



DEPARTMENT OF HEALTH
Office of the Inspector General

ANNUAL REPORT
For The Period
July 1, 1997 through June 30, 1998

Lawton Chiles, Governor
James T. Howell, M.D., M.P.H., Secretary
Lesley Mendelson, Inspector General

September 30, 1998



Lawton Chiles
Governor

James T. Howell, M.D., M.P.H.
Secretary

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James T. Howell, M.D., M.P.H.
Secretary, Department of Health
1317 Winewood Boulevard
Tallahassee, Florida 32399

Dear Dr. Howell:

This report, which is required by §20.055, Florida Statutes, summarizes the activities and accomplishments of the Office of the Inspector General, for fiscal year 1997-98.

I have included in this report all the necessary information required by statute, as well as an Executive Summary highlighting the major activities of the relevant period.

Thank you for your continued support. We look forward to the coming year.

Sincerely,

Lesley Mendelson
Inspector General

Enclosure
LM/kms

**Department of Health
Office of the Inspector General**

Annual Report

**For The Period
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Executive Summary

This report, which is required by Section 20.055, *Florida Statutes (1997)*, summarizes the activities and accomplishments of the Office of the Inspector General at the Department of Health, for the period July 1, 1997, through June 30, 1998.

Our office continues to work closely with other departmental personnel to build a comprehensive system of accountability within the Department of Health. This work has included activities related to performance-based program budgeting, information security, the Florida Sterling Council, and a new department policies and procedures management system.

As a new office, in addition to the regular duties and responsibilities required of an Office of the Inspector General, we continued to build our office. We hired staff, developed our mission, values, goals and objectives, and attended to the major administrative tasks necessary in creating new office processes. We participated, both as students and presenters, in extensive training on state and departmental systems and processes, and skills necessary for our function.

Major projects for the period under review have included investigations of allegations concerning SUPER Act fund activities at the Escambia County Health Department, and personnel and fiscal issues at the Broward County Health Department.

Management reviews of the Board of Medicine, the Okaloosa County Health Department, and the A.G. Holley Tuberculosis Hospital were completed during this reporting period.

Our audit staff completed three HIV/AIDS surveillance follow-up reviews and has taken the lead in contracting with an independent certified public accounting firm to conduct independent audits of the largest five county health departments.

In the coming year, we intend to move forward to accomplish our goal of providing a central point for coordination of and responsibility for activities that promote accountability, integrity and efficiency in government.

Florida Department of Health

Background

Chapter 96-403, *Laws of Florida*, established the Florida Department of Health as an independent agency, effective January 1, 1997. Prior to the effective date of the Department of Health, the state's public health functions were administered through the Department of Health and Rehabilitative Services.

Statutory Purpose

The purpose of the Department of Health is to promote and protect the health of all residents and visitors in the state through organized state and community efforts, including cooperative agreements with counties, §20.43 (1), *Florida Statutes (1997)*.

Mission Statement

The mission of the Department of Health is to promote and protect the health and safety of all residents and visitors in this state through the establishment and maintenance of high quality standards for the public health environment and the delivery of public health services.

Values

This year, the department adopted the following work values.

- Caring
 - Quality
 - Integrity
 - Team work
 - Accountability
 - Professionalism
 - Community partnerships
-

Organization

Pursuant to §20.43 (3), *Florida Statutes, (1997)*, the department is divided into seven divisions.

- Administration
- Environmental Health
- Disease Control
- Family Health Services
- Children's Medical Services
- Medical Quality Assurance
- Local Health Planning, Education, and Workforce Development

Duties and Responsibilities

The Department of Health is directed in §20.43, *Florida Statutes (1997)*, to provide the leadership necessary to promote and protect the health of all residents and visitors through the following mechanisms.

- Prevention of disease and disabilities
 - Surveillance of disease through collection and analysis of health care data and special studies
 - Provision of leadership in the establishment of public health delivery systems
 - Publication of a state health plan
 - Regulation of health practitioners
 - Maintenance and improvement of the environment as it affects public health
-

Major Programs

The department carries out these duties and responsibilities through three major programs.

- Public Health Services Program
 - Children’s Medical Services Program
 - Medical Quality Assurance Program
-

Public Health Services Program

The Public Health Services Program protects Floridians and visitors from the spread of infectious diseases, assures them availability to health care services, and protects them from environmental hazards in food, water, workplaces, and living facilities. The Department of Health administers the Public Health Services Program through 67 county health departments through three broad levels of service.

- Communicable Disease Control Services
 - Family Health Services
 - Environmental Health Services
-

Children’s Medical Services Program

The primary mission of the Children’s Medical Services Program (CMS) is to provide a family-centered, coordinated managed system of care for children with special health care needs serious enough that they require extensive medical care to reach their full potential. Additionally, CMS provides essential preventive, evaluative, and early intervention services for children.

CMS services are provided by a statewide network of multidisciplinary health providers, which includes hospitals, medical schools, private physicians' offices, regional medical centers, medical specialty care centers, as well as 22 local CMS clinics.

The 1998 Legislature expanded the CMS network to include an insurance program under the Florida Kidcare Program. Through this program CMS will cover uninsured, non-Medicaid children, who have special health care needs, with federal Social Security Act Title XXI funds. In addition, effective January 1, 1999, CMS will include the Child Protection Teams and the Sexual Abuse Treatment Program, which will be transferred from the Florida Department of Children and Families (C&F).

Medical Quality
Assurance Program

The Medical Quality Assurance Program (MQA) carries out the department's responsibilities related to the regulation of medical and allied health professionals as necessary to preserve the health, safety, and welfare of the public.

Currently, MQA supports licensure and disciplinary activities for a total of 37 health care boards, councils, professions, and facilities, which perform the following licensure functions.

- Setting licensing requirements for the profession
- Establishing standards of professional practice
- Preparing and administering licensing examinations
- Issuing and renewing members' licenses
- Curtailing unlicensed activity

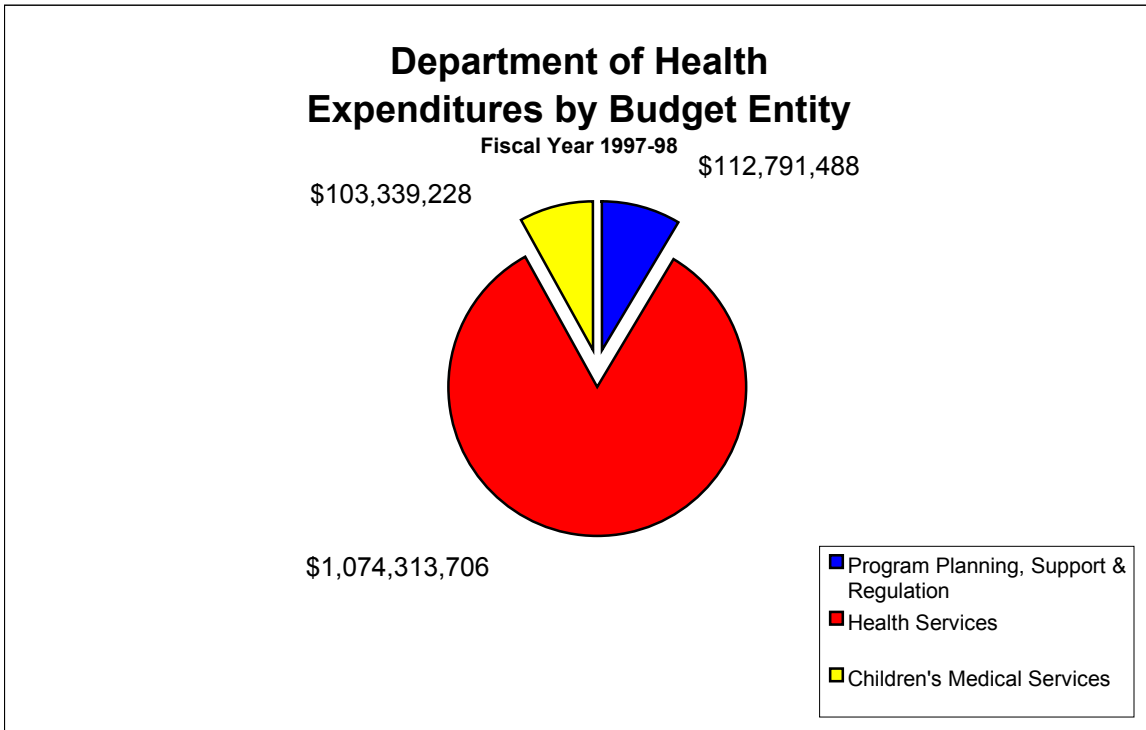
The boards and councils also hear cases against individual practitioners who have allegedly violated state laws and rules governing professional practice. Each board is authorized to take disciplinary action if it finds that an allegation is justified.

Under a 1998 legislative mandate, practitioner profiling has been established that requires certain biographical data from physicians, podiatrists, chiropractors, and osteopathic physicians be available for public access via the Internet on July 1, 1999.

In addition, the 1998 Legislature directed that MQA collect, validate and store data relating to professional credentials of physicians, chiropractors and podiatrists. This data will include Drug Enforcement Agency information, malpractice claims, Medicaid and Medicare sanctions, and staff/hospital privileges. Beginning July 1, 1999, validated data will be provided to health care entities such as, hospitals, health maintenance organizations, and insurance companies.

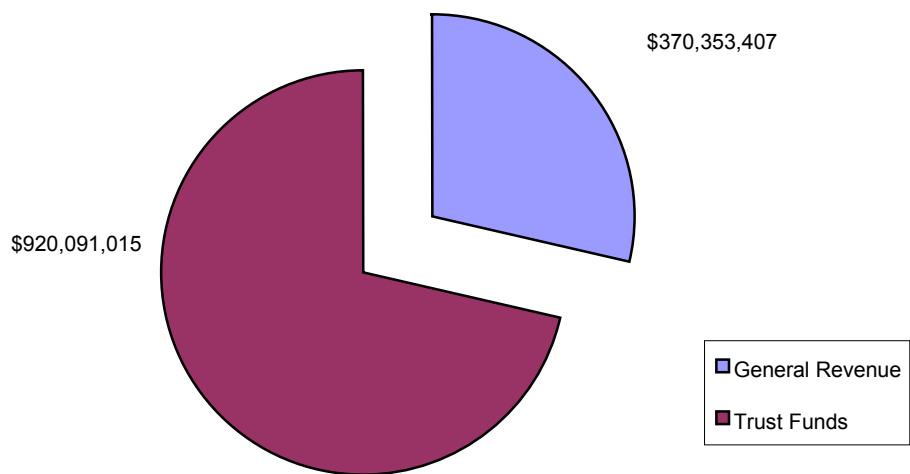
Funding

The Department of Health receives most of its funding from general revenue, federal grants, donations and health program funding sources. Total expenditures during fiscal year 1997-98 were \$1.3 billion. The charts below represent fiscal year 1997-98 expenditures by budget entity and by fund type.



Department of Health Expenditures by Fund Type

Fiscal Year 1997-98



Office of the Inspector General

Background

The inspector general assumed her position on October 23, 1996. During the first year, her administrative focus was directed toward assessing office duties, responsibilities, projected workload, and staffing needs.

This year, along with the major activities set forth in this report, we developed a mission statement, values to guide our work, and office objectives.

Mission Statement

Our mission statement, which is consistent with our statutory mandate, is the following:

**To promote accountability, integrity,
and efficiency in government.**

Values

After our mission statement was created, we developed and defined our work values.

Truth

Our work will be fact-based, independent, thorough, impartial, objective, balanced, and significant.

Courage

In our work, we will present the whole truth, even in the face of opposition.

Loyalty

We will faithfully uphold our values, our mission, and the laws of the state of Florida and the United States of America.

Quality

We will continuously strive to improve the quality of our work.

Objectives

After coming to consensus on our mission and values, objectives were agreed upon.

This year, our office completed the following objectives.

- Developed a staffing plan that incorporates education and skills necessary to achieve our mission and goals.
- Developed an efficient complaint and assignment tracking system.
- Developed and implemented a risk assessment for the department upon which to base one-year and five-year audit plans.
- Developed and implemented a time and effort tracking and reporting system.
- Developed a web site for information concerning audits, investigations, reviews, and annual reports.

We have made significant progress on the following objectives, which will be completed in the coming fiscal year.

- Establishment of a current departmental policy and procedure library.
- Development of a policy and procedure manual for the office that incorporates the Governor's Council on Integrity and Efficiency standards, as well as our mission and goals.
- Development and implementation of a training plan that will promote our mission, values, and goals.

In the coming year, the following remaining objectives will be addressed.

- Establishment of customer focus groups to prioritize customer needs.
 - Development of a system to track and trend customer satisfaction.
 - Establishment of employee focus groups to prioritize employee needs to increase efficiency and productivity.
-

Duties and Responsibilities

The Office of the Inspector General is statutorily mandated to provide a central point for coordination of and responsibility for activities that promote accountability, integrity, and efficiency in government through the following specific duties and responsibilities, §20.055(2), *Florida Statutes (1997)*.

- Provide direction, supervision and coordination of audits, investigations, management reviews and other activities carried out or financed by the department for the purpose of promoting economy and efficiency in the administration of, or preventing and detecting fraud and abuse in, its programs and operations.
- Make recommendations for corrective action concerning fraud, abuses, and deficiencies relating to programs and operations administered or financed by the department and keep the Secretary of the department informed of program implementation activities.
- Ensure effective coordination and cooperation with other governmental auditing functions.
- Review department administrative rules and make recommendations concerning their impact.
- Advise, assess and monitor performance measures, standards and data collection for performance-based program budgeting.

Organization

To accomplish its goals and objectives, the Office of the Inspector General is divided into three main functions.

- Auditing Functions
- Investigative Functions
- Other Accountability Activities

Auditing Functions**Auditing Duties and Responsibilities**

- Perform financial, compliance, electronic data processing, performance and data security audits.
 - Monitor implementation of department audits conducted by outside entities.
 - Develop long-term and annual audit plans based on the findings of periodic risk assessments.
 - Certify the annual costs of testing and reporting procedures of the infant screening program.
-

Investigative Functions

Investigative Duties and Responsibilities

- Perform investigations to detect, deter, prevent and eradicate fraud, waste, mismanagement, misconduct, and other abuses in state government.
- Receive complaints and coordinate all activities of the department as required by the Whistle-blower's Act.
- Report to law enforcement agencies whenever there are reasonable grounds to believe that a violation of criminal law has occurred.

Other Accountability Activities

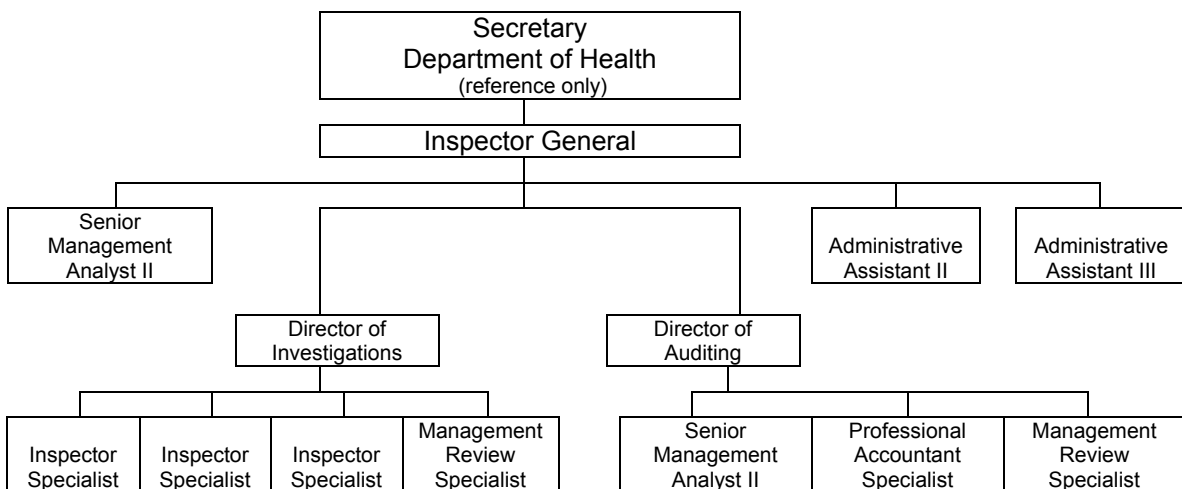
Other accountability activities include those functions that fall outside the audit or investigative functions, for example:

- Perform management reviews, management advisories, consulting services and special studies.
- Review administrative rules.
- Advise, assess and monitor performance measures, standards and data collection for performance-based program budgeting.
- Prepare the Office of the Inspector General's annual report by September 30 of each year.

Human Resources

The Office of the Inspector General functions with the original 13 positions authorized by the 1997 Legislature, which are reflected in the chart below.

Office of the Inspector General - Organizational Chart



Staffing

On June 30, 1997, the Office of the Inspector General functioned with only three positions - the inspector general, the director of auditing, and an administrative assistant III.

Inspector General

Lesley Mendelson, J.D.

Ms. Mendelson has been engaged in the practice of law for the past 20 years both in the public and private sectors. She is admitted to practice in the states of Florida and Minnesota (inactive). For 13 years, the focus of her practice was health care law.

Director of Auditing

Lynn Riley, C.P.A.

Ms. Riley became a certified public accountant in 1990. For the past ten years the focus of her work has been health care accounting and auditing.

Administrative Assistant III

Sonya Burgess

Ms. Burgess has been employed with county and state government for the past 31 years, in the capacity of an administrative assistant to the superintendents of a major institution, and as a legal secretary.

Between July 1, 1997, and December 1, 1997, the remaining ten positions authorized by the Legislature were filled.

Administrative Assistant II

Suzanne Kelly

Ms. Kelly was employed for over six years with the Office of Health Promotion and Wellness before joining this office. Consistent with the duties for this position, she has expertise in the area of budget, travel reimbursement, and personnel matters.

Director of Investigations

Samuel Oliver, J.D.

Before Mr. Oliver earned his law degree, his work included 12 years of investigation and law enforcement.

Professional Accountant Specialist

Mark Boehmer, C.P.A.

Mr. Boehmer was engaged in public accounting for seven years, after which he served at the Agency for Health Care Administration as an audit evaluation and review analyst in the Certificate of Need program.

Management Review Specialist

Dean Bartness

Mr. Bartness was employed at the Florida Board of Bar Examiners as an Investigative Analyst before his employment in the C&F Office of Internal Audit. At C&F he coordinated the audit activities between external auditors and that department.

Senior Management Analyst II

Kathleen Streetman, R.N., C.P.A., M.Acc.

Ms. Streetman worked as a registered nurse for 10 years before her employment in the field of public accounting. She was employed for four years by the Agency for Health Care Administration's Medicaid Program Development Office before joining the Office of the Inspector General's staff.

Senior Management Analyst II

Beth Breier, C.P.A.

As a certified public accountant, Ms. Breier has most recently been employed as a systems auditor at the Office of the Auditor General. She specializes in auditing computer/information systems for state agencies and universities.

Management Review Specialist

Jack Silverstein, M.A.

Mr. Silverstein has worked in the health care field as a hospital administrator and planner. He has over ten years experience overseas with the federal government and seven years with state government in program audit and investigation.

Inspector Specialist

Robert Cotton, M.A.

Mr. Cotton retired from the Military Police Corps, United States Army after 32 years of active and reserve duty. He spent four years as director of the Division of Regulation at the Department of Business and Professional Regulation before joining the Office of the Inspector General.

Inspector Specialist

Susan Winter, M.A., M.S.

Ms. Winter is an instructional systems designer specializing in communications for the workplace. As a performance technologist, Ms. Winter has conducted job and process analyses to improve processes, developed communications to support processes, and developed human skills to perform processes.

Inspector Specialist

Amalia Kane-Crawford, R.N., L.H.R.M., M.H.M.

Ms. Kane-Crawford is a registered nurse and a licensed health care risk manager. Her career has included work in health care management, health care regulations under Medicare and Medicaid funding, management process and development in managed care settings, risk management concepts and practices, and quality improvement processes including health care organizations' preparation for accreditation.

Professional Training

This year the Inspector General's staff participated in over 1,000 hours of professional training. These seminars and classes included the following topics:

- Investigative and auditing techniques
- Personnel and supervisory policies
- Various systems used by the department, such as COPEs, FLAIR (SAMAS), and CENTRAX
- Computer skills, including web page construction
- Security issues
- Fraud investigations
- Best management practices, which included Florida Sterling criteria and process evaluation
- Education unique to the many professionals that are employed by our office, which include nursing, law, and accounting

We presented training sessions for departmental personnel, that included training in the areas of:

- Ethics
- Information Security
- Audit Interpretation

We also participated in departmental workgroups such as the Quality Improvement Advisory Council, the Integrated Health Systems workgroup, the Information Security workgroup and the CPHU Financial Enhancement workgroup.

Summary of Major Activities

Activities Revealing Significant Program Abuses and Deficiencies

During the current reporting period, the Office of the Inspector General conducted investigations and management reviews that revealed significant program abuses and deficiencies. Summaries of these reports and our recommendations follow.

A.G. Holley Tuberculosis Hospital Management Review

A management review of A.G. Holley Tuberculosis Hospital was initiated as a result of our annual risk assessment and because of a series of anonymous complaints about the hospital. This review disclosed several significant issues.

- Low morale among the staff as a result of distrust, inadequate communication, inaccessibility of key personnel, and threats of retaliation from middle and upper management.
- A governing body that operates without an apparent grant of authority and in conflict with the departmental delegations of authority.
- Frequent turnover of leadership and unclear lines of authority to the superintendent from the governing body and the division director.
- Lack of clarity in the dual role of the executive medical director as statewide tuberculosis controller and hospital medical director.

RECOMMENDATIONS

As a result of these findings, our office made 14 recommendations, which are summarized as follows:

- Restructure the hospital to assure authorized governance, clear lines of authority and accountability.
 - Improve communication.
 - Develop a unique strategic plan aligned to the goals and objectives of the Department of Health.
 - Institute organizational team building that will include strategic planning, clear direction, and employee orientation, training, and empowerment.
 - Institute systematic, routine, operational reviews of the hospital.
 - Require the approval of the superintendent for expenditures over a specified amount.
 - Improve housekeeping and grounds maintenance.
-

A management review of the Okaloosa County Health Department was completed using the results of a Quality Performance Self-Assessment Survey completed by the employees of the county health department. The self-assessment survey instrument is based on the Florida Sterling Council Criteria for Organizational Performance Excellence.

In general, survey results demonstrated that the county health department has some processes in place to improve quality; however, these processes are not applied systematically throughout the organization.

RECOMMENDATIONS

As a result of our findings, we made the following recommendations:

- The senior management team at the Okaloosa County Health Department should develop its own unique vision and goals for carrying out the mission of the Department of Health and frequently and obviously broadcast them throughout the workplace.
- Each unit of the Okaloosa County Health Department should choose at least one opportunity for improvement presented in the report for immediate improvement.
- Administrative services should set up a system for tracking and trending the business results of the county health department.
- Headquarters programs and support services should work with the Okaloosa County Health Department to develop a work plan to bring about improvement in the areas selected.
- The organization's goals and selected opportunities for improvement should be incorporated into the standards of the Okaloosa County Health Department's senior management team. In one year their performance should be measured by the results of administering this instrument again or by taking the Sterling Quality Challenge.

Board of Medicine
Missing Applicant
Files Management
Review

In July 1997, Board of Medicine staff discovered that ten applicant files were missing. At the request of the board's executive director, the Office of the Inspector General conducted a review that analyzed application-processing tasks. This review revealed inadequacies and variances in file processing, transmittal, and storage that jeopardized security of files.

RECOMMENDATIONS

At the conclusion of this review, 31 recommendations concerning management of security risks were made to the Board of Medicine. These are summarized as follows:

- Manage security risk through a formal team approach.
- Update licensure policy and procedural manual.
- Rectify security variances in file storage and indexing.
- Establish secure procedures for working on desktops, escorting guests, transmitting files, and distributing and documenting keys.

Investigation of
Broward County
Health Department
Whistle-blower
Complaints

The investigation of the Broward County Health Department was initiated in response to Whistle-blower complaints alleging improprieties surrounding its administrator. Although the allegations were directed against the administrator, the context in which they were made involved a workforce reduction at the county health department necessitated by a substantial financial deficit. For this reason, the scope of the investigation was expanded beyond the original allegations to include the propriety of the workforce reduction plan and the genesis and response to the current financial deficit.

The Whistle-blower's allegations against the administrator were not substantiated by our investigation. However, a nearly five million dollar projected shortage to the county health department's trust fund was found to be the result of a delayed reaction to a predictable financial decline. Recurring costs were initiated based on one-time infusion of funds; therefore, it was only a matter of time until the trust fund balance was depleted. No material exceptions to established requirements were found in the resulting workforce reduction.

RECOMMENDATIONS

To its credit, the Department of Health recognized past process deficiencies and has begun to develop and implement interactive formal systematic processes to uncover potential financial problems before a crisis occurs. We commended these actions and made the following recommendations to the Department of Health.

- Develop and implement a formal selection and approval process for hiring county health department directors/administrators.
- Continue to develop its interactive process for the development, review, and execution of county health department state/county contracts.
- Continue to develop its process to monitor the fiscal performance of the county health departments, which clearly states the responsibilities and accountability of all parties. Evaluation of the process should be included.

Our office made the following recommendations to the Broward County Health Department.

- Continue to implement procedures to maximize revenues.
- Develop and implement a formal process to monitor its fiscal performance, with assistance from Department of Health headquarters.
- Fill the administrative services director position.

Investigation of
Conflict of Interest and
Self-Referral at the
Brevard County Health
Department

This investigation was predicated upon concerns that the acting director of the Brevard County Health Department referred MediPass patients from the county health department to two clinics in which he has a 50% ownership interest.

Our investigation revealed that a potential for conflict of interest and patient self-referral existed because the director was the record part-owner of two clinics in the county. We uncovered no evidence of referral of Brevard County Health Department patients to the entities in which he is a record owner. He subsequently divested himself of his ownership interest, and the Department of Health instituted strict prohibitions against ownership interest in county health entities.

RECOMMENDATIONS

This investigation evidenced that applicable Department of Health personnel standards are diverse and are not contained in one place. For this reason, the following recommendations were made:

- The Brevard County Health Department should review its own authorization procedures to assure their consistency with MediPass standards.
- The Department of Health should consider a minimum set of standards applicable to all employees, which can be clearly and easily communicated to headquarters and field staff, perhaps through the County Public Health Unit Guidebook.

Investigation of
Escambia County
Health Department
State Underground
Petroleum
Environmental
Response Act Funds

In 1986, the Legislature created the State Underground Petroleum Environmental Response Act (SUPER Act). The SUPER Act created a fund for the inspection and cleanup of sites contaminated with petroleum and is administered by the Department of Environmental Protection through contractual arrangements. Beginning in 1987, such a contractual arrangement existed with Escambia and Santa Rosa Counties.

The Escambia County Health Department performed the contract duties for both Escambia and Santa Rosa Counties. Over the years, more than three million dollars was paid to Escambia County for management of these contracts. Although it appeared that an informal agreement existed between the Escambia County Board of County Commissioners and the Escambia County Health Department to forward all management fund compensation received as a result of these contracts to the county health department, no written contract existed.

Our office completed an investigation in response to Whistle-blower complaints regarding gross mismanagement and improper expenditure of SUPER Act contract funds by employees of the Escambia County Health Department.

Our investigation revealed that these funds were transferred to the county health department only when they were requested and that this arrangement was set up to avoid paying a contract administration fee and

to manipulate the Escambia County Health Department's Trust Fund balance. Expenditures of these funds by the county were approved by county health department employees, however, because the funds were not state funds, their use was not subject to the controls and oversight which would normally pertain. Some of the approved expenditures were questionable.

At the time of the investigation, more than one million dollars was in the fund. These are funds that were appropriated and should have been used to provide health services. A large part of the money remains uncollected although it has all been earned.

RECOMMENDATIONS

- The Escambia County Health Department should continue its efforts to bring accountability and internal controls over SUPER Act contracts.
- The earned contract funds held by the Escambia County and Santa Rosa Clerks of the Circuit Court should be collected.
- All anticipated revenues should be broken out in detail in the annual contracts so that they can be tracked by source and category to inform management when funds are not timely received.
- Disciplinary action should be taken as deemed appropriate by management.

HIV/AIDS Surveillance Review

A statewide security review was conducted in the fall of 1996, to respond to a serious breach in security when confidential Human Immunodeficiency Virus and Acquired Immunodeficiency Syndrome (HIV/AIDS) data maintained by the Pinellas County Health Department, of the then Department of Health and Rehabilitative Services (HRS), was released.

In the fall of 1997, a follow-up review of the HIV/AIDS surveillance security controls was performed by HRS at 15 of the 18 county health departments where the new controls were implemented. During 1997-98, follow-up reviews were performed by our office at the Pinellas County Health Department, which had not been included in the initial assessment nor the follow-up review, and at the Dade and Broward County Health Departments to determine the status of corrective action.

Significant progress was evident; however, the following shortcomings were noted.

- Insufficient controls over access to sensitive data.
- Inadequate monitoring of security events and user accesses.
- Lack of written policies and procedures for the Local Area Network (LAN) systems administration functions.
- Lack of regular LAN programs and data back-up.
- Inconsistent records of law enforcement background check results in personnel files.
- Inconsistent compliance with department information security policies, protocols, and procedures.

Pursuant to these findings, the following recommendations are outstanding:

- Develop adequate policies and procedures for systems administration functions.
- Perform periodic monitoring of user accounts, security settings, audit trail and violation reports to ensure that there are access controls in place.
- Implement procedures to perform back-ups on a regular basis.
- Perform required background checks for the HIV/AIDS Surveillance employees and maintain documentation.
- Implement security procedures so that the offices are in compliance with the department's information security policies, protocols, and procedures.

Office of the Auditor
General's Federal
Financial Assistance
Programs Audit

The Office of the Inspector General coordinated with the Office of the Auditor General for the Department of Health's Federal Financial Assistance Programs Audit for fiscal year ended June 30, 1997. Pertinent recommendations for the Department of Health in this report (No. 13256) include the following items:

- Establish appropriate accounting records that summarize, by federal program, the amount of federal funds provided to sub-recipients.
- Continue efforts to establish methodologies that will provide for the equitable allocation of salary costs and the maintenance of supporting documentation in accordance with controlling federal requirements.

- Ensure that only allowable costs are charged to the Childhood Immunization Program.
 - Continue to pursue a federally approved methodology for measuring non-federal program expenditures.
 - Ensure that the required certifications are accurately completed, signed, and maintained for applicable department personnel.
-

Activities Relating to
Performance-Based
Program Budgeting

The Department of Health is scheduled to begin operating under performance-based program budgeting in 2001 and will submit a performance-based legislative budget request by September 1, 1999, for fiscal year 2000-01, §11.513, *Florida Statute (1997)*.

The development of a performance measurement system is integral to the implementation of performance-based program budgeting. Therefore, although health programs have been measuring their performance by tracking health status outcomes as an ongoing component of the department's quality assurance and improvement process for many years, the department began putting together a comprehensive performance measurement system on June 1, 1997.

As of June 30, 1998, the department had established its program structure and began finalizing its list of performance measures and standards. Due to 1998 legislative changes, our office will assess the reliability and validity of these measures before they are submitted to the Executive Office of the Governor on September 1, 1998.

In the coming year, the Office of the Inspector General will continue to advise department staff in the development of its performance measures and standards, as well as develop a plan for monitoring and reviewing the department's major programs, to ensure that performance data are maintained and supported by department records. In addition, our office will review actions taken by the department to improve program performance and meet program standards, as well as make recommendations for improvement.

Security Information
Activities

In October 1997, the Security Information Workgroup distributed Department of Health Information Security Policies, Protocols, and Procedures. This workgroup consisted of 30 participants representing many professions and each department program area, as well as administrative services, and the Offices of the Inspector General and General Counsel.

In addition to the distribution of the security manual, this workgroup accomplished the following tasks this year.

- Established security coordinators in each field office, headquarters, and subgroups.
- Completed the first Security Risk Assessment.
- Held the first Security Information Coordinator Training.
- Provided training to staff by designated security information coordinators at local sites throughout the state.
- Developed training materials, quality improvement tools, and implementation guides.
- Began pilot testing the quality improvement tool.

During the coming fiscal year, information resource management protocols and procedures will be developed, more training will be developed and provided to staff, and an audit of the security information process will be completed. In addition, the security information monitoring tool will be implemented at the county health departments as part of the department's quality improvement visits.

Information Security
Incidents Reporting

In October 1997, our office began tracking the information security incidents that occur within the Department of Health. Between October 1997 and June 30, 1998, there were 35 information security incidents reported. Eight were suspected-only incidents, and the remaining involved the following categories.

- Phone, fax or filing (8)
 - Misdelivery or improper release (9)
 - Intentional release (4)
 - Automobiles (3)
 - Miscellaneous (3)
-

Florida Sterling
Council for
Organizational
Performance
Excellence

During its first year, the Department of Health executive management team focused on defining its values, goals, and vision. This activity impacted the department's strategic plan, as well as its organization.

During this past year, the department progressed in its quality journey by participating in the Sterling Quality Challenge process. Patterned after the national Malcomb Baldrige Award process, the goal of the Governor's Sterling Council is to improve quality throughout the state by promoting common standards for organizational performance excellence.

Participation in the Sterling Quality Challenge provides a comprehensive self-assessment opportunity that can help organizations optimize their operations. As a result of the Department of Health's application and on-site review by Sterling examiners, the department received special recognition from the Sterling Council with a recommendation that the department proceed to the next level and apply for the Governor's Sterling Award.

In addition to the participation by the department in the Sterling Quality Challenge process, the inspector general and one of the inspector general's staff were selected to serve on the Board of Sterling Examiners. Through this process the examiners became acquainted with the Sterling criteria and gained experience through the examination of other organizations.

Florida Administrative
Rule Review Activities

The Office of the Inspector General reviews all Department of Health proposed rules and rule amendments to assure consistency with legislative intent and alignment with departmental mission and strategic issues. During this reporting period, our office reviewed 155 proposed rules or rule amendments.

County Health
Department Internal
Control Structure
Self-Assessment

Last year all county health departments completed internal control self-assessment surveys. The Office of the Inspector General evaluated these self-assessments and compiled a report of the common findings, which was issued August 1997, and reported at the October 1997 county health department meeting.

Self-Assessment Common Findings

- Inadequate segregation of duties.
- Too many persons having access to the same financial duty.
- Inadequate controls over accounts receivable.
- Fixed assets inventory control weaknesses.
- Misunderstanding the concept that requiring regular vacations of staff who have cash and accounting responsibilities makes it more likely that financial irregularities will be noticed.

RECOMMENDATIONS

Consistent with these findings the Inspector General made the following recommendations for each county health department.

- Accounts receivable should be
 - Closely supervised,
 - Recorded for all payer sources,
 - Aged regularly, and
 - Uncollectible accounts written off.
- Financial procedures should be reviewed to assure that neither too few nor too many individuals are assigned to each function.
- Accurate inventory and valuation of properties should be maintained.
- Internal controls should be regularly assessed.

Web Site

The Office of the Inspector General has developed and implemented a web site on the department's Internal Web. It provides office information, including how to contact staff, and provides executive summaries of completed audits and investigations, as well as the annual report. Work is currently under way to develop a similar web site on the department's External Web, which can be accessed by the public.

Contracting for Audit Services

After evaluation and negotiation with several certified public accounting firms by our office, the Department of Health awarded a contract to a firm with extensive governmental auditing experience to conduct entity-wide audits of the Broward, Dade, Hillsborough, Orange and Pinellas County Health Departments. When these audits are completed, the department will have accomplished independent audits of more than half of the department's annual budget.

Policies and Procedures Management System	<p>The process of establishing a central repository for Department of Health policies and procedures manuals in the Office of the Inspector General continues. Approximately 900 documents have been collected, sorted, and indexed. This collection has become a valuable resource for all department offices, bureaus, and divisions.</p>
Prior Year Recommendations Follow-up	<p>The following activities revealed significant abuses and/or deficiencies at the Department of Health during fiscal year 1996-97. The following recommendations have not yet been implemented.</p>
HIV/AIDS Surveillance Audits Follow-up	<p>After the security breach in the fall of 1996 involving the release of confidential HIV/AIDS data maintained by the Pinellas County Health Department, the then Department of Health and Rehabilitative Services Office of the Inspector General performed a security assessment review. Corrective action was quickly initiated.</p> <p>During the current reporting period, the Department of Health conducted follow-ups of the HIV/AIDS Surveillance security assessment at each of the HIV/AIDS Surveillance sites. The Bureau of HIV/AIDS assumed the responsibility for monitoring the corrective action plans at each of the HIV/AIDS Surveillance Offices. The bureau continues to visit each of the HIV/AIDS Surveillance Offices on at least an annual basis to monitor their security controls.</p> <p>On a department-wide basis, the department has developed and implemented Information Security Policies, Protocols, and Procedures which includes training, self-assessments, quality improvement monitoring, and an annual audit of the process.</p>
Escambia and Duval County Health Department Follow-up Audits	<p>External financial audits of Escambia and Duval County Health Departments were performed by an independent public accounting firm in December 1995 and 1996, respectively. Lack of proper internal control procedures and inadequacies in accounting records prevented the auditors from forming opinions regarding the accuracy of reported transactions, appropriate billing of services, and completeness of account balances, which resulted in disclaimed opinions in both audit engagements.</p>

In June 1997, the Office of the Inspector General participated in the follow-up “Agreed Upon Procedures” audit of the Escambia County Health Department. Deficiencies continued in the following areas:

- Internal controls over cash.
- Purchasing under county contract.
- Accounts receivable write-offs.
- Recording inventory on the county’s property roles.
- Reviews for unauthorized software.

During this year our office did not follow-up on corrective action taken by these county health departments. However, to demonstrate the success of corrective actions that were undertaken in response to the prior audit findings, independent follow-up audits of Escambia and Duval County Health Departments will be performed in the coming fiscal year.

Follow-up to the
Individuals with
Disabilities Act –
Part H Evaluation

In September 1995, the HRS engaged the services of Florida TaxWatch to evaluate the state’s system of early intervention services funded under Part H of the Individuals with Disabilities Act. These services are provided to children with established conditions and developmental delays, and to their families through Children’s Medical Services. TaxWatch provided several recommendations, which were listed in last year’s annual report.

Subsequent to the Florida TaxWatch, Inc. evaluation, Children’s Medical Services made changes to their program to implement many of the recommendations. Included in these changes was an overhaul of the Early Intervention Program Data System (EIP). Because the information systems findings were not applicable to the newly renovated data system, the Office of the Inspector General determined it was necessary to conduct an information systems audit of the EIP.

This audit is in progress and includes an evaluation of selected functions and controls applicable to the EIP during the period July 1, 1997, through March 31, 1998. Specifically, it addresses computer application control activities over selected areas of input, processing, output, manual follow-up, and user control activities within the EIP data system. This audit will be completed early in fiscal year 1998-99.

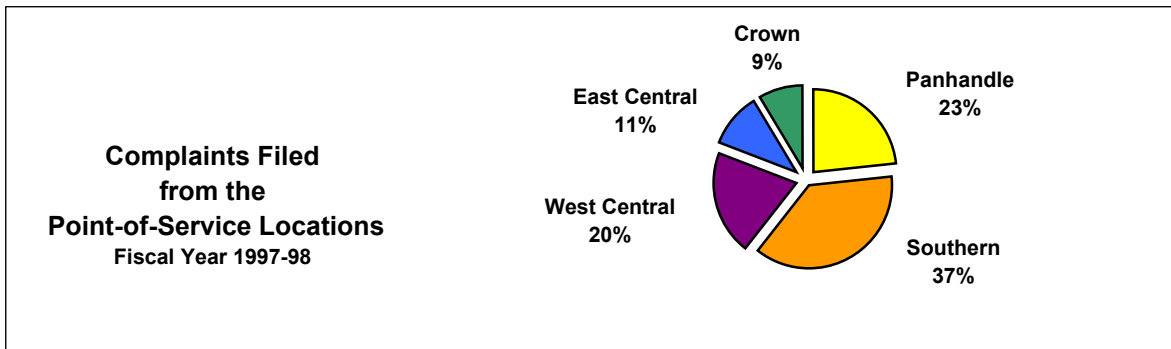
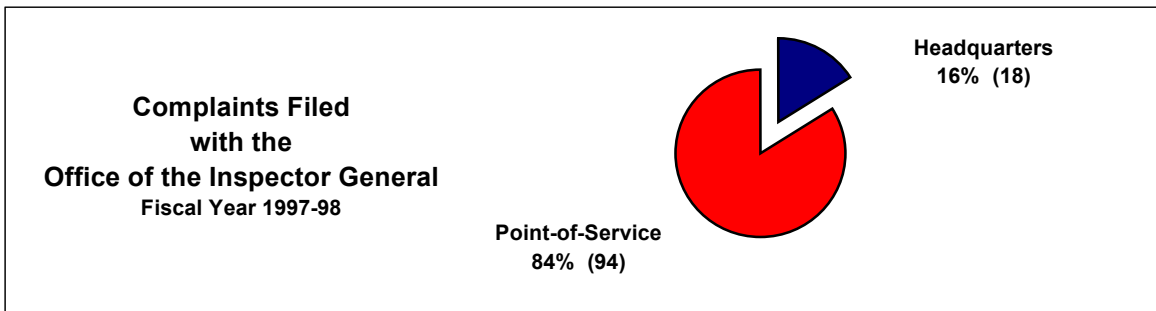
Summary of Complaints and Completed Cases

Audits and Investigations Transferred from HRS to the Department of Health

When HRS was divided on January 1, 1997, several audits and investigations that concerned issues related to the new Department of Health were pending. The HRS Inspector General agreed to retain these projects until completion. To date all investigations and preliminary inquiries have been completed. One audit was completed and two were discontinued.

Stratification of Complaints

During the current reporting period July 1, 1997, through June 30, 1998, 112 complaints were received by the Office of the Inspector General. The charts below depict the stratification of these complaints between headquarters and point-of-service location, and by geographic region for point-of-service locations. Summaries of cases that were completed during this fiscal year appear on the following pages.



**Department of Health
Office of the Inspector General**

Summary of Completed Cases

July 1, 1997 through June 30, 1998

Tracking Number	Close Date	Summary
97-001MA	2-2-98	<i>Management Advisory</i> Complainant alleged a cover-up by the Departments of Environmental Protection (DEP), Health and Agriculture involving the potential harmful effects of Benlate on humans. The matter was reviewed and monitored jointly during litigation and closed.
97-019IN	12-24-97	<i>Investigation</i> Allegations of attempted bribery at the Dade County Health Department were not substantiated.
97-028MA	2-9-98	<i>Management Advisory</i> Allegations of mismanagement by supervisors in the Palm Beach County Health Department were referred to management and monitored. Corrective action to improve the culture of the county health department has been put into effect and six-month follow up has been completed. <i>Get Lean</i>
97-031IN	11-20-97	<i>Investigation</i> Allegations of misuse of Suncom were substantiated. Employee retired.
97-033IN	11-24-97	<i>Investigation</i> An internal control review was performed as a result of cash shortages at the Broward County Health Department.
97-034MA	11-24-98	<i>Management Advisory</i> Allegations of falsification of timesheets was referred to the director of the Hillsborough County Health Department resulting in additional training and incorporation into quality improvement process.
97-035MA	1-23-98	<i>Management Advisory</i> Allegations of nepotism at the Dade County Health Department referred to the executive administrator for response. A complete audit is currently in process.
97-038MA	3-5-98	<i>Management Advisory</i> Allegations of widespread Medicaid fraud at the Palm Beach County Health Department were unsubstantiated; however, investigation revealed cash shortages, which resulted in disciplinary action. <i>Get Lean</i>
97-039MA	7-15-97	<i>Management Advisory</i> Complaints of mismanagement and time sheet falsification by supervisor at Palm Beach County Health Department referred to director for response. Employee and staff were counseled regarding the time sheets and appropriate behavior. <i>Get Lean</i>
97-040MA	7-2-97	<i>Management Advisory</i> Complaints of mismanagement and harassing conduct at the Pinellas County Health Department referred to the deputy state health officer for follow-up. <i>Get Lean</i>
97-043PI	12-23-97	<i>Preliminary Investigation</i> Allegations of patient mistreatment at the Pinellas County Health Department were found to be unsubstantiated based on preliminary investigation coordinated with Children and Families child protection investigator.
97-044MA	3-18-98	<i>Management Advisory</i> Consultation with Department contract manager and monitoring dissolution of Department of Health contractor.
97-046MA	6-22-98	<i>Management Advisory</i> Alleged falsification of time sheets at the Orange County Children's Medical Services clinic. Forwarded to the deputy secretary, with recommendations, which were implemented through a corrective action plan. <i>Get Lean</i>
97-047MA	2-9-98	<i>Management Advisory</i> Alleged improper conduct by supervisors at the Palm Beach County Health Department affecting the on-time payment of vendors was referred to the administrative services director and monitored. Corrective action and six-month follow-up completed. <i>Get Lean</i>
97-049PI	7-9-97	<i>Investigation</i> Allegation that Hendry County Health Department employee disclosed confidential information was unfounded.

Summary of Completed Cases
July 1, 1997 through June 30, 1998
(cont'd)

Tracking Number	Close Date	Summary
97-050IN	9-2-97	<i>Investigation</i> Allegations of misuse of state equipment against legal counsel, and failure of district office to take corrective action were not substantiated.
97-053IN	4-22-98	<i>Investigation</i> Allegations of misuse of state equipment by A. G. Holley superintendent, while an employee of HRS, were not substantiated.
97-054PI	7-14-98	<i>Preliminary Investigation</i> Allegation of incompetent investigation of Pinellas County Emergency Medical Services paramedics alleged falsification of run report was not substantiated. It was concluded that the original report was sufficient. No further action by inspector general.
97-056MA	1-7-98	<i>Management Advisory</i> A personal and confidential file regarding an ongoing sensitive investigation was missing from a locked desk in the Human Resources Office at the Dade County Health Department. Locks were replaced on the office doors.
97-058MA	3-18-98	<i>Management Advisory</i> Allegations of waste in the Dade County Health Department including a building that was renovated but never occupied. Also complaint of unfair workforce reduction. The building has been occupied for the past two years, and the workforce reduction was reviewed by Human Resources and decided fair.
97-059NF	11-3-97	<i>Information Only</i> Employee received anonymous letter from another employee alleging sexual misconduct and unprofessional conduct at the Department of Health headquarters. Complainant withdrew complaint.
97-060MA	7-18-97	<i>Management Advisory</i> Alleged that employees of the Broward County Health Department were rude and complainant was denied a complete medical file to take to his personal physician. Forwarded to the senior administrator of the Broward County Health Department, who contacted and satisfied the complainant.
97-063IN	10-21-97	<i>Investigation</i> Allegation that the medical director at the Brevard County Health Department has a 50% ownership interest in two walk-in clinics and that he is referring MediPass clients to these clinics. See summary of Major Activities, page 16.
97-065MA	11-14-97	<i>Management Advisory</i> Anonymous complainant stated that there is an opening for a school health registered nurse and the Madison County Health Department is holding the position open for a licensed practical nurse to apply who still needs to finish course work and take the licensing exam to become a registered nurse. Complainant felt that it was unfair to those that had to cover for the vacant position. In addition, she complained that this county health department "never hires blacks, only whites." Forwarded to the deputy state health officer, who found that the position was held for budget reasons until advertised in September 1997. There were no black applicants for this position, and, for the past two years, no blacks have applied for nursing positions.
97-069IN	12-2-97	<i>Preliminary Inquiry</i> Private citizen complained about failure of the Dade County Health Department to investigate his complaint of unclean pool conditions at his condominium. Our inquiry revealed that the Dade County Health Department was more than responsive to his complaint. The pool was inspected four times within a month, the last time by the program supervisor.

Summary of Completed Cases
July 1, 1997 through June 30, 1998
(cont'd)

Tracking Number	Close Date	Summary
97-070MA	10-20-97	<i>Management Advisory</i> Alleged waste regarding mail resulted in a formal communication from general services to all department heads on use of overnight mail. <i>Get Lean</i>
97-071MA	10-9-97	<i>Management Advisory</i> Alleged waste regarding mail resulted in a formal communication from general services to all department heads regarding field mail. <i>Get Lean</i>
97-072MA	10-8-97	<i>Management Advisory</i> Allegation of inappropriate use of state facilities and time referred to the director of the Pinellas County Health Department. <i>Get Lean</i>
97-074MA	8-18-97	<i>Management Advisory</i> Allegations of misconduct at the A.G. Holley Tuberculosis Hospital were matters addressed in management review. See Summary of Major Activities, page 13. <i>Get Lean</i>
97-075MA	8-18-97	<i>Management Advisory</i> Allegation that Pinellas and Pasco County Health Departments not hiring from within referred to management. <i>Get Lean</i>
97-076MA	8-29-97	<i>Management Advisory</i> Allegations of failure to give appropriate notice of job openings at the Pasco County Health Department referred to Bureau of Personnel and Human Resource Management resulting in a communication to field personnel liaisons to print and post all Internet job announcements. <i>Get Lean</i>
97-077MA	10-21-97	<i>Management Advisory</i> Allegations similar to 97-076MA with the same result. <i>Get Lean</i>
97-078IN	10-20-97	<i>Investigation</i> Allegations of employees receiving gifts from regulated parties at the Lake County Health Department septic tank program were substantiated for two employees who accepted tickets to Disney World. Reprimands were given. The allegation involving the third employee was not substantiated. <i>Get Lean</i>
97-079IN	10-20-97	<i>Investigation</i> Allegations made against radiographer II/supervisor at the Broward County Health Department of abuse of state equipment and sale of state equipment and retaining the proceeds. Allegation 1 was substantiated. Allegation 2 was not substantiated. Disciplinary action was dispensed.
97-081MA	10-13-97	<i>Management Advisory</i> Allegations of misuse of assigned vehicle were referred to Palm Beach County Health Department assistant director for response.
97-082IN	3-2-98	<i>Investigation</i> In conjunction with the Bureau of Personnel and Human Resource Management, and the Division of Disease Control, allegations of alleged blatant corruption, race, age, and ethnic discrimination, as well as theft of computers and drugs at the Dade County Health Department were investigated. None of the allegations were substantiated.
97-084MA	2-16-98	<i>Management Advisory</i> Allegations of mismanagement at the Dade County Health Department pharmacy were referred to the administrator. As a result, the pharmacist resigned.
97-085IN	2-18-98	<i>Investigation</i> Complainant alleges that a family support worker at the Palm Beach County Health Department was making personal purchases through the county health department. Investigation determined that no purchase order was involved. Employees had placed the order using their work address and the county health department as the account name, but paid from their personal funds. The finance and accounting director met with the employees and advised them that this was inappropriate. A policy memo was distributed to employees. <i>Get Lean</i>

Summary of Completed Cases
July 1, 1997 through June 30, 1998
(cont'd)

Tracking Number	Close Date	Summary
97-087MA	9-16-97	<i>Management Advisory</i> Allegations of improper workforce reduction in Dade County were conferenced with Human Resources and the deputy director. Human Resource personnel reviewed the process and files and determined the layoffs to be consistent with established rules and was well done.
97-088MA	1-9-98	<i>Management Advisory</i> Allegations of harassing phone calls from an employee of the Department of Health was referred to management. This appears to be a personal disagreement, but they were counseled on the appropriate use of state equipment and time.
97-090MA	10-15-97	<i>Management Advisory</i> Allegations of hiring irregularities against the director of Communications and Health Promotion were unsubstantiated. All required documentation was in the selection package in accordance with 60K-3.0092, F.A.C.
97-094MA	1-9-98	<i>Management Advisory</i> Allegations of cover-up of employee survey were not substantiated.
97-097MA	12-11-97	<i>Management Review</i> Allegation of cover-up of scabies outbreak at A.G. Holley Tuberculosis Hospital was referred to epidemiology, which completed and submitted report. Affected employees, patients, and families were treated and measures to prevent/control future outbreaks put in place. Management review of A. G. Holly Hospital was subsequently conducted. See Summary of Major Activities, page 13.
97-098MA	3-23-98	<i>Management Advisory</i> Allegation of theft and cover-up at the Palm Beach County Health Department referred to Palm Beach County Health Department assistant director. Investigation revealed lack of adherence to established controls and several cash shortages. One employee was terminated and two received written reprimands.
97-101MA	12-24-97	<i>Management Advisory</i> Allegations of conflict of interest by contractors of the Early Intervention program were handled cooperatively with the Office of the General Counsel and Children's Medical Services. Contract did not adequately cover this issue.
97-102MA	4-20-98	<i>Management Advisory</i> Allegations of personnel problems at Children's Medical Services clinic at the Pinellas County Health Department were referred to Human Resources who advised the complainant of her of options.
97-103MA	2-19-98	<i>Management Advisory</i> Employee of Manatee County Health Department alleged misuse of computer and Internet by another county health department. Employee was referred to director for response. Investigation substantiated complaint and employee was terminated.
97-109NF	12-9-97	<i>Information Only</i> Inmate of Zephyrhills Correctional Institute complained of improper food inspections at the prison. Request for Whistle-blower status denied. Complainant advised where to report food service violations.
97-110MA	2-9-98	<i>Management Advisory</i> Frustration over inability to solve a septic tank problem referred to management. Response indicates her efforts to resolve the dispute and satisfy the customer. <i>Whistleblower Hotline</i>
97-111MA	1-2-98	<i>Management Advisory</i> Allegations of mismanagement at the Palm Beach County Health Department, in that the health department was experiencing a workforce reduction due to insufficient funds, were factually correct and the county health department is aware and resolving the situation. <i>Get Lean</i>
97-112MA	3-16-98	<i>Management Advisory</i> Allegations of waste in the Orange County Health Department were referred to Assistant State Health Officer who responded with an explanation and found no impropriety. <i>Get Lean</i>
98-004WB	5-20-98	<i>Whistle-blower</i> Allegations of improprieties surrounding the administrator of the Broward County Health Department. See Summary of Major Activities, page 15.

Summary of Completed Cases
July 1, 1997 through June 30, 1998
(cont'd)

Tracking Number	Close Date	Summary
98-005MA	3-3-98	<i>Management Advisory</i> Allegations of insufficient security controls over HIV/AIDS tests at the Orange County Health Department referred to information security coordinator who investigated. Process improvements were implemented.
98-009MA	3-19-98	<i>Management Advisory</i> Allegations that the headquarters office of the Department of Health in Tallahassee has eliminated local minority businesses for small purchases were referred to the Bureau of General Services for clarification as follows: 1) Department of Health is required to purchase supplies, services, materials and equipment from vendors certified as minority vendors by the Division of Management Services, regardless of minority status, 2) purchases that fall below state contract minimum thresholds can be purchased from other vendors as long as purchases are not divided to circumvent the law, and 3) the use of local minority vendors is encouraged. <i>Get Lean</i>
98-015MA	4-23-98	<i>Management Advisory</i> Regulatory complaint referred to Division of Environmental Health was not be substantiated. <i>Get Lean</i>
98-029NF	4-9-98	<i>Information Only</i> Travel ethics consultation. Research indicates that employees can use state rates for rental car use and for hotels, but not for air transportation.
98-031NF	6-3-98	<i>Information Only</i> Anonymous allegations of abuse of power by unnamed individuals was insufficient to investigate.
98-032NF	3-12-98	<i>Information Only</i> Complaint regarding Christmas party by Escambia County Children's Medical Services clinic employee. Inquiry revealed that management acted appropriately. <i>Get Lean</i>
98-033NF	3-2-98	<i>Information Only</i> Complaint of stalking by Department of Health employee preliminarily investigated and referred to Sheriff's department.
98-034PI	3-19-98	<i>Preliminary Investigation</i> Complaint of harassment by employees of Marion County Health Department was not substantiated.
98-035MA	3-12-98	<i>Management Advisory</i> Allegations relating to head lice at the Oak Ridge Elementary School referred to the Department of Health School Health Unit.
98-037NF	5-25-98	<i>Information Only</i> Complaint by employee who voluntarily resigned from the Hernando County Health Department and was not allowed to rescind her resignation. This issue was determined to be outside the jurisdiction of the inspector general.
98-043MA	6-19-98	<i>Management Advisory</i> Complaint of long waits and abusive treatment at the Dade County Health Department referred to the administrator. Staff training in customer relations held. Decreased funding has increased wait times according to administrator.
98-047MA	6-12-98	<i>Management Advisory</i> Allegations of drug abuse referred according to the Department of Health Alcohol and Drug Abuse policy. Forwarded to the director of the Division of Disease Control.
98-063NF	6-17-98	<i>Information Only.</i> Ethics consultation
98-065MA	6-26-98	<i>Management Advisory</i> Three computer supply companies that have existing contracts with the Bureau of Information Resource Management (IRM) provided a reception for department systems administrators. Referred to the chief of IRM who advised vendors not to sponsor these events in the future. To be discussed with IRM managers and at the division staff meeting.
98-067NF	6-26-98	<i>Information Only</i> Ethics consultation and monitoring.

Symbol	Description	Symbol	Description
MA	Management Advisory	IN	Investigation
PI	Preliminary Inquiry	WB	Whistle-blower
MR	Management Review	NF	Information Only