March 3, 2022

In keeping with generally accepted government auditing standards and Auditor’s Office policy, as authorized by city ordinance, the Audit Services Division has a responsibility to monitor and follow-up on audit recommendations to ensure city agencies address audit findings through appropriate corrective action and to aid us in planning future audits.

In our follow-up effort for the “Syringe Access and Sharps Disposal Programs” audit report issued in August 2020, we determined the Denver Department of Public Health and Environment fully or partially implemented seven of the eight recommendations in the original audit report. Despite the department’s efforts, auditors determined the risks associated with the audit team’s initial findings — such as documenting critical program activities and oversight responsibilities — have not been fully mitigated.

Additionally, we learned the department moved the programs we audited to a different part of the department, which may reintroduce some of the risks we noted in our initial findings. As a result, the Audit Services Division may revisit these risk areas in future audits to ensure the city takes appropriate corrective action.

The Highlights page in this report provides background and summary information about the original audit and the completed follow-up effort. Following the Highlights page is a detailed implementation status update for each recommendation.

I would like to express our sincere appreciation to the personnel in the Department of Public Health and Environment who assisted us throughout the audit and the follow-up process. For any questions, please feel free to contact me at 720-913-5000.

Denver Auditor’s Office

Timothy M. O’Brien, CPA
Auditor
Syringe Access and Sharps Disposal Programs
MARCH 2022

Objective
To assess whether the Denver Department of Public Health and Environment provides effective management and oversight of its syringe access and sharps disposal programs and to assess the extent to which the department measures progress and ensures the programs’ success.

Background
Denver’s Department of Public Health and Environment is dedicated to improving the city’s environmental and public health. The department oversees many services and has six divisions.

The syringe access and sharps disposal programs seek to reduce harm for people who use drugs and to reduce harm for the community at large by providing access to sterile injection equipment and safe disposal options.

The Department of Public Health and Environment needed to improve its strategies for data management and program evaluation — particularly regarding needs assessment, data collection, periodic evaluation, and documentation of evaluation results used to inform its decision-making.

The department could have coordinated more effectively with the syringe access providers to assess the success of the program in reducing harm for people who use drugs or inject substances.

The department also needed to take steps to improve its program management practices to determine the effectiveness of the syringe access and sharps disposal programs. The department should have assessed these programs to determine the extent to which the people who need these services are actually receiving them.

The Department of Public Health and Environment Could Have Better Managed Its Syringe Access and Sharps Disposal Programs, and It Could Have Better Assessed whether the Programs Are Effective in Reducing Harm

WHY THIS MATTERS
By having documented policies, standardized data, and adequate collaboration with service providers and program partners, the Department of Public Health and Environment will be better equipped to monitor the syringe access and sharps disposal programs and provide the best service possible to those who use them.

FULLY IMPLEMENTED 3
PARTIALLY IMPLEMENTED 4
NOT IMPLEMENTED 1
March 3, 2022

Action Since Audit Report
Syringe Access and Sharps Disposal Programs

8 recommendations proposed in August 2020

The Denver Department of Public Health and Environment fully implemented three recommendations we made in the original audit report, but five others have yet to be fully implemented or acted upon.

The department developed an evaluation plan to ensure it collects standardized and meaningful data to assess program operations and further program progress. The department also reviewed the city ordinance that restricted service providers, and it began advocating for changes to the ordinance.

However, risks remain from the five recommendations that were not fully implemented or acted upon. For example, the department did not provide policies and procedures that clarify oversight responsibilities and the critical activities of the multiple divisions involved in the programs' operations. In addition, the department conducted a staffing analysis, but the risk of insufficient staffing remains unmitigated with the transfer of the programs.

While the department developed an assessment plan to determine community needs for program services, it has yet to conduct the assessment because of a lack of funding. And lastly, the communication protocols the department developed involved only service providers, not external partners or other city agencies — both within Public Health and Environment and across city government — as we recommended.

Furthermore, during our follow-up, we learned Public Health and Environment transferred the syringe access and sharps disposal programs from its Community and Behavioral Health Division to its HIV Resources Section in November 2021. However, HIV Resources officials have yet to adopt Community and Behavioral Health’s revised processes.

Therefore, the risks Community and Behavioral Health mitigated by implementing our recommendations may reoccur.
FINDING | The Department of Public Health and Environment Could Better Manage Its Syringe Access and Sharps Disposal Programs, and It Could Better Assess whether the Programs Are Effective in Reducing Harm

Recommendation 1.1

REVIEW AND DOCUMENT CRITICAL PROGRAM ACTIVITIES – The Department of Public Health and Environment should review all critical syringe access and sharps disposal program oversight activities and ensure these processes are documented, communicated, and accessible to all staff involved in oversight, so the department can improve consistency of oversight activities, protect against the effects of staff turnover, and allow for more effective coordination of oversight activities.

AGENCY ACTION

Original target date for completion: Dec. 31, 2020

During our original audit, we identified uncoordinated and undocumented program oversight practices between various divisions of the Department of Public Health and Environment. Furthermore, the Community and Behavioral Health Division, which had primary responsibility for the programs, had staff who were new to their positions. These two factors increased the likelihood of miscommunication and misunderstanding of responsibilities and increased the need for documented processes that clearly outlined management priorities, dedicated resources, and defined expectations for communication and accountability.

For our follow-up, Community and Behavioral Health officials provided policies and procedures for each of the four divisions with program responsibilities: the Environmental Quality, Public Health Investigations, Community and Behavioral Health, and Administration divisions. However, these policies did not address coordination across divisions nor did they clarify each division’s responsibilities related to the programs.

Community and Behavioral Health officials also provided a staffing analysis as part of showing how the department implemented this recommendation. However, the analysis contained statements only of the department’s intent — not policies or procedures addressing oversight or partner divisions’ responsibilities.

As we began our follow-up efforts, Public Health and Environment officials told us they had transferred the syringe access and sharps disposal programs to the HIV Resources Section in November 2021.
Community and Behavioral Health officials said HIV Resources had rigorous policies and procedures related to oversight, but they provided none to us. HIV Resources officials said they intend to conduct program oversight activities — including working with stakeholders from other divisions and incorporating existing policies — but this was still in progress as of January 2022.

Therefore, we consider this recommendation not implemented.

**Recommendation 1.2**

**DETERMINE SUFFICIENCY OF ALLOCATED RESOURCES** – Once processes are documented in accordance with Recommendation 1.1, the Department of Public Health and Environment should conduct a formal staffing review and analysis to determine whether the current scope of the syringe access and sharps disposal programs are sufficiently staffed. The department should consider making changes either to scope or staffing levels as appropriate.

**AGENCY ACTION**

**Original target date for completion: Dec. 31, 2020**

Staff in the Community and Behavioral Health, Environmental Quality, and Public Health Investigations divisions who are involved in the syringe access and sharps disposal programs completed a job analysis questionnaire. Community and Behavioral Health officials analyzed the hours required to operate the two programs and then determined the number of full-time employees that should be allocated for the programs was consistent with previously estimated staffing needs.

However, as noted in the agency action for Recommendation 1.1, the programs were transferred to the HIV Resources Section in November 2021. HIV Resources officials said they have a different staffing structure and more resources to operate the programs — nullifying the staffing analysis Community and Behavioral Health conducted.

HIV Resources officials said they plan to analyze staffing in the future to determine the sufficiency of resources. Officials noted the responsibilities of the Environmental Quality Division and Public Health Investigations are unlikely to change.

While Community and Behavioral Health officials conducted the formal staffing review and analysis as recommended, the risk of insufficient staffing remains with the transfer of the programs to HIV Resources. Therefore, we consider this recommendation partially implemented. To be fully implemented, HIV Resources should conduct its own staffing analysis to ensure the syringe access and sharps disposal programs are sufficiently staffed.
Recommendation 1.3

DEVELOP AND CONDUCT A NEEDS ASSESSMENT – The Department of Public Health and Environment should leverage existing data and identify new data to inform a formal needs assessment that estimates the amount and location of Denver residents who need syringe access and sharps disposal services. This assessment should be updated periodically or every two years, in accordance with available resources and leading practices.

AGENCY ACTION

Original target date for completion: Dec. 31, 2020

Community and Behavioral Health Division officials developed an assessment plan, but we learned they have not conducted the assessment because the city did not approve funding before November 2021. We reviewed the assessment plan and found it meets the best practices identified in our original audit. Specifically, the plan includes information for:

- Leveraging existing data and identifying new data.
- Capturing the population that uses program services.
- Identifying gaps in service.
- Using results to make program decisions.
- Documenting the methodology used and the results.
- Using focus groups and surveys.

Officials in the HIV Resources Section — which took over the syringe access and sharps disposal programs in November 2021 — said they do not plan to do a large-scale needs assessment because of limited available funding. However, they said they plan to conduct annual client experience and satisfaction surveys in collaboration with service providers.

According to HIV Resources officials, these surveys will provide information on successes and opportunities for the programs based on clients’ experiences, which will inform annual priorities to improve services. However, the client surveys alone would not identify gaps in services, leverage existing data, and identify new data. They would fulfill only part of the assessment plan developed to address the risks identified in the original audit.

Because of this, we consider this recommendation only partially implemented.
Recommendation 1.4

COLLECT AND REPORT STANDARDIZED, COMPARABLE, AND MEANINGFUL PROGRAM DATA – The Department of Public Health and Environment should ensure it collects standardized, comparable, and meaningful (i.e., relevant, reliable, and complete) data regarding program operations. This should include holding service providers accountable for reporting comparable data by providing technical assistance to service providers and partners on data definitions and collection methods, as well as identifying other data necessary to develop key performance indicators for the syringe access and sharps disposal programs.

AGENCY ACTION

FULLY IMPLEMENTED

Original target date for completion: Dec. 31, 2020

Before the syringe access and sharps disposal programs moved to the HIV Resources Section in November 2021, Community and Behavioral Health Division officials worked with service providers to develop standardized and comparable performance indicators for assessing the two programs’ operations.

Community and Behavioral Health officials said they wanted to ensure the indicators were not only useful but also meaningful. We reviewed emails between division officials and service providers to confirm this. Community and Behavioral Health officials then used the information from service providers to develop an evaluation plan that included meaningful performance indicators and standardized data definitions.

HIV Resources officials said they plan to evaluate data collection tools and data to ensure the information they gather continues to meet the needs of the programs, which are now under their oversight. In addition, officials said they could expand the system HIV Resources uses for HIV program reporting to provide data for reports and queries and further evaluate the effectiveness of the syringe access and sharps disposal programs.

Meanwhile, Community and Behavioral Health officials said they revised contracts with service providers to strengthen reporting requirements and consequences for noncompliance. We confirmed the contracts included a quarterly reporting schedule, but we noted they did not include specific consequences for noncompliance. We also noted the contracts expired on Dec. 31, 2021, but officials said they were working on extending the contracts.

While contractual consequences may strengthen the city’s ability to hold providers accountable for submitting quarterly reports on time, we note in the discussion for Recommendation 1.5 that the division uses these quarterly reports to make decisions related to funding based on performance. We feel this drives the service providers’ motivation to submit information on time to ensure they continue to receive funding.
Because Community and Behavioral Health officials developed an evaluation plan with standardized and comparable data to evaluate program operations and because the division revised service providers' contracts to include specific reporting requirements, we consider this recommendation fully implemented.

**Recommendation 1.5**

**EVALUATE PROGRAM PERFORMANCE AND INCORPORATE RESULTS IN DECISION-MAKING** – The Department of Public Health and Environment should evaluate program processes and determine outcomes to assess program performance, identify barriers, and develop solutions. In accordance with leading practices, this evaluation should be conducted periodically on a defined timeline, involve stakeholders in design and reporting, and serve as the foundation for ongoing quality improvement and management decision-making. The department should document those decisions to further inform program progress.

**AGENCY ACTION**

**FULLY IMPLEMENTED**

*Original target date for completion: Dec. 31, 2020*

In the first quarter of 2021, Community and Behavioral Health Division officials implemented the evaluation plan discussed in the agency’s action for Recommendation 1.4. We reviewed quarterly performance reports service providers submitted in 2021. Information in these performance reports included data on the number of unique individuals serviced, syringe return rates, the number of opioid overdose kits distributed, and the number of referrals or services provided.

In addition, we reviewed quarterly summary reports service providers submitted that included additional information, such as their progress on contractually required activities, significant barriers to that progress, program changes, and any syringe cleanup activities in the community.

Community and Behavioral Health officials use the information in the reports, along with other communication from service providers, to make program decisions, including solutions to the identified barriers.

For example, one service provider indicated it was distributing more opioid overdose kits, but it lacked funding from state agencies that previously distributed the product to service providers. Although Community and Behavioral Health's plan to add funding to cover the cost of the product was denied, the division provided additional kits to service providers with help from the HIV Resources Section.

Additional needs identified in the quarterly summary reports we reviewed included food and other basic needs, as well as harm reduction supplies.
Division officials also use the quarterly performance and summary reports during the contract renewal process to determine whether to continue funding.

While the division implemented processes to evaluate performance and make program decisions, stakeholders were not involved in the design and reporting process of the evaluation plan. Division officials said the lack of approved funding during plan development impeded their efforts to bring stakeholders together.

Because the division made strides to develop and implement processes to evaluate program performance by implementing the evaluation plan and because officials provided evidence that they used the data they collected to make program decisions, we consider this recommendation fully implemented.

Recommendation 1.6

DEVELOP COMMUNICATION PROTOCOLS – The Department of Public Health and Environment should develop formal communication protocols with internal and external partners to inform and improve program evaluation and program performance. This should include involving providers, division personnel within Public Health and Environment, and other city partners—such as Denver 311, the 911 Emergency Communications Center, and the Parks and Recreation Department—in identifying and revising data collection, reporting, and program evaluation processes as relevant to program needs.

AGENCY ACTION

Original target date for completion: Dec. 31, 2020

Officials in the Community and Behavioral Health Division surveyed the syringe access and sharps disposal service providers about ways to improve communication, such as their preferences for how to hold meetings and how often.

Using these results, division officials developed a communication protocol outlining their plans to interact with the service providers. The protocol included monthly emails to providers, semiannual or annual meetings with all providers, and two annual meetings with each provider—one for contract discussions and another to conduct site visits.

Division officials shared an outline of the communications plan and their expectations for how often they plan to communicate with providers. Community and Behavioral Health officials also provided documentation of their monthly emails, annual meetings, and individual meetings with the providers. Emails and meetings discussed information such as data
collection, reporting, budgeting, funding opportunities, invoice processing, and contract requirements.

HIV Resources Section officials said they plan to have quarterly meetings with the providers and may adjust communication processes in the future.

However, we noted Community and Behavioral Health officials did not involve other Public Health and Environment divisions or any other external partners when developing this communication protocol, as we had recommended. Including other Public Health and Environment divisions — as well as external partners — supports clear lines of communication, promotes trust, and allows for proper monitoring and assessing of contractual obligations. Because of this, we consider this recommendation only partially implemented.

Recommendation 1.7
DEVELOP AND DOCUMENT POLICIES AND PROCEDURES – The Department of Public Health and Environment should develop and document policies and procedures and implement those to ensure it appropriately monitors contract compliance. These policies should clarify and formalize roles within Public Health and Environment related to the syringe access service providers.

AGENCY ACTION
Original target date for completion: Dec. 31, 2020

The original audit found the department lacked specific contract-monitoring activities, such as providing direction to syringe access service providers on when and to whom they should submit proof of notification when a provider moves to a new location. In addition, we noted the department lacked ways to ensure contracted providers completed the mandatory quarterly reports accurately and on time, and it did not have documented procedures to ensure providers submitted other required deliverables on time.

During our follow-up efforts, Community and Behavioral Health officials provided us with a policy and procedure that addressed general contract-monitoring activities and practices for the syringe access programs. The policy was still in draft form as of January 2022.

We reviewed providers’ contracts and found they included the three contract-monitoring activities recommended in our original audit. We also found completed site-visit checklists — a procedure included in the draft policy — for all three providers in 2021.

However, because the policy still needs to be finalized, we consider this recommendation only partially implemented.
**Recommendation 1.8**

**REVIEW CITY ORDINANCE** – The Department of Public Health and Environment should identify the appropriate stakeholders to gather the necessary information and feedback to determine whether the existing syringe access ordinance is appropriate. If the department determines the ordinance is not, the department should document those suggested changes and work through the appropriate channels to advocate for changing the ordinance.

**AGENCY ACTION**

**FULLY IMPLEMENTED**

**Original target date for completion: Dec. 31, 2020**

Our original audit found city ordinance restricts how many providers can operate and where, which is uncommon when compared to other cities.

During our follow-up, we found Public Health and Environment officials began advocating in December 2020 to change the ordinance governing syringe access programs, in an attempt to increase the allowable number of syringe access providers and to remove restrictions on site locations. Officials presented the recommended changes to the Mayor’s Office’s Policy Review Committee in spring 2021.

In late summer, Public Health and Environment officials met with several members of the City Council. However, in the fall, the department’s legislative liaison advised officials to pause their outreach to the City Council and resume their efforts in early 2022, so they could address council members’ concerns related to the proposed ordinance changes. As of January 2022, the department’s outreach efforts remained on hold.

Because department officials began advocating to change city ordinance, we consider this recommendation fully implemented. However, the department should continue to monitor this effort to ensure that progress continues in 2022.
The Auditor of the City and County of Denver is independently elected by the residents of Denver. He is responsible for examining and evaluating the operations of city agencies and contractors for the purpose of ensuring the proper and efficient use of city resources. He also provides other audit services and information to City Council, the mayor, and the public to improve all aspects of Denver’s government.

The Audit Committee is chaired by the Auditor and consists of seven members. The Audit Committee assists the Auditor in his oversight responsibilities regarding the integrity of the city’s finances and operations, including the reliability of the city’s financial statements. The Audit Committee is structured in a manner that ensures the independent oversight of city operations, thereby enhancing residents’ confidence and avoiding any appearance of a conflict of interest.

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We deliver independent, transparent, and professional oversight in order to safeguard and improve the public’s investment in the City and County of Denver. Our work is performed on behalf of everyone who cares about the city, including its residents, workers, and decision-makers.