

OF AUDITS AND EVALUATIONS

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Veterans Health Administration

Audit of Modular Ramps Purchased by the Malcom Randall VA Medical Center in Gainesville, Florida

> June 29, 2016 15-04248-305

ACRONYMS

ADA	Americans with Disabilities Act
FY	Fiscal Year
OIG	Office of Inspector General
PSAS	Prosthetics and Sensory Aids Service
RFQ	Request for Quotation
SOP	Standard Operating Procedure
VA	Department of Veterans Affairs
VAMC	Veterans Affairs Medical Center

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Highlights: Audit of Modular Ramps Purchased by VHA's Malcom Randall VAMC in Gainesville, FL

Why We Did This Audit

In May 2015, Congressman Tim Walberg requested the VA Office of Inspector General (OIG) review an allegation. The complainant alleged the Malcom Randall Veterans Affairs Medical Center (VAMC) in Gainesville, FL purchased modular ramps that did not comply with Americans with Disabilities Act (ADA) standards. We conducted this audit to determine if the VAMC ensured modular ramps were ADA compliant prior to awarding purchase orders and performed follow-up to ensure modular ramps purchased for veterans and installed at their residences were ADA compliant.

What We Found

We substantiated the allegation that the Malcom Randall VAMC purchased modular ramps that did not comply with ADA Specifically, for standards. 20 of 33 purchase orders (61 percent) reviewed, staff did not consistently ensure ramps were ADA compliant prior to awarding purchase orders to vendors. Additionally, for all 33 purchase orders, staff did not perform follow-up to ensure the installed ramps complied with ADA standards. To test our finding, we measured six vendor-installed modular ramps and determined none of the six complied with ADA standards.

This occurred because the VAMC lacked effective controls, including a quality review process; a formal training program; comprehensive written procedures; and formal requirements for vendors to provide ADA-compliant ramps and measurements. As a result, we estimated that staff made errors for modular ramp purchase orders totaling approximately \$342,000 from August 2014 through March 2015. Without strengthening controls, VAMC staff might purchase ramps with dangerously steep slopes or inappropriately sized landings that could present difficulties for veterans when descending and ascending ramps and when stopping or turning.

What We Recommended

We recommended the Director of the Malcom Randall VAMC enhance procedures and controls to help ensure modular ramps are installed in compliance with ADA standards.

Agency Comments

The VAMC Director concurred with our findings and requested closure of the recommendations, based upon actions taken as a result of our audit. Although the VAMC partially addressed our recommendations, additional actions are necessary. We will follow up as required.

Jang K abe

GARY K. ABE Acting Assistant Inspector General for Audits and Evaluations

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INTRODUCTION

Objective In May 2015, Congressman Tim Walberg requested the VA Office of Inspector General (OIG) review an allegation that the Malcom Randall Veterans Affairs Medical Center (VAMC) in Gainesville, FL, purchased modular ramps that did not comply with Americans with Disabilities Act (ADA) standards. The objective of our audit was to determine if the VAMC ensured modular ramps were ADA compliant prior to awarding purchase orders and performed follow-up to ensure modular ramps purchased for veterans and installed at their residences were compliant with ADA standards.

VAMC Ramp Award and Verification Process The Malcom Randall VAMC purchases ramps for mobility-challenged veterans who cannot negotiate stairs or who require the use of a mobility device, such as a wheelchair, under VA Schedule Program 65 II F, Patient Mobility Devices. The process of purchasing modular ramps for mobility-challenged veterans is initiated when the VAMC's Prosthetics and Sensory Aid Service (PSAS) receives a consult request from a physician.

The following provides a general description of PSAS purchasing agents' responsibilities and corresponding actions taken by vendors once the consult is received.

- The purchasing agent solicits bids from contracted VA Schedule vendors using a Request for Quotation (RFQ).
- Interested vendors provide bids to PSAS in response to the RFQ.
- The purchasing agent evaluates vendor bids and awards a purchase order for the selected bid.
- The selected vendor submits post-installation documentation such as photographs, a veteran-signed installation sheet, and an invoice to PSAS after ramp installation at a veteran's residence.
- The purchasing agent reviews the post-installation documentation to verify the ramp was installed and the invoice charges match the purchase order charges.
- The purchasing agent performs follow-up with vendors, as necessary.

Malcom Randall VAMC Ramp Purchases According to data provided by PSAS, the total number of VAMC modular ramp purchase orders valued at or below \$3,000 grew from 370 totaling about \$696,000 in fiscal year (FY) 2014, to 646 totaling about \$1.2 million in FY 2015. This represents an increase in purchase orders of approximately 75 percent and about 73 percent in their associated cost.

Other Information

- Appendix A provides additional background information.
- Appendix B provides details on our scope and methodology.
- Appendix C provides details on our statistical sampling methodology.

RESULTS AND RECOMMENDATIONS

Finding The Malcom Randall VAMC Purchased Modular Ramps That Did Not Comply With ADA Standards

We substantiated the allegation that the Malcom Randall VAMC purchased modular ramps that did not comply with ADA standards. Specifically, staff made one or more errors for all 33 modular ramp purchase orders we reviewed. VAMC staff did not consistently ensure modular ramps were ADA compliant prior to awarding purchase orders to vendors and did not perform follow-up to ensure installed ramps were also compliant. In addition, to test our finding, we measured 6 vendor-installed ramps from our sample of 33 purchase orders and determined none of the 6 complied with ADA standards.

This occurred because the VAMC lacked effective management controls, including a quality review process, a formal training program, and comprehensive written procedures for awarding purchase orders and performing follow-up. In addition, VAMC management did not formally require vendors to provide ADA-compliant ramps and measurements. As a result, we estimated that staff made errors for modular ramp purchase orders totaling approximately \$342,000 from August 2014 through March 2015. Without strengthening controls, staff might purchase ramps with dangerously steep slopes or inappropriately sized landings that could present difficulties for veterans when descending and ascending ramps and when stopping or turning.

What We Did We interviewed the PSAS National Program Director, VAMC PSAS management and staff, as well as the complainant. We selected a random sample of 30 modular ramp purchase orders valued at or below \$3,000 from the population of 166 purchase orders created by VAMC staff from January 1 through March 31, 2015, for review. We also included three purchase orders specifically referred to by the complainant in our audit. VAMC staff created these three purchase orders between August 1, 2014, and January 31, 2015.

For each purchase order in our sample, we reviewed solicitation, award, and post-installation documentation and discussed our results with VAMC officials. We judgmentally sampled vendor-installed ramps at veterans' residences based upon errors identified during our audit, geographical proximity, and veteran availability. From this sample, we measured all vendor-installed ramp sections (hereafter referred to as ramp runs) and landings associated with six ramps. To measure the ramp runs and landings, we used a measuring tape and a digital slope level device, as suggested by the ADA.

Standards and Policies for Modular Ramps The Americans with Disabilities Act of 1990, revised in 2010, prohibits discrimination and ensures equal opportunity for persons with disabilities. The ADA adopted standards that set minimum requirements for newly designed and constructed or altered state and local government facilities, commercial facilities, and public accommodations including schools, doctor's offices, and recreation facilities to be readily accessible by individuals with disabilities.

The 2010 ADA standards regulate the steepness of ramps by generally requiring a slope measurement less than 1 inch of rise (height) to 12 inches of run (length), which equates to a slope of approximately 8.3 percent. ADA standards also require level landings at the top and bottom of every ramp run that are at least 60 inches long and at least as wide as the ramp run leading to the landing. To help determine and document compliance, ADA recommends measuring slopes with a digital level at the steepest point of each ramp run and encourages photographs of measurements taken with the level and measuring tape.

Federal facilities are covered by the Architectural Barriers Act of 1968, which prescribes similar standards to those required by ADA for state and local governments. Private residential housing is not covered by ADA or the Architectural Barriers Act standards. While these standards do not apply to private residences, the PSAS National Director stated facilities could choose to implement the standards they determine necessary to ensure the safety and accessibility of veterans. The director further stated ADA could be used as a good baseline for veterans' safety.

The Malcom Randall VAMC procedures required staff purchase only ADA-compliant ramps, and management stated they implemented this requirement in an effort to help ensure veterans' safety and accessibility. Furthermore, VAMC PSAS management stated it informally directed staff to ensure installed ramps complied with ADA by requiring vendors provide post-installation photographs with measurements documenting compliance and address any ADA noncompliance issue.

ADA Compliance Not Ensured Prior to Award We determined staff did not consistently ensure modular ramps were ADA compliant prior to awarding purchase orders to vendors. Staff made 22 errors for 20 of 33 purchase orders (61 percent) we reviewed. Specifically, for 16 of 33 purchase orders (48 percent) reviewed, staff awarded orders based upon vendor bids that did not include landing measurements for staff to verify ADA compliance. Moreover, for 6 of 33 purchase orders (18 percent) reviewed, staff awarded orders based upon vendor bids that either lacked a required landing; had a landing that was too small; or had a ramp run that was too short, resulting in a steeper slope than generally allowed by ADA.

Follow-Up Not Performed For Installed Ramps We determined staff did not perform follow-up with vendors to ensure installed modular ramps were ADA compliant. For all 33 purchase orders reviewed, vendor post-installation photographs did not provide assurance ADA slope and landing standards were met. For example, slope measurements were either not provided or, when provided, the exact slope measurements could not be determined from the photographs, and landing measurements were either not provided or photographs indicated ramps did not end on level landings, as required. For these ramps, staff did not perform follow-up actions, such as requesting vendors provide post-installation photographs with measurements documenting compliance or address identified ADA noncompliance issues.

For example, we identified one ramp in which the vendor's bid clearly indicated the installed ramp would end on a brick walkway. However, the vendor submitted a post-installation photograph showing the installed ramp ended in the grass, short of the brick walkway. In addition, there was no indication PSAS personnel performed follow-up after installation to verify compliance with the vendor's bid and awarded purchase order. The agent responsible for the purchase was no longer working at the VAMC. However, other purchasing agents agreed the post-installation photograph showed there was an issue and stated additional follow-up should have been conducted to ensure ADA compliance. Figure 1 is the vendor-submitted post-installation photograph.



Figure 1. Vendor Post-Installation Photograph

Source: Malcom Randall VAMC

Measured Ramps Not Compliant With ADA To test our finding, we selected a judgmental sample of ramps installed at veterans' residences from our sample of 33 purchase orders. From this sample, we measured all vendor-installed ramp runs and landings associated with six ramps. We determined none of the six ramps complied with ADA slope and landing standards. Specifically, all six ramps had at least one run with a slope that did not comply with ADA slope standards of approximately 8.3 percent. The steepest run was nearly twice as steep as generally allowed by ADA, and the steepest point of each noncompliant ramp ranged from 9.7 to 15.8 percent. Table 1 details the steepest slope percentage for these six ramps.

Ramp Count	Steepest Slope Percentage			
1	15.8			
2	11.2			
3	10.1			
4	9.9			
5	9.8			
6	9.7			

Table 1. Steepest Slope Percentage for
Noncompliant Ramps Measured in
November 2015

Source: OIG review of a judgmental sample of installed ramps

Furthermore, three of six ramps measured had a vendor-installed landing that did not meet ADA minimum length standards. The shortest landing was half the minimum length of 60 inches allowed by ADA, and the three landings ranged from 6 to 30 inches short in length.

After we completed our review, we provided PSAS management with our results. In December 2015, management indicated they contacted the respective vendors and requested resolution of the issues we identified.

Why This
OccurredThe Malcom Randall VAMC purchased modular ramps that did not comply
with ADA standards because the VAMC lacked effective management
controls. Specifically, the VAMC had not developed a quality review
process and formal training program to ensure staff award purchase orders
for ADA-compliant ramps and perform follow-up to ensure installed ramps
also complied with ADA. The VAMC also lacked comprehensive written
procedures requiring staff to ensure installed ramps complied with ADA
standards, and did not formally require vendors to provide ADA-compliant
ramps and measurements.

The significant numbers of errors identified by our audit surprised the chief and assistant chief of PSAS. They believed current controls were sufficient to ensure staff complied with procedures. In addition, they stated they thought the VAMC could rely on vendors to provide ADA-compliant ramps. They agreed that current controls should be strengthened.

Quality Reviews PSAS management had not developed a quality review process to ensure Should Be staff award purchase orders for ADA-compliant ramps and perform Implemented follow-up to ensure installed ramps also complied with ADA. The VAMC's Finance Department staff indicated the department performed audits on purchases made by VAMC staff. Although these audits randomly selected purchases to review, the audits focused only on the monetary aspects of each purchase, such as whether staff maintained appropriate receipts and the purchase card limit was not exceeded. The chief and assistant chief of PSAS position descriptions include requirements to review work performed. However, they indicated they had not developed a quality review process because they believed staff were experienced and less likely to make errors. In December 2015, PSAS management stated it was developing a quality review process.

Formal Training Should Be Developed PSAS management had not developed a formal training program to instruct purchasing agents on how to use a standardized method for awarding modular ramp purchase orders and verify their installation. Instead, management indicated agents received initial on-the-job training. PSAS management said they felt on-the-job training was sufficient to ensure appropriate procedures were communicated to responsible staff. However, even though both purchasing agents stated they received on-the-job training when initially assigned to their positions, they were unable to cite ADA-standard landing measurements.

> The PSAS Chief indicated the VAMC recently hired a training coordinator who is planning to develop a training program specific to modular ramps. In December 2015, the chief further stated that PSAS management was coordinating with VAMC Performance Improvement engineers to assist them in developing training material.

Procedures Should Be Improved PSAS lacked comprehensive written procedures for ensuring that installed ramps comply with ADA standards. The assistant chief of PSAS and the supervisor of Prosthetics indicated they verbally directed staff to ensure installed ramps complied with ADA by requiring vendors provide post-installation photographs with measurements or by requesting vendors address ADA noncompliance when necessary. However, staff stated they were unaware of this requirement, and it was not included in written procedures.

While onsite, PSAS management said they thought the verbal direction was sufficient to ensure staff took appropriate actions. In December 2015, the

chief and assistant chief of PSAS indicated they intended to modify written procedures and develop a checklist to help ensure staff obtain appropriate post-installation documentation.

Vendor Requirements Should Be Formalized PSAS controls were not sufficient to require vendors to provide ADA-compliant ramps. Prior to our audit, purchasing agents stated they verbally informed vendors of the requirement to provide and install ADA-compliant ramps. However, PSAS did not routinely document this requirement in written RFQs or purchase orders. PSAS-written RFQs also did not include requirements for vendors to provide measurements in bids. Additionally, RFQs and purchase orders did not include requirements for vendors to provide post-installation photographs with measurements for installed ramps.

Following our November 2015 site visit, the chief and assistant chief of PSAS indicated they began requiring staff to include the written requirement for vendors to provide ADA-compliant ramps within each RFQ. In February 2016, we verified PSAS included this requirement in local procedures. We also obtained several RFQs issued to vendors after November 2015 and verified all contained the requirement for ADA-compliant ramps. PSAS management also stated it was planning to modify RFQs to include requirements for vendors to provide measurements when they submit bids and to modify purchase orders to include requirements for installed ramps.

- *What Resulted* Based on the results of our sample and the three complainant-specific ramp orders, we estimated that staff made errors for modular ramp purchase orders totaling approximately \$342,000 for veterans from August 2014 through March 2015.
- **Conclusion** The error rates identified at the Malcom Randall VAMC indicated significant control weaknesses in ensuring modular ramps were ADA compliant prior to awarding purchase orders and after installation. Because of these weaknesses, staff did not ensure modular ramps complied with ADA or the VAMC's standards to help ensure veterans' safety and accessibility.

Without ensuring installed ramps comply with ADA slope and landing standards, the VAMC may unknowingly purchase ramps with dangerously steep slopes and missing or inappropriately sized landings. In general, the steeper a ramp slope, the more likely veterans will have trouble safely controlling their descent. A steeper slope may increase the possibility of a veteran tipping backward and may require more strength to ascend the ramp. Furthermore, level, adequately sized landings are important in order to provide veterans enough space to stop or turn safely.

Without strengthening controls to ensure modular ramps comply with ADA, the VAMC might continue to purchase ramps that could be potentially unsafe for mobility-challenged veterans. In addition, by formally requiring vendors to provide ramp measurements, the VAMC could help ensure staff receive necessary documentation to verify the safety and accessibility of ramps. In light of the considerable growth in ramp orders, enhancing controls can help ensure continuity and assist the VAMC in providing the necessary oversight of their vendors.

Recommendations

- 1. We recommended the Malcom Randall VA Medical Center Director develop and implement a quality review process to ensure staff only award purchase orders for modular ramps that are Americans with Disabilities Act-compliant and perform follow-up with vendors to ensure installed ramps comply with the Americans with Disabilities Act.
- 2. We recommended the Malcom Randall VA Medical Center Director develop a formal plan to identify training needs of staff responsible for purchasing modular ramps and ensure staff are trained periodically and appropriately.
- 3. We recommended the Malcom Randall VA Medical Center Director update written procedures to reflect the requirement that staff ensure vendor compliance with Americans with Disabilities Act standards for installed modular ramps.
- 4. We recommended the Malcom Randall VA Medical Center Director formally require vendors to provide modular ramp measurements in bid submissions and post-installation photographs.

Management Comments and OIG Response The director of the Malcom Randall VA Medical Center concurred with our findings and recommendations and requested closure of all recommendations based upon actions taken as a result of our audit. Although the Director provided responses indicating how the facility has addressed each recommendation, additional actions by the VA Medical Center are needed to fully address our concerns and to close the recommendations made in this report.

In response to Recommendation 1, the director stated PSAS leadership conducted an assessment of training needs for quality review. In addition, the director's response stated the Standard Operating Procedure (SOP) used by purchasing agents was modified to incorporate language on Form 10-90 (Request for Quotation) and for the purchase order to require the vendor submit modular ramp measurements in bid submission and post-installation photographs. However, the director's response did not include documentation supporting the facility's development and implementation of a quality review process. We reiterate the need for the facility to develop and implement a quality review process to evaluate staff's actions to help ensure modular ramps are awarded and installed in compliance with ADA standards.

In addition, although the director's response to Recommendation 2 indicated PSAS leadership assessed staff's training needs, developed a training plan, and provided subsequent training, it did not include documentation supporting these actions. Specifically, the response did not provide the results of the assessment, the training plan, and documentation indicating staff completed training. In order to close this recommendation, documentation is needed to support these actions.

In response to Recommendation 3, the director provided a revised SOP and stated staff were trained on the updated procedures. We reviewed the SOP and noted it did not include procedures requiring staff to ensure they receive post-installation photographs with measurements and perform follow-up with vendors to address ADA noncompliance. We will consider the recommendation closed when the SOP is revised to address our concerns.

In response to Recommendation 4, the director indicated the revised SOP incorporated RFQ and purchase order language that requires vendors to submit measurements in bid submissions and post-installation photographs, respectively. The director also provided samples of RFQs, purchase orders, and vendor post-installation documentation. Though the director's response partially addressed our recommendation, we advise additional actions are necessary. For example, the SOP does not direct purchasing agents to include language in RFQs that requires vendors to provide measurements in bid submissions, and these requirements were not included in the sample RFQs provided. Moreover, the SOP directs agents to include language in purchase orders that requires vendors to provide photographs with slope measurements of installed ramps; however, the language does not clearly require the photographs to include measurements for each ramp run and landing pad. Similarly, requirements for these comprehensive measurements were not included in the sample purchase orders provided in the sample purchase orders provided.

We will monitor the VAMC's progress and follow up on the implementation of our recommendations until all proposed actions are completed. Appendix D of this report contains the full text of the director's comments.

Appendix A Background

VA Federal Supply Schedule Modular Ramps

Process for

Ramp

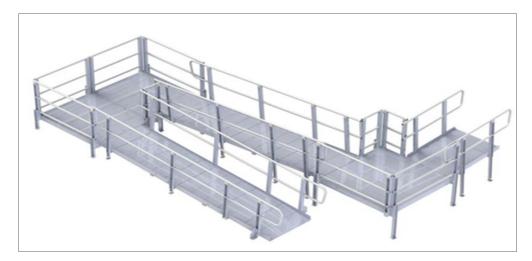
Malcom Randall

VAMC Modular

Procurement

Under delegated authority by the General Services Administration, the VA Federal Supply Schedule program supports the health care acquisition needs of VA and other Government agencies. VA procures ramps under VA Schedule Program 65 II F, *Patient Mobility Devices*, for veterans who are mobility challenged and cannot negotiate stairs or who require the use of a mobility device, such as a wheelchair. Modular ramps consist of prefabricated ramp sections in various lengths, landings, fully adjustable support legs, and handrails. Figure 2 shows an example of a modular ramp.

Figure 2. Modular Ramp Example From a Vendor



Source: Obtained from the Prairie View Industries Inc. Web site

The process of procuring a modular ramp starts when a physician submits a consult request including medical justification. The purchasing agent then reviews the request to ensure adequate justification exists and solicits bids from vendors using written RFQs. The purchasing agent is then required to evaluate vendor responses and select a bid for only ADA-compliant ramps. Once the agent selects a bid, a purchase order is awarded to the selected vendor. After ramp installation, agents are required to verify vendor charges and installation.

Malcom Randall VAMC Ramp Purchases VAMC modular ramp orders valued at or below \$3,000 grew substantially during FYs 2014 and 2015. According to National Prosthetics Patient Database data provided by PSAS management, the total number of VAMC modular ramp purchase orders valued at or below \$3,000 grew from 370 totaling about \$696,000 in FY 2014 to 646 totaling about \$1.2 million in FY 2015. This represents an increase in orders of approximately 75 percent and about 73 percent in their associated cost. Figure 3 shows the total number of quarterly modular ramp orders valued at or below \$3,000 for each quarter of FY 2014 and FY 2015.

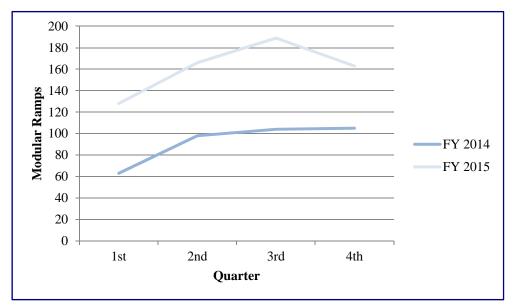


Figure 3. Modular Ramp Orders by Quarter From FY 2014 and FY 2015

Source: Data from the National Prosthetics Patient Database provided by Malcom Randall PSAS

Appendix B Scope and Methodology

We conducted our audit from October 2015 through April 2016 to assess the merits of a request by Congressman Tim Walberg to review an allegation that the Malcom Randall VAMC Gainesville, FL, purchased ramps that did not comply with ADA standards. Specifically, we reviewed the VAMC's modular ramp purchases from August 2014 through March 2015.

Methodology We reviewed applicable laws, policies, and procedures to assess controls over purchasing and verifying the installation of modular ramps. We interviewed the PSAS National Program Director, VAMC PSAS management and staff, and the complainant. Furthermore, we conducted a site visit to the Malcom Randall VAMC in November 2015.

We obtained modular ramp purchase orders at or below \$3,000 from VAMC PSAS management that were created from January 1 through March 31, 2015, in the National Prosthetics Patient Database, a Veterans Health Administration electronic system. From this universe, we selected a random sample of 30 purchase orders and added 3 orders specifically referred to by the complainant that were created between August 1, 2014, and January 31, 2015, for review.

For each purchase order, we reviewed documentation, such as vendor bids, post-installation photographs, and invoices. To test our finding, we selected a judgmental sample of ramps installed at veterans' residences from the 33 sampled purchase orders and measured all vendor-installed ramp runs and landings associated with 6 ramps in November 2015 to determine compliance with ADA slope and landing standards. We based our sample selection on errors identified during the audit, geographical proximity, and veteran availability.

Fraud Assessment To obtain reasonable assurance of detecting fraud that may have occurred within the context of our audit, we assessed the risk that violations of legal and regulatory requirements, fraud, and abuse could occur during this audit. We considered risk factors such as the nature of the operation, internal controls, and previous audit and review findings when developing our audit steps. We interviewed VAMC PSAS management and staff concerning potential fraudulent activity within the scope of our objectives. The audit team exercised due diligence in staying alert to any fraud indicators. We did not identify any instances of fraud during this audit.

Data
ReliabilityTo assess data reliability, we obtained modular ramp purchase orders from
VAMC PSAS management valued at or below \$3,000 from a Veterans
Health Administration electronic system. We compared a sample of
purchase orders with associated hard copy documentation to verify veteran
information, date, purchase order amount, and vendor. We considered the
computer-processed data to be sufficiently reliable to support the audit

objectives, our findings, conclusion, and recommendations concerning the VAMC's controls over purchase orders.

Government Standards We conducted this audit in accordance with generally accepted government auditing standards. These standards require 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 the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objective.

Appendix C Statistical Sampling Methodology

To determine whether the Malcom Randall VAMC ensured modular ramps were ADA compliant prior to awarding purchase orders and followed up to ensure installed ramps were compliant, we examined a random sample of purchase orders valued at or below \$3,000 from January 1 through March 31, 2015. We also examined three complainant-specific purchase orders created between August 1, 2014, and January 31, 2015.

- **Population** The population consisted of 166 unique modular ramp purchase orders from January 1 through March 31, 2015.
- Sampling Design We used a simple random sampling design to select the sample. We randomly selected 30 modular ramp purchase orders valued at or below \$3,000. These purchase orders had an equal chance of being selected. We designed our sample to ensure sufficient, unbiased selection of all purchase orders created by the VAMC from January 1 through March 31, 2015. In addition, we included three complainant-specific purchase orders in the sample.

We also selected a judgmental sample of installed ramps at veterans' residences for measurement. This sample was based upon errors we identified, geographical proximity, and veteran availability.

WeightsWe calculated estimates in this report using weighted sample data. To
compute sampling weights, we took the product of the inverse of the
probabilities of selection at each stage of sampling. We used WesVar
software to calculate population estimates and associated sampling errors.
WesVar employs replication methodology to calculate margins of error and
confidence intervals to account correctly for the complexity of the sample
design.

Projections and Margins of Error Our results indicated the Malcom Randall VAMC purchased modular ramps that did not comply with ADA standards. The margins of error and confidence intervals are indicators of the precision of the estimates. If we repeated this audit with multiple samples, the confidence intervals would differ for each sample, but would include the true population value 90 percent of the time. We used the projection's point estimate.

Based on the results of our sample and the three-complainant specific ramps, we estimated that Malcom Randall VAMC PSAS staff made one or more errors when awarding purchase orders and performing follow-up with vendors for modular ramps totaling approximately \$342,000 from August 2014 through March 2015.

Table 2 provides the projection for errors identified.

Attribute	Point Estimate	Margin of Error	Lower Limit	Upper Limit	
Purchase Order With One or More Errors	\$342,000	\$36,800	\$305,000	\$379,000	

Table 2. Statistical Projections For Modular Ramp Purchase OrdersFrom August 2014 Through March 2015

Source: OIG statistical analysis of sample results projected over our universe based on 90 percent confidence interval

Note: Rounded numbers were used for reporting purposes.

Appendix D Management Comments

	epartment of Memorandum
Date:	May 13, 2016
From:	Director, Malcom Randall VA Medical Center, Gainesville, FL
Subj:	Audit of Modular Ramps Purchased by the Malcom Randall VA Medical Center, Gainesville, FL, 2015-04248-R9-0264
То	Assistant Inspector General for Audits and Evaluations (52)
	Below are the responses to the recommendations of the referenced OIG report.
	Recommendation 1: We recommended the Malcom Randall VA Medical Center Director develop and implement a quality review process to ensure staff only award purchase orders for modular ramps that are Americans with Disabilities Act compliant and perform follow-up with vendors to ensure installed ramps comply with the Americans with Disabilities Act.
	Concur
	Prosthetics and Sensory Aide Service Leadership conducted an assessment of staff's training needs for quality review and developed a training plan. All staff were subsequently trained on modular ramp installation requirements and the documentation required supporting payment to vendor for installation. Training is tracked in Training Management System (TMS). Refresher training provided as needed.
	Standard Operating Procedure has been developed and enclosed with this memo. Staff were trained on updated Procedure by 02-03-2016.
	The standard operating procedure purchasing agents use was modified to incorporate verbiage on form 10-90 (Request of Quote) and Purchase Order to require the vendor submit modular ramp measurements in bid submission and post-installations in photographs.
	We request closure of this recommendation based on the evidence provided above.
	Recommendation 2: We recommended the Malcom Randall VA Medical Center Director develop a formal plan to identify training needs of staff responsible for purchasing modular ramps and ensure staff are trained periodically and appropriately.
	Concur
	Prosthetics and Sensory Aide Service Leadership conducted an assessment of staff's training needs and developed a training plan. All staff were subsequently trained on modular ramp installation requirements and the documentation required

supporting payment to vendor for installation. Training is tracked in Training Management System (TMS). Refresher training provided as needed.

We request closure of this recommendation based on the evidence provided above.

Recommendation 3: We recommended the Malcom Randall VA Medical Center Director update written procedures to reflect the requirement that staff ensure vendor compliance with Americans with Disabilities Act standards for installed modular ramps.

Concur

Standard Operating Procedure has been developed. Staff were trained on updated Procedure by 02-03-2016.

We request closure of this recommendation based on the evidence provided above.

Recommendation 4: We recommend the Malcom Randall VA Medical Center Director formally require vendors to provide modular ramp measurements in bid submissions and post-installation photographs.

Concur

The standard operating procedure purchasing agents use was modified to incorporate verbiage on form 10-90 (Request for Quote) and Purchase Order to require the vendor submit modular ramp measurements in bid submission and post-installation in photographs (samples enclosed).

We request closure of this recommendation based on the evidence provided above.

(original signed by:)

THOMAS WISNIESKI

Contact	For more information about this report, please contact the Office of Inspector General at (202) 461-4720.
Acknowledgments	Timothy J. Crowe, Director Jessica Blake Hope Favreau Matthew Hammond Anne Mullett Nelvy Viguera Butler

Appendix F Report Distribution

VA Distribution

Office of the Secretary Veterans Health Administration Veterans Benefits Administration National Cemetery Administration Assistant Secretaries Office of General Counsel Board of Veterans Appeals Office of Acquisition, Logistics, and Construction

Non-VA Distribution

House Committee on Veterans' Affairs
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House Committee on Oversight and Government Reform
Senate Committee on Veterans' Affairs
Senate Appropriations Subcommittee on Military Construction, Veterans Affairs, and Related Agencies
Senate Committee on Homeland Security and Governmental Affairs
National Veterans Service Organizations
Government Accountability Office
Office of Management and Budget

<u>U.S. Senate</u> Florida: Bill Nelson, Marco Rubio Georgia: Johnny Isakson, David Perdue Michigan: Gary C. Peters, Debbie Stabenow

U.S. House of Representatives

Florida: Gus M. Bilirakis, Corrine Brown, Vern Buchanan, Kathy Castor, Curt Clawson, Ander Crenshaw, Carlos Curbelo, Ron DeSantis, Ted Deutch, Mario Diaz-Balart, Lois Frankel, Gwen Graham, Alan Grayson, Alcee L. Hastings, David Jolly, John Mica, Jeff Miller, Patrick Murphy, Richard Nugent, Bill Posey, Tom Rooney, Ileana Ros-Lehtinen, Dennis Ross, Debbie Wasserman Schultz, Daniel Webster, Frederica Wilson, Ted Yoho
Georgia: Sanford D. Bishop Jr., Buddy Carter, Austin Scott Michigan: Tim Walberg

This report is available on our Web site at www.va.gov/oig.