



Office of the Inspector General
Internal Audit

Report No. 15-08
May 2016

Background Screening Clearinghouse Program

EXECUTIVE SUMMARY

As part of the Agency for Health Care Administration (Agency) fiscal year 2014-15 audit plan, our office conducted an audit of the Background Screening Unit's (BGS) operations within the Division of Health Quality Assurance (HQA).

During our audit, we noted that, in general, applicable laws, rules, and established procedures were being followed. We also noted that the BGS unit: (1) timely notified employers of employees' rapback arrests, and (2) timely processed exemption applications. However, we also noted areas where improvement could be made to strengthen controls and improve efficiency. Our audit disclosed the following:

- The BGS unit has not established a quality assurance process to review analysts' eligibility determinations.
- The BGS unit does not effectively monitor analysts' turnaround time to review background screening results.
- Staff in some other state agencies experience delays in accessing the BGS Clearinghouse.
- The BGS Clearinghouse does not contain complete information for exemption cases, and the electronic case documents archived in Laserfiche were not always complete.
- The BGS Exemption section lacks adequate written guidelines.
- The BGS Exemption section, at the time of our review, did not review adult sealed criminal history records.
- The BGS unit has not finalized a process to identify employees that have been determined ineligible but are still listed as employed on the provider's roster.

The Findings and Recommendations section provides details of the results of our audit. Issues related to account access and user agreements will be addressed in our audit of the Single Sign-On system.

SCOPE, OBJECTIVES, AND METHODOLOGY

The scope of this audit was to look at internal processes as performed in calendar years 2014 and 2015. The objectives of this audit were to review the adequacy of program and system controls, and review the efficiency and effectiveness of the screening, exemption, and the provider notification process of an employee's subsequent arrest.

To accomplish our objectives, we reviewed applicable laws, rules, and regulations; interviewed appropriate Agency staff; reviewed policies and procedures and related documents; observed and documented operations; and evaluated controls. We also reviewed a sample of eligibility determinations, exemption applications, and rapback notifications to providers.

BACKGROUND

Florida law specifies that individuals who provide services to children, the elderly, and disabled individuals be screened for a criminal record as a condition of employment. Specific laws also identify the positions that must be screened and list the crimes that would prohibit employment of persons applying for these positions.¹ Florida criminal history records are maintained at the Florida Crime Information Center, which is operated by the Florida Department of Law Enforcement (FDLE). FDLE also has access to the National Crime Information Center maintained by the Federal Bureau of Investigation.

Section 435.12, Florida Statutes (F.S.), requires the Agency, in consultation with FDLE, to create a secure web-based system, which shall be known as the Care Provider Background Screening Clearinghouse (Clearinghouse). The purpose of the Clearinghouse is to provide a single data source for background screening results of persons required to be screened by law for employment in positions that provide services to children, the elderly, and disabled individuals. The Clearinghouse allows providers² and specified agencies to initiate background screenings, search for screening results, connect to specified agencies' screenings, select a Livescan service provider and connect to their website to schedule appointments, and create and maintain an employee roster. The Clearinghouse allows the background screening results to be shared among specified agencies³ when a person has applied to volunteer, be employed, be licensed, or enter into a contract that requires a state and national fingerprint-based criminal history check.

Chapter 435, F.S., outlines the basic requirements for employment background screening. The chapter provides for two levels of screening. Level 1 consists of an employment history check, Florida criminal history records check, and a check of the

¹ Sections 435.04 and 408.809, F.S.

² Section 408.803(11), F.S. defines a provider as "any activity, service, agency or facility regulated by the agency and listed in s. 408.802." We used the terms "provider" and "employer" interchangeably.

³ Includes the Agency for Health Care Administration, Department of Health, Division of Vocational Rehabilitation within the Department of Education, Department of Elder Affairs, Department of Juvenile Justice, Department of Children and Families, and Agency for Persons with Disabilities.

National Sex Offender Public Website. A level 2 screening consists of a fingerprint criminal background check for both state and national criminal history records.

Providers that employ positions requiring background screening must be authorized and granted access to the Clearinghouse website to view or initiate screenings of an applicant they wish to hire. Once access is granted, these providers can search the Clearinghouse to see if the applicant has screening results. If the individual is not found, the employer may initiate a screening by entering the applicant's required personal information into the system and directing the individual to a Livescan vendor for fingerprinting. Providers use Livescan vendors to capture fingerprints electronically and to transmit them to FDLE. The results are then transferred to the Agency's Clearinghouse for review⁴.

If the results do not show any criminal history information, the Clearinghouse will automatically process the screening and set the individual's determination to eligible. If the individual has a criminal history, the agency responsible for regulating the provider determines the individual's eligibility status under their regulating laws. The results are communicated to the provider through the system.

Section 435.06(2)(b), F.S., states, "If an employer becomes aware that an employee has been arrested for a disqualifying offense, the employer must remove the employee from contact with any vulnerable person that places the employee in a role that requires background screening until the arrest is resolved in a way that the employer determines that the employee is still eligible for employment under this chapter." In addition, Section 435.06(2)(c), F.S., states, "The employer must terminate the employment of any of its personnel found to be in noncompliance with the minimum standards of this chapter or place the employee in a position for which background screening is not required unless the employee is granted an exemption from disqualification pursuant to s. 435.07."

A rapback occurs when an individual who has undergone a fingerprint-based background check, and whose fingerprints are retained by the criminal history repository, is subsequently arrested. His or her fingerprints, obtained after the arrest, are matched against the repository that contains the fingerprints that were initially submitted. The arrest results are communicated through the Clearinghouse to the BGS unit. The BGS unit staff review the new criminal history and update the system to indicate if the new offense has made the employee ineligible. An e-mail is sent to the individual's employer notifying them of the arrest. Employers are told to access the Clearinghouse website to verify current eligibility status.

⁴ Section 408.809(3), F.S., specifies that all fingerprints must be provided in electronic format and screening results be reviewed by the Agency.

The BGS unit is also responsible for reviewing requests by individuals for exemptions from disqualifying offenses. Section 435.07, F.S., states that persons disqualified from employment in a health care setting may be granted an exemption from disqualification by the head of the appropriate agency if certain criteria are met.⁵ The granting of an exemption does not change an individual's criminal history. It only provides eligibility for employment in a health care setting. Licensed professionals must apply for an exemption through the Florida Department of Health (DOH).

The Agency's BGS unit is located within the Bureau of Central Services, HQA and consists of 16 full time positions and 11 OPS⁶ positions. The BGS unit is responsible for reviewing background screening results from FDLE for individuals employed by a provider regulated by the Agency.

⁵ A person is not eligible to apply for an Exemption from Disqualification until:

- He/she has been lawfully released from confinement, probation, or other sanction for a disqualifying misdemeanor criminal offense;
- At least 3 years after he/she has been lawfully released from confinement, probation, or other sanction for a disqualifying felony criminal offense.
- Persons designated as sexual predators, sexual offenders, or career offenders are not eligible for an Exemption from Disqualification.

⁶ Other Personal Services

FINDINGS AND RECOMMENDATIONS

Finding 1	
Finding Statement	The BGS unit has not established a quality assurance (QA) process to review analysts' eligibility determinations.
Criteria	<p>Before an individual can work for a provider, they must be determined eligible if they have contact with a vulnerable population as defined in Chapter 435, F.S.</p> <p>Agency analysts must review the background screening results of an individual with a criminal history. Section 435.04(2), F.S., states, "The security background investigations under this section must ensure that no persons subject to the provisions of this section have been arrested for and are awaiting final disposition of, have been found guilty of, regardless of adjudication, or entered a plea of nolo contendere or guilty to, or have been adjudicated delinquent and the record has not been sealed or expunged for, any offense prohibited under any of the following provisions of state law or similar law of another jurisdiction." The exact offenses are listed in statute.</p>
Condition	<p>The BGS unit has not developed a QA process to review eligibility determinations made by the analysts. BGS analysts review the background screening results to determine if any offense is on the list of disqualifying offenses as outlined in Florida law. However, the applicant's criminal history profile may also include crimes committed in other states. In these cases, the analyst determines if the crime would be a disqualifying offense according to Florida law. One analyst estimated that approximately 20% of their determinations involve interpreting other states' laws.</p> <p>A BGS supervisor does not routinely review analysts' eligibility determinations, including determinations for offenses committed in other states. As of August 31, 2015, nine BGS analysts had eligibility determination responsibilities; five of the analysts had been there one year or less, with an average length of time in BGS of 4.52 years. They also had varying education levels as well as areas of study. None of the analysts had a degree in criminal justice or law.</p> <p>Additionally, while Office of General Counsel (OGC) staff are consulted when analysts have a question, they do not routinely review an analyst's decision.</p>

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Cause	Management stated they currently lack the internal resources to systematically review the eligibility determinations made by their analysts. The BGS Senior Management Supervisor stated that she would like to implement a QA process and will request an enhancement to the system that would generate a sample of determinations for review.
Effect	The possibility of an inaccurate eligibility determination may increase without a quality assurance review. An erroneous determination of eligible could allow an unqualified individual to work with vulnerable persons for a provider. An erroneous determination of ineligible could result in loss of employment and income for a qualified individual.
Recommendation	We recommend BGS implement a QA process and develop a sampling program that includes reviewing high risk determinations, such as criminal offenses committed in other states, or the criminal history of an applicant with a large number of offenses.
Management Response	We concur with a need to implement a QA process for eligibility determinations. We will implement a process for management review of a sample of eligibility determinations. We will pursue system enhancements to include the QA process as part of the application and create a work item for management (and staff/peer reviews) including the identification of "high risk" scenarios that would automatically result in a management or peer review.
Anticipated Completion Date	July 1, 2017

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Finding 2	
Finding Statement	The BGS unit does not effectively monitor analysts' turnaround time to review background screening results.
Criteria	<p>It is important that the eligibility screening process be monitored to determine if an analyst's determinations are completed within a reasonable timeframe. If a determination is delayed, this could delay a potential employee's ability to work, as well as affect a provider's ability to adequately staff their business. This could reduce the quality of the provider's care. Providers need to make employment decisions quickly to adequately staff their facilities.</p> <p>The BGS unit has performance expectations for analysts that include acceptable timeframes to review and make eligibility determinations. The supervisor of the BGS Criminal History section is rated on the average number of days from the date the analyst receives a screening result until the date a determination is made. For example, the supervisor would receive a rating of "meets expectations" if the average turnaround time was 7 days or less.</p>
Condition	<p>As of November 2015, the BGS unit does not have an accurate method to determine the average number of days for turnaround time for its analysts. While the BGS unit can run reports that show the total number of days between receiving results from FDLE to the time that a determination is made, the reports do not account for the time it took the analyst to send a letter requesting additional information and the subsequent receipt of that information. Therefore, the turnaround time would not reflect the number of days within the control of the analyst.</p> <p>In summary, the data in its current format does not allow us or the BGS unit to determine an accurate average time period for determinations since it did not exclude the number of days between the date a letter is sent and the date the applicant's information is either received, or the determination is closed due to inadequate information. The BGS unit has requested that the Division of Information Technology (IT) develop this report.</p>
Cause	Management stated that information for the length of time for determinations is not currently available. Instead, a supervisor reviews an analyst's dashboard screen periodically to identify outstanding determinations. There is not an efficient way to determine an analyst's average turnaround time. A report is needed that accounts for time between the date the analyst sent

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	a letter and the date they received additional requested information.
Effect	<ul style="list-style-type: none"> • Management cannot determine if analysts are reviewing and making determinations timely. • Further, if determinations were not made in a timely manner, this would delay providers from making employment decisions. • Management cannot adequately evaluate staff since they do not have the necessary performance expectation information.
Recommendation	We recommend management continue to work with IT to develop appropriate reports to monitor the number of days to make eligibility determinations.
Management Response	The Unit is currently working with IT on developing a variety of reports using the Clearinghouse data including staff productivity measures. With limited resources, we have prioritized reports needed to ensure patient safety as the top priority. However, the Unit will continue to work towards completion of this reporting ability.
Anticipated Completion Date	January 1, 2017

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Finding 3	
Finding Statement	Staff in some other state agencies experienced delays in accessing the BGS Clearinghouse.
Criteria	<p>State agencies, such as DOH, rely on the BGS Clearinghouse to determine if an applicant for a professional license regulated by that agency should be approved.</p> <p>Section 120.60(1), F.S., states that an agency has 30 days after receipt of a license application to notify the applicant of any apparent errors or omissions and request additional information. If an agency is delayed in its review of screening results, this will delay the licensure of applicants.</p>
Condition	<p>The BGS supervisor stated that she receives the Network Access Forms (NAFs) for both Agency employees and other state agency staff requesting access to the Clearinghouse. She approves their access by signing the NAFs and sending them to IT. After IT gives them access, the BGS supervisor creates a profile if the employee is a BGS employee.</p> <p>In October 2015, DOH discussed with Internal Audit their issues accessing the Clearinghouse. DOH experiences, on average, an account creation time from 10-15 business days. DOH provided Internal Audit with a few examples of problems that have occurred when their staff tries to access the Clearinghouse. DOH Staff stated that approved accounts are often set up with invalid login information and users may be unable to sign in to the system. DOH staff must then contact BGS staff to seek resolution. This process may take several weeks. One case provided by DOH showed a 13-business day delay after DOH notified the Agency about access problems. Another case took 21 business days from the submission of the NAF to the BGS unit granting access.</p>
Cause	The BGS unit may not have sufficient staff to respond to inquiries from other state agencies. There is currently one part time position designated to coordinate the registration of staff in other state agencies and handle problems that may arise.
Effect	DOH licensing staff must review an application for licensure and send the applicant a letter identifying any deficiencies within 30 calendar days. When DOH licensing staff are unable to access the system, this increases the workload volume of other staff and delays processing of the applications.

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Recommendation	We recommend that the BGS unit implement processes to help ensure that state agencies receive timely access to the BGS Clearinghouse.
Management Response	The Bureau has shifted resources to help the Unit manage an increasing volume of work including issues related to other agency access. The Unit will pursue system changes of the application to streamline the process of onboarding staff of other agencies.
Anticipated Completion Date	January 1, 2017

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Finding 4	
Finding Statement	The BGS Clearinghouse does not contain complete information for exemption cases, and the electronic case documents archived in Laserfiche are not always complete.
Criteria	A complete case history should be contained in both the Clearinghouse system and in the electronic filing storage system - Laserfiche.
Condition	<p>We selected a sample of 17 of 172 exemption applications submitted in the month of September 2014, which showed a closed status. The Clearinghouse system information⁷ indicated four of the 17 cases had not received all criminal history documents from the applicant, but the cases were still finalized and the exemption granted. We were unable to determine that all requested documents had been received and scanned into Laserfiche.</p> <p>In addition, BGS staff stated that a teleconference worksheet should be completed for each teleconference held. Our review of the documentation for the 17 case files scanned into Laserfiche identified that two of six cases that involved teleconferences did not have a teleconference worksheet.</p>
Cause	<p>The BGS supervisor told us that staff might not always update the information in the system when new documents are received. Additionally, there are no written guidelines for how certain fields in the system should be completed. Although the BGS unit has a <i>Clearinghouse Screening Management System Procedure and Training Manual</i>, the manual focuses on how to navigate within the system rather than specific procedures for handling a case.</p> <p>In addition, there are no system edits that prevent a case from being closed when the system checklist shows not all required criminal history documents have been received.</p>
Effect	Lack of written guidelines and system edits result in the inconsistent treatment of cases and lack of adequate documentation.
Recommendation	1. We recommend the development of written guidelines and procedures outlining the documents and system fields that

⁷ The Clearinghouse system allows analysts to track exemption cases. Analysts enter information about the case that includes completing a system checklist identifying if all criminal history documents have been received, the date documents were received, as well as other information such as education and employment history.

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	<p>are required to be completed.</p> <p>2. We recommend a system edit be created to prevent the closure of a case unless all items in the system checklist have been checked as completed.</p>
Management Response	We concur with the recommendations, and will add them to future Clearinghouse application development.
Anticipated Completion Date	July 1, 2017

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Finding 5	
Finding Statement	The BGS Exemption section lacks adequate written guidelines.
Criteria	Written guidelines for exemption application processing should exist to provide guidance to analysts in processing cases consistently and to ensure critical supporting documentation is retained. Written procedures also serve as training materials for new staff.
Condition	<p>Staff stated that they use their judgment to determine if they should conduct a desk review or have a teleconference. Staff stated a desk review, a phone conversation between the analyst and the applicant, is performed if the analyst believes the applicant will be granted an exemption. A teleconference that includes several BGS staff, including the Exemption section supervisor, is held for cases that are more complex. There are no written guidelines that assist staff to decide between a desk review and a teleconference.</p> <p>In addition, the level of documentation entered into the system varies by staff member. For example, use of the comments section in the system may vary by staff member. While the Exemption section supervisor stated that analysts are trained to use the comments section to list specific items missing from the required documentation, they also stated that not all staff members use the comments section.</p> <p>There is also no written guidance to assist staff in determining whether an applicant meets the clear and convincing evidence requirement in the law.⁸</p>
Cause	<ul style="list-style-type: none"> • BGS staff told us they have the discretion on deciding whether to perform a desk review or hold a teleconference. • BGS management has not developed written guidelines for exemption processing.
Effect	Similar exemption cases may be processed differently depending on individual staff experience and training.
Recommendation	We recommend management consider establishing written guidelines for processing exemption applications.

⁸ Section 435.07(3)(a), F.S. states that in order for the head of an agency to grant an exemption to any employee, the employee must demonstrate by clear and convincing evidence that the employee should not be disqualified from employment.

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Management Response	To dictate a consistent process would require promulgation of a rule and remove the ability to consider a case by case approach, however, all cases are reviewed by management in both the Unit and the Secretary's office.
Anticipated Completion Date	Completed

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Finding 6	
Finding Statement	The BGS Exemption section, at the time of our review, did not review sealed criminal history records on adults.
Criteria	<p>According to Office of General Counsel (OGC) staff, section 408.809, F.S., authorizes, but does not require, the Agency to review non-juvenile sealed or expunged records in reviewing an applicant's criminal history.</p> <p>Section 943.059(4), F.S., provides that, although the criminal history record of a minor or an adult which is ordered sealed by a court is confidential and exempt from public record, the subject of the sealed criminal history must acknowledge the record when the subject of the record "[i]s seeking to be employed or licensed by or ... contract with the Department of Children and Families, the Division of Vocational Rehabilitation within the Department of Education, the Agency for Health Care Administration, the Agency for Persons with Disabilities, the Department of Health, the Department of Elderly Affairs, or the Department of Juvenile Justice or to be employed or used by such contractor or licensee in a sensitive position having direct contact with children, the disabled, or the elderly."</p>
Condition	<p>Although Exemption section staff members have access to an individual's sealed adult criminal history record through the Clearinghouse, they did not review it as part of the exemption application process. Excluding these sealed records may result in persons who have committed disqualifying offenses being determined eligible by BGS staff.</p> <p>In our sample of 5 out of 15 exemption applications for May and June 2015 that were determined as not disqualified, we identified one applicant with a sealed record for an offense that may have been disqualifying. In accordance with HQA policy at the time, the analyst did not review the sealed criminal history record in determining whether the applicant was disqualified or not.</p> <p>In a memorandum dated September 16, 2015, to the Inspector General's Office, OGC staff determined that "pursuant to Section 408.809, AHCA can review such records when determining background screening eligibility for every person it screens, unless such sealed or expunged records are juvenile delinquency records, which are specifically exempt under the statute."</p>

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	Beginning in December 2015, the BGS unit now reviews sealed adult criminal history records.
Cause	HQA's policy was to not review an applicant's sealed adult criminal history record in determining eligibility.
Effect	Excluding review of the sealed criminal history for offenses committed as an adult allows an otherwise disqualified individual to be employed by a provider that serves vulnerable populations.
Recommendation	We recommend that the BGS unit continue to review sealed adult criminal history records in determining eligibility.
Management Response	The BGS unit is currently following the recommendation.
Anticipated Completion Date	Completed

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Finding 7	
Finding Statement	The BGS unit has not finalized a process to identify employees that have been determined ineligible, but are still listed as employed on the provider's roster.
Criteria	<p>Section 435.06(2)(b), F.S., states that "If an employer becomes aware that an employee has been arrested for a disqualifying offense, the employer must remove the employee from contact with any vulnerable person that places the employee in a role that requires background screening until the arrest is resolved in a way that the employer determines that the employee is still eligible for employment under this chapter." The law states that any person with a BGS Clearinghouse screening be added/edited by the provider on their employee roster within 10 business days of an eligibility/employment change.⁹</p> <p>A provider that operates with an ineligible employee is subject to punitive action. Since it is a violation of the background screening requirements to employ an ineligible individual, the Agency can fine the provider, revoke a license, or deny a license application based on the violation. Different statutes authorize the penalties, depending on the type of provider. The general provision contained in section 408.813, F.S., allows fines to be imposed against all licensed providers of the Agency that violate background screening requirements.</p> <p>In addition to notifying the employer of an employee's ineligibility, it is also important that the appropriate regulatory unit within the Agency be notified. For example, if an owner of an Assisted Living Facility is arrested for a disqualifying crime, the appropriate licensing bureau should be notified. The bureau should monitor the provider's ownership and employee information to ensure the individual is removed from direct contact with any vulnerable person until a final disposition.</p> <p>If the employee's arrest is favorably resolved¹⁰ later, the employee is responsible for submitting the court disposition documents to the Agency and their employer. If sufficient supporting documentation is provided, their eligibility status will be changed to "Eligible" if it has been less than 90 days</p>

⁹ Section 435.12(2)(c), F.S.

¹⁰ Charges were subsequently dropped or individual was adjudicated not guilty.

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	<p>since they had a break in service from the position that required the screening. Otherwise, the individual must be rescreened.</p>
Condition	<p>We randomly selected 20 rapback cases from the months of September, October, November, and December 2014. Of the 13 employees on the roster at the time of arrest, nine of these employees were still listed as employed on the providers' rosters at the time of our review through February 2, 2015. An employment end date had not been entered after their arrest. The number of days between the date the provider was notified to the date of our review showing they were still listed on the providers' rosters ranged from 48 to 128 days. Of the nine providers, three were sent rapback notifications on the same day, five were sent notifications within one day, and one was sent notification in 3 days.</p> <p>We could not determine if the reasons the employer had not entered an end date for the employee was: 1) they were still employed in their current position; 2) they were still employed by the provider but had been removed from any direct contact with the vulnerable population into another position; or 3) the provider had terminated them but failed to enter an end date.</p>
Cause	<p>In the past, BGS staff did not monitor employers that did not take appropriate action to address employees with rapbacks. They did have a process to identify providers with owners, persons with a controlling interest, or others listed in the Agency licensing system (VERSA). These providers could not renew their licenses until appropriate action was taken by the owner, operators, etc. In August 2015, the BGS unit initiated a process to monitor employers' rosters to determine if there are employees listed on the roster as active (no employment end date entered) compared to persons in the Clearinghouse that have current Agency screenings of ineligible. The BGS unit notifies the employer through a letter that they may not be in compliance if they have not either terminated or removed the employee from direct contact with the vulnerable population. They are also in the process of developing a sanctioning process to fine facilities not in compliance.</p>

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Effect	<p>A provider that operates with an ineligible employee is subject to regulatory action. Since it is a violation of the background screening requirements to employ an ineligible individual in certain positions, the Agency can fine a provider, revoke a license, or deny a license application based on the violation. Different statutes authorize penalties, depending on the type of provider. The general provision contained in section 408.813, F.S., allows fines to be imposed against all licensed providers of the Agency that violate background screening requirements.</p> <p>If the Agency does not take action against violators, disqualified individuals may continue to work with vulnerable populations.</p>
Recommendation	<ol style="list-style-type: none"> 1. We recommend that the BGS unit finalize their process to monitor employer's actions after notification of an employee's rapback. 2. We also recommend that HQA finalize their enforcement process to fine violators.
Management Response	<p>The recommendation is currently being followed. The process is:</p> <ol style="list-style-type: none"> 1. Facility is notified when a potential employee eligibility status changed. 2. Staff runs a report to identify ineligible employees on an employee roster. 3. Facility is contacted by certified mail, and instructed to correct the employee issue. 4. If the issue is not corrected it is elevated to licensure unit for corrective action (including a fine). 5. If it is still not correct, field staff is sent out to investigate and depending on the field investigations findings may result in an action against the license.
Anticipated Completion Date	Completed

ADDITIONAL COMMENTS

Internal Audit also wants to recognize the BGS unit's success in other process areas. Audit testing revealed that the BGS unit generally:

(1) Timely notified employers of employees' rapback arrests.

A "rapback" occurs when an individual who has undergone a fingerprint-based background check, and whose fingerprints are retained by the criminal history repository, is subsequently arrested. The arrest results are communicated through the Clearinghouse to the BGS unit staff who sends an email to the individual's employer notifying them of the arrest. The BGS unit reviews the new criminal history and updates the system to indicate if the new offense has made the employee ineligible. Employers are told to access the Clearinghouse website to verify current eligibility status of their employees.

Our review of this process indicates that notifications to employers are sent promptly. We selected a sample of 20 rapback notifications that occurred in the months of September, October, November, and December of 2014. Of the 20, 13 employees were on an employee roster at the time of arrest indicating they were employed; notifications were sent to these employers within 0-3 days.

(2) Timely processed exemption applications.

The BGS unit has a performance expectation to conduct an initial review of exemption applications within 10 days. The BGS unit reviews the applications to determine if they are complete, or if they are incomplete and need more information.

Our review showed that the analysts reviewed most applications in our sample within 10 days. Our sample of 17 (10%) of 172 applications showed 16 were determined to have been reviewed within the 10 day period.

FINAL COMMENTS AND PROJECT TEAM

FINAL COMMENTS

The Office of the Inspector General, Internal Audit would like to thank the Division of Health Quality Assurance management and staff for their assistance and cooperation extended to us during this engagement.

PROJECT TEAM

The audit was conducted by Kathryn Voigt, CFE, and Joann Hartmann, under the supervision of Mary Beth Sheffield, Audit Director, CPA, CIA, CFE, CIG.

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**The Agency for Health Care Administration's mission is
Better Health Care for All Floridians.**

**The Inspector General's Office conducts audits and reviews of Agency programs to assist
the Secretary and other agency management and staff in fulfilling this mission.**

This audit was conducted pursuant to Section 20.055, Florida Statutes, and in accordance with the *International Standards for the Professional Practice of Internal Auditing* as established by the Institute of Internal Auditors. Please address inquiries regarding this report to the Audit Director at (850) 412-3978.

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