



City of New York

OFFICE OF THE COMPTROLLER

Scott M. Stringer
COMPTROLLER



MANAGEMENT AUDIT

Marjorie Landa

Deputy Comptroller for Audit

Audit Report on the Department of
Health and Mental Hygiene's Response
and Follow-up to Pest Control
Complaints

MJ19-070A

June 30, 2021

<http://comptroller.nyc.gov>



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SCOTT M. STRINGER

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To the Residents of the City of New York:

My office has audited the New York City (City) Department of Health and Mental Hygiene (DOHMH) to determine whether it adequately responded to and followed up on pest control complaints in a timely manner. We perform audits such as this to ensure that City agencies are operating in accordance with their procedures and in the best interest of the public.

While the audit found that DOHMH generally responded to pest control complaints in a timely manner, we identified some weaknesses in the agency's efforts relating to the supervision of inspectors and follow-up of deficiencies identified. Specifically, the audit found (1) that supervisors did not consistently meet the minimum requirement that each field inspector receives one supervisory check a month and (2) that DOHMH does not have an adequate mechanism to assess whether supervisory checks were performed timely. The audit also found that a significant percentage of sampled properties that failed the compliance inspections did not receive the recommended assessments and clean-ups in a timely manner, if at all. In addition, the audit found that sampled complaints for which extermination attempts were unsuccessful did not receive the required follow-up actions.

The audit makes 14 recommendations, including that the DOHMH ensure that all active pest control inspectors receive the requisite number of monthly supervisory checks and that supervisors promptly take exterminators' recommended actions for DOHMH-exterminated properties to ensure that properties needing further remediation actions receive them.

The results of the audit have been discussed with DOHMH officials, and their comments have been considered in preparing this report. Their complete written response is attached to this report.

If you have any questions concerning this report, please e-mail my Audit Bureau at audit@comptroller.nyc.gov.

Sincerely,

Scott M. Stringer

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THE CITY OF NEW YORK OFFICE OF THE COMPTROLLER MANAGEMENT AUDIT

Audit Report on the Department of Health and Mental Hygiene's Response and Follow-up to Pest Control Complaints

MJ19-070A

EXECUTIVE SUMMARY

The objective of this audit was to determine whether the New York City (City) Department of Health and Mental Hygiene (DOHMH) adequately responded to and followed up on pest control complaints in a timely manner.

DOHMH is responsible for protecting and promoting the physical and mental health of all New Yorkers and enforcing the City Health Code. Article 151 of the City Health Code contains regulations relating to pest (e.g., rodent) control. That article states that property owners are responsible for cleaning their properties and eliminating conditions that lead to such rodent infestations. DOHMH's Pest Control Services division (PCS) is tasked with heading the agency's pest control efforts. PCS operates out of five regional offices in four boroughs, with two different locations in Brooklyn (Staten Island is covered by Brooklyn South).

DOHMH receives pest control complaints from the public through the City's NYC311 website and the NYC311 Mobile App. Complaints are assigned to the regional offices responsible for covering the geographic areas where the properties referenced in complaints are located. If an inspector finds signs of active rat infestation at a location, the inspector issues a Commissioner's Order to Abate (COTA) to the property owner, which orders the property owner to correct the deficient conditions. If it is determined after PCS conducts a follow-up inspection, known as a compliance inspection, that the conditions have not been corrected, the inspector reports that the property failed the compliance inspection, and PCS will issue a Notice of Violation (NOV) to the property owner. Depending on the severity of the problem, an inspector may recommend that either an extermination or cleanup be performed at the property, subject to supervisory approval.

To track complaints from registration to close-out, PCS uses a computer system called the Veterinary, Rodent, and Vector Surveillance System (VRVSS). PCS requires its inspection personnel in the field to use handheld devices to record the conditions they identify during inspections and any actions taken. In January 2020, DOHMH completed an upgrade of VRVSS. In Fiscal Year 2018, PCS received 20,946 complaints (according to data from VRVSS).

Audit Findings and Conclusion

The audit found that DOHMH generally responded to pest control complaints, specifically by attempting to inspect the reported conditions, in a timely manner. However, the agency needs to improve its performance with regard to its follow-up action when property owners do not satisfactorily address documented conditions that constitute or lead to rat infestations and the agency needs to take additional remediation actions.

Specifically, our analysis of 50 sampled records for locations that failed DOHMH's follow-up compliance inspections revealed that a significant proportion—9 cases (18 percent)—were not assessed for possible cleanup within DOHMH's 90-business-day deadline. Of the nine, five were not assessed at all. Because DOHMH will only perform a cleanup if an assessment deems it to be warranted, no cleanups could be performed—even if the conditions warrant such action—while the assessments remained undone. In fact, as noted, DOHMH closed out 5 of the 9 sampled cases without ever assessing the locations as recommended by its own inspectors and supervisors. The agency's inaction at that critical stage of its process increased the risk that the deficient conditions and associated health risks will persist uncorrected.

With regard to initial inspections, the audit found that DOHMH has generally met its goals to conduct initial inspection attempts of pest control complaints within its established guidelines. Specifically, we found that PCS attempted inspections within 10 business days for 81 percent of the complaints it received, which exceeds its stated goal of 70 percent. Additionally, although we noted a few exceptions, we found that for complaints closed out because inspectors could not gain access to the properties, inspectors reportedly made the two required inspection attempts.

However, we also found that supervisors did not consistently meet the minimum requirement to perform one monthly supervisory check per field inspector and that DOHMH does not have an adequate mechanism to assess whether supervisory checks were performed timely. VRVSS also lacks dedicated fields to report the number of follow-up inspections that supervisors conducted, further limiting DOHMH's ability to assess supervisory oversight of its field inspectors.

Additionally, as noted above, the audit found that a significant percentage of sampled properties that failed the compliance inspections did not receive the recommended assessments and cleanups that were or may have been warranted in a timely manner, if at all. The audit also found that sampled complaints for which extermination attempts were unsuccessful did not receive the required follow-up actions.

Under other matters, we found evidence that DOHMH has escalated actions for a little over one-third of the properties that received three or more complaints during our scope period.

After we shared our concerns with DOHMH regarding our preliminary findings, DOHMH informed us that its new and enhanced VRVSS (referred to as VRVSS 2), which became operational in January 2020, addresses some of those concerns. Some of the enhancements include the ability to more easily: (1) search location case histories to identify duplicate complaints; and (2) identify properties with multiple complaints and inspection activities for consideration of more focused remediation actions.

Nonetheless, certain weaknesses remain. Specifically, DOHMH is still hindered in the way it tracks supervisory checks—leading to inadequate oversight of field inspectors—and in its handling of duplicate complaints to ensure that those complaints are appropriately labeled and addressed.

Unless DOHMH strengthens its controls over its oversight of pest control complaints and associated compliance inspections and cleanups, the agency will continue to incur an elevated risk that deficient conditions may go uncorrected, increasing the risks to public health.

Audit Recommendations

Based on the audit, we make 14 recommendations, including the following:

- DOHMH should ensure that supervisory checks are not erroneously treated as second attempts at inspection for purposes of determining whether a complaint should be closed due to inspectors' inability to gain access.
- DOHMH should ensure that all active pest control inspectors receive the requisite number of supervisory checks monthly to ensure that supervisors are aware of any deficiencies in the inspections and that those deficiencies are corrected.
- DOHMH should consider modifying VRVSS 2 to require PCS supervisors to identify in a designated field whether each supervisory check they conduct is a follow-up visit or an accompaniment.
- DOHMH supervisors should ensure that they promptly take exterminators' recommended actions for DOHMH-exterminated properties, including the completion of second compliance inspections, to ensure that properties needing further remediation actions receive them.
- DOHMH should ensure that it utilizes enhancements to VRVSS to identify properties that are eligible for elevated compliance inspections and proceed with such inspections.
- DOHMH should increase its efforts to refer properties with chronic rodent infestation problems for more enhanced pest control actions.

Agency Response

In its response, DOHMH generally agreed with the audit's 14 recommendations.

AUDIT REPORT

Background

DOHMH is responsible for protecting and promoting the physical and mental health of all New Yorkers and enforcing the City Health Code. Article 151 of the City Health Code contains regulations relating to pest (e.g., rodent) control. That article states that property owners are responsible for cleaning their properties and eliminating conditions that lead to such rodent infestations. DOHMH's PCS is tasked with heading the agency's pest control efforts. PCS operates out of five regional offices in four boroughs, with two different locations in Brooklyn (Staten Island is covered by Brooklyn South).

DOHMH receives pest control complaints from the public through the City's NYC311 website and the NYC311 Mobile App. Complaints are assigned to the regional offices responsible for covering the geographic areas where the properties referenced in complaints are located. If an inspector finds signs of active rat infestation at a location, the inspector issues a COTA to the property owner, which orders the property owner to correct the deficient conditions. After allowing time for the COTA to be delivered and the owner to take action, PCS conducts a follow-up inspection, known as a compliance inspection, to determine whether the conditions have been corrected.¹ If the conditions have not been corrected, the inspector reports that the property failed the compliance inspection, and PCS will issue a NOV to the property owner. Depending on the severity of the problem, an inspector may recommend that either an extermination or cleanup be performed at the property, subject to supervisory approval. For instances in which a cleanup is recommended, PCS must first conduct an assessment to determine whether the cleanup is warranted. If DOHMH performs an extermination and/or cleanup, the Department of Finance bills the property owner for the cost of the service.

To track complaints from registration to close-out, PCS uses a computer system called the VRVSS. PCS requires its inspection personnel in the field to use handheld devices to record the conditions they identify during inspections and any actions taken. Inspectors upload the information from their handheld devices to VRVSS when they return to the office, generally on the same day or the next business day after conducting the inspections. In January 2020, DOHMH completed an upgrade of VRVSS.

When responding to complaints, inspectors may also conduct "geographic" inspections in which they look for signs of active rat infestation at other properties in the nearby complaint vicinity to determine whether there are any additional properties contributing to rodent conditions in the community. PCS has instituted a "Rat Indexing Program"—a proactive inspection program in which PCS identifies areas with large infestations of rats, inspects every block and lot, and takes rodent control actions, including extermination and cleanup where appropriate, for properties in that vicinity.

DOHMH also directs the Neighborhood Rat Reduction Initiative (NRR), in coordination with several other City agencies with a goal of addressing the underlying conditions that support rat colonies, while also employing traditional rat control measures. The initiative launched in the summer of 2017 and focused on rat-infested zones in the Bronx, Brooklyn, and Manhattan. The

¹ PCS notifies the owner to correct the condition within five days of the COTA mailing and will conduct the compliance inspection within nine days of the mailing.

initiative attempts to improve neighborhood sanitation by eliminating the food, water and habitat that rats need to survive.²

In Fiscal Year 2018, PCS received 20,946 complaints (according to data from VRVSS).

Objective

The objective of this audit was to determine whether DOHMH is adequately responding to and following up on pest control complaints in a timely manner.

Scope and Methodology Statement

We conducted this 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 objective. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objective. This audit was conducted in accordance with the audit responsibilities of the City Comptroller as set forth in Chapter 5, §93, of the New York City Charter.

The audit scope was July 1, 2017 through March 10, 2021. Please refer to the Detailed Scope and Methodology at the end of this report for the specific procedures and tests that were conducted.

Discussion of Audit Results with DOHMH

The matters covered in this report were discussed with DOHMH officials during and at the conclusion of this audit. A preliminary draft report was sent to DOHMH and discussed at an exit conference held on May 28, 2021. On June 4, 2021 we submitted a draft report to DOHMH with a request for written comments. We received a written response from DOHMH on June 18, 2021. In its response, DOHMH generally agreed with the audit's 14 recommendations.

However, DOHMH disagreed with two of the audit's findings concerning DOHMH's follow-up actions on properties that failed compliance inspections, and its supervisory oversight of field inspectors. Regarding DOHMH's follow-up actions on properties that fail compliance inspections, DOHMH stated,

The auditors state that they analyzed "50 sampled records for locations that failed DOHMH's follow-up compliance inspections" and that this "revealed that a significant proportion—9 cases (18 percent) – were not assessed for possible cleanup within DOHMH's 90-business day deadline." DOHMH argues that these findings lack context; they do not indicate that property assessments are a small percentage of the total number of properties that failed compliance inspections. Only 4% of failed compliance inspections were assessed for cleanup in 2018. In 2018 there were just over 500 assessments of properties assigned, and fewer than 200 properties cleaned (cleanup is the step after assessment). The small numbers involved (relative to the other work that DOHMH does) presents logistics

² The core members of the NRR work group include the Mayor's Office, New York City Housing Authority, the Department of Parks and Recreation, the Department of Sanitation, and the Department of Education. The work group is also attended by the Office of Management and Budget, Mayor's Office of Tenant Rights, and the Mayor's Community Affairs Unit.

challenges and work must be done by the program going forward to reduce the variances in service times.

We do not agree with DOHMH's argument that its failure to perform the recommended property assessments and cleanups in a timely manner is explained or mitigated by the fact that property assessments are a small percentage of the total number of properties that failed compliance inspections. Regardless of the actual number of properties involved, the fact that they were recommended for assessments indicates that the DOHMH inspectors found the conditions to be severe. The severity of the conditions for the nine sampled locations cited in the report were such that PCS personnel requested second compliance, assessments, and/or cleanups. As such, DOHMH had a responsibility to ensure that it took all appropriate and required actions to help correct the severe conditions its own staff identified. By DOHMH's failure to perform the required assessments and cleanups within the established timeframes, those conditions were allowed to persist, increasing the public's exposure to potential health hazards. DOHMH's inaction at that critical stage of the process undermined the purpose of the inspections DOHMH had already conducted and defeated the point of the pest control program itself. Consequently, we urge DOHMH to reconsider and ensure that all necessary actions, including assessments, cleanups, exterminations, and second compliance inspections are performed when recommended and warranted.

Regarding the supervisory oversight of field inspectors, DOHMH disagreed with the audit's finding that supervisors did not consistently meet the minimum requirement to perform one monthly supervisory check per field inspector. DOHMH stated,

During the one-year period analyzed in the audit supervisors conducted more than 6,600 supervisory checks, monitoring the work of all 55 PCS inspectors. In cases where the supervisors did not meet the requirement to check at least one inspection per month per inspector, it was typically because they or the inspector did not work the full number of days in the month due to leave-days, training days, or other reasons. To maximize supervisor checks and document the reasons where targets are not met, the PCS Quality Assurance team will improve scheduling and documentation.

DOHMH's argument that supervisors did not meet the supervisor check requirement because "inspectors did not work the full number of days in the month due to leave-days, training days, or other reasons" holds no merit. DOHMH's written policies and procedures do not specify a predetermined minimum number of days that an inspector conducts inspections. In addition, the audit's analysis took into account the number of PCS inspections each inspector conducted and included only those inspectors who performed inspections during each month reviewed. Further, the volume of supervisory checks conducted during the scope period (Fiscal Year 2018) and the number of inspectors employed during that period reveals that, on average, 11 checks were conducted per inspector per month, suggesting that sufficient resources were available to enable DOHMH to meet the minimum requirement of at least one supervisory check per month for each inspector—had DOHMH allocated its supervisory resources accordingly. While we are encouraged by PCS' initiative to document the reasons when the target of one supervisory inspection per month per inspector is not met, we encourage DOHMH to ensure that the planned improvements in scheduling and documentation result in the desired improvement in the rate of documented supervisory checks for all of its inspectors.

The full text of the DOHMH response is included as an addendum to this report.

FINDINGS AND RECOMMENDATIONS

DOHMH generally responded to pest control complaints, specifically by attempting to inspect the reported conditions, in a timely manner. However, the agency needs to improve its performance with regard to its follow-up actions when property owners do not satisfactorily address documented conditions that constitute or lead to rat infestations and the agency needs to take additional remediation actions.

Specifically, our analysis of 50 sampled records for locations that failed DOHMH's follow-up compliance inspections revealed that a significant proportion—9 cases (18 percent)—were not assessed for possible cleanup within DOHMH's 90-business-day deadline. Of the nine, five were not assessed at all. Because DOHMH will only perform a cleanup if an assessment deems it to be warranted, no cleanups could be performed—even if the conditions warrant such action—while the assessments remained undone. In fact, as noted, DOHMH closed out 5 of the 9 sampled cases without ever assessing the locations as recommended by its own inspectors and supervisors. The agency's inaction at that critical stage of its process increased the risk that the deficient conditions and associated health risks will persist uncorrected.

In addition, DOHMH has generally met its goals to conduct initial inspection attempts of pest control complaints within its established guidelines. Specifically, we found that PCS attempted inspections within 10 business days for 81 percent of the complaints it received, which exceeds its stated goal of 70 percent. Additionally, although we noted a few exceptions, we found that for complaints closed out because inspectors could not gain access to the properties, inspectors reportedly made the two required inspection attempts.

However, we also found that supervisors did not consistently meet the minimum requirement to perform one monthly supervisory check per field inspector and that DOHMH does not have an adequate mechanism to assess whether supervisory checks were performed timely. VRVSS also lacks dedicated fields to report the number of follow-up inspections that supervisors conducted, further limiting DOHMH's ability to assess supervisory oversight of its field inspectors.

Additionally, as noted above, the audit found that a significant percentage of sampled properties that failed the compliance inspections did not receive the recommended assessments and cleanups that were or may have been warranted in a timely manner, if at all. The audit also found that sampled complaints for which extermination attempts were unsuccessful did not receive the required follow-up actions.

Under other matters, we found evidence that DOHMH has escalated actions for a little over one-third of the properties that received three or more complaints during our scope period.

After we shared our concerns with DOHMH regarding our preliminary findings, DOHMH informed us that its new and enhanced VRVSS (referred to as VRVSS 2), which became operational in January 2020, addresses some of those concerns. Some of the enhancements include the ability to more easily: (1) search location case histories to identify duplicate complaints; and (2) identify properties with multiple complaints and inspection activities for consideration of more focused remediation actions.

Nonetheless, certain weaknesses remain. Specifically, DOHMH is still hindered in the way it tracks supervisory checks—leading to inadequate oversight of field inspectors—and in its handling of duplicate complaints to ensure that those complaints are appropriately labeled and addressed.

Unless DOHMH strengthens its controls over its oversight of pest control complaints and associated compliance inspections and cleanups, the agency will continue to incur an elevated risk that deficient conditions may go uncorrected, increasing the risks to public health.

DOHMH Generally Met Its Goals to Respond to Complaints Timely

According to DOHMH's written policies and procedures, staff must make an inspection attempt for at least 70 percent of 311 pest control complaints within 10 business days (approximately 2 weeks) of the agency's receipt of the complaints, 90 percent within 30 business days (approximately 1½ months), and 100 percent within 90 business days (approximately 4+ months).

We found that for the 20,946 complaints that DOHMH reported receiving in Fiscal Year 2018, DOHMH data indicates that the agency achieved its 10- and 30-business day goals, making an inspection attempt for 16,933 complaints (81 percent) within 10 business days, and 20,523 complaints (98 percent) within 30 business days. Table I below shows a frequency distribution of the number of days between the complaint and initial inspection attempt dates.

Table I

Frequency Distribution of the Timeliness of DOHMH Initial Inspection Attempts (using business days)

Number of Business Days Between Complaint Receipt and DOHMH Initial Inspection Attempt	Number of Complaints	% of Total Complaints	Cumulative Number of Complaints	Cumulative % of Complaints
Within 10 business days	16,933	80.84%	16,933	80.84%
11-30 business days	3,590	17.14%	20,523	97.98%
31-90 business days	384	1.83%	20,907	99.81%
91-180 business days	28	0.13%	20,935	99.95%
Over 180 business days	11	0.05%	20,946	100.00%
Total	20,946	99.99%		

Of the 11 complaints where an inspection was not attempted within 180 business days, seven remained open beyond one calendar year. Of these, six complaints were administratively closed because they were not actionable due to limited information and/or no address was found, and one complaint was a mosquito issue that should have been referred to a different unit within DOHMH. DOHMH officials stated that a supervisor mishandled an attempt to close these seven complaints and inadvertently left them open.

“No Access” Complaints Generally Closed in Accordance with DOHMH Pest Control Procedures

According to DOHMH pest control procedures, a complaint should be closed if inspectors are unable to gain access to the property after two inspection attempts. In cases where an inspector is not able to gain access to a property to conduct an inspection, the inspector should record the inspection result as “No Access.” Two “No Access” attempts will result in VRVSS automatically

closing out the job ticket for the complaint (each complaint is assigned a job ticket ID for tracking purposes).

Our review of the Fiscal Year 2018 complaints found that 1,342 (98 percent) of the 1,369 complaints closed with a “No Access” outcome were closed after the two required “No Access” attempts. PCS officials stated that the remaining 27 complaints were prematurely closed by VRVSS due to a “system error.” For these complaints, the system incorrectly treated supervisory checks performed after the “No Access” inspections as the second inspection attempts and closed the complaints. Closing out complaints after only one “No Access” attempt unnecessarily limits the agency’s opportunity and ability to address them.

Justifications for Rejecting Inspection Results Were Generally Documented

For the inspection results reported by an inspector to be accepted into VRVSS, they must be approved by a supervisor. PCS officials provided various reasons that inspection results would be rejected, including the following: (1) an inspector’s notes were not sufficiently detailed; (2) an inspector indicated in the inspection report’s checklist that he/she observed live rats but did not note that observation in the inspection notes; (3) an inspector did not inspect the interior of the property and only reported on the property’s exterior; and (4) an inspector incorrectly cited the inside of an apartment building as the source of an infestation that a supervisor determined was connected to street conditions, e.g., on a sidewalk or at the curb or involving a sewer in front of a building. According to DOHMH pest control inspection procedures, when a supervisor rejects an inspection result, s/he should provide a reason in the supervisor note section of VRVSS.

However, DOHMH management had not designed an input control in VRVSS to prevent the rejection of inspection result records without an entry in a field designated to record the reason for the rejection. Notwithstanding this deficiency, our review of 232 sampled complaints for which supervisors rejected the inspection results (covering both initial and compliance inspections) nonetheless found that supervisors provided justifications for 216 (93 percent) of them.

When supervisors fail to document the reasons for rejecting inspection results, it hinders DOHMH management’s ability to readily determine whether the rejections were valid, and increases the risk that inspectors will not be aware of the rejections or the reasons for them, potentially allowing inspectors to repeat the types of errors or omissions that caused the rejections.

VRVSS 2/Scope Update

On March 10, 2021, DOHMH officials demonstrated a new control in VRVSS 2 which requires supervisors to note in a comments box the reason(s) for rejecting inspections. In effect, supervisors can no longer reject inspection results without both selecting the reasons from a drop-down menu and including an explanation in a comments box.

Recommendations

1. DOHMH should ensure that supervisory checks are not erroneously treated as second attempts at inspection for purposes of determining whether a complaint should be closed due to inspectors’ inability to gain access.

DOHMH Response: “We agree with this recommendation. As we explained to the auditors, this was an error in the prior system. We do not have examples of this issue occurring in VRVSS 2, the new and enhanced data system, and believe this has been resolved.”

Auditor Comment: We are pleased that DOHMH agreed with this recommendation. While DOHMH explained to us that the issue was resolved in VRVSS 2, the agency

did not provide supporting documentation to show that VRVSS 2 has resolved the issue. Consequently, we encourage DOHMH to continue to review VRVSS 2 to ensure that this condition has been fully resolved.

2. DOHMH should ensure that the new control feature in VRVSS 2 is operating as intended and that a reason is documented for all rejected inspections.

DOHMH Response: “DOHMH has already implemented this. Documenting the inspection result, including the rejection reason is a required field in VRVSS 2. DOHMH explained to the auditors that this issue had already been addressed.”

Auditor Comment: We are pleased that DOHMH states that it has already implemented this recommendation. While DOHMH did inform us during the audit that the control was implemented in VRVSS 2, the agency did not provide documentation to show that the new control feature is operating as intended. Consequently, we encourage DOHMH to continue to review VRVSS 2 and regularly and affirmatively assess the inspection records it generates to ensure that this new control feature is working properly.

Improvement Needed Relating to Supervisory Oversight of Field Inspectors

DOHMH Does Not Consistently Meet Its Supervisory Review Protocol

Comptroller’s Directive #1, *Principles of Internal Control*, states that a “sound internal control system must be supported by ongoing activity monitoring occurring at various organizational levels and in the course of normal operations.” According to DOHMH pest control procedures, PCS supervisors are required to perform a minimum of one supervisory check per inspector per month. Supervisory checks involve supervisors either accompanying an inspector during an inspection or visiting and inspecting a property soon after an inspection has been conducted to compare the supervisor’s results with those of the inspectors. The procedures also call for supervisors to select a “representative sample of the total inspections performed for the supervisory check per month.”

However, in Fiscal Year 2018, we found that the PCS supervisors did not consistently meet the minimum requirement of one supervisory check per inspector per month. Additionally, we were unable to assess whether supervisory checks were performed of a representative sample of the total monthly inspections performed because neither the procedures nor PCS officials we contacted define what would constitute such a sample.

Although we found that PCS supervisors performed over 6,000 supervisory checks in Fiscal Year 2018, which is well over the minimum number of supervisory checks for some inspectors during the course of the year, DOHMH did not ensure that the minimum number of monthly supervisory checks per each inspector were consistently completed every month as required by DOHMH procedures. For the 55 Pest Control inspectors employed in Fiscal Year 2018, we found that 50 (91 percent) did not receive at least one supervisory check each month that they conducted inspections. In fact, 24 (43.6 percent) of the 55 inspectors did not receive a supervisory review for two or more consecutive months. Table II below shows a breakdown of the inspectors who did not receive a supervisory check in consecutive months.

Table II

Inspectors with Consecutive Months
without Supervisory Checks

Number of Consecutive Months without Supervisory Checks	Number of Inspectors	Percentage of Inspectors
6	1	1.8%
5	3	5.5%
4	1	1.8%
3	8	14.5%
2	11	20.0%
Subtotal	24	43.6%
0	31	56.4%
Total	55	100%

In one instance, an inspector went five consecutive months (July 2017 through November 2017) without receiving a supervisory check. The month in which supervisory checks resumed (December 2017), the inspector received three supervisory checks, including one that identified deficiencies relating to the inspector’s lack of thoroughness and failure to correctly cite health code violations. However, the inspector then went another five months without receiving a supervisory check.

In another instance, an inspector received supervisory checks in only two of the five months in which the inspector performed inspections during the year. During those two months (March and April 2018), the inspector received 29 supervisory checks and all of them identified various deficiencies—such as lack of thoroughness, failure to correctly cite health code violations and failure to notify the supervisor of public health hazards. However, the inspector did not receive any supervisory checks during the remainder of Fiscal Year 2018 (May and June 2018).

In both of these instances, the inspectors’ supervisors compounded their failure to perform monthly checks by not conducting timely follow-up to determine whether the inspector had corrected the deficiencies cited.

According to PCS officials, monthly supervisory checks could be missed due to persons being out sick or the transfer of an inspector or supervisor. However, these reasons do not adequately explain why approximately 91 percent of inspectors were not adequately monitored by their supervisors in any one month or that close to 44 percent of inspectors were not adequately monitored for two or more consecutive months.

Based on the high percentages of inspectors who did not receive the required supervisory checks, it appears that the regional directors—who are responsible for overseeing the supervisors—do not have an effective mechanism for monitoring supervisors’ compliance with the supervisory check requirement.

During the audit, PCS officials informed us that a Quality Assurance (QA) team was established in July 2019 to help ensure that supervisors meet the unit's goal for performing supervisory checks. Officials provided documentation (supervisory check reports, inspector productivity report, and list of pending jobs) that they claimed was evidence of the QA team's review. However, the QA team informed us that they do not look into whether a supervisory check was an accompaniment or a follow-up visit. (That issue is discussed in the following section of this report.) Thus, the establishment of the QA team has not filled the gap in DOHMH's processes for monitoring the supervisors' compliance with DOHMH's protocol for supervisory follow-up inspections.

Failure to perform periodic monitoring of the inspectors as required increases the risk that DOHMH will not identify and correct deficiencies in an inspector's inspection practices in a timely manner.

Limited Evidence That Supervisory Oversight of Field Inspectors Is Adequately Tracked

DOHMH has not developed effective mechanisms to monitor whether supervisory follow-up visits are being conducted in a timely manner.

Supervisors perform two types of supervisory checks—accompaniments and follow-up visits. In an accompaniment, a supervisor will join the inspector during an inspection and generally use it as a retraining opportunity. An accompaniment may also be conducted when a dangerous condition requires the presence of more than one person. In a follow-up visit, a supervisor will independently inspect a property after an inspector has inspected that property and compare the results with the inspector's finding. According to DOHMH pest control procedures, follow-up visits should be conducted no more than 48 hours after the inspector's visit.

Our review of the Supervisory Check Report that PCS uses to keep track of supervisory checks in VRVSS revealed that 6,629 supervisory checks were conducted during Fiscal Year 2018. However, DOHMH did not design VRVSS to have dedicated fields to identify whether a supervisory check is a follow-up visit or an accompaniment. Instead, supervisors may indicate in the comments section of a record whether a supervisory check is a follow-up visit or an accompaniment. In addition, the actual date that a supervisory check was performed is not captured by VRVSS. The "evaluation date" field in the Supervisory Check Report is instead the date that the supervisor uploads the supervisory check results into the system, which is not done until the supervisor returns to the office, one or several days after the supervisory check took place. To have a record of the actual date of the supervisory check, supervisors may record the date in the comments section of the report. However, during Fiscal Year 2018, only 6 of the 13 supervisors recorded the supervisory check dates in the comments section.

From our review of VRVSS for the 6,629 supervisory checks mentioned above, only 718 (11 percent) of them were described in the comments field as follow-up visits that the supervisors made on specified dates. Of those 718, we found that 69 (10 percent) were not conducted within 48 hours of the inspection as required. For the remaining 5,911 records, 342 were identified in the comments field as accompaniments, 41 were identified as follow-up visits without the supervisory check dates noted, and the remaining 5,528 were not designated as either follow-up visits or accompaniments.

Because a property's condition is reported as of a specific point in time and may change, it is important that the supervisors perform their supervisory checks within a relatively short time after the inspections to adequately assess an inspector's performance.

VRVSS 2/Scope Update

On March 8, 2021, PCS officials demonstrated a new feature in VRVSS 2 that is intended to prevent supervisors from scheduling follow-up visits more than 48 hours after the inspections are conducted. However, the supervisory check date (the evaluation date recorded by the system and captured on the Supervisory Check Report) still does not represent the actual date that the supervisory check was performed and should not be used to determine whether the 48-hour goal is met. In addition, VRVSS 2 still contains no dedicated fields to identify whether a supervisory check is a follow-up visit or an accompaniment.

Recommendations

3. DOHMH should ensure that all active pest control inspectors receive the requisite number of supervisory checks monthly to ensure that supervisors are aware of any deficiencies in the inspections and that those deficiencies are corrected.

DOHMH Response: “We generally agree with this recommendation. As stated above, if either the supervisor or the Public Health Sanitarian (PHS) is out on leave for some part of a month, then scheduling supervisory checks becomes difficult. The cases highlighted by the auditors on page 12, for example, concerned inspectors who were on modified duty or temporarily transferred to a different unit and were not conducting inspections that could be checked. These schedule changes made the correct tempo of supervisory checks difficult to maintain. To address these issues, we plan to make protocol changes and to enhance the activities of our Quality Assurance Team.”

Auditor Comment: Although we are pleased that DOHMH generally agreed with this recommendation, we disagree with its assertion that the shortfall in supervisory checks should be attributed to a lack of inspection activity by the inspectors who did not receive the required supervisory oversight. To the contrary, the two inspectors in question conducted numerous inspections in the multi-month periods we reviewed. The first inspector, cited on page 11 of this report, conducted a total of 1,805 inspections during the 10 months that the inspector received no supervisory checks, and the second inspector we cite conducted 1,455 inspections over the course of three months when the inspector received no supervisory checks. Accordingly, we urge the agency to fully implement the recommendation.

4. DOHMH should ensure that the PCS Regional Directors closely monitor the supervisors in their assigned areas to ensure that they are completing monthly supervisory checks on all inspectors and that those checks are done timely.

DOHMH Response: “We agree with this recommendation. DOHMH’s current practice is for PCS Regional Managers to monitor and review supervisors that conduct supervisory checks. We will revise our protocol and training to ensure that the existing reports are utilized to monitor supervisor checks.”

5. DOHMH should clearly define in its procedures what constitutes a representative sample of total monthly inspections requiring supervisory checks, specifying a minimum percentage of that sample for follow-up inspections, so that it can adequately measure whether it is meeting this standard.

DOHMH Response: “We agree with this recommendation. We will provide clear criteria for the minimum number of days worked by an inspector in a month as well as the minimum number of inspections that will trigger a period requiring supervisory checks.”

6. DOHMH should consider modifying VRVSS 2 to require PCS supervisors to record in a designated field the date of each supervisory check they conduct.

DOHMH Response: “DOHMH has already implemented this change. The VRVSS 2.0 Supervisor Check form has the date of evaluation which is the date the supervisory check was done. DOHMH explained to the auditors that this issue had already been addressed.”

Auditor Comment: We disagree with PCS’ contention that it has already implemented this change. As discussed in the report and confirmed by PCS officials, the evaluation date is not the date of the supervisory check date, but the date that the supervisor returns to the office and uploads the supervisory check results into the system, which ranges from one to several days after the supervisory check took place. Therefore, we urge DOHMH to reconsider its position and consider modifying VRVSS 2 as recommended.

7. DOHMH should consider modifying VRVSS 2 to require PCS supervisors to identify in a designated field whether each supervisory check they conduct is a follow-up visit or an accompaniment.

DOHMH Response: “We generally agree with this recommendation. Making the change is contingent on funding and will also require time to change VRVSS 2.”

Manual Duplicates Recorded in VRVSS without Documented Parent Job Ticket IDs

According to DOHMH, if it receives a complaint for an address with either an open complaint or a complaint that was recently closed, no more than 90 days prior, VRVSS will designate the new complaint as a duplicate complaint and cross-reference it to the open or recently closed complaint.

According to DOHMH pest control inspection procedures, if an inspector believes that a complaint on the inspector’s assigned route is a duplicate but was not identified as such through VRVSS’ automated process, the inspector can recommend that the complaint be manually designated as a duplicate and closed out, subject to supervisory approval. Duplicate complaints are supposed to be cross-referenced in VRVSS to the initial or original complaints (referred to as parent complaints). When recommending that a complaint be closed as a duplicate, inspectors are required to write the job ticket ID of the parent complaint in the notes section of the inspection report.

Of the 96 sampled complaints that were manually designated as duplicates, 42 (44 percent) were not cross-referenced in VRVSS to existing parent complaints as required. When we brought this observation to PCS’ attention, officials provided job ticket IDs for 38 of these complaints and claimed that they were the parent complaints. However, DOHMH did not provide sufficient evidence to establish that these job ticket IDs were associated with our sampled complaints; for example, some addresses did not reconcile, and some inspection dates were missing. In the absence of such evidence, we find no basis to alter our finding.

There are no system controls in VRVSS that would prevent the designation of a complaint as a duplicate without cross-referencing, i.e., entering, the job ticket ID of a parent complaint to the claimed duplicate complaint. Furthermore, supervisors do not consistently review the manual duplicate records to verify that parent job ticket IDs have been referenced in the system. In the absence of such controls, DOHMH incurs an increased risk that complaints may be inappropriately labeled and closed as duplicate complaints and that the conditions noted in those complaints will go unaddressed.

VRVSS 2/Scope Update

On March 10, 2021, PCS officials demonstrated a new feature in VRVSS 2 whereby the system now captures and identifies complaints at the same location that have been inspected within the past 90 days. Supervisors are now able to more easily identify potential duplicate complaints and flag the job ticket ID numbers of the primary complaints for easier reference. A supervisor still has the ability to manually close a complaint as a duplicate. However, VRVSS 2 is still not programmed to require that such complaints be referenced to a parent job ticket ID. Consequently, there remains an increased risk that a complaint may be inappropriately labeled as a duplicate and that the related conditions may never be addressed.

Recommendations

8. DOHMH should consider modifying VRVSS 2 to require that complaints manually labeled as duplicates be referenced to a parent job ticket ID.

DOHMH Response: “We generally agree with this recommendation. Making this change is contingent on funding and will also require time to change VRVSS 2.”

Auditor Comment: We are pleased that DOHMH generally agrees with the recommendation and encourage DOHMH to allocate the necessary resources, in its existing funding if necessary, to modify VRVSS 2 as recommended.

9. DOHMH should ensure that supervisors clearly identify and designate parent job ticket ID numbers for complaints that are deemed manual duplicates.

DOHMH Response: “We generally agree with this recommendation. We note that there are few ‘manual duplicates.’ These are properties assigned for inspection that are then determined to have recently been inspected and not due for a follow-up. Each designation is reviewed by a supervisor.

While we can modify VRVSS 2 as the auditors suggest to better track the ‘parent’ complaint, doing so is contingent on funding and will require time to implement a system change.”

Auditor Comment: We are pleased that DOHMH generally agreed with our recommendations and are hopeful that DOHMH will be able to identify and allocate the necessary resources to modify VRVSS 2 as we recommend. In addition, until it modifies its system, we continue to urge DOHMH to implement this recommendation by ensuring that supervisors review each manual duplicate request and make sure that the parent IDs are included in the notes section of the inspection report for each complaint designated as a manual duplicate.

Scheduled Assessments and Cleanups Not Performed Timely or Never Completed

We found significant delays, and cases of active rat infestations closed without meaningful DOHMH action, among sampled properties that failed DOHMH’s follow-up compliance inspections. Those cases all involved documented findings—by DOHMH’s own inspectors—of active rat infestations and the conditions that produce them. As a result, for the cases closed without performing the recommended actions, the resources that DOHMH expended in inspecting and validating the conditions related to these sampled properties were not effectively utilized.

As stated previously, when an initial inspection uncovers signs of active rat infestation, a COTA is issued to the property owner, who has five days from the COTA mailing date to correct the condition. DOHMH should then conduct a compliance inspection no earlier than nine days after COTA mailing date to see whether the condition is corrected. If the property fails the compliance inspection, the property owner will be issued an NOV and, depending on the severity of the problem, the inspector may recommend that PCS perform a cleanup at the property. Upon supervisory approval of the compliance inspection and recommendation, PCS will initiate an assessment at the location to determine whether such action is warranted.

According to DOHMH pest control procedures, the agency's goal is to initiate assessments on 70 percent of properties within 30 business days of supervisory approval of the compliance inspection, and 100 percent within 90 business days of the approval. For properties in which cleanup is approved based on the assessment results, the goal is to initiate the cleaning on 70 percent of accessible properties within 30 business days of the completed assessment and 100 percent of properties within 90 business days of the assessment.

Our analysis revealed that PCS needs to improve its performance in this area. Our review of 50 sampled complaints in which the properties failed the compliance inspections and for which cleanup was recommended revealed that 9 (18 percent) were not assessed timely—of these, 5 were not assessed at all. PCS closed out these 5 complaints between 101 and 152 business days after supervisory approval of the cleanup recommendations without ever performing assessments—or cleanups—of the properties. These complaints were eventually closed out because they were “old inspections.” Those closings in effect allowed the existing deficient conditions to remain unaddressed, even though PCS' most recent failed compliance inspections noted signs of active rat infestation and, as noted for one complaint, garbage that created a “harborage condition” for rats to nest.

For the remaining four complaints for which the assessments were performed, it took DOHMH between 97 and 201 business days from the approval of the compliance inspections to perform the assessments. These delays, by definition, prevented timely remediation of the conditions DOHMH found.

According to PCS officials, a backlog of work and insufficient staffing for the assessments and cleanups were the causes of the untimely responses, and the cleanups were not conducted because the jobs were considered “old work.”

Delay and inaction at this critical stage of DOHMH's process leave the public health concerns that drive the entire pest control effort unaddressed. By not performing the required assessments and cleanups within the established timeframes, DOHMH-identified conditions are allowed to continue for an extended period of time, also increasing the public's exposure to potential health hazards.

Recommendation

10. DOHMH should assess its PCS program to determine whether its available staffing resources are properly allocated among the units responsible for, respectively, inspections, exterminations, assessments, and cleanups to improve PCS' overall efficiency and ability to assess and clean, within established timeframes, all properties that its inspectors and supervisors recommend for cleanups.

DOHMH Response: “We agree with this recommendation. As stated above, the small number of properties involved present challenges in terms of how work is scheduled, assigned, and closed-out. We will review our protocols to ensure that properties are more accurately being designated for cleanup assessment and that documentation is improved.”

Auditor Comment: As discussed earlier under *Discussion of Audit Results*, properties identified by DOHMH as needing exterminations, assessments, and cleanups are included among those identified as most in need of some level of mitigation to address the potentially hazardous conditions at these locations. Consequently, we strongly urge PCS to prioritize efforts to take actions on these properties to lessen the risk that such conditions will remain unaddressed.

Inadequate Follow-up after Extermination Attempts Were Unsuccessful

DOHMH failed to act on 32 percent of sampled cases involving documented rat infestations that persisted after repeated unsuccessful extermination attempts. The details of this finding follow.

According to DOHMH pest control procedures, when a compliance inspection reveals that an extermination should be performed, a job ticket for that action is created. Following an extermination, the exterminator will conduct a follow-up site visit and will close the job ticket if the condition has been abated. If the initial extermination does not successfully abate the condition, up to five more exterminations (for a total of six) can be performed in association with that job ticket. If the exterminator still observes evidence of an infestation after the sixth extermination attempt, the exterminator must close the extermination job ticket and request that a second compliance inspection be performed so that additional remediation efforts can be taken, such as assessing higher fines to property owners or performing full cleanups.

Because DOHMH's pest control process is sequential, it will generally not undertake any such remediation efforts unless a compliance inspection is conducted and the need for such remediation is recommended and approved by a PCS supervisor.

Our review of VRVSS data for 100 sampled complaints for which exterminations were unsuccessful revealed that the exterminators closed out the extermination job ticket and requested a second compliance inspection for 32 of them. However, DOHMH's records contained no evidence that a second compliance inspection was performed in any of those cases. Moreover, DOHMH closed eight of those 32 complaints although the most recent site visits showed signs of active rat infestation.

Of the remaining 24 complaints, DOHMH officials provided dates for 13 of them that reflected "new" initial inspections its PCS inspectors reportedly performed at those locations. The dates of these new inspections ranged from 132 to 696 calendar days after DOHMH received the original complaints—all of which had already traversed the inspection cycle beginning with the initial inspection through to the extermination attempts. By designating these 13 inspections as initial inspections, PCS effectively started the cycle again without having remediated the infestation it had already found. DOHMH officials did not explain why PCS did not instead simply conduct the second compliance inspections its own exterminators had recommended.

DOHMH provided no evidence that any subsequent actions were taken for the remaining 11 complaints.

Second compliance inspections are a vital part of the pest control remediation process, especially when there are identifiable health hazard conditions and failure to conduct them hinders DOHMH from advancing to the next enforcement or remediation action. Consequently, there is an increased risk that poor conditions found will not be fully remediated in a timely manner, if at all.

VRVSS 2/Scope Update

According to DOHMH officials, the VRVSS 2 system now automatically tracks DOHMH exterminated job tickets that have been closed by exterminators who request second compliance inspections. According to DOHMH officials, supervisors will now be able to more easily identify those properties for which exterminators have requested second compliance inspections and determine what further actions are needed. Having a process to more easily identify properties needing second compliance inspections is a positive step; however, supervisors need to properly follow up to ensure that the recommended second compliance inspections are completed.

Recommendation

11. DOHMH supervisors should ensure that they promptly take exterminators' recommended actions for DOHMH-exterminated properties, including the completion of second compliance inspections, to ensure that properties needing further remediation actions receive them.

DOHMH Response: "We agree with this recommendation. As we explained to the auditors, since the rollout of VRVSS 2, the process has changed, enabling supervisors to identify properties requiring second compliance inspection more easily. The new process is such that if an exterminator closes an extermination job ticket, requesting a second compliance inspection, the compliance inspection job will be created and will be available for routing from the open compliance inspection queue."

Auditor Comment: We are pleased that DOHMH agreed with this recommendation. However, although DOHMH explained to us the new process that has been implemented since the VRVSS 2 rollout, including describing the new control feature that has been added to VRVSS 2 to more easily identify properties that need second compliance inspections, the agency did not provide documentation to show that the new process and associated VRVSS 2 function are working as intended. Consequently, while this is a step in the right direction, we urge DOHMH to track these cases carefully and ensure that supervisors properly follow up by verifying whether the recommended second compliance inspections are completed within the applicable deadline.

Other Weakness

For certain complaints, we found that DOHMH lacked evidence that staff exercised due diligence before administratively closing complaints due to an inability to identify the block and lot for the properties in question. For a sample of complaints that DOHMH closed, we were able to use the search engine used by the agency to identify the block and lot for over a third of them.

According to DOHMH pest control procedures, complaints that the agency receives through the 311 system with insufficient address or block and lot information are first researched using the NYC Open Accessible Space Information System (NYC OASIS).³ Through NYC OASIS, DOHMH staff utilize the available information provided in the complaint record to attempt to identify the

³ The NYC OASIS website, maintained by the Center for Urban Research at the CUNY Graduate Center, provides a source of community maps for New York City that help nonprofits, community groups, educators, students, public agencies, and local businesses develop a better understanding of their environment with interactive maps of open spaces, property information, transportation networks, and more.

address or block and lot of the property. If this information cannot be identified, the complaint is administratively closed.

Of the 21,934 complaints that were closed during Fiscal Year 2018, 111 were administratively closed with an “Address Not Found” outcome. We randomly selected 28 of those 111 complaints and, using NYC OASIS, were able to identify addresses associated with 10 (36 percent) of them. We found no evidence that the DOHMH supervisors reviewed NYC OASIS for these complaints. (DOHMH does not require that supervisors retain such evidence.)

By not performing accurate and thorough research, DOHMH incurs an increased risk that complaints will not be adequately addressed, which in turn potentially allows poor conditions to continue, putting the health and safety of the public at risk.

Recommendation

12. DOHMH should require that supervisors maintain evidence of the agency’s efforts to locate addresses before administratively closing complaints with a “No Address Found” designation.

DOHMH Response: “While we generally agree with this recommendation, we point out that of the nearly 22,000 complaints that were closed in FY18, one half of one percent were closed with ‘No Address Found’. The auditors randomly checked 28 of the 111 properties and found the addresses of only 10 jobs. We will train to [sic] staff on how to geocode complaints to identify the address of the property and better document when addresses of complaints cannot be identified.”

Auditor Comment: While we are pleased that DOHMH generally agreed with this recommendation, we disagree with the implications of its argument that the small numbers make this recommendation less significant. Regardless of the number of properties that are deemed to have a “No Address Found” outcome, all should be appropriately researched to identify the addresses. The fact that only 111 complaints were administratively closed because DOHMH did not identify the addresses where the reported pest conditions existed suggests that DOHMH supervisors should have been able to conduct the necessary research to address the complaints substantively with a minimal expenditure of resources.

Other Matter

Escalated Pest Control Actions for Properties with Chronic Rodent Infestation

DOHMH utilizes several tools for properties that receive repeated complaints to help reduce rodent infestation. Of the 400 properties that received three or more non-duplicated complaints during Fiscal Year 2018, our review of data, emails and other documentation provided by DOHMH revealed that the agency took escalated pest control actions for 146 of them.

For properties that appear to have a chronic infestation problem, DOHMH may take the following actions:

Elevated compliance inspection – According to DOHMH pest control procedures, if a property continues to receive complaints after the regular compliance inspection has been done or the exterminator closes a job for a second compliance inspection, an elevated compliance inspection—where the potential fine amounts are higher than those for regular compliance

inspections—can be performed at the property.⁴ A property is eligible to receive an elevated compliance inspection if it meets one or more of the following conditions: failed a compliance inspection within the previous 12 months; received extermination jobs after a failed compliance inspection; and/or continues to receive complaints after compliance inspections have been performed.

Pest reduction initiative program – Neighborhoods with high number of complaints and higher failure rates for rat activity upon inspection may be included in one or all of the following pest control initiatives: Rat Indexing, Attacking Rat Reservoirs, or Neighborhood Rat Reduction (NRR). Individual properties with high numbers of complaints may receive an elevated compliance inspection or be subject to a Multi-Agency Inspection.

- Rat Indexing is a method whereby DOHMH inspectors proactively inspect every property in an area regardless of whether an active complaint on the property exists. Rat Indexing is performed annually in areas throughout the City known to have higher rat activity. According to DOHMH officials, more rat indexing inspections are conducted annually than complaint-based inspections.
- The Attacking Rat Reservoirs Program was initiated in 2015. According to DOHMH, this program selected neighborhoods with a high concentration of complaints, high failure rate on index and high need for DOHMH extermination and assigned extra inspection staff and exterminators to case manage and treat the neighborhoods. Annual rat indexing is performed in these areas.
- The NRR program focuses on three large rat mitigation zones that aggregated 15 of the City's most chronically infested rat reservoirs. These environments have large populations of rats that continue to maintain a presence in local neighborhoods for years, even decades. According to DOHMH, the purpose of the NRR was to add resources to partner agencies, such as the Department of Sanitation, Department of Education, New York City Housing Authority and the Department of Parks and Recreation, so that the City could reduce conditions that attract rats at the neighborhood level. DOHMH case managers are assigned to closely monitor neighborhoods over time to track the number of properties with rat activity.
- Multi-Agency Inspections are often conducted in NRR zones, with shared inspections by several City agencies performed on both City-owned and private properties. DOHMH's role is to coordinate such inspections and related surveys and reporting on a monthly basis.⁵

For these programs, DOHMH identifies neighborhoods that have high rates of rat infestation.

In addition, DOHMH participated in an initiative with the City's Law Department and the Mayor's Office of Tenant Rights (MOTR) to determine legal avenues for addressing pest control issues with non-compliant owners. Properties referred for legal action have histories of chronic problems for which civil penalties have not proven effective in spurring the property owners to correct the problematic conditions.

⁴ Elevated compliance inspections are performed when a property continues to receive complaints after violations have been cited and exterminations have been completed. A property can have up to 4 elevated compliance inspections, and each inspection doubles the fines from \$300 to a maximum of \$2,000.

⁵ The program started in July 2017, but was suspended in 2020 as agency resources were targeted to address the COVID-19 pandemic. All agencies were expected to participate by sending an inspector and sharing any information on summons/violations observed at the time of inspection.

We reviewed VRVSS records to identify locations that received multiple unique (non-duplicated) complaints during Fiscal Year 2018. Of the 17,514 addresses that received complaints during the year, 400 (2 percent) of them received three or more non-duplicated complaints during the year. Table III below shows a breakdown of the number of properties with three or more complaints during Fiscal Year 2018.

Table III

Properties with Three or More Non-Duplicated
Complaints during Fiscal Year 2018

Number of Non-Duplicated Complaints	Total Number of Properties	Cumulative Total Number of Properties with 3 or More Complaints	Total Number of Complaints (Number of Complaints x Total Properties)	Cumulative Total Number of Complaints for Properties with 3 or More
3	317	317	951	951
4	60	377	240	1,191
5	12	389	60	1,251
6	7	396	42	1,293
7	2	398	14	1,307
8	1	399	8	1,315
11	1	400	11	1,326
Total	400		1,326	

We asked DOHMH to identify the escalated efforts, if any, that were taken for the above-mentioned 400 properties. DOHMH provided us with the following data (includes all properties for which escalated actions were taken from July 2017 through December 2019):

- A dataset listing all individual properties that failed an elevated compliance inspection in 2019, both citywide and in the NRR rat mitigation zones;
- A dataset of the properties with three or more complaints, listing the inspections conducted on the properties, including those that received indexing inspections in Fiscal Year 2018;
- A list of the 400 properties that were in the NRR program as of July 2017;
- A list of properties with multi-agency inspections and exterminations performed from July 2017 through August 2019; and
- A list of DOHMH-inspected properties that were in the City's Law Department portfolio.

We reviewed these materials to ascertain how many of the 400 properties were included among these properties. Our review revealed that 146 (37 percent) of the 400 properties received one or

more of the heightened pest control actions. The breakdown of the actions taken on these 146 properties is shown in Table IV.

Table IV

Breakdown of Number of Properties
Targeted for Enhanced Pest Control
Actions

Actions	# of Properties
Elevated Compliance Citywide – Properties that failed elevated compliance inspections performed citywide in Calendar Year 2019	12
Elevated Compliance Rat Mitigation Zones – Properties failed elevated compliance inspections performed in Rat Mitigation Zones	7
Rat Indexing	143
Neighborhood Rat Reduction	44
Multi-Agency Inspections – all multi-agency inspections from July 2017 to August 2019	11
Law Department – DOHMH-inspected properties in City Law portfolio considered for litigation	10
Total	146*

*Figure does not represent a sum of the column because some properties were the subject of multiple actions

As shown in Table IV, Rat Indexing was the action most taken by far with regard to these 400 properties. Unfortunately, we do not know the degree to which DOHMH conducts elevated compliance inspections because, although requested, the agency did not provide us with a listing of properties that *received* such inspections during the review period. As shown in the table above, of the 12 properties that *failed* an elevated compliance inspection during the period covering July 2017 through December 2019, 7 of them were part of a larger pest reduction initiative program.

A primary factor that hindered DOHMH’s selection of additional properties for elevated compliance inspections is the methodology by which properties were identified for such action. Traditionally, designating a property for an elevated compliance inspection was a manual process, predicated on a review of the property’s history as recorded in VRVSS, and past efforts to work with a property owner to remediate conditions. The process necessitated manually sorting through thousands of properties. Under such a system, there is an increased risk that properties warranting consideration for elevated compliance inspections will be overlooked and not be identified.

VRVSS 2/Scope Update

On March 8, 2021, DOHMH officials demonstrated a new feature in VRVSS 2 that now provides a prompt allowing supervisors to find properties with multiple complaints and previously failed compliance inspections more readily. When a new complaint comes into the system for a property

whose history reveals a previous failed compliance for rat activity in the last 12 months, the new complaint goes into a queue titled “eligible for elevated compliance.” The supervisor can then close the new complaint as a duplicate and elevate the older case to a second compliance. According to DOHMH officials, the updates to the new system will allow additional complaints at an address with a history of failed inspections to more directly drive inspection responses.

Recommendations

13. DOHMH should ensure that it utilizes enhancements to VRVSS to identify properties that are eligible for elevated compliance inspections and proceed with such inspections.

DOHMH Response: “We agree with this recommendation. We intend to use VRVSS 2 to elevate eligible jobs for compliance inspection and to increase compliance inspections on properties that have been treated by DOHMH, but owners have still failed to take actions to remediate.”

14. DOHMH should increase its efforts to refer properties with chronic rodent infestation problems for more enhanced pest control actions.

DOHMH Response: “We agree with the recommendation. We have a variety of new strategies for addressing properties with chronic rodent conditions including elevated compliance inspections; outreach to property owners / managers and building workers; interagency referrals to other enforcement agencies such as Housing Preservation Department (HPD) or Department of Sanitation NY.”

DETAILED SCOPE AND METHODOLOGY

We conducted this 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. This audit was conducted in accordance with the audit responsibilities of the City Comptroller as set forth in Chapter 5, §93, of the New York City Charter.

The primary audit scope was July 1, 2017 through March 10, 2021.

To obtain an understanding of the policies, procedures and regulations governing DOHMH's monitoring and oversight of the rodent complaint process, we reviewed and used as criteria the following:

- New York City Health Code Articles #3 (“General Provisions”) and #151 (“Rodents, Insects, and other Pests”) that are related to the Pest Control Program;
- New York City Administrative Code Title 17 § 17-133.1: “Failure to abate rodents”;
- New York City Administrative Code Title 16, § 16-131.3: “Removal or abatement of public nuisance”;
- Rules of the City of New York - Title 24 “Department of Health and Mental Hygiene”;
- DOHMH Bureau of Veterinary and Pest Control Services Pest Control Inspection Protocols for Inspections, Exterminations, and Lot Cleaning;
- Pest Control Tracking Data System Training Manual; and
- Comptroller’s Directive #1, *Principles of Internal Control*.

To further our understanding of Pest Control Service operations and the controls over the processes that were significant to achieving our audit objectives, we conducted walkthrough meetings and interviewed the following key agency personnel:

- Assistant Commissioner of Veterinary and Pest Control Services;
- The Director of Neighborhood Intervention;
- The Bronx Regional Director of Pest Control Services;
- The North Brooklyn Borough Manager of Pest Control Services;
- Associate Public Health Sanitarian (Supervisors) from the Bronx and the North Brooklyn borough offices;
- Public Health Sanitarians (Inspectors) from the Bronx and North Brooklyn borough offices; and
- PCS Quality Assurance Team.

In addition, to gain an understanding of DOHMH's pest control programs and its approach to the management of the rodent population, we attended the New York City Rodent Academy, a 3-day training course conducted by DOHMH for pest control inspectors and exterminators from both the public and private sectors.

To gain an understanding of how inspectors conducted inspections, we accompanied and observed a Pest Control inspector as she performed 20 field inspections. We reviewed the inspection reports completed by the inspector in VRVSS and compared the entries to our observations.

To familiarize ourselves with the VRVSS database, we reviewed the VRVSS user manual, conducted a walkthrough of the system, interviewed appropriate IT personnel, obtained read-only access, and reviewed the system's various recording and tracking functions used by the Pest Control Unit.

We obtained a dataset of Fiscal Year 2018 containing 21,934 unique (unduplicated) complaints. Of the 21,934 complaints, only 20,946 were recorded as having received an initial inspection attempt during Fiscal Year 2018, and this served as our population for the detailed testing conducted during this audit.⁶

As part of our data reliability of the electronic complaint records and to provide reasonable assurance that the inspection and complaint records were complete, we requested and reviewed a listing of all Job Ticket IDs recorded in VRVSS for all pest control programs (Vector, Veterinary, and Pest Control) that were generated in Fiscal Year 2018. (In total, there were 468,052 Job Ticket IDs records provided.) We assessed the reliability of the data file by checking the consistency of the data contained in the files and, performing other procedures such as, sorting, summarization, gap detection, and duplicate detection. In addition, we compared all Job Ticket IDs from a list of pest control complaints that we extracted from the NYC Open Data website to the DOHMH complaint dataset to determine whether the latter population was complete and accurate.

To evaluate DOHMH's timeliness in performing and responding to pest control complaints, our analysis focused on 20,946 complaints that received an initial inspection attempt during the period of July 1, 2017 through June 30, 2018. We performed various analyses and data sorts on the entire population to determine whether inspection attempts were conducted in accordance with time intervals and requirements established in the DOHMH procedures.

From the population of 20,946 complaints that received an initial inspection attempt during Fiscal Year 2018, we examined the complaint details and inspection reports as recorded in VRVSS to obtain the details of the inspector activities and inspection outcomes. To determine whether PCS adhered to its own procedures in addressing complaints, we selected a total sample of 453 complaints from the 20,946 complaints. For these complaints, we examined the complaint details and inspection reports as logged in VRVSS to obtain the details of the inspectors' activities as recorded in the comments sections, as well as the details of the inspection outcomes. We selected at least one sample from each of the 10 categories of inspection outcomes; one outcome (Fail) had two samples selected.⁷ For 7 categories (Pass, Fail, the three No Access outcomes, Closed with Minor Violations and Supervisory Check), we judgmentally selected a total of 347 complaints, based on certain conditions attributable to the respective categories. For 4 categories (Fail, Address Not Found, Manual Duplicate, and Dangerous Condition), we randomly selected a total of 106 complaints.

We then reviewed DOHMH's controls for addressing complaints that failed initial inspections and required follow-up compliance inspections and identified complaints that required additional

⁶ The remaining 988 complaints (21,934 less 20,946) did not have an inspection date and were excluded from our analysis.

⁷ The 10 categories of inspection outcomes associated with the 20,946 complaints consist of: (1) Pass; (2) Fail; (3) Closed with minor violations; (4) No Access; (5) No Access / Job Ticket Closed; (6) No Access – Referred; (7) Address Not Found; (8) Manual Duplicate; (9) Dangerous Condition (for inspector); and (10) Supervisory Check.

remediation efforts (e.g., exterminations, second compliance inspections, assessments, and cleanups) and determined whether they were performed.

We also reviewed NYC OASIS using the known complaint information for 28 randomly selected complaints from the population of 111 complaints that were administratively closed with an “Address Not Found” outcome to determine whether the address or the block and lot of the property could be identified. In addition, we determined whether there was any evidence that the supervisors reviewed NYC OASIS for these 28 complaints.

To assess DOHMH’s efforts to remediate pest control issues for properties with repeated complaints, we reviewed the list of properties from our population of 21,934 complaints that were received from 311 during Fiscal Year 2018 and identified 400 that received three or more non-duplicate complaints during the year.

We then determined how many of the 400 properties received elevated compliance inspections and/or other enhanced remediation efforts. We obtained the following information on DOHMH’s remediation efforts: a dataset that had all individual properties (identified with the borough, block and lot or BBLs) that failed an elevated compliance in 2019—both citywide and in the NRR zones and, a table of all multiagency inspection properties, which included subsequent inspections and exterminations. The table was updated through September 2019. We also obtained a dataset of the properties with three or more complaints, listing the inspections conducted on the properties, including those that received indexing inspections in Fiscal Year 2018.

To determine whether DOHMH had adequate oversight and monitoring of field inspectors, we obtained and reviewed the Fiscal Year 2018 Supervisory Check Report showing the supervisory checks performed during the year. In addition we obtained a list all inspectors assigned to the DOHMH Pest Control unit that performed inspections during Fiscal Year 2018. We then compared the list of inspectors to the Supervisory Check Report to determine whether supervisory checks were performed on the completed inspections in accordance with DOHMH procedures. In September 2019, we also met with the Quality Assurance Team to discuss the discrepancies identified during our review of the supervisory check data and to obtain clarity on the Quality Assurance Team’s review processes and its use of the supervisory check data.

On March 8 and March 10, 2021, we met with DOHMH officials to discuss the various VRVSS updates and enhancements that were specific to our audit findings. During these meetings officials answered our questions relating to the new system and performed various demonstrations. We then performed some limited reviews of the system to further our understanding of the updated system.

The results of our tests, while not projectable to their respective populations, provided a reasonable basis for us to evaluate and to support our findings and conclusions about DOHMH’s response to pest control complaints.



NEW YORK CITY DEPARTMENT OF
HEALTH AND MENTAL HYGIENE
Dave A. Choksi, MD, MSc
Commissioner

June 18, 2021

Marjorie Landa
Deputy Comptroller for Audit
Office of the New York City Comptroller
1 Centre Street, Room 1100
New York, NY 10007-2341

Re: Audit Report on the Department of
Health and Mental Hygiene's Response
and Follow-up to Pest Control
Complaints Audit Number MJ19-070A

Dear Deputy Comptroller Landa:

The NYC Department of Health and Mental Hygiene (DOHMH) reviewed the draft report on the response and follow-up to Pest Control Complaints issued on 6/4/21. The stated objective of the audit was to determine whether DOHMH is adequately responding to and following up on pest control complaints in a timely manner.

DOHMH generally agrees with the auditors' recommendations and had already implemented some of them with the rollout of the upgraded system, the Veterinary, Rodent and Vector Surveillance System (VRSS 2). The attached response details DOHMH's position with regard to the auditors' findings and recommendations.

We appreciate the efforts and professionalism of your staff during the audit. If you have any question, please contact Sara Packman, Assistant Commissioner for Audit Services at (646) 872-2760.

Sincerely,

A handwritten signature in black ink, appearing to read 'Dave A. Choksi', written over a horizontal line.

Dave A. Choksi, MD, MSc

cc:

Emiko Otsubo, MSW, Chief Operating Office/Executive Deputy Commissioner, DOHMH
Corrine Schiff, JD, Deputy Commissioner, Environmental Health, DOHMH
Mario Merlino, Assistant Commissioner, Veterinary and Pest Control Services, DOHMH
Sara Packman, Assistant Commissioner, Audit Services, DOHMH

**DOHMH Response to the Auditors' Draft Audit Report on the
New York City Department of Health and Mental Hygiene's Response and Follow-up to
Pest Control Complaints
MJ19-070A**

The New York City Department of Health and Mental Hygiene (DOHMH or the Department) reviewed the draft audit report on the "Department of Health and Mental Hygiene's Response and Follow-up to Pest Control Complaints." The stated objective of the audit was "to determine whether DOHMH is adequately responding to and following up on pest control complaints in a timely manner." The scope of the audit was from July 1, 2017 through March 10, 2021.

The Bureau of Veterinary and Pest Control Services protects the public from animal/vector borne diseases, animal hazards, animal nuisances from uncontrolled or unregulated animals, uncontrolled rodent populations, and pathogens from vector-borne disease carrying mosquitoes.

The Bureau's Pest Control Services (PCS) proactively initiates and executes rodent prevention and control activities, each year conducting over 200,000 inspections on publicly and privately-owned properties; baiting when finding evidence of rodents; and conducting more than 40,000 exterminations. Critical for rodent control is public education, and the Bureau offers training at our Rodent Academy and makes inspection findings available to the public on the Rat Information Portal. While the audit focused on complaints, the major focus of the PCS's work is proactively finding and addressing chronic rat conditions in neighborhoods, with a focus on areas with highest burden of rats. Under the Mayor's Neighborhood Rat Reduction (NRR) initiative, PCS conducts two rounds of inspections per year on all properties in three areas in three different boroughs (27,000 total properties). The NRR's focus is on working with partner agencies to address rodent activity on public property such as housing developments operated by the New York City Housing Authority (NYCHA), schools operated by the Department of Education and New York City Parks and Recreation-managed properties and parks. Since the initiative began in in late 2017, through December 2019, rodent burrow counts were down 75% at parks in NRR areas and there was a 29% decline in 311 calls across the 3 NRR areas. Despite our staff's work on COVID-19 pandemic-response activities, we are on track to reach the goal of achieving a 70% reduction in burrow counts from baseline in all NYCHA developments in NRR areas.

We are pleased that the auditors found that DOHMH responded well to pest control complaints, specifically by attempting to inspect the reported conditions, in a timely manner. The auditors acknowledge that DOHMH has generally met its goals and conducted initial inspection attempts within DOHMH's established guidelines and that DOHMH responded to 81% of complaints it received within 10 business days (well within 311's 14-day target for response). We are pleased that we had the opportunity to present to the auditors VRVSS 2, our enhanced data system and some of the system's controls that will support oversight, supervision, and data integrity.

DOHMH disagrees with the auditors' conclusions on page 4 concerning DOHMH's follow-up actions on properties that fail compliance inspections. The auditors state that they analyzed "50 sampled records for locations that failed DOHMH's follow-up compliance inspections" and that this "revealed that a significant proportion—9 cases (18 percent)—were not assessed for possible cleanup within DOHMH's 90-business day deadline." DOHMH argues that these findings lack context; they do not indicate that property assessments are a small percentage of the total

number of properties that failed compliance inspections. Only 4% of failed compliance inspections were assessed for cleanup in 2018. In 2018 there were just over 500 assessments of properties assigned, and fewer than 200 properties cleaned (cleanup is the step after assessment). The small numbers involved (relative to the other work that DOHMH does) presents logistics challenges and work must be done by the program going forward to reduce the variances in service times.

DOHMH also disagrees with the auditors' finding that (page 4) "supervisors did not consistently meet the minimum requirement to perform one monthly supervisory check per field inspector." During the one-year period analyzed in the audit supervisors conducted more than 6,600 supervisory checks, monitoring the work of all 55 PCS inspectors. In cases where the supervisors did not meet the requirement to check at least one inspection per month per inspector, it was typically because they or the inspector did not work the full number of days in the month due to leave-days, training days, or other reasons. To maximize supervisor checks and document the reasons where targets are not met, the PCS Quality Assurance team will improve scheduling and documentation.

The auditors make 14 process and system related recommendations. The following is DOHMH detailed response to the recommendations.

Auditors' Recommendations and DOHMH's Response

1. DOHMH should ensure that supervisory checks are not erroneously treated as second attempts at inspection for purposes of determining whether a complaint should be closed due to inspectors' inability to gain access. (page 10)

DOHMH's Response: We agree with this recommendation. As we explained to the auditors, this was an error in the prior system. We do not have examples of this issue occurring in VRVSS 2, the new and enhanced data system, and believe this has been resolved.

2. DOHMH should ensure that the new control feature in VRVSS 2.0 is operating as intended and that a reason is documented for all rejected inspections. (page 10)

DOHMH's Response: DOHMH has already implemented this. Documenting the inspection result, including the rejection reason is a required field in VRVSS 2. DOHMH explained to the auditors that this issue had already been addressed.

3. DOHMH should ensure that all active pest control inspectors receive the requisite number of supervisory checks monthly to ensure that supervisors are aware of any deficiencies in the inspections and that those deficiencies are corrected. (page 13)

DOHMH's Response: We generally agree with this recommendation. As stated above, if either the supervisor or the Public Health Sanitarian (PHS) is out on leave for some part of a month, then scheduling supervisory checks becomes difficult. The cases highlighted by the auditors on page 12, for example, concerned inspectors who were on modified duty or temporarily transferred to a different unit

and were not conducting inspections that could be checked. These schedule changes made the correct tempo of supervisory checks difficult to maintain. To address these issues, we plan to make protocol changes and to enhance the activities of our Quality Assurance Team.

4. DOHMH should ensure that the PCS Regional Directors closely monitor the supervisors in their assigned areas to ensure that they are completing monthly supervisory checks on all inspectors and that those checks are done timely. (page 13)

DOHMH's Response: We agree with this recommendation. DOHMH's current practice is for PCS Regional Managers to monitor and review supervisors that conduct supervisory checks. We will revise our protocol and training to ensure that the existing reports are utilized to monitor supervisor checks.

5. DOHMH should clearly define in its procedures what constitutes a representative sample of total monthly inspections requiring supervisory checks, specifying a minimum percentage of that sample for follow-up inspections, so that it can adequately measure whether it is meeting this standard. (page 13)

DOHMH's Response: We agree with this recommendation. We will provide clear criteria for the minimum number of days worked by an inspector in a month as well as the minimum number of inspections that will trigger a period requiring supervisory checks.

6. DOHMH should consider modifying VRVSS 2.0 to require PCS supervisors to record in a designated field the date of each supervisory check they conduct. (page 13)

DOHMH's Response: DOHMH has already implemented this change. The VRVSS 2.0 Supervisor Check form has the date of evaluation which is the date the supervisory check was done. DOHMH explained to the auditors that this issue had already been addressed.

7. DOHMH should consider modifying VRVSS 2.0 to require PCS supervisors to identify in a designated field whether each supervisory check they conduct is a follow-up visit or an accompaniment. (page 13)

DOHMH's Response: We generally agree with this recommendation. Making the change is contingent on funding and will also require time to change VRVSS 2.

8. DOHMH should consider modifying VRVSS 2.0 to require that complaints manually labeled as duplicates be referenced to a parent job ticket ID. (page 15)

DOHMH's Response: We generally agree with this recommendation. Making this change is contingent on funding and will also require time to change VRVSS 2.

9. DOHMH should ensure that supervisors clearly identify and designate parent job ticket ID numbers for complaints that are deemed manual duplicates. (page 15)

DOHMH's Response: We generally agree with this recommendation. We note that there are few "manual duplicates." These are properties assigned for inspection that are then determined to have recently been inspected and not due for a follow-up. Each designation is reviewed by a supervisor. While we can modify VRVSS 2 as the auditors suggest to better track the "parent" complaint, doing so is contingent on funding and will require time to implement a system change.

10. DOHMH should assess its PCS program to determine whether its available staffing resources are properly allocated among the units responsible for, respectively, inspections, exterminations, assessments, and cleanups to improve PCS' overall efficiency and ability to assess and clean, within established timeframes, all properties that its inspectors and supervisors recommend for cleanups. (page 16)

DOHMH's Response: We agree with this recommendation. As stated above, the small number of properties involved present challenges in terms of how work is scheduled, assigned, and closed-out. We will review our protocols to ensure that properties are more accurately being designated for cleanup assessment and that documentation is improved.

11. DOHMH supervisors should ensure that they promptly take exterminators' recommended actions for DOHMH-exterminated properties, including the completion of second compliance inspections, to ensure that properties needing further remediation actions receive them. (page 17)

DOHMH's Response: We agree with this recommendation. As we explained to the auditors, since the rollout of VRVSS 2, the process has changed, enabling supervisors to identify properties requiring second compliance inspection more easily. The new process is such that if an exterminator closes an extermination job ticket, requesting a second compliance inspection, the compliance inspection job will be created and will be available for routing from the open compliance inspection queue.

12. DOHMH should require that supervisors maintain evidence of the agency's efforts to locate addresses before administratively closing complaints with a "No Address Found" designation. (page 18)

DOHMH's Response: While we generally agree with this recommendation, we point out that of the nearly 22,000 complaints that were closed in FY18, one half of one percent were closed with "No Address Found". The auditors randomly checked 28 of the 111 properties and found the addresses of only 10 jobs. We will train staff on how to geocode complaints to identify the address of the property and better document when addresses of complaints cannot be identified.

13. DOHMH should ensure that it utilizes enhancements to VRVSS to identify properties that are eligible for elevated compliance inspections and proceed with such inspections. (page 22)

DOHMH's Response: We agree with this recommendation. We intend to use VRVSS 2 to elevate eligible jobs for compliance inspection and to increase compliance inspections on properties that have been treated by DOHMH, but owners have still failed to take actions to remediate.

14. *DOHMH should increase its efforts to refer properties with chronic rodent infestation problems for more enhanced pest control actions. (page 22)*

DOHMH's Response: We agree with the recommendation. We have a variety of new strategies for addressing properties with chronic rodent conditions including elevated compliance inspections; outreach to property owners / managers and building workers; interagency referrals to other enforcement agencies such as Housing Preservation Department (HPD) or Department of Sanitation NY.