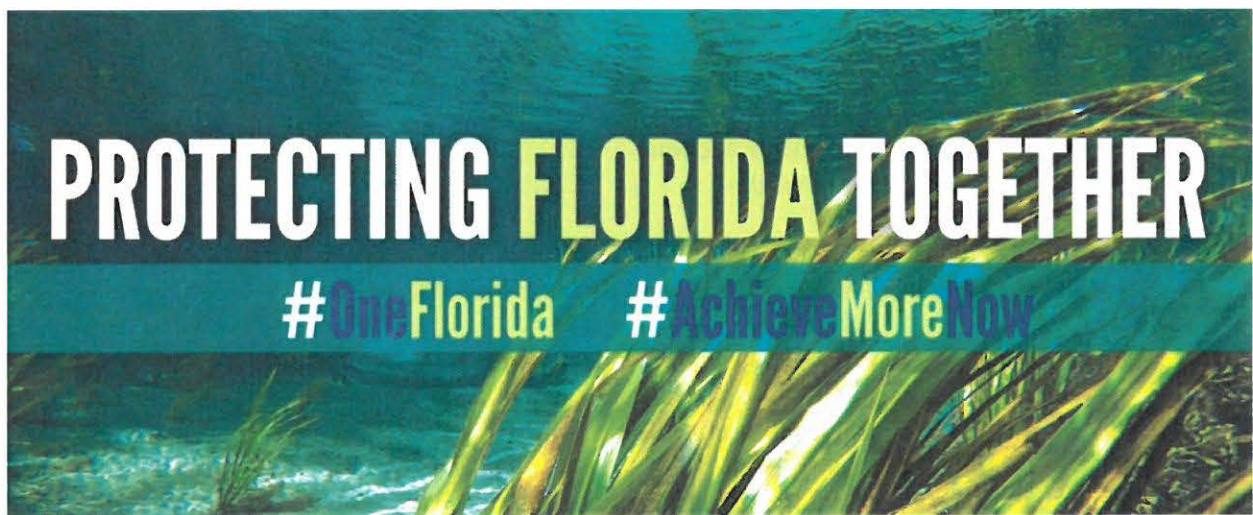


Department of Environmental Protection
Office of Inspector General



Annual Report
Fiscal Year 2019-2020

Candie M. Fuller
Inspector General

Noah Valenstein
Secretary



FLORIDA DEPARTMENT OF Environmental Protection

Marjory Stoneman Douglas Building
3900 Commonwealth Boulevard
Tallahassee, FL 32399

Ron DeSantis
Governor

Jeanette Nuñez
Lt. Governor

Noah Valenstein
Secretary

September 25, 2020

Melinda Miguel, Chief Inspector General
Executive Office of the Governor
The Capitol
Tallahassee, FL 32399-0001

Noah Valenstein, Secretary
Department of Environmental Protection
3900 Commonwealth Boulevard
Tallahassee, FL 32399-3000

Dear Chief Inspector General Miguel and Secretary Valenstein:

I am pleased to present the Office of Inspector General's Annual Report for Fiscal Year 2019-2020. This report, which was prepared in accordance with Section 20.055(8), Florida Statutes, summarizes the activities performed by the Office of Inspector General based on its statutory responsibilities. This report highlights the accomplishments, findings, and recommendations of significant audit and investigative activities completed during Fiscal Year 2019-2020.

On behalf of the Office of Inspector General staff, I would like to thank you for your continued support, as well as all Department Managers and staff for their assistance and cooperation throughout the year.

The Office of Inspector General remains committed to promoting efficiency, accountability and integrity and in our efforts to detect and prevent fraud, waste, abuse, and mismanagement in Department Programs.

Sincerely,

A handwritten signature in blue ink that reads "Candie M. Fuller".

Candie M. Fuller
Inspector General

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EXECUTIVE SUMMARY

In accordance with Section 20.055(8), Florida Statutes (F.S.), the Office of Inspector General (OIG) is required to complete an annual report by September 30th each year, summarizing the activities of the office during the prior fiscal year. Consistent with these duties, the following activities demonstrate significant efforts of the Department of Environmental Protection (Department) OIG staff during Fiscal Year (FY) 2019-2020.

- ❖ Conducted 11 Audits containing 59 recommendations, which were agreed to by management.
- ❖ Conducted 7 Management Reviews containing 16 recommendations, which were agreed to by management.
- ❖ Performed liaison and coordination activities for three external audits.
- ❖ Reviewed and processed 386 Single Audit Reports.
- ❖ Opened 128 investigative cases.
- ❖ Closed 125 investigative cases, with 24 of those cases containing Sustained allegations.
- ❖ Assisted the Office of the Chief Inspector General with projects.

DEPARTMENT BACKGROUND

The Florida Department of Environmental Protection is the state's lead agency for environmental management and stewardship, protecting our air, water and land. The Department is one of the more diverse agencies in State government with more than 3,400 Department employees serving the people of Florida. The Department's mission is, *to protect, conserve and manage the state's natural resources and enforce its environmental laws*. The Department's vision is, *to advance Florida's position as a world leader in protecting natural resources while growing the state's economy*. The Department's values are leadership, integrity, accountability, communication, innovation and service.



PURPOSE OF ANNUAL REPORT

This report, required by Section 20.055(8), F.S., summarizes the activities and accomplishments of the OIG, during FY 2019-2020. This report includes, but is not limited to the following:

- ❖ A description of activities relating to the development, assessment, and validation of performance measures.
- ❖ A description of significant abuses and deficiencies relating to the administration of the Department's Programs and operations disclosed by investigations, audits, reviews, or other activities during the reporting period.
- ❖ A description of the recommendations for corrective action made by the OIG during the reporting period, with respect to significant problems, abuses, or deficiencies identified.
- ❖ The identification of each significant recommendation described in previous annual reports of which corrective action has not been completed.
- ❖ A summary of each audit and investigation completed during the reporting period.

MISSION STATEMENT

The mission of the OIG is to promote accountability, integrity, and efficiency within the Department. The OIG conducts independent and objective audits, reviews and investigations of Department issues and Programs, in order to assist in protecting, conserving, and managing Florida's environmental and natural resources. Audits, reviews and investigations are informative, logical, supported, and timely regarding issues and matters of importance to the Department.

DUTIES AND RESPONSIBILITIES OF THE INSPECTOR GENERAL

Per Section 20.055(2), F.S., the Office of Inspector General is established in each State agency to provide a central point for coordination of and responsibility for activities that promote

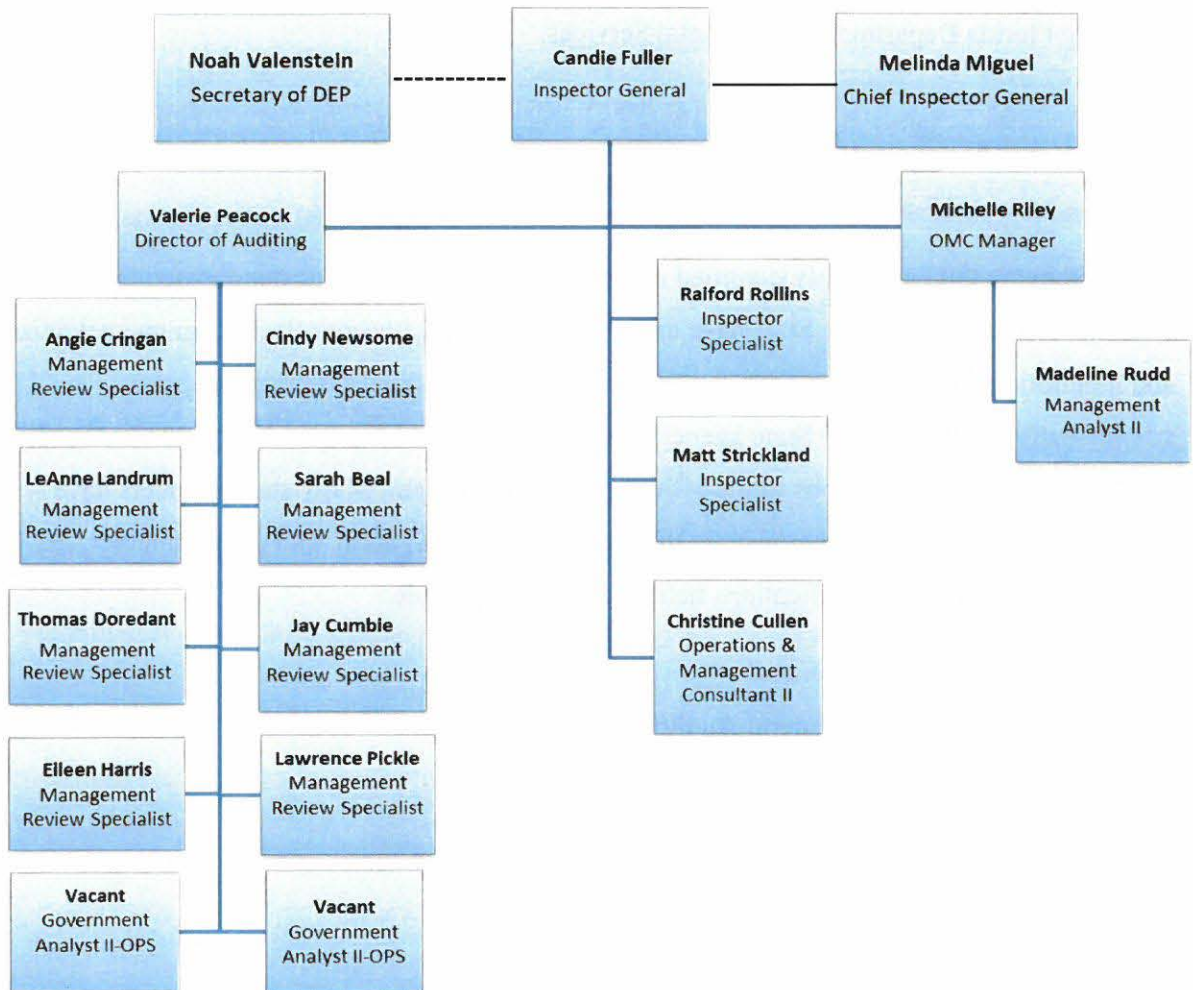
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accountability, integrity, and efficiency in government. It is the duty and responsibility of each Inspector General to:

- ❖ Advise in the development of performance measures, standards, and procedures for evaluating Department Programs, assess the reliability and validity of performance measures, and make recommendations for improvement.
- ❖ Review the actions taken by the Department to improve Program performance and meet Program standards, while making recommendations for improvement, if necessary.
- ❖ Provide direction for, supervise, and coordinate audits, investigations, and management reviews relating to the Department's operations.
- ❖ Conduct, supervise, and coordinate other activities to promote economy and efficiency and activities designed to prevent and detect fraud and abuse in the Department.
- ❖ Keep the Secretary and Chief Inspector General informed concerning fraud, waste, abuse and deficiencies in Programs and operations, recommend corrective action, and provide progress reports.
- ❖ Ensure effective coordination and cooperation between the Auditor General, Federal auditors and other governmental bodies, with a view toward avoiding duplication.
- ❖ Review Department rules and make recommendations relating to their impact.
- ❖ Ensure that an appropriate balance is maintained between audits, investigations, and other accountability activities.
- ❖ Comply with the General Principles and Standards for Offices of Inspector General, as published and revised by the Association of Inspectors General.

ORGANIZATIONAL CHART

The OIG is under the Direction of the Inspector General, who per Section 20.055, F.S., is under the general supervision of the Department’s Secretary and reports to the Chief Inspector General. As of June 30, 2020, the OIG consisted of seventeen budgeted positions. This included fifteen full-time employees and two Other Personal Services (OPS) positions. The distribution of the OIG positions is described in the below chart:



PROFESSIONAL DEVELOPMENT

During FY 2019-2020, staff received the benefit from trainings which included, cybersecurity & technology, advancing accountability, contract and grant management, ethics, fraud detection, information technology change management, risk management, and other audit and investigative related trainings. These opportunities were afforded through trainings sponsored by the Institute of Internal Auditors, Association of Inspectors General, Association of Certified Fraud Examiners, Information Systems Audit and Control Association, and various State agencies, including Florida Department of Financial Services.

PROFESSIONAL QUALIFICATIONS AND AFFILIATIONS

Staff within the OIG are highly qualified and bring a diversity of background experience and expertise to the Department. Staff have experience in auditing, accounting, Program evaluation and monitoring, budgeting, personnel management, investigations, contract and grant administration, and local and State agencies' activities. OIG staff continually seek to enhance their abilities and contributions to the office and the Department. Many staff members have obtained certifications that demonstrate their knowledge, motivation, and commitment to the profession. Professional certifications held by OIG staff include:

- ❖ Certified Inspector General
- ❖ Certified Inspector General Auditor
- ❖ Certified Inspector General Investigator
- ❖ Certified Internal Auditor
- ❖ Certified Fraud Examiner
- ❖ Certification in Risk Management Assurance
- ❖ Florida Certified Contract Manager
- ❖ Certified Internal Investigation Administrator

The OIG is affiliated with the following professional organizations:

- ❖ Association of Certified Fraud Examiners
- ❖ Institute of Internal Auditors

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- ❖ National Association of Inspectors General
- ❖ Florida Chapter of the Association of Inspectors General
- ❖ Association of Government Accountants
- ❖ Commission for Florida Law Enforcement Accreditation

INTERNAL AUDIT SECTION

The authority of the Internal Audit Section is established under Section 20.055, F.S., the Internal Audit Charter, and Department Administrative Policy ADM 260. The responsibility of the Internal Audit Section is to promote accountability, integrity, and efficiency within the Department. The Inspector General reports to the Chief Inspector General and maintains organizational independence of the internal audit activity. The purpose of the Internal Audit Section is to perform independent audits, reviews, and examinations to identify, report, and recommend corrective action for control deficiencies or non-compliance with laws, directives, policies, or agreements. Internal controls are evaluated as necessary to assist with Department fiscal accountability.

The Director of Auditing coordinates the development of an Annual Audit Plan, which identifies areas within the Department scheduled for review, using risk assessment criteria. Both a long-range plan and a one-year plan are included in the Annual Audit Plan. In the development of the Annual Audit Plan, the Internal Audit Section conducts a risk assessment to identify issues of concern to management, risks pertaining to fraud and misuse of funds, and other governance issues including information technology, ethical climate, and proper financial and performance reporting. The FY 2020-2021 Annual Audit Plan includes projects pertaining to Information Technology, Water Restoration Assistance, Environmental Assessment and Restoration, Resilience and Coastal Protection, Water Policy and Ecosystems, Recreation and Parks, State Lands, Waste Management, and Air Resource Management. Additionally, administrative functions, and participation in multi-agency Enterprise-wide audit projects were included in the Annual Audit Plan. The Department's Inspector General and Secretary approved the FY 2020-2021 Annual Audit Plan.

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Audits are conducted in conformance with the Code of Ethics and the *International Standards for the Professional Practice of Internal Auditing* (Standards), published by the Institute of Internal Auditors. Where appropriate, the Internal Audit Section adheres to the standards developed by the Comptroller General of the United States and codified in the *Government Auditing Standards*. Financial-related audits may be subject to the standards promulgated by the American Institute of Certified Public Accountants, which is referred to as *Generally Accepted Auditing Procedures and Generally Accepted Auditing Standards*. Audit reports issued by the Internal Audit Section contain a statement that the audit was conducted pursuant to the appropriate standards. These reports are prepared and distributed to senior management, other applicable Departmental management, the Auditor General and the Chief Inspector General.

The Internal Audit Section provides a variety of services in addition to audits. These include, but are not limited to, investigative assistance, reviews, research, technical assistance, management advisory and performance measure assessments. Services provided are tracked with a project number and culminate in a written product, which is disseminated to the Program area and other appropriate parties.

In addition, the Internal Audit Section assists the Department by coordinating audits and reviews of reports completed by the Office of Program Policy Analysis and Government Accountability, the Auditor General, and other oversight agencies. The Internal Audit Section reports on the status of the recommendations included in these reports, as required by Section 20.055, F.S.

QUALITY ASSURANCE AND IMPROVEMENT PROGRAM

The Internal Audit Section has established quality assurance processes in conformance with the Standards. This includes both internal and external quality assurance assessments of internal audit activities. Ongoing monitoring is an integral part of the supervision, review, and measurement of internal audit activities. Continuous monitoring activities have been established through engagement planning, supervision, and review, as well as standardized procedures and approvals. An internal assessment of the Internal Audit Section is conducted by the Audit Director annually. The internal assessment is submitted to the Inspector General for review and

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approval. An external assessment of the Internal Audit Section is conducted by the Auditor General in accordance with Section 11.45(2)(i), F.S., once every three years.

The OIG conducted an internal assessment of the Internal Audit Section activities during Fiscal Year 2019-2020 to evaluate conformance with the Code of Ethics and the Standards. An update to the Standards was published by the Institute of Internal Auditors as of January 2017. Our procedures and internal audit activities were updated consistent with the January 2017 revision. Based on the internal assessment results, during Fiscal Year 2019-2020, the Internal Audit Section has fully implemented requirements specified under the Standards.

The most recent external Quality Assurance Review of the Internal Audit Section by the Auditor General was conducted October 2018 (Report 2019-035). The reported results stated, *In our opinion, the quality assurance program related to the Department of Environmental Protection, Office of Inspector General's internal audit activity was adequately designed and complied with during the review period July 2017 through June 2018 to provide reasonable assurance of conformance to applicable professional auditing standards and the Code of Ethics issued by the Institute of Internal Auditors. Also, the Office of Inspector General generally complied with those provisions of Section 20.055, Florida Statutes, governing the operation of State agencies' offices of inspectors general internal audit activities.*

FEDERAL AND STATE SINGLE AUDIT ACT RESPONSIBILITIES

The Department provides funding and resources from State and Federal funding sources to Florida Counties, Cities, Towns, Districts, and many other non-profit organizations within the State. Because of the Department's relationship with these entities, the OIG provided technical assistance to support and improve the operations of those entities. Section 215.97, F.S., states, *each non-State entity that expends a total amount of State financial assistance equal to or in excess of \$750,000 in any fiscal year, of such non-State entity shall be required to have a State single audit, or a project-specific audit, for such fiscal year in accordance with the requirements of this Section.* The Catalog of State Financial Assistance includes for each listed State project: the responsible State agency, standard State project number identifier, official title, legal authorization, and description of the State project, including objectives, restrictions, application,

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and awarding procedures, and other relevant information determined necessary. Federal pass-through grants administered by the Department are subject to Office of Management and Budget 2 CFR 200, subpart F requirements, provided the entity has expended \$750,000 in Federal financial assistance in its fiscal year. Each year, the OIG reviews single audit reports submitted by entities that meet the requirements listed in Florida Statutes, as well as the audit requirements listed in the 2 CFR 200. During FY 2019-2020, our office reviewed 386 single audit reports.

AUDIT WORK PLANS AND RISK ASSESSMENTS

The OIG conducts an annual risk assessment in the development of the Annual Audit Plan. This assessment is based on Program responsibilities, key areas of risk, budgets, management of contracts and grants, past audit activity, staffing levels, and internal control structure.

Discussions are held with Department leadership team members, Division Directors, and other management staff to identify areas of risk and concern to managers. In conducting the risk assessment, the OIG evaluates risk factors of Department Programs and functions to assess the associated risks of operating those Programs and functions. Factors considered in the assessment include:

- ❖ Value of the financial resources applicable to the Program or function;
- ❖ Dollar amount of Program expenditures;
- ❖ Statutes, rules, internal controls, procedures, and monitoring tools applicable to the Program or function, concerns of management, impact on the public safety, health, and welfare;
- ❖ Complexity and/or volume of activity in the Program or function;
- ❖ Previous audits performed; and
- ❖ Identified areas of internal control concern or susceptibility to fraud.

Program and function areas of risk are evaluated based upon these factors, then prioritized to determine the most efficient audit schedule, given the resources available.

PRIOR YEARS AUDIT FOLLOW UP

The OIG monitored the implementation of prior audit findings six months after completion and biannually as necessary to resolution. Of the 30 internal projects reported in the FY 2017-2018 Annual Report, 21 had recommendations that were fully implemented as of the end of FY 2018-2019 and seven had no recommendations. Two projects had recommendations in which corrective action was being monitored as of the end of FY 2019-2020. Of the 28 internal projects reported in the FY 2018-2019 Annual Report, 16 had recommendations that were fully implemented as of the end of FY 2019-2020 and seven had no recommendations. Five projects had recommendations in which corrective action was being monitored as of the end of FY 2019-2020. The projects are listed below:

A-1718DEP-019 Audit of Lease Agreement with Miami Dade County and Florida International University for Coconut Grove Playhouse Property

Recommendations:

We recommended the Department take necessary steps to enforce the terms of the Lease with respect to the County’s failure to adhere to the timetable set forth in the Business Plan under Paragraph 40.A, Special Conditions of the Lease, in order to ensure the Property is managed consistent with the original management concept included in the approved Business Plan.

Actions Taken:

The Division of State Lands is working with Miami Dade County (County) and Office of General Counsel to pursue a remedy. The Division notified the County of violation of the terms of the Lease, which constituted a breach of covenants, terms, and conditions. To evaluate the County’s final completion date of the Playhouse, as well as the County’s ability to cure the breach of the Lease, the Division requested a detailed development schedule, which was provided. The City of Miami’s (City) Historic Preservation Board voted against the County’s plan for the property on March 5, 2019. The City granted an appeal, which was vetoed by the Mayor. The Division requested an updated schedule, which was provided by the County. The City filed a motion to dismiss for lack of jurisdiction and a request for oral argument on the motion. The County is preparing a response, but also continuing to work on the project.

A-1718DEP-035 Review of Permit Agreement STSEP-2016 with Coin-O-Matic, Inc., at John Pennekamp Coral Reef State Park

Recommendations:

We recommended the Division of Recreation and Parks (Division) amend Permit Agreement STSEP-2016 (Permit) to reflect requirements specifically applicable to the coin laundry services provided. This should include requirements regarding collections, reporting, payments, and refunds. The Permit should also reflect the Division's expected level of service and associated financial consequences. The Division should discontinue the inclusion of concession Minimum Accounting Requirements that do not apply to the services provided. Going forward, we recommended the Division ensure that John Pennekamp Coral Reef State Park (Park) management provides effective oversight and documentation of collections and commission payments and assessment of late fees where applicable.

Actions Taken:

The Permit expired and was not renewed. The Division amended the Concession Agreement with the Park's current Concessionaire to include coin laundry services.

A-1718DEP-005 Audit of Contract GC726 with Ecology & Environment, Inc.

Recommendations:

We recommended the Division of Waste Management (Division) revise the Scope of Services and Performance Criteria. This revision should incorporate performance metrics, incentives, and retainage specific to the Ecology & Environment, Inc.'s (Contractor) expectations to promote accountability for efficient site cleanup and effective performance in all areas of the Contractor's responsibility.

Actions Taken:

The Division executed a new Contract on June 4, 2020. The first Task Assignment issued under the new Contract contained performance metrics, incentives, and retainage specific to the Contractor's responsibilities.

A-1718DEP-008 Audit of Contract GC725 with Northstar Contracting Group, Inc.

Recommendations:

We recommended the Division of Waste Management (Division) revise the Scope of Services and Performance Criteria. This revision should incorporate performance metrics, incentives, and

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retainage specific to Northstar Contracting Group, Inc.'s (Contractor) expectations to promote accountability for efficient site cleanup and effective performance in all areas of the Contractor's responsibility.

Actions Taken:

The Division executed a new Contract on June 3, 2020. The first Task Assignment issued under the new Contract contained performance metrics, incentives, and retainage specific to the Contractor's responsibilities.

A-1819DEP-013 Review of Wireless Services Usage Certifications for Department Issued Cell Phones

Recommendations:

We recommended the Division of Administrative Services (Division) work with Department Directors to develop procedures to monitor cell phone use. These procedures should reflect processes that require employees with Department issued cell phones to complete the required Wireless Services Usage Certification Form, DEP 53-615, each month charges are billed. These procedures should also establish a process by which completed certifications are maintained to document compliance with personal use policies. The Division should obtain certification of these procedures on an annual basis, as required under DEP Directive 820. We also recommended the Division take steps to improve communications with Department Program representatives designated to coordinate communication activities. Lastly, the Division should ensure that detailed statements of cell phone charges are provided to each Department Program for review for all cell phones assigned.

Actions Taken:

The Division is replacing DEP Directive 820 with an Administrative Procedure for Communications Equipment and Services. This Procedure is being developed to improve staff supervision, communication, and tracking of cell phone use. The Division also updated the Wireless Services Usage Certification Form, DEP 53-615 and will retain cell phone usage documentation in OCULUS and provide training to designated representatives.

A-1819DEP-014 Audit of Agreement MY-0310 with Kelly Ranch, Inc. at Amelia Island State Park

Recommendations:

We recommended the Division of Recreation & Parks (Division) work with the Concessionaire to ensure daily sales are deposited as required under the Minimum Accounting Requirements.

Actions Taken:

The Division is working with the Concessionaire to ensure cash deposit requirements are followed as required.

A-1819DEP-017 Audit of Contract GC927 with Lee County for Storage Tank Compliance Inspection Services

Recommendations:

We recommended the Division of Waste Management (Division) ensure that Lee County (County) documents inspection activities and demonstrates performance as required under the Contract. If there is an indication that inspection activities are not being documented or performed as required, the Division should request that a Corrective Action Plan be submitted by the County and withhold invoices until such actions are demonstrated to the satisfaction of the District's Task Manager.

Actions Taken:

The County submitted a Corrective Action Plan to the Division on March 4, 2020. The Division is working with the County to improve their performance as required under the Contract.

PERFORMANCE MEASURES

In accordance with Section 20.055(2)(b), F.S., the OIG assessed performance measures for inclusion in the FY 2020-2021 Long Range Program Plan. On March 9, 2020, the Executive Office of the Governor, Office of Policy and Budget provided the Department approval for 24 performance measures, three of which are new. As new measures, OIG will conduct a performance measure assessment for validity and reliability once the associated Divisions have had a year to report the measures' results. Of the existing 21 approved measures, updated performance measure assessments will be conducted on select measures assessed by OIG over five years ago.

EXTERNAL AUDITS AND REVIEWS

2020-026 Department of Environmental Protection, Operational Audit of Selected Information Technology (IT) Systems

The Auditor General conducted an operational audit of the Department's Division of Air Resource Management (Division) Office of Permitting and Compliance, and selected IT systems. The audit also included a follow-up on findings noted in prior report 2017-001.

Results of Audit:

Based on the Auditor General's audit, the Department did not always timely deactivate access privileges to Department IT systems upon an employee's separation from employment. In addition, some Department IT system security administrators were not subject to required background screenings.

Recommendations:

The Auditor General recommended the Department ensure that user access privileges are deactivated immediately upon an employee's separation from employment. The Department should also ensure that all employees in positions of trust undergo a Level 2 background screening in accordance with State law.

Actions Taken:

The Department has worked with staff to ensure all are aware of the proper procedures to follow in order to ensure user access is deactivated timely when employees separate from the Department. In addition, the Department identified three additional employees in the Compliance Section who require Level 2 background screening and has initiated the screening process for those additional employees.

INTERNAL AUDIT SUMMARY REPORTS BY PROGRAM AREA

OFFICE OF TECHNOLOGY AND INFORMATION SERVICES

A-1819DEP-025 Review of Information Technology Procurement Processes for Microsoft Software and Services Purchased under State Term Contract 43230000-15-02

The scope of this review included activities and financial transactions under State Term Contract 43230000-15-02 (Contract) beginning on July 1, 2017.

Results of Review:

Based on our review, Office of Technology and Information Services (OTIS) Asset Management System management has an established process to track and renew Microsoft Software services consistent with DEP Directive 370 and the Department's Information Technology Resource Management Procedures. However, control weaknesses were noted in the areas of annual license and subscription renewal purchases as well as in purchases for Microsoft Azure Portal (Azure Portal) cloud storage service costs.

Recommendations:

We recommended that during the annual renewal of licenses and subscriptions, OTIS obtain price confirmation on all purchased service part numbers from both the most recent published and unpublished price list. Unpublished price lists are available from Department of Management Services (DMS) Contract management upon request. We also recommended OTIS verify the accuracy of service part numbers and quantities purchased in the Microsoft Volume Licensing Service Center to confirm that the Department has been invoiced and paid for the correct service part numbers and quantities each year. If discrepancies exist, OTIS should work with Software House International, Inc. (Contractor) to ensure necessary corrections are made. Further, given the inconsistent nature of prices available under the Contract, OTIS should compare quotes obtained for purchase orders issued by other agencies for the same services with each annual renewal. If management becomes aware of better pricing offered by the Contractor for substantially the same or a smaller quantity of a service part offered under similar terms, OTIS should work with the Contractor to reduce the Department's quote to the lower price. We also recommended OTIS monitor the Azure Portal to ensure that the Department's Azure

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Monetary Commitment payments are accurately credited going forward. Given that the Department is reliant on cloud service Contracts established by DMS and under these Contracts, there is limited means in which to verify the accuracy of service overage charges, we recommended OTIS carefully monitor the Azure Portal to ensure a positive credit balance is maintained to avoid overage charges. If payments for overage charges are necessary, OTIS should work with the Contractor to ensure the amounts billed are consistent with overage amounts reflected in the Azure Portal.

Actions Taken:

OTIS agreed with the recommendations and updated the Business Management Services Procurement Procedures accordingly.

DIVISION OF AIR RESOURCE MANAGEMENT

A-1920DEP-002 Audit of Agreement DC001 with Yacht Starship Dining Cruises, LLC

The scope of this audit included activities under Agreement DG001 (Agreement) between the Division of Air Resource Management (Division) and Yacht Starship Dining Cruises, LLC. (Grantee) during the period of January 4, 2019, through June 30, 2019.

Results of Audit:

Based on our audit, the Grantee documented the replacement and dismantling of three marine diesel engines. However, there were noted weaknesses in documenting support for emissions benefits, remaining useful life, worksheet completion and certification, costs, and performance under the Agreement. Noted weaknesses included lack of documented assurance that the engines being replaced were eligible under the Program, lack of supporting documentation for final emissions benefit calculations included in the final report due to the Environmental Protection Agency (EPA), lack of supporting documentation for required Cost Analysis, and lack of support for costs or receipts for purchases as required in the Agreement. The Division also lacked verifiable identification of the engines purchased and the Division's Grant Manager not being able to provide documented approval of the tasks which would have authorized the Grantee to proceed with subsequent tasks and submission of the Payment Request Summary Form.

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Recommendations:

We recommended the Division ensure that agreements contain supporting forms and worksheets which are consistent with task requirements. In addition, the Division should ensure that certifications required under an agreement are obtained from the recipient prior to approving payment. The Division also should obtain information necessary from the Grantee for the accurate completion of the final report to the EPA. We also recommended the Division ensure that agreements contain requirements for emission benefit calculation support, such as actual number and type of technologies, vehicles, equipment and engines implemented under the award and actual vehicle miles traveled, idling and/or operating hours, and fuel use. If this information is not available, the recipient should be required to provide a detailed explanation of how these values are derived, as well as any assumptions or default values used. In any agreement which involves vehicle, engine, or equipment replacement, we recommended the Division include requirements for evidential support that the replacement would not have occurred through normal attrition/fleet turnover. Under the EPA State Clean Diesel Grant Program Information Guide, normal attrition could be supported by the vehicle or fleet owner's budget plan, operating plan, standard procedures, or retirement schedule. On future agreements awarded on a noncompetitive basis, we recommended the Division ensure Grant Managers sign and maintain documentation to support the completion of a cost analysis as required under Section 216.3475, F.S. Going forward, we recommended the Division ensure that budgeted costs under agreements reflect budget categories consistent with the anticipated costs and obtain receipts and other required support for reported costs prior to approving payment. We also recommended the Division ensure that verifiable identification of the items purchased is obtained prior to approving payment for agreements which involve vehicle, engine, or equipment replacement. We further recommended the Division work with Grant Managers to ensure deliverables required under Grant Work Plan tasks are submitted, reviewed, and approved as required prior to proceeding with activities under subsequent tasks and submission of payment requests. In addition, the Division should ensure that performance standards are included for each task under the Grant Work Plan.

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Actions Taken:

The Division agreed with the recommendations. For future projects, the Division will require the Grantee to provide proof of the engine's operating hours and that the replacement is being performed at least three years prior to the Grantee's scheduled plans to replace the engine with appropriate documentation. The Grantee will also be required to verify with a signature that the unit replacement is occurring before normal attrition. Also, the Division will require the Division Grant Manager to approve the completion of a cost analysis accompanied by evidence of the analysis. Additionally, the Division will require the Grantee to provide a schedule of values completed in addition to a copy of the original receipt(s) provided by the distributor/manufacturer of the replaced unit. Further, the Division will require the Grantee to provide certified serial numbers of the new vehicles, engines, or equipment being replaced prior to approving the partial cost reimbursement payment. Finally, the Division will include performance standards for all tasks and provide written approvals as stated in the work plan.

DIVISION OF WASTE MANAGEMENT

A-1819DEP-023 Audit of Subcontractor Activities and Payments Under Agency Term Contracts with Advanced Environmental Technologies, LLC

The scope of this audit included subcontracted activities for purchase orders issued under Agency Term Contracts GC728, GC785, and GC833 (Contract) between Advanced Environmental Technologies, LLC (Contractor) and the Division of Waste Management (Division) Petroleum Restoration Program (PRP) since July 1, 2015.

Results of Audit:

Based on our audit, within the current PRP contract structure and practices regarding subcontracting activities, numerous control weaknesses exist that promote a lack of transparency and accountability regarding the use of subcontractors, costs for remediation activities, and timely subcontractor payment. For the purchase orders reviewed, we noted the consistent use of three subcontractors which were related parties with the Contractor. Historically, PRP has allowed the use of related party subcontractors. The allowed use of related party subcontractors is not consistent with Standard Operating Procedures requirements and puts additional separation between the Department and PRP participants. As a result, PRP has limited knowledge of the

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activities, companies and personnel working on state funded remediation projects. This limitation exposes the Department to risk of paying inflated costs, funding work performed by companies of unknown competence or qualification and hinders PRP's ability to enforce the terms of the Contract. Despite requirements contained in the Contract and the Standard Operating Procedures, as well as information available to PRP Site Managers, PRP did not provide effective procurement and oversight of purchase order subcontracting activities included in this review.

Recommendations:

We recommended the Division work with PRP to put added controls in place to ensure all subcontractors used for funded purchase order activities are documented on the Subcontractor Utilization Forms and paid in a timely manner. Prior to approval for payment, Site Managers should verify that the form includes subcontractors whose invoices are submitted with payment requests as well as subcontractors documented in purchase order reports, correspondence, and other activity documents. Further, since PRP's process of using contracted administrative staff to audit subcontractor payments covers a minimal number of purchase orders annually with no third-party inquiry or follow-up for corrective action, we recommended the Division discontinue this practice and revise PRP practices of verifying subcontractor payments. This revision should include the requirement for Contractors to supply sufficient subcontractor payment documentation with each purchase order invoice to demonstrate subcontractor payments were made from the previous purchase order invoice payment. If Contractor's make payments by check, this should include documented confirmation of the date payment was sent. In addition, for the payments made past 30 working days, PRP should obtain sufficient documentation from the Contractor to demonstrate resolution of applicable penalties in compliance with Section 287.0585(1), F.S. We also recommended the Division work with PRP to prohibit the addition of subcontractors which are related parties to the Contractor. For reimbursable activities, PRP should put controls in place to ensure that all subcontractors who submit quotes are companies which have proven competency and qualification in the area for the services needed and are not related parties to the Contractor. We also recommended the Division work with PRP to ensure Site Managers obtain Contractor solicitations for quotes or proposals, and verify the solicitation specifies factors that will be used to determine demonstrated competence and qualifications. In reviewing quotes, PRP should also ensure quotes received represent the same scope of work and

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are consistent with the services outlined in the purchase order. These added controls should include the Site Manager's documented verification, review, and supervisory approval prior to purchase order authorization.

Actions Taken:

PRP has established the Agency Term Contracts Subcontractor Payment Documentation Procedures and Form, which is a process for Contractors to submit a list of subcontractor payments and proof of payment documentation within 60 days of the final invoice submittal for all purchase orders issued under the Contracts. PRP implemented a mandatory Standardized Quote Form effective January 1, 2020. The form is required for all quotes submitted to PRP. Subcontractors must copy the Site Manager on submittals, and through submittal of the form they attest that they are not a related party to the Contractor that requested the quote.

A-1819DEP-027 Audit of Small County Consolidated Solid Waste Grant Agreement SC807 with Flagler County

The scope of this audit included activities under Grant Agreement SC807 (Agreement) between Flagler County (County) and the Division between October 1, 2017, and September 30, 2018.

Results of Audit:

Based on our audit, subcontracted services documented in the submitted invoices were generally consistent with Permit requirements and the County's Work Authorizations issued to the subcontractor. However, payment requests and status reports were not always submitted timely as required. In addition, the Grant Manager had not obtained the County's subcontract or Work Authorizations, which provided requirements for the submitted monitoring reports and established funding for the subcontract. This funding was less than funding available under the Agreement.

Recommendations:

We recommended the Division work with the County to ensure invoices and required status reports are submitted to the Department in a timely manner as required under the Agreement. Also, we recommended the Division work with the Grant Manager to ensure deliverables are obtained as required under the Agreement. Going forward, the Grant Manager should obtain both the County's subcontract and Work Authorizations applicable to the Agreement period prior to

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executing Agreements to ensure that available funding aligns with the County's planned activities.

Actions Taken:

The Division agreed with the recommendations and reminded all Counties to submit status reports as required. For the Division's current year Contract with the County, the Division obtained the County's subcontract and associated work orders. The Division's current Contract reflects a Scope of Services which aligns the County's planned activities with available funding.

A-1920DEP-005 Review of Contract HW555 with GHD Services, Inc.

The scope of this review included activities and records for services provided under Contract HW555 (Contract) between GHD Services, Inc. (Contractor) and the Division during the term of the Contract.

Results of Review:

Based on our review, procurement processes under the Contract were not consistent with contract negotiations as required under Section 287.055, F.S., in awarding the Contract. In addition, the Department has not adopted administrative rules guiding procurement procedures for the Division's Waste Cleanup Program (Program) response action contracts as required under Section 287.0595, F.S. The Program has also allowed costs for Project management that are not consistent with the Contract. In a sampled task assignment, the Program Contract Manager had not ensured that all tasked activities were documented consistent with task description.

Recommendations:

We recommended the Division take steps necessary to adopt administrative rules for all pollution response action contracts as required under Section 287.0595, F.S. The Division should work with the Program to establish procedures to document the competitive assignment of work for Program activities. Going forward, the Division should also ensure future contract negotiations and awards follow applicable statutory direction. We also recommended the Division work with the Program to ensure task assignment payments for Project management costs are calculated as an indirect cost of direct labor, consistent with the Contract. If Contract task assignments require services from a Senior Project Manager or Project Manager Engineer that are beyond the activities described in the Contract under Project management, we recommended Program

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management document the nature of the service to ensure Project management costs are not duplicated. Further, we recommended the Division work with the Program to ensure tasks are not issued for documented activities which appear to be funded under each task's Project management costs. Finally, we recommended the Division work with the Program to strengthen Contract management oversight to ensure all required activities are verified prior to approving payment.

Actions Taken:

In accordance with Section 287.0595, F.S., the Department is now in the process of adopting administrative rule Chapter 62-787, F.A.C. In adopting this rule, the Department is following criteria applicable to the Department's contracting that is consistent with the goals and purposes of Sections 376.307, and 376.3071, F.S. Upon promulgation of 62-787, F.A.C., the Department will initiate a solicitation for new contracts. The Division acknowledged that the Contract poorly defines Project management as 12.5% of Direct Labor. It has always been the intent and practice of the Program to allow for multipliers to be applied to the Direct Labor Hours associated with Project management. This is reflected in the Cost Estimate Forms that were developed by the Program and distributed to all Contractors upon contract initiation for use in all awarded task assignments. The Project management category has been consistently applied as a percentage on the loaded labor rate for contracts awarded under Solicitation 2010016C and all similar multiple contracts awarded under prior solicitations 2002012C and 2006054C. It is acknowledged that the representation of Project management cost as a separate subtask appears to provide for duplicative Project management activities under certain task assignments. The Division is in the process of amending all Consolidated Contracts to state that the application of Project management is at 12.5% of the fully loaded direct labor. For future contracts, the Program will identify Project management as an indirect cost multiplier calculated at 12.5% of the fully loaded Direct Labor assigned within a task assignment. This is consistent with the application of this indirect rate under all Program contracts since its application in 1997. The Program will also ensure that future task assignments provide a clear description of Project management activities that do not fall within the contract definition of Project management. Contract management training will be strengthened to provide additional guidance on this issue to Program Contract Managers. In response to finding 3, the Contractor was notified on November 21, 2019, that a reimbursement of \$198.00 would be necessary for the three groundwater samples not completed

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under the task assignment. The \$198.00 reimbursement was received from the Contractor on December 5, 2019. Contract management guidelines and training are being strengthened in those areas to address management oversight and deliverable verification. As part of that training, all Contract Managers are given this Audit assigned as a mandatory reading requirement.

A-1920DEP-011 Audit of Contract GC130 with NorthStar Contracting Group, Inc.

The scope of this audit included activities under Task Assignment 3 and Task Assignment 4 of Contract GC130 (Contract) between NorthStar Contracting Group, Inc. (Contractor) and the Division's PRP beginning July 1, 2018.

Results of Audit:

Based on our audit, the Contractor has provided administrative services as outlined under the Contract. However, we noted weaknesses in management oversight and consistency with the Contract in the areas of deliverable documentation, agreed upon processes for Site Access Agreements, and funding and deliverables associated with general administrative and accounting support.

Recommendations:

We recommended the Division work with PRP to ensure deliverables and documentation required under the Contract Scope of Services Task 6 are obtained and reviewed by the Contract Manager prior to approval for payment. This information should be provided in sufficient detail for the Division to ensure that work is assigned only to Agency Term Contractors which meet qualification requirements under Section 376.3071, F.S. We also recommended the Division work with PRP to ensure the initiation and approved payments for Site Access Agreement letters and activities are consistent with the Contract Scope of Services for Task 7. Reimbursement for Site Access Agreement letters should only be approved for letters sent to property owners as specified in the Contract. Any process changes in obtaining Site Access Agreements that are agreed upon by the Division should be established in the Contract through formal amendment. Given the circumstances noted regarding the Division's oversight of Task 15, we recommended the Division establish required deliverables under Task 15 to reflect Contract staff performance expectations consistent with the accounting and administrative needs of the Division. Any necessary changes associated with activity-based tasks, such as those outlined under Task 9 Processing and Tracking of Cleanup Utility Invoices, should be documented and adopted

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through formal amendment. As with other activity-based Tasks, Task Assignments for Task 15 should include detailed information regarding the number and type of budgeted positions, rates, and budgeted hours. While the Contract and Task Assignments do not address the allowance of payment for holiday and leave hours, the Division should work with Contract management to establish clear and accurate budget expectations. Any changes in funded positions should be formally documented and adopted through approved task assignment change orders. The Division should work with Contract management to ensure time logs in support of approved invoices contain required documentation of the specific activities performed. All time logs should include documentation of approval.

Actions Taken:

PRP will ensure that the Contractor submits a monthly report that includes documentation required under Task 6 in the Contract. On April 6, 2020, PRP notified the Contractor via email that they should discontinue billing third letters sent for site access as initial site access letters, except for situations where the Contractor had no prior involvement with the site access attempts, and instead bill them as follow up site access letters. PRP is preparing an amendment which will clarify the Task 7 subtasks and payments. The Division will establish required deliverables under Task 15 to reflect contracted staff performance. PRP is preparing an amendment which will remove Task 9 from the Contract as this work is being performed under Task 15. Going forward, Task Assignments will contain detailed information regarding the number and type of budgeted positions, rates, and budgeted hours. Holiday leave will no longer be included in task assignments. PRP will ensure that any changes in funded positions are formally documented and adopted through approved task assignment change orders. PRP will also ensure the Contractor submits a monthly summary report that details hours and costs for each staff including hours worked, location, and activities performed.

A-1920DEP-014 Review of Petroleum Restoration Program Deductible Collections

The scope of this review included current Division PRP deductible collection processes and collection activity as of June 30, 2019.

Results of Review:

Based on our review, Sections 376.305, 376.3072, F.S., and Chapter 62-769 F.A.C. do not state that the Department has the authority to collect these deductibles, but rather directs that the

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Department pay for restoration costs up to certain amounts, less specified deductibles. A process for billing and collecting deductibles from facility owners eligible for restoration funding under Petroleum Liability and Restoration Insurance Program (PLRIP) and Abandoned Tank Restoration Program (ATRP) has been established in the Department for over 20 years without clear statutory authority. While deductible collections have been deposited in the Inland Protection Trust Fund, the practice of collecting, rather than withholding deductible amounts negatively impacts the Department's annual budget for funding petroleum restoration activities. PRP deductible collection activities had also prevented or delayed several eligible facilities from achieving closure.

Recommendations:

Going forward, we recommended the Division take steps to ensure approved funding for cleanup activities on facilities eligible under the PLRIP and ATRP is administered in conformance with Sections 376.305 and 376.3072, F.S., as well as Chapter 62-769 F.A.C. This authority specifies that the Department will pay eligible restoration costs, less certain deductibles, but does not indicate that the Department has authority to collect those deductibles. As such, the Division should discontinue the practice of soliciting, tracking, and collecting deductibles. The Division, in coordination with the Division of Administrative Services, should also take steps to notice and request assistance from the Chief Financial Officer for correction of accounts referred to collections.

Actions Taken:

The Division has discontinued the practice of soliciting and referring PRP deductibles to collections, has withdrawn all prior PRP deductible accounts from collections, and plans to proceed with implementing the program funding of statutory eligible restoration costs less the applicable deductible pursuant to Sections 376.305 and 376.3072, F.S.

DIVISION OF WATER RESTORATION ASSISTANCE

A-1819DEP-032 Audit of Agreement S0771 with the City of Riviera Beach

The scope of this audit included activities, records, and disbursements during the term of Agreement S0771 (Agreement) between the City of Riviera Beach (Grantee) and the Division of Water Restoration Assistance (Division).

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Results of Audit:

Based on our audit, the Grantee maintained the required insurance coverage throughout the Agreement period. However, weaknesses were noted in the Division's oversight of the Grantee's compliance with the Agreement and support for Grant Work Plan project costs. The Division's Grant Manager did not always ensure required deliverables were obtained prior to payment authorization.

Recommendations:

We recommended the Division work with Grant Managers to ensure documented deliverables required under the Grant Work Plan are obtained and reviewed prior to Department approval for payment. Documented deliverables obtained by the Grant Manager should demonstrate an accurate representation of the final work completed on Task projects consistent with the Grant Work Plan. Additionally, we recommended the Division ensure that approved payments are supported by legible documentation which documents costs directly related to Agreement Grant Work Plan projects. If the Grantee's subcontract demonstrates that a Department funded project is part of a larger local project, the Division's Grant Managers should work with the Grantee to ensure a system of fund accountability is established to separately document and support costs directly related to projects specified in the Department's agreements.

Actions Taken:

The Division acknowledged the recommendations and will work with the Division's Grant Managers to improve their knowledge and experience with managing the Grant agreements, including obtaining and verifying agreement-related task deliverables prior to Department approval of payment. To that end, the Division's staff director sent a document to the Division's Grant Managers summarizing the Audit findings and recommendations and noting the opportunity for improvement. The Division is considering additional knowledge sharing to continue to improve the Division's practices for management of the Grant agreements. Additionally, the Division will ensure that approved payments are supported by legible documentation which documents agreement-related costs. The Division will also work to ensure the Grantees have a system in place to account for agreement-related costs that are distinguishable from the Grantees other project costs.

OFFICE OF RESILIENCE AND COASTAL PROTECTION

A-1920DEP-009 Review of Agreement R1803 with the City of Sarasota

The scope of this review included activities and financial transactions under Agreement R1803 (Agreement) between the City of Sarasota (Grantee) and the Office of Resilience and Coastal Protection (ORCP) beginning in November 2018.

Results of Review:

Based on our review, the ORCP Grant Manager completed a Department Budget Cost Analysis Form (DEP 55-229) for the Agreement; however, the form did not include analysis or support documentation to demonstrate that a detailed cost analysis was conducted as required. While documentation supporting Project and task completion was submitted, the performance measures, as included in the amended Agreement, did not specify requirements for demonstrating completion of deliverables. Grant management had not verified support for all Project expenses.

Recommendations:

We recommended future agreements awarded on a noncompetitive basis ensure Grant Managers maintain documentation to support the completion of a cost analysis as required under Section 216.3475, F.S. We also recommended ORCP ensure that agreements include performance measures specific to each task with the required minimum level of service to be performed and the criteria for evaluating the successful completion of each deliverable, consistent with requirements under Section 215.971, F.S. Additionally, we recommended that ORCP work with Grant Managers to ensure documentation supporting expenses are obtained as applicable to each payment request, as required under the agreement.

Actions Taken:

The Florida Resilient Coastline Program (FRCP) is now requiring applicants to provide a copy of the entity's procurement procedures, as well as a certified statement that indicates the type that they anticipate using for the proposed project. Moving forward, all deliverables will be detailed to include clear performance measures of the tasks being completed. The performance measures will include the minimum level of service to be performed and the criteria for evaluating the successful completion of each deliverable, consistent with requirements under Section 215.971,

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F.S. The deliverable details are now incorporated into a new online application system. All deliverables are reviewed by the Grant Manager in the application stage and adjusted for more detail and specifics when preparing the Grant agreements. All changes are then submitted to the Grantee to get their approval of the changes being made with regards to the Grant Work Plans. In addition to this, the Grant Manager will conduct site visits via in person or virtually to ensure that all deliverables are being completed and submitted correctly. Additionally, all future disbursements will require Contractor invoices as basis for reimbursement. Self-performed tasks will require a detailed description of Grantee personnel performing tasks, along with hours, salary, fringe, and expenses anticipated. Adequate documentation, such as timesheets, will be used to verify hours worked, as basis for Grant disbursement.

DIVISION OF RECREATION AND PARKS

A-1819DEP-004 Review of Department Agreements with Volunteer Florida for the Florida Conservation Corps AmeriCorps Program

The scope of this review included Department receipts and expenditures regarding AmeriCorps Agreement 2017 (Agreement AME17) and AmeriCorps Agreement 2018 (Agreement AME18) between the Division of Recreation and Parks (Division) and the Florida Commission on Community Service (Volunteer Florida) for the Florida Conservation Corps (FLCC) AmeriCorps Program (Program).

Results of Review:

Based on our review, the FLCC Program had not been submitting reimbursement requests to Volunteer Florida in a timely manner. The Department also did not receive full funding available under the Agreements. Division expenditures from the Federal Grants Trust Fund exceeded receipts from Volunteer Florida and expenditures from the Land Acquisition Trust Fund exceeded required match under the Agreements. Although the Program is organizationally managed under the Bureau of Natural and Cultural Resources (BNCR), there has been minimal oversight of the Program's financial activities from the BNCR Program Manager. However, per the Agreement AME17 documents reviewed, the FLCC Program's performance goals had been met. Required Member Service Agreements, background checks, and training had been completed for members during the review period.

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Recommendations:

We recommended the Division work with BNCR and FLCC Program management to ensure invoices are submitted to Volunteer Florida for reimbursement by the due date stated in the Agreements. The Division should provide oversight of reimbursement requests and documentation of Program costs to ensure the Department is accurately and timely compensated in accordance with the Agreements. Additionally, we recommended that the Division work with BNCR to monitor Program expenditures. The Division should also ensure Program expenditures from the Federal Grants Trust Fund do not exceed funded amounts, and expenditures from the Land Acquisition Trust Fund do not exceed the Department's required match.

Actions Taken:

The Division and BNCR management (Bureau Chief or Assistant Bureau Chief) review each invoice for timeliness and accuracy prior to submission to Volunteer Florida for reimbursement, to ensure compliance with the current Agreement. The FLCC Program has submitted all invoices by the due date for six months following the completion of the audit. Additionally, the Division and BNCR management monitors financial activities and program expenditures monthly as invoices are submitted to Volunteer Florida to ensure compliance with the current Agreement. Currently, program budgets are within projections in each category of funds.

A-1819DEP-005 Audit of Wakulla Springs State Park and the Friends of Wakulla Springs State Park, Inc. Citizen Support Organization

The scope of this audit included Wakulla Springs State Park (Park) and the Friends of Wakulla Springs State Park, Inc. Citizen Support Organization (CSO) activities and financial records during the period July 1, 2017, through June 30, 2018.

Results of Audit:

Based on our audit, the Park was generally in compliance with the Division's requirements regarding revenue collection and reporting, tax exempt transactions, staff housing requirements and deposits with minor exceptions. However, we noted control weaknesses regarding expenditures, attendance reporting, and volunteer documentation. The CSO demonstrated compliance with the agreement and statutory requirements. Based on our review of financial

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records, the CSO maintained a sound record keeping system incorporating fiscal controls despite the lack of a written financial policy.

Recommendations:

We recommended the Division ensure that Park procurement practices comply with Chapter 60A-1.002(5), F.A.C. and Department P-Card training. To promote cost-effective use of resources, the Division should ensure that purchases for Park projects are procured in a competitive manner consistent with the project's expected cost. We also recommended the Division work with the Park to ensure reported estimated counts are calculated and supported consistent with the Park's Attendance Reporting Plan and Operations Manual. Additionally, we recommended the Division work with the District and Park to update the Park's Attendance Reporting Plan to include methodology for estimating attendance at the Emerald Sink location. We further recommended that the Division work with the Park and District to ensure property inventories are conducted as required under the Operations Manual when there is a change in the Park Manager position. Additionally, we recommended that the Division work with the Park to ensure that all Volunteer Agreements are completed annually and volunteer profiles in the Volunteer Service Tracking System (V Sys) contain documentation as required in the Operations Manual.

Actions Taken:

The Division agreed with the recommendations. The Division is working to ensure that Park procurement practices comply with Chapter 60A-1.002(5), F.A.C. and Department P-Card training. The Division also ensures that purchases for Park projects are procured in a competitive manner, consistent with the project's expected cost. Additionally, as of August 2, 2019, the Park's Attendance Reporting Plan had been updated to include methodology for estimating attendance at the Emerald Sink location. The Division worked with the Park to ensure that visitor estimated counts were calculated and supported consistent with the Park's Attendance Reporting Plan and Operations Manual. The Park has demonstrated the updated plan is being followed and was reported accurately. Also, the Division worked with the Park and District to ensure property inventories are conducted. The Division has provided documentation that they are conducting property inventories as required under the Operations Manual when there is a change in the Park Manager position. Finally, the Division worked with the Park to ensure that all Volunteer

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Agreements are completed annually and volunteer profiles in VSys contain documentation as required in the Operations Manual.

A-1920DEP-004 Review of Property Inventory and Manager Audits Associated with Changes in Park Management

The scope of this review included Park Manager changes between July 1, 2017, and May 22, 2019.

Results of Review:

Based on our review, of the 31 Park Manager changes throughout our scope, there were no property inventories completed. Based on the lack of compliance with the Operations Manual and DRP-034 requirements determined during this review, the various interpretations of the requirements by Division staff and management, and the potential risk placed on the Division due to this noncompliance, we provided an advisory memo in order to bring this to Division management's attention so that these concerns can be addressed.

Recommendations:

We recommended the Division take action to enhance the Operations Manual language to provide clarification on the expectations and ensure Division staff are following the clarified requirements.

Actions Taken:

Because this was an advisory memo sent to Division management, a formal response from the Division was not required. However, based on the Division's response to the Audit of Wakulla Springs State Park and the Friends of Wakulla Springs State Park, Inc., CSO, the required property inventory is completed by the District when there is a change in the Park Manager position. Per correspondence with other District management, Division management has discussed the required processes with District management.

A-1920DEP-006 Audit of Jonathan Dickinson State Park and the Friends of Jonathan Dickinson State Park, Inc., Citizen Support Organization

The scope of this audit included Jonathan Dickinson State Park (Park) and the Friends of Jonathan Dickinson State Park, Inc., CSO activities and financial records during the period beginning January 1, 2018, to current activities.

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Results of Audit:

Based on our audit, the Park was generally in compliance with the Division's requirements regarding tax-exempt transactions and deposits, attendance reporting, and volunteer documentation with minor exceptions. However, we noted control weaknesses regarding revenue collection and reporting, expenditures, management of bulk fuel, housing requirements, and Permit oversight. While the CSO was established and operates in compliance with Section 258.015, F.S., we noted control weaknesses regarding Park oversight of CSO operations in the areas of the Annual Program Plan, use of CSO funds, events, and Board membership.

Recommendations:

We recommended the Division ensure that the Park maintains a safe with an inner compartment that can be locked to provide additional access restrictions. Further, the Park should take added steps to ensure the safe is maintained in a secured manner. We also recommended the Division work with the Park to ensure all adjustments between reported revenue and daily receipts are documented to provide an explanation for the difference. To promote better accountability for daily adjustments, this should be documented daily for each shift. We also recommended the Division ensure that District and Park procurement practices comply with Section 287, F.S., Chapter 60A-1.002, F.A.C, and the Department Procurement Guide. For purchases that meet or exceed \$2,500, a minimum of two quotes should be obtained. If the minimum quotes cannot be obtained and due diligent procurement efforts have been demonstrated, the circumstances for the single source purchase should be documented as required. Further, the Division should work with the District and Park to address equipment maintenance practices to minimize circumstances that put the Park at risk of paying inflated costs due to emergency repairs. We further recommended that the Division work with the Park to put additional controls in place to reconcile purchases with recorded amounts received. Park management should verify the level of fuel on hand at the end of each month to ensure the accuracy of recorded amounts. Further, the Division should work with the Park to ensure that proper procedures are in place documenting firearm use activity and staff training in accordance with standards. We also recommended the Division work with the Park to review and correct any inconsistencies with the agreement language referencing the Operations Manual. Also, the Division should determine an accurate amount to be charged to STOP camp residents and correct agreements accordingly. We also

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recommended the Division work with the Park and the employee to determine the amount owed to the Park for the additional occupant rent. We further recommended the Division work with Park and District management to ensure that all inspection reports are completed accurately and timely. We also recommended the Division work with the District and the Park to ensure proper approval procedures are in place regarding Permits. The Division should review the Operations Manual to ensure that there are concise guidelines for the Park regarding fee structure, allowable items, and sufficient documentation. We recommended the Division work with the Park to provide additional oversight of CSO activities to ensure the Annual Program Plans are submitted on or before the end of the CSO's fiscal year. The Division should also work with the Park to ensure that all CSO fundraising activities are designated in the Annual Program Plan and approved by the Park Manager. We recommended the Division work with the Park to strengthen controls over CSO activities consistent with the CSOs Financial Policy, Code of Ethics, and the CSO Handbook. These controls should include documented financial oversight, review, and written approval of CSO expenditures and activities. The Division should review whether the current practices of Park staff collecting CSO funds is an appropriate use of Park resources. Any use of Park staff should be approved in writing by the District Bureau Chief and consistent with requirements in the Operations Manual. We also recommended the Division work with the Park to strengthen controls and provide additional oversight of CSO events. All events and event publicity should be approved in advance in writing, including written approval from the Park Manager/District Bureau Chief to charge a separate fee or donation in lieu of the usual Park entrance fee. Prior to events, the Park should ensure the event Essential Eligibility Criteria (EEC) is submitted to the Park Manager and published for event participation. The Park should ensure that written Park Manager approval is provided in advance if alcohol will be served at an event. The Park should also require documentation to support the number of participants included in CSO fees for individual Park entrance and ensure the fee payment is consistent with the Division's standard fee for individual entry. Finally, we recommended the Division work with the Park to ensure that no Park employee, spouse, relative, or dependent who resides with a Park employee serve as an Officer on the CSO Board.

Actions Taken:

The Division agreed with the findings and recommendations. Park management has procured, installed, and is maintaining a secure safe with an inner compartment. The Park now documents

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and provides justification for variances and adjustments between reported revenue and daily receipts. Also, the District and Park procurement practices now comply with Section 287, F.S., Chapter 60A-1.002, F.A.C, and the Department Procurement Guide. Park management now verifies the level of fuel on hand at the end of each month to ensure the accuracy of recorded amounts. Locks have been changed to ensure limited access to fuel transfer pumps. The Division has also worked with the Park to ensure that proper procedures are in place and followed to document firearm use activity and staff training in accordance with standards. The Operations Manual is being modified to limit non-family residents. The Bureau Chief will either demonstrate the need to provide residency to the non-family occupants and determine, consistent with state rules, a basis for fees or cause non-staff to be removed. To the extent possible, resident and utility payments owed to the state will be collected. In the event collections do not take place, the Bureau Chief will document reasons. Housing inspection reports have been completed in an accurate and timely manner for this fiscal year. The Division is also reviewing the Operations Manual to ensure that there are clear guidelines for the permit fees and requiring specific documentation. Park management will ensure that event permits are completed prior to the event, approvals are documented, and permit fees collected. It is now the Park Managers responsibility to ensure that all CSO fundraising activities are designated in the approved Annual Program Plan. The Division is working with the Park to strengthen controls over CSO activities consistent with the CSO's Financial Policy, Code of Ethics, and the CSO Handbook. Current resolutions to the Finding include the Park working with the CSO to achieve compliance, the CSO has removed vending machine revenues from the Ranger Station safe and the CSO quarter exchange fund has been dissolved with signs directing visitors to the concession for change, and the CSO purchasing its own safe with an internal compartment which is located at the Kimbell Center. Additionally, Park staff involvement has been limited, the CSO Board members are assisting with vending machine revenue collection and are trying to recruit a volunteer to handle, and the Club Scrub Committee Chair who had undocumented purchases and the Board member with business conflicts have resigned from the Board. Further, Club Scrub no longer maintains a separate PayPal account, and all purchases not pre-approved in the annual budget are being approved by the Friends Board. The CSO bylaws are being updated to remove language approving Club Scrub to make large purchases from select businesses. Prior to events, Park management will require approval with fees consistent with state fee schedule. The Park will

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also require Director's office approval to allow participants for individual park entrance and ensure the fee payment is consistent with the Division's standard fee for individual entry. Finally, no park employee, spouse, relative, or dependent who resides with a park employee serves or may serve as an Officer on the CSO Board.

A-1920DEP-007 Audit of Agreement MY-0612 with National and State Park Concessions Jonathan Dickinson, Inc. at Jonathan Dickinson State Park

The scope of the audit included financial records and activities under Agreement MY-0612 (Agreement) between the Division of Recreation and Parks and National and State Park Concessions Jonathan Dickinson, Inc (Concessionaire) during the period January 1, 2018, through May 31, 2019, as well as current activities.

Results of Audit:

Based on our audit, gross sales reported during the audit period were generally supported by the Concessionaire's general ledger, monthly sales summaries and daily transaction detail. Reported amounts were consistent with sales reported to the Department of Revenue. During the audit period, control weaknesses were noted in the areas of Concessionaire site fees, equipment rentals, Safety Plans, timely deposits, documentation of refunds, Agreements for Occupancy, and completion of capital improvements.

Recommendations:

We recommended the Division work with the Park and the Concessionaire to ensure the Concessionaire pays fees as required when the sites are occupied. The Division should work with the Park and Concessionaire to determine the outstanding amount owed for past unpaid site fees. We recommended the Division work with Park management to review the Concessionaire's current rental inventory and determine whether current equipment offerings meet Division expectations with respect to public safety, resource protection, design and capacity, compatibility with other activities, compliance with the Americans with Disabilities Act, and other Division requirements. The rental equipment and level of inventory should be approved by the Park Manager as required per the Agreement. We also recommended the Division review the language contained in the Agreement and Quarterly Evaluations to ensure that consistent direction is provided to the Concessionaire and Park management regarding the receipt, review, and approval of annual Safety Plan revisions. Given the noted safety concerns and the lack of

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Division approval for rental equipment noted in a separate finding, the Division should take steps to strengthen controls and oversight of the Concessionaires adherence to Division safety requirements. We recommended the Division work with the Park and Concessionaire to ensure proper controls are in place regarding the timeliness of deposits. We recommended the Division work with the Park to ensure the Concessionaire maintains records supporting all refund transactions with customer signed sales slips indicating the receipt and reason for the refund. Further, Park management should ensure that an accurate review of the documentation is being completed for the quarterly evaluation. We recommended the Division work with the Park and the Concessionaire to ensure that a proper Occupancy Agreement is signed for the time frame that the rental site is occupied. Finally, we recommended the Division work with the Park and Concessionaire to ensure that any agreed upon modifications to the capital improvements or required completion dates are formally established and approved by the Division.

Actions Taken:

The Division agreed with the findings and recommendations. The Park Manager has collected past unpaid site fees from the Concessionaire. The Park Manager has also issued approval of additional rental equipment maintained by the Concessionaire. The Park Business Development Section will prepare an amendment which modifies the Concession Agreements Safety Plan requirements to ensure consistency with routing, reviewing and approving Safety Plans. The Park Manager has ensured Safety Plans are reviewed and approved as required by the Concession Agreement. The Park Manager will ensure the proper controls are in place regarding the timeliness of deposits. Corrective action has been taken regarding documentation of refunds, and the Concessionaire is utilizing a receipt signature stamp. The Park Manager has further directed the Concessionaire to maintain the appropriate documentation for refunds and the Park Manager will accurately report the review of documentation in future Quarterly Evaluations. The Park Manager has confirmed that the equestrian area is no longer needed by the Concessionaire and will ensure a proper Occupancy Agreement is signed for any future site occupancy. The Park Business Development Section is preparing an amendment which modifies the Concession Agreement's Capital Improvement deadlines.

A-1920DEP-008 Audit of Ravine Gardens State Park and Agreement with the Friends of Ravine Gardens, Inc. Citizen Support Organization

The scope of this audit included Ravine Gardens State Park (Park) and the Agreement with the Friends of Ravine Gardens, Inc. CSO (Agreement) activities and financial records during the period beginning July 2018, to current activities.

Results of Audit:

Based on our audit, the Park was in compliance with the Division's requirements regarding deposits, tax exempt transactions, staff housing, property, and volunteers with minor exceptions. However, control weaknesses were noted in the areas of revenue collection and reporting and expenditures. While the CSO was established and operates in compliance with Section 258.015, F.S., we noted control weaknesses regarding Park oversight of CSO operations in the areas of the Annual Program Plan, Financial Policies, and CSO sponsored events.

Recommendations:

We recommended the Division work with the Park to ensure all Financial Sessions are closed daily as required in the Operations Manual. We recommended the Division ensure that Park procurement practices comply with Section 287, F.S., and Chapter 60A-1.002, F.A.C. For purchases that meet or exceed \$2,500, a minimum of two quotes should be obtained. If the minimum quotes cannot be obtained from providers of the needed commodity or service, and due diligent procurement efforts have been demonstrated, the circumstances for the single source purchase should be documented. We further recommended the Division ensure that Annual Program Plans are submitted on or before the end of the CSO's fiscal year as required under the Agreement. Any alterations, variations, changes, modifications or waivers of provisions of the Agreement should only be valid when they have been reduced to writing, duly signed by both the Division and CSO, and attached to the original Agreement. We recommended the Division work with the Park and CSO to ensure oversight of funds consistent with the CSO's Financial Policies. In addition, the Division should work with the Park and CSO to ensure that the CSO's Financial Policies are updated to reflect current practices. Finally, we recommended the Division work with the Park and CSO to ensure CSO event permits are executed consistent with direction contained in the CSO Handbook.

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Actions Taken:

The Division agreed with the recommendations. The Park Manager has taken steps to ensure that all Financial Sessions are closed daily as required in the Operations Manual. In order to comply with Park procurement practices under Section 287, F.S., Chapter 60A-1.002, F.A.C., and the Department Procurement Guide, the Park Manager has taken steps to document efforts to obtain more than one quote on any purchase over \$2,500 and provides a statement of justification in the event the Park is unable to obtain more than one quote. Future alterations, variations, changes, modifications, or waivers of provisions of the Agreement will be reduced to writing and duly signed by both the Division and CSO and attached to the original Agreement. The 2020 Annual Program Plan was in compliance, having been submitted prior to December 31, 2019. Going forward, CSO permits will no longer include reference to the Department and Division. Park staff will discontinue overseeing CSO permits activities. Park staff and CSO Officers have been trained on the process contained in the CSO Handbook.

A-1920DEP-013 Audit of Agreement CA-0917 with American Parks of Florida, LLC at Fort Clinch State Park

The scope of our audit included a review of activities and financial records under Agreement CA-0917 (Agreement) between American Parks of Florida, LLC (Concessionaire) and the Division at Fort Clinch State Park (Park) during the period July 1, 2018, through June 30, 2019.

Results of Audit:

Based on our audit, reported gross sales during the audit period were not reported accurately as required under the Agreement. In addition, the Concessionaire had not complied with Agreement requirements regarding bank accounts, refunds, sexual predator searches, service contract, website maintenance, as well as maintenance, environmental, and safety plans. Park management also had not deposited commission payments in a timely manner.

Recommendations:

We recommended the Division work with Park management to ensure the Concessionaire's total gross sales are reported consistent with Agreement requirements. We also recommended the Division work with Park management and the Concessionaire to ensure that bank accounts are used solely for the Concessionaire's operations under the Agreement as required. We

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recommended the Division work with Park management to ensure commission payments are deposited in a timely manner as required under the Operations Manual. We also recommended the Division work with Park management to ensure the Concessionaire's Point of Sale system accurately reflects refund transactions. Any refunds issued should be supported by customer signed documents, or an alternative method for electronic and online transactions as required under the Agreement. We also recommended the Division work with Park management to ensure that sexual predator and sexual offender searches are conducted for the Concessionaire and employees as required. We further recommended the Division work with the Department's Office of General Counsel to address the Concessionaire's Lease. In addition, the Division should work with Park management to review the Concessionaire's service offerings for consistency with the Agreement. Any request to expand services should be reviewed for approval in writing by the Division. Any approved expansion of services should be incorporated in the Agreement by formal amendment. We also recommended the Division work with Park management to ensure the Concessionaire meets the requirements for a website as outlined in the Agreement. Any alternate means of promoting the Park should be reviewed for formal approval in writing by the Department. Additionally, we recommended that the Division work with Park management to ensure the Concessionaire posts its Accessibility and Inclusion Policy as required under the Agreement. The Division should also work with Park management to ensure Maintenance and Repair, Environmental Protection and Safety Plans are submitted for review and approval by the Department as required under the Agreement.

Actions Taken:

The Division concurred with findings and recommendations. The Division corrected the procedure for reporting total gross sales and will conduct a full reconciliation of reported total gross sales for the life of the Agreement to date. Additionally, the Concessionaire was directed to use the bank account(s) solely for the Concessionaire's operations as required by the Agreement and the Division will continue to confirm compliance. Also, the Park Manager ensures commission payments are deposited according to the requirements in the Operations Manual and has directed the Concessionaire to ensure refunds are accurately reported and documented as required by the Agreement. The sexual predator and sexual offender searches have been conducted. The Division consulted with the Office of General Counsel regarding the Lease. Formal amendment will update the Agreement to incorporate the approved expansion of

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services. The Division is reviewing the concessions business model to recommend a stronger marketing strategy including web-based marketing. The Park Manager has confirmed the Accessibility and Inclusion Policy is posted on premises. Finally, the Maintenance and Repair and Environmental Protection Plans have been approved by the Park Manager and the Safety Plan has been reviewed and approved as required by the Agreement.

A-1920DEP-021 Audit of Grayton Beach State Park and the Friends of Grayton Beach State Park and Deer Lake State Park, Inc., Citizen Support Organization

The scope of this audit included Grayton Beach State Park (Park) and the Friends of Grayton Beach State Park and Deer Lake State Park, CSO activities and financial records during the period beginning July 1, 2018.

Results of Audit:

Based on our audit, the Park was generally in compliance with Division's requirements regarding revenue collection, deposits, attendance reporting, and volunteer documentation with minor exceptions. However, we noted control weaknesses regarding Park safe access, P-Card usage, management of miscellaneous fuel, and housing requirements. While the CSO was established and operates in compliance with Section 258.015, F.S., we noted control weaknesses regarding policies and procedures as well as Park oversight of CSO operations.

Recommendations:

We recommended the Division work with the Park to ensure that all voids are documented in accordance with the Operations Manual. In addition, during the period when day-use entrance fees are not collected from visitors but rather reimbursed by the County, the Division should work with the Park to promote additional staff training and awareness to reduce the need for voids. Going forward, we recommended the Division work with the District and Park to provide oversight and ensure P-Card approvers review and verify that cardholders obtain necessary written quotes or single source justification for purchases that meet or exceed \$2,500.00, as required under Chapter 60A-1.002, F.A.C. The Division should also ensure that District and Park management and P-Card approvers monitor cardholder activities for appropriate use to avoid purchases that indicate, or may be perceived as, split transactions to avoid exceeding procurement limits. We recommended the Division work with the Park to ensure that inventory recorded on the fuel logs is accurately maintained and reconciled by Park staff. We

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recommended the Division review the current Operations Manual to ensure it reflects the Division's current direction regarding resident and additional occupant fees. We recommended the Division work with the Park to ensure that resident volunteers document working the number of required hours for campground host sites. The Division should also review the current process for recording volunteer hours. Volunteer hours should be documented in a manner in which they can be verified for consistency with requirements in the Division's Volunteer Handbook. We recommended the Division work with the Park and CSO to establish a financial policy which outlines fiscal controls and responsibilities consistent with direction in the CSO Handbook. We also recommended the Division review the Park's current use of staff and volunteers as the sole operators of the CSO's retail sales and recreational rentals to ensure the CSO's financial operations are managed in compliance with the Operations Manual. We recommended the Division work with the Park and CSO to ensure that all Volunteer Agreements are signed annually and maintained by the Park or in the VSys as required. Going forward, we also recommended the Division work with the Park to ensure that sexual predator searches are completed as necessary for additions to the Board.

Actions Taken:

The Division agreed with the findings and recommendations. A refresher training on voids has been provided to those staff handling revenue collection transactions to minimize these errors in the future and ensure compliance with the Operations Manual. The Division will ensure that Park procurement practices comply with Chapter 60A-1.002(5), F.A.C. and Department P-Card training. Furthermore, the Division will recommend to the Department implementation of an annual refresher training on P-Card limits and procurement thresholds in accordance with Chapter 60A-1.002(5), F.A.C. Park staff is reconciling the Gasoline and Oil Inventory Log on a monthly basis and documenting overages and shortages, if any, against receipts to ensure proper inventory controls. The Division is reviewing the current Operations Manual language to ensure it reflects the Division's current direction regarding resident and additional occupant fees. The Division has implemented changes to VSys to better document that park resident/campground host volunteers meet the required work requirement, a minimum 20 hours/week/site. The Division has completed and trained staff on the requirement and provided an updated VSys Users Guide for Volunteer Managers. The Division's Volunteer Handbook will be updated. The Division is working with the CSO to establish a financial policy which outlines fiscal controls

and responsibilities consistent with direction in the CSO Handbook. The District will continue to monitor the Park's current use of staff and volunteers in support of the CSO's retail sales and recreational rentals to ensure the CSO's financial operations are managed in compliance with the Operations Manual. All regular service Volunteer Agreements will be signed annually and maintained by the Park or in VSys as required. Sexual predator searches have been completed for all regular service volunteers and CSO Board members.

DIVISION OF STATE LANDS

A-1819DEP-031 Review of Recreational Trails Program Agreement T1417 with the City of Fort Lauderdale

The scope of the review included a review of the Agreement T1419 (Agreement) between the Division of State Lands (Division) and the City of Fort Lauderdale (City), as well as payments to date for the Snyder Park Bike Trail Project (Project).

Results of Review:

Based on our review, the Division did not effectively manage the City's compliance with the Agreement. The Division had worked with the Department of Transportation (DOT) to provide additional oversight of the Recreational Trails Program (RTP) planning process. However, we noted a series of errors involving amendment of the Agreement, changes in the Project scope, status reports, oversight of final deliverables, and support for invoiced costs that resulted in Department payment for work that was inconsistent with the Agreement.

Recommendations:

We recommended the Division put additional controls and levels of technical review in place to ensure executed Agreements and amendments contain accurate Project information. In addition, we recommended the Division work with the Land and Recreation Grants Section (Grants Section) to ensure that any necessary Project revisions are formally requested, and modifications reduced to writing in an amendment to the Agreement, as required. If Grant Managers become aware of circumstances which may impact completion of a Project, the Division should ensure that Grant Managers work effectively with Grantees to obtain formal requests for amendments as necessary. We recommended that going forward, the Division establish additional levels of oversight of the Grants Section to ensure effective Project management and Project status reports

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are obtained in a timely manner. Final inspections should document verification of required Project deliverables which are consistent with the Agreement. Accepted Project photos should be clearly labeled and reflect completion of required elements. As-Built Site Plans that accurately represent the final work done on the Project and appropriately labeled photos should be obtained prior to final Project approval. Additionally, we recommended the Division establish additional controls over Project completion and invoice payment to ensure reimbursements are supported by accurate costs as required under the Agreement and Chapter 62S-2.075, F.A.C. Costs representing Grantee labor should be submitted with the required detail on the Grantee Labor Cost Schedule Form. Project planning expenses such as architectural and engineering fees should not exceed 15 percent of the total project cost incurred in accordance with Chapter 62S-2.075, F.A.C. and Code of Federal Regulations 200.83. We recommended the Division address the current delegation of authority regarding the Grants Section and update DEP Directive 110 to reflect authority over grant administration which ensures effective Division controls and oversight of the Grants Section.

Actions Taken:

The Division agreed with the recommendations. Currently, to obtain an amendment revising the Scope of Work and/or extending the Agreement expiration date, Grantees must submit a formal request on letterhead citing allowable justification per Chapter 62S-2, F.A.C. They must also include an updated project completion timeline to ensure that a project will be complete within the requested extension timeframe. In response to the recommendation, the Division has modified the reimbursement process and final reimbursement requests will not be approved without a final status report being included in the completion packet reflecting the submission date. Additionally, available funding has been identified for implementation of the RTP into the agency-wide Grant Management System (GMS) to help ensure all required status reports are received timely. The Grants Section implemented a revised site inspection process, and all RTP projects are now receiving the final inspection solely from Grants Section staff. The final site inspection package is compiled by the RTP Community Assistant Consultant (CAC) and includes a description of the project's Scope of Work, prior inspection reports, the List of Final Constructed Project Elements, and an As-Built Site Plan. If available, labeled photos of the project elements submitted by the Grantee with the most recent status report are included in the final inspection package as well. During the final inspection, Grants Section staff complete eight

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essential questions to ensure that the project was constructed in accordance with the approved Scope of Work, that it is open to the public, and that all terms of the Agreement were satisfied. Grants Section staff obtain photos of all project elements and include them within the final report, labeled for clarity. The final report, signed by Grants Section staff completing the inspection, is saved to the project file on the Division's shared drive. All documentation is uploaded to Oculus upon close-out of the project. The Division obtained a refund from the City in the amount of \$800.34 for overpayment on planning/engineering expenses. The Grants Section has implemented an electronic approval routing memo for distribution to leadership to establish additional controls ensuring reimbursements are supported by accurate costs. RTP no longer uses the Division of Recreation and Parks' Form DRP-115, Payment Request Summary Form, to ensure that reimbursements are approved in accordance with DEP Directive 300. DEP Form 55-223, Payment Request Summary Form, has taken its place as it does not require signature from the Grant Manager or Division staff. The Division acknowledges the delegation under DEP Directive 110. All project completion documentation and reimbursements are reviewed by the Grants Section. The Division Director and Budget Coordinator now provide the final approval through ELFF for submission to the Division of Administrative Services Bureau of Finance and Accounting.

INTERNAL INVESTIGATIONS SECTION

The Inspector General is responsible for the management and operation of the Department's Internal Investigations Section. This includes planning, developing and implementing an internal review system to examine and investigate allegations of misconduct on the part of the Department's employees.

The investigative duties and responsibilities of the Inspector General, as defined in Section 20.055, F.S., include:

- ❖ Conducting, supervising, and coordinating investigations designed to detect, deter, prevent, and eradicate fraud, waste, mismanagement, misconduct, and other abuses in the Department;

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- ❖ Receiving complaints and coordinating all activities of the Department, as required by the Whistle-blower’s Act pursuant to Sections 112.3187 – 112.31895, F.S.;
- ❖ Receiving and reviewing all other complaints (non-Whistle-blower’s Act), and conducting such inquiries and investigations as the Inspector General deems appropriate;
- ❖ Conducting investigations related to alleged employee misconduct or reporting expeditiously to the Florida Department of Law Enforcement or other law enforcement agencies, as deemed appropriate by the Inspector General;
- ❖ Conducting investigations and other inquiries that are free of actual or perceived impairment to the independence of the Inspector General or the staff in the OIG;
- ❖ Submitting the findings to the subject of each investigation in which the subject is a specific entity contracting with the State or an individual substantially affected, if the investigation is not confidential or otherwise exempt from disclosure by law; the subject shall be advised in writing that they may submit written response 20 working days after receipt of the findings; the response and the Inspector General’s rebuttal, if any, must be included in the final report; and
- ❖ Submitting in a timely fashion, final reports on investigations conducted by the OIG to senior management and applicable Departmental management, except for Whistle-blower investigations, which are conducted and reported pursuant to Section 112.3189, F.S.

ACCREDITATION



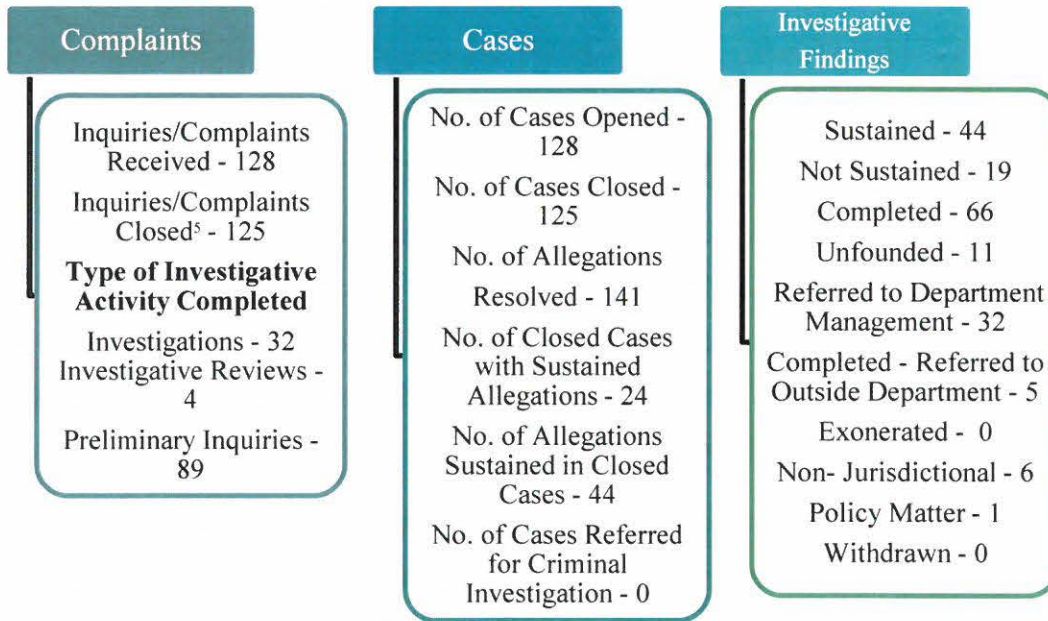
An accreditation program has long been recognized as a means of maintaining and verifying the highest standards of Investigation. The Commission for Florida Law Enforcement Accreditation (CFA) was formed in 1993, which initially was limited to law enforcement and correctional agencies. In 2009, Offices of Inspectors General were offered the opportunity to also become accredited. The CFA worked closely with Florida’s Inspectors General to develop professional standards for Florida Inspector General Investigative functions.

In August 2009, an assessment team from the CFA examined the policies, procedures, and operations of the Department’s Office of Inspector General, Investigations Section. The

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assessment team determined that all requirements of the 42 standards were complied with and accredited status was awarded by the CFA Commission in October 2009 for a three-year period. Reaccreditation assessments were completed, and the CFA Commission voted to award reaccredited status in September 2012, October 2015 and October 2018. The next assessment is scheduled for July 2021.

TYPES OF INVESTIGATIVE ACTIVITY



⁵ Some cases closed during FY 2019-2020 were opened in previous fiscal years

CASE SUMMARIES

II-01-07-2019-030 – Complaint received from the Bureau of Human Resource Management regarding allegations of unprofessional conduct and negative responses from supervisors and an employee. This investigation was conducted to determine whether the alleged subjects’ conduct violated DEP Directive 435, F (6) (a), Conduct Unbecoming a Public Employee. Based on interviews conducted and evidence gathered during this investigation, three allegations were Not Sustained, and one was Sustained.

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II-01-07-2019-045 – Complaint received from management alleging misuse of State personnel and State resources by an employee. During the course of the investigation, the subject resigned their position with the Department. Based on the substantive evidence, this investigation, determined that the employee’s conduct was a violation of DEP Directive 435, F (6) (c), Conduct Unbecoming a Public Employee. Due to the employee’s resignation, this investigation was closed as Completed.

II-01-12-2019-048 – Complaint received from the Bureau of Human Resource Management alleging inappropriate comments and touching by an employee. Based on testimony and supporting evidence obtained during the investigation, the alleged violation of DEP Directive 400, Sexual Harassment was Not Sustained; however, the alleged violation of DEP Directive 435, F (6) (a), Conduct of Unbecoming a Public Employee was Sustained.

II-01-12-2019-053 – Complaint received from management regarding allegations of an employee’s inappropriate conduct and creating an adverse work environment toward another employee. Based on evidence gathered during the investigation, an alleged violation of DEP Directive 435, F (6) (a), Conduct Unbecoming a Public Employee was Sustained, and the alleged violation of DEP Directive 436, Discrimination and Harassment was Not Sustained.

II-01-07-2019-056 – Complaint received from the Bureau of Human Resource Management regarding allegations of discrimination. Based on testimony and evidence gathered during the investigation, the alleged violation of DEP Directive 436, (A), Discrimination and Harassment/Employee Responsibilities was Not Sustained; however, a violation of DEP Directive 435, F (6) (a), Conduct Unbecoming a Public Employee was Sustained.

II-01-07-2019-063 – Complaint received from management regarding allegations of staff being instructed to falsify timesheets, negligence, low morale, discriminatory management practices, sexual harassment and creating an uncomfortable work environment. Based on evidence gathered during this investigation, a violation of DEP Directive 425, Attendance and Leave, 4 (a), General Supervisory, Leave Usage, Leave Accrual and Pay Compensation Responsibilities, and 8 (a), Overtime Compensation was Sustained, DEP Directive 435, a violation of Conduct of Employees, F (2), Negligence and (6) (a), Conduct Unbecoming a Public Employee was Sustained. The alleged violation of DEP Directive 400, Sexual Harassment was Not Sustained.

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II-01-07-2019-068 – Complaint received from the Bureau of Human Resource Management regarding allegations of conduct unbecoming by an employee. Based on interviews conducted and evidence gathered during this investigation, the allegation of DEP Directive 435, F (6) (c), Conduct Unbecoming a Public Employee was Unfounded. There were two alleged violations of DEP Directive 435, F (6) (a) Conduct Unbecoming a Public Employee, one was Unfounded and one was Sustained. Additionally, a violation of the DEP Health and Safety Manual Chapter 7, Standards for Safe Work Practices was Sustained.

II-01-14-2019-069 – Complaint received from the Bureau of Human Resource Management regarding allegations of discrimination and harassment by two employees. Based on testimony and evidence gathered during this investigation, the alleged violation of DEP Directive 436, (A) Discrimination and Harassment/Employee Responsibilities was Not Sustained; however, both employees were determined to have violated DEP Directive 435, F (6) (a), Conduct Unbecoming a Public Employee and the findings were Sustained.

II-04-17-2019-071 – Complaint received from the Bureau of Human Resource Management regarding allegations of conduct unbecoming by an employee. Based on the interviews conducted and supporting documentation, the alleged violation of DEP Directive 435, F (6) (b), Conduct Unbecoming a Public Employee was Sustained.

II-01-12-2019-072 – Complaint received from an employee regarding allegations of discrimination by their supervisor. Based on evidence gathered during this investigation, alleged violation of DEP Directive 436, Discrimination and Harassment was Unfounded.

II-01-15-2019-075 – Complaint received from management regarding allegations of a hostile work environment, conduct unbecoming and sexual harassment. Based on the interviews conducted and evidence gathered during this investigation, the allegations of sexual harassment and discrimination/harassment were unsubstantiated and did not rise to the level of sexual harassment or discrimination/harassment. The allegations were determined to be a violation of DEP Directive 435, F (6) (a) Conduct Unbecoming a Public Employee, which was Sustained.

II-04-07-2019-076 – Anonymous complaint received regarding allegations of nepotism. Based on evidence gathered, three alleged violations of DEP Directive 407, Nepotism were Sustained.

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II-01-07-2019-078 – Complaint received from management regarding allegations of harassment, which included sexual harassment. Based on evidence gathered during this investigation, the alleged violation of DEP Directive 436, Discrimination and Harassment was Not Sustained and the alleged violation of DEP Directive 400, Sexual Harassment was Unfounded.

II-01-07-2019-079 – Complaint received from management regarding concerns with an inappropriate text message sent by an employee. Based on sworn testimonies and admission of guilt by the subject, a violation of DEP Directive 435, F (6) (a), Conduct Unbecoming a Public Employee was Sustained; however, the alleged violation of DEP Directive 436 (a), Discrimination and Harassment was Not Sustained.

II-01-07-2019-080 – Anonymous complaint received regarding allegations of violation of laws or department rules, poor performance, conduct unbecoming, and violation of the Department’s smoking policy. Based on evidence gathered during this investigation, violations of DEP Directive 435, F (5) Violation of Law or Department Rules, DEP Directive 435, F (1) (b), Poor Performance, and DEP Directive 366, Smoking Policy were all Sustained. The alleged violation involving DEP 435, F (6) (c), Conduct Unbecoming a Public Employee was determined to be a Policy Matter.

II-01-07-2019-084 - Complaint received from the Bureau of Human Resource Management regarding allegations of a hostile work environment. Before the Office of Inspector General could contact the alleged offender and prospective witnesses for the purpose of obtaining sworn statements, we were informed that management had spoken to and counseled the employee about their conduct in the workplace. Based on management’s actions, this investigation was closed as Completed.

II-01-07-2019-085 – Complaint received from the Bureau of Human Resource Management regarding concerns with an employee making inappropriate comments. Based on evidence gathered during this investigation, a violation of DEP Directive 435, F (6) (a), Conduct Unbecoming a Public Employee and DEP Directive 290, D (5) (c), Internal Investigations Standards and Procedures – Responsibility were both Sustained.

II-01-07-2019-086 – Complaint received from management regarding allegations of disruptive behavior in the workplace. Based on sworn interviews and evidence gathered during this

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investigation, a violation of DEP Directive 421, Violence Free Workplace Policy and DEP Directive 435, F (6) (a), Conduct Unbecoming a Public Employee were both Sustained.

II-04-14-2019-091 – Complaint received from an employee regarding allegations of retaliation by management. Based on information gathered during this preliminary inquiry, the alleged violation of DEP Directive 436, (F), Discrimination and Harassment was Not Sustained.

II-01-01-2019-095 – Complaint received regarding allegations of a hostile work environment and inappropriate conduct by staff. Based on evidence gathered during this investigation, two allegations of DEP Directive 436, Discrimination and Harassment were Unfounded and the alleged violation of DEP Directive 435, F (6) (a), Conduct Unbecoming a Public Employee was Not Sustained.

II-03-27-2019-106 – Complaint received from the Bureau of Human Resource Management regarding allegations of employees using drugs in state owned buildings. Based on supporting documentation gathered during this investigative review, alleged violations of DEP Directive 435, F (6), Conducting Unbecoming a Public Employee, DEP Directive 366, Smoking Policy, DEP Directive 435, F (5), Violation of Law or Department Rules, and DEP Directive 420, Drug-Free Workplace and Drug Testing, were all Not Sustained.

II-01-07-2019-110 – Complaint received from the Bureau of Human Resource Management regarding allegations of an employee making an inappropriate comment. Based on information gathered during this investigation, the alleged violation of DEP Directive 435, F (6), Conduct Unbecoming a Public Employee was Not Sustained.

II-01-07-2019-114 – Anonymous complaint received regarding allegations of inappropriate behavior and hostile work environment by a manager. Based on sworn testimonies and evidence gathered during this investigation, the alleged violation of DEP Directive 436, Discrimination and Harassment was Unfounded, three violations of DEP Directive 435, F (6) (a), Conduct Unbecoming a Public Employee were Sustained and two violations of DEP Directive 290, D (5) (c), Internal Investigations Standards and Procedures – Responsibility were Sustained.

II-01-28-2020-002 – Complaint received from management regarding allegations of an employee violating law or department rules. Based on sworn interviews and evidence gathered

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during this investigation, a violation of DEP Directive 435, F (5), Violation of Law or Department Rules, to wit, Section 806.13, F.S., - Criminal Mischief, was Sustained.

II-01-20-2020-003 – Complaint received from the Office of the Chief Inspector General regarding allegations of retaliation. The alleged actions involved potential violations of harassment/discrimination, conduct unbecoming, and negligence. Based on evidence gathered during this investigation, the alleged violation of DEP Directive 436, Discrimination and Harassment and DEP Directive 435, F (2), Negligence were Unfounded. The alleged violation related to DEP Directive 435, F (6) (a), Conduct Unbecoming a Public Employee was Sustained.

II-01-07-2020-006 – Complaint received from the Bureau of Human Resource Management regarding allegations of conduct unbecoming and discrimination. After reviewing the documentation received in the complaint, the OIG reached out to an employee who had pertinent information related to the complaint for additional information. Based on the employee being non-responsive to the request and a lack of information, the alleged violations of DEP Directive 435, F (6) (a) and DEP Directive 436, Discrimination and Harassment were closed as Completed.

II-01-07-2020-009 – Complaint received from management regarding concerns of missing deposits. During this investigation, the subject resigned their position with the Department. Based on witness testimony, a violation of DEP Directive 435, F (5), Violation of Law or Department Rules, to wit: 812.014, F.S. – Petit Theft was Sustained. However, due to the resignation of the employee, this investigation was closed as Completed.

II-01-26-2020-015 – Complaint received from the Bureau of Human Resource Management regarding allegations of an employee committing theft. During this investigation, the employee tendered his resignation. Based upon witness testimony and irrefutable video evidence, this investigation determined that the employee's conduct was a violation of DEP Directive 435, F (5), Violation of Law or Department Rules. Due to the employee's resignation, this investigation was closed as Completed.

II-01-07-2020-017 – Complaint received from management regarding allegations of an employee allowing a private vehicle to enter a DEP Park without paying and also allowed the individuals in the private vehicle to ride in a state vehicle with the employee and another Park

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employee. Based on sworn testimony by the subject, violations of DEP Directive 435, F (5), Violation of Law or Department Rules, to wit: Section 112.313, F.S. – Misuse of Public Position; Division of Recreation & Parks Operations Manual, 1.2, (1) (4); and DEP Directive 435, F (6) (b) Conduct Unbecoming a Public Employee were Sustained.

II-01-07-2020-025 – Complaint received from management regarding concerns about a law enforcement training exercise that was conducted at a park. The allegations were that management was negligent in notifying staff about the training exercise and what to expect when reporting to work the day of the training exercise. Based on evidence gathered during this investigation, a violation of DEP Directive 435, F (2), Negligence was Sustained.

II-01-12-2020-026 – Complaint received from management regarding allegations of an employee verbally attacking another employee in the workplace. Based on sworn testimony and evidence gathered during this investigation, the allegation of DEP Directive 421, Violence Free Workplace Policy was Not Sustained; however, a violation of DEP Directive 435, F (6) (a), Conduct Unbecoming a Public Employee was Sustained.

II-01-03-2020-028 – Complaint initiated by the OIG regarding allegations that supervisors were directing staff to falsify timesheets. Based on evidence gathered during this investigation, it was determined that two supervisors violated DEP Directive 435, F (2), Negligence; and DEP Directive 435, F (6) (b), Conduct Unbecoming a Public Employee resulting in two Sustained findings for both supervisors. The investigation determined that the manager of these two supervisors was unaware of the actions being taken; therefore, the alleged violation of DEP Directive 435, F (2), Negligence was Unfounded.

II-01-07-2020-031 – Complaint received from the Bureau of Human Resource Management regarding allegations of an employee stalking another employee and their family, which resulted in threats of violence if the stalking continued. Based on testimony and evidence gathered during this investigation, along with admission of guilt by the subject, violation of DEP Directive 421, Violence Free Workplace Policy was Sustained. The alleged violation of DEP Directive 435, F (5), Violation of Law or Department Rules, to wit: 784.048, F.S.– Stalking was Not Sustained and the alleged violation of DEP Directive 435, F (6) (a), Conduct Unbecoming a Public Employee was Unfounded.

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II-01-07-2020-032 – Complaint received from the Bureau of Human Resource Management regarding allegations of inappropriate touching by an employee. Based on evidence gathered during this investigation and the subject’s admission of guilt, a violation of DEP Directive 435, F (6) (A), Conduct Unbecoming a Public Employee was Sustained.

II-01-07-2020-058 – Complaint received regarding allegations of policy and safety violations being ignored by management. Based on testimony and evidence gathered during this investigation, violations of DEP Directive 435, F (2), Negligence; DEP Directive 435, F (5), Violation of Law or Department Rules; and DEP Directive 435, F (6) (a), Conduct Unbecoming a Public Employee were Sustained.

II-01-07-2020-064 – Complaint received from management regarding allegations of multiple violations of Department Policies and State law to include petit theft by a manager. During the course of this investigation, the manager submitted their resignation and returned the state property that had been identified during the investigation. Based on the resignation of the manager, the case was closed as Completed.

RECOMMENDED CORRECTIVE ACTIONS

Internal Investigations may make recommendations for the purpose of process improvement or corrective action. These recommendations are provided to Division management and are tracked to completion. There were no Program recommendations provided in investigative reports during FY 2019-2020.

CONCLUSIONS OF FACT DEFINITIONS

- ❖ Exonerated - Alleged actions occurred but were lawful and proper.
- ❖ Not Sustained - There is insufficient evidence to prove or disprove that a violation occurred.
- ❖ Sustained - There is sufficient evidence to justify a reasonable conclusion that the allegation is true.

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- ❖ **Unfounded** - The allegation is proved to be false, or there is no credible evidence to support it.
- ❖ **Policy Matter** - The alleged actions occurred but were not addressed by Departmental policy.
- ❖ **Non-Jurisdictional** - Not within the jurisdiction of the Department of Environmental Protection.
- ❖ **Withdrawn** - The cancellation of an investigation, after agreement between management and the Office of Inspector General that the original complaint was filed, but no longer warrants review. (Complainant requests withdrawal or is non-responsive to investigative efforts).
- ❖ **Completed** - Closure for background checks, public records requests, preliminary inquiries, investigative reviews, and miscellaneous complaints that do not warrant an investigation.



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