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	Yes	No	Yes	No	Completed (N/A = Not Applicable)	Further Action Required	

1.	Since Armor never achieved minimum staffing levels during the 22 month period reviewed by Audit, HOC management should examine whether or not additional staffing withholds and penalties should be included in future contracts.	Yes	Yes	Completed	No	While the Audit was being performed and completed (in August 2018), Armor began to consistently achieve 95%. In the fall of 2018, the Office of Corporation Counsel negotiated the final terms with Armor which did not include any changes nor waiver of penalties, as the goal was to ensure medical service continuation until the new vendor was in place from an RFP award. Following an RFP process the County entered into a contract with a new vendor, WellPath; the contract was negotiated by DAS – Procurement with input and guidance from the Office of Corporation Counsel, the Sheriff's Office and the HOC and it went into effect on 04-01-2019. In the new contract the penalty structure has been revised and now applies to vacant positions (based on 60-, 90-, 120-days), as well as fulfillment of 100% of clinical hours. Since the new contract is just starting on 4/1, at this time, it is unclear whether this new methodology will result in more or less penalties.
2.	An analysis should be conducted to assess the impact, if any, on quality of care while using pool or agency staff. If needed, HOC management should add language to future contracts to limit the use of agency and pool staffing to provide a higher quality of care for inmates as asserted by the Consent Decree Medical		No	Completed	No	The County, including Audit, did not have clinical staff to complete this type of medical analysis to determine the correlation of pool and agency staff (mostly longer term over 6 months) with substandard care. However, the consulting firm with clinical expertise, NCCHS Resources, Inc., engaged to assist with the RFP and monitor the contract going

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Monitor. 3. The HOC should formalize policies and procedures for follow to document when it is a to substitute positions for Exl invoicing and what notificat approvals from the HOC are re order to do so.	Armor to hcceptable hibit A in ions and	No			Completed	No	forward has indicated that there could be benefits of having more full-time staff. Moreover, following the RFP process the County entered into a contract with a new vendor, WellPath; the contract was negotiated by DAS – Procurement with input and guidance from the Office of Corporation Counsel, the Sheriff's Office and the HOC. The new contract stresses the need to reduce and/or limit the use of pool or agency medical staff to no more than 15%. As stated in the HOC's response to the Audit, the HOC already had a written procedure for analyzing staffing costs and verifying legitimacy of any substitutions; this process is now codified into the HOC manual of policies and procedures. Also, the new contract does require the new vendor, WellPath, to develop a "substitution card" that is, essentially, a list of positions that can substitute, which may assist the HOC and contract monitor with the staffing verification process.	
4. A cost analysis should be con HOC Management of the cost positions versus the penalties a the current contract and if additional penalties should be the contract to encourage Armo staffing levels in excess of 9 consistent basis.	t of filling allowed in needed, added to r to attain	No			Completed	Yes	The prior medical services provider, Armor, began to consistently achieve 95% while the Audit was being finalized. As stated in the Audit rebuttal submitted by the HOC, the HOC had already performed a cost analysis of filling the positions versus the penalties; the penalties being assessed were approximately the same as the costs to fill the positions. The Office of Corporation Counsel negotiated the terms in the final extension with Armor. Since the company is now	

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5. The HOC should explore including in future contracts a staffing plan by facility and task to assist in the monitoring of the provision of medical services at each facility. The inmate population threshold provided in the Contract should be examined for possible delineation by facility of minimum staffing which allows for additional monitoring and dynamic staffing decisions by both Armor and the HOC. Having the staffing levels of each position and task and the staffing levels for each facility would assist in the monitoring.		No			NA	Yes	over 95%, no changes to the penalties were made, and the company has not been assessed any penalties. The new contract with the new vendor, Wellpath, was negotiated by DAS - Procurement. The penalty structure has been revised and now applies to vacant positions (based on 60-, 90-, 120-days) and attainment of 100% clinical hours. Since the new contract is just starting on 4/1, at this time, it is unclear whether this new methodology will result in more or less penalties. The Court-appointed medical services Monitor, not the HOC or jail, establishes the staffing levels for each facility, as well as the tasks medical personnel must perform. The Court Monitor stated that inmate population changes would need to be large (probably at least more than a 300 increase or decrease) before any staffing changes would be applicable. Following an RFP process the County entered into a contract with a new vendor, WellPath; the contract was negotiated by DAS – Procurement with input and guidance from the Office of Corporation Counsel, the Sheriff's Office and the HOC. The new contract with Wellpath includes the court-ordered positions; however, additional staffing plans may be recommended by the new medical program clinical contract compliance monitors and plans by WellPath will be reviewed and assessed by them, NCCHC Resources, Inc.

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6. The Jail and the HOC should review what training is provided to all Correctional Officers to ensure they are aware of the information required on medical forms prior to signing any forms and to provide clarity as needed.		No	NA		NA	No	 HOC Response: Annual in-service training is mandated and provided to all HOC personnel. This training addresses a variety of topics from new procedures/tasks to refresher training in all critical aspects required to ensure the HOC adheres to all State and Federal statutes, administrative codes, case law, County ordinances and the standards promulgated by the National Commission of Correctional Health Care (NCCHC) and the American Jail Association (AJA). This training has and will continue to include refresher training to provide and ensure all HOC correctional officers are aware of the information required on medical forms prior to signing said forms. Office of the Sheriff Response: I believe that this is in reference to officers signing Medical refusal forms, and officer's responsivities as witnesses. Following the audit, our officers were trained by Armor staff. Since that time, Wellpath has taken over as the medical provider at the jail and the forms have changed. Updated training is scheduled due to the change.

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7.	The HOC should explore hiring a contract manager with clinical expertise or contracting with an outside entity which would solve the lack of medical expertise and lead to better enforcement of the contract provisions. A contract manager with clinical expertise could also provide easier access to the Jail and provide a point person for Jail personnel on medical issues.	Yes		Yes		Completed	No	On 01-10-2019 the County entered into a short-term contract with NCCHC Resources, Inc., to provide medical program contract compliance services for the inmate medical and mental health programs. The County subsequently entered into a long term contract with NCCHC Resources, Inc., on 03-15-2019. The short and long term contract are with NCCHC Resources, Inc. The contract swere negotiated by DAS – Procurement with input and guidance from the Office of Corporation Counsel, the Sheriff's Office and the HOC.
8.	The HOC should revise the contract language in Section 12.26 to reflect the use of the Consent Decree Medical Monitor's reports as the required peer review report or establish policies and procedures to ensure that Armor conducts an annual peer review at Armor's expense.	Yes			Yes	Completed	No	The HOC worked with Armor to clarify the peer review, and the Office of Corporation Counsel negotiated the final contract with Armor. Following an RFP process the County entered into a contract with a new vendor, WellPath; the contract was negotiated by DAS – Procurement with input and guidance from the Office of Corporation Counsel, the Sheriff's Office and the HOC and goes into effect on 04-01-2019. Language regarding an annual peer review was incorporated into the negotiated contract.
9.	The HOC should define what is required from the HOC and the Jail in order for Armor to properly fulfill their obligation and establish a timeline for provision of release of information to Armor. The HOC should also ensure that Armor is		No	NA		Completed	No	Following an RFP process the County entered into a contract with a new vendor, WellPath; the contract was negotiated by DAS – Procurement with input and guidance from the Office of Corporation Counsel, the Sheriff's Office and the HOC and goes into effect on 04-01-2019. Language regarding the

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providing documentation of comprehensive discharge plans in inmates' medical records.					provision of release of information by the vendor. Moreover, The HOC has and continues to develop comprehensive discharge plans for inmates scheduled to be released from custody. A PSW case manager meets with every inmate 30 days prior to their release to develop a discharge or reentry plan. This process involves assisting the subject inmate with a variety of reentry issues, which include continuing medical and/or mental health treatments and medications, housing and connections to other social services – and - enrolling inmates in Badger Care, Medicare and other options available through the Affordable Care Act. The medical contract compliance monitor, NCCHC Resources, Inc., will ensure whatever appropriate medical and/or mental health care established in the discharge plan is incorporated into the subject inmate's medical records by the medical/mental health vendor staff.
10. Future inmate medical contracts include the following audit clause: The Contractor shall permit the authorized representatives of the Director of Audits, after reasonable notice, the right to inspect and audit all data and records of the Contractor related to carrying out this Agreement for a period of up to three (3) years	Yes	Yes	Completed	No	In the fall of 2018, the HOC was provided with the most recent audit language and all HOC contracts were amended to now contain the updated clause. Additionally, following an RFP process the County entered into a contract with a new vendor, WellPath; the contract was negotiated by DAS – Procurement with input and guidance from the Office of Corporation Counsel, the Sheriff's Office and the HOC and goes into effect on 04-01-2019.

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after completion of the contract.							Applicable audit clause verbiage seems to have been incorporated into the negotiated contract.	
11. The HOC should explore whether future contracts should require a minimum staffing level in the Booking area such as two RNs per shift as noted above in the language from the Consent Decree and establish policies and procedures on when Armor is allowed to pull staff from booking to deal with issues in other areas.	No		No		NA		HOC Response:The HOC is not aware of any issues in the Medical Services Audit with inmate booking/medical intake at the HOC. The HOC has no control or purview regarding County Jail operations and how the medical program is administered at the County Jail. This recommendation must be addressed by the Milwaukee County Office of Sheriff. The jail may seek assistance from the compliance consultant, NCCHC Resources, Inc.Office of the Sheriff Response: The contract is already complete, and the staffing that was required was decided by the Consent Decree monitor. I do not think that we need to demand a staffing minimum in any specific area. We do however need to be get NCCHC accreditation. In order to get that, they must complete screenings within a 4 hour time frame. That is what we requested in the RFP, and agreed upon in the contract. If they do not meet these standards, they will receive fines not only for not meeting the 4 hour	

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					requirement, but for not receiving NCCHC accreditation.
12. The HOC should clarify the language in Section 1.11 to indicate who is responsible for the quarterly review of the formulary and indicate whether or not Armor is allowed to use its national formulary at the Jail and the HOC. If the conclusion is that the HOC should be conducting a quarterly review, the HOC should establish policies and procedures for how it will complete the task.	Yes	Yes	Completed	No	Early in 2018, the HOC identified an alternative solution for pharmacy services that would provide better pricing. With the assistance of Procurement, the RFP incorporated this Multi-state Contracting Alliance, called MMCAP, into the RFP, along with additional management services by a vendor, named Clinical Solutions. Following the RFP process, the County entered into a contract with a new vendor, WellPath; the contract was negotiated by DAS – Procurement with input and guidance from the Office of Corporation Counsel, the Sheriff's Office and the HOC and goes into effect on 04-01-2019. Language regarding use of MMCAP pricing, including associated management support by Clinical Solutions, plus responsibilities for quarterly review of a national formulary was incorporated into the negotiated contract.
13. The HOC and Jail staff should work with Armor to ensure that all entities are following the contractual guidelines for grievances and that the data systems contain an accurate reflection of inmates' grievances. Once this is achieved, data should be reviewed to see if grievances are linked to shifts in inmate population or staffing vacancies.	Yes	Yes	Completed	Yes	HOC Response: The HOC completed implementation of a new electronic grievance process in February of 2019. Moreover, following an RFP process, the County entered into a contract with a new vendor, WellPath; the contract was negotiated by DAS – Procurement with input and guidance from the Office of Corporation Counsel, the Sheriff's Office and the HOC. Contractual guidelines regarding inmate

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				grievances were incorporated into the negotiated contract. The clinical contract compliance monitor, NCCHC Resources, Inc., will review inmate grievances to determine any issues/regarding the medical and mental health services provided to inmates of the County Jail and the HOC and any linkages to shifts and population.
				Office of the Sheriff Response: Grievances are tracked following contractual guidelines. The data systems contain an accurate reflection of the actual inmate grievances. Data is compiled and reviewed monthly by jail administration to track trends and address concerns when we observe spikes or extreme variances in the numbers. It is difficult to link shifts in these statistics to inmate population or staffing vacancies since both are fairly consistent here at the jail.
14. The HOC should work with IMSD to ensure that Armor no longer has access to the County's grievance system for the purpose of processing grievances.	No	NA	A No	This seems to be a miscommunication. To our knowledge, Armor staff at the HOC did not have access to the County's grievance system. Instead, they would receive the grievance information by paper and would respond by paper. However, the CorEMR system did have Armor's grievance system, which was separate from the County's, so Armor would enter the paper grievance information into CorEMR for resolution and

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5. The HOC should continue to work with Jail, IMSD and Armor to ensure that the lack of Wi-Fi or inconsistent Wi-Fi connectivity does not impact the quality of care for inmates by working to enhance the Wi-Fi system in the Jail and establishing policies and procedures at both facilities to establish a workaround when Wi-Fi is unavailable such as the possible use of the "date/time if different" tab in the EMR. Both facilities currently have a plan in place if the entire Wi-Fil system is unavailable.			Yes		Completed	No	convey the resolution back to County staff by paper. Having two separate systems is what seems to have caused a few discrepancies. The has been resolved at the HOC with a new electronic system as of 2/1/19 which IMSD states has a log/history of all users with unique IDs. We believe the jail will also be moving to the electronic Request Manager solution shortly. In the interim, the MCSO has indicated that they assigned a Capta to more closely manage their process. <u>HOC Response:</u> The HOC has operational procedures to address intermittent as well as longer term issues regarding access to medical records to Wi-Fi with Armor. These operations procedures are only applicable a the HOC. In addition, IMSD worked with the new medical services vendor, Wellpath, to validate network and WiFi coverage areas necessary to support their application and ensure no impact to the quality of care. IMSD states Wellpath has the unique advantage of working offline so in the event they happened to be in an area that does not have WiFi coverage, they can still continue work and the system will sync automatically on network access is available. IMSD further stated that there is sufficient WiFi and network coverage to meet this need.

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	Yes	No	Yes	No	Completed (N/A = Not Applicable)	Further Action Required	
16. The HOC should require Armor to report	Yes		Yes		Completed	No	Office of the Sheriff Response:Wi-Fi is now fully implemented at the MilwaukeeCounty Jail and is in use by medical staff. There is aback-up plan in place so that medical staff can stillfunction appropriately when the system is down.The Armor staffing reports include Paid Time Off.
paid time off in the detailed staffing report that is submitted with its invoices. The HOC should establish policies and procedures to ensure that the staffing invoices submitted to the HOC Superintendent are reviewed and verified by a programmatic staff member who can verify or at a minimum spot check Armor staffing levels.							HOC fiscal staff continues to share any staffing concerns from analyses of the reports with programmatic staff / HOC leadership. Moreover, following an RFP process the County entered into a contract with a new vendor, WellPath; the contract was negotiated by DAS – Procurement with input and guidance from the Office of Corporation Counsel, the Sheriff's Office and the HOC and went into effect on 04-01-2019. Language regarding staffing reports/data provided by the vendor will be reviewed by the clinical contract compliance monitor NCCHC Resources, Inc. The consultant agrees the sharing of concerns about overtime with programmatic staff should continue. Also, rather than spot checking timecards, all payroll records are now reviewed and verified. Prior to the new vendor taking over the medical operations, the HOC did ensure Armor staffing invoices were matching up with payroll/timecard records. This will continue with the new medical services provider, Wellpath, with the assistance of our

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					consultant, NCCHC Resources, Inc.
17. The HOC should require Armor to submit segregated invoices for both pharmacy and specialty services to enhance tracking of the payments of these services and verification of accuracy of invoices.	Yes	Yes	Completed	No	The HOC did ensure that Armor was submitting separate invoices for pharmacy and specialty services. Also, in 2019, the HOC set up activity and reporting codes in the County's financial system that should also assist in a better audit trail of the payments of the various components of the medical contract (staffing, claims, pharmacy, etc.). Moreover, following an RFP process the County entered into a contract with a new vendor, WellPath; the contract was negotiated by DAS – Procurement with input and guidance from the Office of Corporation Counsel, the Sheriff's Office and the HOC and went into effect on 04-01-2019. Language regarding how invoices for payment are to be submitted by the vendor was incorporated into the negotiated contract. While the Audit determined the HOC paid invoices correctly, verifying and tracking invoices will be an ongoing process with input and guidance provided by the medical compliance monitor NCCHC Resources, Inc.

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18. HOC management should periodically review check signers and signature authority to ensure that the internal control weakness identified by Audit staff during its review continues to be rectified by the HOC.	Yes		Yes		Completed	No	The HOC has reviewed check requests and determined that the "Manager" performed at the highest level of accuracy. Therefore, the "Manager" will prepare the Check Requests and ensure sign off by a higher level. Further noting, that a best practice to ensure all County departments are adhering might be to update and strengthen the County's Check Request policy 7.05 and have Accounts Payable staff review signature authority prior to check issuance.	