

**REPORT DIGEST**

**DEPARTMENT OF MENTAL HEALTH AND  
DEVELOPMENTAL DISABILITIES  
CENTRAL OFFICE  
FINANCIAL AND COMPLIANCE AUDIT  
(In accordance with the Single Audit Act of 1984  
and OMB Circular A-128)  
FOR THE TWO YEARS ENDED JUNE 30, 1993**

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

## **FINDINGS, CONCLUSIONS, AND RECOMMENDATIONS**

### **FAILURE TO ESTABLISH PROGRAMS**

#### **Five-Year Adolescent and Teen Suicide Prevention Program**

The Department has not complied with the statutory mandate calling for the development of a Five-Year Adolescent and Teen Suicide Prevention Program. The Department is mandated to develop the following in regard to adolescent and teen suicide:

- Application procedures and grant awards to entities for the development and maintenance of suicide prevention programs. To date, no grants have been awarded.
- A report and evaluation of the program submitted to the General Assembly no later than July 1, 1991. No report has been prepared. (20 ILCS 1705/58)

Failure to establish such a program delays the delivery of appropriate mental health care mandated by State law. (Finding 2, page 8; first reported in 1989.)

The Department states it has not fully implemented the program due to not receiving the necessary appropriations to meet the mandate. In response to our recommendation Department officials stated that they are developing proposals to request modifications to the mandate.

#### **Elderly Mental Health Pilot Program**

The Department has not established an Elderly Mental Health Pilot Program. Chapter 20 ILCS 1705/50a and 20 ILCS 1705/63 provide for an Elderly Mental Health Pilot Program to deter homelessness, institutionalization and premature death among mentally ill elderly. Delay of this program reduces the Department's effectiveness in its goal to eliminate these hardships. (Finding 4, page 10)

Department officials said they were meeting with the Mental Health Service System Advisory Council to determine the needs of elderly individuals and services appropriate to meet these needs. They said a long-term program strategy will be developed under which budgetary requests will be made. They further noted that FY94 funding supports community-based alternatives to inpatient hospitalization for elderly individuals with serious mental illness.

### **NEED TO PROPERLY MONITOR OUT-OF-STATE FACILITIES**

The Department did not communicate properly with the parents or guardians of recipients it had placed in out-of-state facilities regarding licensing and the quality of care. Recipients may be assigned to facilities outside of Illinois if appropriate care cannot be found within the State.

Chapter 20 ILCS 1705/15.1 states that the Department must communicate with the

parents/guardians of a recipient placed in an out-of-state facility regarding whether the facility is properly licensed and meets the Illinois minimum requirements and that such placement is in the best interest of the recipient. The section also states that three months after the recipient's placement, the Department must visit the facility and communicate the results of the review to the parents/guardians. No records of correspondence or of follow-up visits were available. Noncompliance is due to insufficient resources allocated to this area. (Finding 5, page 11)

The Department responded it has accepted our recommendation to correct this problem and is in the process of implementation.

### **INAPPROPRIATE SECURITY ACCESS TO COMPUTER SYSTEMS AND DATA**

Programmers are not appropriately restricted from entering or updating information into the Inpatient Statistics System and the Payroll System.

To prevent and detect the manipulation or loss of data, programmers should not be permitted to access data without the existence of an audit trail. Failure to establish an audit trail of programmer access to data will limit the Department's ability to identify instances where accidental or malicious access by programmers occurred. (Finding 8, page 13)

Department officials said they accepted our recommendations to correct these weaknesses. In the Inpatient System, they said it is necessary to allow the programmers access, however, they are creating a report (audit trail) that will identify whenever such actions are taken. On the Payroll System they said they have cancelled the programmers authority to access payroll transactions. In other areas within the Payroll System they said the logging system would be expanded as needed.

### **QUESTIONED COSTS**

The Elgin Mental Health Center received meal reimbursements of \$8,837 for patients that were not at the Center (Schedule of Findings and Questioned Costs, pages 152 and 153). The U.S. Department of Agriculture funds the National School Lunch Breakfast Program which provides the reimbursement for actual breakfasts or lunches served to an individual under the age of 21 and attending school. The rate of reimbursement is \$1.00 for breakfast and \$1.75 for lunch. The Center received meal reimbursements for 23 patients that had been discharged but not removed from the list of eligible participants. The excess amounts claimed were for the period July 1, 1991 through November 30, 1991. This amount may have to be returned to the U.S. Department of Agriculture.

## **OTHER FINDINGS**

The remaining findings are less significant and have been given appropriate attention by the Department. We will review progress towards the implementation of our recommendations in our next audit.

Lynn Handy, Director, Office of Management and Budget, provided the responses.

## **AUDITORS' OPINION**

In our auditors' opinion the Department of Mental Health and Developmental Disabilities' financial statements are fairly presented at June 30, 1993 and 1992.

---

WILLIAM G. HOLLAND, Auditor General

WGH:TEE:jr

## **SUMMARY OF AUDIT FINDINGS**

Number of Current Audit Prior Audit

Findings 1314

Repeated audit findings 510

Prior recommendations implemented  
or not repeated 9 6

## **SPECIAL ASSISTANT AUDITORS**

KPMG Peat Marwick were our special assistant auditors for this audit.

**DEPARTMENT OF MENTAL HEALTH AND  
DEVELOPMENTAL DISABILITIES - CENTRAL OFFICE  
COMPLIANCE AUDIT  
For The Two Years Ended June 30, 1993**

<b>EXPENDITURE STATISTICS</b>	<b>FY 1993</b>	<b>FY 1992</b>	<b>FY 1991</b>
<b>●Total Expenditures (All Funds)</b>	<b>\$445,952,047</b>	<b>\$444,106,814</b>	<b>\$420,009,374</b>
<u>OPERATIONS TOTAL</u>	\$37,756,591	\$43,945,708	\$42,727,441
% of <b>Total</b> Expenditures	8.5%	9.9%	10.2%
Personal Services	\$12,753,596	\$12,675,019	\$12,552,961
% of Operations Expenditures	33.8%	28.8%	29.4%
Average No. of Employees	337	404	387
Other Payroll Costs (FICA, Retirement)			
% of Operations Expenditures	\$15,729,414 41.6%	\$8,064,015 18.3%	\$1,342,724 3.1%
Contractual Services	\$4,186,888	\$3,214,309	\$3,892,218
% of Operations Expenditures	11.1%	7.3%	9.1%
All Other Operations Items	\$5,086,693	\$19,992,365	\$24,939,538
% of Operations Expenditures	13.5%	45.6%	58.4%
<u>GRANTS TOTAL</u>	\$408,195,456	\$400,161,106	\$377,281,933
% of <b>Total</b> Expenditures	91.5%	90.1%	89.8%
<b>●Cost of Property and Equipment</b>	<b>\$3,043,139</b>		<b>\$3,305,427</b>

<b>AGENCY DIRECTOR(S)</b>
<p>During Audit Period: William Murphy (7/91 - 12/91) Leigh Steiner, Acting Director (1/92 - 2/92) Jess McDonald (2/92 - 6/93)</p> <p>Currently: Jess McDonald</p>