

Charlie Crist
Governor



George H. Sheldon
Secretary

Enhancing Public Trust in Government

Annual Report



*“Provide leadership in the promotion
of accountability and integrity of State Government”*

September 29, 2009



**State of Florida
Department of Children and Families**

Charlie Crist
Governor

George H. Sheldon
Secretary

September 29, 2009

Dear Secretary George H. Sheldon:

Pursuant to Section 20.055(7), Florida Statutes, I am pleased to present our FY 2008-09, Office of Inspector General (OIG) Annual Report. In our efforts to promote accountability and efficiencies in government, our office has been busy this year preparing for the Inspector General Investigations Accreditation. It is anticipated on October 28, 2009, at the Commission for Florida Law Enforcement Accreditation meeting, that the Department of Children and Families, Office of Inspector General, will receive the first in the state (and nation) Inspector General Accreditation.

This year, we also received a Davis Productivity award for our Investigative Outreach Program. The outreach provides an overview of the role of the OIG, mandatory reporting requirements, early detection signs and "red flags" to watch out for pertaining to fraud and falsification. Since inception, over 1,400 state and provider employees received this training. In addition, we rolled out our Davis Productivity award winning enterprise audit management system for all inspector general and audit communities to utilize.

In an effort to recognize employees, the Investigations Unit implemented an "Investigative Star of the Year" award. This award serves to recognize staff who demonstrate outstanding performance in the categories of Innovation, High Performance, Teamwork, or Going the Extra Mile. Orlando Regional Investigator Oscar Restrepo was the first recipient of the award. Mr. Restrepo, who has been with the unit for approximately 10 years, received the award for excellence in Teamwork. During staff reductions and increasing caseloads, Oscar led the way in accepting additional case assignments.

Confronted with the challenges of budget reductions, we continually reassess our workload while ensuring we maintain the quality of our work product. Some changes that have been implemented to meet increasing workload demands include:

- Increase of management inquiries in lieu of investigations.
- Rule change to allow fair hearings by telephone resulting in a more customer friendly process and an improvement of Department staffs time management.
- Prioritizing audit topics based on high risk and current events.

The benefit of maintaining transparency and enhancing trust in government is invaluable to the citizens of Florida. To demonstrate our commitment to transparency we have posted our mission, annual and monthly reports, investigative reports and audits on our website at <http://eww.dcf.state.fl.us/~osig/>.

The DCF OIG team is dedicated to demonstrating excellence, professionalism, meeting high standards, adding value and providing a positive impact. It is an honor to lead the DCF OIG team and I thank each member of our office for their continued commitment to work with a sense of urgency as they continue to raise expectations.

Sincerely,

Sheryl G. Steckler
Inspector General

cc: Melinda Miguel, Executive Office of the Governor, Chief Inspector General

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Executive Summary

HIGHLIGHTS

- ❖ **Accreditation Program** - On October 31, 2007, Governor Crist and the Florida Department of Law Enforcement, Commission for Florida Law Enforcement Accreditation, Inc. (CFA), announced the initiation of an accreditation program for the inspectors general investigative function. An accreditation program has long been recognized as a means of maintaining the highest standards of professionalism. Accreditation is the certification by an independent reviewing authority that an entity has met specific requirements and prescribed standards. The Commission for Florida Law Enforcement Accreditation worked closely with the Florida's Inspectors General to develop professional standards for the Inspector General Investigative functions. The standards were developed based upon comprehensive research of Florida Statutes, CFA operating standards, and Principles and Standards for Offices of Inspectors General. Effective July 1, 2009, OIG can now attain accredited status through the Commission for Florida Law Enforcement Accreditation, Inc.

During a two-week period between the end of April and beginning of May 2009, the Investigations Unit participated in a "mock" on-site accreditation assessment. The "mock" assessment was invaluable as it offered staff an opportunity to understand the accreditation process, what is expected of them individually and as a team, as well as an opportunity to identify any deficiencies.

The Department's Office of Inspector General (OIG) Investigations Unit final on-site accreditation assessment was held on August 6, 2009. The assessment was a huge success and as a result, the Investigations Unit is being recommended for full accreditation on October 28, 2009, at the Commission for Florida Law Enforcement Accreditation meeting. The Department of Children and Families, Office of Inspector General, will be the **first** in the **nation** to achieve **Inspectors General Accreditation**.

- ❖ **Davis Productivity Award** - The **Investigations Unit** received this award for their outreach program. This program is presented to staff of the Department, Community Based Care providers, and their subcontractors. Training sessions are conducted to educate on the role of the Office of Inspector General, when to report suspected employee wrongdoing, and how to recognize violations of statute, rule, policy, or contract. Falsification of records under §839.13(2)(a) and §839.13(2)(c), Florida Statutes is discussed at length. In addition, an informative brochure is disseminated during the training sessions. Since inception in 2006, 1,425 Department and provider staff have received this training.
- ❖ **Investigative Star Of The Year Award** - During Fiscal Year 2008-09, the Office of Inspector General (OIG) Investigations Unit implemented an employee recognition program referred to as the Investigative Star of the Year. This program serves to recognize and reward investigative staff (investigators, intake, and administrative staff) who demonstrates outstanding performance in the categories of Innovation, High Performance, Teamwork, or Going the Extra Mile. The Inspector General and Chief of Investigations review the nomination forms. The staff member chosen for the award receives a certificate of commendation from the Inspector General and his or her name is engraved on an Investigative Star of the Year plaque. The plaque remains in that staff member's field office until the following year when a new recipient is selected.

The first recipient of the Investigative Star of the Year award was Regional Investigator Oscar Restrepo from the Orlando field office. Mr. Restrepo has been with the OIG Investigations Unit for approximately ten years and his continued dedication to the mission and role of the OIG remains above and beyond the call of duty. During staff reductions and increasing workloads, Mr. Restrepo willingly accepted additional cases and still managed to complete cases within required time standards. During the last three fiscal years (FY 2006-07, FY 2007-08, and FY 2008-09), Mr. Restrepo completed more investigations than any other investigator statewide. Mr. Restrepo is a true team player and is committed to the mission of the office.

- ❖ **Appeal Hearing Notices** – With the implementation of the telephone hearing process, all notices to our customers created by the office's web application have been rewritten to reflect the various hearing options available. The office sends approximately 20,000 letters to customers each year. Once the new format for the notices was established, the office began a project to provide all notices in English, Spanish or Creole.

Executive Summary – cont'd

OUTCOMES – FY 2008-2009

Investigations

- 99 cases were opened for Investigation and 2 Management Review.
- 101 cases were completed (100 Investigations and 1 Management Review).
- 8 investigations revealed a total of \$52,573.56 in losses incurred by the Department with \$5,327.00 restitution awarded.
- 738 complaints were referred to circuit/management as management referrals (required no response to the Investigations Unit).
- 144 complaints were referred to circuit/management as management inquiries (required a written response to the Investigations Unit).
- 223 complaints were closed with no action and 6 were non-jurisdictional (referred to other agencies for handling).

Internal and Single Audit

- 7 audits and 5 consulting reports were published, which included 34 recommendations and identified \$157,607 in questioned costs, duplicate billings, and ineligible costs were made.
- 13 external report responses were coordinated for the Department and 68 liaison activities for the Office of the Auditor General, Office of Program Policy Analysis and Government Accountability, and Federal agency requests for responses and information regarding audits and reviews were coordinated.
- 7 external follow-up audits were conducted.
- 275 A-133 and other CPA audit reports were reviewed and processed.

Appeal Hearings

- 8,672 fair hearing requests were completed.
- 155 disqualification hearings for Temporary Assistance for Needy Families or for Food Stamp benefits were completed.
- 1,778 waivers of Administrative Disqualification Hearings were processed.

TECHNOLOGY

Integrated Internal Audit Management System (IIAMS) Enterprise - The Davis Productivity Award winning IIAMS is now an enterprise system for the audit community. Twelve Inspector General Audit offices are now utilizing the system. In addition, the Auditor General's Office is piloting the system. The IIAMS includes project management, audit documentation, supervisory review/approval, timekeeping, training records and an extract and reporting function. When implemented, IIAMS will save Florida taxpayers over \$200,000 per year in software licensing expenditures. Additionally, the system is currently being used by several other state agencies. The global impact will not only be a substantial savings to the state, but will also introduce standardization across agency lines.

Inspector General's Search Engine - The Inspector General and Information Systems staff completed a new search engine project for the Inspector General's intra and inter-net website. This newly implemented tool provides any individual additional search options to locate investigations and/or audit reports. Reports are located at <http://www.dcf.state.fl.us/admin/ig/reports/Default.aspx> or <http://www.dcf.state.fl.us/admin/ig/reports/auditsearch.aspx>.

Investigations Case Management System (ICMS) – This system won a Davis Productivity Award, which incorporates Accreditation and the Association of Inspectors General Principles and Standards. This fiscal year, the Executive Office of the Governor, Chief Inspector General's Office, had requested the ICMS for their use. The system is available for any Inspector General office to utilize.

Section A: About Us

Statutory Requirements

The **Office of Inspector General** is established in each state agency to provide a central point of coordination and responsibility for promoting and ensuring an enhanced level of accountability, integrity, and efficiency in government relationships with the people it serves. In accordance with section 20.055, Florida Statutes, which requires the Inspector General to be appointed by, report to, and be under the general supervision of the agency head, the Inspector General reports directly to the Secretary. Organizationally positioned in the Office of the Secretary, the Office of Inspector General handles the following duties and responsibilities:

- ◆ Directs, supervises, and coordinates audits, investigations, and management reviews.
- ◆ Conducts, supervises, and coordinates activities that promote economy and efficiency and prevent or detect fraud, waste, and abuse.
- ◆ Reviews actions taken to improve program performance and makes recommendations for improvement.
- ◆ Keeps agency heads informed about fraud, abuses, and deficiencies and recommends corrective measures.
- ◆ Ensures effective coordination and cooperation between the Auditor General, Federal auditors, and other governmental entities.
- ◆ Reviews rules relating to programs and operations and makes recommendations regarding impact.
- ◆ Advises in development of performance measures, standards, and procedures for evaluation of programs.
- ◆ Assesses the reliability and validity of information provided on performance measures and standards and makes recommendations as needed.
- ◆ Ensures appropriate balance between audit, investigative and other accountability activities.

Core Values

The following core values contribute to the Office of Inspector General foundation:

- **Accountability**: We are committed to serving as highly respected stewards of taxpayer dollars. Constantly bearing in mind that our inquiries may adversely affect people's livelihood, we accept full responsibility for our actions.
- **Excellence**: We strive to be an efficient, objective, and fact-finding office. We have high expectations for quality and timely work products. We stand committed to improve our performance to benefit our customers and stakeholders.
- **Professionalism and Integrity**: We maintain the independence and impartiality necessary to perform our mission objectively. We accommodate differences of opinion without compromising principle. We practice good citizenship with emphasis on ethics and acceptance of social responsibility.
- **Communication**: We listen to, learn from, and collaborate with our customers, stakeholders, and each other. We believe that effective communication, upward, downward, and laterally, is of utmost importance to our individual and combined success.
- **Orientation to Action**: We are proactive and add value within and beyond our daily job function.
- **Sense of Urgency**: We recognize and act on issues that require immediate attention.
- **Teamwork**: We challenge each other to work cooperatively. Employees at all levels are involved in developing and continually improving work processes.
- **Agility**: We are flexible and innovative. We readily accept changes intended to improve our operations.

Section A: About Us

INITIATIVE

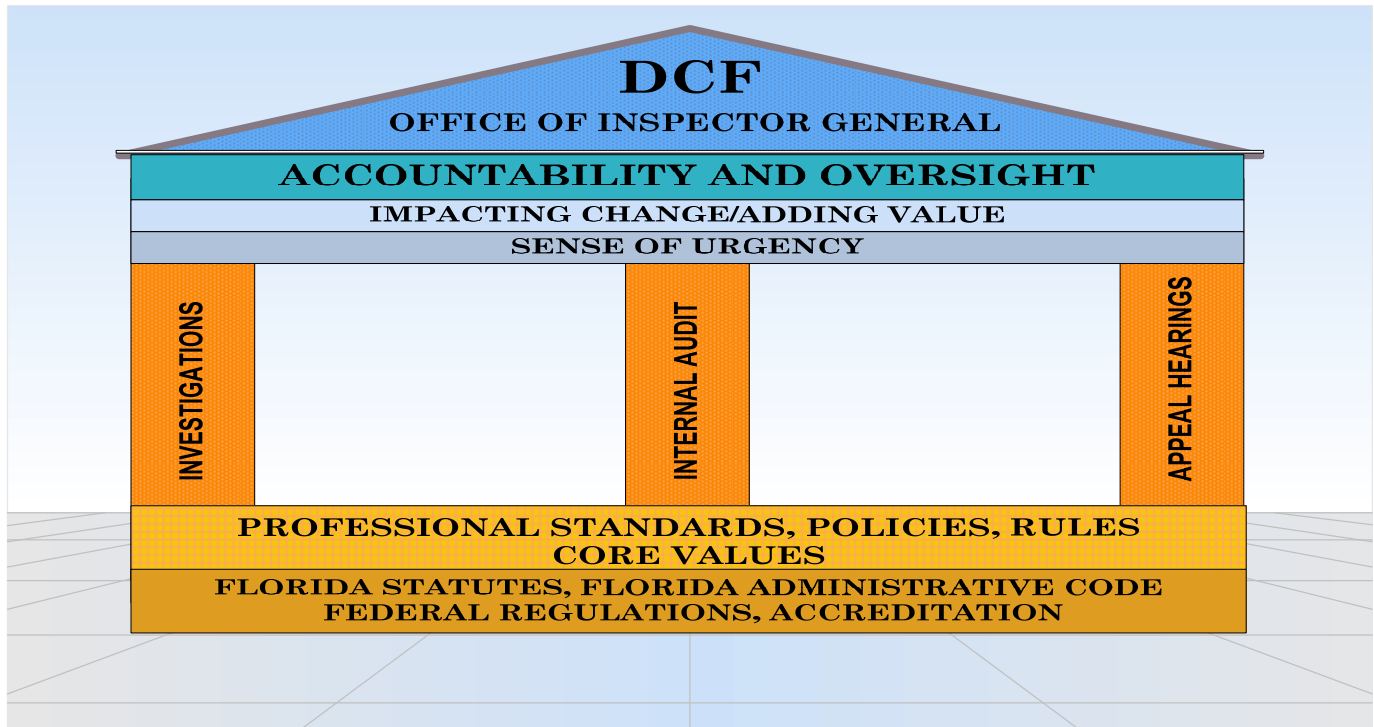


Figure A.1: Office of Inspector General - Pillars for Enhancing Public Trust in Government

The Office of Inspector General is committed to excellence and strives to work with a sense of urgency. In addition to the workload demands, the office has several on-going initiatives:

- The investigations unit is poised to receive, the first in the nation, Inspector General Accreditation.
- Internal Audit's award winning automated management system has been modified to allow other governmental audit groups to use the centrally located database and web application. The global impact will not only be a substantial savings to the state, but will also introduce standardization across agency lines.
- The Appeal Hearings telephone hearing process is providing a timely and customer friendly service, while providing a tool to assist in keeping up with the increasing hearing request demands.

OIG Professional Certifications/Licensures

Staff members are officers on the following boards: Association of Inspectors General (National) - 2nd Vice President; Association of Inspectors General (Tallahassee Chapter) – President, Treasurer

In addition, staff members hold the following certifications and/or licensure:

- ◆ Certified Fraud Examiner
- ◆ Certified Government Auditing Professional
- ◆ Certified Hearing Officials
- ◆ Certified Information Systems Auditor
- ◆ New Jersey Bar Association licensure.
- ◆ Certified Inspectors General
- ◆ Certified Inspectors General Investigator
- ◆ Certified Internal Auditor
- ◆ Certified Public Accountant
- ◆ Certified Public Managers

Section A: About Us

Organizational Chart FY 2008-2009

The Office of Inspector General is comprised of three sections: Investigations, Internal and Single Audit, and Appeal Hearings, totaling 52 positions. Each section¹ operates out of field offices located throughout the state, with the exception of Internal and Single Audit.

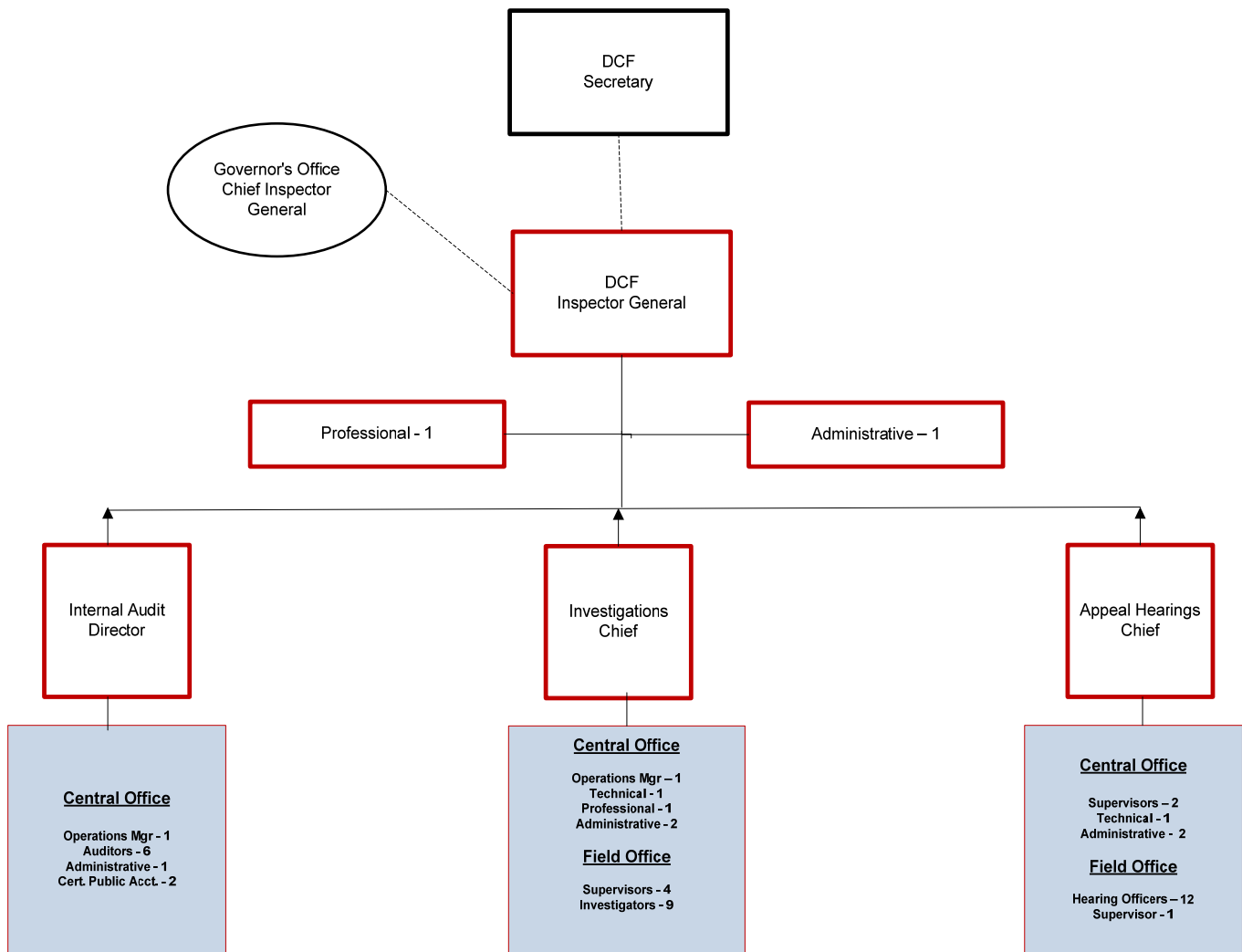


Figure A.2: Office of Inspector General Organizational Chart of authorized positions for FY 2008-2009.

¹ Field Offices

Investigations – Tallahassee, Ft. Lauderdale, Orlando, Tampa

Appeal Hearings - Tallahassee, West Palm Bch, Ft. Lauderdale, Miami, Tampa, Pensacola, Ft. Pierce, Gainesville, Orlando, Jacksonville

Section A: About Us

STRATEGIC DIRECTION

“COMMITMENT TO MAKING AN IMPACT AND A SENSE OF URGENCY”

The **Investigations Unit** incurred a reduction in staff during FY 2008-09, resulting in a need to re-assess the types of investigations to be investigated. In an effort to streamline the investigative process and improve the timeframe in which cases remain actively worked by staff, the Chief of Investigations consulted with representatives of the Office of Learning and Organizational Effectiveness. A Process Map was developed for each type of investigation, which included outlining the necessary steps and case milestone timeframes for investigations as well as identified potential activities causing delays in achieving time standards. Creating a detailed process map was extremely useful and allowed for implementation of changes to the investigative process itself; which led to a reduction in the length of time cases are investigated.

Evidence of this can be found in comparing case timeliness statistics for FY 2007-08 and FY 2008-09 which revealed a distinct reduction in the amount of time staff took to complete cases. The average time to case closure went from 85.2 to 65.9 days (a difference of 19.3 days). In cases that were coordinated with law enforcement for criminal investigation, the number decreased from 103.6 to 91.7 days (a difference of 11.9 days).

The **Internal Audit Unit** has established procedures to continuously evaluate how the office conducts its business. A part of this process is an annual retreat where all processes can be challenged, questioned and modified. This event traditionally includes only audit staff; however, this year a member from the Office of Learning and Organizational Effectiveness was asked to facilitate. In addition to providing a different perspective on our work process, an evaluation of whether audit's strategies aligned with the agency's direction was performed.

The core internal audit business processes of communication and planning were the primary focus of discussion. Specifically discussed were the methods and the process for time allocation to audit projects and the development of a formal audit planning document. A formal audit planning document summarizes all preliminary audit planning meetings, preliminary audit background research and potential audit findings. Based on this summarized planning document, a go/no-go recommendation to audit management is made regarding if a project should be instituted. The recommendation also includes a statement regarding the nature and timeframes of the project. To ensure all parties have a clear understanding of the scope and objectives of the project aims with the time allotted to the project, the final go/no-go decision comes out of a meeting with the audit team, and is approved or rescinded by the Audit Director and the Inspector General.

An additional focus in our planning session was to “increase the impact of our work product on Department of Children and Families clients” and create a quality workforce in the Inspector General office with a “sense of urgency”. The theme of “client impact” has been incorporated into our required risk assessment and annual planning process. This past fiscal year, audits were performed in the areas of foster parent training and licensure and the availability of foster child case records. Both of these projects were completed in time for the legislative session where business and training issues were considered.

Section A: About Us

The **Appeal Hearings Unit** has also faced staff reductions and an increasing caseload. The current economic situation has caused an increase in the number in families receiving public assistance. In response to the Secretary's direction, of finding new ways to get the job done with limited resources, with a sense of urgency and with the customer in mind, the Appeal Hearings Unit proposed the implementation of a telephone hearing process. This process had to provide efficiencies, while not adversely affecting its customer's due process rights.

The office had to overcome two hurdles to implement telephone hearings. The first was the Food Stamp Program's limitations on the methods of conducting telephone hearings. A waiver was requested and received from United States Department of Agriculture (USDA) to allow hearings to be conducted by telephone. However, USDA did require that an option be included to provide a face-to-face hearing at the customer's request.

The second hurdle was the requirement of the Florida Uniform Rules of Procedure (which all state agencies must follow when conducting hearings); that when a witness appears by telephone or video conference, a notary who is physically present must swear that witness in. As our customers participating by telephone generally are not in a location where a notary is present, this requirement greatly limited the number of cases that could be conducted by telephone. As such, for the effective administration of a program, the office requested a waiver of the uniform rule requirement from the Administration Commission. In March 2009, the office received approval of its petition to waive the requirement and now has the option to proceed in the most efficient and effective method of conducting the hearing to meet the individual customer's needs.

To develop an implementation plan, Appeal Hearings staff met with members of the Office of Learning and Organizational Effectiveness to evaluate and strategize for efficiency in the process. A matrix was designed to identify the steps in the hearing process that required change. A statewide workgroup was established with Appeal Hearings staff, circuit operational staff, and regional and headquarters staff to develop the new process. In order to comply with federal regulatory requirements and meet the needs of our customers, the workgroup established three basic types of hearings:

- Face-to-face hearings where all parties appear at the hearing;
- Local office hearings where the customer and circuit staff are at a local office with the hearing officer appearing by telephone; and
- All individuals, to include the hearing officer, circuit staff and customer appear by telephone.

The office began implementing the telephone hearings in April 2009. The Office of Appeal Hearings also developed best practices in implementing the telephone hearing process, which included new prehearing procedures for all parties; controlling the hearing; and the flow of evidence making sure that the record is fully developed. To date, the office has fully implemented the telephone hearings in counties where there is no hearing officer housed, reducing travel time and expense. The office anticipates increased efficiencies in the hearing process, which will assist in meeting its goal of timely providing fair hearing decisions and assuring the benefits necessary for our families to become self-sufficient.

Section A: About Us

During the Office of Inspector General (OIG) strategic planning process, the Office's strategic accomplishments over the past fiscal year as well as its vision and mission statement were discussed. This year's planning included a keen focus on "Impact".

Specifically, the questions of how the OIG impacts the Department and how the Department's initiatives impact the OIG were examined. The planning phase was interactive with senior management within the Office of Inspector General and a facilitator from the Office of Human Resources, Office of Learning and Organizational Effectiveness.

During the planning phase, a new strategy formulation called "scenario planning" was incorporated. The premise behind scenario planning is that the future is uncertain. In other words, any set of strategies chosen by an organization may be the wrong strategies if the environment changes substantially. To factor in uncertainty, an organization should prepare multiple sets of strategies and deploy the set that seems most appropriate in the emerging environment.

The three environments of the scenario planning are:

- Depression scenario – the economy falters significantly and customers stop buying nonessential products and services.
- Utopian scenario – customer confidence and purchasing power boom and the demand for products and services at all cost points increases significantly.
- Status quo scenario – the world changes little from the way it is now.

The following "What If's" were considered during strategy generation based on a close reading of our environment and as our environment changes or shifts toward a different scenario:

- Change in Statute
- Critical/Costly Mistakes
- External Demands causing impact on internal workload
- Budgetary Staff Reduction
- Change in OIG Management
- Knowledge Management
- Administrative Direction
- Global Positioning System (GPS)
- Internal Impact (ACCESS and Department initiatives)

A more in-depth evaluation of the "Change in Management" and "Internal Impact" scenarios created the following three new objectives:

- Reduce the effects of Department Initiatives on the OIG.
- The OIG work product will enhance the Department's ability to achieve its strategic direction.
- Establish an IG-wide initiative, using the Department's data systems/technology, to identify risk and opportunities.

In establishing these objectives, consideration was given to the prior year's strategic plan. Any objective from the prior year that adds value was retained. Those objectives that were considered no longer feasible were deleted and those that were not met were updated. Actionable strategies, along with success indicators, were developed for each objective.

What follows is an outline of the strategic plan that incorporates the aforementioned scenario-planning methodology.

Section A: About Us

OFFICE OF THE INSPECTOR GENERAL

Leadership – Relationship Building

MISSION: Enhancing Public Trust in State Government

OBJECTIVE

Recognized and respected as an entity that impacts the outcomes for the Department

Success Indicator:	Strategies:
<ul style="list-style-type: none"> • Appropriate requests by management and providers for IG services. • Recognition by Leadership. <ul style="list-style-type: none"> ○ Expectations Met: <ul style="list-style-type: none"> ▪ Quality ▪ Timeliness/Sense of Urgency • Decrease in repeat Audit and Investigative findings and increase in corrective action. 	<ul style="list-style-type: none"> • Communicate the role and mission of the OIG. • Enhance and increase the number of IG Advisories. • Production of quality reports that can withstand challenge and criticism. <ul style="list-style-type: none"> ○ Incorporate prior findings or recommendations from OIG work products ○ Investigations Cover Letter ○ Audit Impact Statements

OFFICE OF THE INSPECTOR GENERAL

Internal and External Impact

MISSION: Enhancing Public Trust in State Government

OBJECTIVE

Reduce the effects that Department initiatives have on OIG workload

Success Indicator:	Strategies:
<ul style="list-style-type: none"> • Reduction in non-Inspector General workload. • Reduce added workload assigned by external offices. 	<ul style="list-style-type: none"> • Ensuring client relations are responsive to customer needs. • Communicates and reports complaint data by Programs/Circuits/Institutions. <ul style="list-style-type: none"> ○ IG Monthly reports ○ IG Ad-hoc reports

Section A: About Us

<p>OFFICE OF THE INSPECTOR GENERAL Internal and External Impact</p> <p>MISSION: Enhancing Public Trust in State Government</p>	
<p>OBJECTIVE Establish an initiative using the department's data systems/technology to identify risk and opportunities.</p>	
Success Indicator:	Strategies:
<ul style="list-style-type: none"> • Identification of system/program weaknesses. • Reduction of Department vulnerabilities/liabilities. 	<ul style="list-style-type: none"> • Audit/Investigations collaborate to identify systems, resources, and timeframes necessary to accomplish objective. This will include identifying, outliers, exceptions, and other anomalies discovered using data minding activities.

<p>OFFICE OF THE INSPECTOR GENERAL Human Resources (Internal (OIG) Relationships)</p> <p>MISSION: Enhancing Public Trust in State Government</p>	
<p>OBJECTIVE To create a quality workforce in the IG's office with a Sense of Urgency.</p>	
Success Indicator:	Strategies:
<ul style="list-style-type: none"> • Succession plan developed. • Workplace stability. <ul style="list-style-type: none"> ○ Increase Internal promotions ○ Reduce turnover rate • Identification of training requirements. <ul style="list-style-type: none"> ○ Training Requirements met ○ Increase in cross trained staff • Hiring Protocol in place. <ul style="list-style-type: none"> ○ Internal/external advertising ○ Standard selection methodology 	<ul style="list-style-type: none"> • Make use of recognition model. <ul style="list-style-type: none"> ○ External recognition (Davis Productivity) ○ Internal recognition: <ul style="list-style-type: none"> ▪ OIG Innovation Award ▪ Investigations Star Award ▪ Recognition of outstanding performance by unit • Develop succession plan. <ul style="list-style-type: none"> ○ Identify positions and staff for succession ○ Individual Development Plan • Develop training/cross training plan. <ul style="list-style-type: none"> ○ Search and communicate training opportunities

Figure A.3: Outline of Office of Inspector General Strategic Plan

Section A: About Us

Innovation

ACCREDITATION

Accreditation is a coveted award that symbolizes professionalism, excellence, and competence. The accreditation program determines whether the Investigations unit has processes in place and whether they are being utilized throughout the state. These processes establish minimum standards for all with the goal of enhancing the quality of investigations. Accreditation is also a way in which organizations evaluate and improve their overall performance.

On October 31, 2007, the Governor's Chief Inspector General, along with the Florida Department of Law Enforcement (FDLE) Commission for Florida Law Enforcement Accreditation, Inc. (CFA) initiated an accreditation program for the inspectors general investigative function of state agencies. The program is the first of its kind in the nation for agency inspectors general. During Fiscal Year 2007-2008, the Governor's Chief Inspector General, in conjunction with the Commissioner of the FDLE prepared and submitted a feasibility study to the (CFA) to begin accrediting the Florida Inspector General investigative function across state agencies. The Department of Children and Families (DCF) Inspector General and Director of Internal Audit joined a team comprised of state agency Office of Inspector General (OIG) representatives for the purpose of creating the accreditation standards. Adherence to 40 standards will be required by each agency OIG investigative section to receive accreditation. The standards were approved by the CFA in February 2009 and went into effect on July 1, 2009.

During a two-week period between the end of April and beginning of May 2009, the DCF-OIG Investigations Unit participated in a "mock" on-site accreditation assessment. During this process, assessors traveled to the Tallahassee headquarters office as well as each of the three field offices (Tampa, Orlando, and Ft. Lauderdale). The assessors reviewed accreditation files, observed compliance to written directives, and conducted interviews of staff to include the Inspector General/Accreditation Manager, Accreditation Assistant, Chief of Investigations, Regional Investigator Supervisors, Regional Investigators, Office and Management Consultant Manager (Intake Manager), and support staff. The "mock" assessment was invaluable as it provided the Investigative Unit staff with a better understanding of the forthcoming final assessment and an opportunity to identify any deficiencies with respect to investigative processes.

The DCF-OIG Investigations Unit final on-site accreditation assessment was held on August 6, 2009. The unit met assessment criteria and as a result, the DCF-OIG is being recommended for accreditation on October 28, 2009 at the CFA meeting. The DCF-OIG will be the **first** OIG, in the **nation**, to achieve Inspector General Accreditation.

AMERICAN RECOVERY AND REINVESTMENT ACT

The American Recovery and Reinvestment Act (ARRA) of 2009 provide funds to be administered by the Florida Department of Children and Families (DCF). A significant theme in Federal guidelines that accompany these funds is the need for accountability and transparency. The Inspector Generals' Office embraces these guidelines and has developed an accountability methodology to aid DCF in the proper use of these funds.

The ARRA funding for the DCF provides funding for the ACCESS, Homelessness, Domestic Violence and Food Stamp programs spread out over several years. The Inspector General's Office staff has

Section A: About Us

participated and provided leadership in statewide work groups addressing ARRA accountability, specifically related to data quality and risk assessment. In addition, Internal Audit has established a process where auditors will work with program staff and inform management of possible issues as programs are established and when new Office of Management and Budget (OMB) guidance is issued by Federal partners. Further, informal communication with program staff has been established as the primary means to facilitate change and guide programmatic decisions. Periodic formal reports will detail audit efforts, management responsiveness and program accomplishments.

The DCF's service providers and contractors will be the recipient of portions of the ARRA funding. Audit reports for organizations subject to the Florida and/or Federal Single Audit Act, beginning with year ending June 30, 2009 and later, will be publicly available on the internet. This information will be available as a link from the Florida Recovery web site: <http://flarecovery.com>.

COMMUNITY OUTREACH

- The **Investigations Unit** has continued its outreach program with Community Based Care providers, their subcontractors, and Department staff. Training sessions are conducted to educate staff on the role of the Office of Inspector General, when to report suspected employee wrongdoing, and how to recognize violations of statute, rule, policy, or contract. Falsification of records under §839.13(2)(a) and §839.13(2)(c), Florida Statutes is discussed, at length. During Fiscal Year 2008-2009, a total of **23** training sessions were completed with the Department and **31** separate community based care and subcontractor agencies. In addition, the OIG also presented **6** sessions at the Child Welfare Professional Development Series in Tallahassee, Tampa, and Miami. Since inception in 2006, the Investigations Unit has trained over, **1,425**, Department and Provider staff. The Investigations Unit was presented with a 2009 Davis Productivity Award, for their outreach efforts.

To assist in the outreach, the Investigations Unit SunCoast Region team developed an informative brochure to disseminate during the training sessions. The brochure can be found at <http://www.dcf.state.fl.us/admin/ig/investBrochure.pdf>.

- In an effort to address the Federal Stimulus prevention of mitigating fraud, waste, error, and abuse, the Investigations Unit will extend its outreach efforts during Fiscal Year 2009-2010 statewide to the Office of Homelessness and Domestic Violence. The Outreach will involve training of program office staff, as well as the staff of Homelessness and Domestic Violence facilities. In an effort to prevent fraud, waste, and abuse, the Outreach training will also inform participants of their rights under the state and federal Whistle-blower Acts.
- The **Appeal Hearings** staff provided training to several areas Long Term Care Ombudsman Counsels in the nursing facility discharge fair hearing process. The ombudsmen are volunteers that assist nursing facility residents in resolving the resident's problems with nursing facilities. The training provides information that they can use in assisting the residents in making choices when they have received a notice from a nursing facility that the facility is intending to discharge the resident.

The office also assisted the ACCESS staff in updating their guide to the fair hearing process to include information on preparing for and representing the Department in fair hearings, including new staff responsibilities during telephone hearings.

Section B: Accountability and Results

Investigations

Intake is responsible for handling incoming calls and reviewing all correspondences received into the Investigations unit. Intake has set an internal goal of 5 days to review and make a decision of whether to send the correspondence to management as a referral, management inquiry or recommend investigative assignment to the Chief of Investigations. During fiscal year 2008-2009, Intake conducted the following:

Correspondences

- **738** correspondences were referred to circuit/management as management referrals (required no response to the Investigations Unit).
- **144** correspondences were referred to circuit/management as management inquiries (required a written response to the Investigations Unit).
- **223** correspondences were closed with no action and **6** were non-jurisdictional (referred to other agencies for handling).

Investigative Assignments

Investigations are assigned for Investigation¹ or Management Review², including those filed under the Whistle-Blower's Act³. While cases are typically administrative in nature, criminal violations are often discovered during the investigative process. When a determination has been made that the subject of an investigation has committed a potential criminal violation, those findings are coordinated with local law enforcement agencies or the Florida Department of Law Enforcement (FDLE) for criminal investigation, or are referred directly to the State Attorney's Office for criminal prosecution.

Investigations and Management Reviews

- **99** Complaints were opened for investigation and **2** management review.
- **8** Investigations revealed a total of **\$52,573.56** in losses incurred by the Department with **\$5,327.00** restitution awarded.
- **100** Investigations and **1** management review were completed.

¹ Investigations are initiated when an allegation of a violation of rule, statute, policy and/or contract is made against a specific individual.

² Management Reviews are conducted when there appears to be a systemic or work environment issue.

³ The Whistle Blower's Act was designed to protect present and former state employees and contractors from retaliation by management. Whistle-Blower designation is granted by the Governor's Chief Inspector General's office. If a complaint meets the whistle-blower criteria, the whistle blower's identity is protected from release and an investigation will be conducted pursuant to 112.3187-31895, F.S..

Section B: Accountability and Results

The following chart provides a comparative analysis of investigations opened during FY 2008-2009 by Circuit.

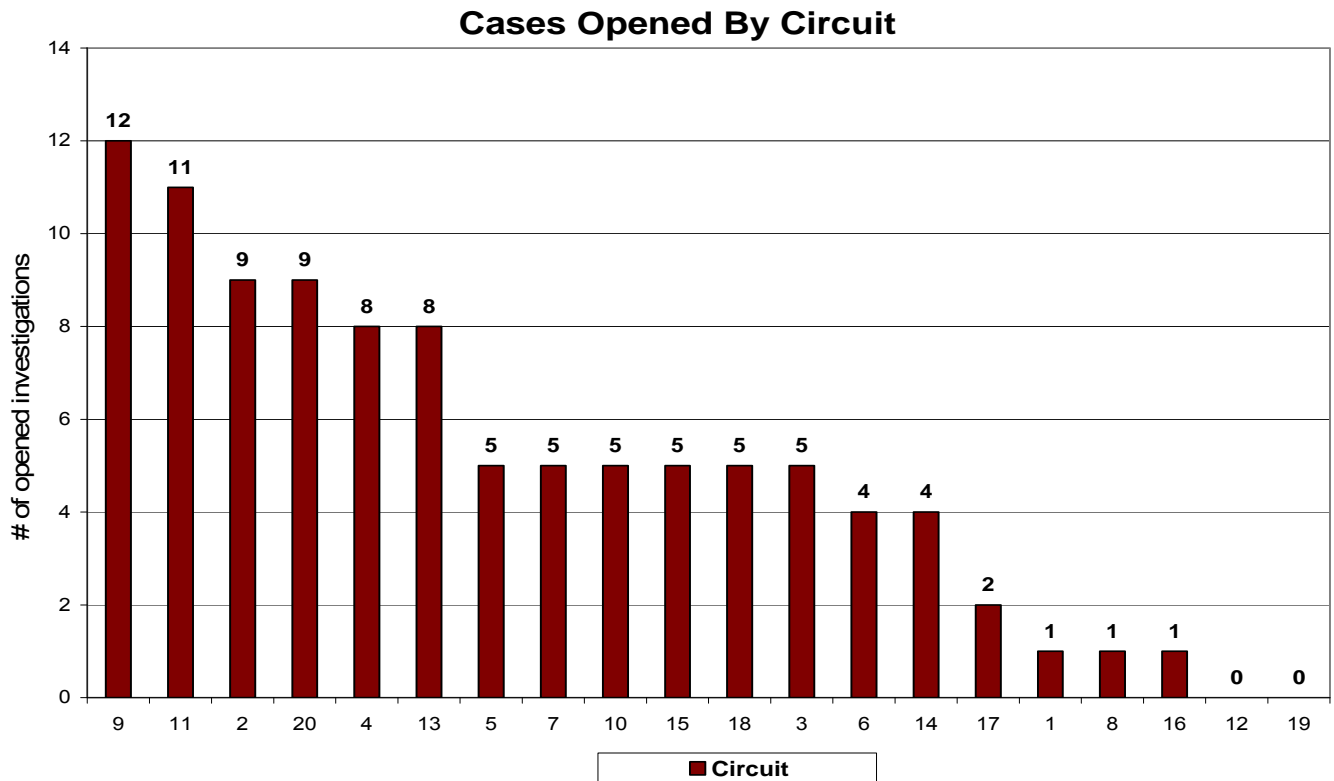


Figure B.1: Investigations/Management Reviews by Circuit.

The Top Ten Allegation Types Investigated and Percentage of Caseload during fiscal year 2008-2009:

Falsification	37.29%
Computer Related Misconduct	27.12%
Mishandling of a Case	11.30%
Contract Improprieties	5.08%
Personnel Improprieties	5.08%
Employee Misconduct	5.08%
Misuse of State Property	3.39%
Breach of Information	2.26%
Financial Improprieties	1.69%
Client Abuse	1.13%

Figure B.2: Office of Investigations top ten allegation types and percentages.

Section B: Accountability and Results

Case Dispositions

In Fiscal Year (FY) 2008-2009:

- Subjects who were referred for criminal investigation received the following sentences:
 - ◆ 6 subjects received a total of 15 years probation
 - ◆ 4 subjects entered into a Pre-Trial Agreement
 - ◆ 3 subjects received a total of 125 hours of community service
 - ◆ 1 subject received a 29-day suspended jail sentence
- **62%** of all allegations investigated resulted in **supported** findings (an increase of 12% from last FY).
- **41.58%** of completed investigations involved law enforcement and/or State Attorney's Office referral due to possible criminal violations. (a decrease of 21.02% from last FY).
- **35** subjects were referred to law enforcement, **18** (51%) were Department employees while **17** (49%) were provider employees.
 - ◆ **31** (88%) were from the Family Safety Program
 - ◆ **2** (6%) were from the ACCESS Program
 - ◆ **1** (3%) was from the Adult Services Program
 - ◆ **1** (3%) was from the Child Care Program
- Of the subjects referred, as of June 30, 2009, **10** arrests¹ were made.
- There are **32** cases as of June 30, 2009, pending criminal investigation with law enforcement or criminal prosecution with the State Attorney's Office.

Recommended Corrective Action Plan

A crucial element of every investigation is the Corrective Action Plan (CAP). Recommended CAPs are developed throughout each investigation and management review. When immediate action regarding client safety arises, the appropriate manager will be notified during the investigation. In addition, information is gathered to determine whether any corrective action has already been taken.

The final report is sent electronically to all affected parties. Using DCF Tracker, the final report summary is forwarded to the appropriate Assistant Secretary or Regional Director with a copy of the recommended CAP. A 30-day response is required. During the Fiscal Year 2008-2009, a total of **106** CAPs were tracked by the Investigations Unit.

As a result of the CAPs tracked by Investigations Unit, the following actions were taken by management:

- 37 Dismissals
- 34 Resignations
- 1 Suspension
- 14 Written Reprimands
- 2 Demotions
- 6 Oral Reprimands

¹ Case #'s: 2006-0072; 2007-0098; 2007-0100; 2007-0112; 2007-0113; 2008-0039; 2008-0052; 2008-0054; 2008-0056; 2008-0109

Section B: Accountability and Results

Timeliness

In accordance with the Principles and Standards for Offices of Inspector General published by the Association of Inspectors General (the "Green Book"), the Investigations Unit strives to complete cases in a timely manner. Although the *Quality Standards for Investigations* section of the Green Book merely indicates "Investigations should be conducted in a timely manner", the unit has set an internal goal of 60 calendar days from commencement to closure, referral to law enforcement, or the date it is sent to the subject(s) for response.

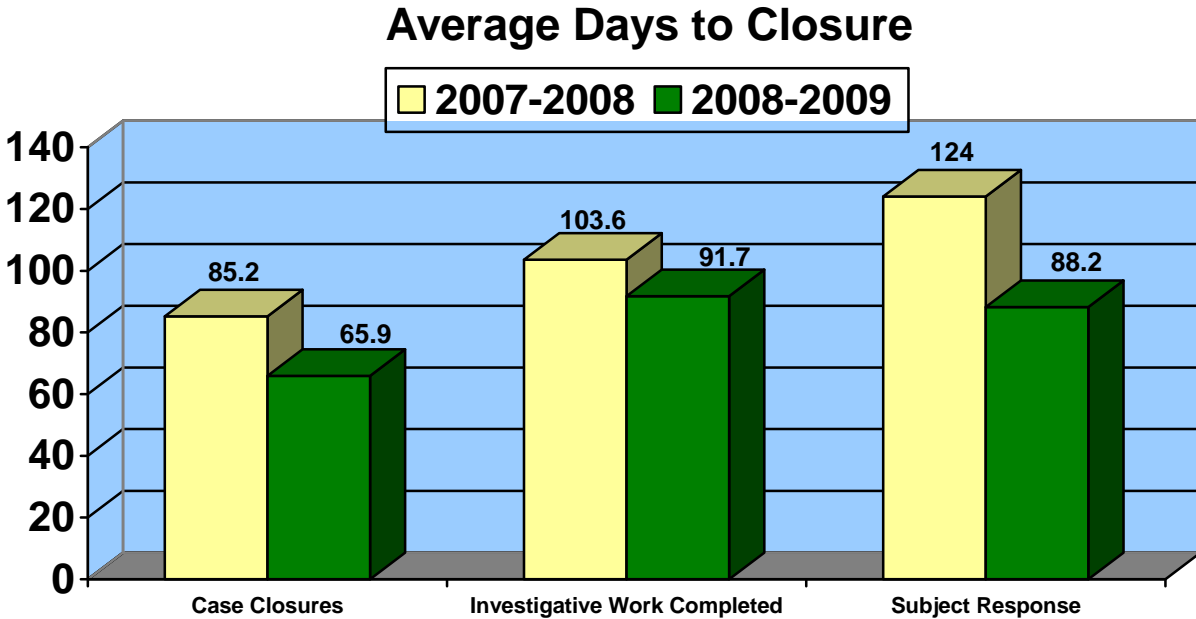


Figure B.3: Number of days cases remain active until closure, referral to law enforcement (Investigative Work Completed), or sent to the case subject (Subject Response); excluding whistle-blower investigations.

Subject Response

In 2008, Chapter 20.055, Florida Statutes, was amended to include the requirement that at the conclusion of each investigation in which the employee is a specific "entity contracting with the state" or an "individual substantially affected", that he or she must be provided with the findings prior to final release of report and an opportunity to respond. An "entity contracting with the state" refers to any for-profit or not-for-profit organization that has entered into a relationship with a state agency to provide goods or services. An "individual substantially affected" refers to an employee of a provider or subcontract provider (organization providing community-based child welfare services). The "entity" or the "individual substantially affected" is afforded 20 working days in which to respond. Such response and the Inspector General's rebuttal are to be included in the final investigative report.

A total of 61 subjects that met the legislative definition of "individuals substantially affected" or "entity contracting with the state" were provided the opportunity for comment. A total of 10 (16%) responses were received, of which 4 (6.5%) did not agree with the finding(s). An Inspector General rebuttal was made in each case, and both the subject response and IG rebuttal were attached to the final report.

Section B: Accountability and Results

Public Records Request

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In accordance with Chapter 119, Florida Statutes, investigations and complaint correspondences are public record. During Fiscal Year 2008-2009, the Investigations Unit responded to **53** requests for public records. In addition to public records requests, the Investigations Unit performed **101** redaction reviews of closed cases (an increase of 2%). Investigations and Management Reviews can be found on our website at <http://www.dcf.state.fl.us/admin/ig/reports/default.aspx>.

Inspector General Reference Checks

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The Investigations Unit provides personnel reference checks regarding Department and Provider employees who have been involved in an Office of Inspector General investigation and are being considered for re-hire, transfer, promotion, or demotion. In Fiscal Year 2008-2009, the Investigations Unit responded to **2,674** reference checks from the Department and its providers. (a decrease of 4%)

Section B: Accountability and Results

Internal and Single Audit

This year's risk assessment was fast-tracked due to the impact of the American Reinvestment and Recovery Act on the Office of Inspector General's work environment. To develop our proposed work plan and meet the accelerated deadline of June 30, 2009 mandated by the Governor's Chief Inspector General, Internal Audit solicited input from DCF Executive Leadership, Regional Directors and Department Program Directors via email rather than face-to-face interviews. In addition, Internal Audit evaluated data related to FY 2008-09 investigations, FY 2008-09 Contract Oversight findings, and last year's audit plan.

Our process recognizes potential project topics at a **point** in time with an understanding that a priority today may be superseded tomorrow. In order to deal with an ever-changing environment, Internal Audit has designed and plan to implement an on-going risk assessment process. As new projects are assigned, staff will evaluate the priority of work plan topics to ensure that they continue to be high risk. Requests from management will be given special consideration as they usually address current concerns.

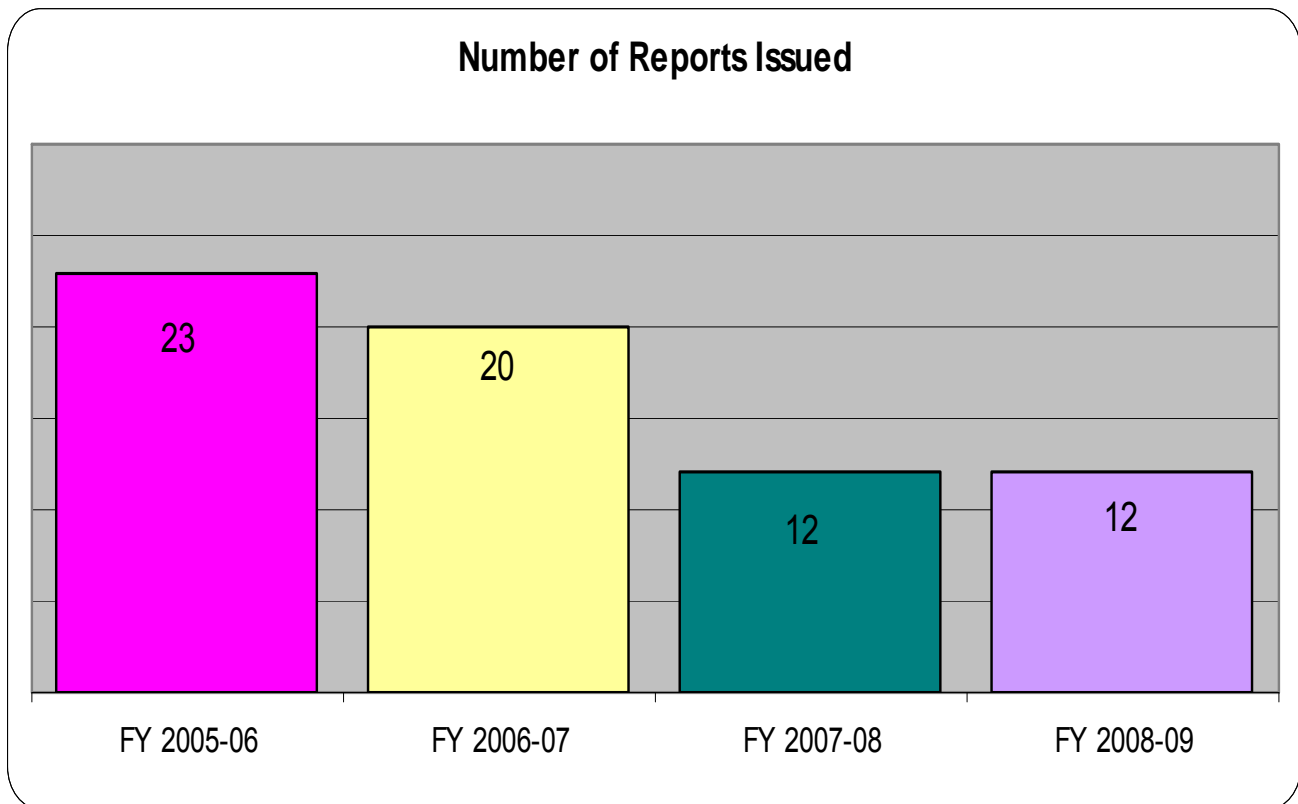


Figure B.4: One indicator of internal audit activity is the number of reports published each year. This measure is greatly influenced by the complexity of the audit and the resources available to devote to the projects. Reduction in staff over the past few years has greatly impacted the number of published audits.

Section B: Accountability and Results

Integrated Internal Audit Management System (IIAMS) Enterprise

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This Davis Productivity Award winning management system developed by the DCF Office of Inspector General has been modified to allow other agencies to use the system taking advantage of, not only the software, but the infrastructure established by DCF. The IIAMS includes project management, audit documentation, supervisory review/approval, timekeeping, training records and an extract and reporting function. The internal audit offices in twelve agencies have begun using the system this year and this represents a true savings of over \$200,000. Additionally the global impact will not only be a substantial savings to the state, but will also introduce standardization across agency lines. Benefits to this cooperative effort established by the DCF Inspector General's Office will continue to pay dividends in the future.

Notable Reports Issued

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The following summarizes significant audits issued during the fiscal year. A summary of all reports issued is located in section C: Appendix pp 39-42. All reports issued during FY 2008-09 may be viewed at: <http://www.dcf.state.fl.us/admin/ig/reports/auditsearch.aspx>

A-0809-006 - Assessment of the Implementation of the Managing Entity Initiative. This audit focused on the accountability and oversight of the managing entity initiative of the Substance Abuse and Mental Health Program Office. We found that the Program Office focused attention on encouraging collaboration, identifying community needs, updating administrative rules, and procurement, but did not have a comprehensive plan for implementation. We recommended establishment of a workgroup to develop a consumer-driven plan to address the identified issues. Although management did not concur with the establishment of a workgroup, an implementation plan was developed.

A-0910-006 - Sexually Violent Predator Program. The objective of this audit was to review the process for assessing and evaluating whether individuals referred to the Department meet the statutory definition of a sexually violent predator.

The Office of Inspector General determined that over 90 percent (approximately 30,000) of referrals to the Department for assessment (screening) were determined not be sexually violent predators, and therefore those cases were closed without progressing to a clinical evaluation. Further, a backlog of referrals has resulted in additional staffing needs for the program, including paying two contracted psychologists approximately \$208,000 to provide screening services.

Management in their response did not concur with the finding or the recommendations concerning referrals. Nevertheless, the Inspector General's Office continues to recommend the Sexually Violent Predator Program (SVPP) work with the Department of Corrections to develop ways of effectively "screening out" some of the 90 percent of offenders who do not require further evaluation, prior to their referral to SVPP.

The audit also disclosed two ethical issues; one resulted in a provider voluntarily terminating their contract with the Department, and the other involving contracts with two former Department employees that violated the contract amount limits provision of the state's Code of Ethics. On September 10, 2009, the Inspector General's Office received documentation that the Department's Deputy Secretary, acting on behalf of the agency head, approved a request, after-the-fact, to waive the contract amount limits provision of the state's Code of Ethics for the contracts with the two former Department employees.

Section B: Accountability and Results

Single Audit

Florida Statute 215.97 requires that all agencies monitor, use, and follow-up on audits of state financial assistance provided to non-state entities. The Single Audit Unit has been created within the Department to perform major portions of this statutorily required function. Public Accounting firms (CPAs) perform financial audits of Department contractors and providers. These audits and associated reports are generally required by contract, and are considered a crucial accountability component for state and federally funded initiatives. Financial accounting and reporting is complex and technical. Contract managers generally do not have the financial background or expertise to properly assess the financial statements and the related schedules so this activity has been centrally located for many years. The mission of the Single Audit Unit is to interpret the critical information provided by the independent external auditors (CPAs) and to keep management and contract managers apprised of the pertinent financial information contained in the reports. The unit's two staff members review more than 300 provider audit packages every year. In addition, the Single Audit Unit provides clarification and guidance to independent auditors on the complex and changing requirements of state and federal audits. The chart shows almost half of the audit reports reviewed required communication back to the contract manager of program management. These ranged from minor issues where the contract manager needed to simply be informed, to more significant issues where a corrective action plan was required from the provider. An additional function performed by the Single Audit Unit is providing feedback to the auditors where improvements are needed in the audit and reporting process.

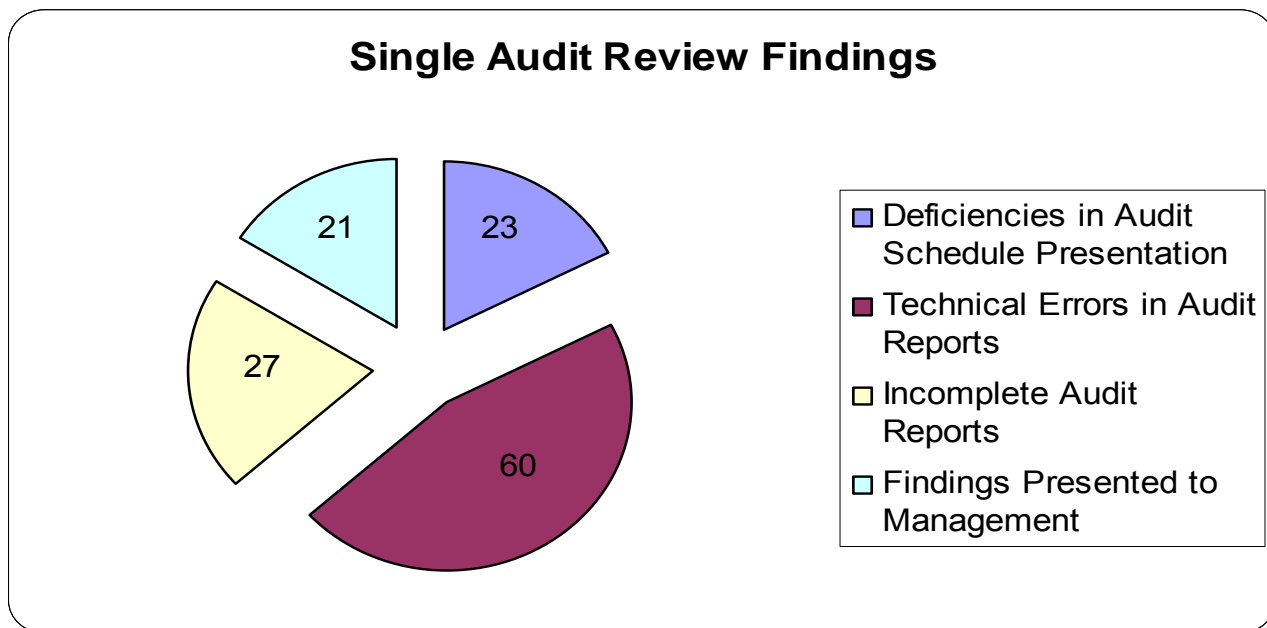


Figure B.5: The above chart shows the breakdown of deficiencies as a result of the single audit reviews.

Section B: Accountability and Results

Appeal Hearings

The Office of Appeal Hearings conducts fair hearings for applicants or recipients of the following public assistance programs by consumer request:

- Temporary Assistance for Needy Families (TANF)
- Food Stamp Program
- Women Infants and Children
- Medicaid
- Optional State Supplementation
- Title IV-E Adoption Assistance
- Foster Care Maintenance Payments
- Child and Family Services
- Refugee Assistance
- Child Support Enforcement
- Nursing Facilities

The hearing procedures are set forth by federal rules and must comply with Chapter 120, F.S., and Uniform Rules of Procedure to the extent they do not conflict with federal program requirements.

Hearing Requests By Program FY 2008-09

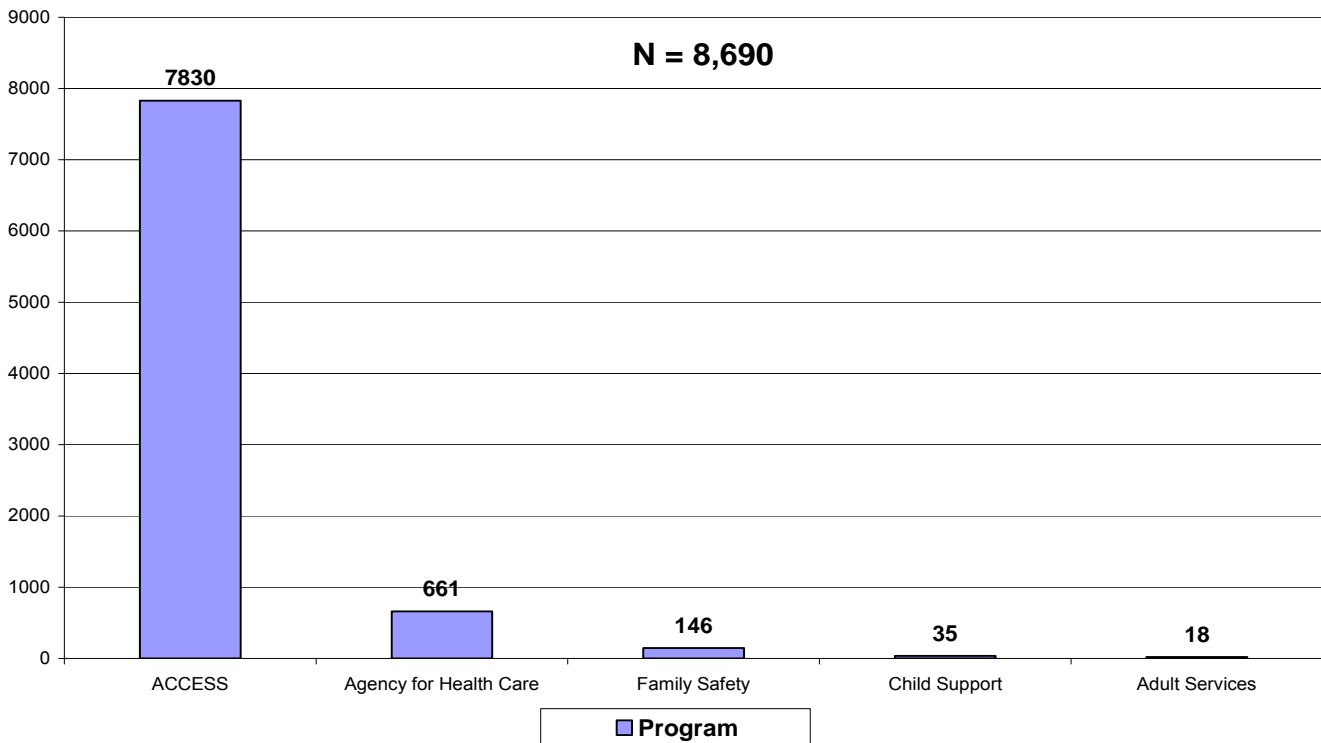
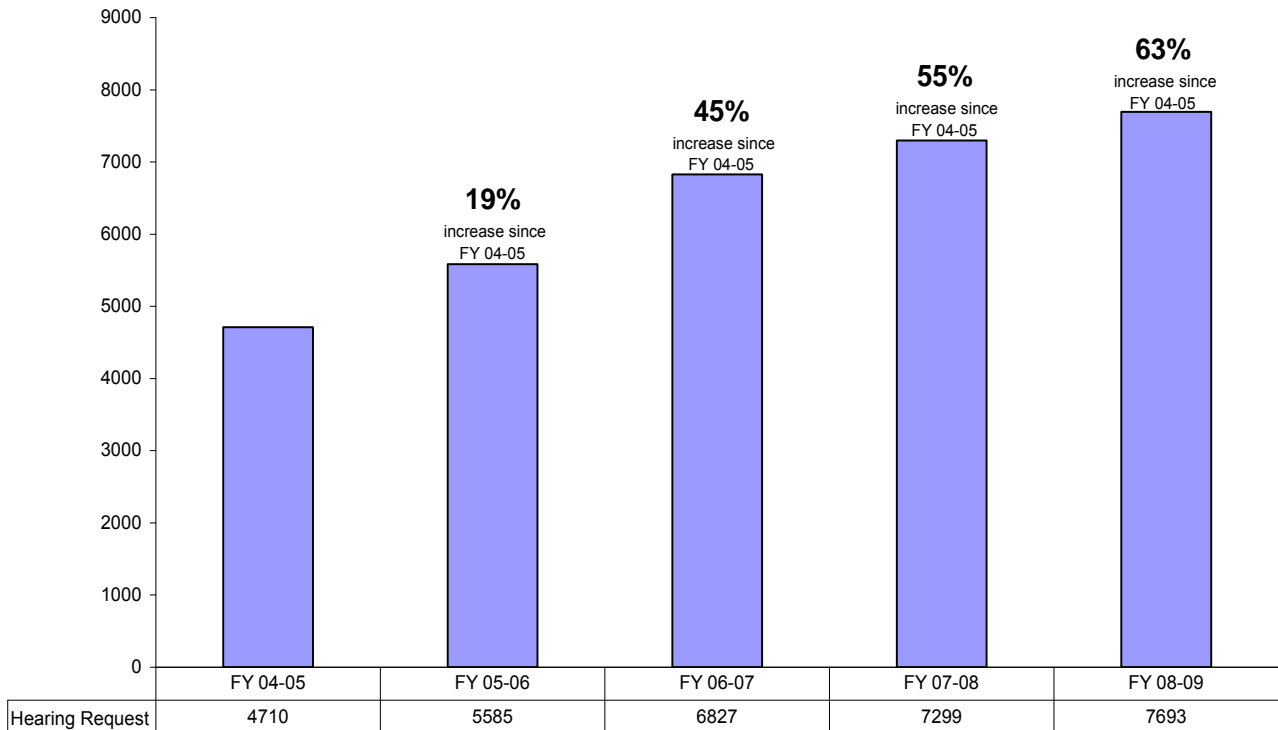


Figure B.6: New hearing requests received by originating program office.

Section B: Accountability and Results

In these challenging economic times, the Department's caseloads have grown. The Appeal Hearings unit's overall caseload (which includes, in part ACCESS, Medicaid, Nursing Home, Child Support, and Refugee requests) over the past four years has grown by five percent each year. The ACCESS Program caseload, in particular, has increased by sixty-three (**63%**) percent, over the past five fiscal years. (See chart below).

ACCESS Fair Hearing Requests



ACCESS hearing requests over the last five fiscal years.

Figure B.7: Increase in ACCESS program related hearings over the past five years.

Section B: Accountability and Results

ACCESS Fair Hearing Decisions by Region



Figure B.8: Disposition of Access Fair Hearings by Region.

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Summary of Investigations and Corrective Actions Completed During FY 2008-09

Headquarters

1. 2008-0102 An Abuse Hotline Operations and Management Consultant Manager allowed the inappropriate use of a notary seal by a Management Analyst. **Not Supported.** An Abuse Hotline Operations and Management Consultant Manager falsified official timesheets by accruing time worked at the Department while working with an outside place of employment. **Neither Supported nor Refuted.** An Abuse Hotline Operations and Management Consultant Manager violated the Department's dual employment policy by beginning his outside employment prior to submitting the Additional Employment Outside of State Government Form to his supervisor for approval. **Supported.**
Corrective Action: The affidavit template used by the Abuse Hotline to authenticate records has been updated to include the date.
2. 2009-0016 A Program Director is related to a contracted provider of the Department, creating a conflict of interest. **Supported.**
Corrective Action: The provider employee's contract with the Department was terminated.

Northwest Region

Circuit 1

1. 2008-0054 A Child Protective Investigator falsified documentation within Florida Safe Families Network (FSFN). **Supported.**
Corrective Action: The employee was terminated and a copy of the report was placed in the employee's personnel file. This case was coordinated with law enforcement and the State Attorney's Office (SAO) for possible criminal prosecution. The employee was arrested and the SAO declined to prosecute.
2. 2008-0042 A Court Liaison of a subcontracted provider accessed a FSFN case without a legitimate business reason. **Supported.**
Corrective Action: The employee was terminated and a copy of the report was placed in the employee's personnel file.
3. 2008-0040 A Team Leader of a contracted provider used the User ID and password of a Senior Program Analyst to conduct File Transfer Protocol (FTP) processing for FSFN. **Not Supported.**

Circuit 2

1. 2008-0069 A Child Protective Investigator (CPI) falsified FSFN documentation regarding a home visit. **Supported.** The CPI shared her FSFN User ID and password with an Intern. **Supported.**
Corrective Action: The employee resigned and a copy of the report was placed in the employee's personnel file. A policy memorandum was sent to all Regions clarifying the Department's policies regarding Interns and their use of FSFN. This case was coordinated with law enforcement for possible criminal prosecution. The

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law enforcement agency declined to forward the case to the State Attorney's Office based on insufficient evidence.

2. 2008-0105

An Economic Self-Sufficiency Specialist Supervisor tampered with a case of personal interest by initially requesting auxiliary benefits for her children, utilizing the FLORIDA System. **Supported.**

Corrective Action: The employee was terminated. The Assistant Secretary for Programs disseminated a memorandum to all ACCESS Program Office staff that explains the employee's responsibility to report cases of personal interest to management and identifies cases with specific groups that staff must assign to a confidential caseload.

Circuit 3

1. 2007-0112

(Whistle-Blower)

A Family Care Counselor of a subcontracted provider falsified a home visit with a child in foster care. **Supported.** Another former Family Care Counselor of the same subcontracted provider had a co-worker document an office visit with children as a home visit. **Not Supported.**

Corrective Action: The employees both resigned and a copy of the report was placed in their respective personnel files. Contact with the children and the caregiver in the case was accurately documented in FSFN. The subcontract provider continues to provide pre-service and in-service training regarding the importance of proper documentation of contacts including the statutory penalties for falsification. This case was coordinated with law enforcement and the State Attorney's Office for possible criminal prosecution, and the employee entered into a pre-trial agreement.

2. 2008-0101

A Child Protective Investigator Supervisor (CPIS) failed to report child sexual abuse to the Abuse Hotline. **Supported.** Two Child Protective Investigators (CPI) failed to make a mandatory report of child sexual abuse to the Abuse Hotline.

Supported for one CPI. **Not Supported** for the other CPI.

Corrective Action: The CPIS was verbally counseled. All Family Safety Program Office staff were provided with a memorandum of guidance and were given a copy of §39.201 and §39.205, Florida Statutes, Rule 65C-10.002, Florida Administrative Code, and Paragraphs 8(a) and 8(b), Children and Families Operating Procedures 175-25. Each employee was required to sign a form acknowledging his or her review and understanding of these directives. Information missing from the investigative report prior to case closure was added as notes in the closed case file. The Family Safety Program Office began developing language requiring investigative staff to report all incidents of out-of-state abuse to the appropriate state having jurisdiction to investigate the allegations. Additional language is also being added to require investigators to notify law enforcement personnel in the other state for all allegations that, if they had occurred in Florida, would have required investigators to notify law enforcement personnel here.

3. 2008-0107

An Economic Self-Sufficiency Specialist I fraudulently issued benefits to customers not entitled for several FLORIDA cases. **Not Supported.**

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Circuit 4

1. 2007-0047
A Child Protective Investigator (CPI) falsified child protective supervision records. **Neither Supported nor Refuted.** The CPI also falsified records in four other cases. **Supported.**
Corrective Action: The employee resigned and a copy of the report was placed in the employee's personnel file. This case was coordinated with law enforcement and the State Attorney's Office (SAO) for possible criminal prosecution. The SAO declined to file criminal charges.
2. 2008-0033
A Licensing Recruiter of a subcontracted provider failed to request a local law enforcement agency check on an adult household member of a foster home. **Not Supported.** A Licensing Recruiter of a subcontracted provider failed to notify the Department in a timely manner about an Abuse Hotline Record Search that had positive results of an adult household member. **Supported.** A Department attorney failed to ensure that foster children were moved from an unsafe environment in a timely manner. **Not Supported.** A Family Services Counselor of a subcontracted provider failed to obtain psycho-sexual therapy for a child victim in a timely manner. **Not Supported.**
Corrective Action: The Family Safety and Mental Health Program Offices reviewed Children and Families Operating Procedures (CFOP) 155-10. They responded that if the same issue continues to arise, and is not reflective of an isolated gap in understanding, the CFOP will be updated. A copy of the report was provided to the Chief Executive Officers of the contracted and subcontracted providers, and the Circuit 4 Foster Care Licensing Office.
3. 2008-0034
A Department Senior Attorney disclosed the home address of foster parents to unauthorized persons during a Termination of Parental Rights hearing. **Supported.**
Corrective Action: Children's Legal Services (CLS) Northeast Regional Director met with the employee to discuss the allegations and the significance of releasing confidential information. No disciplinary action was taken against the employee. In addition, the CLS Northeast Regional Director conducted region-wide training on the topic of redaction of confidential information.
4. 2008-0067
An Adoption Specialist of a subcontracted provider falsified FSFN documentation concerning a home visit. **Supported.**
Corrective Action: The employee resigned and a copy of the report was placed in the employee's personnel file. This case was coordinated with law enforcement and the State Attorney's Office (SAO) for possible criminal prosecution. The SAO declined to file criminal charges.
5. 2008-0097
A Family Services Counselor of a contracted provider falsified child protective supervision records. **Neither Supported nor Refuted.**
6. 2008-0109
An Economic Self-Sufficiency Specialist Supervisor fraudulently created, authorized, and received Cash and Food Stamp auxiliary benefits. **Supported.**
Corrective Action: The employee was terminated and a copy of the report was placed in the employee's personnel file. The ACCESS Internal Controls Workgroup/Task Force added a query to its routine work to identify suspicious cases where multiple cases have the same address on a particular screen used in

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the Electronic Benefit Transfer pilot program. This case was coordinated with law enforcement and the State Attorney's Office. The case is pending trial.

7. 2009-0019 A Child Protective Investigator Supervisor (CPIS) provided her Accurint User ID and password to Department employees. **Supported.** Six Child Protective Investigators (CPIs) utilized the Accurint User ID and password of their supervisor and/or provided their supervisor's Accurint User ID and password to other persons. **Supported.** A CPIS and six CPIs utilized the Accurint User ID and password of a CPIS in order to access the Accurint database without a legitimate business reason. **Supported** as to one CPI. **Not Supported** as to the CPIS and five of the CPIs.
- Corrective Action:** The CPIS was suspended without pay for two days. One of the CPIs was issued a verbal counseling regarding violations of the Security Awareness Policy and documentation of the counseling was placed in the employee's personnel file. Another CPI resigned and the employee's personnel records reflect that the employee was under disciplinary action at the time of the employee's resignation, and that the employee resigned in lieu of dismissal. A copy of the Investigative Report was provided to LexisNexis.

Circuit 5

1. 2006-0051 A Family Care Manager of a subcontracted provider falsified face-to-face contact information in eight separate cases within HSN (now FSFN) between the periods of December 9, 2005 through April 18, 2006. **Supported.**
- Corrective Action:** The employee was terminated and a copy of the report was placed in the employee's personnel file. This case was coordinated with law enforcement and the State Attorney's Office, and the employee entered the Pre-Trial Agreement.
2. 2008-0037 A Child Protective Investigator (CPI) accessed three Intake Reports without a legitimate business reason. **Supported.** The CPI breached confidential information. **Not Supported.**
- Corrective Action:** The employee resigned and a copy of the report was placed in the employee's personnel file.
3. 2008-0056 A Dependency Case Manager of a subcontracted provider falsified records concerning face-to-face visits. **Supported.**
- Corrective Action:** The provider provided training to all staff regarding falsification and other reportable incidents to the Office of Inspector General. This case was coordinated with law enforcement and the State Attorney's Office, and the employee received a 29-day suspended jail sentence.
4. 2008-0060 A Department Secretary Specialist accessed Accurint without a legitimate business reason to obtain information about herself and her relatives. **Supported.**
- Corrective Action:** The employee resigned and a copy of the report was placed in the employee's personnel file.
5. 2008-0096
(Whistle-Blower) A Program Office Administrator being married to the court appointed limited guardian of an adult Department client creates a conflict of interest. **Not Supported.** The Program Office Administrator had knowledge of alleged financial

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exploitation of an adult Department client by the court appointed limited guardian to whom she is married. **Not Supported.**

6. 2008-0104 A Director of Emergency and Social Services, a Behavioral Technician, and the Licensed Practical Nurse of a subcontracted provider failed to report an alleged incident of child abuse to the Abuse Hotline. **Supported.**
Corrective Action: The employees involved received a verbal warning, which was documented in their personnel files. All staff of the subcontracted provider engaged in a one-hour educational session addressing the requirements of abuse reporting and followed up with a post-training test session to determine understanding of the concepts addressed.
7. 2008-0110 A Child Protective Investigator Supervisor (CPIS) misused her position by intimidating witnesses involved in a child abuse case, in which the CPIS was the alleged perpetrator. **Neither Supported nor Refuted.**
8. 2009-0003 A Family Case Manager of a subcontracted provider falsified a face-to-face Home Visit Form. **Not Supported.**
9. 2009-0007 A Child Protective Investigator falsified chronological notes in FSFN. **Supported.**
Corrective Action: The employee resigned and a copy of the report was placed in the employee's personnel file.

Circuit 6

1. 2008-0093 A Family Case Manager of a subcontracted provider instructed a Department client to testify untruthfully during a Dependency Hearing. **Not Supported.** The Family Case Manager falsified documents in a Department client's case file. **Not Supported.**
2. 2009-0013 An Economic Self-Sufficiency Supervisor processed an ACCESS case for a former Department employee with whom he was personally acquainted. **Supported.**
Corrective Action: The employee resigned and a copy of the report was placed in the employee's personnel file.
3. 2009-0023 An ACCESS Interview Clerk failed to report to her supervisor that she was arrested on March 19, 2009 on a felony charge of Trafficking in Hydrocodone. **Not Supported.** An Economic Self-Sufficiency Specialist (ESSS) I falsely reported to the ACCESS Interview Clerk's immediate supervisor the reason why the Interview Clerk was absent from work on March 20, 2009. **Not Supported.** The ACCESS Interview Clerk failed to notify her immediate supervisor of her criminal charge and subsequent August 11, 2008 arraignment. **Supported.**
Corrective Action: The ACCESS Interview Clerk was issued a written reprimand.

Circuit 7

1. 2007-0099 A Child Protective Investigator falsified child protective investigation records. **Supported.**
Corrective Action: The employee resigned and a copy of the report was placed in the employee's personnel file. This case was coordinated with law enforcement

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and the State Attorney's Office, and the employee entered into a Pre-trial Intervention agreement.

2. 2008-0032 A Child Protective Investigator became involved in a personal relationship with a parent of a Department client. **Not Supported.**
3. 2008-0045 A Case Manager of a contracted provider falsified child protective supervision records. **Supported.**
Corrective Action: The employee was terminated and a copy of the report was placed in the employee's personnel file. This case was coordinated with law enforcement and the State Attorney's Office (SAO) for possible criminal prosecution. The SAO declined to file criminal charges.
4. 2008-0052 A Family Case Manager of a subcontracted provider falsified case notes concerning face-to-face visits. **Supported.**
Corrective Action: The employee was terminated and a copy of the report was placed in the employee's personnel file. This case was coordinated with law enforcement and the State Attorney's Office, and the employee received three years probation.
5. 2008-0084 A contracted provider President and his wife misused funds and personnel for their own personal gain. **Not Supported.**
6. 2009-0026 A Child Protective Investigator falsified chronological notes in FSFN. **Supported.**
Corrective Action: The employee was terminated and a copy of the report was placed in the employee's personnel file.

Circuit 8 No investigations were conducted in this Circuit during the fiscal year.

Circuit 9

1. 2007-0004 An Economic Self-Sufficiency Specialist (ESSS) II falsified travel records with the Program Administrator's knowledge. **Supported** against the ESSS II; **Neither Supported nor Refuted** against the Program Administrator. The ESSS II also falsified public assistance case records. **Supported.**
Corrective Action: The ESSS II was terminated and a copy of the report was placed in the employee's personnel file. An audit was completed of the ESSS II's complete travel records for 2006 and Department legal counsel began seeking recoupment for all overpayments. The Program Administrator was demoted to an ESSS I position. The Central Regional Director sent an e-mail to all supervisors regarding CFOP 40-1. This case was coordinated with law enforcement and the State Attorney's Office (SAO) for possible criminal prosecution. The SAO declined to file criminal charges.
2. 2007-0038 An Economic Self-Sufficiency Specialist (ESSS) II falsified travel records and received reimbursement for fraudulent travel expense claims with the knowledge and assistance of a Program Administrator. **Supported** against the ESSS II; **Neither Supported nor Refuted** against the Program Administrator. The ESSS II falsified public assistance case records. **Supported.** The ESSS II impersonated a school official. **Supported.**
Corrective Action: The ESSS II received a final notice of counseling. The Office of General Counsel began seeking recoupment of the travel overpayments. The

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Program Administrator was demoted to an ESSS I position. The Central Regional Director sent an e-mail to supervisors regarding CFOP 40-1 and CFOP 40-2 relating to official travel and vehicle management, respectively. This case was coordinated with law enforcement and the State Attorney's Office for possible criminal prosecution. The SAO declined to file criminal charges.

3. 2007-0101 A Child Protective Investigator Supervisor (CPIS) accessed a child abuse report without a legitimate business reason. **Supported.** The CPIS released confidential information from the report to an unauthorized person. **Neither Supported nor Refuted.** The CPIS assisted a personal acquaintance in obtaining subsidized child care for a child not entitled to subsidized child care. **Supported.**
Corrective Action: The employee resigned and a copy of report was placed in the employee's personnel file. This case was coordinated with law enforcement and the State Attorney's Office (SAO) for possible criminal prosecution. The SAO declined to file criminal charges.
4. 2008-0001
(Whistle-Blower) A Placement Manager of a subcontracted provider put children "in harms way" for sexual assault by allowing an alleged juvenile sexual offender to be placed in the same foster home. **Supported.** The Case Manager and former Placement Counselor of a subcontracted provider failed to provide written detailed and complete information regarding a child's sexual history to foster parents. **Supported.** The Program Director and the Manager of the Placement Unit of a subcontracted provider put a child "in harms way" for sexual assault by allowing him to be placed in the same foster home as an older child known to be a sexual offender. **Supported.** A Senior Program Specialist of a contracted provider put children "in harms way" for sexual assault by approving an Overcapacity Waiver Request for an alleged juvenile sexual offender. **Not Supported.** The Case Manager of a subcontracted provider failed to request therapy within the required time limit for an alleged juvenile sexual offender. **Supported.** The Case Manager of a subcontracted provider failed to make and document weekly visits with a child on a waiver for a foster home over its licensed capacity. **Supported.** The Case Manager of a subcontracted provider failed to take appropriate action regarding a child sexual perpetrator sharing a room with other children. **Supported.**
Corrective Action: Revisions were made to the language of the Departments standard contract template and CFOP 175-88.
5. 2008-0050 A Child Protective Investigator (CPI) provided false information pertaining to a FSFN Intake Report. **Neither Supported nor Refuted.** A CPI provided her FSFN User ID and password to another CPI. **Supported.**
Corrective Action: One CPI was terminated while the other CPI received a written reprimand, and a copy of the report was placed in the personnel file for both CPIs. A policy guidance memorandum was issued by the Family Safety Program Office clarifying the appropriate manner to record and document notes in FSFN by one user on behalf of another. This case was coordinated with law enforcement for possible criminal prosecution. The law enforcement agency declined to forward the case to the State Attorney's Office based on insufficient evidence.
6. 2008-0063 A Family Case Manager of a subcontracted provider falsified child protective supervision records. **Neither Supported nor Refuted.**

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7. 2008-0092 A Child Protective Investigator accessed a case in FSFN without a legitimate business reason. **Supported.**
Corrective Action: The employee resigned and a copy of the report was placed in the employee's personnel file.
8. 2008-0103 A Family Case Manager Supervisor and a Family Case Manager of a subcontracted provider mishandled a FSFN case by inappropriately placing a Department client. **Not Supported.** A Family Case Manager Supervisor of a subcontracted provider failed to make a mandatory report of child abuse to the Abuse Hotline. **Supported.**
Corrective Action: The supervisor was terminated, the case manager resigned, and a copy of the report was placed in the personnel files of both employees. The subcontracted provider initiated additional training and re-training to all staff as to the requirements of mandated reporting. The Department's Children's Legal Services managing attorneys were directed to address ex parte communications and evidence with their respective Community-Based Care agencies, and evidentiary issues were also included in training to those staff.
9. 2009-0001 A Dependency Case Manager of a subcontracted provider falsified child protective supervision records in Florida Safe Families Network. **Supported.**
Corrective Action: The employee was terminated and a copy of the report was placed in the employee's personnel file.

Circuit 10

1. 2006-0062 A Child Protective Investigator falsified a Caregiver Home Study document and related Home Study case notes. **Supported.**
Corrective Action: The employee was terminated and a copy of the report was placed in the employee's personnel file. This case was coordinated with law enforcement and the State Attorney's Office, and the subject received 12 months probation and 50 hours of community service.
2. 2007-0100 A Child Protective Investigator falsified records in FSFN concerning two separate face-to-face home visits, as well as provided false information to a law enforcement officer. **Supported.**
Corrective Action: The employee resigned and a copy of the report was placed in the employee's personnel file. This case was coordinated with law enforcement and the State Attorney's Office, and the subject received 3 years probation.
3. 2008-0027 A Child Protective Investigator (CPI) falsified a face-to-face home visit. **Supported.** The CPI falsified two additional face-to-face home visits. **Supported.**
Corrective Action: The employee resigned and a copy of the report was placed in the employee's personnel file. This case was coordinated with law enforcement and the State Attorney's Office (SAO) for possible criminal prosecution. The SAO declined to file criminal charges.
4. 2008-0065 A Child Protective Investigator falsified child abuse investigation records. **Not Supported.**
5. 2008-0087 A Family Case Manager Supervisor of a subcontracted provider falsified a Caregiver Home Study. **Not Supported.** A Family Case Manager falsified a Caregiver Home Study. **Neither Supported nor Refuted.**

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6. 2009-0031 A Child Protective Investigator used his Department issued computers to access inappropriate material. **Supported.**
Corrective Action: The employee resigned and a copy of the report was placed in the employee's personnel file.
- Circuit 11**
1. 2008-0015 An Other Personal Services Family Services Counselor failed to cite a child care facility for violation of a compliance standard. **Supported.** The Other Personal Services Family Services Counselor misused her position by providing cardiopulmonary resuscitation classes to child care providers which she inspected. **Supported.**
Corrective Action: The employee resigned and a copy of the report was placed in the employee's personnel file. Mandatory ethics training was provided for all Child Care Licensing Staff.
2. 2008-0035 A Senior Human Services Program Specialist released confidential client information to an unauthorized person. **Not Supported.**
3. 2008-0061 A Case Manager of a subcontracted provider falsified records of monthly visits with a foster child. **Supported.**
Corrective Action: The employee was terminated and a copy of the report was placed in the employee's personnel file.
4. 2008-0094 A Case Manager of a subcontracted provider falsified home visit records of two monthly visits. **Supported.**
Corrective Action: The employee was terminated and a copy of the report was placed in the employee's personnel file. This case was coordinated with law enforcement and the State Attorney's Office (SAO) for possible criminal prosecution. The SAO declined to file criminal charges.
5. 2009-0004 A Child Protective Investigator falsified Chronological Notes, an Initial in Home Safety Assessment, and an Updated in Home Safety Assessment in FSFN. **Supported.**
Corrective Action: The employee resigned and a copy of the report was placed in the employee's personnel file. This case was coordinated with the State Attorney's Office (SAO) for possible criminal prosecution. The SAO declined to file criminal charges.
6. 2009-0005 A Child Protective Investigator falsified a Chronological Note and an Initial in Home Safety Assessment in FSFN. **Supported.**
Corrective Action: The employee resigned and a copy of the report was placed in the employee's personnel file. This case was coordinated with the State Attorney's Office (SAO) for possible criminal prosecution. The SAO declined to file criminal charges.
7. 2009-0008 A Southern Region Child Care Family Services Counselor solicited or accepted money and/or gifts from staff of child care facilities she inspected. **Not Supported.**
8. 2009-0012 A Southern Region Child Care Family Services Counselor falsified inspection reports. **Not Supported.**

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Circuit 12

No investigations were conducted in this Circuit during the fiscal year.

Circuit 13

1. 2006-0072
A Dependency Case Manager of a subcontracted provider falsified home visits. **Supported.** The Dependency Case Manager falsified home visit forms and HSN (now FSFN) documentation. **Supported.**
Corrective Action: The employee was terminated and a copy of the report was placed in the employee's personnel file. This case was coordinated with law enforcement and the State Attorney's Office, and the employee entered into a Pre-Trial Agreement.
2. 2008-0071
Case Managers of a subcontracted provider are referring foster care adoption finalizations to a specific attorney in return for financial benefits. **Not Supported.**
3. 2008-0077
A Dependency Case Manager of a subcontracted provider falsified a FSFN chronological note and the Child Safety Assessment Update concerning a face-to-face home visit. **Supported.**
Corrective Action: The employee was terminated and a copy of the report was placed in the employee's personnel file.
4. 2008-0078
A Dependency Case Manager of a subcontracted provider falsified FSFN chronological notes. **Not Supported.** The Dependency Case Manager failed to conduct a required monthly face-to-face visit with a foster child and caregiver in their respective residence. **Supported.**
Corrective Action: The employee was terminated and a copy of the report was placed in the employee's personnel file.
5. 2008-0081
A Case Manager of a subcontracted provider falsified FSFN chronological notes. **Neither Supported nor Refuted.**
Corrective Action: The employee was terminated and a copy of the report was placed in the employee's personnel file.
6. 2008-0086
An Other Personal Services Economic Self-Sufficiency Specialist knowingly submitted a false application for Food Stamp benefits. **Supported.**
Corrective Action: The employee was terminated and a copy of the report was placed in the employee's personnel file. The SunCoast Region began placing more emphasis on notifying Call Center new hires regarding the importance of reporting accurate and timely information if they apply for or receive public assistance benefits.
7. 2009-0017
An Other Personal Services Economic Self-Sufficiency Specialist submitted a false application for Food Stamp benefits. **Supported.**
Corrective Action: The employee was terminated and a copy of the report was placed in the employee's personnel file.

Circuit 14

1. 2007-0086
A Child Protective Investigator falsified child protective investigation records in seven cases. **Supported.**

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Corrective Action: The employee resigned and a copy of the report was placed in the employee's personnel file. This case was coordinated with law enforcement and the State Attorney's Office (SAO) for possible criminal prosecution. The SAO declined to file criminal charges.

2. 2008-0072 A Dependency Case Manager of a subcontracted provider falsified memorandums filed with the court. **Not Supported.**
3. 2008-0075 A Child Protective Investigator falsified documentation within FSFN. **Supported.**
Corrective Action: The employee was terminated and a copy of the report was placed in the employee's personnel file.

Circuit 15

1. 2008-0021 A Data Max Specialist for a contracted provider accessed a child abuse report via FSFN without a legitimate business reason. **Supported.** The Data Max Specialist also accessed a second child abuse report via FSFN without legitimate business reason. **Supported.**
Corrective Action: The employee was terminated and a copy of the report was placed in the employee's personnel file. The contracted provider conducted refresher Security Awareness training to the Information Technology staff.
2. 2008-0090 A Dependency Case Manager of a subcontracted provider falsified FSFN records for a case regarding an attempted school visit with a child under protective supervision. **Not Supported.**
3. 2009-0042 A Child Protective Investigator falsified two chronological notes in FSFN. **Supported.**
Corrective Action: The employee was terminated. This case was coordinated with the State Attorney's Office and remains pending a filing decision.

Circuit 16

1. 2008-0095 A Family Safety Senior Attorney and/or an Other Personal Services Administrative Secretary accessed information within FSFN without a legitimate business reason. **Neither Supported nor Refuted.** The Family Safety Senior Attorney provided her Department computer network password to the Administrative Secretary, who used the password to access the Department computer network. **Supported.**
Corrective Action: The Family Safety Senior Attorney resigned and a copy of the report was placed in the employee's personnel file. The Assistant Secretary for Operations sent a memorandum to all Regional Directors and Circuit Administrators directing them to: 1) remind supervisors that they are responsible for immediately notifying the local Security Office upon the termination, transfer, or resignation of any Department or contract employee, for the purpose of system access adjustment or termination; and 2) remind all Family Safety employees that it is the responsibility of each Department network user to secure and protect his or her personal user ID and password.

Circuit 17

1. 2008-0039 An Economic Self-Sufficiency Specialist II inappropriately created and authorized Temporary Cash Assistance, Food Stamps, and auxiliary benefits. **Supported.**

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Corrective Action: The employee resigned. All ACCESS employees in the Southeast Region were reminded of policies and procedures regarding creating auxiliary and regular on-going benefits, personal interest cases, and the requirement to report suspicious behavior. The security profiles for all eligibility specialists were reviewed and confirmed as appropriate. All staff were trained on information security procedures, with an emphasis on securing workstations. This case was coordinated with law enforcement and the State Attorney's Office for possible criminal prosecution. The case is currently pending court action.

2. 2008-0053
An Economic Self-Sufficiency Specialist I breached confidentiality by viewing information in the FLORIDA system without a legitimate business reason and divulged that information to an unauthorized person. **Supported.**
Corrective Action: The employee was provided with a written reprimand and a copy of the report was placed in the employee's personnel file. Program Administrators in the Southeast Region conducted a review of the policy regarding confidentiality with ACCESS employees.
3. 2008-0059
A case manager of a contracted provider falsified progress notes of a visit to a disabled adult under the Medicaid Waiver Program. **Supported.**
Corrective Action: The Headquarters and Southeast Region Adult Services Program Office revised procedures for the contracted provider concerning home visit protocols. This case was coordinated with the State Attorney's Office, and the employee received 1 year probation and 50 hours of community service.
4. 2008-0100
An Adult Protective Investigator falsified records concerning an Intake Report. **Supported.**
Corrective Action: The employee resigned and a copy of the report was placed in the employee's personnel file. The Southeast Region instituted mandatory yearly training by the Office of Inspector General (OIG) to educate staff on the role of the OIG and increase awareness of potential violations and semi-annual ethics training. In addition, a review of Florida Statutes 839.13 and 838.022; Florida Administrative Code Rule 60L-36.005; and CFOP 60-55 was implemented to assist supervisors in identifying potential violations. This case was coordinated with the State Attorney's Office (SAO) for possible criminal prosecution. The SAO filed criminal charges and the case is currently pending in court.
5. 2009-0010
An Adult Protective Investigator falsified chronological notes, Updated in Home Safety Assessments, and an Investigative Summary in FSFN. **Supported.**
Corrective Action: The employee was terminated and a copy of the report was placed in the employee's personnel file. This case was coordinated with the State Attorney's Office (SAO) for possible criminal prosecution. The SAO filed criminal charges and the case is currently pending in court.

Circuit 18

1. 2008-0012
A Lead Dependency Care Manager of a subcontracted provider falsified child protective supervision records in two cases. **Supported.**
Corrective Action: The employee resigned and a copy of the report was placed in the employee's personnel file. This case was coordinated with law enforcement and the State Attorney's Office (SAO) for possible criminal prosecution. The SAO declined to file criminal charges.

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2. 2008-0047 An Economic Self-Sufficiency Specialist (ESSS) I falsified case notes regarding a client's eligibility for public assistance benefits. **Not Supported.**
3. 2008-0048 A Dependency Care Manager of a subcontracted provider falsified child protective records. **Supported.** The Dependency Care Manager falsified additional child protective records. **Supported.**
Corrective Action: The employee was terminated and a copy of the report was placed in the employee's personnel file. This case was coordinated with law enforcement and the State Attorney's Office (SAO) for possible criminal prosecution. The SAO declined to file criminal charges.
4. 2008-0064 A Department Child Protective Investigator and a Dependency Care Manager of a subcontracted provider failed to make a mandatory child abuse report. **Not Supported.**
5. 2008-0079 A Dependency Case Manager of a contracted provider falsified a child protective supervision record. **Supported.**
Corrective Action: The employee was terminated and a copy of the report was placed in the employee's personnel file. This case was coordinated with law enforcement for possible criminal prosecution. The law enforcement agency declined to forward the case to the State Attorney's Office based on insufficient evidence.
6. 2008-0083 A Child Protective Investigator falsified a child protective investigation record in FSFN. **Not Supported.**
7. 2009-0014 A Program Operations Administrator provided her ARTS User ID and password to a Staff Assistant, who subsequently used the User ID and password to create and authorize a requisition. **Supported.** A Staff Assistant utilized the ARTS User ID and password of a former Program Operations Administrator to create and authorize a requisition. **Supported.**
Corrective Action: The Program Operations Administrator resigned, the Staff Assistant received an oral reprimand, and a copy of the report was placed in the personnel file of both employees.

Circuit 19

1. 2007-0113 A Dependency Case Manager for a subcontracted provider falsified child protective investigative records concerning multiple home visits. **Supported.**
Corrective Action: A copy of the report was provided to the contracted and subcontracted provider, and placed in the employee's personnel file. This case was coordinated with law enforcement and the State Attorney's Office, and the employee received 5 years probation.

Circuit 20

1. 2006-0068 A Child Protective Investigator falsified child abuse investigation records. **Supported.**
Corrective Action: The employee resigned and a copy of the report was placed in the employee's personnel file. This case was coordinated with law enforcement and the State Attorney's Office (SAO) for possible criminal prosecution. The SAO declined to file criminal charges.

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2. 2007-0098 An Economic Self-Sufficiency Supervisor released confidential information from the FLORIDA system to her husband, to which he was not entitled. **Supported.**
Corrective Action: The employee resigned and a copy of the report was placed in the employee's personnel file. This case was coordinated with law enforcement and the State Attorney's Office, and the employee received 2 years probation and 25 hours of community service.
3. 2008-0029 A Child Protective Investigator altered a Concur-Non Concur Letter. **Not Supported.** The former Child Protective Investigator falsified time sheets and travel documents, and forged a signature on a referral form. **Not Supported.**
4. 2008-0049 An Adult Protective Investigator falsified Vicinity Mileage Logs and submitted a fraudulent Voucher for Reimbursement of Traveling Expenses (DFS-AA-15). **Neither Supported nor Refuted.**
5. 2008-0051 A Human Services Counselor III altered a Care Plan in an Adult Protective Services case file. **Supported.** Another Human Services Counselor III altered a Care Plan in an Adult Protective Services case file. **Supported.**
Corrective Action: One employee resigned while the other employee was issued a written reprimand.
6. 2008-0055 An Adult Protective Investigator falsified adult protective investigation records in an Adult Safety Assessment. **Not Supported.**
7. 2008-0068 A Child Welfare Case Manager of a subcontracted provider falsified records concerning home and day care visits. **Not Supported.**
8. 2008-0108 A Case Manager Supervisor of a subcontracted provider falsely documented supervisory reviews in FSFN for nineteen (19) child protective investigations. **Supported.**
Corrective Action: The employee was terminated and a copy of the report was placed in the employee's personnel file.
9. 2009-0022 An Economic Self-Sufficiency Specialist (ESSS) I falsified records in the Intake Management and/or FLORIDA systems concerning the completion of interviews with customers in numerous ACCESS cases. **Not Supported.** The former ESSS I falsified records in the Intake Management and/or FLORIDA systems concerning the completion of an interview with a customer in an ACCESS case. **Supported.**
Corrective Action: The employee resigned and a copy of the report was placed in the employee's personnel file.
10. 2009-0028 A Child Protective Investigator disclosed confidential information regarding a child abuse investigation to an unauthorized person. **Not Supported.** The Child Protective Investigator falsified child protective investigation records in FSFN concerning a face-to-face visit. **Not Supported.**

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Multiple Circuits

1. 2009-0009 Multiple Department, contracted, and subcontracted provider employees accessed FSFN records, on at least one occasion, without a legitimate business reason:

Department Employees

- *Circuit 2 Office Analyst Technician (Not Supported)*
- *Circuit 5 Family Service Counselor (Supported)*
- *Circuit 5 Secretary Specialist (Supported)*
- *Circuit 7 Secretary Specialist (Supported)*
- *Circuit 11 Paralegal Specialist (Supported)*
- *Circuit 12 Child Protective Investigations Supervisor (Supported)*
- *Circuit 12 Child Protective Investigator (Supported)*
- *Circuit 18 Child Protective Investigator (Supported)*

Contracted and Subcontracted Provider Employees

- *Circuit 5 Administrative Assistant of a contracted provider (Supported)*
- *Circuit 7 Case Manager of a contracted provider (Neither Supported nor Refuted)*
- *Circuit 8 Decision Team Consultant of a contracted provider (Supported)*
- *Circuit 9 Department of Juvenile Justice Support Liaison / Diversion Prevention Specialist of a subcontracted provider (Supported)*
- *Circuit 9 Quality and Contract Specialist of a subcontracted provider (Supported)*
- *Circuit 9 Former Family Case Manager of a contracted provider (Supported)*
- *Circuit 11 Intake Gatekeeper of a subcontracted provider (Not Supported)*
- *Circuit 16 Full Case Manager Adoptions Supervisor of a contracted provider (Supported)*

Corrective Action: Department Family Safety employees completed Security Awareness Training and signed the Department Security Agreement form (CF 114). Written reprimands were given to the Diversion Prevention Specialist employee and Quality and Contract Specialist employee. A copy of the report was shared with the contracted and subcontracted providers, e-mails were sent to the employees concerning the security violations relating to accessing cases or computer systems not directly related to their job functions, and the employees were given written warnings. Contracted provider staff were given orientation training practices related to proper use of FSFN and the employees found to have accessed FSFN inappropriately were issued a written counseling statement and placed on disciplinary probation. Circuit 12 Department staff advised the subjects involved not to access any FSFN information that is not directly pertinent to their position. At an All Supervisor Meeting held by the Operations Manager, all supervisors were advised to instruct their staff not to access any database that is not directly related to their current work. The Circuit 18 Child Protective Investigator was counseled and received a memorandum regarding unauthorized access of confidential records and a Department Security Agreement Form (CF 114) was signed and placed in the employee's personnel file. The Family Service Counselor was counseled, received a counseling memorandum, signed a new Department Security Agreement Form (CF 114), and copies were placed in the

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employee's personnel file. The Secretary Specialist was counseled and received a counseling memorandum.

Northwood Data Centre

1. 2008-0076 A former Northwood Data Centre Systems Programmer audio recorded a conversation with his supervisor without consent. **Supported.**
Corrective Action: The employee was terminated.

Call Centers

1. 2009-0011 A North Florida Customer Call Center Economic Self-Sufficiency Specialist I fraudulently signed referral forms for applicants that do not qualify for the Family Unification Program administered by the U.S. Department of Housing and Urban Development (HUD). **Not Supported.** It is noted that allegations of fraudulent use of HUD monies was coordinated with the HUD Inspector General.
2. 2009-0035 A North Florida Customer Call Center Other Personal Services (OPS) Economic Self-Sufficiency Specialist (ESSS) I has a public assistance case and is receiving Medicaid and Food Stamp benefits that she may be ineligible for due to her status as a full-time student. **Not Supported.** The OPS ESSS I accessed her public assistance case within the FLORIDA system. **Supported.** The OPS ESSS I misled a co-worker into requesting Food Stamp auxiliary benefits on her behalf. **Supported.**
Corrective Action: The employee was terminated. A policy memorandum was issued by the ACCESS Program Office to all staff reminding them of the appropriate process regarding personal interest cases.

Institutions

1. 2008-0073 At the request of the Agency for Persons with Disabilities (APD) Office of Inspector General (OIG), the Department of Children and Families OIG investigated an allegation that the Mentally Retarded Defendant Program (MRDP) Behavioral Services Director violated MRDP Internal Operating Procedure Chapter 155-22 "Seclusion and Restraint". **Not Supported.**

Summary of Management Reviews Completed During FY 2008-09

Circuit 7

1. 2008-0057 Department employees conducted fundraisers during working hours for use by employees to pay for employee functions. During the course of the Management Review, it was also discovered that there were little or no financial records pertaining to any of the monies collected.
Corrective Action: The Northeast Region Support Services Manager conducted training to members of the Circuit 7 Diversity Council Board of Directors regarding proper financial record keeping. The Assistant Secretary for Administration provided a Staff Fundraising Policy memorandum to Regional Directors, Circuit Administrators, and the Central Office.

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Summary of Internal Audits Issued During FY 2008-2009 (Internal, Follow-up and External)

1. **C-05-08-09-020** **Lack of Data makes it Difficult to Assess Foster Parent Training.** Lack of data makes it difficult to define the size and other general dimensions of the Masters of Public Policy (MAPP) program. In addition, current survey efforts offer insufficient information for assessing the effectiveness (performance) of MAPP training. Providers have taken initiatives to improve some areas of program training. In its response, management concurred with all four report findings.
2. **A-05-0809-023** **Foster Home Licensing Regulation, Process and Practice Are Inconsistent.** This audit examined the family foster home licensing process and activities. DCF has over 5600 licensed foster homes. Contracted providers/CBCs prepare foster home licensing application packets and submit them to DCF for approval. Findings included the following: CBC oversight and the processing of licensing and re-licensing application packets is inconsistent, the quality of supporting documentation for licensure needs improvement and DCF needs improvement in collecting and tracking licensing data. Management concurred with findings and recommendations. Follow-up was performed in July 2008. Corrective action was completed on one recommendation and others are in progress. The next follow-up is scheduled for January 2010.
3. **C-0809-047** **Management of Foster Child Case Records.** At the request of the Secretary, this project was initiated after an incident arose from a lawsuit filed against the Department by former foster children, where the Plaintiffs' attorney alleges the Department withheld requested foster child case records, and turned over some records to an outside attorney under contract with the state, in violation of s. 39.202, F.S. Findings included the following: 1) an enterprise solution needs to be developed to manage foster child case records, and 2) written guidance is recommended to address the release of foster child case records to outside risk attorneys. As this was a consulting project, the Inspector General was not required to obtain managements response to these findings and recommendations; however, prior to our reports release, the Department settled the foster children's lawsuit in state court.
4. **C-0809-001** **Agency for Enterprise IT Risk Assessment Survey.** Florida Statute 282.318, Security of data and information technology resources, requires all state agencies to conduct a comprehensive risk analysis to determine the security threats to the data, information, and information technology resources of the agency. The risk analysis information is confidential and exempt from provisions of s. 119.071(1).
5. **A-0809-004** **Administration of the Department's Purchasing Card Program.** The Department's Purchasing Card Program was reviewed due to concerns expressed by management, and several recent investigations conducted by the Office of Inspector General that found purchasing cards were used to make unauthorized purchases. Findings of the audit included the following: 1) some purchasing cardholders had credit limits above prescribed standards without appropriate justification. 2) stronger internal control could be achieved by incorporating into written policy the actual Department practice of requiring

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completion of Traveler Agreement forms by cardholders authorized to use their card for travel and 3) the Department did not always ensure that purchasing cards were timely canceled for terminated employees. Management has concurred with our audit findings, and agreed to take appropriate corrective action as recommended in the report, including: reviewing all credit limits above the standard limit to ensure supporting justification is on file and enforcing this policy on all new requests; revising procedures to require that cardholders authorized to use their card for travel complete a Traveler Agreement form and periodically matching a list of purchasing cardholders against employee data from the Office of Human Resources to verify that purchasing cards do not remain active for cardholders who have separated from the Department.

6. **C-0809-092** **Application Inventory Management Evaluation.** The results of this project are confidential per Section 282.318, Florida Statutes (FS), and exempt from public records disclosure.
7. **A-0809-009** **Security of Data on Mobile Devices and Breach Notification Process.** The results of this project are confidential per Section 282.318, Florida Statutes (FS), and exempt from public records disclosure.
8. **E-16-0708-329** **Follow-up and Status Report on CBC Lead Agencies Tangible Personal Property and Information Technology Security – Auditor General Report #2008-119.** This follow-up and status report provided a written response to the Secretary on corrective actions taken after the Auditor General published Report #2008-119. Overall, 19 CBCs and the Department generally reported compliance with regard to tangible personal property and information technology security controls. CBC commentary revealed that the greatest opportunity for improvement is in disaster recovery plan testing. The audit report's 12 findings were based on fieldwork conducted at three community-based care lead agencies (CBCs) and the Department; however, the recommendations were addressed to, or applicable to, all CBCs and/or the Department. Based on the 12 findings and 21 recommendations included in the Auditor General's report, the Office of Internal Audit (OSIA) surveyed 20 Community Based Care Lead Agencies and Department staff responsible for administrative services activities to gather follow-up information to gauge the implementation level of Auditor General's recommendations. Nineteen (19) CBCs responded to the survey.
9. **A-0809-006** **Assessment of the Implementation of the Managing Entity Initiative.** This audit focused on the accountability and oversight of the managing entity initiative of the Substance Abuse and Mental Health Program Office. The initiative is similar to a managed care or community-based care model in which the Department contracts for systems of care, rather than contracting with many individual service providers. We found that the Program Office focused attention on encouraging collaboration, identifying community needs, updating administrative rules, and procurement, but did not have a comprehensive plan for implementation. We recommended establishment of a workgroup to develop a consumer-driven plan to address the following: collaboration; analysis of costs, benefits and risks; milestones for implementation; potential updates to existing laws and rules; governance; and roles and responsibilities. Although management did not concur with the establishment of a workgroup, an implementation plan was developed.

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10. **C-0910-003** **Evaluation of Application Development Procedures.** The results of this project are confidential per Section 282.318, Florida Statutes (FS), and exempt from public records disclosure.
11. **A-0809-147** **Controls for Processing Purchasing Card Transactions.** This audit was part of our annual audit plan. Purchasing cards are a method of payment to expedite the acquisition of goods and services. Compliance with regulations is essential to prevent fraud, waste and abuse, as well as, detect any discrepancies. Our audit focused on compliance with internal controls designed to ensure appropriate processing of purchasing card charges. Awareness of weaknesses in controls is imperative in managing strategies for achieving objectives. We identified several areas where management should strengthen and enforce controls to mitigate risks of fraud and improve efficiency. Those include proper documentation and timely approvals. Management concurred with the findings and recommendations and corrective actions are in progress.
12. **A-0910-006** **Sexually Violent Predator Program.** This program was reviewed because management expressed concern during Internal Audit's risk assessment process. The objective of this audit was to review the process for assessing and evaluating whether individuals referred to the Department meet the statutory definition of a sexually violent predator. The audit also examines management of contracts with providers for assessment and clinical evaluation services.
- The Office of Inspector General determined that over 90 percent (approximately 30,000) of referrals to the Department for assessment (screening) were determined not to be sexually violent predators, and therefore those cases were closed without progressing to a clinical evaluation. Further, a backlog of referrals has resulted in additional staffing needs for the program, including paying two contracted psychologists approximately \$208,000 to provide screening services. The audit also disclosed two ethical issues: one resulted in a provider voluntarily terminating his contract with the Department, and the other involved contracts with two former Department employees that violated the contract amount limits provision of the state's Code of Ethics.
- Management concurred with the recommendations in our report with one exception. Management in their response did not concur with the finding or the recommendations concerning referrals. Nevertheless, the Inspector General's Office continues to recommend the Sexually Violent Predator Program (SVPP) work with the Department of Corrections to develop ways of effectively "screening out" some of the 90 percent of offenders who do not require further evaluation, prior to their referral to SVPP. On September 10, 2009, the Inspector General's Office received documentation that the Department's Deputy Secretary, acting on behalf of the agency head, approved a request, after-the-fact, to waive the contract amount limits provision of the state's Code of Ethics for the contracts with the two former Department employees.

Section C: Appendix

List of Follow-up Reports Completed During FY 2008-2009

1. E-14-0809-016 Six-Month Status Report: Auditor General Report 2008-072
2. E-20-0708-052 Six-Month Status Report: Auditor General Report 2008-119
3. E-16-0708-031 Six-Month Status Report: Auditor General Report 2008-141
4. E-19-0708-096 Six-Month Status Report: Auditor General Report 2008-197
5. E-05-0708-036 Six-Month Status Report: OPPAGA Report 08-06
6. E-07-0708-025 Six-Month Status Report: OPPAGA Report 08-10
7. E-24-0607-273 Six-Month Status Report: OPPAGA Report 08-13
8. E-02-0708-074 Six-Month Status Report: OPPAGA Report 08-27
9. P-15-0809-039 2009-10 Legislative Budget Request, Schedule IX
10. E-16-0708-329 Summary Schedule of Prior Audit Findings for the Fiscal Year Ended June 30, 2008
11. E-05-0809-041 Audit Resolution CIN A-04-05-81883, A-133 Report of Single Audit of State of Florida
12. E-18-0506-115 Audit Resolution CIN A-04-07-87908, A-133 Report of Single Audit of State of Florida
13. E-18-0607-050 Audit Resolution CIN A-04-06-84817, A-133 Report of Single Audit of State of Florida

List of External Audit Reports Issued During FY 2008-2009

Auditor General:

1. 2009-100 Licensing and Fee Collection – Child Care Facilities and Homes and Substance Abuse Service Providers
2. 2009-095 Community-Based Care Pilot Program – Fiscal and Administrative Monitoring
3. 2009-039 Contract Monitoring and Other Selected Administrative Activities
4. 2009-144 State of Florida – Compliance and Internal Controls Over Financial Reporting and Federal Awards

Section C: Appendix

Office of Program Policy and Government Analysis (OPPAGA):

5. 08-52 DCF Takes Action to Improve Implementation of State's Community-Based Care Initiatives
6. 09-08 Lead Agencies Structure Their Adoption Programs in a Variety of Ways
7. 09-09 Outsourced Oversight for Community-Based Care Produced Benefits But Substantive Challenges
8. 09-15 Transition to Aging Resource Centers Complete; Enhancement of Elder Service System Continues

Federal:

9. A-04-08-03523 Review of Title IV-E Adoption Assistance Payments in Florida For The Period October 1, 2004, Through September 30, 2007