Table of Contents

TABLE OF CONTENTS ............................................................................................................ 1
EXECUTIVE SUMMARY ........................................................................................................... 2
INTRODUCTION ....................................................................................................................... 3
Statutory Requirements ............................................................................................................. 3
ORGANIZATIONAL CHART AND PROFESSIONAL CERTIFICATIONS .............................. 4
INVESTIGATIONS SECTION ................................................................................................... 5
Intake Unit .............................................................................................................................. 5
Investigations Unit ................................................................................................................... 6
Investigations and Management Reviews ................................................................................. 6
Whistle-blower Investigations .................................................................................................... 6
Recommended Corrective Actions ............................................................................................. 6
Personnel Actions Associated with Investigations and Management Reviews ..................... 6
Cases Opened by Circuit and Top Five Allegation Types ........................................................ 7
Public Records Requests ......................................................................................................... 8
Inspector General Reference Checks ........................................................................................ 8
Inspector General Outreach Program ....................................................................................... 8
APPEAL HEARINGS SECTION ............................................................................................... 9
Hearings Authority ................................................................................................................... 9
Hearings Jurisdiction ............................................................................................................... 9
Completed Hearings Activities ................................................................................................ 10
Fair Hearings Completed by Agency ........................................................................................ 10
INTERNAL AUDIT SECTION .................................................................................................. 11
Internal Audit Unit .................................................................................................................. 11
Single Audit Unit .................................................................................................................... 11
Florida Inspectors General Expertise System (FIGES) .............................................................. 12
APPENDIX ............................................................................................................................. 13
Summary of Internal Audit Projects Issued ............................................................................... 13
External Audit Reports Issued .................................................................................................. 19
Follow-Ups to Prior External Audit Reports .............................................................................. 19
Summary of Investigations and Corrective Actions Completed ................................................. 20
Summary of Management Reviews and Corrective Actions Completed ................................. 43
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, the Inspector General is required to complete an annual report by September 30, summarizing the 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 2015-2016:

- Received, reviewed, and processed 3,986 complaints or requests for assistance from Department managers, employees, clients, or citizens;

- Opened 116 cases, and completed 122 investigations and management reviews, that examined allegations of violations of statute, rule, policy, contract, or systemic issues, and tracked 125 corrective actions (176 total recommendations) by management to ensure responses to recommendations for personnel action or policy clarification were appropriately addressed;

- Processed 3,525 Inspector General Reference Checks for current and former Department and provider employees;

- Conducted 62 Outreach Training Sessions for 1,567 Department and/or provider employees on the role of the OIG, when to report suspected employee wrongdoing, the Whistle-blower’s Act, and how to recognize violations of statute, rule, policy, or contract;

- Attained reaccreditation status through the Commission for Florida Law Enforcement Accreditation, Inc. (second reaccreditation; third overall accreditation);

- Completed 9,663 fair hearing requests, 1,002 administrative disqualification hearing requests, and 119 nursing facility discharge or transfer hearing requests;

- Published 12 assurance or consulting reports, which contained 41 recommendations for improvement of efficiency and effectiveness in Department programs;

- Coordinated liaison activities for the Office of the Auditor General, Office of Program Policy Analysis and Government Accountability, and federal agency requests for responses and information regarding audits and reviews; and

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

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 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 2015-2016.

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 shall be under the general supervision of the agency head. As outlined in statute, the Inspector General’s duties 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 the actions taken by the agency to improve 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, 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, 2016, the OIG consisted of three sections: Appeal Hearings, Internal Audit, and Investigations. Appeal Hearings and Investigations staff are located in the central office and field offices throughout the state.²

As of June 30, 2016, the OIG consisted of three sections: Appeal Hearings, Internal Audit, and Investigations. Appeal Hearings and Investigations staff are located in the central office and 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, Tallahassee, Tampa, and West Palm Beach
**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, or e-mail. The Intake Unit reviewed a total of **3,986** complaints or requests for assistance.

The Intake Unit received the **3,986** complaints or requests for assistance in the following manner:

- **2,437** received via telephone
- **597** received via web complaint
- **571** received via e-mail
- **374** received via letter or fax
- **7** received in person
Investigations Unit

The Investigations Unit staff initiate investigations or management reviews when violations of statute, rule, 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 the Florida Department of Law Enforcement, local law enforcement agencies, or the appropriate State Attorney’s Office for criminal prosecution.

Investigations and Management Reviews

- 116 cases were opened for investigation or management review
- 122 investigations and management reviews were completed

Whistle-blower Investigations

- 1 investigation was initiated and 5 investigations were 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 125 corrective actions, entailing 176 recommendations, were issued by the Investigations Unit.

Personnel Actions Associated with Investigations and Management Reviews

Personnel actions may also 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:

- 59 Resignations
- 51 Terminations
  - 6 Written Reprimands
  - 5 Written Counselings
  - 3 Verbal Counselings
The following chart provides a comparative analysis of the 116 cases opened by Circuit:

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

### Top Five Allegation Types

<table>
<thead>
<tr>
<th>Allegation Type</th>
<th># of Opened Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Falsification, Omission, or Misrepresentation</td>
<td>80</td>
</tr>
<tr>
<td>Computer Related Misconduct</td>
<td>53</td>
</tr>
<tr>
<td>Employee Misconduct</td>
<td>18</td>
</tr>
<tr>
<td>Breach of Information</td>
<td>13</td>
</tr>
<tr>
<td>Personnel Improprieties</td>
<td>13</td>
</tr>
</tbody>
</table>

\(^3\) These are the top five of the 225 allegations in the 122 closed cases.
Public Records Requests

The Investigations Section responded to 36 public records requests under Chapter 119, F.S.

Inspector General Reference Checks

Current and former Department and provider employees being considered for re-hire, transfer, promotion, or demotion are screened to determine if they were the subject of an OIG investigation. The OIG processed 3,525 such reference checks.

Inspector General Outreach Program

The Investigations Unit offers an outreach program with contracted and subcontracted providers, and Department staff. This program involves meeting with management and 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. A total of 62 training sessions, involving 1,567 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 administrative rules for the Department’s fair hearing procedures appear in Rule 65-2.042, et seq., Florida Administrative Code, Applicant/Recipient Fair Hearings.

The major controlling federal regulations are as follows:

- 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 Assistance - 7 CFR § 273.15, Fair Hearings
- 7 CFR § 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
- Agency for Persons with Disabilities
- 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

Completed Hearings Activities

During Fiscal Year 2015-2016:

9,663 fair hearings were completed

1,002 administrative disqualification hearings for Cash or Food Assistance Program benefits were conducted and completed

119 nursing facility discharge or transfer hearings were completed
Internal Audit Unit

The Internal Audit Unit’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(2)(a) and (b), 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 Unit published 12 reports, which included 41 recommendations for improvement. The unit 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.

Five (5) external report responses were coordinated and liaison activities were facilitated, such as requests for responses and information related to audits and reviews that were in progress. In addition, seven (7) external follow-up reports were conducted.

Single Audit Unit

The Single Audit Unit was created within the Department to monitor, review, and follow-up on audits of state and federal funding. The activity is mandated by federal Circular A-133, Federal Uniform Grant Guidance, and § 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 related schedules, so this activity is centrally located in the Single Audit Unit.

The mission of the Single Audit Unit is to interpret the critical information provided by independent external auditors and keep management and contract managers apprised of pertinent financial information contained in the reports. The unit’s two staff members reviewed and processed 154 provider audit packages as well as reviewed 28 certifications of no audit required from providers who did not meet the threshold requiring a complete single audit.

At the completion of each desk review, an Audit Review Status Report is prepared and sent to the Department’s contract manager, with a copy to the appropriate contract administrator. If a report contains findings, then Contracted Client Services is also included in the notification. Many desk reviews require no follow-up action. Desk review issues that require further attention of contract managers range from review findings communicated for informational purposes, to significant issues requiring corrective action by the provider. The Single Audit Unit staff also provides feedback to external auditors where clarification of an existing audit is required.
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 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 Internal Audit Projects Issued

PROJECT #A-1415DCF-036 -- Quality Assurance Consistency in the Contracted Environment

The objective of this audit was to examine the consistency of the planning and reporting of Quality Assurance (QA) activity, as well as data on staffing resources assigned to the QA process. The Department outlined the requirements for the planning and reporting of QA activity in the “Guidelines for Quality Assurance Reviews – FY 2014-2015.” The scope of the project focused on QA guidance and activity, from July 1, 2013 through June 30, 2014, by the Office of Child Welfare, Community-Based Care lead agencies (CBCs), and case management organizations (CMOs).

The project found that some of the Community-Based Care lead agencies did not clearly address all of the required elements of the Annual Quality Management Plan.

The Director of Child Welfare Performance and Quality Improvement responded that procedures would be developed to ensure Community-Based Care lead agencies meet the minimum requirements for Annual Continuous Quality Improvement Plans and Annual Reports.

PROJECT #A-1415DCF-042 -- Post-Audit Sampling of Mileage Reimbursements to Southern Region Office of Child Welfare Employees

The objective of this post-audit sampling was to determine whether payments for employee mileage reimbursements were compliant with applicable state law, rule, and Department operating procedures. The scope was limited to payments for mileage reimbursements to Office of Child Welfare employees of the Department’s Southern Region recorded in the Florida Accounting Information Resource (FLAIR) system during the period January 1, 2014 through June 30, 2014.

The audit disclosed the following:
- Residential information was omitted on the Voucher for Reimbursement of Traveling Expenses and Vicinity/Map Mileage Log.
- The name and telephone number of the person who prepared the Voucher for Reimbursement of Traveling Expenses was omitted.
- Employees submitted Vouchers for Reimbursement of Traveling Expenses without indicating the purposes for which they traveled.
- Documentation of the time of travel was often missing.
- Odometer readings were not always listed on the Vicinity/Map Mileage Log as required.
- Supervisors did not always sign the Vicinity/Map Mileage Log.
- Based on information provided on the Vicinity/Map Mileage Log, some employees appeared to claim excessive mileage.
The Deputy Regional Managing Director of the Southern Region responded that the report was shared with managers and additional training is being provided to Department employees to provide guidance on compliance with Children and Families Operating Procedure (CFOP) 40-1.

PROJECT #A-1415DCF-150 -- Post-Audit Sampling of Mileage Reimbursements to the Northeast Region Office of Child Welfare Employees

The objective of this post-audit sampling was to determine whether payments for employee mileage reimbursements were compliant with applicable state law, rule, and Department operating procedures. The scope was limited to payments for mileage reimbursements to Office of Child Welfare employees of the Department’s Northeast Region recorded in the FLAIR system during the period October 1, 2014 through December 31, 2014.

The audit disclosed the following:

- Employees did not always record the time of travel and related information on the Voucher for Reimbursement of Traveling Expenses.
- The required employee identifying information and the supervisor’s information were not always completed on the Voucher for Reimbursement of Traveling Expenses.
- Vicinity/Map Mileage Logs did not always include odometer readings to document miles driven, times of departure and return, and evidence of supervisory review.
- Employees did not always state the purpose of the travel performed on the Voucher for Reimbursement of Traveling Expenses.

The Interim Northeast Regional Managing Director advised that staff would be retrained regarding reviewing appropriate travel related documents prior to submitting for approval.

PROJECT #A-1415DCF-165 -- Post-Audit Sampling of Mileage Reimbursements to Headquarters Employees

The objective of this post-audit sampling was to determine whether payments for employee mileage reimbursements were compliant with applicable state law, rule, and Department operating procedures. The scope was limited to payments for mileage reimbursements to the Department’s Headquarters employees recorded in the FLAIR system during the period October 1, 2014 through December 31, 2014.

The audit disclosed the following:

- Vicinity/Map Mileage Logs did not always include odometer readings to document miles driven.
- The required preparer’s information was not always completed on the Voucher for Reimbursement of Traveling Expenses.
- Notations on the Voucher for Reimbursement of Traveling Expenses were incomplete related to time of departure and return.

The Assistant Secretary for Administration shared the report with the other Department Assistant Secretaries and the Administrative Support Services Center to ensure that CFOP 40-1 is followed and that Vouchers for Reimbursement of Traveling Expenses are properly audited.
PROJECT #A-1415DCF-190 -- Post-Audit Sampling of Mileage Reimbursements to Southern Region Non-Office of Child Welfare Employees

The objective of this post-audit sampling was to determine whether payments for employee mileage reimbursements were compliant with applicable state law, rule, and Department operating procedures. The scope was limited to payments for mileage reimbursements to non-Office of Child Welfare employees of the Department’s Southern Region recorded in the FLAIR system during the period January 1, 2014 through June 30, 2014.

The audit disclosed the following:

- Documentation of the time of travel was often missing.

The Southern Region Deputy Regional Managing Director responded that the report was provided to managers and additional training is being provided to Department employees.

PROJECT #A-1415DCF-223 -- Post-Audit Sampling of Mileage Reimbursements to Southeast Region Office of Child Welfare Employees

The objective of this post-audit sampling was to determine whether payments for employee mileage reimbursements were compliant with applicable state law, rule, and Department operating procedures. The scope was limited to payments for mileage reimbursements to Office of Child Welfare employees of the Department’s Southeast Region recorded in the FLAIR system during the period July 1, 2014 through December 31, 2014.

The audit disclosed the following:

- Employees did not record their mileage according to Chapter 112, Florida Statutes, and CFOP 40-1.
- Documentation of the time of travel was often missing.
- One employee was overpaid $64.97 due to unsupported mileage and errors.
- An employee’s Voucher for Reimbursement of Traveling Expenses included $34.71 claimed and paid for mileage between their residence and office.
- Supervisors did not always sign the Vicinity/Map Mileage Log.

The Southeast Regional Managing Director responded that leadership and managers were instructed to review CFOP 40-1 and ensure that Department staff comply with the procedure.

PROJECT #A-1415DCF-224 -- Post-Audit Sampling of Mileage Reimbursements to Southeast Region Non-Office of Child Welfare Employees

The objective of this post-audit sampling was to determine whether payments for employee mileage reimbursements were compliant with applicable state law, rule, and Department operating procedures. The scope was limited to payments for mileage reimbursements to non-Office of Child Welfare employees of the Department’s Southeast Region recorded in the FLAIR system during the period July 1, 2014 through December 31, 2014.
The audit disclosed the following:
• Employees did not record their mileage according to CFOP 40-1.
• Documentation of the time of travel was often missing.
• Odometer readings were not always listed on the Vicinity/Map Mileage Log as required.
• Supervisors did not always sign the Vicinity/Map Mileage Log.
• The name and telephone number of the person who prepared the Voucher for Reimbursement of Traveling Expenses was omitted.

The Southeast Regional Managing Director responded that leadership and managers were instructed to review CFOP 40-1 and ensure that Department staff comply with the procedure.

PROJECT #A-1415DCF-226 -- Post-Audit Sampling of Mileage Reimbursements to the Northeast Region Non-Office of Child Welfare Employees

The objective of this post-audit sampling was to determine whether payments for employee mileage reimbursements were compliant with applicable state law, rule, and Department operating procedures. The scope was limited to payments for mileage reimbursements to non-Office of Child Welfare employees of the Department’s Northeast Region recorded in the FLAIR system during the period October 1, 2014 through December 31, 2014.

The audit disclosed the following:
• Employees did not always record the time of travel and related information on the Voucher for Reimbursement of Traveling Expenses.
• Vicinity/Map Mileage Logs were not always completed to document miles driven as support for the Voucher for Reimbursement of Traveling Expenses. Some odometer readings and times of departure and return were omitted.
• Supervisory approval was not always evident on the Voucher for Reimbursement of Traveling Expenses and Vicinity/Map Mileage Log.

The Interim Northeast Regional Managing Director advised that staff would be retrained regarding reviewing appropriate travel related documents prior to submitting for approval.

PROJECT #A-1516DCF-007-- Audit of the Operations of the Department’s Purchasing Card Program

The objectives of this audit were to determine the Department’s compliance with the Department of Financial Services (DFS) Statewide Purchasing Card guidelines; determine the Department Purchasing Card Program Administrator’s compliance with Department policies and procedures; and evaluate the Department’s Purchasing Card policies and procedures for adequate internal controls. The scope of this audit focused primarily on the Department’s Purchasing Card Program and responsibilities of the administrators of the program. The specific documents reviewed covered the period January 2015 through June 2015.

The audit disclosed the following:
• The Department is out of compliance with the DFS 10-day payment requirement.
• Department cardholder files contained unredacted copies of the cardholder’s Purchasing Card.
Cardholder and approver records in the Purchasing Card Module of FLAIR were not timely updated.

The response from the Director of General Services provided information relating to the updating of the Department’s Purchasing Card Manual and Purchasing Card Administrator policies and procedures to ensure compliance with DFS requirements and improve internal controls.

**PROJECT #A-1516DCF-011-- Organizational Ethics**

The objective of this audit was to evaluate the design and effectiveness of the Department’s ethics-related programs and activities. This process is undertaken every three years. The scope of this audit focused primarily on recent actions taken by the Department to communicate, promote, monitor, and enforce policies and standards of ethical conduct applicable to its employees.

Overall, the Department’s ethics program encompasses many of the elements recommended for an effective ethics program. These elements include written policies and procedures that address standards of ethical conduct, mandatory ethics training for employees, and mandatory reporting of unethical conduct. Additionally, as part of the audit, we conducted an agency-wide employee survey. The responses to the survey indicate that the Department has an overall positive ethical climate; however, the responses also highlight opportunities for improvement.

The audit disclosed the following:

- Ninety-eight percent (98%) of Department employees had completed the required *Ethics Basics Training for All Employees and Employee Refresher Training (2015)*.
- The Department’s Employee Handbook e-acknowledgement did not conform to the Department of Management Services (DMS) template, in that it did not specifically state that the employee accepts and understands their responsibilities.
- Survey results indicated that 77% of respondents believe senior management models and promotes ethical behavior and 59% feel that Department management appropriately handles unethical conduct.

The Department Ethics Officer responded that the employees who had not completed the required trainings were contacted and subsequently completed the trainings. Regarding the e-acknowledgement, language was updated to reflect the DMS template. Additionally, the Department Ethics Officer sent a reminder to Department management regarding the expectation of Department-wide high ethical standards.

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

The objectives of this audit were to determine if the Department was in compliance with the DFS Statewide Purchasing Card guidelines as well as Departmental internal policies and procedures relating to the processing of Purchasing Card transactions, and to evaluate the Department’s policies and procedures for adequate internal controls relating to Purchasing Card transactions.
The scope of this audit primarily focused on the Department’s Purchasing Card transactions for the period July 2014 to June 2015.

The audit disclosed the following:

- Department records in the Voucher Imaging System did not always contain all required supporting documentation for Purchasing Card transactions.
- Purchasing Card transaction receipts were not signed and dated by the cardholder and card numbers were not redacted from the receipts.
- The Administrative Services Support Center (ASSC) did not always notify the Department’s Purchasing Card Administrators of cardholder misuse of their Purchasing Card.

General Services and Financial Management issued a joint response regarding the updating of policies and procedures and reminders to be issued to the appropriate Department personnel regarding adhering to the established policies and procedures.

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

The objectives of this audit included evaluating the adequacy and effectiveness of the Department’s policies and procedures related to background screening of summer camp and membership organization personnel; assessing the extent of compliance by summer camps and membership organizations with applicable background screening requirements; and determining whether management had taken corrective actions for findings included in Assurance Report #A-1112DCF-010, Background Screening Office, dated January 20, 2012. The scope of this audit primarily covered the period from March 2015 to March 2016.

The audit disclosed the following:

- Summer camps’ compliance with statutory background screening requirements continues to be an issue.
- Overall, membership organizations have not demonstrated compliance with background screening requirements through the Department.
- Department operating procedures related to background screening are outdated and do not reflect changes applicable to personnel of summer camps and membership organizations.

The Assistant Secretary for Child Welfare responded that all non-compliant summer camps and membership organizations were notified of their non-compliance status and provided information regarding compliance with the statute. Additionally, the procedures are being updated to reflect the statutory changes.
External Audit Reports Issued

**Florida Auditor General**


2016-007  Florida Online Recipient Integrated Data Access (FLORIDA) System – Information Technology – Operational

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

2016-159  State of Florida – Compliance and Internal Controls Over Financial Reporting and Federal Awards

2016-186  Florida Safe Families Network (FSFN) – Information Technology – Operational

Follow-Ups to Prior External Audit Reports

**Florida Auditor General**

Summary Schedule of Prior Audit Findings, Florida Department of Children and Families for the Fiscal Year Ended June 30, 2015

2015-155  Selected Behavioral Health Management Entities Oversight of Substance Abuse and Mental Health Services - Operational

2015-156  DCF and Selected Community-Based Care Lead Agencies Oversight of Foster Care and Related Services - Operational

2015-166  Compliance and Internal Controls Over Financial Reporting and Federal Awards


2016-007  Florida Online Recipient Integrated Data Access (FLORIDA) System – Information Technology – Operational

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

CIN A-04-15-28346 Audit Resolution for the Department of Children and Families concerning Operational Audit of the State of Florida Department of Children and Families and Selected Community-Based Care Lead Agencies (Report No. 2015-156)
Summary of Investigations and Corrective Actions Completed

Multiple Circuits/Areas


**Corrective Action:** The employees resigned and a copy of the report was placed in the personnel files of the Secretary Specialist, Crime Intelligence Unit Technician, and Family Support Worker.

Headquarters

2014-0084  A Hotline Abuse Counselor accessed confidential FSFN Intake #2014-184715 without a legitimate business reason. **Supported.** The Hotline Abuse Counselor provided confidential FSFN Intake #2014-184715 information to an unauthorized individual. **Supported.**

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

2014-0134  A Hotline Crime Intelligence Technician accessed confidential FSFN records regarding a high-profile person 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.

2015-0093  An Interstate Compact on the Placement of Children Government Operations Consultant II accessed FSFN Case IDs #100143721 and #101218741 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.

Circuit 1

2012-0102  A Placement Support Worker of a contracted provider falsified documentation of foster parent support activities. **Supported.**

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

2013-0101  A Family Services Counselor of a contracted provider falsified child protective supervision records in FSFN Case #100051012. **Neither Supported NorRefuted.** The Family Services Counselor falsified child protective supervision records in FSFN Case ID #2210303. **Not Supported.**
Corrective Action: The employee was terminated. No action required.


Corrective Action: The employees resigned and two of the Child Protective Investigator Supervisors’ and the Operations Program Administrator’s personnel files were updated to reflect the findings of the investigation. The Northwest Region conducted a review to ensure there were no similar issues ongoing, and reminded supervisors of Department policy regarding overtime, accuracy in timesheets, and case assignments to staff in training status.

Circuit 2

Corrective Action: The employee resigned. Based on the employee’s FSFN profile not yet being deactivated, Adult Protective Services worked with Information Technology to delete the employee’s and other former employees’ profiles.

Circuit 3

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


Corrective Action: The decision to terminate the investigation was based on information obtained that an Office of Inspector General (OIG) investigation into AMS driver falsification would add no value as the employee had retired.

Circuit 4
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, which expired and remains inactive.

2014-0104 An Economic Self-Sufficiency Specialist I falsified AMS Work Item Details and Florida On-line Recipient Integrated Data Access (FLORIDA) CLRC Running Record Comments concerning FLORIDA Cases #1003797750, #1304199746, #1449956131, #1242364480, #1346712441, #1340990326, #1298915708, #1377409431, #1175350770, and #1317588126. Supported.

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


Corrective Action: The decision to terminate the investigation was based on information obtained that the employee was approved for FMLA leave on a different, legitimate certification, and a verified certification was received subsequently from the same medical office as the allegedly falsified certification. At no point was the employee out on FMLA under the allegedly falsified certification. The employee was terminated and there was no potential criminal aspect or policy recommendation.

2014-0122 An Economic Self-Sufficiency Specialist I falsified AMS Work Item Details related to FLORIDA Cases #1039306896, #1061060390, #1317161661, #1381689621, #1154335160, #1273253159, and #1005705186. Neither Supported Nor Refuted.

Corrective Action: The employee was issued a written counseling. The Northeast Region Office of Economic Self-Sufficiency (OES) Operations Manager issued specific instructions that personal cellular telephones are not to be used for work purposes, and instructions have also been issued regarding Voice Over Internet Protocol (VOIP) issues and how to test for system concerns.

2014-0125 A Family Services Counselor of a subcontracted provider breached confidential client information. Supported. The Family Services Counselor falsified child protective investigation records in FSFN Case IDs #100708439, #2695128, #100551576, #100642773, #100864535, #100898580, #100968155, and #101010579. 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. Based on OIG questions noted regarding the employee’s Travel Vouchers, management of the subcontracted provider reviewed their Travel Voucher oversight procedure and reminded all managers, team leaders, and supervisors to carefully review mileage forms prior to submitting them for payment. The employee’s mileage was reviewed and the subcontracted provider was unable to determine whether mileage submitted was in fact valid and incurred during employment, and the decision was made to allow the mileage as claimed and approved.

2014-0129 An Economic Self-Sufficiency Specialist I accessed confidential information from the Department of Highway Safety and Motor Vehicles (DHSMV) Driver and Vehicle
Information Database (DAVID) concerning herself and her ex-paramour without a legitimate business reason. **Supported.** The Economic Self-Sufficiency Specialist I accessed FLORIDA Cases #100002551, #1007716991, #1159423369, and #1335371524 without a legitimate business reason. **Supported.** The Economic Self-Sufficiency Specialist I accessed the Comprehensive Case Information System (CCIS) to search herself, her ex-paramour, her mother, and her mother’s sister without a legitimate business reason. **Supported.** The Economic Self-Sufficiency Specialist I accessed confidential information from the DHSMV DAVID concerning her father 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. Based on the employee’s processing actions on FLORIDA Case #1007716991, a case of personal interest, the Northeast Region reviewed FLORIDA Case #1007716991 and determined that the employee’s processing actions on the case were appropriate.

**2014-0140**
An Adult Protective Investigator falsified adult protective investigation records in FSFN Investigation #2014-295524. **Neither Supported Nor Refuted.**

**Corrective Action:** Based on the additional information regarding the completion of Vicinity/Map Mileage Logs, Children and Families Operating Procedure (CFOP) 40-1 was revised to allow nearest addresses on the Vicinity/Map Mileage Log for confidentiality reasons.

**2014-0155**
A Prevention Specialist of a subcontracted provider falsified child contact records in FSFN Case ID #100951959. **Neither Supported Nor Refuted.** The Prevention Specialist purchased Percocet pills from a client, purchased marijuana from the Client’s neighbor, and violated the Client’s confidentiality. **Not Supported.**

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

**2015-0015**
A Family Services Counselor of a subcontracted provider accessed FSFN Case ID #100144954 without a legitimate business reason. **Supported.** The Family Services Counselor accessed the Duval County Clerk of Courts Clerk Online Resource ePortal (CORE) 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.

**2015-0036**
An Economic Self-Sufficiency Specialist I accessed the DHSMV DAVID 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. In addition, OES notified DHSMV of the employee’s actions.

**2015-0059**
An Oversight Coordinator of a contracted provider accessed FSFN Case ID #100645793, a case of personal interest, without a legitimate business reason. **Supported.** The Oversight Coordinator did not provide her identity when making a report 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. The Northeast Region reminded all Department child welfare professionals and the contracted provider reminded all of its child welfare professionals about the requirements of § 39.201(1)(d)5., Florida Statutes (F.S.), with regard to the requirement to provide their names to the Hotline when making a child abuse report.

Circuit 5


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 Provisional, Child Welfare Protective Investigator, and Child Welfare Case Manager certifications.

2015-0020  A Data Technician of a contracted provider accessed a case of personal interest and then further disclosed confidential information in FSFN Case ID #101044218 to unauthorized individuals. Not Supported.

Corrective Action: No action required.

2015-0034  A Child Protective Investigator violated security agreement protocols by using another Child Protective Investigator’s FSFN account to review and add child protective investigation records and the other Child Protective Investigator violated security agreement protocols by failing to lock her computer when leaving her workstation. Supported.

Corrective Action: One Child Protective Investigator resigned and the other Child Protective Investigator was issued a verbal counseling. The employees’ personnel files were updated to reflect the findings of the investigation.

2015-0060  A Child Protective Investigator misused her position by representing herself as a Department employee outside of her area of responsibility and while she was on medical leave. 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 and remains inactive.


Corrective Action: The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Central Region requested OIG Outreach training in all circuits in 2016. The OIG subsequently completed Outreach
training with Adult Protective Services in Circuits 5 and 9 and has plans to complete Outreach training in Circuits 10 and 18.

2015-0123 A Dependency Case Manager of a subcontracted provider falsified a case document by signing a caregiver’s signature.  **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.

2016-0012 A Family Support Worker of a subcontracted provider accessed FSFN Case ID #100299491 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.

2016-0020 An Adult Protective Investigator accessed FSFN Investigation #2016-048392 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 Central Region requested OIG Outreach training. The OIG subsequently completed Outreach training with the Department in Circuits 5 and 9 and has plans to complete Outreach training in Circuits 10 and 18.

2016-0021 An Interviewing Clerk accessed AMS Application #668465545, a case of personal interest, without a legitimate business reason.  **Not Supported.**

**Corrective Action:** No action required.

**Circuit 6**

2012-0112 A Case Manager of a subcontracted provider falsified case notes in FSFN Case ID #100552272.  **Supported.** The Case Manager falsified case notes in FSFN Case ID #100590775 and in FSFN Case ID #100354189.  **Supported.** The Case Manager falsified case notes in FSFN Case ID #100537003.  **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 revoked the employee’s Child Welfare Provisional certification.

2014-0047 A Case Manager of a subcontracted provider falsified FSFN Ongoing Case Management Case ID #100842383 (Case Note IDs #139111584 and #139481428) pertaining to face-to-face home visits on March 9, 2014 and April 1, 2014.  **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.
2014-0061 A Case Manager of a subcontracted provider falsified a home visit in FSFN Ongoing Case Management Case #2517732. **Supported.**

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

2014-0132 An Intake Assessor and a Therapist of a subcontracted provider had knowledge of suspected child sexual abuse and failed to report the allegation to the Hotline. **Supported.**

**Corrective Action:** The employees were issued written reprimands and required to retake Hotline training. Due to his licensure as a health care professional, the Therapist was reported to the Department of Health. The provider conducted mandatory training hosted by the OIG to ensure all staff are aware of mandatory reporting requirements and to educate all staff on mandatory reporting as part of their required Incident Reporting training at least once per year.

2015-0002 A Dependency Case Manager of a subcontracted provider falsified a home visit in FSFN Case ID #100610571. **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.

2016-0016 An Office of Public Benefits Integrity (OPBI) Accounting Supervisor accessed confidential information within the DHSMV DAVID 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. OPBI notified DHSMV of the DAVID system misuse and provided DHSMV with an update of the actions taken, including the date the employee’s DAVID access was made inactive, the number of records compromised, the date of notification to the individuals whose personal information was compromised, personnel action taken against the employee, and corrective actions planned to ensure that DAVID misuse does not reoccur. Notification to the compromised individuals was completed. OPBI has included monitoring of DAVID usage as part of the Quality Control audits conducted on field staff, confirmed that all OPBI staff completed Case Processing Integrity Training (2016), held staff meetings with all OPBI supervisors to remind them of the importance of DAVID data security, and will continue to complete staff reminders through staff meetings.

**Circuit 7**

2014-0040 A Child Protective Investigator engaged in employee misconduct by having an inappropriate relationship with a Department client. **Supported.**

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

2014-0142 An Adult Protective Investigator falsified adult protective investigation records in FSFN Investigations #2014-245764 and #2014-303028. **Neither Supported Nor Refuted.**
Corrective Action: The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation.


Corrective Action: The employee resigned. No action required.

2015-0029 An Adult Protective Investigator used his Department-issued cellular telephone for personal calls and failed to reimburse the Department as required. Supported. An Adult Protective Investigator Supervisor used her Department-issued cellular telephone for personal calls and failed to reimburse the Department as required. Supported. Another Adult Protective Investigator used his Department-issued cellular telephone for personal calls and failed to reimburse the Department as required. Not Supported. Another Adult Protective Investigator used his Department-issued cellular telephone for personal calls and failed to reimburse the Department as required. Not Supported.

Corrective Action: Two of the Adult Protective Investigators were terminated and the employees' personnel files were updated to reflect the findings of the investigation. The Adult Protective Investigator Supervisor was issued a written reprimand and reimbursed the Department for the total amount of personal calls ($130.50).

2015-0098 An Adoption Supervisor of a contracted provider was involved in a business enterprise pertaining to private adoption services outside of the CPC system of care, which constitutes a conflict of interest. Supported.

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

2015-0111 A Child Case Manager of a contracted provider failed to make a mandatory report of child abuse to the Hotline concerning FSFN Case ID #2211593. 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 Trainer certification expired and remains inactive. The contracted provider took proactive measures to actively discuss the subject matter of this investigation with all case managers, and requested OIG Outreach training, which was subsequently completed. All case managers of the contracted provider were notified of their duties and responsibilities to report known or suspected incidents of child abuse to the Hotline.

Circuit 8

2013-0031 An Adoptions Case Manager of a subcontracted provider falsified local background checks in adoption home studies for prospective adoptive parents in FSFN Case IDs #100193916, #100699442, #100526091, and #100655677. Neither Supported Nor Refuted. The Adoptions Case Manager falsified pet vaccination information in an Adoption Home Study for FSFN Case ID #100378773. Neither Supported Nor Refuted. An Adoptions Specialist of the subcontracted provider falsified background information.
checks included in an Adoption Home Study for FSFN Case ID #100193916. **Neither Supported Nor Refuted.** An Adoptions Supervisor of the subcontracted provider approved an Adoption Home Study in FSFN Case ID #100526091 and instructed the Adoptions Case Manager to place the children in adoptive placement without background checks on frequent visitors having been completed. **Supported.** The Adoptions Supervisor approved an Adoption Home Study in FSFN Case ID #100655677 and instructed the Adoptions Case Manager to place the foster child in adoptive placement without the Florida Department of Law Enforcement (FDLE) background check on a child over the age of 12 residing in the home having been completed. **Supported.**

**Corrective Action:** The Adoptions Case Manager was terminated, the Adoptions Supervisor resigned, and the Adoptions Specialist was issued a written reprimand. The personnel files of the Adoptions Case Manager and the Adoptions Supervisor were updated to reflect the findings of the investigation. The subcontracted provider reviewed and revised current agency policy and procedures regarding age-specific background screenings for household members of adoption applicants. The Florida Certification Board was notified and the Adoptions Case Manager’s Child Welfare Case Manager certification expired and remains inactive.

2014-0080 An Adoption Subsidy and Interstate Compact on Adoption Medicaid Assistance Specialist of a contracted provider accessed FSFN records concerning the current wife of her daughter’s ex-husband without a legitimate business reason. **Supported.** The Adoption Subsidy and Interstate Compact on Adoption Medicaid Assistance Specialist accessed FSFN Intakes #1997-137685, #1997-082564, #2002-043807, #2014-071887-01, #2014-071887-02, and #2014-159580, case notes contained in FSFN Investigations #2014-071887 and #2014-159580, and her daughter’s Case Book without a legitimate business reason. **Supported.** The Adoption Subsidy and Interstate Compact on Adoption Medicaid Assistance Specialist breached confidential FSFN information concerning the current wife of her daughter’s ex-husband to her daughter. **Not Supported.**

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

2015-0008 A Family Care Counselor of a subcontracted provider falsified information in a February 8, 2013 Child Placement Home Study pertaining to FSFN Case ID #100397886. **Neither Supported Nor Refuted.**

**Corrective Action:** The employee had previously resigned from the subcontracted employer and began employment with another subcontracted provider. The employee’s personnel file with the current employer was updated to reflect the findings of the investigation, but no personnel action was taken. The Home Study checklist form has been updated to include the requirement of attaching the FSFN abuse report results as a proactive remedy.

**Circuit 9**

2014-0007 A Senior Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case ID #159904. **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 the employee’s Child Welfare Case Manager certification reflects an open ethics investigation.

2015-0001 A Background Screening Coordinator failed to properly safeguard confidential background screening information from an unauthorized individual. Supported.

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

2015-0011 An Economic Self-Sufficiency Specialist I accessed FLORIDA Case #1372443274 without a legitimate business reason, and subsequently entered information into and approved that case for food stamp assistance without being authorized 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.

2015-0014 A Licensing Specialist of a subcontracted provider falsified a Unified Home Study in FSFN Case ID #102704232. 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.


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 and remains inactive. No efforts were made to seek reimbursement for inappropriate cellular telephone use by the employee, as it did not prove to be burdensome to the Department based on the cellular telephone plan in place at the time. Based on the Additional Information regarding an FLSA issue, the Program Administrator addressed the need to accurately record hours worked with existing staff at a building meeting and provided all staff with copies of CFOP 60-01.

2015-0099 An Interviewing Clerk accessed a case of personal interest (ACCESS Case #665365015) in AMS without a legitimate business reason. Supported.

Corrective Action: The employee received a written counseling.

**Corrective Action:** The first Child Protective Investigator was terminated, the other Child Protective Investigator resigned, and the employees’ personnel files were updated to reflect the findings of the investigation. The Florida Certification Board was notified and initiated ethics investigations on the employee’s Child Welfare Provisional certification and the other employee’s Child Welfare Provisional and Child Welfare Protective Investigator certifications.

### Circuit 10

**2013-0013**

A Dependency Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case IDs #100582203, #100641647, #100777105, #3405862, and #100683013. **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 notated an ethics allegation on the employee’s Child Welfare Provisional certification, which expired and remains inactive.

**2015-0037**

An Economic Self-Sufficiency Specialist I accessed DAVID 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 Central Region sent an e-mail reminder addressing the Personal Interest Case Policy to Circuit 10 OES staff. Based on the Additional Information that the employee acknowledged, with respect to her own public assistance case, that she forgot to report her employment when she returned to work with the Department, OPBI confirmed that an overpayment claim regarding the employee was established.

**2015-0078**

A Registrar of a subcontracted provider utilized a provider information system to access information on client cases without a legitimate business reason. **Supported.**

**Corrective Action:** The employee received a verbal counseling and was required to retake Health Insurance Portability and Accountability Act of 1996 (HIPAA) and information security trainings.

**2015-0103**

A Dependency Case Manager of a subcontracted provider accessed FSFN Case ID #100547652 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 and Child Welfare Case Manager certifications. The Central Regional Managing Director suggested to management of the contracted and subcontracted provider that the OIG reference check form is utilized for all individuals with prior Department or contracted provider employment, to which the contracted provider responded that it will explore the use of such, but not mandate the use of any information obtained from such a check as a basis for a hiring decision.

**2016-0008**

A Child Protective Investigator falsified child protective investigation records in FSFN Investigation #2015-311303. **Not Supported.**
Corrective Action: No action required.

2016-0030 An Adult Protective Investigator accessed a Secretary Specialist’s Department-issued computer without authorization or a legitimate business reason and deleted an e-mail. Supported. The Secretary Specialist failed to secure her Department-issued computer prior to leaving her work area. Supported.

Corrective Action: The employees each received a written counseling and were required to complete Security Awareness Training. The Adult Protective Investigator’s acting supervisor designation was removed. Central Region supervisors will be conducting refresher training with their assigned employees, and the Central Region requested that OIG Outreach training be provided in all circuits by the end of 2016. The OIG subsequently completed Outreach training with the Department in Circuits 5 and 9 and has plans to complete Outreach training in Circuits 10 and 18.

Circuit 11

2011-0087 A Court Liaison of a subcontracted provider falsified child protective records and misrepresented to the Dependency Court that a foster parent agreed to become a foster child’s permanent guardian (resulting in the foster child being deprived of court-ordered tutoring). 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.


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.


Corrective Action: The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Southern Region has implemented steps relative to daycare referrals to prevent document falsification.

2014-0037 A Child Welfare Case Manager of a subcontracted provider falsified FSFN Case ID #100758960 (Case Note ID #138337454). Supported.

Corrective Action: The employee resigned and the subcontracted provider closed operations. The Florida Certification Board was notified and notated an ethics
allegation on the employee’s Child Welfare Protective Investigator certification, which expired and remains inactive.

2014-0042 A Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case ID #100621715. **Supported.**

**Corrective Action:** The employee was terminated and the subcontracted provider closed operations. The Florida Certification Board was notified and the employee’s Child Welfare Case Manager certification expired and remains inactive.

2014-0089 A Dependency Case Manager of a subcontracted provider falsified Exit Interview Forms in FSFN Case ID #100917201. **Not Supported.**

**Corrective Action:** No action required.

2014-0141 A Child Protective Investigator engaged in employee misconduct by making inappropriate sexual advances toward a Department client. **Neither Supported Nor Refuted.**

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

2014-0144 An Adult Protective Investigator falsified case notes in FSFN Investigation #2014-249987. **Supported.**

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

2015-0010 A Case Manager of a subcontracted provider falsified Case Note ID #144192794 regarding a home visit in FSFN Case ID #101027735. **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.

2015-0017 A Child Protective Investigator engaged in employee misconduct by making sexually suggestive and inappropriate advances toward a Department client. **Neither Supported Nor Refuted.**

**Corrective Action:** The employee was issued a written reprimand, a copy of which was placed in the employee’s personnel file.

2015-0023 A Dependency Case Manager of a subcontracted provider falsified a child protective supervision record in FSFN Case ID #101068863. **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 employee’s Child Welfare Protective Investigator certification expired and remains inactive.

2015-0025 A Special Projects Supervisor and a Full Case Manager of a subcontracted provider falsified two At-Risk Child Care Application and Authorization forms. **Supported.**
Corrective Action: The Special Projects Supervisor resigned but was rehired as a Case Manager at the conclusion of the investigation. The Full Case Manager was issued a written counseling. The Florida Certification Board was notified but took no action against the Special Projects Supervisor’s Child Welfare Case Manager Supervisor certification or the Full Case Manager’s Child Welfare Case Manager certification.


Corrective Action: The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation. The Department Administrative Services Support Center (ASSC) provided mandatory Travel and Expense Reimbursement Training to Southern Region Child Protective Investigators. The Family and Community Services Director issue a policy Memorandum providing guidelines for the appropriate signature authority and delegation. Southern Region Child Protective Investigators now have Canvas software installed on their Department-issued cellular telephones and all staff have been trained in the use of the software as it relates to travel. The ASSC Director addressed the findings with travel staff and ASSC supervisors. The Department successfully recouped a $200 toll expense overpayment. The Office of General Services is finalizing a fleet leasing business case with the assistance of Enterprise Fleet Management to address the recommendation of considering an attempt to obtain funding for newer vehicles for Child Protective Investigators in Circuit 11.

2015-0066 A Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case ID #2062258. 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 and remains inactive.

2016-0004 An Operations Review Specialist used his Department-issued laptop computer to access inappropriate material. Supported.

Corrective Action: The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation. The Director of Economic Self-Sufficiency sent an e-mail to all program staff reminding them to comply with Department operating procedures pertaining to computer and internet usage.

Circuit 12

2014-0069 An Adoption Specialist of a subcontracted provider falsified information pertaining to a May 26, 2014 face-to-face home visit in FSFN Case ID #2348435. 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.

Circuit 13

2014-0091 A Dependency Case Manager of a subcontracted provider falsified information in FSFN Case ID #100164560 pertaining to a July 16, 2014 face-to-face home visit. 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 the employee’s Child Welfare Case Manager certification expired and remains inactive.

2014-0138 A Case Manager of a subcontracted provider falsified child protective supervision records pertaining to FSFN Case IDs #100538368 and #100871320. 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.

2014-0147 An Economic Self-Sufficiency Specialist I falsified her People First timesheet by documenting more hours than she actually worked between the time period of August 4, 2014 through November 3, 2014. 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.

2015-0032 A Case Manager of a subcontracted provider engaged in employee misconduct by inappropriately touching and/or engaging in an inappropriate sexual encounter with clients. 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.

Circuit 14


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.


Corrective Action: The employee was issued a verbal counseling.

Circuit 15

2015-0024 A Child Protective Investigator was negligent in disclosing the existence of an active criminal investigation to the mother of an alleged perpetrator in FSFN Child-on-Child Assessment #2015-046706-01. Not Supported. The Child Protective Investigator
was negligent in disclosing the existence of an active criminal investigation to an alleged perpetrator in FSFN Investigation #2014-285383-01. **Not Supported.**

**Corrective Action:** At a Child Protective Investigator Leadership Meeting, Southeast Region Family Safety Leadership reiterated that law enforcement is to be contacted and joint response is required on all new investigations.

2015-0031 A Senior Child Protective Investigator accessed FSFN Investigation #2015-122377 without a legitimate business reason and disclosed confidential information to a parent. **Supported.** The Senior Child Protective Investigator sent confidential information from her Department-issued e-mail to her personal e-mail address. **Supported.** The Senior Child Protective Investigator falsified child protective investigation records in FSFN Investigation #2014-325956. **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 certification.

2015-0058 An unknown employee of a grantee falsified a signature on a Certification of Local Government Approval for Nonprofit Organizations that was part of an annual grant application. **Supported.**

**Corrective Action:** Although it was apparent that the signature was falsified, there was insufficient information to determine who falsified the signature. No action required.

2015-0074 An Economic Self-Sufficiency Specialist I accessed and processed personal interest cases in FLORIDA while on approved leave. **Supported.**

**Corrective Action:** The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. The Office of Information Technology Services sent an e-mail reminder to all Southeast Region employees regarding the requirement to document all hours worked.

2015-0096 An Adult Protective Investigator falsified adult protective investigation records in FSFN Case IDs #101131811, #101150472, and #100982839. **Supported.** The Adult Protective Investigator misused her Department-issued cellular telephone while on extended leave by making and receiving personal telephone calls and text messages between September 1, 2015 and November 6, 2015. **Supported.**

**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 received pay while on unpaid leave, the Department sought reimbursement of $6,639.13.

**Circuit 16** There were no cases closed in Circuit 16 during FY 2015-2016.
A Director of Home Management of a subcontracted provider disclosed, without authorization, the confidential name of the reporter in FSFN Intake #2014-238501-01. Not Supported.

Corrective Action: No action required.

An Economic Self-Sufficiency Specialist I accessed AMS Case #660806986, a case of personal interest. Supported. The Economic Self-Sufficiency Specialist I accessed AMS Case #661418950, #660235632, #661187122, #205331864, #205372726, and #205269104 and FLORIDA case #1121432425 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.

An Economic Self-Sufficiency Specialist II accessed FLORIDA Case #1166316076, a case of personal interest, without a legitimate business reason. Supported. The Economic Self-Sufficiency Specialist II breached confidential information concerning FLORIDA Case #1166316076 by providing confidential customer information to an unauthorized individual. Neither Supported Nor Refuted.

Corrective Action: The employee was issued a written reprimand.


Corrective Action: The employee was terminated and the employee’s personnel file was updated to reflect the findings of the investigation. The Assistant Secretary for Economic Self-Sufficiency sent a memorandum to OPBI employees reminding them of the requirement to report an arrest and of their responsibilities in accessing informational databases. DHSMV was notified of the inappropriate access of two DAVID records and the individuals identified in the report were also notified of the inappropriate access of their DAVID records.

An Economic Self-Sufficiency Specialist I accessed FLORIDA Cases #1193957389 and #1390643492 without a legitimate business reason. Not Supported.

Corrective Action: The employee resigned. The Southeast Region has built activities that require the use of FLORIDA and AMS into its OES training curriculum to solidify the information/course material delivered to the trainees, and OES frequently audits FLORIDA system use to monitor and prevent misuse.

A Dependency Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case IDs #100761345 and #2755182. 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.

2014-0078
A Dependency Case Manager of a subcontracted provider falsified a home visit in FSFN Case ID #100901674. 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 notated an ethics allegation on the employee’s Child Welfare Provisional certification, which expired and remains inactive.

2014-0093

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.

2015-0021
A Senior Child Protective Investigator falsified information regarding the commencement of FSFN Investigation #2014-301671. 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 certification.

2015-0022
A Child Protective Investigator engaged in employee misconduct when he misused his position to forcibly enter a Department client’s locked bedroom and took firearms and ammunition into his personal possession, and took personal possession of a Department client’s dog. Supported. The Child Protective Investigator breached client confidentiality by disclosing the location of a domestic violence shelter by involving a personal friend in the transport of a Department client from a domestic violence shelter to his/her home. 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.

2015-0054
An Adult Protective Investigator Supervisor falsified information pertaining to three adult protective investigations. Not Supported. The Adult Protective Investigator Supervisor allowed Adult Protective Investigators to work overtime hours for which they were not compensated, in violation of the Fair Labor Standards Act of 1938. Not Supported.

Corrective Action: No action required.

2015-0055
A Child Protective Investigator falsified Vicinity/Map Mileage Logs, a People First Timesheet, and Overtime/Request and Authorization Forms. 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 the employee’s Child Welfare Provisional certification expired and remains inactive.


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 certification.

2015-0092 A Dependency Case Manager Supervisor of a subcontracted provider accessed FSFN Intakes #2013-044458 and #2013-196153, cases 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. The Florida Certification Board was notified and revoked the employee’s Child Welfare Case Manager certification.

2015-0127 A Child Protective Investigator falsified the results of a drug screen test kit in FSFN Investigation #2015-255130 and on the corresponding Test Result Records form by documenting “negative” test results when the Department client actually tested positive. Not Supported.

Corrective Action: The employee resigned. Circuit 18 staff have been trained on appropriate drug screen procedures and are provided with the information during Pre-Service Training, one-on-one mentoring from certified staff while working toward certification, being shadowed in the field by their supervisor or Senior Child Protective Investigator, and during staff and/or unit meetings. Circuit 18 Program Administrators provided refresher training on administering drug screens and recording results appropriately during an All-Staff meeting, and additional training will be provided following a determination as to which drug screen provider will be used during FY 2016-2017.

Circuit 19
2015-0069 An Administrative Assistant of a subcontracted provider accessed FSFN Case ID #2346300 without a legitimate business reason. Supported. The Administrative Assistant disclosed confidential case information to an unauthorized individual. Neither Supported Nor Refuted.

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

Circuit 20
Investigator engaged in employee misconduct with a Department client involved in FSFN Intakes #2012-154394-01, #2012-187189-01, and #2013-049498-01. **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 suspended the employee’s Child Welfare Protective Investigator certification.

2014-0045 A Family Services Counselor falsified a Routine Inspection Report for a daycare inspection. **Supported.** The Family Services Counselor falsified nine additional Routine Inspection Reports regarding daycare inspections. **Supported.**

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

2014-0081 WB An Operations Program Administrator was not impartial in the selection process for a vacant Human Services Counselor III position. **Neither Supported Nor Refuted.** The Operations Program Administrator intentionally delayed the reassignment of FSFN Investigations #2014-081380, #2014-081474, #2014-081551, and #2014-081671, which presented a substantial and specific danger to the health, safety, or welfare of clients. **Not Supported.**

**Corrective Action:** All hiring packets in Circuit 20 were moved to a locked, secure location, to which only the Operations Program Administrator and one clerical staff member have a key. The hiring packets now must be signed out if they are viewed.

2014-0130 An Adult Protective Investigator operated an airline ticket business using her Department-issued computer. **Not Supported.** The Adult Protective Investigator caused another employee to utilize Department information systems to obtain personal information on an individual for personal use and 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.

2014-0135 A Case Manager of a subcontracted provider provided false testimony by misrepresenting information during a Judicial Review. **Neither Supported Nor Refuted.**

**Corrective Action:** The employee resigned and the employee’s personnel file was updated to reflect the findings of the investigation. Because the investigation involved testimony as to medical and dental records, the subcontracted provider developed a Corrective Action Plan to track all Medical/Dental and Immunizations for children served to ensure their well-being is met, maintain contact with the family's service providers, including medical and educational providers, and help support parents in maintaining contact and gathering information to assess and measure family progress.

2015-0027 An Economic Self-Sufficiency Specialist I accessed FLORIDA Case #1097480895 without a legitimate business reason. **Supported.** The Economic Self-Sufficiency Specialist I accessed FLORIDA Case #1405623454 without a legitimate business reason. **Neither Supported Nor Refuted.**
accessed FLORIDA Case #1345413441 without a legitimate business reason. Not Supported.

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

Institutions

2013-0025 WB North Florida Evaluation and Treatment Center (NFETC) staff falsified pod checks and Close Observation Checks for a resident. Supported. NFETC staff have slept while on duty. Supported. An NFETC Unit Treatment and Rehabilitation Senior Supervisor I has slept while on duty. Not Supported. NFETC staff failed to properly document medication administered in the Medication Administration Record as required for a resident. Not Supported. An NFETC Registered Nurse Specialist failed to properly document medication administered in the Medication Administration Record (MAR) as required for a resident. Not Supported. NFETC staff leave the control room unmanned at nights. Not Supported. NFETC has not provided care for a resident’s potential medical illness. Not Supported.

Corrective Action: The Registered Nurse Specialist and two NFETC staff resigned. NFETC initiated a Corrective Action Plan to implement the recommendations made in the NFETC Investigation Report dated December 31, 2012. In addition, as of November 9, 2015, NFETC supervisors make random visits to each resident building and note in the shift logs and/or the nursing 24-hour report each night; audits are conducted in conjunction with the on-site Building Manager’s random visits to each building on each shift to ensure that all pod checks and special observations have been completed and documented; a charting mechanism was added to the Building Manager’s Shift Report in which the Building Manager documents the result of each audit at the end of each shift, and the report is sent to Residential Managers and Administrators at the end of each shift; if checks are noted as not completed correctly, the on-site Building Manager immediately completes and documents the check to ensure the resident’s safety, with any missed documentation lined out noting that the check was not completed correctly; the on-site Building Managers randomly monitor the video of resident living areas; and employee training continues to stress staff responsibilities on all shifts, including special observations and proper documentation.

2014-0053 An NFETC Senior Physician brought medication into the facility and injected the medication into a patient. Supported. The NFETC Senior Physician attempted to bring contraband (needles) into the facility. Supported. The NFETC Senior Physician engaged in unapproved secondary employment. Supported. The NFETC Senior Physician used state property while performing a chiropractic manipulation on a staff member for money. Neither Supported Nor Refuted. The NFETC Senior Physician performed a chiropractic manipulation on a patient. 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. Based on the physician’s licensure, the Department of Health, Division of Medical Quality Assurance was notified of the findings of the investigation. Based on additional information regarding a potential harassment issue, the investigation was referred to the Office of Civil Rights for review.
2015-0003 WB  Three Florida State Hospital (FSH) Unit Treatment and Rehabilitation Senior Supervisor (UTRSS) Is and two UTRSS IIs required all direct care staff in the Civil Admissions Unit to complete FSH Staff Training And Information Reporting System (STAIRS) forms indicating that the staff had completed mandatory training even though the staff had not completed the training. **Not Supported.** The three FSH UTRSS Is and two UTRSS IIs provided direct care staff in the Civil Admissions Unit with test answers to mandatory annual online Department or FSH training, including Mandt training, or completed the annual mandatory Department or FSH training for the staff. **Not Supported.** An FSH Assistant Superintendent, UTRSS III, and UTRSS I failed to take appropriate action to remedy resident and staff safety concerns, including failing to ensure room and body checks were conducted. **Not Supported.** The FSH UTRSS III, UTRSS II, and UTRSS I failed to maintain minimum staffing requirements on Civil Admissions Unit Ward A. **Not Supported.** An FSH Mental Health Program Analyst and members of the Recovery Team failed to include appropriate intervention methods for the aggressive behavior of FSH residents by not allowing the residents to participate in their recovery plans. **Neither Supported Nor Refuted.**

**Corrective Action:** One UTRSS II was terminated. Headquarters staff conducted an onsite assessment of a representative sample of FSH recovery plans, and determined that all recovery plans reviewed were in compliance with CFOP 155-16.

2015-0004  A Northeast Florida State Hospital (NEFSH) Human Services Worker II disclosed protected NEFSH resident health information to an unauthorized individual. **Supported.**

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

**Substance Abuse and Mental Health**

2014-0102  A Licensed Practical Nurse of a contracted provider falsely documented Accu-Cheks in the Medication Administration Records of seven residents. **Not Supported.**

**Corrective Action:** The employee was terminated. The contracted provider updated its policy regarding Medication Administration Records and trained staff to ensure accuracy in documentation.

2014-0106  A Chief Executive Officer of a subcontracted provider overbilled the managing entity for services. **Supported.**

**Corrective Action:** The Chief Executive Officer resigned and the subcontracted provider was sold and is no longer providing services. The contract expired and all identified overbilling was recouped. CFOP 55-01 addresses the development of on-site and desk monitoring tools for financial monitoring activities of contracts with Community-Based Care (CBC) Lead Agencies and Substance Abuse and Mental Health Funded Managing Entities (MEs). Both on-site and desk monitoring tools were developed and implemented in FY 2015-2016, with on-site visits scheduled and beginning in January 2016. Review of CBC and ME subcontract monitoring policies and procedures and reports from subcontract monitoring is included in the on-site monitoring tool.
The Chief Executive Officer of a subcontracted provider implemented staffing changes and position cuts resulting in clients not receiving proper services, including two clients not receiving their medications and one client receiving the wrong medication. *Neither Supported Nor Refuted.* The Chief Executive Officer failed to ensure that the subcontracted provider’s facility for pregnant and post-partum women was adequately equipped and properly staffed with trained medical personnel. *Not Supported.*

**Corrective Action:** The employee resigned and the subcontracted provider ceased operations. No action required.
Summary of Management Reviews and Corrective Actions Completed

2013-0084 A management review was initiated to determine whether the caregivers or children identified on six Child Care Referral and Fee Waiver Forms were eligible for subsidized child care. The management review revealed that the children referenced in each form fulfilled the definition of “at-risk,” in accordance with Rule 6M-4.100(4), F.A.C., and the forms were determined to be legitimate.

Corrective Action: The Department, the contracted provider, and subcontracted providers have participated in a series of Child Care Referral and Recertification System Improvement monthly meetings chaired by the subsidized child care approval entity. The contracted and subcontracted providers now have designated Points of Contact within the approval entity, and a Central Point of Contact has been designated at a Senior Administrative Level for each provider that the approval entity can contact for emergency situations or when follow-up is needed. The approval entity has an online portal where the child care initial certification and recertification process can be completed, and the necessary back-up documentation and signatures needed can now be uploaded directly into the portal; therefore, the approval entity will no longer accept faxes and/or e-mails as part of the certification/recertification process. The approval entity provided training on the portal to the contracted and subcontracted providers’ Central Points of Contact and their backups. Based on the concept of separation of duties as an internal control, the contracted provider reminded its staff in writing that, as part of best practice and internal controls, any document or work-related activity that requires a client signature and/or supervisor signature cannot be signed or completed on their behalf by staff members, even with verbal authorization.

2014-0048 A management review was initiated to determine whether an Interviewing Clerk and an Economic Self-Sufficiency Specialist I fraudulently processed Medicaid and Food Assistance applications, in light of the initiation of a criminal investigation into a broader fraudulent scheme involving the two employees, as well as the non-employee ringleader. The management review revealed that the employees received payments amounting to about $40,000 from the owner of a business in which clients were guaranteed, for a fee, to receive benefits regardless of their personal and financial circumstances. The fraudulent scheme involved approximately 1,400 customers in about 640 public assistance cases. In addition, the background screening process was examined and it was noted that the Economic Self-Sufficiency Specialist I was exempted from employment disqualification based on a review that took into account the employee’s criminal convictions of armed robbery and aggravated battery, despite the employee’s employment applications failing to reveal the extent of the employee’s criminal history.

Corrective Action: The Interviewing Clerk was terminated and the Economic Self-Sufficiency Specialist I resigned. Both employees were charged with and convicted of conspiracy to commit bribery in programs receiving federal funds and committing health care fraud, in violation of 18 U.S.C. § 371, and were sentenced to pay restitution as well as serving terms in federal prison followed by probation. OES and OPBI met to review the OIG findings and recommendations. OES and OPBI will add a number of employee and client-targeted reviews to current portfolios to further prevent internal and external fraud. In addition, the Assistant Secretary for Operations and the Assistant Secretary for Economic Self-Sufficiency released an official memorandum reminding staff of the expectation and requirement to conduct business with the highest degree of integrity. All OES staff were required to take a mandatory
online customized training by February 1, 2016, after which regular operational
monitoring will occur to ensure case processing integrity. OES developed a program
integrity unit that conducts desk monitoring activities and is incorporating an employee
personal integrity element within the regular peer review process, which monitors local
office procedures to ensure and improve standardization of business practices. The
Assistant Secretary for Administration formed a workgroup involving the Background
Screening Unit and Human Resources, along with technical support, to examine the
entire background screening process and the granting of exemptions from
disqualification from employment based on criminal history. The Deputy Secretary
instructed the workgroup to process map requests for exemptions for both processes
(Department employment and providers) to ensure a work plan for an efficient and
effective system for granting of exemptions from disqualification from employment. In
the meantime, to ensure a thorough review process for Department employment, the
Human Resources Director is now included as a recommender in the review process
for the granting of an exemption for any disqualifying criminal history for Department
employment, and the Human Resources team will ensure there is a review process in
place to ensure that applicants disclose all criminal history they are required to
disclose on their employment applications and attestations.

2014-0116 A management review was initiated to determine whether a subcontracted provider
compensated an individual who provided no apparent service to the organization; paid
significant bonuses to its executives despite insolvency, and in the face of a $1.2
million loss; entered into a real estate transaction without complying with Rule 65E-
14.010(7)(c), F.A.C.; and failed to follow federal and state procurement guidelines in
contracting with another agency to handle the subcontracted provider’s administrative
functions. The management review revealed the following:

- Two reports initiated by the contracted provider indicated that the individual to
  whom compensation was provided was one of the original founders of the
  subcontracted provider and had left 10 to 12 years earlier, but was still
  receiving compensation. In addition, the individual was reimbursed round-trip
  airfare in the amount of $879.40 during January 2013.

- Reports initiated by the contracted provider reflected that the subcontracted
  provider was insolvent as of June 30, 2013, but paid bonuses of $150,000 to
  one employee and $30,000 each to four employees, issued with no approval
  from the subcontracted provider’s board of directors. In addition, after the
  former President of the subcontracted provider separated from the provider in
  June 2014, he continued to be paid a salary and benefits, which appeared
  contrary to his 2009 employment agreement.

- It appeared that state funds were not used to purchase property. The
  subcontracted provider could not provide property appraisals pertaining to the
  sale of the property to the purchaser. The properties were sold for an
  aggregate amount of $3,400,000; however, the combined “Just Value” as listed
  on the property appraiser websites was $4,840,403, and $950,000 of the total
  sales price of the properties was financed by the subcontracted provider. The
  purchaser resold two of the properties; one within the same month of purchase
  and the other within 2.5 months of purchase, with a $162,000 profit to the
  purchaser.

- There was no evidence that the subcontracted provider followed the required
  procurement process in the selection of the contract to handle the provider’s
  administrative functions, and no evidence that the subcontracted provider
  obtained prior approval from the contracted provider as required by contract.
Corrective Action: As of December 31, 2014, the contracted provider no longer contracted with the subcontracted provider. Monitoring tools for both types of monitoring outlined by CFOP 55-01 (Policies and Procedures of Financial Monitoring) were developed during FY 2015-2016 and on-site visits scheduled and conducted beginning in January 2016. Review of CBC and ME subcontract monitoring policies and procedures and reports from subcontract monitoring is included in the on-site monitoring tool.

2014-0118 A management review was initiated to determine whether Circuit 20 Adult Protective Services management denies overtime compensation to employees, causing adult protective investigators to work undocumented overtime hours for which they were not compensated, in violation of the Fair Labor Standards Act of 1938. The management review revealed that there was no substantial evidence of this occurring.

Corrective Action: An Adult Protective Investigator Supervisor resigned. During a July 15, 2015 Circuit 20 all-staff meeting, CFOP 60-01 (Hours of Work, Overtime and Compensatory Leave) was discussed and reviewed with all staff members, and staff members were notified of the location of the information on the Department website for future reference.

2014-0128 A management review was initiated to determine whether employees in the Riviera Beach Service Center were manipulating and falsifying FLORIDA records, and not accurately documenting time worked, and to determine why Riviera Beach Service Center employees found it necessary to use shortcut methods in their work. The management review revealed that the majority of the employees interviewed admitted to knowing about, currently using, or having used in the past one or more of eight identified shortcut methods (including working additional hours that they did not document) to manipulate and falsify FLORIDA records to prevent being disciplined or terminated for failing to achieve federal and Department-mandated time standards or meet Department performance expectations.

Corrective Action: The Assistant Secretary for Economic Self-Sufficiency held a conference call with the OES Program Office and OES Regional Directors to discuss reinforcement of the requirement of integrity and accurate casework, wherein they were asked to communicate integrity within the Department. The OES Program Office developed and released training to clearly outline program expectations for proper case handling, including proper time card completion, submission and approval, and instruction on what and how to report matters to the OIG. The OES Office of Continuous Improvement developed ad hoc queries designed to seek case processing activities alleged in the management review and perform case reviews to determine validation of the allegations, and established a Peer and Integrity Review Manager position to oversee the reviews.

2014-0157 A management review was initiated to determine whether a subgrantee properly allocated Homeless Housing Assistance Sub-Grant Agreement funds intended for the construction of transitional housing units. The management review revealed that the subgrantee submitted monthly receipts to the grantee regarding construction costs, which, if approved, were reimbursed, and the grantee submitted a monthly report to the Department’s Office on Homelessness pertaining to the expenditure of the funds by the subgrantee. The subgrantee paid a Site Manager a total of $80,000 for construction costs previously reimbursed by the grantee; however, the Site Manager
subsequently donated the entire amount to the subgrantee. The subgrantee did not notify the grantee that the Site Manager had donated the funds to the subgrantee.

**Corrective Action:** The Office on Homelessness filed a paper copy of the management review in their grant files and an electronic copy in the Office on Homelessness to be maintained for future reference. No further action required.