



RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
INTERIM SECRETARY

December 20, 2016

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

Dear Interim Secretary Senior:

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

Management has indicated that they have completed three of the recommendations, with the remaining four still in progress. A detailed description of all issues, recommendations, and management's responses can be found in the attached table. We will schedule another follow-up review in six-months to assess the status of the efforts taken by the Division of Health Quality Assurance to correct all open issues.

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

Sincerely,

Eric W. Miller
Inspector General

EWM/jh

Attachment

cc: Melinda M. Miguel, Chief Inspector General
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
Taylor Haddock, Unit Manager, Background Screening Unit



Agency for Health Care Administration
Office of Inspector General – Internal Audit
Report Title: Background Screening Clearinghouse Program
Report #: 15-08, issued June 6, 2016
Six-Month Follow-up Status as of December 20, 2016

No.	Finding(s)	Recommendation(s)	Previous Management Response(s)	Status Update and Anticipated Completion Date
1	<p>The BGS unit has not established a quality assurance (QA) process to review analysts' eligibility determinations.</p>	<p>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>	<p>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>Anticipated Completion: July 1, 2017</p>	<p>Requirements have been written for the first step in a QA process.</p> <p>Anticipated Completion: March 2017</p>
2	<p>The BGS unit does not effectively monitor analysts' turnaround time to review background screening results.</p>	<p>We recommend management continue to work with IT to develop appropriate reports to monitor the number of days to make eligibility determinations.</p>	<p>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>Anticipated Completion: January 1, 2017</p>	<p>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>Anticipated Completion: Full implementation anticipated by January 2018.</p>

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3	Staff in some other state agencies experienced delays in accessing the BGS Clearinghouse.	We recommend that the BGS unit implement processes to help ensure that state agencies receive timely access to the BGS Clearinghouse.	<p>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>Anticipated Completion: January 1, 2017</p>	<p>An LBR has been submitted for the reengineering of the way other agency users receive and maintain access to the Clearinghouse.</p> <p>Anticipated completion: July 1, 2018</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.	<p>1. We recommend the development of written guidelines and procedures outlining the documents and system fields that 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>	<p>We concur with the recommendations, and will add them to future Clearinghouse application development.</p> <p>Anticipated Completion: July 1, 2017</p>	<p>Staff is actively working on creating guidelines and procedures for both system usage and the scanning of exemptions from disqualification.</p> <p>Anticipated completion: July 1, 2017</p> <p>A ticket to add the recommend system edit has been created and will be included in future development.</p> <p>Anticipated completion: July 1, 2017</p>
5	The BGS Exemption section lacks adequate written guidelines.	We recommend management consider establishing written guidelines for processing exemption applications.	<p>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> <p>Completed – Management has accepted the risk.</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.	The BGS unit is currently following the recommendation. Completed	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.	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.	The recommendation is currently being followed. The process is: 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	Completed