Mission Statement

The Office of Inspector General’s mission is to promote integrity, accountability, and process improvement. This is accomplished by providing objective, timely, value-added audit and investigative services that examine and evaluate the adequacy and effectiveness of the Florida Department of Veterans’ Affairs internal controls and risk management systems.

Core Values

- **Integrity** – we govern ourselves honestly and ethically.
- **Impartiality** – we conduct our work objectively and independently.
- **Professionalism** – we maintain a staff of skilled professionals.
- **Accountability** – we take responsibility for providing thorough and fair findings and recommendations.

Responsibilities

The specific duties and responsibilities of the Inspector General, according to Florida Statute 20.055, Section (2) include:

- Advise the agency on the development of performance measures, standards and procedures for the evaluation of state agency programs.
- Assess the reliability and validity of the information provided by the Agency on performance measures and standards and make recommendations for improvement, if necessary, prior to submission of those measures and standards to the Executive Office of the Governor.
- Review the actions taken by the Agency to improve program performance, meet program standards and make recommendations for improvement, if necessary.
- Provide direction for, supervision, and coordination of audits, investigations and management reviews relating to the programs and operations of the state agency.
- Conduct, supervise and/or coordinate other activities carried out or financed by the Agency for the purpose of promoting economy and efficiency in the administration of its programs and operations while preventing and detecting potential fraud and abuse.
- Keep the agency Director informed of fraud, abuses, and deficiencies relating to programs and operations administered or financed by the state agency, recommend corrective action for fraud, abuses, and deficiencies and report on the progress made in implementing corrective action.
- Ensure effective coordination and cooperation between the Auditor General, federal auditors, and other governmental bodies with the goal of avoiding duplication.
- Review rules relating to the programs and operations of such state agency and make recommendations concerning their impact.
- Ensure that an appropriate balance is maintained between audit, investigative, and other accountability activities.
The Executive Director of the Florida Department of Veterans’ Affairs (FDVA) appoints the Inspector General with the concurrence of the Governor’s Office of the Chief Inspector General. The Executive Director has the ultimate responsibility for the operation of the Department and for ensuring its goals are met. The Inspector General reports directly to the Executive Director of FDVA.

To carry out its duties and responsibilities, the Office of Inspector General (OIG) is organized into three sections: Audit, Investigation and Veterans Preference. The OIG has a staff of five professional positions. The organizational structure is:

**Office of Inspector General**

**Organizational Chart**

- Inspector General
  - Audit Director
  - Investigator
  - Veterans’ Preference Coordinator
  - Internal Auditor

**Certifications**

- Certifications held by the Inspector General and staffs include:
  - Certified Inspector General - 1
  - Certified Inspector General Auditor – 2
  - Certified Internal Auditor - 1

**Professional Affiliations**

OIG employees are affiliated with:

- Association of Inspectors General
- Institute of Internal Auditors
- Federal Law Enforcement Officers Association

OIG employees stay current with trends in internal auditing and investigations and maintain professional proficiency through membership in the aforementioned professional organizations. The required training hours are met through participation in conferences, webinars, attendance in relevant training, or through continued professional education programs.
Summary of Audit Activities

Internal Audits

The Internal Audit section conducts independent, objective audits and consulting engagements to promote economy and efficiency in administration and operations, and prevent and detect fraud, waste and abuse. Findings and recommendations were communicated to management at reasonable times throughout the audit process. This action resulted in management being able to take corrective action prior to the completion of the audit. Additionally, updates on the status of recommendations were obtained from management at three-month intervals for all open findings. Internal audit activities are conducted in accordance to International Standards for the Professional Practice of Internal Auditing.

Fiscal Year 2018 – 2019 Audits

IA-1805: Donation Trust Fund – Alexander Nininger State Veteran Nursing Home

Objective: The objectives of this audit were to assess the effectiveness of the administration of the Donation Trust Fund, the adequacy of related internal controls, and the appropriateness of Donation Trust Fund reporting. The Donation Program consists of the acceptance, receipt, administration and disposition of monetary and non-cash donations. The activities program is designed, but not limited to, meeting the interests, and physical, mental and psychological well-being of the residents.

Finding #1: The internal controls documentation related to the administration of donations were not always complete.

Recommendation #1.1: Alexander Nininger State Veteran Nursing Home (SVNH) should implement the use of a pre-numbered receipt book and the Homes Program should update FDVA SOP 1105 Gift and Donations and SOP 1105-A Gifts and Donations (Domiciliary) to reflect that requirement, as well as consider creating one SOP for both the Homes and the Domiciliary for Gifts and Donations.

Use of pre-numbered receipts should implement the following guidelines to provide complete accountability of incoming donations:

1. All pre-numbered receipts must be accounted for and in sequence according to number and date.
2. Pre-numbered receipts should at minimum, describe the nature of the donation (cash, check, gift card, items) and/or whether the donation has a value (e.g. $25.00).
3. Errors, such as lost gift cards, lost/voided receipts, or change of sequence from a new receipt book, should be documented with managerial approval. The approval must be from a managerial source outside of the complete transaction process (e.g. does not participate in receipt, recording, or withdrawal).
Finding #2.1: The internal controls documentation related to the administration of donations were not always complete.

Recommendation #2.1:

1. Alexander Nininger SVNH should record the receipt of gift cards on the Log of Gift Card Donations. The purpose would be to have a current, recorded inventory of cards and balances.
2. The Log of Gift Card Donations should reconcile to the information recorded on the pre-numbered receipt when the gift card was first received (pre-numbered receipt number, date, gift card number, amount, type).
3. Alexander Nininger SVNH should consider using electronic (Excel) copies of the Log of Gift Card Donations that are sorted by card type (Walmart, Target, Visa, Publix, etc.), as long as it complies well with chain of custody requirements.

Recommendation #2.2: Alexander Nininger SVNH should ensure all purchases are supported with appropriate documentation including:

1. Vendor receipts to support and reconcile the usage of gift cards (receipt needs identifying information of the gift card used).
2. Chain of custody to document the transfer of the gift cards from the custodian to the user during each purchase and to document the return of the card from the user to the custodian as well as the updated card amounts.

IA-1808: Overtime Review

Objective: The objective of the Overtime audit was to evaluate FDVA’s overtime usage. The audit evaluated the Homes Department to ensure they were using overtime appropriately and efficiently and to see any potential to mitigate overtime usage.

Finding #1: Overtime procedures could benefit from increased productivity processes.

Recommendation #1.1: A more effective method of tracking overtime and its usage through the software program SLING. The SLING program downloads on the users’ phone and allows the Staffing Coordinator to monitor, track, and communicate with the entire staff at the same time, in real time. This allows the Staffing Coordinator to streamline their outreach when there is a call-off. The system sends a message to all staff simultaneously. Additionally, the system time stamps all responses and entries, and tracks hours worked, overtime used and vacation days.

This program can contribute to streamlining the staffing process, including call-out management, (a main overtime contributor) and potentially help mitigate overtime in the homes.

Recommendation #1.2: All homes should have a bi-annual in-service training regarding FDVA’s attendance policy. The in-service should cover, but not be limited to:

1. The details of the FDVA Policy on attendance.
2. Importance of attendance to the patients, their co-workers, and the agency.
3. The direct impact call-offs have on the fiscal budget.
4. Bring to light how serious and impactful call-offs can be.
5. Advise all staff that there is a high level focus on attendance.
IA-1901: Check Issuance

Objective: The objectives of the Check Issuance audit were to evaluate the effectiveness and internal controls of FDVA’s accounts payable and check issuance processes. The audit evaluated the Account Payable Administration to ensure they met reasonable effectiveness and determine if internal controls were present through appropriate segregation of duties.

The audit identified that FDVA currently has procedures in place that appropriately segregate duties to ensure that accounts payable has effective internal controls. Additionally, the error rate of check processing resulting in duplicate warrants in relation to accounts payable volume is reasonable, at less than 0.3% annually. As a result, there are no findings for this audit.

Findings: There were no reportable findings.

IA-1903: Donation Trust Fund - Baldomero Lopez State Veteran Nursing Home

Objective: The objectives of this audit were to assess the effectiveness of the administration of the Donation Trust Fund, the adequacy of related internal controls, and the appropriateness of Donation Trust Fund reporting. The Donation Program consists of the acceptance, receipt, administration and disposition of monetary and non-cash donations. The activities program is designed, but not limited to, meeting the interests, and physical, mental and psychological well-being of the residents.

Findings: There were no reportable findings.

IA-1905: Temporary MatrixCare Accounts Review

Objective: The objectives of this review was to determine the origin of and cause of MatrixCare accounts that were created without individuals tied to them. They were established following Hurricane Michael that made landfall near the Chester Sims SVNH in Panama City, FL. The generic accounts created allowed multiple employees access to MatrixCare under the same username, which does not provide the identification of the actual employee who performed care or services for the residents.

Finding #1: It was determined that MatrixCare accounts were created without individuals tied to them and without a necessary emergency. The accounts were created approximately 11 (eleven) days after the hurricane, and the Information Technology (IT) department was not contacted for assistance.

Recommendation #1:

1. Contact the IT Department who are available 24 hours per day, 7 days per week and can create individual MatrixCare accounts within just a few minutes for the employees from other SVNH’s, without compromising their existing MatrixCare accounts at their permanent Home. For example, Jane Smith from Lopez SVNH is going to temporarily work at Sims SVNH and therefore, will need a MatrixCare account at Sims SVNH. Her MatrixCare account at Lopez is, “SmithJ.” IT can develop a temporary MatrixCare account named, “SP-SmithJ” for Ms. Smith for her time at Sims SVNH and once her support is no longer needed the “SP-SmithJ” account would be deactivated. (Note: Jane Smith’s primary account at Lopez SVNH would be unaffected.)
2. Update the Continuity of Operations Plan/Disaster Recovery Plan to include procedures for temporary MatrixCare account creation at the Homes when it is necessary for employees from other SVNH’s to provide temporary resident care at another Home.

3. Provide additional training on HIPAA and Information Security policies, regarding MatrixCare accounts, to employees with access to MatrixCare account creation functions.

### IA-1906: Contract Management Audit – Capital Improvement Project

**Objective:** The objectives of the Contract Management - Capital Improvement Project (CIP) audit for the Emory Bennett SVNH, Drainage, Irrigation, and Landscaping Improvements contract dated February 2018, were to determine if FDVA is in compliance with applicable contract laws and regulations as it relates to the contract and to evaluate if the responsibilities set forth by the contract are upheld for compliance, deliverables, objectives, and reporting.

The audit identified that FDVA was in compliance with Florida Statutes relating to procurement activities for the contract while also identifying that all current payments are supported with deliverables as required by the contract. Additionally, during this audit it was determined that there were no discrepancies in invoice payments, and accounting entries were completed in accordance with best practices.

**Findings:** There were no reportable findings.

### IA-1908: Veterans’ Claims Examiner Security Wellness

**Objective:** The objectives of this audit were to evaluate the general safety and security of the FDVA VCE’s at FDVA VCE offices. FDVA operates VCE offices around the State of Florida in order to assist veterans with benefit claims. The environment lends itself to the potential for angry responses to benefit results, and provides servicing of claims for veterans who may have PTSD and other military related medical issues. FDVA’s goal is provide the best service for veterans while also providing safest possible working environment for the VCE’s.

**Finding #1:** There is no annual “in-depth” VCE training for verbal de-escalation.

**Recommendation #1:** Provide all VCE’s with an “in-depth” annual training regarding the de-escalation. (I.E. Verbal Judo Course)

**Finding #2:** Some VCE facilities had an in office panic button, while others did not.

**Recommendation #2:** Installation of panic buttons connected to local law enforcement at all FDVA VCE facilities.

**Finding #3:** Some VCE facilities had an in office panic button, while others did not.

**Recommendation #3:** Maintain incident logs at each FDVA VCE location and regularly review them in order to be better prepared when dealing with an “unruly” individual.
Fiscal Year 2018 – 2019 Special Project

**IA-1902: Employee Survey**

The survey measured employees’ perceptions of whether, and to what extent, conditions that characterize successful organizations were present in the FDVA. The purpose of this survey was to assess changes since fiscal year 2017-2018.

The sixty-two (62) item survey included three (3) demographic questions and fifty-nine (59) items that measured FDVA employees’ perceptions about how effectively the agency manages its workforce. The questionnaires were grouped into seven topic areas: Work Experiences, Work Unit, Agency, Supervisor/Team Leader, Leadership, Satisfaction and Demographics. The survey was anonymous and participation was voluntary. There were an estimated 1,076 employees as of December 2018 and 348 employees took the opportunity to complete the survey, a 35% response rate.

The results from the survey indicated that four of the five indices: Talent Management, Job Satisfaction, Results-Oriented Performance Culture, and Global Satisfaction, stayed nearly the same as 2017-2018; while Leadership and Knowledge Management, rose by 3%. Like prior years, the most significant areas of employee satisfaction is related to “The Work I do is Important” and “I Like the Kind of Work I do,” while the most significant area of employee dissatisfaction is related to “Satisfaction of Pay.”

**Remaining Open Audit Findings since Prior Year Annual Report**

**IA-1706: Pharmacy Audit**

**Objective:** To evaluate the adequacy of FDVA’s governance, risk management, and control processes in providing reasonable assurance for the proper use of controlled substances including their physical safeguard and accountability, and to evaluate compliance with contracts related to Pharmacy services provided by the U.S. Department of Veteran Affairs (USDVA). The audit focused on areas previously recommended for improvement during the IA-1607 Pharmacy Audit.

**Finding #1:** Reconciliation of total amounts billed to aggregate invoices is not performed for pharmaceuticals purchased.

**Recommendation #1:** FDVA should request and maintain itemized invoices to support the payment of pharmaceutical services and products. Those invoices should be reconciled to the amounts billed to FDVA in order to provide sufficient back up documentation prior to authorization of payment by the Contract Manager.
**Objective:** The objectives of the Medicaid Bed Hold Billing audit were to evaluate the adequacy of FDVA’s governance, risk management, and control processes in providing reasonable assurance for the proper billing, resident accounting, and collections of Medicaid Bed Hold funding. The audit includes the fiscal accountability, evaluation of contract compliance related to state and federal regulations, and FDVA’s policies and standard operating procedures.

**Finding #3:** FDVA State Veterans’ Nursing Homes did not update the Document Scanning Standard Operating Procedure in a timely manner to ensure compliance with system changes.

**Recommendation #3:** The Homes Program should ensure that Standard Operating Procedures are updated to account for changes in the industry, FDVA standards, system changes, and as required by FDVA procedures and state and federal laws.

**Objective:** The objectives of the Information Technology Hardware Governance audit were to evaluate the adequacy of the FDVA’s governance, risk management, and control processes in providing reasonable assurance for processes related to Information Technology (IT) hardware device management. The audit evaluated if the governance in place through policies and standard operating procedures follows the guidelines of the Critical Security Controls established by the Council on Cyber Security and supported by the guidelines set forth by the National Institute and Technology in order to reduce risk with hardware devices that interact with the FDVA network.

**Finding #1:** Alert monitoring and monitoring policies for unauthorized device connection and McAfee e-policy could use improvement.

**Recommendation #1.1:** FDVA’s IT department should consider options to either make the process more efficient or grant the necessary resources needed to implement and make effective monitoring procedures relating to McAfee Rogue Alert.

**Recommendation #1.2:** FDVA’s IT department should develop standard operating procedures that contain responsible parties and benchmarks for the monitoring activities related to McAfee Rogue Alert and McAfee e-Policy software.

**Finding #2:** Policies and documentation for change management and disposal procedures are lacking for the IT department and IT hardware.

**Recommendation #2.1:** FDVA’s IT department should 1) ensure current documentation for logical network configurations is maintained, 2) develop policies regarding IT hardware sanitization that outline processes, responsible parties, and applicable control processes in place, and 3) create change management policies that include responsible parties and procedures for tracking changes over time, and back-out plans.
Objective: The objective of the Overtime audit was to evaluate FDVA’s overtime usage. The audit evaluated the Homes Department to ensure they were using overtime appropriately and efficiently and to see any potential to mitigate overtime usage.

Finding #1: Overtime procedures could benefit from increased productivity processes.

Recommendation #1.1: A more effective method of tracking overtime and its usage through the software program SLING. The SLING program downloads on the users’ phone and allows the Staffing Coordinator to monitor, track, and communicate with the entire staff at the same time, in real time. This allows the Staffing Coordinator to streamline their outreach when there is a call-off. The system sends a message to all staff simultaneously. Additionally, the system time stamps all responses and entries, and tracks hours worked, overtime used and vacation days.

This program can contribute to streamlining the staffing process, including call-out management, a main overtime contributor, and potentially help mitigate overtime in the homes.

Recommendation #1.2: All homes should have a Bi-annual in-service training regarding the Florida Department of Veterans affairs attendance policy. The in-service should cover, but not limited to:

1. The details of the FDVA Policy on attendance.
2. Importance of attendance to the patients, their co-workers, and the agency.
3. The direct impact call-offs have on the fiscal budget.
4. Bring to light how serious and impactful call-offs can be.
5. Advise all staff that there is a high level focus on attendance.

Fiscal Year 2018 – 2019, External Audit Liaison Activities

In accordance with 20.055(1), Florida Statutes, the FDVA OIG served as liaison to:

- Department of Financial Services Contract Monitoring Review, 2018
- Department of Financial Services License Plate Trust Review, 2018
- Auditor General IG Quality Assessment Review, 2018

Fiscal Year 2019 – 2020 Audit Plan

Section 20.055(5) (h), Florida Statutes, requires that annual audit plans be developed based on the findings of periodic risk assessments. This ensures that the OIG is responsive to management concerns and that those activities with the greatest risks are identified and scheduled for review. The top priorities for audits have been identified based on the results of a risk assessment and are included in the audit plan. The Executive Director approved the audit plan for Fiscal Year 2019 – 2020 on August 9, 2019. Planned audits include:

IT General Controls
FDVA has an agency wide network to facilitate its operations. The network uses various features including virtual protocol networks for offsite work, servers for the storage and backup of agency data, various hardware including printers and mobile devices, and standard system configurations to provide security and integrity of data. The objective of the audit would be to evaluate if controls are in place to monitor, record, safeguard, and maintain only authorized
software that are used within agency network. In addition, the audit will review access and configuration controls as necessary.

**Inventory Control**
FDVA maintains an inventory of medical supplies at each nursing home. This system is used to issue medical supplies from the Central Storeroom, dispense items to residents and record the chargeable items to resident accounts. Managing the acquisition, storage and distribution of inventory is critical to controlling costs, operational efficiency, and mission readiness. The audit will focus on controls for receiving, inventory processes, reconciliation, dispense to use, and disposition.

**Agency Staffing**
FDVA is in an almost constant state of hiring, particularly for direct-care positions; and has a high turnover rate, particularly with new employees. The audit will focus on potential issues related to hiring and retention; turnover costs to the agency; issues with overtime as a result of turnover; and efficiencies in staffing, scheduling, and hiring in the Homes.

**Florida Veterans Foundation Controls**
The Florida Veterans Foundation was established by the Florida Legislature in 2008 as a direct support organization for FDVA. FDVA leadership works closely with the Florida Veterans Foundation who assesses and assists in providing educational and outreach programs for Florida veterans. The Florida Veterans Foundation is funded through donations and grants from outside organizations. The audit aims to assist the foundation in assessing its organization wide internal controls.

**Contract Management**
FDVA is committed to making capital improvements to the State Veterans’ Nursing Homes yearly and opening new long-term care facilities within the State of Florida. FDVA also maintains several long term contracts to provide specialized and routine services for the Homes such as therapy and housekeeping. The audit will evaluate the effectiveness of contract activities including contract monitoring, reporting, certifying all services are rendered, invoices are reconciled, compliance, and other contract related duties.

**Resident Trust**
Given the vulnerability of residents in FDVA Homes and Domiciliary, it is important that those residents have adequate assurance of proper accountability of funds collected and the management of their funds. We propose to continue to evaluate overall internal controls on the processes for accepting, distributing, and accounting of the Resident Trust Fund.

**Donation Trust Fund**
The State Veterans’ Homes and Domiciliary may receive and accept gifts, grants, and endowments in the name of the Homes and Domiciliary. The Administrator and the Director determine how the donation could best benefit the Homes, Domiciliary, and its residents unless the benefactor requests or instructs usage for a specific purpose. The audit will continue to evaluate overall internal controls on the processes for accepting, distributing, and accounting of the donation.
Summary of Investigative Activities

Investigations

Investigations are initiated to deter, prevent and eradicate fraud, waste, mismanagement, misconduct, and other abuses. The FDVA Office of the Inspector General (OIG) intakes and logs every inquiry, complaint, and referral which are received in many forms including email, telephone, letter, walk-in, the Chief Inspector General’s Office, and other Federal, State, and City agencies. The OIG evaluates the provided information and makes a determination to initiate an investigation, or opt for an alternate form of resolution described as follows:

- **Inspector General Investigation**: When the information received indicates that an FDVA employee or contractor may have violated FDVA’s policies; or has potentially committed a violation of law. Results of investigated allegations are reported to the FDVA Executive Director, Deputy Executive Director and the affected areas top manager.

- **Referral to Management**: When the information received indicates some type of misconduct, malfeasance, misfeasance or conflict on the part of, or between, FDVA employees or contractors where an initial determination has been made that a violation of FDVA policies was not committed and an Inspector General investigation is not warranted. The OIG may assist in the resolution if necessary.

- **Referral to Another Agency**: When the information received regards an agency other than the FDVA, the OIG refers the information to that agencies OIG.

- **External Assistance or Monitor**: When another agency is conducting an investigation into activities affecting the FDVA, or its employees or residents and requests assistance from the FDVA OIG to facilitate their investigation; or when the FDVA OIG requests assistance from another agency (including law enforcement) regarding activities affecting the FDVA, its employees or residents.

- **No Action**: When the OIG is able to come to a resolution with a complainant, or satisfactorily solve a particular issue without any further action.

**Fiscal Year 2018 – 2019 Investigations**

During the fiscal year, the OIG received seventy-nine (79) inquiries. Of the seventy-nine (79) inquiries forty-three (43) were referred to management, two (2) were referred to another agency and twelve (12) were resolved at the initial complaint stage and did not require any further action. Twenty-two (22) inquiries resulted in investigations. Some investigations involved a single allegation, while others involved multiple allegations for a total of thirty-six (36) allegations. Each allegation results in one of the following investigative findings:

- **Sustained** - by the preponderance of the evidence (>50%) the complaint occurred as alleged.
- **Unfounded** - by the preponderance of the evidence (>50%) the complaint did not occur as alleged.
- **Not Sustained** - there is insufficient evidence to determine if the complaint occurred as alleged.
- **Exonerated** – the complaint occurred as alleged and was justified.
The findings of the thirty-six (36) allegations investigated were as follows:

- Sustained – Nineteen (19)
- Unfounded – Fourteen (14)
- Not Sustained – Two (2)
- Exonerated – One (1)

The following is a summary of investigations resulting in sustained findings:

**OIG-2019-002**

An FDVA supervisor yelled at an employee in an unprofessional manner and invaded their personal space in the presence of other FDVA employees. The supervisor later resigned their position.

**OIG-2019-004**

An FDVA employee was utilizing their Florida State purchase card to secure rental vehicles for personal use. Upon return of the vehicles, the employee would supply their personal credit card to pay for the rental; however, the employee avoided the sales tax by originally securing the vehicle using the State of Florida purchase card. The employee was warned of this practice on a prior occasion, but continued to rent personal vehicles in this manner. The employee resigned their position.

**OIG-2019-007**

An FDVA employee was insubordinate to their supervisor. The employee acknowledged that they have difficulty getting along with others and on their own accord agreed to seek counseling to help them assimilate better with others.

**OIG-2019-010**

An FDVA employee placed a hidden video camera in a bathroom of an FDVA facility. The employee also engaged in sexual harassment within FDVA. The employee was subsequently terminated.

**OIG-2019-012**

An FDVA supervisor yelled at an employee in an unprofessional, threatening and demeaning manner in the presence of other FDVA employees. Management educated the supervisor on appropriate conduct with employees.

**OIG-2019-013**

An FDVA employee had an inappropriate relationship with a resident of an FDVA State Veteran Nursing Home (SVNH). The employee also received monies from the resident. FDVA maintains strict policies precluding any type of personal relationship, including the receipt of monies or items of value, between FDVA employees and SVNH residents. The employee resigned their position.

**OIG-2019-015**

An FDVA supervisor failed to notify the OIG of a racial discrimination complaint per FDVA policy. The supervisor also provided an inappropriate solution to the racial discrimination complaint and made an inappropriate hand gesture in the presence of two FDVA employees. Management re-educated the supervisor regarding FDVA policies related to racial discrimination complaints.
An FDVA employee falsified both a Doctor’s note as well an application for extended leave under the Family Supportive Work Program to cover days in which the employee did not show up for work. The employee resigned their position.

An FDVA employee was providing erroneous information to veterans regarding another veteran service organization. The employee also engaged in speech and demeanor that was inappropriate in the workplace. Lastly, the employee recorded conversations with their supervisor, without the supervisor’s knowledge or consent. The employee was terminated.

Four (4) FDVA employees worked in concert claiming overtime hours, for which they were compensated, but did not work, over an extended period of time. One employee, upon learning of the investigation, left their position without notifying anyone at FDVA and did not return. The other three employees were terminated.

### Other Significant Investigative Activities

Each year the OIG conducts random “Whole Home Reviews” of the FDVA State Veteran Nursing Homes (SVNH). In March, the OIG conducted a “Whole Home Review” at the Douglas Jacobson SVNH in Port Charlotte, FL. The review consists of several “open forum” group meetings open to all employees of the Home. Additionally, any employee is able to schedule a one-on-one meeting with the OIG to discuss any topic(s) of their choice regarding the Home. The employees are encouraged to provide ideas they believe may effectuate positive changes within the Home. During the Jacobson SVHN review, approximately fifty (50) employees met with the OIG during the open forum meetings and/or one-on-one. Almost all employees had a positive view of the Home regarding the care being provided to the Veteran residents. Most also expressed a positive view of the abilities of the management team and felt, in general, they listen to employees, however few or no changes actually occur. The nursing staff in particular felt they work well together and feel like a family.

The most significant staff concern is the lack of competitive pay. Pay has been the number one consistent issue within FDVA for several years and Jacobson SVNH is no exception. It’s been well documented that FDVA’s nursing staff pay in particular is significantly trailing not just comparable private sector positions, but also, in many instances, entry-level fast food jobs in the area. The Home, over time, has consistently experienced difficulty hiring staff that contributes to difficulty in scheduling which results in nursing staff, particularly C.N.A.s working three weekends per month, not able to utilize their annual leave and comp time when desired and a high turnover rate. Despite a significant shortfall of employees, the Home continues to provide a high level of care through the extraordinary efforts of the staff.
Summary of Veterans’ Preference Activities

FDVA is charged with investigating complaints from Veterans who believe that they were not properly afforded their Veterans’ Preference benefit during the application and hiring process for eligible Florida State Agencies and political subdivisions positions as authorized by Florida Statute Chapter 295.

The OIG Veteran Preference Coordinator evaluates information provided to them by the complainant and makes a determination whether to initiate an investigation, or opt for an alternate form of resolution. If an investigation is necessary, the Veterans’ Preference Coordinator issues an opinion as whether the complaint has or lacks merit.

During the fiscal year, the OIG received ninety-four (94) Veterans’ Preference complaints. Of the ninety-four (94) complaints, fifty-three (53) were resolved without investigation. The remaining forty-one (41) complaints were investigated resulting in twelve (12) that had merit and twenty-nine (29) that lacked merit. In either case both the veteran and the hiring agency are notified of the results of the investigation. Where an investigation has merit, the hiring agency has the opportunity to offer a resolution to the aggrieved veteran and if the parties cannot agree on a resolution or the hiring agency does not offer one, the veteran may file a complaint with the Public Employees Relations Commission (PERC).

Additionally, in FY 2018 - 2019, the Veterans’ Preference Coordinator conducted twenty-seven (27) trainings to Florida State Agencies and political subdivisions.

Finally, during FY 2018-2019, the Veterans’ Preference Coordinator recommended significant updates regarding Veterans’ Preference to Florida’s Administrative Code 55A-7. The recommended changes were fully accepted and incorporated into the Florida’s Administrative Code on July 21, 2019. These changes bring clarity to employers and veterans to better understand Florida law as it relates to Veterans’ Preference and its application during the hiring, promotion, and retention process. The changes are expected to result in a reduction in the amount of complaints received and trainings needed for employers around the state.

Contacting the Office of Inspectors General

Contact us when you believe …

- As an FDVA employee, you believe you are being harassed, discriminated against, retaliated against, or working in a hostile work environment.
- Someone may be engaging in wasteful, inefficient or the illegal use of FDVA resources.
- Someone may be using FDVA property for personal gain.
- Someone may be intentionally misleading FDVA for financial gain.
- Someone at FDVA may be receiving a benefit to “look the other way.”
How to Contact Us

📞 Telephone - (727) 518-3202, Extension 5570
🚶‍♂️ Mail/Walk In - 11351 Ulmerton Rd, Largo, FL 33778
✉️ E-Mail - MarzulloD@fdva.state.fl.us
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