's Policy and Procedures Directives require these evaluations to be performed annually. Facility personnel stated the previous personnel officer took no measures to inform supervisors of overdue evaluations. (Finding 1, page 7)

Center officials responded that procedures have been implemented to ensure employee performance evaluations are performed on a timely basis.

INADEQUATE CONTROL OVER PHARMACY INVENTORY

The Center did not have adequate control over pharmacy inventory during the audit period. The facility did not conduct physical inventories in the pharmacy on a regularly scheduled basis. When inventories were conducted, numerous errors and differences were noted between the perpetual inventory records and the actual counts.

Center personnel believe these errors were due to insufficient staff. Sufficient technicians were not employed to manage prescription filling and reconciliation of the inventory on a regular basis.

Without such controls, drugs or controlled substances could be diverted for unauthorized uses. (Finding 2, page 8)

Center officials responded that procedures have been implemented to adequately and consistently staff the pharmacy to ensure proper inventory control.

OTHER FINDINGS

The other finding in our report was of less significance and has been given appropriate attention by the Center. We will review the Center's progress towards implementation of our recommendations in our next audit.

Mr. Leonard Beck, Chief Internal Auditor for the Department of Mental Health and Developmental Disabilities, provided the Center responses to our findings and recommendations.

AUDITORS' OPINION

We conducted a compliance audit of the Center as required by the Illinois State Auditing Act. We also performed certain agreed upon procedures with respect to the accounting records of the Center to assist our single audit of the entire Department. Department-wide financial statements will be presented in our audit of the Central Office.

_____ WILLIAM G. HOLLAND, Auditor General

WGH:TEE:jr

SUMMARY OF AUDIT FINDINGS

Number of This Audit Prior Audit

Audit findings32

Repeated audit findings00

Prior recommendations implemented
or not repeated27

SPECIAL ASSISTANT AUDITORS

Sikich, Gardner & Co., were our special assistant auditors for this audit.

DMHDD**ANDREW McFARLAND MENTAL HEALTH CENTER
COMPLIANCE AUDIT****For The Two Years Ended June 30, 1993**

EXPENDITURE STATISTICS	FY 1993	FY 1992	FY 1991
●Total Expenditures (All Funds)	\$9,560,407	\$9,248,426	\$8,900,223
<u>OPERATIONS TOTAL</u>	\$9,548,607	\$9,238,926	\$8,888,423
% of Total Expenditures	99.9%	99.9%	99.9%
Personal Services	\$6,957,996	\$6,609,222	\$6,316,952
% of Operations Expenditures	72.9%	71.5%	71.1%
Average No. of Employees	219	209	215
Other Payroll Costs (FICA, Retirement)			
% of Operations Expenditures	\$800,383 8.4%	\$751,000 8.1%	\$721,294 8.1%
Contractual Services	\$1,394,062	\$1,383,450	\$1,294,000
% of Operations Expenditures	14.6%	15.0%	14.5%
All Other Operations Items	\$396,166	\$495,254	\$556,177
% of Operations Expenditures	4.1%	5.4%	6.3%
<u>GRANTS TOTAL</u>			
(LIVING SKILLS PROGRAM)	\$11,800	\$9,500	\$11,800
% of Total Expenditures	0.1%	0.1%	0.1%
●Cost of Property and Equipment	\$13,850,767	\$13,493,691	\$11,967,802

SELECTED ACTIVITY MEASURES	FY 1993	FY 1992	FY 1991
●Average Number of Residents	138	147	151
●Ratio of Employees to Residents	1.58	1.42	1.42
●Cost Per Year Per Resident	\$69,193	\$62,348	\$58,326
●National School Lunch Program Receipts	\$20,734	\$21,172	\$12,421

FACILITY DIRECTOR(S)
During Audit Period: Gail S. Huecker, MSSW Currently: Gail S. Huecker, MSSW