



**Biennial Performance Audit on
Mayor's Office
of Homeless Services -
Evaluation of Controls over
Federal Grants Management
Focusing on Findings Noted in
the Single Audit**

**Fiscal Years Ended June 30, 2024 and 2023
City Auditor, Josh Pasch
December 2, 2025**



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Office of the Comptroller
Josh Pasch, City Auditor
100 N. Holliday St., Room 321
Baltimore, Maryland 21202

Honorable Bill Henry, Comptroller
and Other Members
of the Board of Estimates
City of Baltimore

Executive Summary

We conducted a *Biennial Performance Audit of Mayor's Office of Homeless Services for the Fiscal Years Ended June 30, 2024, and June 30, 2023*. The objective of our performance audit was to evaluate controls over federal grants management focusing on findings noted in the Single Audit (See Page 4). We evaluated the grant management of Housing Opportunities for Persons with AIDS (HOPWA) program. The scope of our audit is fiscal years (FYs) 2024 and 2023; however, certain other matters, procedures, and transactions outside that period were reviewed to understand and verify information during the audit period.

The Mayor's Office of Homeless Services (MOHS) has taken steps to strengthen oversight including establishing and implementation of the *Grant Administration Compliance and Fiscal Manual* and the *Housing Assistance Payment Program Manual* (HAP Program Manual) in December 2023 and June 2024, respectively. However, significant gaps remain in the implementation of eligibility controls, quality assurance, and financial reporting requirements. These weaknesses limit MOHS's ability to ensure that federal resources are used effectively and in compliance with program requirements, and they increase the risk of funding delays, disallowed costs that impact service for vulnerable residents. Key findings include:

- **Eligibility Review:** There were deficiencies in both initial certifications and recertifications in FY 2024 and FY2023¹. Required documentation such as rent calculations and income verification were not consistently maintained. Additionally, recertifications were reviewed only on a sample basis despite the HAP Manual requiring full review.

Although MOHS committed to strengthening quality control in response to prior Single Audit findings, the quality control procedures implemented during the audit period were performed by the same staff responsible for case processing, compromising independence and effectiveness. High staff turnover, limited training, insufficient supervisory oversight further weakened the quality control procedures.

¹ During the audit, MOHS made improvement for FY 2025 eligibility review; however, at this time, sustainability of MOHS improvement cannot be determined.

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- **Federal Financial Reporting:** For all seven grant activities that closed in the audit period, final Federal Financial Reports (FFRs) were submitted late, some by more than two years past the required deadline. There was no systematic process to track and meet reporting deadlines or to reconcile City financial records (Workday) to those maintained by the U.S. Department of Housing and Urban Development (HUD). It is necessary to regularly reconcile billed expenditures in Workday to the HUD Integrated Disbursement and Information System (IDIS)² for an effective grant closeout process. Our review of 13 active HOPWA grant activities with expenditures during the audit period indicated that MOHS does not reconcile grant revenues recorded in Workday to the IDIS for quarterly billing to the grantor.

Also, MOHS does not maintain closeout packets that support the amounts billed for any of the seven grant activities totaling \$20,235,868. Additionally, we observed that City did not bill the grants for the total amount awarded by \$916,562. The unbilled balances on grants put additional pressure on General Fund and limit the number of services that could have been provided. Untimely and inadequately documented reporting limits the ability to verify expenditures and complete timely grant closeouts.

These weaknesses increase the risk of noncompliance with federal requirements, inaccurate reporting, and delays access to federal funding. To strengthen grant oversight and improve accountability for public resources, we recommend the Director of MOHS implement the recommendations made in this report. Management responses are included in Appendix II (see page 16).

We wish to acknowledge the cooperation MOHS extended to us during our audit.

Respectfully,



Josh Pasch, CPA
City Auditor
Baltimore, Maryland
December 2, 2025

² IDIS is a nationwide database, that provides HUD with current information regarding the program activities underway across the Nation, including funding data. HUD uses this information to report to Congress and to monitor grantees.

Background Information

The MOHS serves as the primary agency in Baltimore City tasked with addressing homelessness. It was established as a standalone agency in FY 2020, following the division of the former Mayor’s Office of Human Services. The agency oversees and administers federal, state, and local funding dedicated to homeless services in Baltimore, partnering with nearly 40 local service providers to deliver a wide range of housing options including emergency, transitional, and permanent housing as well as supportive services and outreach programs. The MOHS also leads the City’s application process for federal Continuum of Care funding and manages compliance with reporting and monitoring requirements through its Homeless Management Information System, which tracks service data and supports more than 300 users.

A key responsibility of MOHS is the administration of the HOPWA program. HOPWA is the only federal program devoted exclusively to providing housing support for individuals living with HIV / AIDS and their families. The program is designed to ensure access to safe, sanitary, and stable housing, thereby fostering a supportive living environment. Eligibility for HOPWA assistance is assessed according to federally mandated requirements.

For FYs 2023 and 2024, HUD awarded MOHS a total of 21 and 23 HOPWA grant activities³ respectively aimed at supporting housing stability for people living with HIV / AIDS in Baltimore. Each grant covers a three-year period.

Table I

Summary of HOPWA Grant Awarded and Actual Activity

	FY 2023	FY 2024	FY 2025
Total Grant Funding Awarded	\$7,238,355	\$7,253,353	\$7,065,934
Total Number of Grant Activities	21	23	-*
Number of Landlords Participating	224	251	245
Number of Households Assisted	309	429	414

Source: IDIS List of Activity by Program Year and Project as of June 30, 2025

Note: * Grant activities have not been assigned as of June 30, 2025, as households are being funded by using FY 2024 funds.

³ Three of 21 active grants had little or no activity as of June 30, 2025.

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In FY 2023 and FY 2024, MOHS closed seven grant activities totaling \$21,152,430 (awarded amount). The seven grant activities extended more than three fiscal years.

FY 2023-2024 Single Audit Findings and Recommendations

The Single Audit, Subpart F of the OMB Uniform Guidance, is a rigorous, organization-wide audit of an entity that expends \$750,000 or more of federal awards received for its operations⁴. Usually performed annually, the Single Audit's objective is to provide assurance to the U.S. federal government as to the management and use of such funds by recipients. The City’s Single Audit is jointly performed by the Department of Audits (DOA) and an external audit firm. The Single Audit encompasses both financial and compliance components. The Single Audits must be submitted to the Federal Audit Clearinghouse. There are four repeat findings⁵ related to MOHS in FY 2023 and FY 2024 Single Audits. To improve the HOPWA grants management and use of funds, MOHS established the *Grant Administration Compliance and Fiscal Manual* and *HAP Program Manual* in December 2023 and June 2024, respectively. To proactively prevent the same findings, the DOA was requested to evaluate the sufficiency and effectiveness of this manual.

Table II

Summary of Four Findings and Recommendations Included in FYs 2023 and 2024 Single Audit Reports

No. Findings	Recommendations	Prior Management Response	Auditor's Assessment
<p>1. Material Weakness in Internal Controls and Noncompliance over Cash Management</p> <p>For 5 out of 13 selections, the support did not reconcile to the drawdown amount in the Federal database.</p>	<p>Establish and implement controls to maintain compliance with cash management requirements.</p>	<p>(1) Effective July 1, 2019, the MOHS implemented a requirement for the Quality Assurance team to complete annual monitoring for all programs receiving funding through MOHS regardless of funding source.</p>	<p>Not Implemented</p> <p>See Finding II</p>

⁴ Starting from FY beginning after October 1, 2024, the threshold for requiring a Single Audit was increased to \$1 million.

⁵ These findings are repeat findings since FY 2021.

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No. Findings	Recommendations	Prior Management Response	Auditor's Assessment
		<p>(2) Monitoring reports were being stored electronically on the MOHS agency's shared drive (G: Drive) prior to July 2019. Effective July 1, 2019, all monitoring reports are saved in the City's state of record, CRM / Share Point.</p>	
<p>2. Material Weakness in Internal Controls and Noncompliance over Eligibility</p> <p>(FY 2024) For 1 out of 60 selections, MOHS management did not have evidence of case manager review of the participant file for eligibility requirements.</p> <p>(FY 2023) For 14 out of 40 selections, MOHS management did not have evidence of case manager review of the participant file for eligibility requirements.</p>	<p>1) Follow AM 413-60, <i>Grant Documentation</i> and AM 413-61, <i>Grant Management Financial Reporting</i> (AM 413-61) for documentation and retention of the review and approval of eligibility criteria; and</p> <p>2) Provide training about procedures related to the documentation of eligibility evaluations.</p>	<p>The Program Manager will conduct quality control reviews for 30 percent of files that have been recertified each month. The quality control review will verify all eligibility components under the program were met.</p> <p>MOHS has resumed following the process of requesting third party verification of income, assets, and medical expenses to ensure proper calculation of tenant rent. Client records are being updated with the appropriate verification of income documentation from the third-party source.</p> <p>MOHS uses GoSection8, an online rent comparable website to conduct rent reasonableness. Rent reasonableness is conducted at the initial move-in and with each rent increase request. Documentation of the comparison is maintained in the client record.</p>	<p>Not Implemented</p> <p>See Finding I</p>

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No. Findings	Recommendations	Prior Management Response	Auditor's Assessment
<p>(FY 2024) For 1 out of 60 selections, MOHS management was unable to provide evidence of third-party verifications or documentation of expected income, assets, unusual medical expenses, and any other pertinent information.</p>			
<p>(FY 2023) For 25 out of 40 selections, MOHS management was unable to provide evidence of third-party verifications or documentation of expected income, assets, unusual medical expenses, and any other pertinent information.</p>			
<p>(FY 2024) For 1 out of 60 selections, MOHS management was unable to provide support to verify the rent calculation worksheet, hence we were unable to verify reasonableness of the contracted monthly rent.</p>			
<p>(FY 2023) For 6 out of 40 selections, MOHS management was unable to provide support to verify the rent reasonableness.</p>			

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No. Findings	Recommendations	Prior Management Response	Auditor's Assessment
<p>3. Significant Deficiency in Internal Controls and Noncompliance over Reporting</p> <p>The FFR provided by MOHS management was not submitted in a timely manner.</p>	<p>Establish and implement a process to ensure compliance with reporting requirements.</p>	<p>MOHS will follow the City’s Grant Management office’s established process of establishing and maintaining grants. MOHS will maintain a shared calendar to project new and renewal applications, anticipated audits, expiration dates and grant closeout dates.</p>	<p>Not Implemented</p> <p>See Finding II</p>
<p>4. Material Weakness in Internal Controls and Noncompliance over Special Tests – Housing Quality Standards</p> <p>(FY 2024) For 1 out of 60 selections, MOHS management was unable to provide evidence that property inspection was performed during the fiscal year.</p> <p>(FY 2023) For 25 out of 40 selections, MOHS management was unable to provide support for verification of property inspection for fiscal year 2023.</p>	<p>1) Implement proper documentation controls to ensure the housing quality standards requirements are being followed, and</p> <p>2) Follow the AM 413-61 retention policy.</p>	<p>MOHS has experienced leadership and staffing changes that have impacted on its ability to maintain systematic processes necessary for service delivery and administration. One area impacted by MOHS’ transition was our inspection services. During the review period, the contracted supplier had no access to the Housing Pro system, the database used to manage inspections for MOHS’ subsidized units. MOHS has a recordkeeping process for inspections in its policies and procedures for the rental assistance program. Inspection checklists are maintained in the participant records by calendar year. Housing staff identify whether or not the inspection has been completed on the recertification checklist and sign the checklist to confirm the documentation is present in the file.</p> <p>MOHS has resumed its recordkeeping practices to ensure staff maintain inspection checklists in the client files for the annual recertification year. Housing staff are expected to verify during the recertification that Housing Quality Standard (HQS) inspections have been conducted for the assisted unit. MOHS completed the upgrade</p>	<p>Not Implemented</p> <p>See Finding I</p>

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No. Findings	Recommendations	Prior Management Response	Auditor's Assessment
		<p>to the new version of the Housing Pro system in March 2024. The inspections team now has access to the housing database via the web. MOHS is working with the inspections team to ensure inspection updates are entered into the inspection module timely. MOHS has a process in place to review inspection details monthly to ensure:</p> <p>(1) inspections for each household have been conducted and</p> <p>2) all inspection details are updated in the Housing Pro system by the inspections team each week.</p>	

Objectives, Scope, and Methodology

We conducted our performance audit in accordance with *Generally Accepted Government Auditing Standards*. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objective. The objective of our audit was to evaluate controls over federal grants management focusing on findings noted in the Single Audit.

Our focus was on HOPWA Program, and the scope of our audit is FYs 2024 and 2023. However, certain other matters, procedures, and transactions outside that period were reviewed to understand and verify the information during the audit period.

To accomplish our objectives, we:

- Conducted interviews and walkthroughs to gain a thorough understanding of the processes and to evaluate the risks and controls associated with HOPWA Program;
- Reviewed applicable HOPWA agreements and amendments to evaluate MOHS compliance to programmatic requirements;
- Reviewed MOHS's *Grant Administration Compliance and Fiscal Manual* and *HAP Program Manual* to assess whether it sufficiently addresses the Single Audit repeat findings for FYs 2024 and 2023;
- Judgmentally selected 60 samples, which included both initial certifications and recertifications into the HOPWA program, to validate that eligibility requirements were met;
- Judgmentally selected a sample of 15 landlords with 30 renter invoices for the months June 2023 and March 2024 to verify that renter's names, lease agreements, and invoice amounts matched payments recorded in Workday;
- Reviewed all grant closeout reports sent to the HUD for accuracy and timeliness in accordance with HOPWA grant guidelines;
- Reviewed 18 of 21 grant activities with drawdowns to validate that the total funds drawn down by MOHS were accurate and timely; and
- Validated the amounts reimbursed to MOHS (IDIS system) agreed with the expenditure reported in Workday.

Current Findings and Recommendations

FINDING I: Housing Assistance Payment Program Eligibility Reviews and Quality Controls Are Not Being Performed Consistently.

Although MOHS established the *HAP Program Manual* in December 2023, the procedures outlined in the *HAP Program Manual* are not consistently followed, which may result in repeat Single Audit findings. Specifically:

- Documentation supporting both initial enrollment and recertification files was not always complete. In six cases, required tenant rent calculation worksheets were missing (See Table Von page 15).
- Recertifications are reviewed and approved by the Program Manager only on a sample basis rather than for all cases as required.

Additionally, the quality control (QC) reviews implemented in response to the FY 2023 Single Audit are not performed by an independent person. Currently, QC is conducted by the Program Manager who approves the original applications. As a result, the QC review will not be effective as a second level control.

There has been frequent staff turnover and limited staffing. Although MOHS implemented the *HAP Program Manual*, staff have not received enough training on this manual. In addition, the QC checks were set up in a way that has staff reviewing their own work.

The *HAP Program Manual* requires that eligibility and recertification files be complete and supported by all required documentation before approval. The *HAP Program Manual* also requires the HAP Program Manager to review and approve all recertification applications rather than doing so on a sample basis. Additionally, program records must be retained for at least four years.

Recommendation I: We recommend the Director of MOHS:

- Update the MOHS' *HAP Program Manual* to incorporate a formal, independent QC process;
- Apply the requirements of the *HAP Program Manual* consistently, including ensuring that the Program Manager reviews and approves all recertifications; and
- Provide periodic training and oversight to the HAP program staff to ensure compliance with the MOHS' *Grant Administration Compliance and Fiscal Manual*.

Finding II: MOHS Does Not Have Adequate Controls Over the Preparation, Reconciliation, Billing, and Timely Submission for Federal Financial Reports.

The MOHS lacks effective controls over the grant close-out process. Specifically, controls over the FFR (close-out report) were not adequate to ensure it is accurately prepared, supported, and submitted in compliance with HUD requirements. Specifically, we noted the following issues for all seven grant activities that were closed out during our audit scope:

- **Timely Grants Close-out:** The MOHS did not submit the final FFRs for six of seven grant activities reviewed, or 86 percent at the time of the grant closeout in accordance with prescribed deadlines. Each FFR was submitted after the prescribed deadline and beyond the 120-day grace period provided in the grant agreement. As shown in Table IV on page 14, the delays ranged from 122 days to 936 days.
- **General Ledger Does Not Support Grant Amounts Billed:** The MOHS transitioned to the Workday accounting system in August 2021, with prior data maintained in the legacy City Dynamics system. We reviewed seven grant activities totaling \$20,235,868 that were closed out in FY 2023 and 2024. No reconciliations were performed between the general ledger (Workday or City Dynamics) and the IDIS. For the grant closeout, the support for the reported amounts in the FFRs was obtained from the IDIS system, which does not agree with the City's general ledger.
- **City Billed Less than Awarded:** We identified unbilled grant balance of \$916,562 for the seven grant activities that we reviewed. The total awarded amount is \$21,152,430. The drawdown amount in the IDIS system is \$20,235,868. It is unclear whether all eligible expenditures were properly billed or reimbursed. Until comprehensive reconciliation is completed, the completeness and accuracy of reported expenditure cannot be determined. (See Table V on page 15)

The unbilled balances on grants put additional pressure on General Fund and limit the number of services that could have been provided. Untimely and inadequately documented reporting limits the ability to verify expenditures and complete timely grant closeouts. Furthermore, regularly reconciling billed expenditures in Workday to IDIS is necessary to make the grant closeout process effective. Our review of 13 active HOPWA grant activities with expenditures during the audit period indicated that MOHS does not reconcile grant revenues recorded in Workday to the IDIS for quarterly billing to the grantor.

The MOHS' *Grant Administration Compliance and Fiscal Manual* does not include procedures for tracking reporting deadlines for grants. The MOHS has not established an internal review process prior to submission of FFRs, and MOHS does not comply with HUD's record retention policy. According to MOHS management, the general ledger balances in both City Dynamics and Workday could not be relied upon due to significant

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staff turnover and misclassification of expenditures that occurred when staff transitioned to Workday without sufficient training.

Under 2 CFR § 200.328(d), *Financial reporting*, recipients must submit complete and accurate financial reports at grant closeout by the due dates specified in the grant agreement, generally no later than 120 days after the end of the reporting period.

In accordance with 2 CFR § 200.334, *Records retention requirements*, recipients must retain financial records, supporting documentation, statistical records, and all other records pertinent to a federal award for a period of three years from the date of submission of the final expenditure or closeout report. This period may be extended if the records are under review for audit, litigation, or other official actions.

The Administrative Manual 413, *Grants Management & Administration* requires agencies to:

- Ensure that grant transactions are accurately recorded, properly supported, and reconciled with the City's financial records; and
- Match grantee billings to the general ledger and ensure proper close-out of all grants.

Recommendation II: We recommend the Director of MOHS update and implement the MOHS' *Grant Administration Compliance and Fiscal Manual* to:

- Track FFR deadlines and strengthen internal review processes to ensure timely and accurate submission;
- Establish written procedures outlining the steps for preparing, reviewing, and approving FFRs, including reconciliation of expenditures between Workday, IDIS, and supporting documentation prior to submission; and
- Include a formal quarterly reconciliation process that: (i) compares grant activity recorded in IDIS to Workday; and (ii) requires staff to document and explain any timing differences or variances identified.

APPENDIX I – Tables for Findings I and II

Table III

**Summary of Missing Documentation for Key Eligibility Requirements
Fiscal Years 2024 and 2023**

Key Eligibility Requirements	Total Exceptions ²		Initial Enrollment Exceptions ¹		Recertification Exceptions ¹	
	Number	Percent	Number	Percent	Number	Percent
Tenant Rent Calculation Worksheet	6	10	1	3	5	17
Program Manager’s approval on Application Checklist	18	30	2	7	16	53

Notes: ¹Based on 30 samples each for Initial Enrollment and Recertification

²Based on total 60 samples for Initial Enrollment and Recertification

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Table IV

Delays in Submission of Federal Financial Reports for Closed Grants

No.	Federal Grant Number	Workday Grant Number	Reporting Period End Date	Due Date	Submission Date	Submission Delays (In Days)
1	MDH170031	Dynamics/494221	5/13/2024	9/10/2024	9/4/2024	N/A
2	MDH18-F001	Dynamics/490819	10/14/2021	2/11/2022	9/4/2024	936
3	MDH19F001	GRT000180	12/24/2022	4/23/2023	9/4/2024	500
4	MDH20FHW001	GRT000993	1/6/2024	5/5/2024	9/4/2024	122
5	MDH2001W021	GRT000991	11/16/2023	3/15/2024	9/4/2024	173
6	MDH2001W022	GRT000994	11/16/2023	3/15/2024	9/4/2024	173
7	MDH190002	GRT000182	8/12/2023	12/10/2023	9/4/2024	269

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Table V

Comparison of Awarded Amount and Billed Amount (Rounded)

No.	Federal Grant Number	Awarded Amount (Budget)	Amount Per FFR (Billed Amount)	City Billed Less than Awarded
		A	B	(B-A)
1	MDH170031	\$1,424,500	\$1,075,573	\$(348,927)
2	MDH18-F001	8,417,340	8,310,945	(106,395)
3	MDH19F001	8,380,304	8,138,404	(241,900)
4	MDH20FHW001	1,208,711	1,053,282	(155,429)
5	MDH2001W021	156,778	132,277	(24,501)
6	MDH2001W022	158,847	149,230	(9,617)
7	MDH190002	1,405,950	1,376,157	(29,793)
		\$21,152,430	\$20,235,868	\$(916,562)

APPENDIX II - Management’s Response to the Audit Report

Date: February 12, 2026

To: Josh Pasch, City Auditor

Subject: Management Response to Audit Report:
Biennial Performance Audit Report on Mayor’s Office of Homeless Services
for the Fiscal Years Ended June 30, 2024 and 2023

Our responses to the audit report findings and recommendations are as follows:

Recommendation I: We recommend the Director of MOHS:

- Update the HAP Program Manual to incorporate a formal, independent QC process;
- Apply the requirements of the HAP Program Manual consistently, including ensuring that the Program Manager reviews and approves all recertifications; and
- Provide periodic training and oversight to the HAP program staff to ensure compliance with the HAP Program Manual.

Management Response / Corrective Action Plan

Agree **Disagree**

Response: MOHS will implement corrective measures to ensure HAP Program eligibility and quality control reviews are performed in accordance with the HAP Program Manual.

Corrective Actions

1. Tenant Rent Calculation Worksheets

MOHS now requires that supporting rent calculation worksheets be created at the time of certification and included in the file prior to supervisory review.

2. Program Manager Recertification Review

The Program Manager now completes supervisory reviews for 30 percent of monthly recertifications, and the HAP Program Manual was updated on December 5, 2025 to formalize this requirement.

3. Independent Quality Control (QC)

MOHS will establish an independent QC process to ensure second-level review is not performed by staff responsible for initial approval. Duties are separated to maintain internal control integrity.

4. Staff Training

Annually, targeted and documented retraining on the HAP Program Manual will be completed, covering documentation requirements, recertification standards, rent calculation support, and QC expectations.

Implementation Date: April 30, 2026

Responsible Personnel

- D'Andra Pollard, Program Manager
- Lakeysha Williams, Deputy Director

Recommendation II:

We recommend the Director of MOHS update and implement the MOHS’ *Grant Administration Compliance and Fiscal Manual* to:

- Track FFR deadlines and strengthen internal review processes to ensure timely and accurate submission;
- Establish written procedures outlining the steps for preparing, reviewing, and approving FFRs, including reconciliation of expenditures between Workday, IDIS, and supporting documentation prior to submission; and
- Include a formal quarterly reconciliation process that: (i) compares grant activity recorded in IDIS to Workday; and (ii) requires staff to document and explain any timing differences or variances identified.

Management Response / Corrective Action Plan

Agree **Disagree**

Response: MOHS agrees with Recommendation II. The MOHS Grant Administration Compliance and Fiscal Manual has been updated to incorporate strengthened controls over Federal Financial Reporting, reconciliation, and grant closeout procedures.

The updated manual now includes the following processes:

Federal Financial Reporting (FFR) Deadline Tracking and Monitoring

MOHS will establish a centralized Federal Grants Tracking Log that includes award amounts, drawdown balances (IDIS), general ledger balances (Workday), FFR due dates, closeout deadlines, and submission status.

Reporting deadlines will be monitored through a shared fiscal calendar with automated reminders. The log will be reviewed regularly by Fiscal leadership to ensure timely submission of all required reports.

Written FFR Preparation, Review, and Approval Procedures

The updated Fiscal Manual will now include a formal Standard Operating Procedure (SOP) governing the preparation and submission of FFRs. The SOP requires:

- Reconciliation of expenditures recorded in Workday to IDIS prior to FFR preparation;
- Documentation of reconciliation worksheets and supporting schedules;
- Supervisory review and approval of reconciliations;

- Executive review prior to submission; and
- Retention of a complete closeout packet supporting reported expenditures.

Each grant closeout file is now required to contain supporting general ledger detail, IDIS reports, reconciliation documentation, and confirmation of FFR submission.

Formal Quarterly Reconciliation Process

The Fiscal Manual now requires a documented quarterly reconciliation comparing grant activity recorded in IDIS to Workday.

This process requires:

- Identification and documentation of any timing differences or variances;
- Written explanation of discrepancies;
- Supervisory review and sign-off; and
- Escalation of unresolved issues to executive leadership.

Quarterly reconciliation compliance is monitored by Fiscal leadership.

MOHS acknowledges that prior staffing transitions and system conversions contributed to gaps in execution. The updated Fiscal Manual establishes clear accountability, documentation standards, and supervisory oversight to ensure sustained compliance with federal requirements and Administrative Manual 413.

Implementation Date: July 1, 2026

Responsible Personnel

- Sade Creighton-Wade, Chief of Fiscal Services
- Ernestina Simmons, Executive Director

AUDIT TEAM

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