



RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 6, 2018

Mr. Justin M. Senior, Secretary
Agency for Health Care Administration
2727 Mahan Drive
Tallahassee, Florida 32308

Dear Secretary Senior:

In accordance with Internal Auditing Standards, attached is the twenty-four month status update from the Division of Health Quality Assurance, Bureau of Central Services in response to our report #15-08 *Background Screening Clearinghouse Program* published on June 6, 2016.

Management has reported that five out of the nine recommendations are still outstanding. A detailed description of all issues, recommendations, and management's responses can be found in the attached table. Management has also indicated that they are progressing towards correcting all remaining open issues and four are near completion. This is our final status report.

If you have any questions regarding this status report, please let me know.

Sincerely,

per Mary Beth Sheffield
Inspector General

MBS/jh

Attachment

cc: Sherrill F. Norman, Auditor General
Toby Philpot, Chief of Staff
Mallory McManus, Communications Director
Molly McKinstry, Deputy Secretary for Health Quality Assurance
Ryan Fitch, Bureau Chief of Central Services





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JUSTIN M. SENIOR
SECRETARY

MEMORANDUM

TO: Justin M. Senior, Secretary
FROM: Mary Beth Sheffield, Inspector General *MBS*
DATE: May 31, 2018
SUBJECT: Delegation of Authority; June 4-8, 2018

I will be out of the office from Monday, June 4 through Friday, June 8, 2018

During my absence, Pilar Zaki will serve as Acting Inspector General. She will possess my signature authority and will address any issues or matters in my absence. Pilar can be reached at 412-3986.

I will be available by iPhone and email should a situation arise where direct contact is needed.

Thank you.

mbs/mh

Cc: Agency Management Team
AHCA AMT Assistants
Pilar Zaki, Audit Director
Brian Langston, Chief of Investigation
Lisa Rodriguez, HIPAA Privacy Officer
Eric Miller, Chief Inspector General
Heather Robinson, Investigations Manager, CIG



Agency for Health Care Administration
 Office of Inspector General – Internal Audit
 Report Title: Background Screening Clearinghouse Program
 Report #: 15-08, issued June 6, 2016
 Final Follow-up Status as of June 6, 2018

No.	Finding(s)	Recommendation(s)	Previous Management Response(s)	Status Update, Anticipated Completion Date and Contact
1	BGS unit has not established a quality assurance (QA) process to review analysts' eligibility determinations	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.	<p><u>Status as of December 8, 2017</u> No change in status</p> <p><i>Anticipated Completion Date: July 1, 2018. Taylor Haddock</i></p> <p><u>Status as of June 16, 2017</u> The enhancement to the system for a QA process was implemented 5/16/17. The enhancement provides a mechanism for screenings to be routed to supervisors for review before a final determination is made.</p> <p>We are currently reviewing the best process for both an accurate number of screenings to be subject to a QA for SMART (Specific, Measurable, Attainable, Realistic and Timely) measure purposes to correlate with the least amount of delay in turnaround time for determinations.</p> <p><i>Anticipated Completion Date: July 1, 2018. Taylor Haddock</i></p> <p><u>Status as of December 20, 2016</u> Requirements have been written for the first step in a QA process.</p> <p><i>Anticipated Completion Date: March 2017. Taylor Haddock</i></p>	<p>Currently we are performing a manual, random quality assurance check to confirm the correct eligibility determination was made.</p> <p><i>Anticipated Completion Date: July 31, 2018.</i> Samantha Heyn</p>

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			<p><u>Status as of June 6, 2016</u> 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.</p> <p><i>Anticipated Completion Date: July 1, 2017</i> Taylor Haddock</p>	
2	The BGS unit does not effectively monitor analysts’ turnaround time to review background screening results.	We recommend management continue to work with IT to develop appropriate reports to monitor the number of days to make eligibility determinations.	<p><u>Status as of December 8, 2017</u> No change in status</p> <p><i>Anticipated Completion Date: July 31, 2019.</i> Taylor Haddock</p> <p><u>Status as of June 16, 2017</u> We have implemented two SMART (measure reports for staff (one for criminal history review and one for exemption review). These reports measure the initial action by staff when receiving either a criminal history or exemption to review. Reports have been put into a Tableau Dashboard for management to monitor on a monthly basis.</p>	No change in status <i>Anticipated Completion Date: July 31, 2019.</i> Taylor Haddock

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			<p>The SMART measure report for criminal history review only counts the time from assignment to initial decision (which includes a decision that additional information is required.) Our ultimate goal is to have the additional information requested uploaded directly to the system. This would not only streamline the process but would also give us system dates to refine the SMART measures.</p> <p><i>Anticipated Completion Date: July 31, 2019.</i> <i>Taylor Haddock</i></p> <p><u>Status as of December 20, 2016</u> The BGS Unit currently has a working report to monitor the initial review turnaround time of a screening by analysts.</p> <p>Currently on the list of future enhancements is the ability to upload additional documentation received from individuals who have been screened. When that enhancement is developed the Unit will also create a system and business process to capture the time from when the additional documentation is received to when the analyst updates the eligibility results.</p> <p><i>Anticipated Completion Date: January 2018.</i> <i>Taylor Haddock</i></p>	

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			<p><u>Status as of June 6, 2016</u> 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.</p> <p><i>Anticipated Completion Date: January 1, 2017.</i> <i>Taylor Haddock</i></p>	
3	<p>Staff in some other state agencies experienced delays in accessing the BGS Clearinghouse.</p>	<p>We recommend that the BGS unit implement processes to help ensure that state agencies receive timely access to the BGS Clearinghouse.</p>	<p><u>Status as of December 8, 2017</u> Research is ongoing for the best front-end redesign system. Development is estimated to begin in early Spring.</p> <p><i>Anticipated Completion Date: July 1, 2018.</i> <i>Taylor Haddock</i></p> <p><u>Status as of June 16, 2017</u> The Agency was provided an LBR for the front end redesign that is required to change access and will be state agency staffed for implementation by July 1, 2018.</p> <p><i>Anticipated Completion Date: July 1, 2018.</i> <i>Taylor Haddock</i></p>	<p>Development of the front-end redesign began in March. Testing has started with the other agencies and the redesign is expected to be implemented in Production by July 1, 2018.</p> <p><i>Anticipated Completion Date: July 1, 2018.</i> <i>Taylor Haddock</i></p>

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			<p><u>Status as of December 20, 2016</u> An LBR has been submitted for the reengineering of the way other agency users receive and maintain access to the Clearinghouse.</p> <p><i>Anticipated Completion Date: July 1, 2018.</i> Taylor Haddock</p> <p><u>Status as of June 6, 2016</u> 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.</p> <p><i>Anticipated Completion Date: January 1, 2017.</i> Taylor Haddock</p>	
4	The BGS Clearinghouse does not contain complete information for exemption cases, and the electronic case documents archived in Laserfiche are not always complete.	1. We recommend the development of written guidelines and procedures outlining the documents and system fields that are required to be completed.	<p><u>Status as of December 8, 2017</u> The draft of procedure is complete. However, after review of the draft it has been determined that it requires additional changes/detail in order to meet the recommendation of this finding. Final draft will be complete by December 31, 2017</p> <p><i>Anticipated Completion Date: December 31, 2017.</i> Taylor Haddock</p>	<p>We are currently testing the procedure we created before finalizing a written procedure.</p> <p><i>Anticipated Completion Date: July 31, 2018.</i> Samantha Heyn</p>

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			<p><u>Status as of June 16, 2017</u> Staff is actively working on creating guidelines and procedures for both system usage and the scanning of exemptions from disqualification.</p> <p><i>Anticipated Completion Date: July 1, 2017.</i> Taylor Haddock</p> <p><u>Status as of December 20, 2016</u> Staff is actively working on creating guidelines and procedures for both system usage and the scanning of exemptions from disqualification.</p> <p><i>Anticipated Completion Date: July 1, 2017.</i> Taylor Haddock</p> <p><u>Status as of June 6, 2016</u> We concur with the recommendations, and will add them to future Clearinghouse application development.</p> <p><i>Anticipated Completion Date: July 1, 2017</i> Taylor Haddock</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>	<p><u>Status as of December 8, 2017</u> No change in status.</p> <p><i>Anticipated Completion Date: July 1, 2018</i> Taylor Haddock</p>	<p>Ticket has been assigned for development/correction.</p> <p><i>Anticipated Completion Date: July 1, 2018</i> Taylor Haddock</p>

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			<p><u>Status as of June 16, 2017</u> A ticket to add the recommended system edit has been created and will be included in future development.</p> <p><i>Anticipated Completion Date: July 1, 2018</i> Taylor Haddock</p> <p><u>Status as of December 20, 2016</u> A ticket to add the recommended system edit has been created and will be included in future development.</p> <p><i>Anticipated Completion Date: July 1, 2017</i> Taylor Haddock</p> <p><u>Status as of June 6, 2016</u> We concur with the recommendations, and will add them to future Clearinghouse application development.</p> <p><i>Anticipated Completion Date: July 1, 2017</i> Taylor Haddock</p>	
5	The BGS Exemption section lacks adequate written guidelines.	We recommend management consider establishing written guidelines for processing exemption applications.	<p><u>Status as of June 6, 2016</u> 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.</p>	Completed

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6	The BGS Exemption section, at the time of our review, did not review sealed criminal history records on adults.	We recommend that the BGS unit continue to review sealed adult criminal history records in determining eligibility.	<u>Status as of June 6, 2016</u> The BGS unit is currently following the recommendation.	Completed
7	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.	<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 rapbacks. 2. We also recommend that HQA finalize their enforcement process to fine violators. 	<u>Status as of June 6, 2016</u> The recommendation is currently being followed. The process is: <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. 	Completed