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I just wanted to thank you for taking this matter serious. I am one of the whistleblowers who signed the letter back in November 2014. While I am still shocked that things had to get as far as the legislature's office I am also grateful. As a Case Planner that signed the letter the initial goal was to simply this: Here's the contract with ECDSS what we have read does not appear to be what we have actually been told to do, if what what we are doing is right fine, if not please give us direction because the response to issues we have brought to administration don't seem to be appropriate. What I thought the outcome would be: Audit, findings, Plan of Corrective Action if needed. Who would have thought that it is now 2016, the findings have proved our concerns to be legit and still no answers. What I don't understand is why instead of being so defensive she would not just simply comply with the finding. I'm not even sure how it's possible that the non-compliance of the Buffalo Urban League has been able to go this long. At this point the main focus seems to be that since the money for overbilling was paid back to the county that it negates all of the other findings.

I was employed there as a Case Planner from 2012-2015 and can assure you that this billing was no human error but actually common practice. This may have been the largest amount in a single day, but again common practice. What one may fail to realize is that only one contract year was investigated/audited which means since this is common practice this has been going on for quite some time(years). Why would they change their practices if there has never been any oversight?

In my opinion one does not have to work in the human service field to know that it sounds outrageous to bill over 400 hours within a single day of work whether billing is done in real time or not. What is also very shocking is how does a person who actually submits the billing to the county not see this as a red flag, as well as whomever accepted the billing at the county level.

Another example of a billing concern would be that during the months of January through September the average billing per day was expected to be about 6-8 hours, October through December the average billing per dat was expected to be about 10-13 hours per day. Doesn't sound logical does it? There were times when staff were unable to take their vacation if we were not producing enough billing between the last 2 months of the year to "make our contract" When I first started working there I thought to myself and sometimes even said out loud to staff who worked there for several years "doesn't this look suspicious to auditors that the billing in the the later part of the year drastically increased from the earlier part of the year?" Some of the response I heard were that's how it's always been, and we don't get audits!!! This really took me by surprised because I've worked in human services non-profit organizations for many years and audits were a regular component.
e worked in human services for many years and audits were expected and conducted.

lack of training- I worked as a case planner for the Buffalo Urban League Preventive for approximately 3 years and the only training I had I only went to was because it was an option. I remembered reading the Preventive Handbook I believe it was called for about the first week and I was assigned my first Case before my 1st month of employment was over

Client confidential records on an unsecured system (Access)- In the Buffalo Urban League Access system I was able to read all client information not only clients I was assigned to. Not only could I read active clients confidential information but I could also read the information of clients information that was still in the system who may have had services 5 or more years ago. In the connection system I was only allowed to read and enter notes for clients I was assigned to. While during this particular audit most of the billing concern was over billing, what is unknown to most(because the audit was only for one year) is that there was a time in which billing was entered into the access system under each case planners name that was NOT put in by the case planners themselves in effort to create more billing in attempt to " make our contract" but was put in by administration in the names of each case planner because that year was not the year under review it is unknown as to whether this was actually addressed as we were told. One may ask how this possible, and it is because of the access to all client information that each staff had in the Preventive Program in the "access system" which allowed anyone to change/edit/delete/ add to anyone`s

notes and you would not know this happened unless you paid very close attention to your individual work in the access system

The results could have been quite simple, especially since as Case Planners we did not receive directives from the President/CEO level, there are positions directly under her that oversee the Programs. The administrative team consisted of the Vice President (Michelle Simpson), Program Coordinator, Program Supervisor, Clinical Specialist, Parenting Skills Supervisor. Within the almost 3 years that I worked there the entire administrative team in the Preventive Program was replaced. The replacement of all of these positions EXCEPT the Vice President (Michelle Simpson) were replaced, and guess what even with the replacement the exact same concerns were still in effect. Why, because the directives of the Program came from the Vice President (who started the Preventive Program at the Buffalo Urban League)down. It's just very sad that things had to come to this level especially for a needed community service. Why in the world would the President/CEO take matters like these as a personal attack instead fixing the issues, finding out the root of the issues, and making sure they don't happen again??

It seems the focus since the beginning of the audit by the President/CEO of the Buffalo Urban League is that this was a personal attack instead of working to correct the problems or issues that were found in a Program at her organization. Whether there was a letter of concern signed by 100 case planners or 1 there were obvious issues with the program that needed to be addressed that "we" those who signed the letter just wanted someone to listen to because those who were in control at the agency would not. I am unsure how it can be continued to be said that the letter was written by disgruntled employees, when WE were the ones who wanted to put the extreme concerns to an end in a Program that we enjoyed working for. I am also unsure how it can be said that this is information is hearsay and speculation when it came from US those that wrote the letter who were Case Planner for the Program. I think it's safe to say that WE as the Case Planners for the Preventive Services Program would be able to provide the most accurate information since we were doing the work.

If the President/CEO wants to take the fall for all of this I guess nothing can be done about that, but it's very unfortunate that this is the stance she chooses to take. To me one of the most important skills to have as a leader is not to take things personal, and not to allow my ego to get in the way of the running a great organization such as the Buffalo Urban League. It seems that there is a misconception in realizing that a President/CEO is a POSITION that is held, NOT POWER to gain supporters in a matter in which the supporters are supporting just because of her name and it doesn't matter to them that there are real issues. Shameful!!

Despite everything I will stand firm and continue to say the Buffalo Urban League is a great Organization that has great programs that are much needed in the community. That DOES NOT however take away from the fact that whether or not the Preventive Services is looked into in even years prior to the actual audit or other programs in the agency is reviewed that there is MAJOR concern in several important areas. Nor does it take away from the fact that was was discovered in the findings was NOT one time occurrences but rather normal practice for the Preventive Program. Now, who is going to be held accountable?

Thank You again,

Tamara Poindexter
Former Case Planner Preventive Services BUL