Department of Children and Families

Office of Inspector General

Annual Report

Fiscal Year 2016-2017

August 18, 2017

Keith R. Parks
Inspector General
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Executive Summary

In accordance with § 20.055, Florida Statutes (F.S.), the Office of Inspector General (OIG) is “established in each state agency to provide a central point for coordination of and responsibility for activities that promote accountability, integrity, and efficiency in government.” Additionally, by September 30, the Inspector General is required to complete an annual report summarizing activities of the office during the prior fiscal year. Consistent with these duties, the following accomplishments, highlights, and activities demonstrate significant efforts of the Department of Children and Families (Department) OIG staff during Fiscal Year 2016-2017:

- Received, reviewed, and processed 4,315 complaints or requests for assistance from Department managers, employees, clients, or citizens;
- Opened 85 cases, and completed 121 investigations, that examined allegations of violations of statute, rule, policy, contract, or systemic issues, and tracked 104 corrective actions (166 recommendations) by management to ensure responses to recommendations for personnel action or policy clarification were appropriately addressed;
- Processed 4,153 Inspector General Reference Checks for current and former Department and provider employees;
- Conducted 66 Outreach Training sessions for 2,019 Department and/or provider employees on the role of the OIG, when to report suspected employee wrongdoing, the Whistle-blower’s Act,¹ and how to recognize violations of statute, rule, policy, or contract;
- Maintained accreditation status through the Commission for Florida Law Enforcement Accreditation, Inc. (CFA);
- Completed 10,063 fair hearing requests, 1,406 administrative disqualification hearing requests, and 125 nursing facility discharge or transfer hearing requests;
- Published 9 assurance reports, which contained 20 findings and 30 recommendations for improvement of efficiency and effectiveness in Department programs and operations;
- Coordinated liaison activities for the Auditor General, Office of Program Policy Analysis and Government Accountability (OPPAGA), and federal agency requests for responses and information regarding audits and reviews;
- Reviewed and processed 141 Department contractor and provider audit packages of state financial assistance as required by § 215.97, F.S., as well as 5 certifications of no audit required from providers that did not meet the threshold; and
- The Auditor General completed its triennial Quality Assessment Review of the internal audit function. The review found that the audit activity was adequately designed and provided reasonable assurance of conformance with applicable auditing standards.

¹ The Whistle-blower’s Act, § 112.3187-112.31895, F.S., is intended to protect current employees, former employees, or applicants for employment with state agencies or independent contractors from retaliatory action. Whistle-blower designation is determined by the OIG. If a complaint meets whistle-blower criteria, the whistle-blower’s identity is protected from release and an investigation is conducted pursuant to § 112.3189, F.S.
The OIG worked diligently to meet its statutory mandates and fulfill its mission of “Enhancing Public Trust in Government.” This annual report summarizes the activities and accomplishments of the OIG for Fiscal Year 2016-2017.

Statutory Requirements
The OIG is established in each state agency to provide a central point of coordination and responsibility for promoting and ensuring accountability, integrity, and efficiency in government. In accordance with § 20.055, F.S., the Inspector General is appointed by and reports to the Chief Inspector General, but is under the general supervision of the agency head. As outlined in statute, the duties of the Inspector General include:

- Advising in the development of performance measures, standards, and procedures for the evaluation of state agency programs;
- Assessing the reliability and validity of information provided on performance measures and standards, and making recommendations as needed;
- Reviewing actions taken by the agency to improve operational and program performance and making recommendations for improvement;
- Providing direction for, supervising, and coordinating audits, investigations, and management reviews relating to the programs and operations of the agency;
- Conducting, supervising, and coordinating activities that promote economy and efficiency and prevent or detect fraud, waste, and abuse;
- Informing the Chief Inspector General of fraud, abuses, and deficiencies relating to programs and operations administered or financed by the agency, recommending corrective actions concerning fraud, abuses, and deficiencies, and reporting on the progress made in implementing corrective action;
- Ensuring effective coordination and cooperation between the Auditor General, OPPAGA, federal auditors, and other governmental entities;
- Reviewing rules relating to programs and operations, and making recommendations regarding impact;
- Ensuring an appropriate balance between audit, investigative, and other accountability activities; and
- Complying with the General Principles and Standards for Offices of Inspector General as published and revised by the Association of Inspectors General.
As of June 30, 2017, the OIG consisted of three sections: Appeal Hearings, Internal Audit, and Investigations. Appeal Hearings and Investigations staff are located at headquarters and in field offices throughout the state.²

² Field Offices: Investigations – Ft. Lauderdale, Miami, Orlando, Tallahassee, and Tampa
Appeal Hearings – Ft. Lauderdale, Ft. Myers, Gainesville, Jacksonville, Marianna, Miami, Orlando, Pensacola, Tallahassee, Tampa, and West Palm Beach
### Professional Certifications and Licenses

In addition to the educational degrees and experience required for their respective positions, OIG staff members hold the following professional certifications and licenses:

- Certified Inspector General: 2
- Certified Inspector General Auditor: 6
- Certified Inspector General Investigator: 9
- Certified Internal Auditor: 2
- Certified Internal Controls Auditor: 1
- Certified Fraud Examiner: 2
- Certified Public Accountant: 1
- Certified Public Manager: 3
- Certified Hearing Official: 1
- Certified Law Enforcement: 2
- Certified Paralegal: 1
- Licensed by the Florida Bar: 8
- CFA Accreditation Manager: 1
- CFA Team Leader Assessor: 1
- Child Welfare Protective Investigator: 1
- Florida Certified Contract Manager: 1
Intake Unit

The Intake Unit handles incoming calls and reviews all complaints or requests for assistance received by the Investigations Section via telephone, letter, fax, e-mail, website, or in person. The Intake Unit reviewed a total of 4,315 complaints or requests for assistance, received in the following manner:

- 2,795 via telephone
- 739 via e-mail
- 582 via website
- 188 via letter or fax
- 11 in person

![Pie chart showing the distribution of complaints by method of receipt.]

- **Telephone**: 65%
- **E-mail**: 17%
- **Website**: 13%
- **Letter or fax**: 4%
- **In person**: <1%
Investigations Unit

The Investigations Unit initiates investigations or management reviews when violations of statute, rule, policy, and/or contract provisions are alleged, including those filed under the Whistle-blower’s Act. While investigations are administrative in nature, potential criminal violations are often discovered during the investigative process. When a determination is made that the subject of an investigation has committed a potential criminal violation, the investigation is coordinated with the Florida Department of Law Enforcement, local law enforcement agencies, or the appropriate State Attorney’s Office for criminal prosecution.

Investigations and Management Reviews

- **85** cases were opened for investigation or management review
- **121** investigations were completed
- **189** allegations were investigated or reviewed

Whistle-blower Investigations

There were no investigations initiated or completed in accordance with the Whistle-blower’s Act.

Recommended Corrective Actions

Based on the investigation or management review, the Investigations Unit may make recommendations in the form of corrective actions. The recommendations are for the purpose of process improvement and are made to Department or contracted provider management. The final reports, including recommendations, are sent to all appropriate parties and actions are tracked to completion. A total of **104** corrective actions, entailing **166** recommendations, were issued by the Investigations Unit.

Personnel Actions Associated with Investigations and Management Reviews

Personnel actions may occur as a result of allegations reported to the OIG, or investigations or management reviews completed by the OIG. The following actions were reported to the OIG and took place at the discretion of management or the employees themselves:

- **65** Resignations
- **51** Terminations
- **4** Suspensions
- **3** Written Counselings
- **1** Demotion
The following chart provides a comparative analysis of the 85 cases opened by Circuit:

The top six allegation types\(^3\) and corresponding numbers of allegations investigated for closed cases are as follows:

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\(^3\) These are the top six of the 189 allegations investigated or reviewed.
Public Records Requests

The Investigations Section responded to 31 public records requests under Chapter 119, F.S.

Inspector General Reference Checks / Database Checks for Prior Investigations

Current and former Department and provider employees being considered for rehire, transfer, promotion, or demotion are screened to determine if they were the subject of an OIG investigation. The OIG processed 4,153 such reference checks.

Inspector General Outreach Program

The Investigations Unit offers an outreach program to educate management and staff of the Department and providers on the role of the OIG. The training sessions cover when to report suspected employee wrongdoing, protection afforded under the Whistle-blower's Act, and how to recognize violations of statute, rule, policy, or contract. A total of 66 training sessions, involving 2,019 individuals, were completed with Department employees and/or contracted and subcontracted providers.
The Appeal Hearings Section conducts administrative hearings for applicants or recipients of public assistance programs, and individuals being transferred or discharged from nursing facilities. The section also conducts disqualification hearings for the Department when individuals are alleged to have committed intentional program violations in the Cash or Food Assistance Programs.

The Appeal Hearings Section reports directly to the Inspector General. This assures independence and complies with federal regulations requiring a hearing officer to be a headquarters-level employee. Hearings are funded with 50% federal funds and 50% state general revenue.

**Hearings Authority**

The section operates pursuant to the following statutory authorities:

- § 409.285, F.S., *Opportunity for hearing and appeal*
- § 120.80, F.S., *Exceptions and special requirements; agencies*
- § 400.0255, F.S., *Resident transfer or discharge; requirements and procedures; hearings*
- § 393.125, F.S., *Hearing rights*


The major controlling federal regulations are as follows:

- Temporary Assistance to Needy Families Personal Responsibility and Work Reconciliation Act of 1996
- Medicaid - 42 C.F.R. § 431.200, *Fair Hearings for Applicants and Recipients*
- Food Assistance - 7 C.F.R. § 273.15, *Fair Hearings*
- 7 C.F.R. § 273.16, *Disqualification for intentional Program violation*

**Hearings Jurisdiction**

The section conducts hearings for the following programs:

- Office of Economic Self-Sufficiency (OES)
- Cash, Temporary Assistance to Needy Families (TANF)
- Food Assistance
- Disaster Food Assistance Program
- Medicaid Eligibility
- Refugee Assistance Program
- Institutional Care Program
• Optional State Supplementation

Medicaid Benefits

• Agency for Health Care Administration (AHCA)\(^4\)
• Agency for Persons with Disabilities (APD)
• Nursing Facility Discharge or Transfer Hearings
• Preadmission Screening and Resident Review Hearings

Others

• Department of Health Special Supplemental Food Program for Women, Infants, and Children (WIC)
• Eligibility or amount of assistance for Office of Child Welfare programs funded through the Social Security Act
• Child Support Enforcement issues for the Department of Revenue (DOR)

Hearings Activities

During Fiscal Year 2016-2017:

10,063 fair hearing requests were completed
1,406 administrative disqualification hearings for Cash or Food Assistance Program benefits were conducted and completed
125 nursing facility discharge or transfer hearings were completed

<table>
<thead>
<tr>
<th></th>
<th>DCF</th>
<th>AHCA</th>
<th>APD</th>
<th>DOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY 2015-16</td>
<td>8,268</td>
<td>2,256</td>
<td>248</td>
<td>12</td>
</tr>
<tr>
<td>FY 2016-17</td>
<td>9,465</td>
<td>1,732</td>
<td>385</td>
<td>12</td>
</tr>
</tbody>
</table>

\(^4\) As of March 1, 2017, appeals related to Medicaid programs directly administered by AHCA, including appeals related to Florida’s Statewide Medicaid Managed Care program and associated federal waivers, were directed to AHCA pursuant to \$409.285(2), F.S.

\(^5\) DCF hearings include fair and administrative disqualification hearings. AHCA hearings include fair and nursing home discharge or transfer hearings. APD and DOR hearings include only fair hearings.
Internal Audit Unit

The Internal Audit Unit conducts assurance audits and consulting projects related to programs, operations, and contracts to promote economic and efficient use of Department resources, and ensure compliance with policies, procedures, laws, regulations, and contractual requirements. The scope of internal auditing includes evaluating the adequacy and effectiveness of internal controls, assessing the Department’s governance process, and evaluating risk exposures, including the potential for fraud. Acting as a liaison between external auditors and the Department, the Internal Audit Unit monitors implementation of Department responses to reports issued by the Auditor General or OPPAGA.

The Internal Audit Unit published nine (9) reports, which included 20 findings and 30 recommendations for improvement. Department management concurred or agreed with all of the findings.

During the fiscal year, the Internal Audit Unit facilitated seven (7) external projects from various external auditors, including the Auditor General, the U.S. Department of Health and Human Services Office of Inspector General, the Department of Financial Services, and OPPAGA. The unit also tracked and reported Department implementation of corrective action for six (6) external reports.

Single Audit Unit

The Single Audit Unit was created within the Department to review and recommend action on recipient audits of state and federal funding. The activity is mandated by Federal Uniform Grant Guidance and § 215.97, F.S.

Public accounting firms perform financial audits of Department contractors and providers that receive state and federal financial assistance. Single audits and associated reports are required by contract and considered a critical accountability component for state and federally funded initiatives. Financial accounting and reporting can be complex and technical. Since contract managers may lack the financial background or technical skills to properly assess financial statements and related schedules, this function was placed in the Internal Audit Section.

At the completion of each desk review, an Audit Review Status Report is prepared and sent to the Department contract manager and contract administrator. If a report contains findings, Contracted Client Services is included in the notification. Many desk reviews require no follow-up action. Desk review issues that require further attention from contract managers range from review findings communicated for informational purposes to significant issues requiring corrective action by the recipient. The Single Audit Unit also provides feedback to external auditors where clarification of an existing audit is required. The unit analyzed and reviewed 141 recipient audit reporting packages. In addition, the Single Audit Unit reviewed 58 certifications of no audit required from providers that did not meet the threshold requiring a single audit.
Florida Inspectors General Expertise System (FIGES)

The Internal Audit Section staff created and serve as the site administrator for the Florida Inspectors General Expertise System (FIGES). FIGES is a public internet database of Florida state and local government Offices of Inspector General. It contains contact information, areas of expertise, and professional certifications for Office of Inspector General staff (http://figes.dcf.state.fl.us).
Summary of Issued Internal Audits

PROJECT #A-1516DCF-004: Audit of the Florida Safe Families Network Financial Module

The objective of this audit was to examine Community-Based Care Lead Agencies’ (CBCs’) usage of the Florida Safe Families Network (FSFN) Financial Module to record client-specific expenditures. The scope of this audit focused on Office of Child Welfare client-specific expenditures during the period January 1, 2015 through March 31, 2015, including policies and practices in effect as of June 30, 2015.

The audit disclosed the following:

- CBCs often did not enter sufficient information in the FSFN Financial Module for the Department to determine whether client-specific expenditures were incurred;
- Control over access to confidential FSFN data needed improvement; and
- The Department did not require CBCs to enter all client-specific expenditures in the FSFN Financial Module.

The Director of Child Welfare Strategic Projects responded that the Department has defined the minimum menu of services desired in communities to serve children and families and is implementing requirements for each CBC to document all such services funded by the CBC.

PROJECT #A-1516DCF-045: Welfare Trust Funds Maintained by Headquarters

The objectives of this audit were to determine whether:

- Transactions of Welfare Trust Funds were made in compliance with state law and Department policy and procedures;
- Adequate controls were maintained over donations to ensure they were appropriately expended;
- Sufficient documentation was generated and maintained to support Welfare Trust Fund disbursements;
- Local bank account balances were maintained in accordance with Department policy; and
- The Central and SunCoast Regions spent any available Welfare Trust Funds during calendar year 2015.

The scope of this audit included reviewing procedures and supporting documentation of Welfare Trust Funds maintained at Headquarters.

The audit disclosed the following:

- During the 2015 calendar year, the Central and SunCoast Regions did not expend any of the $226,960.77, in total, available to them in Headquarters Welfare Trust Funds.
Additionally, the Central Region did not expend any of the $11,443.02 available in the Mildred F. MacDonnell Children’s Fund; 
- Excess Welfare Trust Funds in local bank accounts were not invested in accordance with state law and Department policy; 
- Petty cash internal control procedures were insufficient and needed improvement; and 
- Welfare Trust Funds procedures were outdated during the period under review.

The Chief Financial Officer responded that Financial Management will provide monthly information regarding account balances, directives, and/or restrictions for use to all regions, review the usage of funds, invest excess funds, and update existing policies.

**PROJECT #A-1516DCF-118: Audit of the Incident Reporting and Analysis System (IRAS)**

The objective of this audit was to evaluate the internal control structure and determine if the system was being used as designed. The scope of this audit focused on IRAS transactions and related activities for calendar years 2014 and 2015, and through the end of fieldwork (September 28, 2016).

The audit disclosed the following:

- IRAS access controls did not effectively remove IRAS users that were no longer employed by the Department or its licensed or contracted service providers; 
- For calendar years 2014 and 2015, the Southern Region did not enter all critical incidents into IRAS. Upon review of more recent data, however, the Southern Region had significantly improved its IRAS incident reporting; and 
- IRAS Substance Abuse and Mental Health (SAMH) Missing Child notifications may need additional review.

The Assistant Secretary for Child Welfare responded that the program would work with Department staff to revise the necessary procedures and the IRAS User Administrator Guide to develop a protocol for ensuring the timely deactivation of profiles when IRAS access is no longer needed or authorized. The Assistant Secretary for Child Welfare and the Assistant Secretary for SAMH responded that the two programs would work together to address policy issues regarding missing children notifications.

**PROJECT #A-1617DCF-013: Memoranda of Agreement and Memoranda of Understanding**

The objectives of this audit were to determine the number of active interagency agreements managed by the Department; determine if the use of interagency agreements by the Department was in accordance with the Department of Management Services, the Department of Financial Services, and Department procedures; and determine if the Department has an adequate methodology for tracking interagency agreements. The scope primarily focused on the various types of Department-issued interagency agreements currently managed by Department staff. Interagency agreements reviewed included Memoranda of Agreement, Memoranda of Understanding, and Community Partner Agreements.
The audit disclosed the following:

- The methodology for issuing and approving interagency agreements was not consistent between regions and program areas; and
- Department methodology for tracking various types of interagency agreements was not consistent between regions and program areas.

The Assistant Secretary for Administration responded that the Office of Contracted Client Services convened a work group to address and create a standardized routing and approval process, a standard unique identifier, and an approach to retention of the agreements.

**PROJECT #A-1617DCF-020: Child Care License and Registration Fee Collections**

The objective of this audit was to determine whether the Department periodically reconciled the amount of license and registration fees that should be collected, per the Child Care Administration Regulation and Enforcement System (CARES), to the amount of fees actually collected, deposited in the bank, and recorded in the Department Cash Receipts System and the Florida Accounting and Information Resource (FLAIR) system. The scope focused primarily on child care license and registration fee collections recorded by the Department in FLAIR for Fiscal Year 2015-2016.

The audit disclosed the following:

- The Department did not periodically reconcile the amount of license and registration fees that should be collected per CARES to the amount of fees actually collected, deposited in the bank, and recorded in the Cash Receipts System and FLAIR;
- Bank deposits of license and registration fee collections were not always timely; and
- Physical safeguarding of registration fee collections needed improvement.

The Director of Child Care Regulation responded that the Office of Child Care Regulation would work with the Office of Revenue Management to conduct a quarterly reconciliation. The Director of Child Care Regulation also responded that the appropriate staff will be reminded of the statutory time requirements and that updates to policy will be incorporated to ensure that registration fees are safeguarded.

**PROJECT #A-1617DCF-023: Office of Public Benefits Integrity Memorandum of Understanding with the Department of Financial Services Division of Public Assistance Fraud**

The objective of this audit was to determine if funds were being expended in accordance with the agreement. The scope of this audit primarily focused on payments made under this agreement during Fiscal Year 2015-2016.
The audit disclosed the following:

- The invoices submitted by the Department of Financial Services (DFS) Division of Public Assistance Fraud (DPAF) did not contain the detail as required by the agreement; and
- The agreement did not contain sufficient language to ensure that payments are made in accordance with federal requirements.

The response by the DPAF Director stated that DPAF would work with DFS Finance and Accounting and the Department’s Office of Public Benefits Integrity to ensure that the monthly invoices contain the detail specified in the agreement. The Director of Data Analytics and Contract Management in the Office of Economic Self-Sufficiency responded that the two Departments would work together to strengthen the language in the Memorandum of Understanding to include reference to the federal requirements.

**PROJECT #A-1617DCF-034: Inappropriate Access to Case Files in FSFN**

The objective of this audit was to identify conditions where Department employees and contracted providers accessed FSFN without a legitimate business purpose and to make recommendations to mitigate such occurrences. The scope of this audit focused primarily on investigations completed by the OIG during the period July 1, 2013 through June 30, 2016. The audit was limited to the Department’s current preventative and detective controls relating to FSFN.

The audit disclosed that supervisory reviews were not conducted to verify the legitimacy of FSFN searches. The Assistant Secretary for Operations concurred with the finding and is working closely with the Department Offices of Information Technology Services and Human Resources to reduce the occurrences of inappropriate access to Department systems. Specific steps being initiated include:

- Developing an e-Acknowledgement that will be disseminated to all employees. The e-Acknowledgement is to ensure that all Department employees are aware of state law and Department policies regarding falsifying records and accessing systems.
- Identifying red flag indicators that will be used to alert management and supervisors to possible inappropriate access and misuse of specific systems;
- Conducting regional meetings with all staff to ensure all employees are aware of the Department policy on accessing systems and records; and
- Ensuring system access is terminated for all employees that separate from the Department.

**PROJECT #A-1617DCF-064: Post Audit Sampling of Travel Advances**

The objective of this post-audit sampling was to determine if Department travel advance transactions complied with statutes, rules, and established operating procedures. The scope of this audit focused on travel advances during the period July 1, 2016 to September 30, 2016.
The audit disclosed the following:

- Travel advances were not always completed and submitted within 10 working days after travel had ended; and
- The Department was not using the most current travel forms approved by DFS.

The Staff Director of Account System and Service in the Office of Accounting and Finance responded that the Administrative Services Support Center (ASSC) will be instituting additional processes to address outstanding travel advances. Additionally, the ASSC Director will ensure the approved forms are available on the ASSC website and Department intranet.

**PROJECT #A-1617DCF-116: Audit of the Monitoring of the Florida Coalition Against Domestic Violence Contract and Subrecipient Agreements**

The objectives of this audit were to determine if the Department monitored the Florida Coalition Against Domestic Violence (FCADV) in accordance with Department procedures, and if the FCADV adequately monitored subrecipients for compliance with the terms of the agreement and fiscal stability. The scope of this audit primarily focused on the payments and monitoring activities occurring between July 1, 2016 and December 31, 2016.

The audit determined the following:

- Monitoring of FCADV by the Department was in accordance with Department procedures; and
- FCADV adequately monitored subrecipients for compliance with the terms of the agreement and fiscal stability.

This audit resulted in no findings. A response from the program office and FCADV was not required.
Summary of Internal Audit Projects Initiated and Terminated

PROJECT #A-1617DCF-035: Follow-up on Community-Based Care Lead Agency Audits by the Auditor General

The Auditor General conducted two audits in 2015 pertaining to the Department’s Community-Based Care (CBC) and Managing Entity (ME) Lead Agencies. The objective of this project was to determine if the Department responded to findings in those audits and if the findings were resolved.

During the planning phase of this project, the Auditor General announced an operational audit that included additional CBCs and MEs. During this operational audit, the Auditor General would be following up on the findings in the previous reports. It was determined that an additional audit by the Internal Audit Unit would be a duplication of effort.

PROJECT #A-1617DCF-111: Northeast Florida State Hospital Property Infrastructure Safety Concerns

Previous risk assessment interviews reported concerns relating to generator power and video security camera monitoring. The objective of this project was to determine the risks posed by the lack of these items.

During the planning phase of this audit, the Chief Hospital Administrator was contacted for an update on issues reported during the risk assessment process. The Chief Hospital Administrator advised that security cameras had been received and were in the process of being installed. He also advised that there was generator power available at the campus and upgrades to the current generator system were ongoing.

PROJECT #A1617DCF-154: State Term Contract Provider not Safeguarding Confidential Data Appropriately

During a 2016 risk assessment interview, a concern was expressed that Novitex Enterprise Solutions exposed confidential and personal information of a Department customer. During the planning phase of this project, it was determined that the information exposed did not meet the definition of “personal information” pursuant to § 501.171, F.S.

PROJECT #O-1617DCF-132: Sexually Exploited Children

In 2012, the Florida Legislature passed the Florida Safe Harbor Act, which was created to provide a more coordinated response to address child welfare service needs of sexually exploited children. In 2016, House Bill 7141 expanded the provision of the Florida Safe Harbor Act by requiring the Department to develop or adopt a screening instrument for the identification of sexually exploited children, service planning, and placement. The Department partnered with the Department of Juvenile Justice and implemented the Human Trafficking Screening Tool to
identify Commercially Sexually Exploited (CSE) children brought into the delinquency system and divert them to the child welfare system when appropriate.

Pursuant to § 409.16791, F.S., OPPAGA is required to conduct an annual study on CSE of children. OPPAGA commenced their third annual study on February 27, 2017.

**Significant Audit Recommendations Not Fully Implemented**

Pursuant to § 20.055(8)(c)4., F.S., requires the OIG to identify significant recommendations described in prior audit reports that have not been completed.

**PROJECT #A-1516DCF-031: Audit of the Department’s Purchasing Card Transactions**

**Finding:**
Department records in the Voucher Imaging System did not always contain all required supporting documentation for Purchasing Card (P-Card) transactions.

**Recommendation:**
The OIG recommended that the ASSC establish a process to ensure that all supporting documentation is included with P-Card transaction information in the Voucher Imaging System.

**Status as of June 30, 2017:**
The ASSC was restructuring and re-arranging job duties to assist with P-Card reconciliation and tracking. Additionally, the ASSC was working on a process to enable them to cross-reference the original P-Card charge to the travel voucher.

**PROJECT #A-1516DCF-062: Background Screening of Summer Camp and Membership Organizations Personnel**

**Finding:**
Department operating procedures related to background screening were outdated and did not reflect changes applicable to personnel of summer camps and membership organizations.

**Recommendation:**
The OIG recommended that the Background Screening Office administrator update CFOP 60-19, Caretaker Screening, and CFOP 60-18, Exemption from Disqualification, to reflect current background screening requirements applicable to summer camp and membership organization personnel.

**Status as of February 1, 2017:**
As a result of legislative changes for child care personnel background screening requirements effective July 1, 2016, CFOP 60-19 is under revision to separate requirements for child care from other caretaker screenings. CFOP 170-3, Chapter 12, Criminal Background Checks for Child Care Personnel, has been released and CFOP 170-3, Chapter 13, Caretaker Screening,
was created and is under final review. These two policies will replace CFOP 60-19. CFOP 60-18 is being revised to incorporate changes in the exemption process.

**Auditor General Quality Assessment Review of the Internal Audit Function**

From July 2016 to September 2016, the Internal Audit Section facilitated the Auditor General Quality Assessment Review of the OIG internal audit function. Results of this review were reported in Auditor General Report Number 2017-023, *Department of Children and Families Office of Inspector General's Internal Audit Activity for the Review Period July 2015 through June 2016*.

The Auditor General found that, during the review period, the quality assurance program related to the internal audit activity was adequately designed and provided reasonable assurance of conformance with applicable professional auditing standards. In addition, the OIG internal audit function generally complied with provisions of § 20.055, F.S., and nothing significant was disclosed.
External Audit Reports Issued

Auditor General

2017-004 Comprehensive Risk Assessments at Selected State Agencies – Information Technology Operational Audit

2017-009 Florida On-line Recipient Integrated Data Access (FLORIDA) System – Information Technology – Operational Audit

2017-023 Office of Inspector General's Internal Audit Activity – Quality Assessment Review

2017-032 Cost Allocation Plans – Operational Audit

2017-180 State of Florida – Compliance and Internal Controls over Financial Reporting and Federal Awards

2017-205 Oversight and Administration of State Mental Health Treatment Facilities – Operational Audit

Office of Program Policy Analysis and Government Accountability

16-04 Placement Challenges Persist for Child Victims of Commercial Sexual Exploitation; Questions Regarding Effective Interventions and Outcomes Remain

Department of Financial Services

Audit of Selected Department Contracts and Grants Active January 1, 2015 through August 30, 2016 and Related Management Activities

Follow-Ups to Prior External Audit Reports

Auditor General

2016-046 Public Assistance Fraud Prevention, Detection, and Recovery Efforts, Operational Audit

2016-159 Compliance and Internal Controls over Financial Reporting and Federal Awards

2016-186 Florida Safe Families Network (FSFN) IT Operational Audit

2017-004 Comprehensive Risk Assessments at Selected State Agencies, IT Operational Audit
Office of Program Policy Analysis and Government Accountability

16-04 Placement Challenges Persist for Child Victims of Commercial Sexual Exploitation; Questions Regarding Effective Interventions and Outcomes Remain
Summary of Investigations and Corrective Actions Completed

Headquarters

2015-0056  A Contract Manager destroyed official records by placing contract documents in the shredder box, deleting all e-mails, and wiping the hard drive on her computer. Investigation Terminated.

Corrective Action: The decision to terminate the investigation was based on information obtained reflecting that the discovery occurred upon the employee’s resignation and all records were recovered and determined to be copies.

Circuit 1

2015-0070  A Family Services Counselor of a contracted provider falsified child protective supervision records in Florida Safe Families Network (FSFN) Case IDs #2324017, #101099638, and #100414085. Supported.

Corrective Action: The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation.

2016-0095  A Child Protective Investigator (CPI) accessed FSFN Intake/Investigation #2016-270000, a case of personal interest, without a legitimate business reason. Supported. The CPI falsified her People First timesheet. Neither Supported Nor Refuted.

Corrective Action: The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board reflects that the employee does not hold any child welfare certifications.

Circuit 2


Corrective Action: The CPI resigned.
2015-0019  A CPI utilized a Department-issued computer to access a citizen’s Facebook account without the citizen’s knowledge or consent. Supported.

Corrective Action: The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board reflects that the employee’s Child Welfare Provisional certification expired on May 11, 2016 and remains inactive.


Corrective Action: The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation. Northwest Region Leadership determined that a separate reminder to staff regarding access of any database without a legitimate business reason was not necessary because reminders are completed annually via required trainings and routinely via informal discussions.


Corrective Action: The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and initiated an ethics investigation on the employee’s Child Welfare Protective Investigator certification.


Corrective Action: The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. Based on the additional information that the employee’s DAVID access was not timely deactivated upon the employee’s resignation, the Northwest Region developed a process chart and issued a memorandum to ESS Supervisors to ensure that paperwork is submitted to deactivate data system accounts within three business days of an employee’s separation from the Department.

Based on the recommendation that the Assistant Secretary for Administration consider if additional guidance or training is necessary to ensure timely DAVID account deactivation when an employee separates from the Department, the Information Security Manager began working with Human Resources and other appropriate staff to develop a Security Awareness Training presentation for DAVID users, with a proposed date of availability in the Human Resources Training System (HRTS) by October 1, 2017.
Circuit 3

2014-0086  An ESS I falsified information contained in Florida On-line Recipient Integrated Data Access (FLORIDA) Case Log Running Comments (CLRC) and the ACCESS Management System (AMS) concerning FLORIDA Case #1435030931. **Supported.** The ESS I falsified FLORIDA CLRC records contained in FLORIDA Cases #1044423561, #1192133552, #1016016506, #1361722371, #1069579424, #1008661252, and #1005411751. **Supported.** The ESS I falsified information contained in AMS concerning FLORIDA Cases #1044423561, #1192133552, #1016016506, #1361722371, #1069579424, #1026645395, #1201356768, #1008661252, and #1005411751. **Supported.**

**Corrective Action:** The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation.

2015-0018  A Case Management Specialist of a subcontracted provider, previously employed by the Department, created a flash drive with Department client information and opened the information on another employee’s computer. **Investigation Terminated.**

**Corrective Action:** The decision to terminate the investigation was based on information obtained that the employee was terminated by the subcontracted provider shortly after hire, no confidential information was compromised beyond being opened on the other employee’s computer, the Florida Certification Board reflects that the employee’s Child Welfare Protective Investigator certification expired on October 31, 2015 and remains inactive, and the employee was no longer working in the child welfare profession.

2016-0009  A CPI falsified child protective investigation records in FSFN Investigation #2015-302412. **Supported.**

**Corrective Action:** The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and initiated an ethics investigation on the employee’s Child Welfare Protective Investigator certification.

Circuit 4

2015-0064  A Family Services Counselor of a subcontracted provider had knowledge of suspected child abuse and failed to report the allegation to the Florida Abuse Hotline (Hotline). **Supported.** The Family Services Counselor falsified child protective supervision records in FSFN Case ID #100470321. **Not Supported.**
Corrective Action: The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and initiated an ethics investigation on the employee’s Child Welfare Protective Investigator and Child Welfare Case Manager certifications, which both expired on October 31, 2016 and remain inactive.

2015-0068
An ESS I engaged in employee misconduct by photographing exam answers and using those answers to take a Pre-Service Training Exam. **Supported.** A Program Administrator engaged in employee misconduct by failing to take any action after being notified that exam answers had been photographed and possibly distributed to other employees prior to the administration of the exam. **Supported.** The Program Administrator misused her official position by allowing and/or using staff members to conduct personal errands, including during work hours, and obtaining a personal loan from a subordinate staff member. **Supported.** An Operations and Management Consultant (OMC) I misused her official position by allowing and/or using staff members to conduct personal errands, including during work hours. **Supported.**

Corrective Action: The ESS I was terminated, the Program Administrator was demoted, the OMC I resigned, and the employees’ personnel files were updated to reflect the findings of the investigation.

2015-0084
A Senior Prevention Specialist of a contracted provider falsified case notes in FSFN Case ID #101187734 pertaining to June 3, 2015 and June 26, 2015 face-to-face home visits. **Supported.**

Corrective Action: The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation.

2016-0023
A Family Services Counselor Supervisor of a contracted provider failed to make a mandatory child abuse report, related to a Department client in FSFN Case ID #101221128, to the Hotline. **Supported.**

Corrective Action: The employee received a five-day unpaid suspension. In-House Legal Counsel of the contracted provider sent an e-mail to all contracted provider staff regarding their responsibility to report all known or suspected incidents of child abuse to the Hotline, as well as confidentiality of information and legitimate business purposes for access and use of FSFN.

2016-0045
An ESS I accessed FLORIDA Case #1416467548, a case of personal interest, without a legitimate business reason. **Supported.** The ESS I accessed DAVID without a legitimate business reason. **Supported.** The ESS I accessed FLORIDA Case #1382184352, a case of personal interest, without a legitimate business reason. **Supported.** The ESS I harassed a FLORIDA customer by sending threatening text messages and coming to her residence. **Neither Supported Nor Refuted.**
**Corrective Action:** The employee resigned and the employee's personnel file was updated to reflect the findings of the investigation.

2016-0046  
A Dependency Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case IDs #100143368, #101234318, #101289784, #100932074, #101127816, and #100874633. **Supported.**

**Corrective Action:** The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and initiated an ethics investigation on the employee’s Child Welfare Case Manager certification. As additional controls to ensure the Home Visit Forms correspond with the Daily Proactive Report, the provider supervisors will verify that all Home Visit Forms match the report and the contracted provider will randomly sample cases each month by telephoning caregivers to ensure the Home Visit Forms are accurate.

2016-0060  
A CPI falsified child protective investigation records in FSFN Investigation #2016-110644. **Supported.**

**Corrective Action:** The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and revoked the employee’s Child Welfare Provisional certification.

2016-0061  
An ESS I submitted false information in her applications for public assistance in FLORIDA Case #1475352816. **Supported.** The ESS I failed to report her public assistance case to her supervisors, even after being instructed to do so. **Supported.**

**Corrective Action:** The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation. Based on the recommendation that the ACCESS Integrity Program (AIP) determine whether action should be taken to recoup any benefit overpayment, the AIP completed a review and a sanction has been imposed on the public assistance case. As a result, recoupment, as determined by the Benefit Recovery Unit, will be enforced.

2016-0073  
A Family Assessment Support Team Family Care Manager of a subcontracted provider accessed FSFN Case ID #2649512, a case of personal interest, without a legitimate business reason. **Supported.**

**Corrective Action:** The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation.
An Adult Protective Investigator (API) falsified adult protective investigation records in FSFN Investigation #2015-052910. **Supported.**

**Corrective Action:** The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. Central Region staff are consistently advised that only accurate information should be entered into FSFN to support investigations and taking of photographs on cases is encouraged to support or dispute protective investigation findings.

A Dependency Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case ID #101128543 pertaining to an August 24, 2015 face-to-face home visit. **Supported.**

**Corrective Action:** The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and revoked the employee’s Child Welfare Case Manager certification.

A Dependency Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case IDs #6515047 and #101163469. **Neither Supported Nor Refuted.**

**Corrective Action:** The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and revoked the employee’s Child Welfare Case Manager certification.

An Intervention Specialist of a subcontracted provider shared her FSFN username and password with a co-worker. **Supported.** Another Intervention Specialist of the subcontracted provider used a co-worker’s username and password to access FSFN. **Neither Supported Nor Refuted.**

**Corrective Action:** Both employees were terminated and the personnel file of the employee with the supported finding was updated to reflect the findings of the investigation.

An Interviewing Clerk accessed the EBT Edge system to view a case of personal interest, without a legitimate business reason. **Supported.**

**Corrective Action:** The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation.

A Family Therapist Specialist of a subcontracted provider falsified information on a June 12, 2016 Child Care Application and Authorization Form. **Not Supported.** The Family Therapist Specialist accessed a case of personal interest. **Not Supported.**
Corrective Action: The employee was issued a written counseling for altering dates on the Child Care Application and Authorization Form.

2016-0056

Corrective Action: The employee was issued a written counseling and required to retake Department Security Awareness Training.

Circuit 6

2015-0030
A Clinical Supervisor of a subcontracted provider falsified FSFN case notes pertaining to supervisory reviews in FSFN Case IDs #101167082, #100285167, #100644466, and #101127952. Supported.

Corrective Action: The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board reflects that the employee’s Certified Addiction Professional certification expired on June 30, 2015 and remains inactive.

2015-0043
A Staff Children’s Psychiatrist of a subcontracted provider had knowledge of suspected child abuse that he did not immediately report to the Hotline as required. Supported.

Corrective Action: The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The subcontracted provider requested and received Office of Inspector General (OIG) Outreach training regarding mandatory reporting and provided Incident Reporting training to staff.

2015-0073
A Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case IDs #100732136 and #100495856. Supported.

Corrective Action: The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board reflects that the employee’s Child Welfare Case Manager certification expired on October 31, 2015 and remains inactive.

2015-0118
A Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case ID #161945 regarding an October 29, 2015 face-to-face home visit. Supported.
Corrective Action: The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and revoked the employee’s Child Welfare Provisional certification.

2015-0132 A Case Manager of a subcontracted provider provided confidential information to unauthorized individuals and obtained confidential information for her own personal use without a legitimate business reason. Supported.

Corrective Action: The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and revoked the employee’s Child Welfare Case Manager certification. Due to the delay in termination and FSFN account deactivation, a new termination e-mail account distribution list was implemented to ensure timely action when an employee separates from employment.

2016-0017 A Family Support Worker of a subcontracted provider falsified information documented in FSFN Case ID #171756 pertaining to face-to-face home visits. Neither Supported Nor Refuted.

Corrective Action: The employee resigned.

2016-0019 An ESS I accessed ACCESS Case #668233785 without a legitimate business reason. Neither Supported Nor Refuted.

Corrective Action: The employee resigned.


Corrective Action: The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation.

2016-0067 A Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case ID #100558131. Neither Supported Nor Refuted.

Corrective Action: The employee resigned.

Circuit 7

2015-0041 A Family Support Worker of a subcontracted provider falsified client case records. Supported.

Corrective Action: The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation.
A Dependency Case Manager Supervisor of a subcontracted provider falsified mileage reimbursement claims regarding visits with Department clients in order to receive monetary reimbursements. **Supported.** The Dependency Case Manager Supervisor falsified records in client case files involving unsuccessful attempted home visits. **Supported.** The Dependency Case Manager Supervisor allowed her daughter to use her work-issued cellular telephone for personal use. **Supported.**

**Corrective Action:** The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and initiated an ethics investigation into the employee’s Child Welfare Licensing Counselor Supervisor certification. The subcontracted provider sent a certified letter to the employee to seek recoupment for mileage claimed by the employee; however, the employee has not responded to the letter. The employee’s prior supervisor reviewed the employee’s cellular telephone records and identified no recoupment specifically for personal cellular telephone usage.

Two CPIs falsified documents in FSFN Investigations #2015-150123 and #2015-199342 and/or filed falsified documents with the Court in Dependency Case #2015-0081-DP. **Not Supported.**

**Corrective Action:** No action required.

An API falsified adult protective investigation records in FSFN Investigation #2015-291562. **Neither Supported Nor Refuted.**

**Corrective Action:** The employee resigned.

An ESS I falsified AMS Work Item Details related to FLORIDA Cases #1437271600, #1241874425, #1437935397, #1082248291, #1329889959, #1438339666, #1131408004, #1015151809, #1438743751, #1059836955, #1403901007, #1403474672, #1077902697, and #1406687031. **Supported.**

**Corrective Action:** The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation.

An ESS I falsified FLORIDA CLRC information in FLORIDA Case #1175806269. **Neither Supported Nor Refuted.** The ESS I falsified AMS Work Item Details and/or FLORIDA CLRC information in FLORIDA Cases #1446444813, #1027847056, #1395362220, #1376147050, #1255065940, #1011340381, #1355088259, and #1295232665. **Neither Supported Nor Refuted.**

**Corrective Action:** The employee resigned.

Corrective Action:  The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation.  The Florida Certification Board reflects that the employee’s Child Welfare Protective Investigator certification expired on October 31, 2015 and remains inactive.

2016-0010  A CPI accessed FSFN Intake #2016-006776-01 without a legitimate business reason.  Supported.

Corrective Action:  The employee was issued a one-day unpaid suspension.

Circuit 9


Corrective Action:  The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation.

2015-0007  A Dependency Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case ID #100732171.  Supported.

Corrective Action:  The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation.  The Florida Certification Board was notified and revoked the employee’s Child Welfare Provisional certification.

2015-0033  A Chief Executive Officer of a subcontracted provider created false budgets, billed for employees no longer working at the provider, billed Medicaid under false diagnosis numbers, and hired an unqualified Director.  Investigation Terminated.

Corrective Action:  The decision to terminate the investigation was based on information obtained that the facilities operated by the subcontracted provider were closed and no longer licensed by the Department, as well as a request by the Medicaid Fraud Control Unit not to proceed with the investigation.

Corrective Action: The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and revoked the employee’s Child Welfare Provisional certification.


Corrective Action: The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and revoked the employee’s Child Welfare Provisional certification.

2016-0013  A CPI falsified child protective investigation records in FSFN Investigation #2015-329391.  Supported.

Corrective Action: The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and revoked the employee’s Child Welfare Protective Investigator certification.

2016-0074  An ESS I accessed ACCESS Case #1466239042 without a legitimate business reason.  Supported.

Corrective Action: The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The ACCESS Program Administrator sent an e-mail reminder on the Personal Interest Case Policy to all Circuit 9 Office of Economic Self-Sufficiency (OES) staff and all OES Unit Supervisors discussed the Personal Interest Case Policy in their subsequent unit meetings.

2016-0098  An ESS II misused a state-owned vehicle.  Supported.

Corrective Action: The employee was issued a five-day unpaid suspension and the employee’s personnel file was updated to reflect the findings of the investigation.

2017-0004  A CPI accessed DAVID and FSFN Investigation #2016-139591 without a legitimate business reason.  Supported.

Corrective Action: The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and initiated an ethics investigation on the employee’s Child Welfare Protective Investigator certification.

Corrective Action: The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and initiated an ethics investigation on the employee’s Child Welfare Protective Investigator certification.

An Outpatient Therapist of a subcontracted provider was involved in employee misconduct by contributing to the delinquency of a minor and failing to report suspected child abuse to the Hotline. Supported.

Corrective Action: The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation.

An Intercept Specialist of a subcontracted provider falsified client records in FSFN Case IDs #2015546 and #100737046 and falsified client contacts in FSFN Case IDs #2085237 and #100743291. Supported.

Corrective Action: The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation.

A CPI falsified information regarding the commencement of FSFN Investigation #2015-194903. Supported.

Corrective Action: The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and revoked the employee’s Child Welfare Protective Investigator and Child Welfare Provisional certifications.

An ESS I falsified records in the AMS and/or FLORIDA system pertaining to public assistance benefits in ACCESS Case #149489070. Supported.

Corrective Action: The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation. A building meeting was held with all Circuit 9 OES staff to discuss Integrity in Case Processing and the OIG conducted an Outreach presentation on Fraud/Case Processing Integrity to Circuit 9 OES staff.
2016-0087  A Dependency Case Manager Trainee of a subcontracted provider breached confidentiality.  *Supported.*

**Corrective Action:** The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and revoked the employee’s Child Welfare Case Manager certification.

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**Circuit 11**


**Corrective Action:** The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation.

2015-0104  A Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case ID #101166078.  *Neither Supported Nor Refuted.*

**Corrective Action:** The employee resigned.

2015-0106  A Family Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case IDs #101023021 and #100557012.  *Supported.*

**Corrective Action:** The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and initiated an ethics investigation on the employee’s Child Welfare Provisional and Child Welfare Case Manager certifications.

2015-0107  A CPI falsified child protective investigation records in FSFN Investigations #2015-186176 and #2015-210761.  *Neither Supported Nor Refuted.*

**Corrective Action:** The employee was terminated.

2015-0120  A Senior CPI engaged in employee misconduct by providing false/misleading information in a verbal staffing with a CPIS regarding FSFN Investigation #2015-274779.  *Not Supported.*

**Corrective Action:** No action required.


**Corrective Action:** No action required.
2016-0027  An API falsified adult protective investigation records in FSFN Investigation #2016-026601.  **Supported.**

**Corrective Action:** The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation.

2016-0036  A CPI falsified child protective investigation records in FSFN Investigation #2016-065512.  **Neither Supported Nor Refuted.**

**Corrective Action:** The employee was terminated.

2016-0048  A CPI falsified child protective investigation records in FSFN Case ID #100197319.  **Supported.**

**Corrective Action:** The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and initiated an ethics investigation on the employee’s Child Welfare Protective Investigator certification. Southern Region CPIs were reminded of investigation documentation requirements.

2016-0078  A Full Case Manager of a subcontracted provider accessed FSFN records without a legitimate business reason.  **Supported.** The Full Case Manager failed to make a mandatory report of suspected child abuse to the Hotline.  **Neither Supported Nor Refuted.**

**Corrective Action:** The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and revoked the employee’s Child Welfare Case Manager certification.

**Circuit 12**

There were no cases closed in Circuit 12 during FY 2016-2017.

**Circuit 13**

2015-0051  A Case Manager of a subcontracted provider failed to complete a Unified Home Study in FSFN Case ID #100365127, which resulted in a failure to disclose to the Court the existence of a verified sexual abuse charge.  **Supported.**

**Corrective Action:** The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and initiated an ethics investigation on the employee’s Child Welfare Case Manager and Certified Case Manager certifications.
2015-0082  A Human Services Counselor III falsified adult protective services case information pertaining to a client in the Home Care for Disabled Adults program. **Supported.**

**Corrective Action:** The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. To help prevent falsification, the following measures were implemented: standard format/template based on policy for all case note entries with a signature and date requirement for separate entries; annual observation of counselors in the field and review of a corresponding case file by Adult Protective Services program staff members; and a quarterly random customer satisfaction survey for clients.

2015-0094  A Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case ID #100810931. **Supported.** Another Case Manager of the subcontracted provider falsified child protective supervision records in FSFN Case ID #100810931. **Neither Supported Nor Refuted.**

**Corrective Action:** Both employees were terminated and the personnel file of the employee with the supported finding was updated to reflect the findings of the investigation. The Florida Certification Board was notified and initiated an ethics investigation on the employee’s Child Welfare Provisional and Child Welfare Case Manager certifications. The other employee’s Child Welfare Provisional certification expired on April 17, 2016 and remains inactive.

2015-0100  A Case Manager and a Case Manager Supervisor of a subcontracted provider failed to make a mandatory report of child abuse to the Hotline pertaining to a child in FSFN Case ID #101178477. **Supported.**

**Corrective Action:** The employees were terminated and the employees’ personnel files were updated to reflect the findings of the investigation. The Florida Certification Board was notified, revoked the Case Manager Supervisor’s Child Welfare Case Manager certification, and initiated an ethics investigation on the Case Manager’s Child Welfare Provisional and Child Welfare Case Manager certifications.

2015-0101  A Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case ID #101045438. **Supported.**

**Corrective Action:** The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The employee’s Child Welfare Case Manager certification expired on October 31, 2016 and remains inactive.
2015-0112  A Substance Abuse and Mental Health Senior Human Services Program Specialist was negligent in the performance of her assigned job duties by approving and issuing substance abuse licenses to substance abuse treatment facilities without completing the required audit reports necessary to ensure the treatment facilities met specific statutory and regulatory requirements.  

**Supported.** The Substance Abuse and Mental Health Senior Human Services Program Specialist falsified information on her Vicinity/Map Mileage Logs and State of Florida Voucher for Reimbursement of Traveling Expenses Forms for the period of January 14, 2015 through July 31, 2015.  **Supported.**

**Corrective Action:** The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation.

2016-0062  An Adoption Case Manager of a contracted provider engaged in employee misconduct by having an inappropriate relationship with a former client.  

**Supported.**

**Corrective Action:** The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and revoked the employee’s Child Welfare Case Manager certification.

2016-0064  A Case Manager of a subcontracted provider made false statements while under oath during a Judicial Review.  

**Supported.**

**Corrective Action:** The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and revoked the employee’s Child Welfare Case Manager certification.

2016-0072  A Program Assistant of a contracted provider accessed client records in Credible without a legitimate business reason.  

**Supported.**

**Corrective Action:** The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation.

2016-0075  An Interviewing Clerk misused her Department-issued credentials in an attempt to gain access to a patient’s room at Gulf Coast Medical Center.  

**Supported.** The Interviewing Clerk accessed ACCESS Case #1006975934, a case of personal interest, without a legitimate business reason.  

**Neither Supported Nor Refuted.**

**Corrective Action:** The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation.
2014-0143 An ESS I accessed FLORIDA Case #1135152462 without a legitimate business reason. Supported. The ESS I took action on FLORIDA Case #1135152462, a case of personal interest. Not Supported.

**Corrective Action:** The employee was issued a written counseling.


**Corrective Action:** The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and initiated an ethics investigation on the employee’s Child Welfare Protective Investigator certification.

2016-0001 A Senior CPI falsified child protective investigation records in FSFN Investigation #2015-329227. Supported.

**Corrective Action:** The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and revoked the employee’s Child Welfare Protective Investigator certification.

2016-0035 A CPI accessed FSFN Intake #2016-104893 without a legitimate business reason. Supported.

**Corrective Action:** The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and revoked the employee’s Child Welfare Protective Investigator certification.

2016-0057 An ESS I accessed DAVID records concerning herself without a legitimate business reason. Supported. The ESS I accessed DAVID records concerning herself and relatives without a legitimate business reason. Supported.

**Corrective Action:** The employee retired and the employee’s personnel file was updated to reflect the findings of the investigation. OES notified DHSMV of the DAVID system misuse and actions taken as well as the results of the OIG investigation, including the date the DAVID system access was made inactive, the number of records compromised, the date of notification to the individuals whose personal information was compromised, the disciplinary action taken against the employee, and corrective actions planned to ensure that DAVID misuse does not reoccur. The individuals whose information was compromised were notified. OES staff are instructed upon hire and through annual Security Awareness Training on the proper use of systems. The Office of Information Technology Services is exploring options to utilize technology to
support automated DAVID data checks. OES includes proper use of DAVID in the Case Processing Integrity training, which is mandatory for all OES staff.

Circuit 15

2013-0129  A Dependency Case Manager of a subcontracted provider falsified case management records in FSFN Case ID #100866198. Supported. The Dependency Case Manager falsified case management records in FSFN Case ID #100929344. Neither Supported Nor Refuted.

Corrective Action: The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and revoked the employee’s Child Welfare Case Manager certification.

2014-0082  A Dependency Case Manager of a subcontracted provider falsified home visit notes in FSFN Case IDs #100186328, #100836964, #100680510, and #100766759. Supported.

Corrective Action: The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation. The employee’s Child Welfare Provisional certification expired on March 10, 2015 and remains inactive.


Corrective Action: The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and revoked the employee’s Child Welfare Protective Investigator certification.

2015-0005  A CPI falsified child protective investigation records in FSFN Investigation #2015-014381 (Case Note ID #100887959). Supported. The CPI falsified child protective investigation records in FSFN Investigation #2014-329870 (Case Note ID #100036028). Not Supported.

Corrective Action: The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and revoked the employee’s Child Welfare Protective Investigator certification.

2015-0052  An Interviewing Clerk falsified FLORIDA CLRC concerning FLORIDA Case #1463414544. Supported.

Corrective Action: The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation.
A Senior CPI falsified child protective investigation records in FSFN Investigations #2015-104568-01, #2015-105085-01, and #2015-105159-01. **Supported.**

**Corrective Action:** The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified regarding the employee’s Child Welfare Protective Investigator certification. The Southeast Regional Managing Director sent an e-mail, to be distributed to all Southeast Region CPIs, reminding CPIs that it is considered best practice to not copy FSFN entries from other CPIs, CFOP 170-1 requires case notes to be entered within two business days of the purported events, and it is important to accurately document all travel, mileage, and timesheet records. The e-mail further reminded the leadership team that they must provide supervisory oversight on a periodic and ongoing basis.

An API falsified adult protective investigation records in FSFN Investigation #2016-237472. **Supported.**

**Corrective Action:** The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation.

There were no cases closed in Circuit 16 during FY 2016-2017.

A Foster Parent Support Specialist of a subcontracted provider falsified (forged) signatures and other information on multiple foster care records. **Supported.**

**Corrective Action:** The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and revoked the employee’s Child Welfare Provisional certification.

A Child Advocate of a contracted provider falsified child protective supervision records in FSFN Case ID #100989134 (Case Note ID #140415015), FSFN Case ID #2363587 (Case Note ID #140417125), and FSFN Case ID #100937180 (Case Note ID #140539453). **Supported.**

**Corrective Action:** The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation. The employee’s Child Welfare Case Manager certification expired on October 31, 2015 and remains inactive.
2015-0026  A Mental Health Technician (MHT) of a subcontracted provider falsified a Wellness and Accountability Hourly Checklist Form #378B.  Supported.

Corrective Action:  The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation.


Corrective Action:  The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation.

2015-0062  An MHT of a subcontracted provider falsified a Wellness and Accountability Checklist Form #378B.  Supported.

Corrective Action:  The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation.

2015-0113  A Licensed Practical Nurse of a subcontracted provider falsified Wellness and Accountability Check Form #378B relating to 15-minute and 60-minute client checks.  Supported.

Corrective Action:  The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation.  The provider provided Wellness and Accountability Check training to all employees.


Corrective Action:  The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation.  The Southeast Regional Managing Director sent an e-mail reminder to all Southeast Region staff that unauthorized access of information in any Department or outside agency database is strictly prohibited.

2016-0088  A Children’s Legal Services Paralegal Specialist accessed the Comprehensive Case Information System (CCIS) without a legitimate business reason.  Supported.

Corrective Action:  The employee was issued a three-day unpaid suspension and the employee’s personnel file was updated to reflect the findings of the investigation.
Circuit 18


Corrective Action:  The employee resigned and the employee's personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and initiated an ethics investigation on the employee’s Child Welfare Case Manager and Child Welfare Provisional certifications.


Corrective Action:  The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and revoked the employee’s Child Welfare Protective Investigator certification.

2016-0040  A Dependency Case Manager of a subcontracted provider engaged in employee misconduct by providing false information in an e-mail to a co-worker regarding FSFN Case ID #101252776. Supported. The Dependency Case Manager falsified child protective supervision records in FSFN Case ID #2529000. Supported.

Corrective Action:  The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and revoked the employee’s Child Welfare Provisional certification.

2016-0055  A Dependency Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case ID #101205624. Supported.

Corrective Action:  The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and revoked the employee’s Child Welfare Case Manager certification.

Circuit 19

2015-0006  A Dependency Case Manager of a contracted provider falsified child protective supervision records in FSFN Case IDs #100861023, #100642226, and #123046. Supported.
Corrective Action: The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and revoked the employee’s Child Welfare Case Manager certification.

2016-0101 A Child Protection Team Case Coordinator of a subcontracted provider accessed FSFN investigation records without a legitimate business reason. Investigation Terminated.

Corrective Action: The decision to terminate the investigation was based on information obtained reflecting that the duties performed by the employee were not within Department jurisdiction. The investigation was referred to the Department of Health OIG for review and handling. The employee was terminated.

2017-0008 A Records Technician accessed FSFN records without a legitimate business reason. Supported.

Corrective Action: The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Circuits 15 and 19 Operations Manager sent an e-mail reminder to all CPI staff that cases in FSFN should only be accessed if there is a legitimate business reason to do so.

Circuit 20

2014-0153 A Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case IDs #41094 and #3213761. Supported. A Case Manager Supervisor of the subcontracted provider conspired with the Case Manager to falsify child protective supervision records in FSFN. Not Supported.

Corrective Action: Both employees resigned and the Case Manager’s personnel file was updated to reflect the findings of the investigation. The Case Manager’s Child Welfare Provisional certification expired on April 30, 2014 and remains inactive.


Corrective Action: The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The employee’s Child Welfare Protective Investigator certification expired on October 31, 2015 and remains inactive.
A Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case ID #100776334. **Supported.** The Case Manager falsified child protective supervision records in FSFN Case ID #10103867. **Supported.**

**Corrective Action:** The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and initiated an ethics investigation on the employee’s Child Welfare Case Manager and Child Welfare Provisional certifications.

A Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case ID #100015949. **Supported.** The Case Manager misused her position by instructing a current client not to report being the victim of domestic violence. **Supported.**

**Corrective Action:** The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Florida Certification Board was notified and revoked the employee’s Child Welfare Case Manager certification.

A Behavioral Health Technician of a subcontracted provider engaged in employee misconduct by failing to disclose a conflict of interest to management, in that he had a personal relationship with a former client. **Supported.** The Behavioral Health Technician utilized a provider information system to access information on a client’s case without a legitimate business reason. **Supported.**

**Corrective Action:** The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation.

A Family Support Worker of a subcontracted provider falsified client case information. **Supported.**

**Corrective Action:** The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation.

A Forensic Intensive Reintegration Support Team (FIRST) Case Manager (CM) of a subcontracted provider falsified a case management note entered into Credible. **Supported.**

**Corrective Action:** The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation.

A CPI falsified child protective investigation records in FSFN Investigation #2016-026302. **Neither Supported Nor Refuted.**

**Corrective Action:** The employee was terminated.
2016-0050  A CPI falsified child protective investigation records in FSFN Investigation #2016-146915. Supported.

Corrective Action: The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The employee’s Child Welfare Provisional certification expired on November 6, 2016 and remains inactive.

2016-0052  An Adult Targeted Case Manager of a subcontracted provider falsified a home visit with a client. Neither Supported Nor Refuted.

Corrective Action: The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation.

2016-0082  An Adoption Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case IDs #100913164 and #2658410. Neither Supported Nor Refuted.

Corrective Action: The employee resigned.

Institutions

2014-0070  A Northeast Florida State Hospital (NEFSH) Mental Health Security Specialist Shift Supervisor, Mental Health Security Chief, and multiple other employees violated CFOP 155-21 by placing a resident in restraints and failing to adequately document the incident. Investigation Terminated.

Corrective Action: The decision to terminate the investigation was based on information obtained reflecting that when safety is an issue, security has to take appropriate action to ensure the safety of residents and employees. The issue was then not that the restraints were used, but that the resident was released from the restraints without medical clearance. NEFSH management had the information and ability to take any appropriate corrective action prior to referring the matter to the OIG. Though the OIG interviews were conducted timely, there was a lack of consensus among witnesses and an OIG investigation would add no value. The Mental Health security Specialist Shift Supervisor resigned.

2014-0071  Two Florida State Hospital (FSH) Unit Treatment and Rehabilitation Specialists (UTRSs), two FSH Human Services Counselor (HSC) IIIs, two FSH Rehabilitation Therapists, an FSH Storekeeper II, and an FSH Unit Treatment and Rehabilitation Senior Supervisor (UTRSS) II accessed the Resident’s deskfile without a legitimate business reason. Supported. An FSH UTRSS I and an FSH Registered Nurse Specialist, accessed the Resident’s deskfile without a legitimate business reason. Neither Supported Nor Refuted. An FSH Senior Human Services Counselor Supervisor, an FSH Behavioral
Program Specialist, an FSH Secretary Specialist, an FSH Nursing Program Specialist, and an FSH Barber/Beautician accessed the Resident’s deskfile without a legitimate business reason. **Not Supported.**

**Corrective Action:** The UTRSs resigned. Due to the initiation of the following actions, no disciplinary action was recommended by management. FSH took the following actions to ensure the appropriate use of FSH resident deskfiles:

1. The FSH Health Information Services Director randomly selects and audits two resident deskfiles per month to determine if employees accessing the record had legitimate business reasons to do so.

2. FSH ensures that the level of access to deskfiles follows the "minimum necessary rule," and approval for access beyond the rule must be provided by the Administrator. The Information Technology Department (IT) has established accessibility to deskfiles based upon employee duties and responsibilities, and if IT determines there has been excessive activity in a particular record, the Administrator is notified and will determine if a formal inquiry is appropriate.

3. FSH ensures Health Insurance Portability and Accountability Act (HIPAA) training and refreshers are provided for staff, including online training and regular "In The Loop" reminders.

4. The FSH Health Information Services Director will send monthly HIPAA topics for the “In The Loop” document, and will submit quarterly HIPAA breach reporting procedures in the FSH newsletter ("Chattagram").

5. IT installed a button that must be clicked before entering a resident deskfile. The message on the button warns the user of consequences of potential breaches, and the user must click “OK” to proceed.

6. All employees signed an Access to Resident Electronic Medical Records and Other Protected Health Information acknowledgement form, acknowledging that accessing medical records or other Protected Health Information (PHI) must be directly related to the performance of official duties by September 1, 2014. The form is now completed by all new employees during new employee orientation. This information was scanned into a shared folder.

The Office of Information Technology Services (OITS) will work with Human Resources (HR) to implement the Department Security Agreement Form (CF 114) into the LMS as an annual certification requirement consistent with Chapter 815, F.S. An external HIPAA risk assessment audit was conducted by the OIG in 2012 and OITS will work with the OIG to determine whether a full or partial follow-up risk
assessment is needed and, if necessary, plan with senior management on the approach to complete any such review.

2015-0108 An FSH Health Support Technician, two FSH Food Support Workers, and an FSH Assistant Food Service Director took fresh fish plates out the back of the kitchen for personal use, without authorization, resulting in a theft of state resources. Another FSH Food Support Worker took slices of cheese for use on his sandwiches without payment or authorization to do so, resulting in a theft of state resources. Two FSH Dietetic Technicians are not going out to the units and verifying tray accuracy for the residents, but instead sitting in the office and pulling random names to complete reports, resulting in falsification of tray accuracy reports. An FSH Senior Clerical Supervisor is not verifying that Dietetic Technicians are going out to the units and verifying tray accuracy for the residents, resulting in falsification of tray accuracy reports. An FSH contracted employee ignored reports of theft, resulting in misappropriation of state resources by allowing employees to steal food and supplies from the kitchen at FSH. **Investigation Terminated.**

**Corrective Action:** The decision to terminate the investigation was based on information obtained reflecting that FSH had already implemented changes upon initial receipt of the complaint and conducting an OIG investigation would provide no value.

2016-0049 An FSH UTRSS I shared her password with other employees. The FSH UTRSS I and an FSH UTRS provided confidential resident information to an unauthorized individual. **Investigation Terminated.**

**Corrective Action:** The decision to terminate the investigation was based on information obtained that an OIG investigation would add no value due to the time elapsed between the event and the reporting of the event, and a lack of potential to obtain sufficient evidence to reach a finding. The UTRSS I was terminated and the UTRS resigned.
Summary of Management Reviews and Corrective Actions Completed

There were no Management Reviews closed during FY 2016-2017.