

**Department of Children and Families
Office of Inspector General**



**Annual Report
Fiscal Year 2023-2024**





State of Florida
Department of Children and Families

Ron DeSantis
Governor

Shevaun L. Harris
Secretary

September 5, 2024

Shevaun L. Harris, Secretary
Department of Children and Families
2415 North Monroe Street,
Tallahassee, Florida 32303-4190

Dear Secretary Harris:

In accordance with § 20.055(8)(a), Florida Statutes, it is my pleasure to present the Office of Inspector General Annual Report for Fiscal Year 2023-2024. The report details the accomplishments and efforts of staff within the Appeal Hearings, Internal Audit, and Investigations Sections during the fiscal year.

As highlighted within the annual report, some of the more significant accomplishments by the office include the completion of 20,291 appeal hearings activities and the receipt, review, and processing of 10,581 complaints. In addition, the office maintained accredited status through the Commission for Florida Law Enforcement Accreditation, Inc. and is in the process of achieving Excelsior accredited status during 2024.

We are committed to promoting accountability and integrity in a professional and timely manner. We look forward to continuing to work with the agency to accomplish our mission of *Enhancing Public Trust In Government*.

Respectfully,

Keith R. Parks
Inspector General

2415 N. Monroe St, Tallahassee, Florida 32303-4190

Mission: Work in Partnership with Local Communities to Protect the Vulnerable, Promote Strong and Economically Self-Sufficient Families, and Advance Personal and Family Recovery and Resiliency

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INTRODUCTION

The Office of Inspector General (OIG) worked diligently to meet its statutory mandates and fulfill its mission of “Enhancing Public Trust in Government.” This annual report summarizes the activities and accomplishments of the Department of Children and Families (Department) OIG for Fiscal Year (FY) 2023-2024.

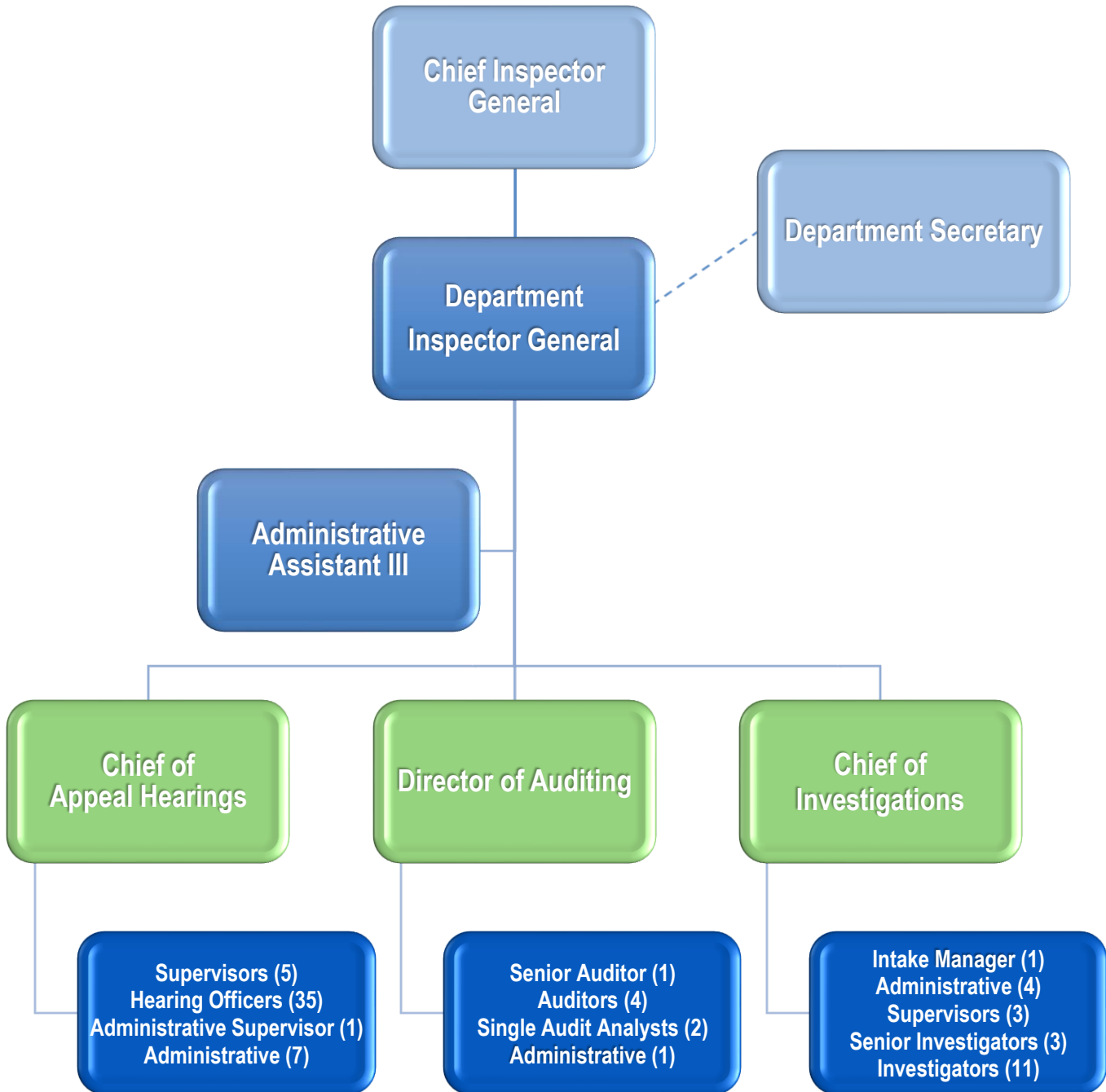
Statutory Requirements

The OIG is established in each state agency to provide a central point of coordination and responsibility for promoting and ensuring accountability, integrity, and efficiency in government. In accordance with § 20.055, Florida Statutes (F.S.), the Inspector General is appointed by and reports to the Chief Inspector General (CIG) and is under the general supervision of the agency head. As outlined in statute, the duties of the Inspector General include:

- Advising in the development of performance measures, standards, and procedures for the evaluation of state agency programs.
- Assessing the reliability and validity of information provided on performance measures and standards and making recommendations for improvement.
- Reviewing actions taken by the agency to improve program performance and making recommendations for improvement.
- Providing direction for, supervising, and coordinating audits, investigations, and management reviews relating to the programs and operations of the agency.
- Conducting, supervising, and coordinating activities that promote economy and efficiency and prevent or detect fraud and abuse.
- Informing the CIG of fraud, abuses, and deficiencies relating to programs and operations administered or financed by the agency; recommending corrective actions concerning fraud, abuses, and deficiencies; and reporting on the progress made in implementing corrective action.
- Ensuring effective coordination and cooperation between the Auditor General (AG), Office of Program Policy Analysis and Government Accountability (OPPAGA), federal auditors, and other governmental entities.
- Reviewing rules relating to programs and operations and making recommendations regarding their impact.
- Ensuring an appropriate balance between audit, investigative, and other accountability activities.
- Complying with the *General Principles and Standards for Offices of Inspector General* as published and revised by the Association of Inspectors General (AIG).

ORGANIZATIONAL CHART

As of June 30, 2024, there were 83¹ positions assigned to the OIG, which were distributed in the following three sections: Appeal Hearings, Internal Audit, and Investigations. Appeal Hearings Section and Investigations Section staff are located at headquarters and in field offices throughout the state.²



¹ It should be noted that 10 of the 83 are temporary Other Personal Services (OPS) positions assigned to the Appeal Hearings Section for purposes of the Medicaid Unwinding process.

² Offices: Investigations Section – Ft. Lauderdale, Miami, Orlando, Rockledge, Tallahassee, and Tampa.
Appeal Hearings Section – Ft. Lauderdale, Ft. Myers, Jacksonville, Marianna, Miami, Orlando, Pensacola, Rockledge, Tallahassee, Tampa, and West Palm Beach.

PROFESSIONAL CERTIFICATIONS AND LICENSES

In addition to the educational degrees and experience required for their respective positions, OIG staff members hold the following professional certifications and licenses:

Abuse Hotline Counselor (1)	Certified Welfare Fraud Investigator (1)
Accreditation Manager (3)	CFA³ Assessor (2)
AIG Board Member (1)	CFA Team Leader Assessor (1)
AIG Committee Chair (1)	CFA/FLA-PAC⁴ Instructor (1)
AIG Committee Member (2)	Department Certified Trainer (1)
AIG Institute Instructor (1)	EEOC⁵ Investigator (2)
AIG Peer Review Team Leader (1)	FLA-PAC Committee Chair (1)
AIG Peer Review Team Member (3)	Florida Bar Member (4)
Certified Accreditation Professional (1)	Florida Certified Law Enforcement (1)
Certified Correctional Officer (1)	Florida Certified Contract Manager (14)
Certified Fraud Examiner (3)	Florida Notary Public (32)
Certified Inspector General (3)	Florida Private Investigator (2)
Certified Inspector General Auditor (8)	Registered Clinical Social Work Intern (1)
Certified Inspector General Investigator (15)	Six Sigma Certified (4)
Certified Juvenile Probation Officer (1)	TCIIA⁶ Board Member (2)
Certified Public Manager (4)	Abuse Hotline Counselor (1)

³ Acronym for "Commission for Florida Law Enforcement Accreditation, Inc."

⁴ Acronym for "Florida Police Accreditation Coalition."

⁵ Acronym for "Equal Employment Opportunity Commission."

⁶ Acronym for "Tallahassee Chapter Institute of Internal Auditors."

EXECUTIVE SUMMARY

In accordance with § 20.055, F.S., the OIG is “established in each state agency to provide a central point for coordination of and responsibility for activities that promote accountability, integrity, and efficiency in government.” Additionally, by September 30, the OIG is required to complete an annual report summarizing activities of the office during the prior fiscal year. Consistent with these duties, the following accomplishments, highlights, and activities demonstrate significant efforts of the Department OIG staff during FY 2023-2024:

Appeal Hearings Section

- Completed a total of **20,291** hearing activities, to include **19,386** fair hearing requests, **794** administrative disqualification hearing requests, and **111** nursing facility discharge or transfer hearing requests.
- Conducted hearings and issued final orders for **3,313** appeals.

Internal Audit Section

- Published **two (2)** audit reports, which contained **one (1)** finding and **two (2)** recommendations for improvement of efficiency and effectiveness in Department programs and operations. Management concurred with the results of the audits. Issued a six-month corrective action status report for **one (1)** audit report.
- Performed liaison activities for **12** external audit projects from five external organizations. Issued a corrective action status report for **one (1)** Auditor General (AG) Report.
- Reviewed and processed **192** Department financial reporting packages of state and federal financial assistance as well as **43** certifications of “no audit required.”

Investigations Section

- Received, reviewed, and processed **10,581** complaints or requests for assistance from citizens, clients, and Department managers and employees.
- Conducted **83** Whistle-blower determinations in accordance with the Whistle-blower’s Act.⁷
- Opened **47** cases and completed **64** cases that examined **116** allegations of violations of statute, rule, policy, or contract and tracked **51** corrective actions (**108** recommendations) by management to ensure responses to recommendations for personnel action or policy clarification were appropriately addressed.
- Responded to **89** public records requests under Chapter 119, F.S.
- Processed **5,088** Inspector General Reference Checks for current and former Department and provider employees.
- Conducted **32** Outreach Training sessions for **1,146** Department and/or provider employees on the role of the OIG, when and how to report suspected employee wrongdoing, protection afforded under the Whistle-blower’s Act, and how to recognize violations of statute, rule, policy, or contract.
- Maintained re-accreditation status through the CFA.

⁷ The Whistle-blower’s Act, §§ 112.3187-112.31895, F.S., is intended to protect current employees, former employees, or applicants for employment with state agencies or independent contractors from retaliatory action. The Whistle-blower’s identity is protected from release pursuant to § 112.3189, F.S.

APPEAL HEARINGS SECTION

The Appeal Hearings Section conducts administrative fair hearings for applicants or recipients of public assistance programs when the Department's action, or failure to act, adversely affects individual or family eligibility for federally funded assistance. In addition, the Appeal Hearings Section conducts administrative disqualification hearings for instances when the Department alleges benefit recipients have committed an intentional program violation in the Cash Assistance Program and/or the Supplemental Nutrition Assistance Program (SNAP). Hearings are also conducted for applicants and recipients of the Medicaid Waiver Program for the Agency for Persons with Disabilities (APD). The Appeal Hearings Section further conducts administrative fair hearings on eligibility or amount of assistance for Office of Child and Family Well-Being programs funded through the Social Security Act, such as Independent Living Services, Maintenance Adoption Subsidy, and the Guardianship Assistance Program. In addition, the section conducts limited hearings for other state agencies, as follows:



Agency for Health Care Administration (AHCA)

For proposed discharge or transfer action from a nursing facility.

Department of Elder Affairs (DOEA)

For individuals denied placement or removed from the Statewide Medicaid Managed Care (SMMC) Long-Term Care (LTC) program wait list.

Department of Health (DOH)

For applicants or recipients of the Special Supplemental Food Program for Women, Infants, and Children (WIC) are adversely affected.

Department of Revenue (DOR)

For disputes over distribution of child support payments to the custodial parent, a passport denial for the absent parent, or when DOR intercepts a federal payment to the absent parent to repay past due child support.

The Appeal Hearings Section reports directly to the Inspector General. This ensures independence and complies with federal regulations requiring a hearing officer to be a headquarters-level employee. Hearings are funded with 50% federal funds and 50% state general revenue.

Hearings Authority

The section operates pursuant to the following authorities:

- § 409.285, F.S., *Opportunity for hearing and appeal*
- § 120.80, F.S., *Exceptions and special requirements*
- § 400.0255, F.S., *Resident transfer or discharge; requirements and procedures; hearings*
- § 393.125, F.S., *Hearing rights*
- Rule 65-2.042, et seq., Florida Administrative Code (F.A.C.), *Applicant/Recipient Fair Hearings*

The major controlling federal regulations are as follows:

- Public Law (P.L.) 104-193, *Temporary Assistance to Needy Families (TANF) Personal Responsibility and Work Reconciliation Act of 1996*
- 42 Code of Federal Regulations (CFR) § 431.200, *Medicaid Fair Hearings for Applicants and Recipients*
- 7 CFR § 273.15, *SNAP, Fair Hearings*
- 7 CFR § 273.16, *SNAP, Disqualification for Intentional Program Violation*

Hearings Jurisdiction

The section conducts hearings for the following programs:

Office of Economic Self-Sufficiency

- Cash Assistance Program or TANF
- SNAP
- Disaster SNAP (D-SNAP)
- Medicaid Eligibility for all programs, including Waivers and the Institutional Care Program (ICP)
- Refugee Assistance Program (RAP)
- Optional State Supplementation (OSS)

Office of Child and Family Well-Being

- Independent Living Services (Post-Secondary Education Services and Support, Extended Foster Care, and Aftercare Services)
- Maintenance Adoption Subsidy
- Guardianship Assistance Program

AHCA

- Nursing Facility Discharge or Transfer Hearings

APD

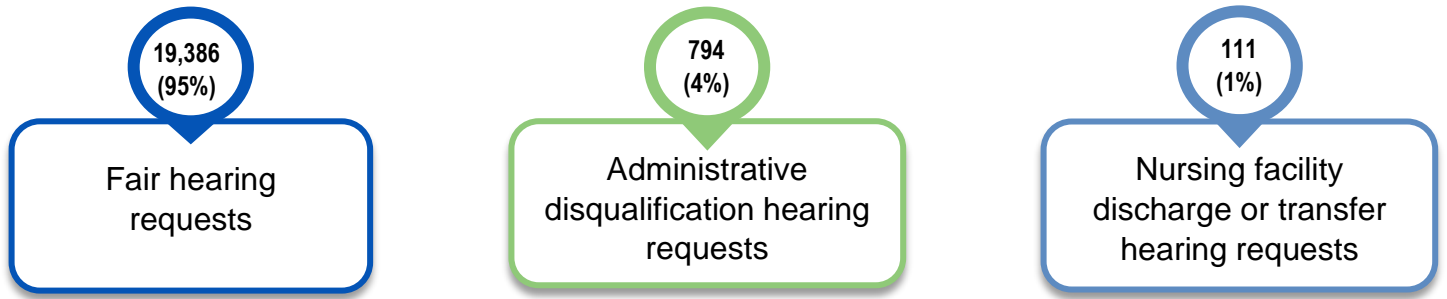
- Developmental Disabilities Individual Budget (iBudget) Medicaid Waiver Program

Others

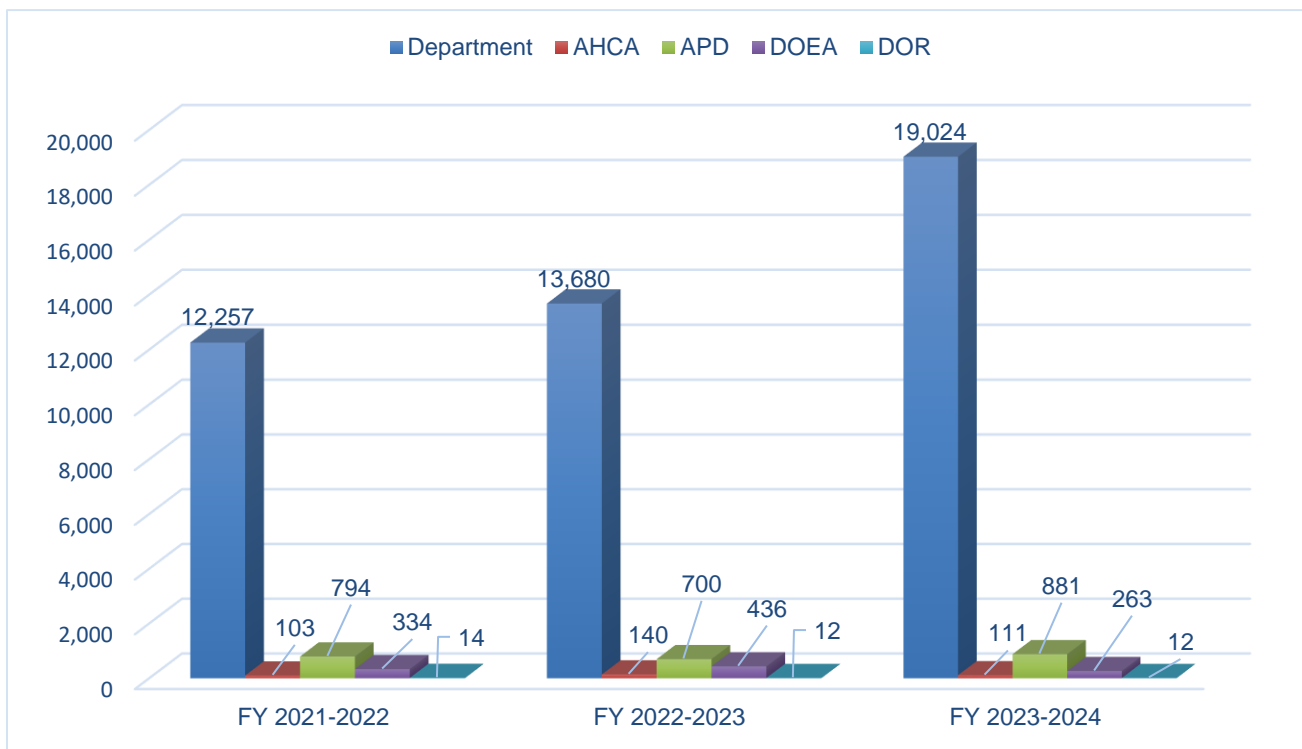
- DOH WIC
- Limited Child Support Enforcement issues for DOR
- DOEA SMMC LTC program waitlist

Hearings Activities Initiated

There were a total of **20,291** hearing activities initiated, as follows:

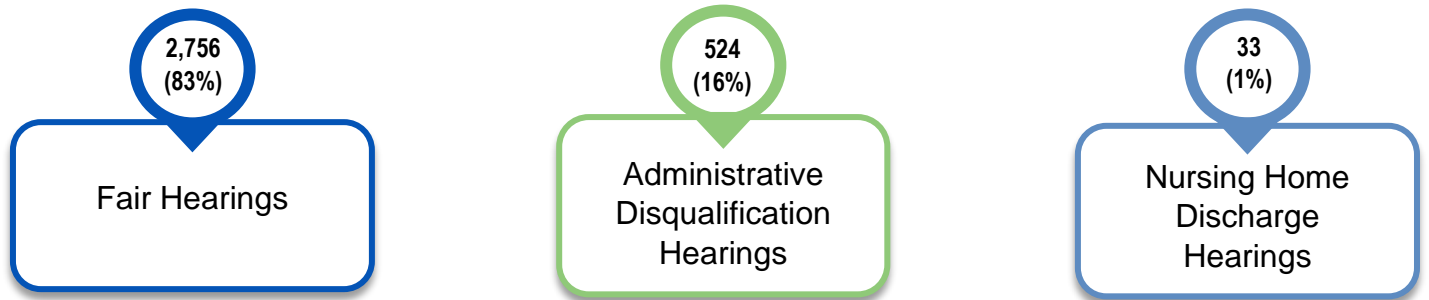


Hearings Activities by State Agency⁸

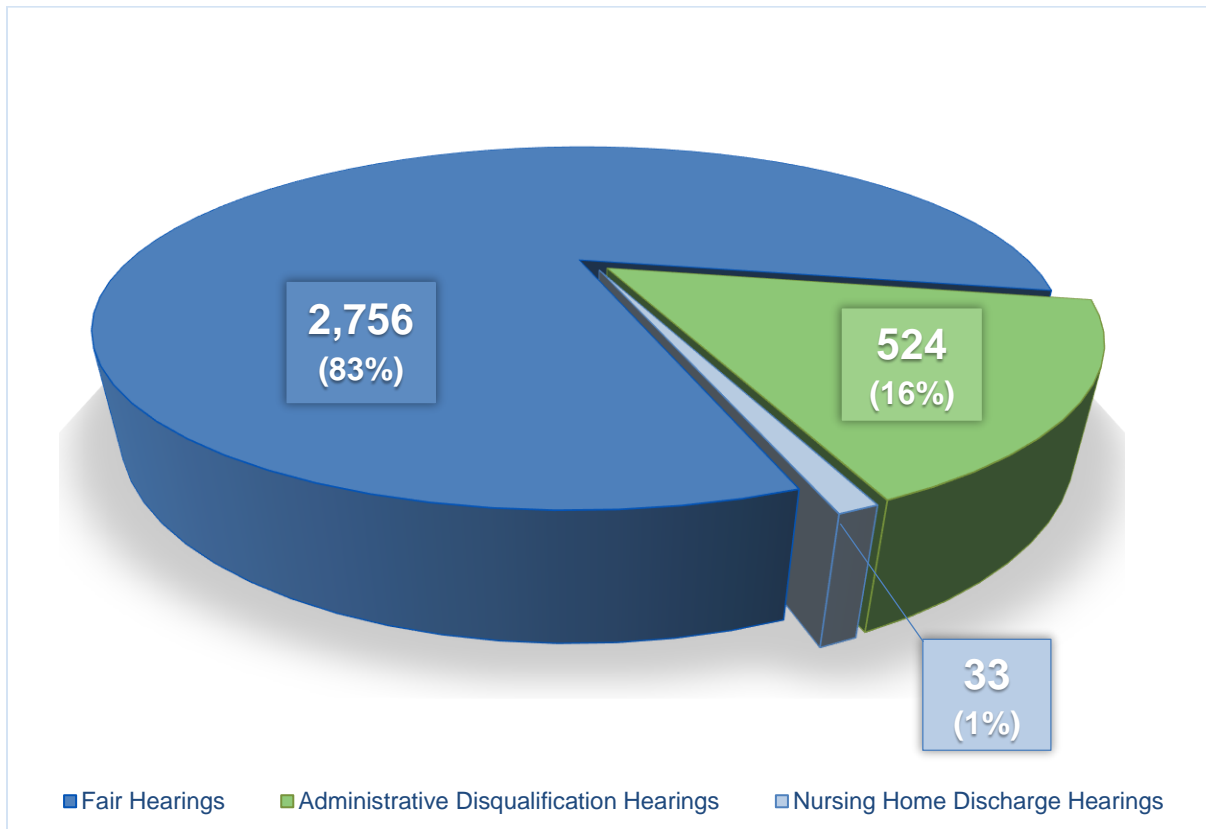


⁸ Department hearings include fair and administrative disqualification hearings. AHCA hearings include only nursing home discharge or transfer hearings. APD, DOEA, and DOR hearings include only fair hearings.

Of the **20,291** hearings activities initiated, a hearing was convened and an order was issued in **3,313**. The remaining appeals were closed either as abandoned or voluntarily withdrawn.



Hearings Convened and Orders Issued by Type



INTERNAL AUDIT SECTION

Internal Audit Unit

The Internal Audit Unit conducts audits and consulting projects related to programs, operations, and contracts to promote efficient and effective use of Department resources and ensure compliance with regulations, laws, rules, policies, procedures, and contractual requirements. The scope of internal auditing includes evaluating the adequacy and effectiveness of internal controls, assessing the Department governance process, and evaluating risk exposures, including the potential for fraud. Acting as a liaison between external auditors and the Department, the unit monitors implementation of Department responses to reports issued by the AG, OPPAGA, and other external government entities.

The unit published **two (2)** audits, consisting of **one (1)** finding and **two (2)** recommendations for improvement, and Department management concurred with the results of the audits. A six-month corrective action status report was also issued for **one (1)** audit report.

The unit conducted liaison activities for **12** external audit projects from the AG, OPPAGA, Department of Financial Services, Department of Management Services, and the U.S. Department of Health and Human Services. A six-month corrective action status report was also issued for **one (1)** AG report.



Single Audit Unit

The Single Audit Unit is responsible for reviewing single audit reporting packages and related documentation of both state and federal funding and expenditures. The activity is mandated by 2 CFR § 200.501, *Federal Uniform Grant Guidance*, and § 215.97, F.S., *Florida Single Audit Act*.

Independent certified public accountants perform single audits of Department contractor and provider financial records and expenditures of state and federal financial assistance. Single audits are required by contract and considered to be a critical accountability component for state and federally funded initiatives.

Single audit analysts conduct desk reviews and examine single audit reporting packages. At the completion of each desk review, single audit analysts prepare an Audit Review Status Report for the Department contract manager and contract administrator. If a report contains findings, the Office of Contracted Client Services is also notified. While many desk reviews require no follow-up action, issues that require further attention from contract managers can range from a review of report findings communicated for informational purposes to significant issues requiring corrective action by the recipient.

The unit also provides feedback to external auditors when clarification of an existing audit is required. For the fiscal year, the unit analyzed and reviewed **192** Department financial reporting packages of state and federal financial assistance as well as **43** certifications of “no audit required.”

Florida Inspectors General Expertise System (FIGES)

Functioning as an expertise reference tool, FIGES is a public, online database of Florida state and local government OIGs and is accessible through the Internet at eds.myflfamilies.com/FIGES/Default.aspx. It contains, among other data, contact information, areas of expertise, and professional certifications for staff members of state and local government OIGs. The Internal Audit Section served as the site administrator for FIGES, which maintained information for approximately **385** personnel from **47** OIGs, as of the end of the fiscal year.

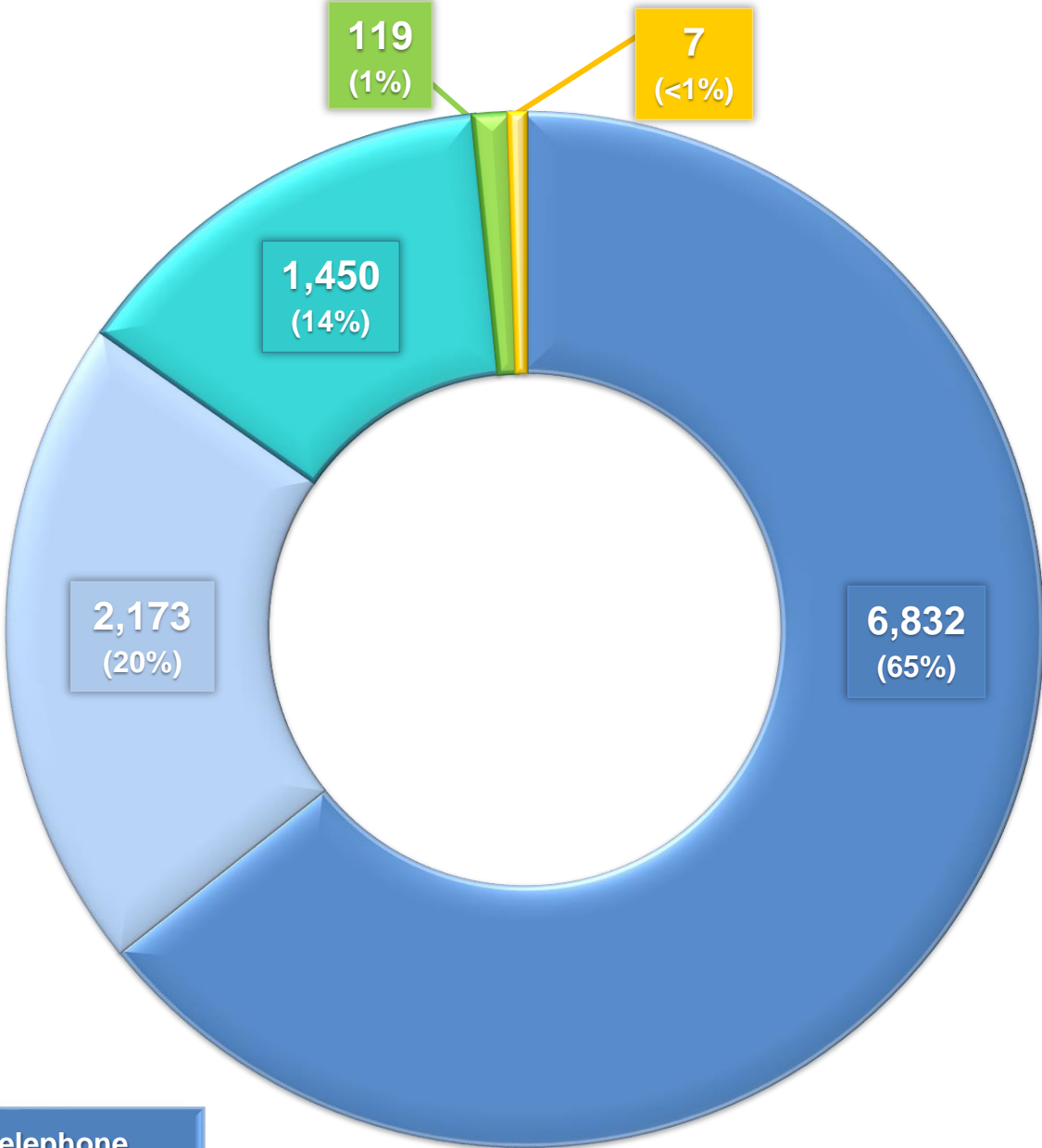
Integrated Internal Audit Management System (IIAMS)

IIAMS is a Department-developed web application that manages and documents all aspects of the audit process, including planning, fieldwork, reporting, and follow-up. It simplifies and centralizes working paper documentation in multiple formats and enables reviewing, storing, and sharing of work performed by Internal Audit Section staff. Furthermore, IIAMS provides an effective process for tracking audit hours and documenting required continuing professional education and other training. As of the end of the fiscal year, IIAMS entailed approximately **49** users from **11** state agencies, including the Department.

INVESTIGATIONS SECTION

Intake Unit

The Intake Unit handles incoming calls and reviews all complaints or requests for assistance received by the Investigations Section via telephone, e-mail, website, letter, or in-person. The Intake Unit reviewed a total of **10,581** complaints or requests for assistance, received in the following manner:



Telephone
E-mail
Website
Letter
In-person

Investigations Unit

The Investigations Unit conducts Whistle-blower determinations to identify whether complainants and the information they disclose meet the requirements of the Whistle-blower's Act. Every complaint received is evaluated for Whistle-blower status; however, whenever an eligible complainant does not specifically report under mandatory reporting requirements per Children and Families Operating Procedure (CFOP) 180-4, an interview with the complainant is conducted and a determination made as to whether the information disclosed is the type of information described in § 112.3187(5), F.S. The Investigations Unit conducted **83** such Whistle-blower determinations.

The Investigations Unit initiates investigations or management reviews, including those filed under the Whistle-blower's Act or matters involving Sexual Harassment allegations, when violations of statute, rule, policy, and/or contract provisions are alleged. While investigations are administrative in nature, potential criminal violations may be discovered during the investigative process. When a determination is made that the subject of an investigation has potentially committed a criminal violation, the investigation is coordinated with the Florida Department of Law Enforcement (FDLE) or appropriate local law enforcement agency for criminal investigation.

Investigations and Management Reviews

47	Cases were opened for investigation or management review
64	Cases were completed
116	Allegations were investigated or reviewed



Included in the **64** cases completed were the following:

Whistle-blower Investigations

There were **two (2)** investigations completed in accordance with the Whistle-blower's Act.

Sexual Harassment Investigations

There were **six (6)** investigations completed in accordance with CFOP 60-10, Chapter 5, *Unlawful Harassment and Unlawful Sexual Harassment*.

Recommended Corrective Actions

Based on the investigation or management review, the Investigations Unit may make recommendations in the form of corrective actions. The recommendations are for the purpose of process improvement and are made to Department or provider management. Final reports, including recommendations, are sent to all appropriate parties and corrective actions are tracked to completion. A total of **51** corrective actions, entailing **108** recommendations, were issued by the Investigations Unit.

Personnel Actions Associated with Investigations and Management Reviews

Department personnel actions or measures taken by the Florida Certification Board (FCB) may occur as a result of allegations reported to the OIG or investigations or management reviews completed by the OIG. The following actions occurred at the discretion of management, the employees, or the FCB:

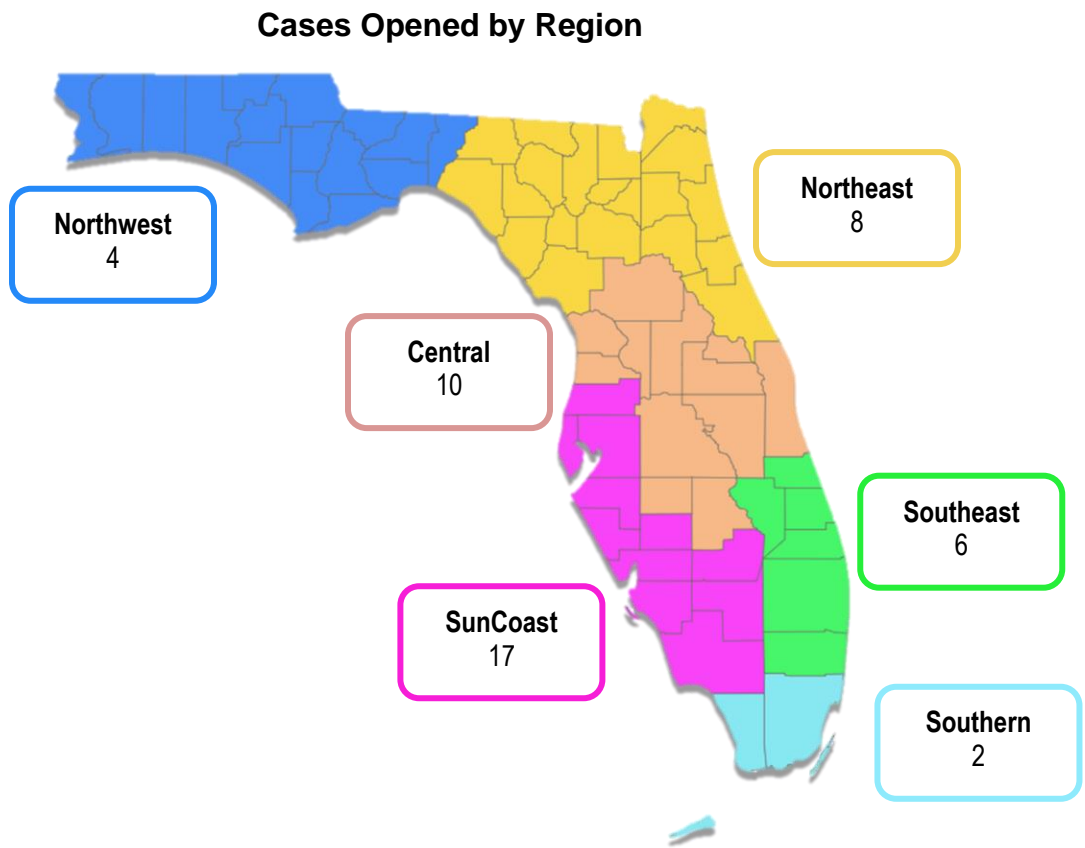
Personnel Actions

- 52 Personnel File Updates
- 29 Resignations
- 26 Terminations
- 3 Verbal Counselings
- 2 Written Counselings
- 1 Written Reprimand

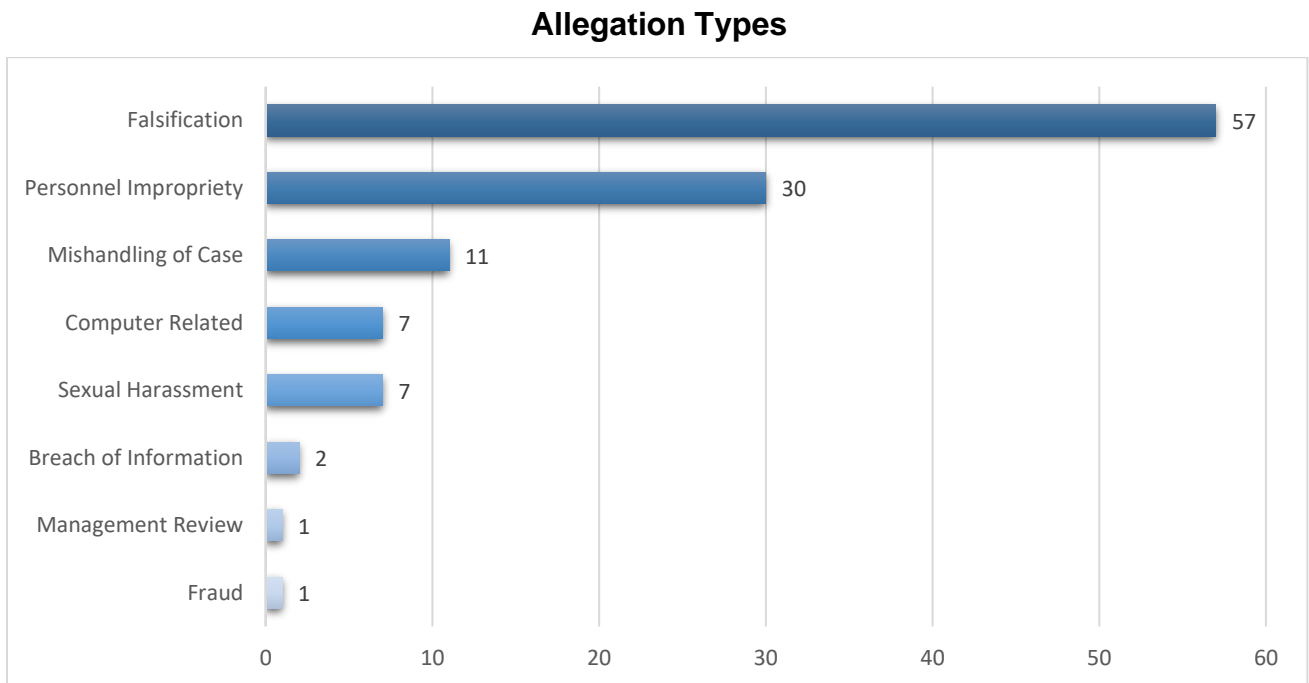
FCB Actions

- 40 Revocations
- 2 Inactives
- 1 Closed
- 1 Expiration
- 1 Open Ethics Investigation

The following chart provides a comparative analysis of the **47** cases opened by Region:



The allegation types and corresponding **116** allegations investigated for closed cases are as follows:



Public Records Requests

Responded to **89** public records requests under Chapter 119, F.S.

Inspector General Reference Checks / Database Checks for Prior Investigations

Current and former Department and provider employees being considered for rehire, transfer, promotion, or demotion are screened to determine whether they were the subject of an OIG investigation that resulted in supported findings. The OIG processed **5,088** such reference checks.

Inspector General Outreach Program

The Investigations Unit offers an outreach program to educate management and staff of the Department and providers on the role of the OIG. The training sessions entail when and how to report suspected employee wrongdoing, protection afforded under the Whistle-blower's Act, and how to recognize violations of statute, rule, policy, or contract. The OIG completed **32** training sessions, involving **1,146** individuals, with Department employees and/or contracted and subcontracted providers.

Summary of Internal Audit Projects Issued

Project #A-2324DCF-026: *Enterprise Cybersecurity – Incident Response, Reporting, and Recovery*

The audit objectives were to determine whether:

- Policies and procedures have been established to guide the determination of whether an incident has occurred and what to do about it, and whether the plan involves key stakeholders, defines roles and responsibilities, and is tested to promote awareness and execution.
- The Department of Children and Families (Department) has effective cybersecurity incident response capability to effectively detect, analyze, and respond to cyber threats.
- Internal controls are functioning effectively to prevent further damage and reduce the immediate impact of the incident by removing the adversary's access. Also, determine whether controls are functioning effectively to allow for the return of normal operations by eliminating the artifacts of the incident and mitigating the vulnerabilities or other conditions that were exploited.
- Internal controls are functioning effectively to document incidents, inform Department leadership, harden the environment to prevent similar incidents, and apply the lessons learned to improve the handling of future incidents.
- The Department is effectively coordinating with the Cybersecurity Operations Center (CSOC), Florida Department of Law Enforcement (FDLE), and Cybersecurity Incident Response Team (CSIRT) throughout the response process, as appropriate.

The scope of this audit included Department policies, procedures, and practices related to incident response, reporting, and recovery in effect during the period of July 1, 2023 through the end of audit fieldwork.

In general, Department controls and compliance with incident response, reporting, and recovery requirements contained in Rule 60GG-2, Florida Administrative Code (F.A.C.), State of Florida Cybersecurity Standards (SFCS), were adequate.

Management concurred with the results of the audit.

Project #A-2223DCF-080: *Enterprise Cybersecurity – Identity and Access Management*

The audit objectives were to determine whether the Department:

- Manages identities and credentials for authorized devices, processes, and users (PR.AC-1).
- Manages and protects physical access to assets (PR.AC-2).
- Manages remote access (PR.AC-3).
- Ensures access permissions and authorizations are managed, incorporating the principles of least privilege and separation of duties (PR.AC-4).
- Ensures network integrity is protected, incorporating network segregation and segmentation where appropriate (PR.AC-5).
- Proof and bond identities to credentials, asserting in interactions when appropriate (PR.AC-6).
- Authenticates users, devices, and other assets commensurate with the risk of the transaction (PR.AC-7).

The scope of this audit included the review of policies, procedures, and practices in effect during the period of July 1, 2022 through the end of audit fieldwork.

The audit disclosed that, in general, Department controls and compliance with Rule 60GG-2.003(1), F.A.C., Identity Management, Authentication, and Access Control, were adequate to ensure access to Information Technology (IT) resources is limited to authorized users, processes, or devices and to authorized activities and transactions. However, we found that user access to the Florida Safe Families Network (FSFN) was not terminated in accordance with Department security of data and information technology resources policy and procedure. We also noted one opportunity for improvement, which we consider to be confidential under § 282.318(4)(g), Florida Statutes (F.S.).

Management concurred with the results of the audit and provided a statement describing their proposed corrective actions.

Follow-up to Prior Internal Audit Reports Issued

Project #A-2223DCF-080: *Six-Month Follow-up to Enterprise Cybersecurity – Identity and Access Management*

Finding #1: User access to FSFN was not terminated in accordance with Department security of data and information technology resources policy and procedure.

- Recommendation #1: Fully implemented.
- Recommendation #2: In progress.

Summary of Internal Audit Projects Initiated and Terminated

Project #A-2223DCF-073: *Foster Care and Adoption Payments*

The project was terminated after discussion with the Secretary. At the time this project was in the preliminary stages, the Department was informed that both the U.S. Department of Health and Human Services and Office of Program Policy Analysis and Government Accountability (OPPAGA) were also initiating audits relating to the topics of foster care and adoptions.

Project #A-2223DCF-113: *Supplemental Nutrition Assistance Program*

The preliminary audit objectives were to review the process for approving benefit applications and disbursing payments; however, since the MyACCESS portal replaced the Automated Community Connection to Economic Self-Sufficiency (ACCESS) portal on December 5, 2023, this project was terminated to provide the Office of Economic Self-Sufficiency (OES) time to address any technical issues that might arise from using the new portal.

External Audit Liaison Activities Initiated

Florida Auditor General

- Operational Audit
- State of Florida Federal Awards Audit – Fiscal Year (FY) 2023-2024

Office of Program Policy Analysis and Government Accountability

- Child Welfare Placement Array
- Child Welfare Services Funding
- Human Trafficking Services and Funding
- Multi-Disciplinary Teams
- Commercial Sexual Exploitation of Children
- Community Partnership Schools
- Sexually Violent Predator Program

Department of Financial Services

- Contract Management and Monitoring Processes

Department of Management Services

- Retirement Compliance

U.S. Department of Health and Human Services

- Florida COVID-19 Public Health Emergency Unwinding Medicaid Beneficiary Eligibility

External Audit Reports Issued

Florida Auditor General

2024-040	Child Protective Investigations and Oversight and Administration of Community-Based Care Lead Agencies
2024-174	State of Florida Compliance and Internal Controls Over Financial Reporting and Federal Awards

Office of Program Policy Analysis and Government Accountability

23-15	Adoption of Children in Florida: An Overview
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Six-Month Follow-up to Prior External Audit Reports Issued

Florida Auditor General

2024-040	Child Protective Investigations and Oversight and Administration of Community-Based Care Lead Agencies
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Summary of Investigations and Corrective Actions Completed

Headquarters

2023-0010 A Florida Abuse Hotline (Hotline) Abuse Counselor shared her Active Directory User ID and password with a co-worker. **Supported**. Another Hotline Abuse Counselor used a co-worker's Active Directory User ID and password to log onto the co-worker's Department-assigned computer. **Supported**.

Corrective Action: The employees were issued Verbal Counselings and required to retake Department Security Awareness Training. The employees' personnel files were updated to reflect the findings of the investigation.

2023-0020 An Office of Domestic Violence (ODV) Director violated the Sunshine Law by arranging a secret meeting among select domestic violence center Executive Directors and coalition leadership. **Not Supported**. A Chief Executive Officer (CEO) of a contracted provider violated the Sunshine Law by arranging a secret meeting among select domestic violence center Executive Directors and coalition leadership. **Not Supported**.

Corrective Action: The Director was terminated. The ODV management team and contracted providers were informed that all e-mails and telephone records related to Department business, even those derived from personal e-mail addresses and personal devices, are a matter of public record and must be maintained under public records law. The ODV management team and contracted providers were also reminded that all public meetings are to be properly noticed under the Sunshine Law.

2023-0030 A Chief Information Officer accessed Department security camera footage without a legitimate business reason. **Not Supported**.

Corrective Action: No action required.

2023-0032 An Exemption Coordinator accessed confidential child abuse investigation records without a legitimate business reason and subsequently used that information to harass a Department client with whom she had a personal relationship. **Supported**.

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

Circuit 1

2021-0042 A Child Protective Investigator Supervisor (CPIS) falsified supervisor consultation records in FSN Investigations #2021-142142, #2021-147622, #2021-152545, #2021-154959, #2021-158423, #2021-159624, and #2021-190944. **Neither Supported Nor Refuted**.

Corrective Action: The employee resigned. Based on the recommendation that additional training regarding supervisor consultations be considered, a review of the Northwest Region (NWR) training calendars, plans, and supports for 2023 was completed to ensure that supervisory consultation support/training is occurring as needed. Currently located on the NWR Child Protective Investigator (CPI) support page is a heading that focuses solely on supervisor support and contains examples, tip sheets, operating procedure information, and information around second tiers. The Decision Support Team has been reconfigured with new trainings that focus on Program Administrator (PA) support that leads supervisors through a consultation process in determining safe or unsafe cases. Action for child protection was brought onsite twice in 2023 with a two-day offering of supervisor consultation training. The Operation Review Specialist provided small group learning events in each office around supervisor consultation. The NWR-led quality sprints during 2023 all focused on supervisor consultation support and the PAs regularly review samples of work.

- 2021-0076 A CPI falsified child protective investigation records in FSFN Investigations #2021-213514 and #2021-150918 and FSFN Special Conditions Referral #2021-172129. **Supported.**
- Corrective Action:** The employee resigned and the employee's personnel file was updated to reflect the findings of the investigation. The Florida Certification Board (FCB) was notified and revoked the employee's Child Welfare Protective Investigator and Provisional Child Welfare Protective Investigator certifications.
- 2022-0037 A Senior Child Protective Investigator (SCPI) falsified child protective investigation records in FSFN Investigations #2022-070938, #2022-073151, and #2022-084125. **Investigation Terminated.**
- Corrective Action:** The employee resigned. The FCB was notified and revoked the employee's Provisional Child Welfare Protective Investigator and Child Welfare Protective Investigator certifications. The investigation was terminated based on lack of cooperation of witnesses and the resulting inability to achieve investigative findings.
- 2022-0043 A CPI falsified child protective investigation records in FSFN Investigations #2022-182916, #2022-217102, and #2022-221165. **Investigation Terminated.**
- Corrective Action:** The employee resigned. The FCB was notified and revoked the employee's Provisional Child Welfare Protective Investigator certification. The investigation was terminated based on lack of cooperation of witnesses and the resulting inability to come to investigative findings.
- 2023-0023 SH An Eligibility Specialist I sexually harassed a Department employee. **Not Supported.**
- Corrective Action:** Based on the additional information that there were inappropriate conversations in the workplace, meetings were held to remind management and staff about professionalism in the workplace. Due to information that the allegations made by the complainant were not reported by Human Resources to the OIG within two business days, a written reminder was issued to all Human Resources staff regarding the reporting requirements of Children and Families Operating Procedure (CFOP) 180-4.

Circuit 2

- 2019-0086 A CEO of a subcontracted provider submitted false zoning verification, fire inspection, and health inspection documents to the Department for the license relocation of a group home. **Supported.** The CEO submitted false health inspections of group homes to the Department for 2019 license renewals. **Supported.**
- Corrective Action:** The provider's licensing file was updated to reflect the findings of the investigation and board members were sent copies of the report. Based on the provider's failure to submit annual independent audit reports for licenses expiring in January 2022 and January 2023, and no independent audit report has been uploaded to FSFN for fiscal year 2023-2024 license renewal, the Regional Licensing Manager began conducting supervisor consultations with each licensing specialist at least twice per month to monitor and ensure all licensing documents are uploaded within 72 hours of receipt. Based on information that the provider may be conducting business with related parties, the Office of Administration is requesting documents from the provider and planned an on-site assessment. Based on information that two individuals who performed work for the provider were not identified as employees or volunteers and therefore not subjected to required background screening, the Office of Licensing has monitored the circumstances and not been able to determine whether they are working as staff or volunteers. Based on information regarding the employee's criminal history and past exemption, the Chief of Background Screening confirmed that an exemption was granted in 2009 and subsequent charges were not disqualifying. Based on information that there was no documentation of a contract renewal between the contracted provider and

subcontracted provider, it was reported that it is not a requirement for lead agencies to contract with child-caring agencies; however, those who do not contract enter into a rate agreement.

2021-0004 A contracted provider employee accessed a case in FSFN without a legitimate business reason. **Investigation Terminated.** The employee revealed confidential information to an individual not authorized to have that information. **Investigation Terminated.**

Corrective Action: The employee resigned. The investigation was terminated based on information that the employee is not eligible for rehire and there was no likely benefit to the state to have a final report on the disclosed information.

2023-0006 A Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case IDs #102746160 and #102878062. **Investigation Terminated.**

Corrective Action: The employee was terminated. The FCB was notified. The employee's Provisional Child Welfare certification is inactive and Provisional Child Welfare Case Manager certification is expired. The investigation was terminated based on information that the employee is not eligible for rehire and there was no likely benefit to the state to have a final report on the disclosed information.

Circuit 3

2022-0028 A Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case IDs #101596993, #101663432, and #102563947. **Investigation Terminated.**

Corrective Action: The employee was terminated. The FCB was notified and revoked the employee's Provisional Child Welfare Case Manager certification. The investigation was terminated based on information that the employee is not eligible for rehire and there was no likely benefit to the state to have a final report on the disclosed information.

Circuit 4

2020-0062 A Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case ID #162144. **Neither Supported Nor Refuted.**

Corrective Action: The employee resigned. Based on information that staff assigned for Out-of-County Services (OCS) did not timely make contact with a child, the provider now reviews all incoming OCS requests for conflicting information and verifies with the lead agency in order to ensure clarity on the request for supervision. In addition, only children with an OCS request will be assigned in FSFN to a Courtesy Case Manager and if the sending lead agency completes a home visit on a case that is assigned through OCS, the Courtesy Case Manager will document that the child was seen by the sending lead agency.

2021-0030 A CPI falsified child protective investigation records in FSFN Investigations #2021-113927 and #2021-117893. **Supported.**

Corrective Action: The employee resigned and the employee's personnel file was updated to reflect the findings of the investigation. The FCB was notified and revoked the employee's Provisional Child Welfare Protective Investigator certification.

2021-0062 A Prevention Specialist of a subcontracted provider falsified child protective supervision records in FSFN Case IDs #101399270, #102354320, and #102421785. **Neither Supported Nor Refuted.**

Corrective Action: The employee was terminated.

2022-0007 A CPI falsified child protective investigation records in FSFN Investigations #2021-341283, #2021-355592, and #2021-366700. **Supported.**

Corrective Action: The employee was terminated and the employee's personnel file was updated to reflect the findings of the investigation. The FCB was notified and revoked the employee's Provisional Child Welfare Protective Investigator certification.

2022-0034 A Targeted Case Manager falsified home visit documentation in MyEvolv Case IDs #00041472, #00057437, and #00057652. **Investigation Terminated.**

Corrective Action: The employee resigned. The investigation was terminated after it was discovered that the employee did not work under a subcontract for the Department; therefore, the OIG had no jurisdiction. The matter was referred to the Agency for Health Care Administration (AHCA) OIG for coordination with Medicaid Program Integrity.

2023-0050 SH A CPI sexually harassed a Department employee. **Not Supported.**

Corrective Action: The employee resigned. Based on testimony regarding possible inappropriate conversations in the workplace, all Northeast Region Office of Child and Family Well-Being staff were reminded to review CFOP 60-10 and CFOP 180-4 to be aware of what constitutes sexual harassment, how such behavior is not tolerated, and who the actions, if occurring, must be reported to.

Circuit 5

2023-0036 An Adult Protective Investigator falsified adult protective investigation records in FSFN Investigations #2023-172500 and #2023-176110. **Supported.**

Corrective Action: The employee resigned and the employee's personnel file was updated to reflect the findings of the investigation. An e-mail was sent to all employees reiterating what constitutes falsification and the consequences of such actions.

2023-0051 A CPI falsified child protective investigation records in FSFN Investigations #2023-071128 and #2023-083578. **Supported.** The CPI falsified child protective investigation records in FSFN Investigation #2023-041295. **Neither Supported Nor Refuted.**

Corrective Action: The employee was terminated and the employee's personnel file was updated to reflect the findings of the investigation. The FCB was notified and revoked the employee's Provisional Child Welfare Protective Investigator certification. Based on the Additional Information that there were discrepancies in the employee's Vicinity/Map Mileage Logs, TripLog, and Statewide Travel Management System (STMS), refresher training was provided to service center staff.

2024-0001 A Family Preservation Specialist of a subcontracted provider falsified child protective supervision records in FSFN Case ID #102081724. **Supported.** The Family Preservation Specialist falsified mileage reimbursement records. **Supported.**

Corrective Action: The employee resigned and the employee's personnel file was updated to reflect the findings of the investigation. The FCB was notified and revoked the employee's Provisional Child Welfare Case Manager and Child Welfare Case Manager certifications. An invoice was sent to the employee with a letter explaining the findings to seek recoupment. Due to case activities not being timely documented, a memorandum was submitted to all case management staff restating the requirement that all case documentation must occur within two business days of occurrence. In addition, the topic was added to the agenda for a meeting with all case management leadership.

Circuit 6

2023-0013 WB A Program Director, two Assistant Program Directors, a Case Manager Supervisor, and a Case Manager of a subcontracted provider failed to ensure the safety of a child in their care by continuing to allow the child to be transported by individuals who may have been involved in or responsible for the child's ongoing abuse. **Not Supported**. The Case Manager failed to ensure the safety of a child by sending an unaccompanied child victim into his Alleged Perpetrators' residence to retrieve his belongings, thereby placing the child victim at additional risk. **Supported**. The Program Director, two Assistant Program Directors, the Case Manager Supervisor, and the Case Manager failed to take appropriate steps to find a stable placement for a child after his placement disruption on January 17, 2023. **Not Supported**.

Corrective Action: The Case Manager was terminated and the employee's personnel file was updated to reflect the findings of the investigation. The Case Manager's Provisional Child Welfare Case Manager certification is closed and Child Welfare Case Manager certification is inactive. An e-mail reminder was sent to all staff regarding child safety responsibilities.

2023-0029 A Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case IDs #102909362 and #102261501. **Supported**.

Corrective Action: The employee was terminated and the employee's personnel file was updated to reflect the findings of the investigation. The FCB was notified and revoked the employee's Provisional Child Welfare Case Manager and Child Welfare Case Manager certifications.

2023-0048 An Assistant Program Director of a subcontracted provider mishandled a case by uploading blank Safety Plans to FSFN. **Not Supported**. A Case Manager falsified child protective supervision records in FSFN. **Not Supported**.

Corrective Action: Based on different understandings on the preparation and entry of Safety Plans, the suggestion to train staff on the proper preparation of Safety Plans was passed along to the training team for possible inclusion in In-Service training. Based on the additional information that the allegation of falsification was not timely reported to the OIG, the provider was notified of its obligations under CFOP 180-4 to report known or suspected instances of wrongdoing to the OIG within two business days of discovery.

2024-0006 A CPI falsified child protective investigation records in FSFN Investigations #2023-235172 and #2023-248092. **Neither Supported Nor Refuted**.

Corrective Action: The employee was terminated. The FCB was notified and revoked the employee's Provisional Child Welfare and Child Welfare Protective Investigator certifications. Based on the recommendation for additional training for CPIs regarding the proper documentation of Supervisory Consultations, the Office of Quality and Innovation completed a three-day training around the policy and practice of Supervisory Consultations for SCPI and CPIS staff for Circuit 6 and Circuit 13.

2024-0010 A Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case IDs #101465638, #102083964, #102388813, and #102399436. **Investigation Terminated**.

Corrective Action: The employee resigned. The investigation was terminated based on information that, upon review, the Quality Data Analyst determined the records were not falsified.

2024-0020 A Supervisor of a contracted provider instructed staff, interns, and volunteers to falsify client intake records. **Investigation Terminated**.

Corrective Action: The investigation was terminated based on lack of cooperation from the complainant and the resulting inability to achieve investigative findings.

Circuit 7

2022-0045 An SCPI falsified child protective investigation records in FSFN Investigations #2022-271286 and #2022-276570. **Supported**. The SCPI falsified child protective investigation records in FSFN Investigation #2022-285010. **Not Supported**.

Corrective Action: The employee resigned and the employee's personnel file was updated to reflect the findings of the investigation. The FCB was notified and revoked the employee's Provisional Child Welfare Protective Investigator and Child Welfare Protective Investigator certifications.

2023-0019 A Director of Medication Assisted Treatment (MAT) of a subcontracted provider falsified medical records. **Supported**. A Vice President for MAT of the subcontracted provider caused another employee to falsify medical records. **Not Supported**.

Corrective Action: The Director of MAT resigned and the employee's personnel file was updated to reflect the findings of the investigation. The provider was requested to create a plan for corrective action to assist them properly achieving oversight of the preparation of treatment plans to ensure that they are developed in collaboration with the patients.

Circuit 8

2021-0073 An SCPI falsified child protective investigation records in FSFN Investigations #2021-316776 and #2021-349816. **Supported**.

Corrective Action: The employee resigned and the employee's personnel file was updated to reflect the findings of the investigation. The FCB was notified and revoked the employee's Child Welfare Protective Investigator and Provisional Child Welfare Protective Investigator certifications.

2023-0007 A Senior Vice President of Acute Care of a subcontracted provider failed to timely make a mandatory report to the Hotline as required. **Supported**. A Mental Health Technician, an Acute Care Registered Nurse, a Unit Counselor, and a Doctor of the subcontracted provider failed to timely make a mandatory report to the Hotline as required. **Supported**. The Mental Health Technician and Acute Care Registered Nurse refused to fully cooperate with an Office of Inspector General investigation. **Supported**. A Licensed Clinical Social Worker of the subcontracted provider failed to timely make a mandatory report to the Hotline as required. **Not Supported**.

Corrective Action: The employees' personnel files were updated to reflect the findings of the investigation. All provider management staff were presented with § 20.055(5), F.S., and CFOP 180-4 related to compliance with OIG investigations for mandatory review and acknowledgement. The provider's onboarding materials and staff handbook were updated to encompass more detailed references related to abuse reporting and ensure clarity on the immediacy of mandated reporting. The provider's Incident Coordinator reviewed CFOP 215-6, Incident Reporting and Analysis System (IRAS), and attended a technical assistance meeting with the contracted provider to review IRAS reporting requirements. All provider staff completed the mandated reporters training through the Department's online training portal. All clinical and medical staff providing direct care services attended technical assistance training provided by the contracted provider covering abuse reporting best practices.

Circuit 9

- 2022-0015 An Independent Living Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case IDs #100517133 and #101334402. **Supported.**
- Corrective Action:** The employee resigned and the employee's personnel file was updated to reflect the findings of the investigation. The FCB was notified and revoked the employee's Child Welfare Case Manager and Provisional Child Welfare Case Manager certifications.
- 2023-0035 A CPI falsified child protective investigation records in FSFN Special Conditions Referral #2023-038838. **Supported.** The CPI falsified child protective investigation records in FSFN Investigations #2023-025210 and #2023-038979. **Neither Supported Nor Refuted.**
- Corrective Action:** The employee resigned and the employee's personnel file was updated to reflect the findings of the investigation. The FCB was notified and revoked the employee's Provisional Child Welfare Protective Investigator certification.
- 2023-0039 Employment contract addendums for a contracted provider's CEO and Chief Operating Officer (COO) did not go before the entire Board of Directors for a vote but were signed only by the Board Chairman. **Investigation Terminated.** The CEO was paid for June 1, 2023 through November 3, 2023, which included payment as if he was employed during that timeframe when he was not. **Investigation Terminated.** The CEO was paid for 1,000 hours of accrued Paid Time Off (PTO), in violation of the provider's policy, which allowed for only 208 hours of accrued PTO. **Investigation Terminated.** The CEO's 457 retirement plan payout was strategically scheduled to fall in 2024 rather than 2023 to make his income not appear "as bad" to the Department. **Investigation Terminated.**
- Corrective Action:** The investigation was terminated based on information that the employment and separation agreements with the CEO and COO were actually with the parent company of the contracted provider, not the contracted provider itself, and the OIG did not have jurisdiction over the parent company.
- 2023-0054 A Family Support Worker falsified client Medication Logs. **Supported.**
- Corrective Action:** The employee was terminated and the employee's personnel file was updated to reflect the findings of the investigation.
- 2024-0008 A Multidisciplinary Team (MDT) Coordinator engaged in additional employment outside state government without approval. **Supported.** The MDT Coordinator falsified her People First timesheet. **Supported.** A Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case IDs #102699940 and #102923240. **Neither Supported Nor Refuted.**
- Corrective Action:** The employee resigned and the employee's personnel files were updated to reflect the findings of the investigation. The FCB was notified and took no action against the employee's Provisional Child Welfare Case Manager and Child Welfare Case Manager certifications.

Circuit 10

- 2022-0036 A CPI falsified child protective investigation records in FSFN Investigations #2022-029014 and #2022-077648. **Supported.** The CPI falsified child protective investigation records in FSFN Investigation #2022-143454. **Neither Supported Nor Refuted.**
- Corrective Action:** The employee was issued a Written Counseling and the employee's personnel file was updated to reflect the findings of the investigation. The FCB was notified and opened an ethics investigation, but subsequently took no action, on the employee's Child

Welfare Protective Investigator and Provisional Child Welfare Protective Investigator certifications.

2022-0048 A Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case IDs #102673355, #102580325, and #102803379. **Supported.**

Corrective Action: The employee resigned and the employee's personnel file was updated to reflect the findings of the investigation. The FCB was notified and revoked the employee's Child Welfare Case Manager certification. Based on the employee being paid mileage for visits not completed, the subcontracted provider sent a written request to the employee in an attempt to recoup the \$274.95 overpayment; however, the employee has not reimbursed the provider.

2023-0018 A Psychiatric Security Specialist of a subcontracted provider falsified patient observation records in ObservSMART. **Supported.** A Registered Nurse of the subcontracted provider allowed the Psychiatric Security Specialist to document patient observation rounds in ObservSMART under her name. **Supported.** The Psychiatric Security Specialist failed to conduct patient observation rounds. **Supported.** The Psychiatric Security Specialist, Registered Nurse, and a Psychiatric Technician slept while on duty. **Supported.**

Corrective Action: The employees were terminated and the employees' personnel files were updated to reflect the findings of the investigation. A complaint was filed with the Department of Health Division of Medical Quality Assurance regarding the Registered Nurse license.

2023-0033 A CPI falsified child protective investigation records in FSFN Investigations #2023-053353, #2023-055799, and #2022-382704. **Neither Supported Nor Refuted.**

Corrective Action: The employee resigned. Based on the failure of the employee to input chronological notes into FSFN within two business days of case activity, a circuit-wide e-mail was sent reminding staff of the requirement of Chapter 152, CFOP 170-1, to ensure chronological notes are entered within two business days of case activity.

Circuit 11

2023-0012 A Peer Support Specialist of a subcontracted provider directed another employee to enter false case notes documenting client contacts in FSFN Case ID #100862170. **Supported.** The Peer Support Specialist entered false case notes documenting client contacts in FSFN Case ID # 100418787. **Neither Supported Nor Refuted.**

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

2023-0017 A Peer Specialist of a contracted provider falsified client visits in the Electronic Health Record. **Supported.**

Corrective Action: The employee was terminated and the employee's personnel file was updated to reflect the findings of the investigation. The FCB was notified and revoked the employee's Provisional Child Welfare Protective Investigator certification.

2023-0022 A CPI falsified child protective investigation records in FSFN Investigations #2023-054353, #2023-058055, #2023-068530, #2023-087862, and #2023-119438. **Supported.**

Corrective Action: The employee resigned and the employee's personnel file was updated to reflect the findings of the investigation. The FCB was notified and revoked the employee's Provisional Child Welfare Protective Investigator certification.

Circuit 12

2023-0037 A CPI falsified child protective investigation records in FSN Investigation #2023-153580-03. **Supported.**

Corrective Action: The employee was terminated and the employee's personnel file was updated to reflect the findings of the investigation. The FCB was notified and revoked the employee's Provisional Child Welfare Protective Investigation certification.

Circuit 13

2023-0015 An Executive Director of a subcontracted provider requested her subordinate to access FSN Investigation #2023-012094, a case of personal interest, on her behalf. **Supported.** An Adoptive Family Recruiter of the subcontracted provider accessed FSN Investigation #2023-012094 without a legitimate business reason. **Supported.**

Corrective Action: The employees' personnel files were updated to reflect the findings of the investigation. The FCB was notified and revoked the Executive Director's Child Welfare Case Manager certification and the Adoptive Family Recruiter's Child Welfare Case Manager and Provisional Child Welfare Case Manager certifications. The provider instructed the employees that the Adoptive Family Recruiter will no longer be reporting directly to the Executive Director until further notice. A corrective coaching meeting was held with the Executive Director with an emphasis on leadership development as well as the importance of maintaining transparent and timely communication with the Board of Directors.

2023-0042 A Case Manager of a subcontracted provider falsified child protective supervision records in FSN Case IDs #102311837, #3062984, and #101687388. **Supported.**

Corrective Action: The employee resigned and the employee's personnel file was updated to reflect the findings of the investigation. The FCB was notified and revoked the employee's Provisional Child Welfare Case Manager and Child Welfare Case Manager certifications.

2023-0043 A CPI submitted a falsified work notice from his physician. **Supported.**

Corrective Action: The employee resigned and the employee's personnel file was updated to reflect the findings of the investigation. The FCB was notified and revoked the employee's Provisional Child Welfare Case Manager certification.

2023-0044 A Team Technician and a Psychiatric Technician of a subcontracted provider falsified patient observation records in ObservSMART. **Supported.**

Corrective Action: The Team Technician was terminated and the Psychiatric Technician was issued a written reprimand. The employees' personnel files were updated to reflect the findings of the investigation.

2023-0046 An Independent Contractor of a subcontracted provider falsified signatures on two Central Abuse Hotline Record Search (CAHRS) forms. **Investigation Terminated.**

Corrective Action: The employee resigned. The investigation was terminated based on the discovery that the individual was an independent contractor, not an employee, of the subcontracted provider and the OIG did not have jurisdiction to further pursue the matter.

Circuit 14

There were no cases closed in Circuit 14 during FY 2023-2024.

Circuit 15

2023-0034 SH A Technical Consultant of a subcontracted provider sexually harassed a client. **Investigation Terminated.**

Corrective Action: The employee resigned. The investigation was terminated based on information that the provider conducted an investigation into the allegations and concluded there were no merits to the sexual harassment allegation. In addition, the employee worked under a subcontract for another agency; therefore, the OIG had no jurisdiction.

2023-0049 An Interviewing Clerk charged individuals a fee to submit their public assistance applications. **Supported.** The Interviewing Clerk accessed Florida On-Line recipient Integrated Data Access (FLORIDA) system records, which were cases of personal interest, without a legitimate business reason. **Supported.** The Interviewing Clerk submitted applications for family members without their knowledge and kept the food stamp benefits for herself. **Not Supported.**

Corrective Action: The employee was terminated and the employee's personnel file was updated to reflect the findings of the investigation. The OES issued a transmittal to all OES staff reminding them of the prohibition against accessing, viewing, or taking action on personal interest cases.

Circuit 16

There were no cases closed in Circuit 16 during FY 2023-2024.

Circuit 17

There were no cases closed in Circuit 17 during FY 2023-2024.

Circuit 18

2023-0016 A CPI falsified child protective investigation records in FSFN Investigations #2022-386879, #2022-371279, #2022-342702, and #2022-394943. **Supported.**

Corrective Action: The employee was terminated and the employee's personnel file was updated to reflect the findings of the investigation. The FCB was notified and revoked the employee's Provisional Child Welfare Protective Investigator certification. Based on information that there were discrepancies in the employee's Vicinity/Map Mileage Logs, all Circuit 18 employees were provided training in TripLog and maintaining accurate records associated with their travel. Based on information that the employee conducted work activities without claiming work hours, all employees were reminded about properly and accurately documenting hours worked and the requirements under the Fair Labor Standards Act of 1938 (FLSA) and supervisors were reminded of their role and responsibility for ensuring all hours worked are recorded accurately on timesheets.

2024-0002 A Dependency Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case IDs #102550048, #101389460, and #102969328. **Supported.**

Corrective Action: The employee was terminated and the employee's personnel file was updated to reflect the findings of the investigation. The FCB was notified and revoked the employee's Child Welfare Case Manager and Provisional Child Welfare Case Manager certifications.

Circuit 19

2023-0001 WB A CPIS closed high-risk child abuse investigations without appropriate follow-up in order to meet timeliness standards, thereby putting children in danger. **Not Supported.** A CPI falsified child protective investigation records in FSFN Investigations #2022-228827, #2022-255565, #2022-256594, #2022-279149, and #2022-282931. **Not Supported.** Two other CPISs closed high-

risk child abuse investigations without appropriate follow-up in order to meet timeliness standards, thereby putting children in danger. **Not Supported.**

Corrective Action: One CPIS was terminated. Based on the recommendation that policy failures be addressed with staff to determine if additional training is necessary, Southeast Regional Leadership meetings were held to discuss the following: commencements, safety plan monitoring and CPIS consultations, use of Subject Matter Experts, pre-commencement activities, timely and sufficient initial consultations data, Life of Case Quality Assurance Tool on assessing prior reports and service history, conducting quality interviews with children, and supervisory guidance. In addition, training was provided at a CPI All Staff meeting on quality pre-commencement training, the pre-commencement tip sheet, and use of Subject Matter Experts. Safety planning, quality pre-commencements, and the pre-commencement tip sheet were covered in provisional staff in-service trainings. Based on recommendations to consider additional training to staff on the use of STMS and reminding staff to submit travel reimbursements timely, STMS and Trip Log trainings were conducted.

Circuit 20

2022-0019 A Case Manager of a subcontracted provider falsified child protective supervision records in FSFN Case IDs #100319301 and #102608267. **Supported.** The Case Manager falsified child protective supervision records in FSFN Case ID #102611509. **Neither Supported Nor Refuted.**

Corrective Action: The employee was terminated and the employee's personnel file was updated to reflect the findings of the investigation. The FCB was notified and revoked the employee's Provisional Child Welfare Case Manager certification. Based on the employee's reimbursement for mileage for falsified home visits, the provider recouped \$97.61 from the employee.

2022-0035 A CPI falsified child protective investigation records in FSFN Investigations #2022-123285, #2022-156611, and #2022-157048. **Supported.**

Corrective Action: The employee resigned and the employee's personnel file was updated to reflect the findings of the investigation. The FCB was notified and revoked the employee's Child Welfare Protective Investigator and Provisional Child Welfare Protective Investigator certifications.

2022-0049 A CPI conducted a home study for FSFN Investigation #2022-353913 without being qualified to do so. **Supported.** The CPI misused her position by placing a child with her own relative. **Supported.**

Corrective Action: The employee resigned and the employee's personnel file was updated to reflect the findings of the investigation. The FCB was notified and revoked the employee's Provisional Child Welfare and Provisional Child Welfare Protective Investigator certifications.

Institutions

2022-0042 A Northeast Florida State Hospital (NEFSH) Human Services Worker (HSW) I falsified a Location Verification Check form. **Supported.**

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

2023-0002 SH A Florida State Hospital (FSH) Unit Treatment and Rehabilitation Senior Supervisor (UTRSS) I sexually harassed subordinate employees. **Supported.** The UTRSS I sexually harassed a subordinate employee. **Supported.** An FSH HSW I failed to report known or suspected sexual harassment as required. **Supported.**

Corrective Action: The UTRSS I was terminated and the HSW I was issued a written counseling. Both employees' personnel files were updated to reflect the findings of the investigation. Training on sexual harassment was added to MyFLLearn for all FSH staff and a reminder of the reporting requirements under CFOP 60-10 and CFOP 180-4 was sent to all FSH staff.

2023-0009 A NEFSH HSW I falsified a Location Verification Check form and Special Observation Flow Sheet. **Supported.**

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

2023-0026 SH A NEFSH Senior Licensed Practical Nurse sexually harassed a Department employee. **Supported.**

Corrective Action: The employee was terminated and the employee's personnel file was updated to reflect the findings of the investigation. The Board of Nursing was notified but the incident was determined to be not reportable as it was not related to the employee's practice in the care of patients.

2023-0045 SH A North Florida Evaluation and Treatment Center (NFETC) Institutional Security Specialist (ISS) I sexually harassed a Department employee. **Supported.** A NFETC HSW II failed to report known or suspected sexual harassment as required. **Supported.**

Corrective Action: The ISS I resigned and the employees' personnel files were updated to reflect the findings of the investigation. Annual Attestations were added to sexual harassment training to emphasize the need to report any potential sexual harassment case to the supervisor. A sexual harassment training and attestation has been added to MANDT trainings moving forward.

Summary of Management Reviews and Corrective Actions Completed

Circuit 12

2023-0047 A management review was initiated to examine the issue of whether a subcontracted provider was mishandling adoption cases. **Management Review Terminated.**

Corrective Action: The management review was terminated based on information that the Department placed the provider on a Corrective Action Plan, which covered the issue the management review would have addressed. In addition, there was ongoing civil litigation regarding the specific circumstances leading to the initiation of the management review; therefore, any wrongdoing in those specific instances will be addressed through the litigation process.



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