



DEPARTMENT OF HEALTH
Office of the Inspector General

ANNUAL REPORT

For

Fiscal Year 1998-99

Jeb Bush, Governor
Robert G. Brooks, M.D., Secretary
Lesley Mendelson, J.D., Inspector General

September 30, 1999

Jeb Bush
Governor



Robert G. Brooks, M.D.
Secretary

September 30, 1999

Robert G. Brooks, M.D.
Secretary
Department of Health
2020 Capital Circle SE
Tallahassee, Florida 32399-1700

Dear Dr. Brooks:

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 1998-99. It was prepared by Kathleen Streetman based on information provided by members of our staff.

We 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, J.D.
Inspector General

Enclosure
LM/kms

Department of Health Office of the Inspector General

Annual Report Fiscal Year 1998-99

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Executive Summary

This report, which is required by Section 20.055, Florida Statutes, summarizes the activities and accomplishments of the Office of the Inspector General at the Department of Health, for the period July 1, 1998, through June 30, 1999.

Our office continues to work closely with other department 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 incident reporting, the Florida Sterling Council, and a new department policies and procedures management system.

Major projects for the period under review include investigations of allegations at the Manatee County Health Department concerning additional outside employment with a contract provider, and misuse of a state vehicle at the Seminole County Health Department.

During this fiscal year, our audit staff completed an audit of cash and accounts receivable at the county health departments, an audit of the Early Intervention Program Data System for Children's Medical Services, and an audit of the department's compliance with Year 2000 computer-related issues.

A process evaluation of the department's mail service to the Division of Medical Quality Assurance was also completed during this reporting period.

In addition, we implemented an internet website, which can be accessed at <http://www.doh.state.fl.us/>.

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.

Department of Health

To Promote and Protect Health

Mission Statement

The mission of the Department of Health is to promote and protect the health of all people in Florida through the delivery of quality public health services and health care standards.

Values

The Department of Health has adopted the following Work Values:

- Team Caring
 - Team Quality
 - Team Integrity
 - Teamwork
 - Team Accountability
 - Team Professionalism
 - Team Community Partnerships
-

Duties and Responsibilities

The Department of Health is directed, in §20.43, Florida Statutes, 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 the 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 affecting public health.
-

Major Programs

The program structure of the Department of Health, consistent with performance-based program budgeting, includes the following three programs.

- Community Public Health
 - Children's Medical Services
 - Health Practitioner and Access
-

Community
Public Health
Program

The Community Public Health Program protects individuals in Florida 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 Community Public Health Program is administered via 67 county health departments through three department divisions.

- Division of Environmental Health
 - Division of Disease Control
 - Division of Family Health Services
-

Children's
Medical
Services
Program

The primary mission of the Children's Medical Services Program is to provide a family-centered, coordinated managed system of care for children with special health care needs. Through the Florida Kidcare Program, Children's Medical Services covers uninsured, non-Medicaid children, who have special health care needs. Children's Medical Services are provided by a statewide network of multidisciplinary health providers, which include hospitals, medical schools, private physicians' offices, regional medical centers, medical specialty care centers, as well as 22 local Children's Medical Services clinics.

Health Care
Practitioner and
Access
Program

The Health Care Practitioner and Access Program includes two divisions.

- Division of Medical Quality Assurance
- Division of Emergency Medical Services and Community Health Resources.

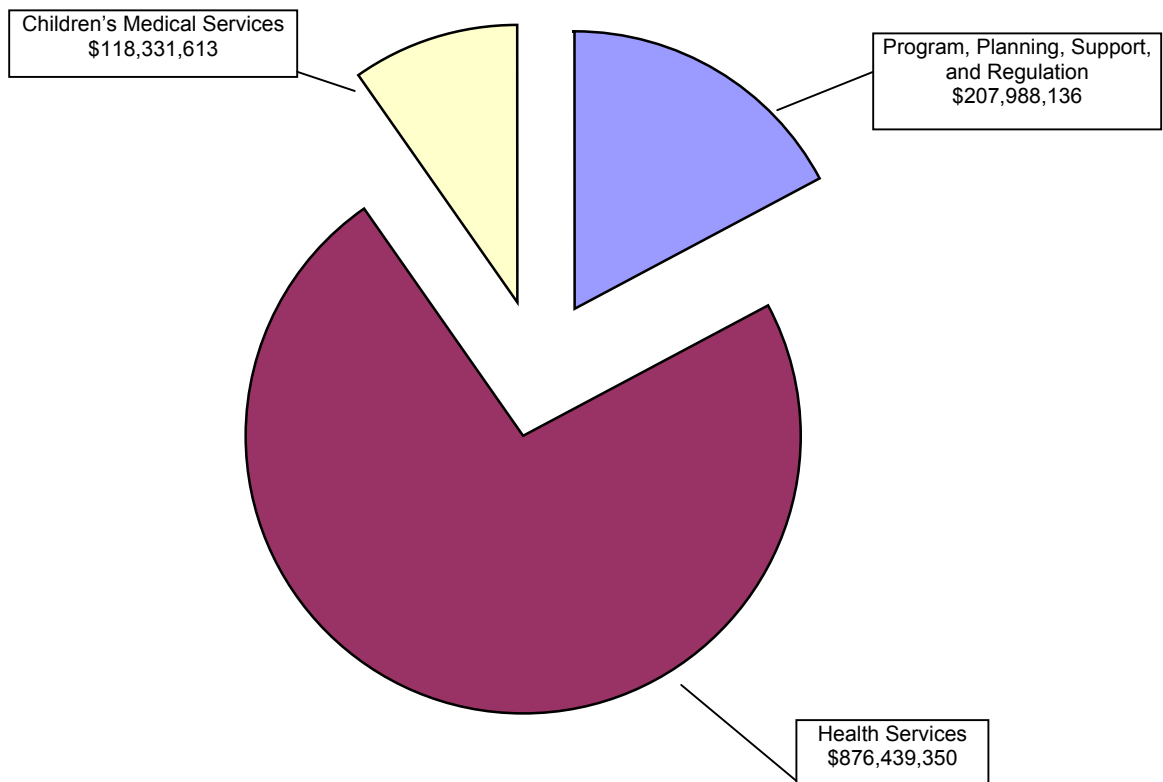
The Division of Medical Quality Assurance carries out the department's responsibilities related to the regulation of medical and allied health professionals.

The Division of Emergency Medical Services and Community Health Resources focuses its work on improving health care access in rural and medically underserved areas, and the regulation of emergency medical services.

Funding and Expenditures

The Department of Health receives most of its funding from federal grants, donations, and health program funding sources, which flow through various trust funds, and from general revenue. Estimated expenditures for Fiscal Year 1998-99 totaled over \$1.2 billion. (See the "Budget Entity Analysis" chart below. Source: Florida Department of Health Resource Manual, February 1999)

**Department of Health
Budget Entity Analysis
Fiscal Year 1998-99**



Office of the Inspector General

Mission Statement

The Office of the Inspector General's mission statement, which is consistent with our statutory mandate is

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

Goals

Consistent with our mission, our goals are

**To provide timely, accurate, and useful information
to our stakeholders**

and

To achieve organizational excellence.

Values

Office of the Inspector General's 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

This year, our office completed the development of its policies and procedures manual, which incorporates the Governor's Council on Integrity and Efficiency standards, as well as our mission and goals. Included in this manual are our audit and investigative manuals delineating our policies and procedures specific to these disciplines.

We have made significant progress toward the establishment of a current department policies and procedures library, and the development and implementation of a training plan that will promote our mission, values, and goals. In addition, we have made progress in the development of performance measures for our office.

Our future plans include the following objectives:

- Improve timeliness without sacrificing accuracy.
 - Create mission statements and objectives for each unit.
 - Identify our internal and external customers, and suppliers.
 - Establish customer focus groups to prioritize their needs.
 - Develop a system to track and trend customer satisfaction.
 - Establish employee focus groups to prioritize employee needs enabling us 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.

- Provide direction, supervision and coordination of audits, investigations, management reviews, and other activities for the purpose of promoting economy and efficiency in the administration of, or preventing and detecting fraud and abuse in, the department's 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, as appropriate, 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 Function
 - Investigative Function
 - Other Accountability Function
-

Auditing
Function

Auditing Duties and Responsibilities

- Perform financial, compliance, electronic data processing, performance and security audits.
 - Monitor implementation of department audits conducted by the Auditor General, the Office of Program Policy Analysis and Government Accountability, and contracted external audits.
 - 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.
 - Assess data collection for performance-based program budgeting performance measures.
-

Investigative
Function

Investigative Duties and Responsibilities

- Receive complaints.
 - Perform and report investigations to detect, deter, prevent and eradicate fraud, waste, mismanagement, misconduct, and other abuses in state government.
 - Coordinate Whistle-blower activities.
 - Report to law enforcement agencies whenever there are reasonable grounds to believe that a violation of criminal law has occurred.
-

Other
Accountability
Function

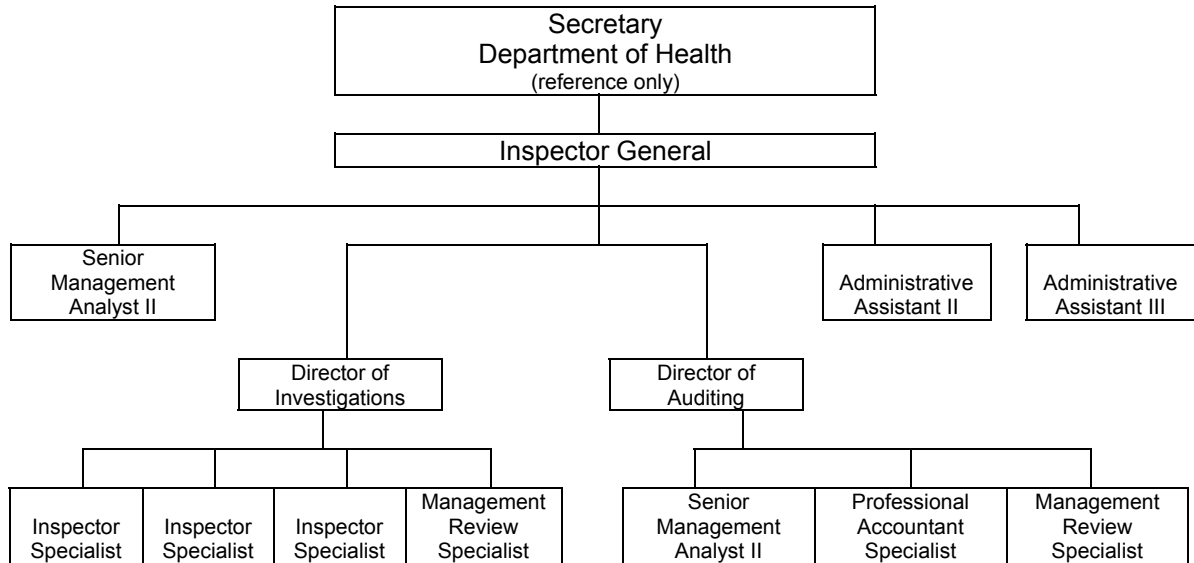
The other accountability function includes those activities that fall outside the audit or investigative functions. These activities are performed by various members of our staff and include, but are not limited to, the following examples:

- Perform management reviews, management advisories, consulting services, and special studies.
 - Review administrative rules and proposed legislation.
 - Advise, assess, and monitor performance measures 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 13 positions reflected in the organization chart below.

**Office of the Inspector General
 Organization Chart**



Office of the
 Inspector
 General
 Staff
 Certifications

As of June 30, 1999, the Office of the Inspector General's staff had the following certifications:

- Juris Doctor
- Certified Public Accountant (3)
- Certified Internal Auditor
- Certified Information Systems Auditor
- Registered Nurse (2)
- Licensed Healthcare Risk Manager
- Certified Sterling Examiners (3)

Professional
Training

This year the Inspector General's staff participated in over 750 hours of professional training. These seminars and classes included the following topics:

- Investigative and auditing techniques
- Personnel and supervisory policies
- State of Florida accounting systems
- Computer skills
- Security issues
- Fraud investigations
- Best management practices, which included
 - Florida Sterling Criteria
 - University of South Florida's Public Health Leadership Institute
 - Process Evaluation Workshop
- Education unique to the many professionals that are employed by our office, which include nursing, law, and accounting

We presented training sessions for department personnel, which included training in the areas of:

- Fraud in the workplace
 - Financial statements
 - Year 2000 issues
 - Common findings identified in audits, investigations, and other reports on Department of Health activities
-

Department of
Health
Workgroup
Participation

Staff in our office also participated in department workgroups such as the Quality Improvement Advisory Council, the Integrated Health Systems Workgroup, the Information Security Workgroup, and the Organizational Performance Excellence Team.

Auditor General
Quality Control
Review of the
Office of the
Inspector
General

The Office of the Auditor General conducted a review of our office for the period July 1, 1998 through June 30, 1999. This review revealed no adverse findings and contained no corrective recommendations for our system of quality control and internal audit function's compliance with professional auditing standards applicable to the Office of the Inspector General policies and procedures, and specific provisions of §20.055, Florida Statutes.

External
Management
Review of the
Office of the
Inspector
General

During this fiscal year, our office identified a need to improve the timeliness of our reports. As a result, we contracted an external assessment of office leadership and productivity. This assessment identified low office morale and highlighted our need to clarify office goals and related performance measures; clarify roles, responsibilities, and authority of supervisory positions; and update investigative procedures with attention to operational performance standards, controls, and reporting.

In response to this assessment, we are in the process of developing office performance measures with target goals and we intend to set up a peer review focusing on investigations near the end of this fiscal year. (See previous page for the internal audit function peer review performed by the Office of the Auditor General.)

In addition, the entire Department of Health will participate in an employee satisfaction survey this year. We will use these tools to measure progress and identify opportunities for improvement within our office.

Summary of Major Activities

Current Year Major Activities

During the current reporting period, the Office of the Inspector General published the following significant audits, investigations, and management reviews, and participated in other significant activities. Summaries of these reports, activities, and our recommendations follow.

Mail Service to the Division of Medical Quality Assurance Management Review

The purpose of this management review was to evaluate the mail service process and to make recommendations for improving internal controls and the timeliness of mail delivery to the Division of Medical Quality Assurance. A team composed of staff from the Mail Service Center and from the Division of Medical Quality Assurance provided information necessary to evaluate this process.

Because our preliminary test of the mail delivery process revealed no serious problems with the timeliness of interoffice mail delivery, we were surprised to discover that the satellite mailroom located at the Division of Medical Quality Assurance was performing tasks that were redundant and unnecessary. The performance of these tasks delayed the delivery of mail to this division.

Internal controls over funds encountered when mail was opened were not adequate. Although there are a few written policies and procedures governing the mailroom process and its internal controls, mailroom staff have produced an excellent set of training overheads, which could be used as a starting point for drafting a policy manual.

Based on our process evaluation, we concluded that mail service to the Division of Medical Quality Assurance would be enhanced if the following recommendations were implemented:

RECOMMENDATIONS

- Close the Medical Quality Assurance Mailroom.
 - Open mail only if the destination cannot be identified by its address.
 - Upgrade internal controls over funds consistent with department funds receipt policy.
 - Develop a policy and procedure manual, which includes internal controls.
-

Audit of Cash and
Accounts
Receivable at the
County Health
Departments

Our audit of cash and accounts receivable focused on relevant internal controls relating to cash and accounts receivable at headquarters and five county health departments (Bay, Gadsden, Madison, Orange, and Taylor Counties). This audit included a review of various transactions and conditions during the period July 1, 1997 through May 31, 1998.

Our audit disclosed that department policies and procedures relating to internal controls, collections, and the write-off of accounts receivable were not implemented uniformly. Additionally, we found that it was not reasonable to expect that the recorded accounts receivable could be collected due to their age and materiality.

RECOMMENDATIONS

- Headquarters should determine whether all county health departments are billing clients for services, so that revenue may be collected and maximized.
 - Headquarters should review the current levels of accounts receivable and take immediate measures to facilitate write-offs so that balances are brought to realizable levels.
 - Headquarters should continue to develop and implement comprehensive information technology policies and procedures that will address information systems security, such as control over data access, data and system integrity, physical security, backup and recovery, and auditing and security monitoring.
 - Headquarters should develop comprehensive information technology policies and procedures that will address on-site backups of important programs and data, whether they exist on mainframes, local area networks, or personal computers.
 - Adequate access controls should be implemented in order to decrease the risk of an unauthorized person accessing, using, modifying, disclosing, or destroying sensitive information.
 - County health department management should evaluate, revise, and periodically review the access capabilities of their users in the application systems to ensure that adequate segregation of duties exists and access is properly assigned on a strict "need-to-know" basis in the performance of users' duties.
-

Audit of
Children's
Medical Services
Early Intervention
Program Data
System

On November 17, 1998, our office completed an audit that evaluated selected computer application and user control activities of the state's system of early intervention services funded under Part H of the Individuals with Disabilities Act from July 1, 1997 through March 31, 1998, and selected department actions taken through July 1998.

Our audit identified many internal control deficiencies surrounding the design and operation of the Early Intervention Program Data System, which are directly related to the fact that contracts with the University of Florida to maintain and operate the Early Intervention Program Data System do not require that the University of Florida Early Intervention Data Center adhere to the Department of Health's information security policies nor to its information technology business standards.

RECOMMENDATIONS

- Revise the contract with the University of Florida to include the following requirements:
 - University of Florida Early Intervention Program Data Center adhere to the department's Information Security Policy, Protocols, and Procedures Manual, and information technology business standards in the delivery of their services related to the Early Intervention Program Data System.
 - Controls related to user access, data integrity, and monitoring be implemented in the Early Intervention Program Data System to eliminate the identified weaknesses.
 - Department of Health complete the development and implementation of the Information Security Policy, Protocols, and Procedures related to Policy "Security 18."
-

Audit of the
Department of
Health's
Compliance with
Year 2000
Computer-related
Issues

In the fall of 1998, our office initiated a Year 2000 compliance audit of the department, in which we determined that the current Year 2000 plans adequately addressed all hardware and systems software. However, because department inventories of local applications are incomplete, we could not determine if current individual project plans adequately address all critical application programs.

Although the department has implemented a procedure to improve monitoring the progress of all department Year 2000 activities, there was inadequate management level oversight of these activities.

RECOMMENDATIONS

- The Department of Health should establish a department-wide Year 2000 committee with representation from affected divisions to adequately address the following activities:
 - Prioritize and monitor the status of all Year 2000 efforts.
 - Coordinate efforts to identify and prioritize Year 2000 specific funding needs, to ensure that all purchases made by county health departments are Year 2000 compliant and to ensure that all contracts involving information systems require that the systems are Year 2000 compliant.
 - Assist the Department of Health Year 2000 coordinator in the procurement of necessary information from all divisions, offices, clinics, and county health departments.
 - A department senior manager should be assigned to monitor the department's overall Year 2000 status.
 - The Division of Information Resource Management should develop and implement policies and procedures to:
 - Establish the division's direction, goals, and objectives, and indicate how this policy is to be implemented.
 - Address disaster recovery and contingency planning, network security, application maintenance, network system maintenance and performance, help desk operations, and electronic mail functions.
-

Contracting for
Audit Services

Our office procured and managed a contract with a certified public accounting firm, having extensive governmental auditing experience, to provide an independent, entity-wide audit of Broward, Dade, Hillsborough, Orange and Pinellas County Health Departments for the year ended June 30, 1998. The selection of these county health departments represented more than half of the department's annual budget.

RECOMMENDATIONS

As a result of the independent auditor's findings, the following common recommendations were made.

- Procedures should be implemented within the financial reporting system that allow for the preparation of complete, reliable, and accurate financial statements by the county health departments.
 - The Department of Health should enforce its policies and procedures at the county health department level and the county health department should take measures to ensure that all policies and procedures are implemented and followed.
 - The individuals responsible for preparing federal expenditure reports should have access to the Florida Accounting Information Record in order to prepare a complete and accurate report. A reconciliation of these reports to the Florida Accounting Information Record should be prepared for the fiscal year and all allocation adjustments should be posted to the Florida Accounting Information Record.
 - Controls should be implemented to ensure that the Employee Activity Report forms are completed properly and accurately or an alternate system should be developed to compile the allocation data.
-

Manatee County
Health
Department
Additional
Employment with
a Contract
Provider

Our office conducted an investigation into allegations that the pharmacy manager of the Manatee County Health Department had additional employment outside state government with Manatee County Rural Health Services, Inc., a contract provider for the Department of Health. Department policy requires an opinion of legality from the Commission on Ethics and official notification as a predicate to outside employment with its contractors. In this case, neither an opinion nor official notification was provided.

In addition, the pharmacy manager was not required to adhere to any standard hours of work to enable the Manatee County Health Department to understand whether her outside employment would interfere with her duties at the county health department. A comparison of the pharmacy manager's Department of Health timesheets with time billed to the Manatee County Rural Health Services, Inc. revealed several instances where time was claimed simultaneously.

The pharmacy manager's immediate supervisor and the director of the Manatee County Health Department were both aware of her outside employment. In fact, five additional employees were identified as having outside employment with Manatee County Rural Health Services, Inc. None had acquired the necessary ethics opinion and none had officially disclosed the employment as required.

RECOMMENDATIONS

The Manatee County Health Department should

- Obtain an ethics opinion for every employee who has provided services for compensation to Manatee County Rural Health Services.
- Continue efforts to establish processes to ensure compliance with Department of Health regulations regarding outside employment.
- Establish processes to tighten controls over work hours.
- Review and resolve discrepancies in time charged simultaneously to Manatee County Health Department and Manatee County Rural Health Services.
- Take disciplinary action as deemed appropriate.
- Report current relationship with Manatee County Rural Health Services pharmacy.

Department of Health pharmacy officials should assure that action has been taken to correct the deficiencies found by the pharmacy audit by conducting another audit.

Palm Beach
County Health
Department
Implementation
Review

In November 1998, our office began a review to test whether the Palm Beach County Health Department had implemented improvements suggested as a result of an investigation conducted by our office in early 1997. We found much improvement, such as, the Palm Beach County Health Department had established a contract administrator function and a policy that created an additional specialized control system for contracting and leasing. During this review, we were able to identify additional opportunities for improvement.

RECOMMENDATIONS

- Department of Health should ensure that the Department of Management Services has approved Palm Beach County Health Department three tenant-at-will arrangements and its unapproved lease and that the Department of Health appropriately files the nominal lease with the Department of Management Services.
- Palm Beach County Health Department redesign its authorized signature form for purchase requisitions to add essential fields.
- Palm Beach County Health Department enhances and documents its purchase-ordering procedures to ensure that all appropriate procurements are competitively bid and that justification is present for all procurements that are not competitively bid.

Infant Screening
Program
Certification for
Years Ended
June 30, 1997
and 1998

The Office of the Inspector General is required by statute to submit a certification of the annual costs of the Infant Screening Program. Our certification for the years ended June 30, 1997 and 1998 resulted in the following recommendations.

RECOMMENDATIONS

- A methodology be developed and consistently applied for calculating the allocation of the laboratory's overhead costs to the program.
 - Management review the feasibility of assessing hospitals not licensed under Part I of Chapter 395, Florida Statute.
 - Include a beginning and ending cash balance each year.
-

Seminole County
Health
Department
Misuse of State
Vehicle

This investigation was predicated on a complaint alleging that an employee of the Seminole County Health Department was misusing a state vehicle. The facts disclosed that the employee was assigned a vehicle titled to Seminole County for 24-hour use. His use of the vehicle to commute to his home in another county was approved by Seminole County.

Our investigation revealed that the employee was not misusing the vehicle. However, we discovered that state law and Department of Health policies and procedures are not enforced at the county health department level by the department because vehicles purchased by the Department of Health are titled to the respective counties.

State and county vehicle usage standards do exist. According to county personnel, compliance was consistent with county vehicle usage rules. However, the Attorney General has opined that when state employees use county titled vehicles, usage must comply with Chapter 287, Part II, Florida Statutes. There is no process at any level to monitor usage in compliance with any existing standards or efficient assignment of vehicles.

RECOMMENDATION

Department of Health should develop policies, procedures, and systematic oversight processes that specifically address the purchase and use of vehicles from the County Health Department Trust Fund. These policies may incorporate county standards as long as they also meet the requirements of Chapter 287, Florida Statutes.

Activities Relating to Performance-Based Program Budgeting

The Department of Health is scheduled to begin operating under performance-based program budgeting in Fiscal Year 2001-02; however, the department will submit a performance-based legislative budget request for Fiscal Year 2000-01.

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 the development of a comprehensive performance measurement system on June 1, 1997. Since that time the department has established its program structure and finalized its list of performance measures.

Our office has completed a preliminary assessment of the validity of these measures and the likelihood of data reliability. We have made significant progress toward the development of a plan for monitoring and reviewing the department's data collection systems, to ensure that performance data are maintained and supported by department records.

Florida Sterling Council for Organizational Performance Excellence

During this reporting period, another member of the Office of the Inspector General's staff was selected to serve on the Board of Sterling Examiners. Through this process she will become acquainted with the Sterling Criteria and will gain experience through the examination of other organizations.

In addition, the Office of the Inspector General assisted the department in its quality journey by participating on the department's Organizational Performance Excellence Team.

Office of the Inspector General's Websites

The Office of the Inspector General has developed and implemented websites on the department's intranet and internet sites (<http://www.doh.state.fl.us/>). These sites include our mission statement and goals, and describe the work of our office. Additionally, the executive summary to each of our significant published audits, investigations, management reviews, and the annual report are found at these sites. Links to related internet sites are also provided.

Florida
Administrative
Rule Review
Activities

All Department of Health proposed rules and rule amendments were reviewed to assure consistency with legislative intent and alignment with departmental mission and strategic issues. During this reporting period, we reviewed 155 proposed or amended rules.

Information
Security
Incidents
Reporting

During the fiscal year under review, 187 information security incidents were reported to the Office of the Inspector General. This is triple the number of incidents (62) reported for the prior fiscal year. We found that approximately three-quarters of the incidents reported to our office during the current fiscal year were for improper releases of confidential information. The security incident reports are reviewed by our office and logged into an incident database designed to track and monitor any additional follow-up. Quarterly reports are published on our website.

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 the fiscal year ended June 30, 1998. Recommendations for the Department of Health include the following items:

Subrecipient Monitoring

- Continue efforts to improve the review and follow-up on audit findings within subrecipient audit reports.

Special Supplemental Nutrition Program for Women, Infants, and Children

- Ensure that the county health departments timely and properly record expenditures in the Department of Health's accounting system.

Child and Adult Care Food Program

- Remit and report amounts collected from prior years grants upon accumulating to \$10,000 or monthly, whichever occurs first, to ensure that prior year collections are remitted and reported promptly and in accordance with U.S. Department of Agriculture guidelines.

Early Intervention Program

- Maintain documentation required by OMB Circular A-87 for purposes of substantiating that salary costs charged to the Early Intervention Program are proper and appropriate.
- Implement controls to ensure that required reports are prepared and submitted so that the U.S. Department of Education is kept aware of the progress and status of the Early Intervention Program.

Immunization Grants Program

- Obtain and maintain documentation required by OMB Circular A-87 for purposes of substantiating that salary costs charged to the Immunization Grants Program are proper and appropriate.

HIV Care Formula Grants

- Revise its procedures to obtain the required certifications on a semi-annual basis and after the end of the respective semi-annual periods.
 - Ensure that adequate records are maintained to document client eligibility to provide assurance that only authorized individuals are provided drugs.
-

Office of the Auditor General's Operational Audit of the Department of Health

Our office coordinated with the Office of the Auditor General for the Operational Audit of the department for the period January 1 - December 31, 1997 and selected department actions taken through July 15, 1998. The scope of this audit focused primarily on administrative functions and department oversight of the county health departments. The department has implemented 14 of the 17 recommendations provided in the report and is presently working on implementing the remaining three. The Office of the Auditor General's recommendations were based on the following findings.

Oversight of County Health Departments

Budget Allocation

The Department of Health did not have written policies and procedures to document the methodologies used for allocating funds to the county health departments, did not document the allocation process, and some allocation methodologies used by the department did not appear to ensure equitable distribution among the county health departments.

Deficit Account Balances

Department procedures did not preclude individual county health departments from overspending their authorized budgets.

Monitoring of County Health Departments

Since the department was in the process of establishing monitoring procedures, very limited monitoring of the county health departments' financial positions and administrative functions were performed. Department procedures did not include a review of program-related variance reports or require the county health departments to submit corrective action plans in response to findings contained in audits.

Monitoring Transfer of Funds

Department procedures did not include monitoring for fund transfers between levels of service to provide assurance of compliance with §154.02(3)(d), Florida Statutes.

Reporting

Quarterly financial statements of county health department account balances prepared by the department, for use by the boards of county commissioners, did not appear to be timely and useful.

Office of the Auditor General's Operational Audit of the Department of Health (cont'd)

Payroll and Personnel Administration

Records Maintenance

The department did not always maintain complete and accurate leave records and position descriptions and payroll disbursements were not always accurately recorded in the Florida Accounting Information Record (FLAIR).

Salary Refunds

Contrary to Department of Management Services rules, the department did not provide applicable employees with written notification of salary overpayments. In addition, the department did not timely process corrections to applicable payroll records for some salary refunds made by employees.

Cash Management

Investments

Department personnel did not take appropriate actions to ensure that excess cash on hand was fully invested so as to obtain additional interest earnings for the benefit of the department.

Cash Collections Processing

Department internal controls did not always include procedures to reasonably ensure that collections received were properly safeguarded, recorded, and timely deposited.

Procurement of Goods and Services

Purchasing

Department procedures did not always ensure that expenditures were adequately documented and properly recorded.

Year 2000 Information Technology Resources

Some department purchase orders did not contain language requiring that information technology resources be Year 2000 compliant.

Office of the
Auditor General's
Operational Audit
of the Department
of Health (cont'd)

Voucher Processing

The department voucher processing procedures and records disclosed several deficiencies that could have a significant effect on the Department of Banking and Finance's determination of the department's rate of compliance with the vendor payment provisions of §215.422(1), Florida Statutes.

Certifications Forward

Department procedures relating to the certifications forward process did not always ensure compliance with the provisions of Section 216.301(1)(a), Florida Statutes, and the accuracy of department accounting records.

Inventory Management

Contrary to department policy, monthly physical inventories were not always performed at the department's central pharmacy. Additionally, internal controls should be strengthened to ensure pharmaceuticals are properly accounted for and safeguarded.

State-owned Property Administration

Property Records Maintenance

Department procedures related to the maintenance of records for tangible personal property should be enhanced to ensure property transferred by the department to the county health departments is properly accounted for and purchased property is appropriately recorded in department property records.

Insurance

The department did not always ensure that periodic and timely reviews of the insurable values of department assets were performed and that corresponding adjustments were made to update the values and locations reported for insurance coverage.

FLAIR Access Functions

Department procedures should be strengthened to provide assurance that only authorized users have the ability to access the FLAIR for the performance of their assigned job responsibilities.

**1997- 98
Recommendations
Follow-up**

The following activities revealed significant abuses and/or deficiencies at the Department of Health during Fiscal Year 1997-98. The following recommendations have not yet been implemented.

A.G. Holley
Tuberculosis
Hospital
Management
Review

A management review of A.G. Holley Tuberculosis Hospital was initiated in the fall of 1997 as a result of our annual risk assessment and a series of anonymous complaints about the hospital. Our 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 hospital 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 OUTSTANDING

As a result of these findings, our office made 14 recommendations, the following three recommendations remain outstanding:

- Designate a governing body consistent with and legally authorized to carry out the duties in administrative rule.
 - Institute systematic, routine, operational reviews of the hospital.
 - Improve plant and grounds maintenance.
-

Okaloosa County
Health
Department
Management
Review

A management review of the Okaloosa County Health Department was completed during the previous fiscal year 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.

The following recommendations were made and although some work has been directed toward implementing them, none have been fully implemented.

RECOMMENDATIONS OUTSTANDING

- 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.
-

Investigation of
Broward County
Health
Department
Whistle-blower
Complaints

An investigation of the Broward County Health Department was initiated during the previous fiscal year 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 OUTSTANDING

Although the Department of Health has begun to develop and implement interactive formal systematic processes to uncover potential financial problems before a crisis occurs, as of the date of this report, the following recommendations have not been fully implemented:

- Develop its interactive process for the development, review, and execution of county health department state/county contracts.
- 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.

The following recommendations for the Broward County Health Department have not been implemented:

- Implement procedures to maximize revenues.
 - Develop and implement a formal process to monitor its fiscal performance, with assistance from Department of Health headquarters.
-

**1997
Recommendations
Follow-up**

The following activities revealed significant abuses and/or deficiencies at the Department of Health Jan 1, 1997 through June 30, 1997. The following recommendations have not yet been implemented.

Escambia and
Duval County
Health
Departments'
Follow-up Audits

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.

In June 1997, the Office of the Inspector General participated in the follow-up "Agreed Upon Procedures" Audit of the Escambia County Health Department. We found that 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

To demonstrate the success of corrective actions that were undertaken in response to the prior audit findings, an independent follow-up audit of Escambia County Health Department is currently in progress and one is planned for the Duval County Health Department in the coming fiscal year.

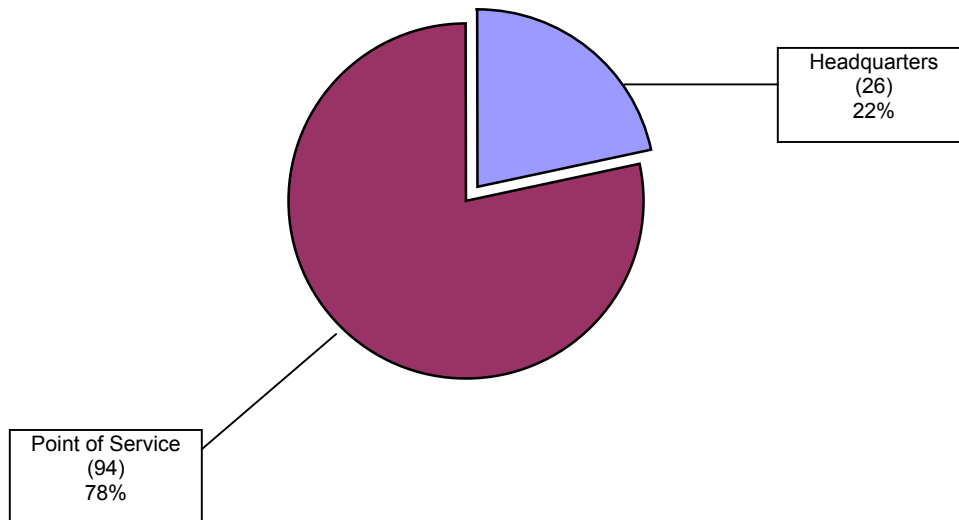
Summary of Complaints Received

Stratification of
Complaints
Received During
the 1998-99
Fiscal Year

During the current reporting period July 1, 1998 through June 30, 1999, 134 complaints were received by the Office of the Inspector General. Fourteen of these complaints were not within our jurisdiction and were appropriately referred.

Of the remaining 120 complaints, 26 involved issues at headquarters and 94 involved point of service issues. (See the "Headquarters vs Point of Service" chart below.)

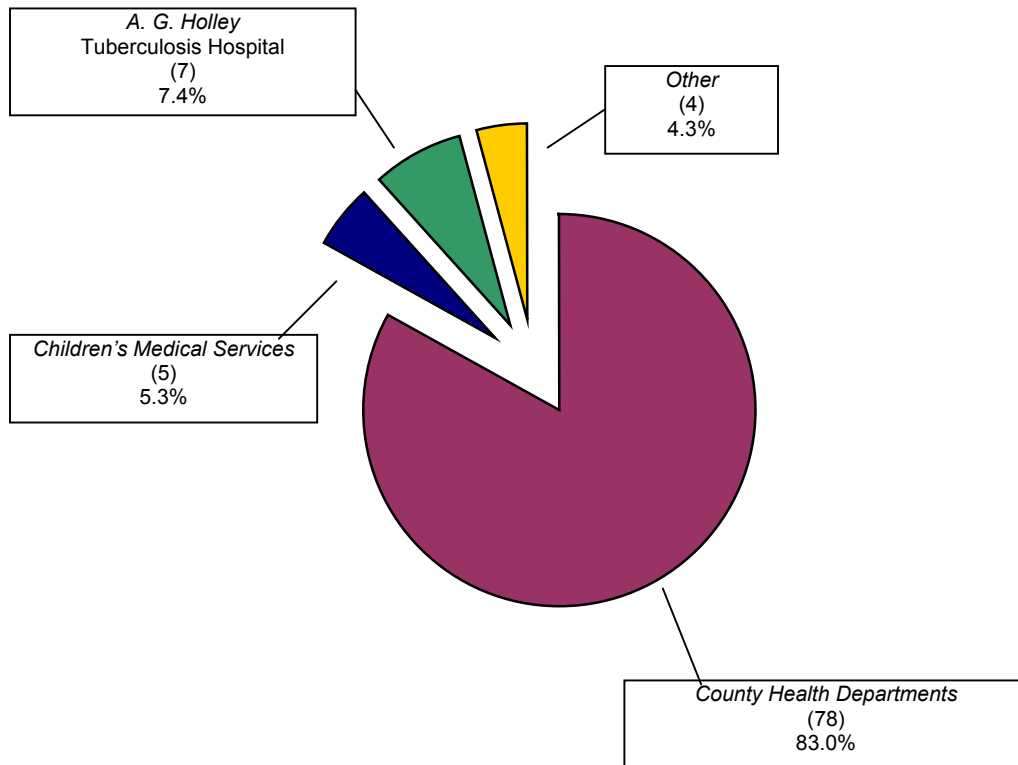
Department of Health Complaint Data Headquarters vs Point of Service Fiscal Year 1998-99



Stratification
of
Complaints
(cont'd)

Stratification of the 94 complaints received regarding the point of service group is demonstrated by the "Point of Service Stratification" chart below.

**Department of Health
Complaint Data
Point of Service Stratification
Fiscal Year 1998-99**



Stratification
of
Complaints
(cont'd)

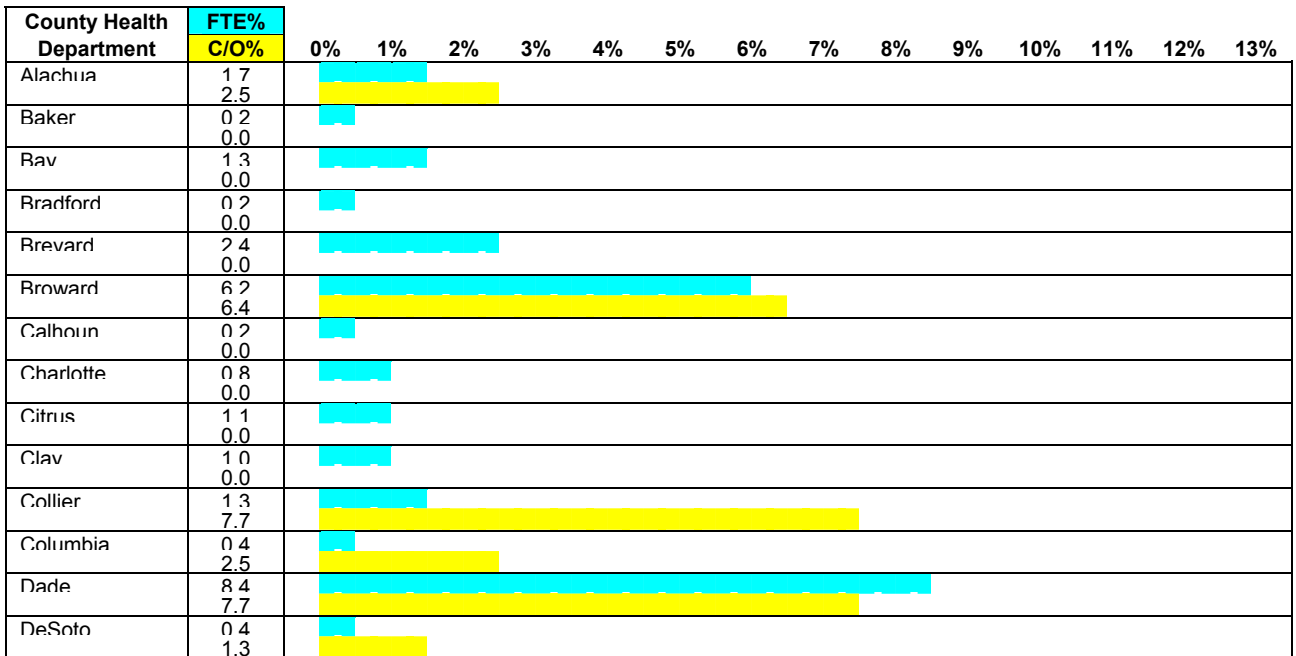
The chart below provides insight into whether the number of complaints received by our office for a particular county health department is consistent with the number of complaints we would expect based upon the county health department's number of employees. For each county, this chart provides a comparison of the percentage of the total county health department complaints received this fiscal year (C/O%) with the percentage of the total full time equivalent employees of all the county health departments for this fiscal year (FTE%).

For example, the Alachua County Health Department has 1.7% of all the county health department full time equivalents working in its health department; however, this county health department was the recipient of 2.5% of the county health departments' complaints received in our office this fiscal year.

FTE% = number of full time equivalents for a particular county health department divided by the total number of full time equivalents at all county health departments as of September 1998.

C/O% = number of complaints regarding a particular county health department divided by the total number of complaints received by the Office of the Inspector General regarding all county health departments for the Fiscal Year 1998-99.

**County Health Department Complaint Data
Percentage of Complaints vs Percentage of Full Time Equivalents
Fiscal Year 1998-99**



**County Health Department Complaint Data
Percentage of Complaints vs Percentage of Full Time Equivalents
Fiscal Year 1998-99**

(cont'd)

County Health Department	FTE%	0%	1%	2%	3%	4%	5%	6%	7%	8%	9%	10%	11%	12%	13%
	C/O%														
Dixie	0.3 0.0														
Duval	5.6 1.3														
Escambia	3.1 3.8														
Flanler	0.4 0.0														
Franklin	0.3 0.0														
Gadsden	0.7 1.3														
Gilchrist	0.2 0.0														
Glades	0.2 0.0														
Gulf	0.3 0.0														
Hamilton	0.1 0.0														
Hardee	0.6 0.0														
Hendry	0.5 0.0														
Hernando	1.0 0.0														
Highlands	1.0 0.0														
Hillsborough	5.1 12.8														
Holmes	0.4 0.0														
Indian River	1.1 1.3														
Jackson	0.8 1.3														
Jefferson	0.2 0.0														
Lafayette	0.2 0.0														
Lake	1.3 1.3														
Lee	2.2 3.8														
Leon	1.4 1.3														
Levy	0.3 0.0														
Liherty	0.2 0.0														
Madison	0.3 0.0														
Manatee	1.8 2.5														
Marion	2.6 2.5														
Martin	1.0 2.5														
Monroe	0.9 2.5														
Nassau	0.5 0.0														
Okaloosa	1.1 2.5														
Okeechobee	0.5 0.0														
Orange	4.6 7.7														

**County Health Department Complaint Data
 Percentage of Complaints vs Percentage of Full Time Equivalents
 Fiscal Year 1998-99**

(cont'd)

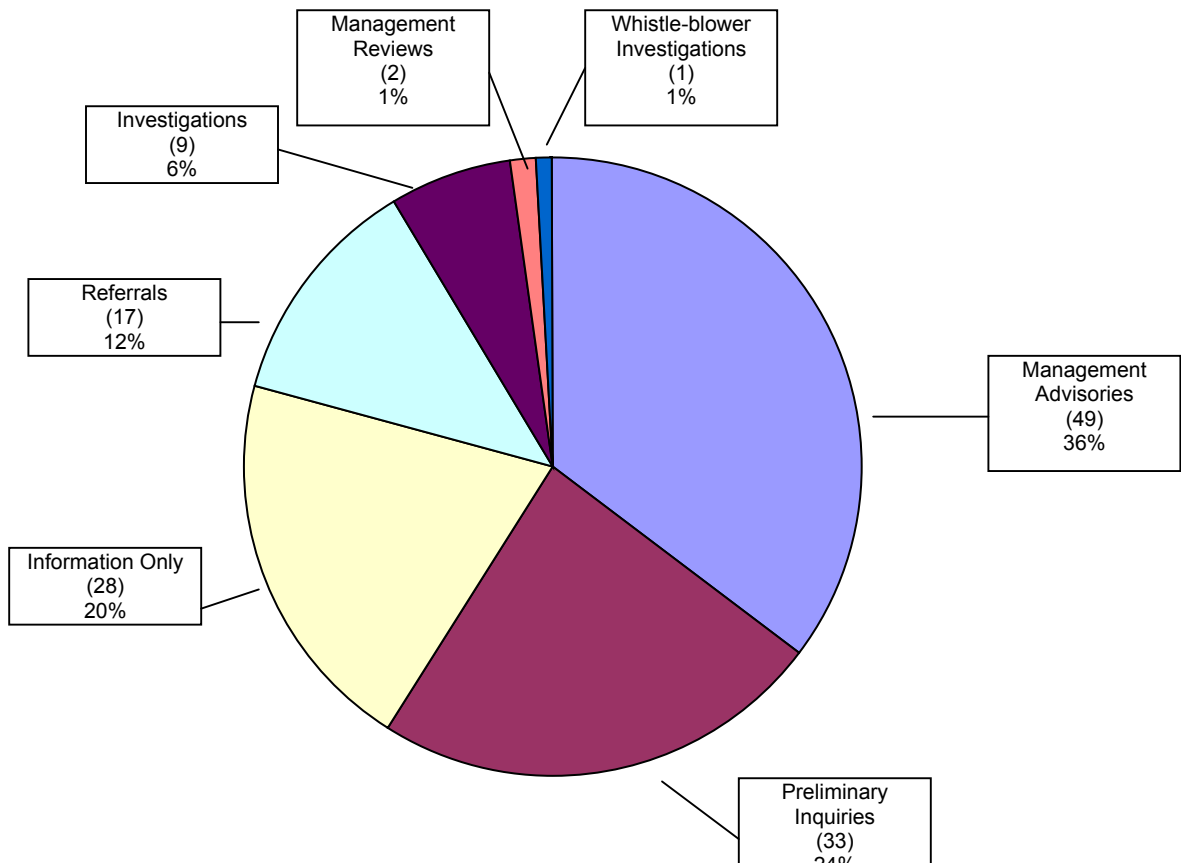
County Health Department	FTE%														
	C/O%	0%	1%	2%	3%	4%	5%	6%	7%	8%	9%	10%	11%	12%	13%
Osceola	1.0	[Bar chart showing 1.0% C/O% and 1.0% FTE%]													
	1.3	[Bar chart showing 1.3% C/O% and 1.0% FTE%]													
Palm Beach	8.2	[Bar chart showing 8.2% C/O% and 5.1% FTE%]													
	5.1	[Bar chart showing 5.1% C/O% and 5.1% FTE%]													
Pasco	1.9	[Bar chart showing 1.9% C/O% and 1.3% FTE%]													
	1.3	[Bar chart showing 1.3% C/O% and 1.3% FTE%]													
Pinellas	5.4	[Bar chart showing 5.4% C/O% and 5.1% FTE%]													
	5.1	[Bar chart showing 5.1% C/O% and 5.1% FTE%]													
Polk	3.8	[Bar chart showing 3.8% C/O% and 0.0% FTE%]													
	0.0	[Bar chart showing 0.0% C/O% and 0.0% FTE%]													
Putnam	0.8	[Bar chart showing 0.8% C/O% and 0.0% FTE%]													
	0.0	[Bar chart showing 0.0% C/O% and 0.0% FTE%]													
Saint Johns	1.0	[Bar chart showing 1.0% C/O% and 1.3% FTE%]													
	1.3	[Bar chart showing 1.3% C/O% and 1.3% FTE%]													
Saint Lucie	1.1	[Bar chart showing 1.1% C/O% and 1.3% FTE%]													
	1.3	[Bar chart showing 1.3% C/O% and 1.3% FTE%]													
Santa Rosa	0.7	[Bar chart showing 0.7% C/O% and 0.0% FTE%]													
	0.0	[Bar chart showing 0.0% C/O% and 0.0% FTE%]													
Sarasota	2.9	[Bar chart showing 2.9% C/O% and 0.0% FTE%]													
	0.0	[Bar chart showing 0.0% C/O% and 0.0% FTE%]													
Seminole	1.4	[Bar chart showing 1.4% C/O% and 3.8% FTE%]													
	3.8	[Bar chart showing 3.8% C/O% and 3.8% FTE%]													
Sumter	0.4	[Bar chart showing 0.4% C/O% and 0.0% FTE%]													
	0.0	[Bar chart showing 0.0% C/O% and 0.0% FTE%]													
Suwannee	0.3	[Bar chart showing 0.3% C/O% and 0.0% FTE%]													
	0.0	[Bar chart showing 0.0% C/O% and 0.0% FTE%]													
Taylor	0.3	[Bar chart showing 0.3% C/O% and 1.3% FTE%]													
	1.3	[Bar chart showing 1.3% C/O% and 1.3% FTE%]													
Union	0.1	[Bar chart showing 0.1% C/O% and 0.0% FTE%]													
	0.0	[Bar chart showing 0.0% C/O% and 0.0% FTE%]													
Volusia	3.4	[Bar chart showing 3.4% C/O% and 1.3% FTE%]													
	1.3	[Bar chart showing 1.3% C/O% and 1.3% FTE%]													
Wakulla	0.3	[Bar chart showing 0.3% C/O% and 0.0% FTE%]													
	0.0	[Bar chart showing 0.0% C/O% and 0.0% FTE%]													
Walton	0.5	[Bar chart showing 0.5% C/O% and 1.3% FTE%]													
	1.3	[Bar chart showing 1.3% C/O% and 1.3% FTE%]													
Washington	0.4	[Bar chart showing 0.4% C/O% and 0.0% FTE%]													
	0.0	[Bar chart showing 0.0% C/O% and 0.0% FTE%]													

Summary of Closed Complaints

Stratification of
Complaints
Closed During
the 1998-99
Fiscal Year

During the current reporting period July 1, 1998, through June 30, 1999, 139 complaints were closed by our office. The chart below demonstrates how our office handled the complaints that we closed this fiscal year. For information on the subjects and dispositions of these complaints, see the following pages.

Department of Health Closed Complaint Disposition Identifiers Fiscal Year 1998-99



**Department of Health
Office of the Inspector General
Summary of Closed Complaints**

Fiscal Year 1998-99

Tracking Number	ID	Subject	Disposition	Location
97-004	IN	conflict of interest in contract management	substantiated	Dade
97-011	NF	misappropriation of funds and property related to inventory control	closed due to lack of timely complaint	Manatee
97-027	PI	federal funds misapplication	substantiated	Palm Beach
97-029	NF	theft of supplies	substantiated	Hillsborough
97-036	PI	stolen phone services	substantiated	Palm Beach
97-041	WB	mismanagement of Super Act clean up fund	substantiated	Escambia
97-045	PI	employment application fraud	substantiated	Polk
97-064	MR	missing applicant files	substantiated	Headquarters
97-066	PI	kickbacks in Radon program	unsubstantiated	Headquarters
97-067	MA	breach of HIV patient confidentiality	unsubstantiated	Collier
97-092	PI	harassment of customers of private site evaluator	resolved	Wakulla
97-096	PI	breach of confidentiality	unsubstantiated	Marion
97-105	MR	selling alcoholic beverage	combined with other complaints and management review completed	Okaloosa
97-114	PI	political support activities and use of alcohol in county health department	unsubstantiated	Sarasota
98-001	MA	hostile working environment and poor management	Equal Employment Opportunity office investigation found that the supervisor had retaliated against the complainant after complaint was filed with the inspector general	Orange-CMS
98-002	IN	misuse of research funds	unsubstantiated	Headquarters
98-003	PI	misuse of position and nepotism	substantiated	Pinellas
98-006	MA	unauthorized installation of software to remove internet audit trail	Division of Information Resource Management addressed the allegations and issued a report that substantiated allegations	Headquarters
98-007	MA	problems merging a Children's Medical Services clinic with the Panama Primary Care Program	management adequately addressed the allegations	Bay
98-008	MA	abuse of state time	management adequately addressed the allegations	Dade
98-010	MA	problems merging a Children's Medical Services clinic with the Panama Primary Care Program	management adequately addressed the allegations	Bay-CMS
98-011	RF	misuse of office for gaining additional monies	referred to the Department of Banking and Finance	Headquarters
98-013	MA	improper and unprofessional activities related to abuse of state time and equipment	unsubstantiated	Duval
98-014	MA	abuse of state time and vehicle	substantiated	Palm Beach

**Department of Health
Office of the Inspector General
Summary of Closed Complaints**

Fiscal Year 1998-99

(cont'd)

Tracking Number	ID	Subject	Disposition	Location
98-016	PI	conflict of interest Bureau of Radiation Control and Dupont	unsubstantiated	Headquarters
98-017	MA	discrimination	addressed by the department's personnel office	Headquarters
98-018	PI	false claims of health hazards	substantiated	Bay
98-020	NF	unbecoming behavior of state employee	closed due to insufficient evidence	Putnam
98-021	PI	favoritism and conflict of interest related to the Staufer Chemical Company	unsubstantiated	Pinellas
98-023	PI	employees had swapped modems for profits	unsubstantiated	Bay
98-024	MA	unqualified uncertified emergency medical technician	substantiated	Headquarters
98-025	MA	minority harassment	substantiated by Equal Employment Opportunity office investigation	Leon-CMS
98-026	PI	control of county health department by Halifax Hospital	closed due to insufficient allegations	Volusia
98-027	PI	conflict of interest related to the Staufer Chemical Company	unsubstantiated	Pinellas
98-028	PI	services cuts at county health department	issue addressed in prior investigation	Broward
98-036	MA	abuse of discretionary power to abolish positions	unsubstantiated	Broward
98-039	MA	mismanagement	addressed by department deputy secretary	Orange-CMS
98-040	MA	mismanagement, discrimination, and harassment	addressed by the Office of Performance Improvement. Externally administered employee climate survey was completed.	Dade
98-041	RF	timesheet abuse	referred to the Department of Children and Families	Palm Beach
98-042	MA	discrimination and demoralization	addressed by the department's personnel office	Dade
98-044	MA	audits of state telephone credit cards calls	recommendation that the department institute a tougher policy on personal telephone calls	Headquarters
98-045	MA	suggestion to share files	no action necessary	Alachua
98-046	MA	clinic non-billing	addressed by management	Hillsborough
98-048	RF	submission of grant application to the Bureau of Emergency Medical Services with false information	referred to the Office of the General Counsel as a regulatory issue	Collier-EMS
98-050	MA	falsification of timesheets	unsubstantiated	Palm Beach
98-051	IN	conflict of interest related to self-referral	unsubstantiated	Brevard
98-052	MA	shoddy septic tank installation and improprieties	investigation done locally and quality assurance action plan will be monitored	Dade
98-054	MA	sexual harassment	substantiated	Dade

**Department of Health
Office of the Inspector General
Summary of Closed Complaints**

Fiscal Year 1998-99

(cont'd)

Tracking Number	ID	Subject	Disposition	Location
98-055	PI	misuse of state vehicle	unsubstantiated	Broward
98-056	MA	waste of funds for purchasing and charges of fees to attend meeting	management adequately addressed allegations	Headquarters
98-057	MA	unnecessary overtime earned	unsubstantiated	Orange
98-058	NF	retaliation	closed personnel grievance	Orange
98-060	MA	misuse of electronic mail	resulted in policy to address personal use of electronic mail	Sarasota
98-071	MA	fake birth certificates and social security cards	substantiated	Hillsborough
98-073	NF	destruction of state documents and retaliation	complainant filed an administrative appeal with PERC that was settled with employees resignation	Headquarters
98-074	PI	employee use of bathroom facilities during gender reassignment	resolved	Headquarters
98-075	RF	complaint against non-department attending physician	referred to Agency for Health Care Administration for investigation	Orange
98-076	PI	receipt of gifts	closed due to insufficient evidence	Headquarters
98-077	MA	misuse of state supplies and postage	to management – no disputed facts	Headquarters
98-078	NF	vaccine accidentally splashed in visitor's eye	addressed by the Office of Performance Improvement	Seminole
98-079	NF	exposure to toxic substances in workplace	addressed by the superintendent of A.G. Holley Hospital	Palm Beach-AGHolley
98-080	NF	selling of birth certificates	closed due to insufficient evidence	Dade
98-082	RF	denial of medical records	referred to Agency for Health Care Administration	Orange
98-083	MA	medicines covered by Ryan White Title 1 were denied to individual	unsubstantiated	Broward
98-084	MA	drug use by state lab employee	unsubstantiated	Duval-State Lab
98-085	MA	poor management and discrimination	unsubstantiated	Broward-CMS
98-086	IN	misrepresentation of credentials	investigated and concluded no further action should be taken	Headquarters
98-088	MA	racial discrimination and medical neglect to minority communities	management addressed allegations in a letter sent to complainant	Orange
98-089	MA	inappropriate behavior of employees	substantiated	Palm Beach-AGHolley
98-090	IN	burning of computer back-up tapes	unsubstantiated	Manatee
98-091	MA	abuse of state time	unsubstantiated	Pinellas
98-092	NF	aggravated battery of employee	closed due to insufficient evidence	Leon
98-094	RF	Medicare fraud	referred to the Office of the Attorney General	Dade
98-095	RF	misrepresentation	referred to the inspector general at the Department of Management Services	Palm Beach-AGHolley

**Department of Health
Office of the Inspector General
Summary of Closed Complaints**

Fiscal Year 1998-99

(cont'd)

Tracking Number	ID	Subject	Disposition	Location
98-096	NF	disturbing phone call from veterinarian	closed due to insufficient evidence	Headquarters
98-097	NF	inappropriate use of state equipment	closed due to insufficient evidence	Headquarters
98-098	PI	illegal possession and distribution of prescription drugs	referred to Agency for Health Care Administration for follow-up	Seminole
98-099	NF	threat of court order to halt work force reduction	closed due to insufficient evidence	Monroe
98-100	PI	request for proposal not in the best interest of taxpayers	resolved	Hillsborough
98-102	NF	corruption and abuse of power	resulted in an external audit, which should resolve the substantiated issues	Orange
98-104	PI	complaint regarding assistant general council	unsubstantiated	Orange
98-105	PI	inappropriate legal activities	substantiated	Orange
98-106	PI	employee not paid	unsubstantiated	Headquarters
98-107	IN	kickback in Radon program	unsubstantiated	Headquarters
98-108	PI	retaliation management issues	handled through the grievance process	Lucie
98-110	NF	suggestion for the purchase of airline tickets	addressed by the Bureau of General Services	State-wide
98-111	MA	misuse of state equipment	resulted in draft policy to address use of state equipment	Headquarters
98-112	NF	waste of money for postage	closed due to insufficient complaint information	Duval- State Lab
98-113	PI	falsification of timesheets	unsubstantiated	Palm Beach- CMS
98-115	PI	denial to use donated sick leave by employee after returning to work	handled appropriately	Escambia
98-116	PI	denial for extension of time to install septic tank	resolved locally	Pasco
98-117	NF	request for assistance by Sexually Transmitted Disease program for breach of confidentiality allegation	Sexually Transmitted Disease program found the allegation unsubstantiated	Duval
98-118	PI	collusion between administrator and executive staff	result in an external audit and an employee climate survey	DeSoto
98-119	PI	denial of public records request	follow-up addressed by the Office of General Counsel	Dade
98-120	PI	working out of job class	closed due to insufficient evidence	Palm Beach
98-122	MA	unprofessional medical treatment	unsubstantiated	Volusia
98-125	MA	waste of money	unsubstantiated	Marion
98-126	NF	hiring of state employees	letter drafted to complainant explaining state procedures	Palm Beach- AGHolley
98-128	MA	non-performance of job duties	unsubstantiated	Lee
98-130	NF	employment of foreigners	did not warrant investigation	Headquarters
98-131	MA	waste of taxpayers' money	unsubstantiated	Headquarters

**Department of Health
Office of the Inspector General
Summary of Closed Complaints**

Fiscal Year 1998-99

(cont'd)

Tracking Number	ID	Subject	Disposition	Location
98-133	MA	inappropriate treatment of staff	steps already being taken to remedy the issues	St. Johns
98-134	IN	racial slurs	closed due to insufficient evidence	Headquarters
99-001	IN	falsification of timesheets	unsubstantiated	Lake
99-002	IN	nepotism	unsubstantiated	Orange
99-008	RF	undercover child abuse investigation	referred to the local county attorney's office - involved county employees	Brevard
99-011	MA	nurses refusing to read doctors' note	unsubstantiated	Broward-CMS
99-014	MA	sub-standard care in a medical foster home	unsubstantiated	Hillsborough
99-016	NF	retaliation	complainant referred to the Office of the Public Counsel.	Palm Beach
99-017	MA	abuse of state time	addressed by management	Lee
99-021	NF	personnel issues	investigated last year	Broward
99-022	MA	waste of taxpayers' money	unsubstantiated	Palm Beach
99-029	NF	use of county health department's American flag for personal functions	addressed by management	Okaloosa
99-030	RF	employee fired during probation period	referred to Equal Employment Opportunity office	Dade
99-031	NF	Inappropriate position upgrade	addressed by management	Broward
99-032	MA	program mismanagement	addressed by management	Bay-CMS
99-033	NF	input into management review	addressed by firm contracted to conduct the management review	Collier
99-035	MA	low morale and disability discrimination	already being addressed	Hillsborough
99-036	RF	forgery	referred to Agency for Health Care Administration	Polk
99-037	MA	mismanagement practices	management review done by private firm	Collier
99-038	RF	suspicious health center	referred to Agency for Health Care Administration	Broward
99-040	PI	embezzlement of Housing and Urban Development funds	substantiated	Orange
99-041	NF	inappropriate use of sexually transmitted disease medical record form	unsubstantiated	Broward
99-043	PI	inappropriate use of Internet	unsubstantiated	Headquarters
99-045	NF	discrepancies at Family Counseling Services of Greater Miami, Inc	substantiated	Dade
99-046	RF	selling of physician licensure exams	referred to Division of Medical Quality Assurance	Dade
99-047	NF	purchase of poor quality product	did not warrant an investigation	Leon
99-048	RF	operation of message facility without appropriate Florida license	referred to the Division of Medical Quality Assurance	Pinellas
99-049	MA	abuse of state time	referred to management	Martin
99-050	MA	abuse of state time	referred to management	Martin

**Department of Health
Office of the Inspector General
Summary of Closed Complaints**

Fiscal Year 1998-99

(cont'd)

Tracking Number	ID	Subject	Disposition	Location
99-051	RF	fraudulent training registration fee for nurse	complainant was referred to the Florida Department of Law Enforcement	Sarasota
99-052	MA	sharing of confidential information and hiring unqualified personnel	addressed by management	Palm Beach-AGHolley
99-053	RF	self-referral and anti-kickback	referred to Office of the Attorney General	Alachua
99-054	MA	harassment and hostile environment	addressed by management	Headquarters
99-055	PI	retaliation after reporting potential workplace violence	handled by personnel office	Headquarters
99-059	RF	disregard of employee's civil and due process rights	referred to the Office of General Counsel	Pinellas
99-061	RF	unlicensed practice of psychologists	referred to Agency for Health Care Administration	Dade
99-064	NF	request for information by Florida Department of Law Enforcement	addressed by handled by Florida Department of Law Enforcement	Palm Beach-AGHolley
99-065	NF	inappropriate appointment of grievance committee members	addressed by the local personnel office	Collier

Identifier Key

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