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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, the Inspector General is required to complete an annual report by September 30, summarizing the office’s activities during the prior fiscal year. Consistent with these duties, the following accomplishments, highlights and activities demonstrate significant efforts of the OIG staff during Fiscal Year 2011-2012:

- Received, reviewed and processed 3,587 complaints or requests for assistance from Department managers, employees, clients, or citizens;

- Completed 114 investigations and 6 management reviews that examined allegations of violations of rule, statute, policy or systemic issues, and tracked 100 corrective actions by management to ensure responses to recommendations for personnel action or policy clarification were appropriately addressed;

- Processed 3,053 current and former Department and provider employee reference checks;

- Conducted 54 Outreach Training Sessions for 1,395 Department and/or provider employees on the role of the Office of Inspector General, when to report suspected employee wrongdoing, the Whistle-blower’s Act, and how to recognize violations of statute, rule, policy, or contract, especially as it relates to falsification of child protection records;

- Implemented a telephone hotline for individuals to report concerns or alleged violations of the federal Fair Labor Standards Act by Department employees;

- Published 7 assurance or consulting reports, which contained 17 recommendations for improvement of efficiency and effectiveness in Department programs;

- Reviewed 154 Department contractor and provider audit packages of state financial assistance as required by §215.97, F.S.;

- Received and processed over 10,300 fair hearings requests and conducted over 3,300 fair hearings for applicants or recipients of public assistance programs and individuals being transferred or discharged from nursing facilities; and

- Played a leadership role in the Inspector General community by assisting the Office of the Chief Inspector General with activities promoting the Accreditation of the Inspector General Investigative function and collaborating with Inspectors General to identify efficiencies through an enterprise-wide approach to internal auditing and consulting projects.
The Department of Children and Families (Department), Office of Inspector General (OIG) has worked diligently to meet its statutory mandates and fulfill its mission of “Enhancing Public Trust in Government.” This annual report summarizes the OIG’s activities and accomplishments for Fiscal Year 2011-2012.

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, reports to, and is under the general supervision of the agency head. As outlined in statute, the Inspector General’s duties include:

- Providing direction for, supervising, and coordinating audits, investigations, and management reviews relating to the programs and operations of the agency;
- Keeping the agency head informed 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;
- Reviewing the actions taken by the agency to improve program performance and making recommendations for improvement;
- Conducting, supervising, and coordinating activities that promote economy and efficiency and prevent or detect fraud, waste, and abuse;
- Ensuring effective coordination and cooperation between the Auditor General, federal auditors, and other governmental entities;
- Reviewing rules relating to programs and operations and making recommendations regarding impact;
- Assessing the reliability and validity of information provided on performance measures and standards and making recommendations as needed;
- 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.
Staff members hold the following certifications:

- Certified Fraud Examiner (1)
- Certified Government Auditing Professional (1)
- Certified Hearing Official (4)
- Certified Information Systems Auditor (1)
- Certified Information Systems Security Professional (1)
- Certified Inspector General (2)
- Certified Inspector General Investigator (2)
- Certified Public Accountant (1)
- Certified Welfare Fraud Investigator (1)
- Certified Public Manager (1)
- Certified Child Protective Investigator (1)
- Members of the Florida Bar (6)

A member of the Inspector General’s staff serves on the Board of Directors and as Treasurer of the Florida Chapter of the Association of Inspectors General.

A member of Inspector General’s Internal Audit office serves on the core Computer Security Incident Response Team (CSIRT). Other members of the CSIRT include the Department’s Information Security Manager, Chief Information Officer, and the Office of Information Technology Services First Point of Contact. The primary role of the CSIRT is to serve as the first responder to computer security incidents within the Department and to perform vital functions in identifying, mitigating, reviewing, and reporting findings to management and the Computer Security Incident Review Board. Inspector General’s staff member’s duties include convening investigations, following agency investigative procedures, and contacting and serving as the liaison with the information security manager and law enforcement.
As of June 30, 2012, the Office of Inspector General consisted of three units: Investigations, Internal and Single Audit, and Appeal Hearings, totaling 65 positions. The Appeal Hearings and Investigations staff are located in field offices throughout the state.¹

¹ Field Offices
Investigations – Tallahassee, Ft. Lauderdale, Orlando, Tampa
Appeal Hearings - Tallahassee, West Palm Beach, Ft. Lauderdale, Largo, Miami, Tampa, Pensacola, Ft. Pierce, Gainesville, Orlando, Jacksonville
Intake Section

The Intake Section reviews all complaints or requests for assistance received by the Investigations Unit. The Intake Section reviewed a total of 3,587 complaints or requests for assistance.

Of the total number of complaints or requests for assistance received:

- 2,348 were referred to Department management for handling as deemed appropriate;
- 764 were processed by this office with no further action needed;
- 205 were non-jurisdictional and were referred to the appropriate entity;
- 147 were opened for investigation or management review;
- 92 were referred to Department management for review and response;
- 22 were received on the Fair Labor Standards Act (FLSA) Hotline;
- 8 were incorporated into ongoing investigations; and
- 1 pending disposition.

The Intake Section received the 3,587 complaints in the following manner:

- 1,972 were received via telephone;
- 595 were received via e-mail;
- 520 were received via letter or fax;
- 489 were received via web complaint; and
- 11 were received in person.
Investigations Section

Section staff initiate investigations or management reviews when violations of rule, statute, policy and/or contract are alleged, including those filed under the Whistle-blower’s Act. While investigations are administrative in nature, 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 local law enforcement agencies, the Florida Department of Law Enforcement, or the appropriate State Attorney’s Office for criminal prosecution.

Investigations and Management Reviews

- 147 cases were opened for investigation or management review.
- 114 investigations and 6 management reviews were completed.

Whistle-blower Investigations

- 5 investigations were initiated and 2 investigations were completed in accordance with the Whistle-blower’s Act.

Recommended Corrective Actions

A total of 100 corrective actions, which contained a total of 121 recommendations, were issued by the Investigations Unit. Based on the investigation or management review, the Investigations Unit may make recommendations in the form of a corrective action. The recommendations are for the purpose of process improvement and are made to Department or contracted provider management. The final report, including recommendations are sent to all appropriate parties and actions are tracked to completion.

Personnel Actions Associated with Investigations

Personnel actions can also take place as a result of allegations reported to the OIG or completed investigations by the OIG. The following actions were reported to the OIG and took place at the discretion of management or the employee themselves:

- 41 Terminations
- 29 Resignations
- 7 Written Reprimands

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 in consultation with the Governor’s Chief Inspector General’s office. 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.

2 Investigations and management reviews can be found on our website at http://www.dcf.state.fl.us/admin/ig/reports/default.aspx.

3 It should be noted that of the 114 cases closed, six investigations (including one Whistle-blower investigation) and two management reviews resulted in case termination. Therefore, these eight cases will not be included in the Appendix of this annual report.
• 4 Suspensions
• 4 Oral Reprimands
• 2 Demotions

The following chart provides a comparative analysis of investigations opened by Circuit:

The top five allegation types and corresponding numbers of allegations investigated for cases closed are as follows:
Public Records Requests

The Investigations Unit responded to 43 public records requests under Chapter 119, F.S.

Inspector General Reference Checks

Current and former Department and provider employees being considered for demotion, new hire, promotion, re-hire, and transfer, by the Department or its contracted employers are screened by the Investigations Unit to determine if they had been involved in an OIG investigation. The Investigations Unit processed 3,053 reference check requests.

Inspector General Outreach Program

The Investigations Unit offers an outreach program with Community-Based Care providers, their subcontractors, and Department staff. This program involves meeting with management and their subordinate staff, and conducting training sessions to educate them on the role of the OIG, 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, specifically potential falsification of records under §839.13(2)(a) and §839.13(2)(c), F.S. A total of 54 training sessions, involving 1,395 individuals, were completed with Department employees and/or Community-Based Care and subcontractor agencies.
The Appeal Hearings Unit provides administrative hearings for applicants or recipients of public assistance programs and individuals being transferred or discharged from nursing facilities. The unit also provides disqualification hearings for the Department when it is believed individuals have committed intentional program violations in the Cash or Food Assistance programs.

The Appeal Hearings Unit reports directly to the Inspector General. This assures independence for the unit and complies with federal regulations requiring a hearing officer to be a headquarters level employee.

All administrative costs for hearings are funded at 50% federal administrative trust funds and 50% general revenue.

**Hearings Authority**

The unit operates pursuant to the following statutory authorities:

- §120.80, F.S., Exceptions and special requirements; agencies.
- §400.0255, F.S., Resident hearings of facility decisions to transfer or discharge.
- §393.125, F.S., Hearing rights.


The major controlling federal regulations are:

- Temporary Assistance to Needy Families Personal Responsibility and Work Reconciliation Act of 1996;
- Medicaid - 42 CFR §431.200, Fair Hearings for Applicants and Recipients;
- Food Stamps - 7 CFR §273.15, Fair Hearings; and
- 7 CFR §237.16, Disqualification for intentional Program violation.

**Hearings Jurisdiction**

Based on the legal authorities, the unit conducts hearings for the following programs:

Automated Community Connection to Economic Self-Sufficiency (ACCESS)
- 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
• Agency for Persons with Disabilities
• Nursing Facility Discharge Hearings

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

Completed Hearings Activities

• 10,395 fair hearing requests were completed.
• 212 disqualification hearings for Cash or Food Assistance Program benefits were conducted and completed.
• 161 nursing facility discharge or transfer hearings were completed.

Additionally, the unit processed 3,019 waivers of Administrative Disqualification Hearings.
Internal Audit Section

The Internal Audit Section’s primary responsibility is to assist Department management in determining whether adequate controls exist and risks are mitigated to ensure the orderly and efficient conduct of business. In addition, §20.055(7)(a), F.S., includes a description of activities related to the development, assessment, and validation of performance measures. These activities are integrated into the audit process.

The Internal Audit Section published seven reports, which included 17 recommendations for improvement. The reports also identified $327,235 in questioned costs, duplicate billings, and ineligible costs. The section coordinated with external auditors such as Florida’s Auditor General, the Federal Department of Health and Human Services, Office of Inspector General and the Office of Program Policy Analysis and Government Accountability to avoid duplicative efforts and facilitate the auditing process. Three external report responses were coordinated and 88 liaison activities, such as requests for responses and information gathering for audits and reviews underway, were facilitated. Five external follow-up audits were conducted.

Single Audit Section

The Single Audit Section is federally mandated in accordance with Circular A-133 sections 503, 1111, and 7501 et seq. of title 31, United States Code and Executive Orders 8248 and 11541. The section was created within the Department to monitor, use, and follow-up on audits of state financial assistance provided to non-state entities as required by §215.97, F.S. Public Accounting firms perform financial audits of Department contractors and providers. These audits and associated reports are generally required by contract, and are considered a crucial accountability component for state and federally funded initiatives. Financial accounting and reporting is complex and technical. Contract managers generally do not have the financial background or expertise to properly assess the financial statements and the related schedules, so this activity has been centrally located in the Single Audit Section for many years.

The mission of the Single Audit Section is to interpret the critical information provided by independent external auditors and to keep management and contract managers apprised of pertinent financial information contained in the reports. The section’s two staff members reviewed 154 provider audit packages. In addition, the Single Audit staff provides clarification and guidance to independent auditors on the complex and changing requirements of state and federal audits. Many of the audit reports reviewed required follow-up with the contract manager. Issues communicated ranged from minor issues where the contract manager simply needed to be informed, to more significant issues where corrective action was required from the provider. The Single Audit staff also provides feedback to external auditors when improvements and corrections are needed in their audit reports for compliance with the Single Audit Act.

1 Reports that do not contain confidential information are posted on our website at http://www.dcf.state.fl.us/admin/ig/reports/auditsearch.aspx.
Florida Inspectors General Expertise System (FIGES)

Internal Audit staff serves as the Site Administrator for the Florida Inspectors General Expertise System (FIGES). FIGES is an on-line database of Florida Government and University Inspector General Investigations and Internal Audit staff. It contains contact information, areas of expertise and professional certification for active reference and accessibility via the internet at http://figes.dcf.state.fl.us.

Northwood Shared Resource Center

The shared resource center model allows agencies to maintain control and ownership of their applications but share administrative responsibilities. The shared resource center concept was implemented as a way to begin consolidating data centers to provide cost savings. Specifically, §282.201, F.S., outlines information about state data center systems, agency duties and responsibilities, and legislative intent, which states in pertinent part:

“The Legislature finds that the most efficient and effective means of providing quality utility data processing services to state agencies requires that computing resources be concentrated in quality facilities that provide the proper security, infrastructure, and staff resources to ensure that the state’s data is maintained reliably and safely, and is recoverable in the event of a disaster.”

Established in §282.204, F.S., the Northwood Shared Resource Center (NSRC) began operating as a primary data center (PDC) on July 1, 2009 and is an agency established within the Department for administrative purposes only. The NSRC is not subject to the control, supervision, or direction of the Department; however, through a Memorandum of Understanding between the Department and the NSRC, the Department provides support services to the NSRC including services of the Department’s OIG.

Special Projects

– Volunteer Florida

Under the direction of the Chief Inspector General, Internal Audit staff participated as part of an inter-agency audit of the Florida Commission on Community Service, also known as Volunteer Florida (a quasi-governmental organization). The audit focused on the effectiveness of Volunteer Florida’s internal control system in complying with applicable regulations and it evaluated the reliability of records, reports and safeguarding of assets. The audit provided an impartial evaluation of the organization and was submitted to the Executive Office of the Governor.

– Florida Safe Families Network (FSFN) Access

This project examined the adequacy, effectiveness and efficiency of FSFN access and the access termination controls. The project revealed that the Department should strengthen controls for access management, uniformity in procedures across regions, management of
oversight and communication between the Department’s security officers and lead agencies regarding access and termination controls.

– The Agency for Enterprise Information Technology

The Agency for Enterprise Information Technology (AEIT) was created within the Executive Office of the Governor in July 2007. The mission of the Agency was to develop, implement and monitor strategies for the design, delivery, and management of enterprise information technology services.

The State Office of Information Security (OIS) was part of the Agency for Enterprise Information Technology, and guided, coordinated and assisted state agencies in identifying threats to their information assets and mitigating their risks so effective security controls could be implemented.

As part of the above, the OIS held monthly meetings to discuss the latest security issues and invited participation by agency information security managers (ISM), inspectors general, internal auditors and other information technology security personnel. The meetings provided valuable input and feedback regarding security issues and helped to foster consensus on many enterprise security issues.

A Department of Children and Families information technology internal audit staff member participated in these monthly meetings until legislation abolished the AEIT at the end of the 2011-2012 fiscal year.

–Agency for Enterprise Information Technology DCF Risk Assessment (Confidential Report)

An internal audit information technology auditor assisted in ensuring completion of the requirement for each agency to “conduct, and update every 3 years, a comprehensive risk analysis to determine the security threats to the data, information, and information technology resources of the agency,” per [§282.318 (4)(c) and (f), F.S.].

The AEIT's Office of Information Security (OIS) developed standards and templates for conducting this risk assessment and to assist agencies in their compliance.

The 2011 process, as in 2008, was coordinated by the DCF Information Security Manager using a self-assessment survey tool composed of questions based on the 2011 standards incorporating Rule 71A-1, Florida Administrative Code. The internal auditor reviewed the completed assessment and verified the reasonableness of the responses.

–Agency for Enterprise Information Technology Northwood Shared Resource Center (NSRC) Risk Assessment (Confidential Report)

An internal audit information technology auditor assisted in ensuring completion of the risk assessment for the NSRC in compliance with the §282.318 (4) (c) and (f), F.S. The NSRC’s Information Security Manager coordinated the effort of answering the survey questions and
referencing supporting documentation. The internal auditor reviewed the completed assessment and verified the reasonableness of the responses.
Summary of Internal Audits Issued During FY 2011-2012


Community-Based Care lead agency Eckerd Community Alternatives, Inc. was reviewed to determine whether internal controls to protect client trust funds were properly implemented. The audit examined planning, budgeting and expenditure documentation to ensure accounts remain within appropriate limits while meeting client needs. The report recommended the development of sound internal controls, enhanced procedures, purchase documentation, and training for proper accountability of gift card usage.

A-1112DCF-041 - Client Trust Funds - Kids Central, Inc.

Community-Based Care lead agency Kids Central, Inc. was reviewed to determine whether appropriate internal controls and safeguards for protecting client trust funds had been established. The audit examined expenditure documentation as well as the planning and budgeting of clients’ funds to ensure accounts remain within appropriate limits while meeting client needs. It was determined that the system of internal controls was adequate.

A-1112DCF-009 - Centralized Cash Receipts Process

This project revealed that periodic cash receipt reconciliations of child care and substance abuse licensing fee collections were not being conducted. The report recommended implementing a policy and procedure to periodically reconcile fee collections in the Child Care Licensing Information System and the Substance Abuse Automated Licensure Information System to amounts recorded in the Office of Financial Management’s cash receipts system and the Florida Accounting Information Resource system. An option suggested that management consider whether enterprise solutions for cash receipts, such as outsourcing the processing of all or a selected portion of checks/money orders to the Department of Revenue would be more cost effective.

A-1112DCF-040 - Assessment of Telecommuting Controls for Safeguarding HIPAA Protected Health Information

This project assessed compliance with the Health Insurance Portability and Accountability Act (HIPAA) Privacy and Security Rules regarding the Department’s ability to secure data on technology resources used by telecommuting Eligibility Specialists. The audit disclosed that telecommuting Eligibility Specialists have access to Electronic Protected Health Information (ePHI) and should be identified in the People First system. Furthermore, all Department assets and information systems that manage ePHI should be identified and a risk assessment of controls that protect ePHI should be conducted. In addition, a security official should be designated to be responsible for implementation of the policies and procedures of the HIPAA Security Rule.
A-1011DCF-0037 - Department Use of Social Media (Confidential Report)

This project provided an assessment of risks associated with the use of social media. It focused on governance, policies, procedures, training and awareness related to social media. The detailed results of this audit are confidential pursuant to Section 282.318(4)(f), F. S. The report offered the following general opportunities for enhancing controls over the use of social media: strengthen monitoring social media usage and evaluation of its impact on technology resources, mandate review of social media use prior to implementation and enhance policy, technology standards and training.

A-1112DCF-010 - Background Screening Office

This audit focused on background screening activities that determined whether applicants were eligible for caretaker positions with entities licensed or regulated by, or contracting with the Department and the Agency for Persons with Disabilities. Although the Department did not license or regulate summer day and summer 24-hour camps, it performed the eligibility determinations for camp personnel. The audit disclosed that the current background screening law did not provide sufficient authority for the Department to adequately ensure compliance by summer camp personnel. The new background screening law requires revisions to some Department policies and procedures. The audit also disclosed that greater uniformity and improved efficiency may result from consolidating background screening functions within the Department.

A-1112EOG-011 - Contract Monitoring Process


The audit disclosed that the Department had an effective contract monitoring process, which included written policies and procedures, and standard contract language. Concerns indicated that continued administrative budget cuts had weakened the Department’s ability to effectively monitor its contracts; however, best practices contributed to an effective contract monitoring process. The report recommended that management ensure improvement of contract managers’ attendance at Contract Manager Training, as well as at the Department of Financial Services Advancing Accountability Training.
External Audit Reports Issued During FY 2011-2012

**Auditor General**

2012-142  State of Florida - Compliance and Internal Controls Over Financial Reporting and Federal Awards

2012-138  Integrated Benefit Recovery System (IBRS) - Information Technology Operational Audit

**United States Department of Health and Human Services**


Follow-up Reports Completed During FY 2011-2012

**Auditor General**


Summary Schedule of Prior Audit Findings for the fiscal year 2010-2011.
Summary of Investigations and Corrective Actions Completed During FY 2011-2012

Headquarters

1. 2011-0023 A Florida Abuse Hotline Abuse Counselor misused state resources by accessing, viewing, editing, and/or storing non-work related material on his assigned state computer during work hours. **Not Supported.** The Florida Abuse Hotline Abuse Counselor used unauthorized personal removable media devices connected to his state computer in order to access, view, edit, and/or transfer non-work related materials. **Supported.**

**Corrective Action:** The employee received an oral counseling (oral reprimand). All Florida Abuse Hotline staff received training on the issues of misuse of state equipment and the use of unauthorized personal removable media devices connected to state equipment. Revisions were made to Department policy (CFOP 50-22) to ensure that it adequately documents parameters that govern personal use of Department information technology resources. The policy was expanded to become the Department’s acceptable use policy for information technology resources.

2. 2012-0013 The Sexually Violent Predator Program Director misused the Department electronic communications system to send and receive inappropriate personal e-mail correspondence. **Supported.**

**Corrective Action:** The employee resigned and a copy of the report was placed in the employee's personnel file.

3. 2012-0041 An Operations and Management Consultant Manager uploaded files containing confidential Florida Safe Families Network (FSFN) client information onto the Department's Gabriel Myers website. **Not Supported.** A Systems Programming Administrator did not remove the Active Directory user account of a Government Operations Consultant III when that staff member separated from the Department, and had knowledge of and allowed the sharing of that staff member’s Active Directory user account and password with subordinates. **Supported.** A Systems Project Administrator (now employed as a Government Operations Consultant III) shared his Active Directory user account and password with co-workers.

**Corrective Action:** The Family and Community Services Director instituted several policies to ensure security of Department files. For all reports published to the internet, the staff person responsible is required to visit the site and verify the report is accurate and that no sensitive data has been published. All user passwords for programs, such as Microsoft Access, have been changed, and in an effort to ensure security, they are not to be shared among staff. New procedures were developed to formalize the knowledge transfer process for the departure of critical employees and a checklist was created for supervisors to complete to ensure the Active Directory account is deactivated for employees who have separated from the Department.

Circuit 1

1. 2011-0063 A Child Protective Investigator falsified FSFN Note ID #121465828
(Intake ID #2011-099410) and FSFN Note ID #121550101 (Intake ID #2011-113297). **Supported.**

**Corrective Action:** The employee resigned and a copy of the report was placed in the employee's personnel file.

2. **2012-0047**

A Child Protective Investigator intentionally recorded the oral communication of her supervisor (a Child Protective Investigator Supervisor) without the supervisor's prior consent or knowledge. **Supported.**

**Corrective Action:** The employee was terminated due to her failure to complete the probationary period.

### Circuit 2

No investigations were completed in Circuit 2 during the fiscal year.

### Circuit 3

1. **2011-0085**

A Child Protective Investigator falsified FSFN chronological notes relating to an August 11, 2011 home visit. **Neither Supported Nor Refuted.**

**Corrective Action:** The employee resigned and a copy of the report was placed in the employee's personnel file.

### Circuit 4

1. **2010-0074**

A Child Protective Investigator falsified documentation in FSFN Investigation #2010-178302. **Supported.** The Child Protective Investigator falsified documentation in FSFN Investigations #2010-160476 and #2010-168641. **Neither Supported Nor Refuted.**

**Corrective Action:** The employee resigned and a copy of the report was placed in the employee's personnel file.

2. **2010-0096**

A Dependency Case Manager II of a subcontracted provider falsified information in the Community Based Resource Information System (CoBRIS). **Supported.**

**Corrective Action:** The employee was terminated and a copy of the report was placed in the employee's personnel file.

3. **2011-0053**

A Child Protective Investigator falsified a child protective investigation record in FSFN Intake ID #2011-072673. **Supported.**

**Corrective Action:** The employee was terminated and a copy of the report was placed in the employee's personnel file.

4. **2011-0055**

A Family Services Counselor of a subcontracted provider falsified child protective supervision records in FSFN. **Supported.**

**Corrective Action:** The employee was terminated and a copy of the report was placed in the employee's personnel file.

5. **2011-0068**

A Child Protective Investigator falsified a child protective investigation record in FSFN Intake ID #2011-079136. **Supported.**

**Corrective Action:** The employee resigned and a copy of the report was placed in the employee's personnel file.

6. **2011-0102**

A Child Protective Investigator falsified documentation in FSFN Investigation #2011-200361. **Neither Supported Nor Refuted.**
Corrective Action: The employee resigned and a copy of the report was placed in the employee’s personnel file.

Circuit 5

1. 2011-0046
An Administrative Assistant altered two checks received by the Department as payment for services and deposited the altered checks into her personal bank account. Supported. The Administrative Assistant altered checks made payable to the Department for public records requests and deposited the altered checks into her personal bank account. Supported.
Corrective Action: The employee was terminated and a copy of the report was placed in the employee’s personnel file. The Office of General Counsel initiated a protocol relating to public records requests and the handling of funds received for processing those requests that more closely tracks those monies through the internal My Legal Files system and ensures multiple staff are involved in the process for enhanced internal controls.

2. 2011-0050
An Adult Protective Investigator falsified adult protective investigation records in FSFN. Supported.
Corrective Action: The employee was terminated and a copy of the report was placed in the employee’s personnel file.

3. 2011-0061
Corrective Action: The employee resigned and a copy of the report was placed in the employee’s personnel file. Circuit 5 staff were reminded of confidentiality and the importance of only accessing cases for which they have a legitimate business reason.

4. 2011-0066
A Relicensing Specialist of a subcontracted provider breached confidential information by providing her e-mail password to a client. Not Supported.
Corrective Action: A copy of the report was provided to the contracted provider for informational purposes only.

5. 2011-0083
Corrective Action: The employee resigned and a copy of the report was placed in the employee’s personnel file.

6. 2011-0107
Corrective Action: The employee was terminated and a copy of the report was placed in the employee’s personnel file. The Regional Economic Self-Sufficiency Director discussed the handling of cases of family members, personal
acquaintances, etc. (personal interest) with the Central Region Program Administrators and instructed them to share the information with their staff. The ACCESS Operations Manager for Circuits 5 and 9 discussed the issue with new staff in pre-service classes.

Circuit 6

1. 2009-0091 An Adult Protective Investigator falsified records concerning a face-to-face visit and collateral contacts for FSFN Intake ID #2009-166918-01. Supported. **Corrective Action:** The employee resigned and a copy of the report was placed in the employee’s personnel file.

2. 2011-0034 A Child Protection Case Manager of a subcontracted provider falsified child protective supervision records for FSFN Case ID #100275909. Not Supported. The Child Protection Case Manager of a subcontracted provider released confidential information to an unauthorized individual. Supported. **Corrective Action:** The employee received an oral reprimand. All staff of the subcontracted provider received policy and procedures outlining confidentiality.

3. 2011-0072 A Regional Administrator of a subcontracted provider instructed a Medication Assisted Patient Services Counselor not to immediately report suspected child sexual abuse to the Florida Abuse Hotline. Supported. **Corrective Action:** The policy and procedures for the subcontracted provider’s incident reporting process were revised and their administration conducted staff education training for the management regarding mandatory reporting.

4. 2011-0078 A Case Manager of a subcontracted provider falsified FSFN chronological notes relating to face-to-face home visits. Supported. **Corrective Action:** The employee was terminated and a copy of the report was placed in the employee’s personnel file. The subcontracted provider arranged for the OIG to provide outreach training to staff on the role of the OIG, how to report suspected employee wrongdoing, and the red flags of falsification of records. Supervisors for the subcontracted provider began conducting monthly random Verification of Service monitoring.

5. 2011-0114 A Case Manager of a subcontracted provider falsified child protective supervision records for FSFN Case ID #100344933. Not Supported. The Case Manager of a subcontracted provider falsified child protective supervision records for FSFN Case IDs #100344933, #2560482, #2371497, #100412765, #100388804, #100263749, #100624704, and #3268852. Not Supported. The Case Manager of a subcontracted provider falsified child protective supervision records for FSFN Case ID #100372099. Not Supported. **Corrective Action:** No action required (the Case Manager resigned for unrelated reasons shortly after this case was initiated).

6. 2011-0125 A Family Specialist of a subcontracted provider falsified child protective supervision records. Supported. **Corrective Action:** The employee was terminated and a copy of the report was placed in the employee’s personnel file.
Circuit 7

Corrective Action: The employee was terminated and a copy of the report was placed in the employee’s personnel file.

Corrective Action: The Management Review Specialist and one of the three Family Services Counselors resigned, the remaining two Family Services Counselors were terminated, and a copy of the report was placed in all four employees’ personnel files. Child Care Licensure staff were reminded that all business-related communications are subject to public records laws and that they could not conduct business using their personal e-mail accounts.

Corrective Action: The employee was terminated and a copy of the report was placed in the employee’s personnel file.

Corrective Action: A Final Memorandum of Counseling (written reprimand) was issued to the employee. A copy of the memorandum was placed in the employee’s personnel file.

5. 2011-0082 An Economic Self-Sufficiency Specialist I accessed a case in the FLORIDA system without a legitimate business reason. Supported. 
Corrective Action: The employee received a one-day suspension.

Corrective Action: The employee received a one-day suspension and a copy of the report was placed in the employee’s personnel file.

Circuit 8

1. 2011-0029 A Family Care Counselor of a subcontracted provider falsified child protective supervision records in FSFN Case ID #100492572. Not Supported. 
Corrective Action: No Action Required.

2. 2011-0108 A Family Care Counselor of a subcontracted provider accessed the Intake Report and Investigation for FSFN Intake ID #2011-220301 without a legitimate business reason. Supported.
Corrective Action: The employee was terminated and a copy of the report was placed in the employee’s personnel file. The contracted provider reviewed their subcontract templates and began using the latest publication (CFOP 50-2). All contracted provider and subcontracted provider staff were required to sign a current Department Security Agreement Form (CF-114).

3. 2012-0002 (WB) A Child Protective Investigator created a conflict of interest when she took action on a case involving a personal acquaintance. Not Supported. A Child Protective Investigator Supervisor mishandled a case by failing to conduct a home visit in FSFN Intake ID #2011-198797. Not Supported. Another Child Protective Investigator falsified child protective investigation records by copying and pasting chronological notes from FSFN Intake ID #2011-267218 to FSFN Intake ID #2011-270635. Not Supported. A Program Administrator and the Child Protective Investigator Supervisor mishandled a case by instructing one of the Child Protective Investigators to copy and paste chronological notes from FSFN Intake ID #2011-267218 to FSFN Intake ID #2011-270635. Supported. One of the Child Protective Investigators mishandled a case by failing to conduct a home visit in FSFN Intake ID #2011-270635. Not Supported. One of the Child Protective Investigators falsified child protective investigation records in FSFN Intake ID #2011-179820. Neither Supported Nor Refuted. Corrective Action: The Child Protective Investigator Supervisor resigned and a copy of the report was placed in the employee’s personnel file. The Program Administrator was given supervisory guidance (oral reprimand) emphasizing the importance of case work integrity. One of the Child Protective Investigators was presented with a Supervisory Counseling Memorandum (written reprimand) reinforcing the expectations regarding copying and pasting FSFN notes. All Northeast Region Child Protective Investigator Supervisors and Child Protective Investigators were reminded of the need to document accurate information in FSFN at all times.

Circuit 9

1. 2008-0098 A Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case IDs #53848 and #163732. Supported. Corrective Action: The employee was terminated and a copy of the report was placed in the employee’s personnel file.

2. 2009-0040 A Child Protective Investigator falsified child protective investigation records in FSFN Intake ID #2009-031772. Supported. The Child Protective Investigator falsified child protective investigation records in FSFN Intake IDs #2009-069456 and #2008-406108. Supported. Corrective Action: The employee was terminated and a copy of the report was placed in the employee’s personnel file.

3. 2011-0018 An Interviewing Clerk fraudulently attempted to sell a family member’s food stamp benefits. Not Supported. The Interviewing Clerk accessed FLORIDA case #1045123960 without a legitimate business reason. Supported. Corrective Action: The employee resigned and a copy of the report was placed in the employee’s personnel file. Unit staff meetings were held to review the "Florida Computer Crimes Act" and the "DCF Security Act," and the meeting and agenda logs were maintained to validate staff attendance. The Central Region
Policy Manager took over the responsibility of handling all cases of personal interest.

4. 2011-0041 A Child Protective Investigator used his Department-issued laptop computer to access inappropriate websites. Supported. The Child Protective Investigator failed to secure his Department-issued laptop computer, allowing non-Department employees to use the laptop computer. Supported.

Corrective Action: The employee resigned and a copy of the report was placed in the employee’s personnel file. The Circuit 9 Operations Manager discussed with all staff the incident and importance of adhering to Department operating procedures relating to security of information technology and proper Internet usage. All Circuit 9 Family Safety Program Administrators reviewed CFOP 50-22 (Acceptable Use of Information Technology Resources), CFOP 60-55 (Standards of Conduct and Standards for Disciplinary Action for Department Employees), and the Department Security Agreement Form (CF 114) with their staff.


Corrective Action: The employee resigned and a copy of the report was placed in the employee’s personnel file.

6. 2011-0084 A Family Case Manager of a subcontracted provider failed to make a mandatory child abuse report to the Florida Abuse Hotline. Supported. The Family Case Manager created a conflict of interest by working on a case of personal interest. Not Supported.

Corrective Action: Management for the subcontracted provider reviewed the report and the allegations with the employee and her supervisor. Reporting requirements as mandatory reporters was reviewed by management with all supervisors during the regularly scheduled supervisory meetings. The subcontracted provider implemented additional safeguards to prevent potential conflicts of interest, in that Licensing and Admissions staff "flagged" the foster home of the employee in order to prevent placing children in her home that are on her caseload or within her unit. The issue of conflict of interest was also addressed by management at the monthly partner meeting, which includes representatives of four subcontracted provider agencies.

7. 2011-0089 A Dependency Case Manager of a subcontracted provider falsified a reunification home study in FSFN Case ID #1001337521. Not Supported.

Corrective Action: No action required.

8. 2011-0119 A Family Case Manager of a subcontracted provider falsified a child protective supervision record in FSFN Case ID #100367137. Supported.

Corrective Action: The employee was terminated and a copy of the report was placed in the employee’s personnel file.

Corrective Action: The employee was terminated and a copy of the report was placed in the employee’s personnel file.

Circuit 10


2. 2011-0044 A Care Manager of a subcontracted provider accessed FSFN Intake IDs #2011-082142 and #2011-082148 without a legitimate business reason. Supported. The Care Manager of a subcontracted provider disclosed confidential information to unauthorized individuals. Neither Supported Nor Refuted. Corrective Action: The employee was terminated and a copy of the report was placed in the employee’s personnel file.

3. 2011-0062 A Child Protective Investigator falsified child protective investigation records in FSFN Case ID #100565054. Supported. Corrective Action: The employee resigned and a copy of the report was placed in the employee’s personnel file.

4. 2011-0081 A Case Manager Supervisor of a subcontracted provider falsified FSFN chronological notes relating to supervisory reviews in seven separate cases. Neither Supported Nor Refuted. Corrective Action: The employee was terminated and a copy of the report was placed in the employee’s personnel file.

5. 2011-0113 A Child Protective Investigator engaged in employee misconduct with a former Department client. Supported. Corrective Action: The employee resigned and a copy of the report was placed in the employee’s personnel file.

6. 2012-0031 An Economic Self-Sufficiency Specialist II accessed a case of personal interest. Supported. Corrective Action: The employee resigned and a copy of the report was placed in the employee’s personnel file.

Corrective Action: The employee received a written reprimand and a copy of the report was placed in the employee’s personnel file. The employee also completed the updated 2012 Security Awareness training.

Circuit 11

1. 2011-0043 A Child Protective Investigator accessed Department network systems without a legitimate business reason. **Not Supported.** A Child Protective Investigator Supervisor directed the Child Protective Investigator to share her FSFN User ID and password with him. **Neither Supported Nor Refuted.**

Corrective Action: No action required (the Child Protective Investigator was terminated for unrelated reasons prior to the initiation of this case).

2. 2011-0065 A Chief Operating Officer/General Counsel of a subcontracted provider advised prospective adoptive parents to hire an attorney with whom she has a personal relationship. **Supported.**

Corrective Action: The subcontracted provider agreed not to refer any further cases to the attorney in question, that attorney’s name was removed from a list of attorneys generated by the contracted provider for adoption finalization, and in the event that specific attorney becomes involved in a case the subcontracted provider is handling, they will refer the case to another full case management provider.

3. 2011-0112 A Child Protective Investigator falsified child protective investigation records concerning FSFN Intake #2011-213583. **Supported.**

Corrective Action: The employee was terminated and a copy of the report was placed in the employee’s personnel file.

4. 2011-0116 An Accountant I misused a Department-issued computer by using excessive amounts of bandwidth and viewing inappropriate material. **Supported.** An Accountant IV misused a Department-issued computer by using excessive amounts of bandwidth. **Supported.**

Corrective Action: The Accountant IV received a documented counseling session (written reprimand). The Accountant I was terminated and a copy of the report was placed in employee’s personnel file.

5. 2012-0001 An Adult Protective Investigator falsified adult protective investigation records concerning FSFN Intake ID #2011-259364. **Supported.** The Adult Protective Investigator falsified adult protective investigation records concerning FSFN Intake ID #2011-267325. **Supported.** The Adult Protective Investigator breached confidentiality by maintaining closed adult protective investigation records at her personal residence. **Supported.**

Corrective Action: The employee resigned and a copy of the report was placed in the employee’s personnel file.

Circuit 12

1. 2011-0069 A Case Manager of a subcontracted provider falsified chronological notes in FSFN Case ID #100545648 concerning two face-to-face home visits. **Supported.**

Corrective Action: The employee was terminated and a copy of the report was placed in the employee’s personnel file.
2. 2011-0088 A Case Manager of a subcontracted provider falsified chronological notes in FSFN Case ID #2708690 concerning a face-to-face home visit. **Supported.**  
**Corrective Action:** The employee was terminated and a copy of the report was placed in the employee’s personnel file.

3. 2011-0098 A Child Protective Investigator engaged in employee misconduct by having an inappropriate relationship with a Department client who was a party in one of her child protective investigations. **Not Supported.**  
**Corrective Action:** No action required.

4. 2011-0115 A Child Protective Investigator falsified FSFN Case ID #100145538 chronological notes relating to a face-to-face home visit. **Supported.** The Child Protective Investigator falsified FSFN Case ID #100475886 chronological notes relating to a face-to-face home visit. **Supported.**  
**Corrective Action:** The employee was terminated and a copy of the report was placed in the employee’s personnel file.

5. 2012-0011 An Independent Living Case Manager of a subcontracted provider had a sexual relationship with a client. **Neither Supported Nor Refuted.**  
**Corrective Action:** The employee received a 30-day suspension and a copy of the report was placed in the employee’s personnel file.

**Circuit 13**

1. 2011-0035 A Quality Management Specialist of a contracted provider accessed FSFN Case ID #100535939 without a legitimate business reason. **Supported.**  
**Corrective Action:** The employee received a "written warning of termination" and a three-day suspension. The employee was also required to complete the Security Awareness training and sign the Department Security Agreement Form (CF 114).

2. 2011-0048 A Case Manager of a subcontracted provider coerced a client to engage in sexual intercourse. **Neither Supported Nor Refuted.**  
**Corrective Action:** The employee resigned and a copy of the report was placed in the employee’s personnel file.

3. 2011-0049 An Adoptions Care Manager of a subcontracted provider falsified FSFN case management records. **Supported.**  
**Corrective Action:** The employee was terminated and a copy of the report was placed in the employee’s personnel file.

4. 2011-0057 An Economic Self-Sufficiency Specialist I falsified records in the ACCESS Management and/or FLORIDA systems concerning the completion of interviews with the customers in ACCESS cases #1326846108, #1002852684, #1096171643, #1295977672, and #1354392914. **Not Supported.**  
**Corrective Action:** No action required.

5. 2011-0099 A Case Manager of a subcontracted provider falsified a child protective supervision record. **Supported.**
Corrective Action: The employee was terminated and a copy of the report was placed in the employee’s personnel file. Actions were taken for the decertification of the employee’s Child Welfare Professional Certification.

6. 2011-0109
A Foster Development Specialist and a Foster Development Specialist Supervisor of a subcontracted provider falsified a FSFN Unified Home Study. **Not Supported.**
**Corrective Action:** No action required.

7. 2012-0003
An Economic Self-Sufficiency Specialist I engaged in conduct unbecoming a public employee by failing to report her receipt of disability payments from the U.S. Department of Veterans Affairs. **Supported.**
**Corrective Action:** The employee was terminated and a copy of the report was placed in the employee’s personnel file.

**Circuit 14**

1. 2011-0026
A Child Protective Investigator falsified child protective investigation records concerning FSFN Investigation #2011-039101. **Neither Supported Nor Refuted.**
**Corrective Action:** No action required.

2. 2011-0080
An Economic Self-Sufficiency Specialist Supervisor used her state purchasing card for personal rental car expenses. **Not Supported.** The Economic Self-Sufficiency Specialist Supervisor incurred unauthorized state expenses for hotel and meals during approved work-related travel. **Supported.**
**Corrective Action:** The employee was terminated and a copy of the report was placed in the employee’s personnel file. Recoupment was sought from the employee for one day of hotel fees and one day of meals.

3. 2011-0129
A Child Protective Investigator falsified FSFN documentation in FSFN Investigations #2011-177967 and #2011-172534; and FSFN Special Conditions Referrals assessments #2011-205065, #2011-195932, and #2011-195939. **Supported.**
**Corrective Action:** The employee was terminated and a copy of the report was placed in the employee’s personnel file.

**Circuit 15**

1. 2010-0037
A Child Protective Investigator falsified (forged) child protective investigation documents. **Supported.** The Child Protective Investigator failed to conduct a thorough investigation of FSFN Intake #2009-199444. **Supported.** A Child Protective Investigator Supervisor failed to ensure that the Child Protective Investigator conducted a thorough investigation of FSFN Intake #2009-199444. **Supported.**
**Corrective Action:** The Child Protective Investigator was terminated and a copy of the report was placed in the employee’s personnel file. The Child Protective Investigator Supervisor received a documented counseling (oral reprimand) addressing deficiencies in the case. The Assistant Secretary for Operations directed all Regional Managing Directors and Circuit Community Development Administrators to remind Child Protective Investigator Supervisors (CPIs) that all investigative activities as required by Florida Statutes, Florida Administrative Code,
and Department Operating Procedures be completed, documented, and reviewed by the CPIS prior to approval for closure.

2. 2011-0037 An Adult Protective Investigator revealed the identity of the Florida Abuse Hotline reporter (the Reporter) of FSFN Intake ID #2011-061213 to an unauthorized person. **Neither Supported Nor Refuted.** During the course of an adult protective investigation, the Adult Protective Investigator yelled at the Reporter and referred to a former adult protective investigator in a derogatory manner. **Neither Supported Nor Refuted.** During the course of an adult protective investigation, the Adult Protective Investigator provided inaccurate information to the West Palm Beach Police Department when requesting law enforcement assistance. **Neither Supported Nor Refuted.**

**Corrective Action:** All Circuit 15 Adult Protective Services (APS) staff were trained as part of the Quality Assurance Training program regarding quality chronological notes, and the importance of not using language that would identify the abuse reporter and demonstrating professional behavior. Circuit 15 APS staff also participated in Vulnerable Adult Protocol training led by Department and law enforcement personnel.

3. 2011-0054 A Child Protective Investigator falsified child protective investigation records in FSFN Intake ID #2011-072837. **Supported.**

**Corrective Action:** The employee was provided with a documented counseling notice (written reprimand).

4. 2011-0086 A Mental Health and Substance Abuse Secretary used a Wright Express Financial Services Corporation Fuel and Maintenance Card to purchase fuel for personal use. **Supported.** The Mental Health and Substance Abuse Secretary used a Department vehicle for personal use. **Supported.** The Mental Health and Substance Abuse Secretary drove a Department vehicle without a valid Florida driver’s license. **Supported.** The Mental Health and Substance Abuse Secretary misused a Department-issued personal computer for non-business reasons. **Supported.**

**Corrective Action:** The employee resigned and a copy of the report was placed in the employee’s personnel file. Recoupment was sought from the employee for the misuse of the fuel card. A practice of more stringent management of vehicles and WEX cards was implemented and a PIN number system was initiated to further improve integrity of usage.

5. 2011-0096 A Dependency Case Manager of a subcontracted provider falsified child protective supervision records in FSFN concerning six separate cases. **Neither Supported Nor Refuted.**

**Corrective Action:** A copy of the report was placed in the employee’s personnel file. The investigation was provided to the management of the contracted provider and subcontracted provider for information purposes and the management of both entities reminded the case management staff that they are contractually required to obtain photographs of children during 30-day home visits and upload the photographs into FSFN and/or the agency’s internal database. The management of both entities also reminded the case management staff of the mandated requirement to enter and update FSFN Chronological Notes within two days.
6. 2011-0097 A Clerk Typist Specialist destroyed public records of Department vehicle sign-out logs. **Supported.** A Child Protective Investigator falsified claims of personal travel reimbursement. **Supported.** The Child Protective Investigator misused a Department vehicle by taking it home after work hours. **Not Supported.** The Clerk Typist Specialist knew of and failed to report that the Child Protective Investigator misused Department vehicles. **Not Supported.** The Child Protective Investigator falsified FSFN Note ID #123216233 (Intake ID #2011-179093) concerning a child protective investigation. **Neither Supported Nor Refuted.** The Child Protective Investigator breached confidentiality by having an unauthorized individual accompany her during a child protective investigation. **Supported.** Another Child Protective Investigator misused a Department vehicle by taking it home after work hours. **Not Supported.**

**Corrective Action:** The Child Protective Investigator was terminated and a copy of the report was placed in the employee's personnel file. The Clerk Typist Specialist was relieved of her responsibility for maintaining the vehicles and the vehicle sign-out logs due to her inability to maintain the logs properly.

7. 2011-0118 A Child Protective Investigator displayed conduct unbecoming a public employee by conducting the investigation of FSFN Intake ID #2011-213936 despite knowing individuals involved and made inappropriate statements to a child concerning the investigation. **Neither Supported Nor Refuted.** An Administrative Assistant breached confidentiality by revealing the identity of the reporter of FSFN Intake ID #2011-213936. **Not Supported.**

**Corrective Action:** No action required (the Child Protective Investigator resigned for unrelated reasons at the conclusion of this case).

**Circuit 16**

No investigations were completed in Circuit 16 during the fiscal year.

**Circuit 17**

1. 2010-0094 A Child Advocate of a contracted provider failed to conduct a mandated face-to-face visit concerning FSFN Case ID #100490701. **Supported.** The Child Advocate falsified child protective supervision records regarding FSFN Case ID #2235070 and FSFN Case ID #100340393. **Supported.** Two Child Advocate Supervisors and another Child Advocate failed to facilitate a face-to-face visit concerning FSFN Case ID #100490701 within mandated timeframes. **Supported.**

**Corrective Action:** The original Child Advocate resigned and a copy of the report was placed in the employee’s personnel file. The two Child Advocate Supervisors and the other Child Advocate received training to address the issue of their failure to facilitate a face-to-face visit with clients within required timeframes and a copy of the report was placed in the employees’ personnel files. The contracted provider reviewed and amended their policies to ensure compliance with F.A.C. and their contract with the Department, specifically, the F.A.C. provision requiring that children be seen within two days and children on shelter status be seen every seven days. Their internal Continuous Quality Control (CQI) department began monitoring cases involving children on shelter status to ensure compliance. The Remote Data Capture is now being utilized as intended with a new ability to directly upload captured information into FSFN. Along with the utilization of their unique Dashboard/Workbench model, training is now being conducted on existing policy and procedure as well as the CQI review process.
2. 2011-0033 A Human Services Counselor II falsified a Client Progress Note concerning a Protective Intervention Program case. Supported. The Human Services Counselor II falsified Client Progress Notes concerning four Protective Intervention Program cases. Neither Supported Nor Refuted. Corrective Action: Circuit 17 Adult Protective Services staff were mandated to attend yearly training provided by the OIG. The Adult Protective Supervisor with supervisory responsibility over the Human Services Counselor II was assigned to closely monitor the employee’s work to ensure integrity and compliance.

Circuit 18

1. 2011-0067 An Adult Protective Investigator accessed multiple cases in FSFN without a legitimate business reason. Supported. Corrective Action: The Program Administrator met with the employee and discussed the issue of accessing cases without a legitimate business reason, and the employee received a written reprimand in the form of a Final Counseling Letter. The Adult Protective Investigator Supervisor began monitoring the employee’s use of FSFN via monthly random checks on open cases.

2. 2011-0079 A Dependency Case Manager of a subcontracted provider falsified a child protective supervision record in an unknown FSFN case. Not Supported. Corrective Action: No action required.

3. 2011-0093 A Supervising Attorney accessed information in FSFN without a legitimate business reason. Supported, however, this investigation found that the access of FSFN information was done with the intent to clarify a situation possibly involving a subordinate employee and not for personal or inappropriate reasons. Corrective Action: The employee’s supervisor reviewed FSFN regulations related to accessing information without a legitimate business reason with the employee.

4. 2011-0100 An Economic Self-Sufficiency Specialist II used Department owned copiers to produce political advertisement fliers and placed them on her co-workers’ desks. Not Supported. Corrective Action: No action required.

5. 2012-0004 An Adult Protective Investigator falsified an adult protective investigation record in FSFN Intake ID #2011-256808. Supported. The Adult Protective Investigator falsified a Vicinity/Map Mileage Log (Form C676 VM) and submitted a fraudulent Voucher for Reimbursement of Traveling Expenses (Form DFS-AA-15). Supported. The Adult Protective Investigator falsified records in FSFN pertaining to the completion of criminal history re-checks that were never requested. Supported. Corrective Action: The employee resigned and a copy of the report was placed in the employee’s personnel file.

6. 2012-0038 An Economic Self-Sufficiency Specialist I accessed cases of personal interest. Supported. Corrective Action: The employee was terminated and a copy of the report was placed in the employee’s personnel file.
1. 2010-0067 An Economic Self-Sufficiency Specialist I fraudulently created Food Stamp benefits for other individuals. **Supported.**
**Corrective Action:** The employee was terminated and a copy of the report was placed in the employee's personnel file.

2. 2011-0032 A Child Protective Investigator falsified child protective investigation records in FSFN. **Supported.**
**Corrective Action:** The employee resigned and a copy of the report was placed in the employee’s personnel file.

3. 2011-0052 A Dependency Case Manager of a subcontracted provider falsified a child protective supervision record in FSFN Case ID #2126386. **Not Supported.**
**Corrective Action:** The employee resigned.

4. 2011-0120 A Dependency Case Manager of a subcontracted provider falsified a child protective supervision record in FSFN Case ID #100153109. **Supported.**
**Corrective Action:** The employee was terminated and a copy of the report was placed in the employee’s personnel file.

5. 2012-0012 An Economic Self-Sufficiency Specialist I processed a case of personal interest. **Supported.** The Economic Self-Sufficiency Specialist I falsified a case Running Record Comment for ACCESS case #1162536080. **Neither Supported Nor Refuted.** The Economic Self-Sufficiency Specialist I processed additional cases of personal interest. **Supported.** Another Economic Self-Sufficiency Specialist I processed a case of personal interest and authorized food assistance benefits without an existing application. **Supported.** A third Economic Self-Sufficiency Specialist I accessed cases of personal interest and requested that a co-worker process the cases of personal interest. **Supported.** The original Economic Self-Sufficiency Specialist I, at the request of the third Economic Self-Sufficiency Specialist I’s relatives. **Supported.**
**Corrective Action:** All three employees were terminated and a copy of the report was placed in the employees’ personnel files.

6. 2012-0015 An unknown employee disclosed confidential child protective investigation information to an unauthorized individual. **Not Supported.**
**Corrective Action:** No action required.

7. 2012-0022 An Adult Protective Investigator used his Department-issued laptop computer to access inappropriate material. **Supported.**
**Corrective Action:** The employee resigned and a copy of the report was placed in the employee’s personnel file.

**Circuit 20**

1. 2011-0038 A Child Welfare Case Manager of a subcontracted provider mishandled FSFN Case ID #2041628 by placing a foster child in the care of a non-relative caregiver rather than with the approved foster parent. **Supported.**
Corrective Action: The employee was counseled, received a written reprimand, and was placed on an Employee Improvement Plan, which includes increased supervisory oversight by the Case Management Program Director. Senior management of the subcontracted provider addressed the nature of the case with the Program Directors and Supervisors involved. Human Resources trained all staff on adherence to the contracted provider’s policies and procedures, the necessity of proactive supervision, and proper communication through the chain of command. All staff of the subcontracted provider also received training regarding placement, visitation, and documentation.

2. 2011-0045  
A Child Protective Investigator misrepresented (falsified) a People First timesheet by documenting that she worked 10 hours each Friday, Saturday, Sunday, and Monday during the pay period. Supported. An Operations Program Administrator engaged in employee misconduct by instructing the Child Protective Investigator to misrepresent (falsify) the number of her daily regular work hours on her People First timesheet. Neither Supported Nor Refuted.

Corrective Action: The Child Protective Investigator resigned and a copy of the report was placed in the employee’s personnel file. The Operations Program Administrator accepted a voluntary demotion to the position of Child Protective Investigator. Circuit 20 Administration researched but did not discover any other staff working an adjusted work schedule. Instructions were relayed to management that if an adjusted work schedule were to occur, that the People First template would need to be revised and approved prior to implementation.

3. 2011-0047  
A Child Welfare Case Manager of a subcontracted provider falsified child protective supervision records in FSFN. Supported. 

Corrective Action: The employee was terminated and a copy of the report was placed in the employee’s personnel file.

4. 2011-0056  
An Operations Program Administrator (OPA) and an Economic Self-Sufficiency Specialist Supervisor (ESSS) released confidential information to an unauthorized individual. Not Supported for the OPA and Neither Supported Nor Refuted for the ESSS.

Corrective Action: During the course of the investigation, it was suggested by witnesses that a public assistance debt involving a custodial parent had been miscalculated. A review of the Department of Revenue (DOR) audit of the custodial parent’s case was conducted by SunCoast Region staff and it was determined that the public assistance debt calculated by DOR was correct.

5. 2011-0074  

Corrective Action: All Child Protective Investigators and Child Protective Investigator Supervisors in Circuits 12 and 20 were required to complete NxScan (urine screen) training. All new staff will also be required to complete the same training prior to administering urine screens.

ACCESS Customer Call Centers

1. 2011-0091  
A North Florida Customer Call Center Economic Self-Sufficiency Specialist I knowingly submitted false applications for Food Stamp benefits. Supported.
**Corrective Action:** The employee was terminated and a copy of the report was placed in the employee's personnel file.

2. 2011-0105  
**Corrective Action:** The employee resigned and a copy of the report was placed in the employee's personnel file. The ACCESS Program trained staff with access to other state agency databases regarding the requirements for utilizing those systems, including when a legitimate business reason exists.

3. 2011-0127  
A SunCoast Region Customer Call Center Economic Self-Sufficiency Specialist I failed to document case-related activities. *Supported.* The Economic Self-Sufficiency Specialist I failed to obtain prior supervisory approval for additional employment outside of state government. *Supported.*  
**Corrective Action:** The employee received a demotion and a copy of the report was placed in the employee’s personnel file.

**Institutions**

1. 2011-0019  
The Florida State Hospital (FSH) Director of Emergency Services and other FSH security personnel abused and/or used excessive force on a resident. *Not Supported.*  
**Corrective Action:** The FSH Administrator and FSH staff developed a protocol for Crisis Emergency Response Teams (C.E.R.T.) that specifically addresses room entry, extraction methods, and use of a shield by FSH staff. The C.E.R.T. protocol provides training for all security officers upon hire and quarterly training of designated C.E.R.T team members. The protocol describes the equipment to be utilized by team members, the process for entering a resident’s room, limits the number of team members entering the room to five, and describes the process for gaining control of the resident and extracting the resident from the room. The Security Supervisors designated certain security staff for each C.E.R.T. team on each shift.
Summary of Management Reviews and Corrective Actions Completed During FY 2011-2012

1. 2011-0020 A management review was initiated in Circuit 4 concerning multiple issues regarding FSFN Case ID #121482. The issues explored were as follows:

- **Issue #1** - A contracted provider did not properly address concerns involving a child’s medical condition.

  It was found that there was a discrepancy in the information provided by the complainant and the information provided by a foster parent. The complainant stated that one of the children had “blisters” in his groin area in March 2010; however, the foster parent stated that the child had three skin tags in his groin area when he was first placed in the foster parent’s home in October 2009, and the foster parent did not become concerned until they began to spread in October 2010.

- **Issue #2** - Face-to-face contacts with the children and/or their caregivers were not being conducted in accordance with laws, rules, or procedures by the assigned contracted provider staff.

  It was found that visits with two of the children were not in compliance with Florida Administrative Code (F.A.C.) as those children were not seen in their residence at least once every three months. Furthermore, it was found that visits with caregivers were not in compliance with F.A.C. as the caregivers were not seen a minimum of every thirty days.

- **Issue #3** - Sibling visitations between the children were not being conducted in accordance with laws, rules, or procedures by the assigned contracted provider staff.

  It was found that there was no documentation to indicate that sibling visitations occurred in October 2010 and November 2010. Furthermore, there was no documentation in the case plan to restrict sibling visitations.

- **Issue #4** - The children’s Comprehensive Behavioral Health Assessments (CBHAs) were not initiated and/or conducted in accordance with laws, rules, or procedures by the assigned contracted provider and/or Department staff.

  It was found that the children’s referral for a CBHA was not in compliance with F.A.C. as the children were returned to care on October 15, 2009; however, none of the children were referred to a CBHA until November 15, 2010, over one year after being returned to care.

- **Issue #5** - The complainant’s Adoptions Home Study, completed by staff members of the contracted provider, contained misleading and/or erroneous information.

  It was found that the contracted provider staff member did include erroneous information pertaining to the complainant’s willingness to adopt a child of another race; however, the complainant was permitted to submit corrections
and the Adoption’s Home Study was subsequently updated with the correct information.

**Corrective Action:** The contracted provider has ensured that all licensed foster homes are receiving home visit forms from the Family Services Counselors. Placement Coordinators now contact each foster parent and notify them of upcoming court hearings and permanency staffings, and document these contacts. In order to ensure that children are being seen in their homes quarterly and that the parents and caregivers are being seen on a monthly basis, the contracted provider initiated the use of a Visitation Checklist that contains entries for the last home visit and enables the supervisor to track visits. The contracted provider also initiated the use of a Staffing Checklist, which allows for confirmation that a Comprehensive Behavioral Health Assessment is completed.

2. 2011-0092

There were concerns within Florida State Hospital Legal Services as follows: 1) Inaccurate recording and/or changing of employees’ timesheets regarding the actual number of regular and overtime hours worked by members of the Florida State Hospital Legal Services staff was occurring; and 2) Favoritism has been shown toward one staff member of Florida State Hospital Legal Services over another with respect to time off on Fridays. With respect to the first issue, there was no evidence to suggest that timekeeping records were being inaccurately recorded or changed to avoid compensating Florida State Hospital Legal Services staff for regular or overtime hours. Every member of Florida State Hospital Legal Services confirmed that they were accurately compensated for the total number of hours that they worked during each pay period. Regarding the second issue, the management review determined that there was no evidence to suggest that favoritism was shown toward one staff member of Florida State Hospital Legal Services over another.

**Corrective Action:** No action required.

3. 2011-0094

Concerns within the Substance Abuse and Mental Health program in Circuit 4 regarding a contracted provider who ensures the delivery of community-based substance abuse and mental health services to adults and children were as follows:

- **Issue #1** - The contracted provider billed units of prevention under the Children’s Mental Health Cost Center to support an individual’s position as a Family Services Planning Team Coordinator.

It was found that the contracted provider submitted invoices to the Department and documented the Family Services Planning Team Coordinator’s work hours on a Children’s Mental Health Cost Center worksheet under “prevention.” It is noted that witness testimony indicated that the contracted provider submitted invoices to the Department in the same manner for at least the past eight years (and perhaps longer), and the Department accepted the invoices from the contracted provider and paid those invoices during that same time period. Furthermore, the Department accepted the services performed by the Family Services Planning Team Coordinator as prevention until recently (September 1, 2011), when a review by Northeast Region employees in the Substance Abuse and Mental Health office raised questions regarding the use of prevention dollars to support the Family Services Planning Team Coordinator position. Testimony of the contracted provider’s Executive Director and
Operations Director indicated that the arrangement between their agency and the Department, in regards to the Family Services Planning Team Coordinator position, was established as many as 15 years ago and was done at the request of the Department. The Former Circuit 7 Community Development Administrator testified that this arrangement was already in place when he became the Circuit Community Development Administrator in 2006, and the arrangement continued until it was ended during September 2011.

- **Issue #2** - The Family Services Planning Team Coordinator misrepresented herself as a Department employee.

It was found that the Signature Line in the Family Services Planning Team Coordinator’s Department e-mail account indicates that she was a member of the Substance Abuse and Mental Health Program Office. The contracted provider’s Executive Director and Operations Director noted that the Department provided the Family Services Planning Team Coordinator with an office; provided her with a Department e-mail account; and requested that she perform the duties of the Family Services Planning Team Coordinator in the Substance Abuse and Mental Health office. Both the Executive Director and Operations Director stated that they were not aware that the Family Services Planning Team Coordinator ever represented herself as a Department employee and indicated that they had previously informed her that she did not work for the Department, rather she was an employee of the contracted provider.

**Corrective Action:** A copy of the report was provided to the contracted provider for informational purposes, they discontinued the services described in the report, and all active Region contract managers were informed that services provided outside the scope of the approved contract will not be funded.

4. 2011-0122
Child Protective Investigators within Circuit 4 received instruction and/or encouragement from Child Protective Investigator Supervisors to circumvent FSFN data reporting timeframes by making punctuation mark entries as if tasks were being completed, when in fact they were not. Witness testimony and records reviewed during the course of the management review did not reveal any systemic problems or falsification of official records.

**Corrective Action:** No action required.

5. 2011-0130
At the request of the Office of the Secretary, a management review was conducted concerning the Department’s care and treatment of a Florida State Hospital pregnant resident. Records reviews and witness testimony revealed inconsistent compliance with pertinent statute, rule, and Department and Florida State Hospital operating procedures, including those related to documentation, pregnant resident care and discharge planning, recovery planning, express and informed consent to administration of psychotropic medication, and outside medical consultation.

**Corrective Action:** No action required.

6. 2012-0032
Concerns over whether staff members of a subcontracted mental health service provider in Circuit 12 became involved in a child protective investigation, which was outside the scope of their contract, was explored. It was determined that the actions taken by members of the subcontracted provider staff offered little, if any,
mental health services to the mother. Rather than focus on mental health services, the primary concern of the subcontracted provider staff seemed to be reuniting the mother with the child and returning them to the care of the maternal grandmother in Colorado; however, in doing so, the subcontracted provider failed to adhere to standard child protective investigation protocols when it came to protecting the best interests of the child. Specifically, the subcontracted provider staff failed to conduct the following protocols to ensure the safe transfer of the child: conduct a background check of the prospective caregiver; meet face-to-face with the prospective caregiver to, at minimum, confirm her identity and ensure that the child was being safely delivered; and inspect the prospective caregiver’s residence. By failing to do so, the actions of the subcontracted provider staff had the potential to place the child’s safety and wellbeing at risk. In addition, the subcontracted provider staff circumvented the Department’s authority to conduct a thorough child protective investigation by deciding what they felt was in the best interest of the mother without consideration for the best interest of the child.

Corrective Action: The President/CEO and the Chief Operating Officer were terminated. The Vice President of Adult Services received a demotion and was placed on a 3-month probationary period, to include intense supervision. The Mental Health Court Case Manager received a written counseling statement. The Forensic Case Manager was terminated. Arrangements were made for the staff to receive Clinical Ethics training. The clinical staff received training to assure a thorough and accurate understanding of roles and responsibilities for providing mental health and substance abuse services under the terms of the contract. The subcontracted mental health service provider reviewed policies and procedures to assure a thorough and accurate understanding of roles and responsibilities for providing mental health and substance abuse services under the terms of the contract with the contracted provider and other relevant funders. A training workshop was conducted on person and family-centered care. The Board of Directors implemented changes in regards to how operational information is reported to them. The Board of Directors also implemented a system in which the performance of the President/CEO and the subcontracted provider are evaluated.