



Florida Department of
Law Enforcement

J. Mark Glass
Commissioner

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Memorandum

JLAC Received
6-20-23

To: J. Mark Glass, Commissioner
Office of Executive Director

From: *for* Lourdes Howell-Thomas, Inspector General *guc*
Office of Inspector General

Date: June 20, 2023

Re: Six-month Follow-Up of the Auditor General Operational Audit
OIG Project No. FP-2223-03

Pursuant to Section 20.055(6)(h), Florida Statutes, the Office of Inspector General is required to report to you regarding the status of the Department's response to recommendations by the Auditor General six-months after issuance of the audit report.

In December 2022, the Auditor General issued their Operational Audit of the Office of Executive Investigations, Selected Administrative Activities, and Prior Audit Follow-Up (Report No. 2023-075). This report contained eight findings with recommendations for corrective action. This memorandum provides the original findings and recommendations, the Department's initial response, and summarizes additional actions taken by management over the intervening six months.

Attachment

LHT/tc

cc: Scott McInerney, Director, Office of Executive Investigations
Joey Hornsby, Director, Information Technology Services
Sharon Wester, Director, Business Support
Mike Phillips, Special Agent in Charge, Office of Statewide Investigative Services
Joint Legislative Auditing Committee

OFFICE OF EXECUTIVE INVESTIGATIONS

Finding 1: Contrary to State law, the Department had assigned certain statutory complaint handling and investigation responsibilities to the Office of Executive Investigations Customer Service Unit and Professional Standards Unit, rather than the Office of Inspector General.

Recommendation: We recommend that Department management ensure that Department complaint handling and investigation processes are structured in accordance with State law.

FDLE Response: Agree. FDLE is evaluating various options to ensure that the complaint handling and investigation processes are structured in accordance with State law.

Six-Month Status: In progress.

Finding 2: The Department's system for tracking customer complaints and the resolution of those complaints needs improvement.

Recommendation: We recommend that Department management enhance the Department's system and procedures for tracking customer complaints and the resolution of those complaints to ensure that all complaints are appropriately documented and accounted for in Department records. Such enhancement should include using a unique identifier to track the receipt, referral, and resolution of each complaint.

FDLE Response: Agree. An evaluation of current practices and procedures is underway to address the complaint receipt, tracking and resolution process. FDLE's current Customer Service Unit documents all complaints that are received involving FDLE members or services. Many of the complaints forwarded by the FDLE OIG are administrative requests for information and currently do not require documentation. Discussion of creating a unique identifier to track the receipt, referral and resolution of all communications or complaints received at FDLE is currently part of the on-going evaluation process.

Six-Month Status: In progress.

Finding 3: Department records did not always adequately evidence that Professional Standards Unit reviews and internal investigations were conducted in accordance with Department policies, Professional Standards Unit procedures, professional standards, and State law.

Recommendation: We recommend that Professional Standards Unit management take steps to ensure that Department records evidence that member reviews and internal investigations are conducted in accordance with Department policies, Professional Standards Unit procedures, professional standards, and State law.

FDLE Response: Agree. The Professional Standards Unit (PSU) is developing a check list to ensure all required notifications and status reports have been completed and added to the appropriate case file. In the illustrated cases most notifications occurred; however, were not documented as evidence of compliance. The PSU is developing and modifying reports / documents to include acknowledgement or receipt of case summaries and other required notifications where possible.

Six-Month Status: Completed.

INFORMATION TECHNOLOGY CONTROLS

Finding 4: As similarly noted in our report No. 2020-062, the Department did not always timely remove Automated Investigative Management System (AIMS) user access privileges upon an employee's separation from Department employment.

Recommendation: We recommend that Department management continue to enhance controls to ensure that AIMS user access privileges are promptly removed upon an employee's separation from Department employment.

FDLE Response: Agree. Based on the information we provided, 15 late in activations were due to notices not being timely received from HR. The Systems Administration Unit (SAU) procedure of one business day was followed in 70+% of cases. Between the FDLE procedure requiring network access to be removed within 2 business days and the SAU procedure of 1 business day, only 9 individuals (<10%) *could* have had access to both the AIM system and the network outside of current procedures and that would have only been for 1 day.

Given the Rule 60GG, the SAU will revise our internal procedure to remove access just prior to the Application Access Administrator (AAA) leaving on the day of separation or upon notification from HR, whichever is later. A backup will be put in place should the AAA not be available to deactivate the user. It should be noted that AIMS does not have the capability of setting an account to automatically deactivate on a certain day or time. Due to this, we rely on the network security policy to promptly remove the member's network access, which prevents the individual from accessing AIMS regardless of account status.

Six-Month Status: Completed.

Finding 5: Department information technology (IT) access privilege controls for the Internal Affairs and Professional Standards application (IAPro) need enhancement to better prevent and detect inappropriate access.

Recommendation: We recommend that Department management enhance Professional Standards Unit procedures to provide for periodic documented reviews of IAPro user access privileges and ensure that IAPro user access privileges are promptly removed upon a user's separation from Department employment or when access privileges are no longer required.

FDLE Response: Agree. The evaluation of IAPro user privileges was an on-going process and was under the control of the IAPro administrators. Adding a semiannually requirement to audit access to the application will be placed on the IAPro administrators via enhanced procedure.

Six-Month Status: In progress.

Finding 6: Certain security controls related to IAPro user authentication need improvement to ensure the confidentiality, integrity, and availability of Department data and IT resources.

Recommendation: We recommend that Department management improve certain security controls related to IAPro user authentication to ensure the confidentiality, integrity, and availability of Department data and related IT resources.

FDLE Response: Agree. Changes addressing specific recommendations in the confidential finding have already been made or are being researched.

Six-Month Status: In progress.

ADMINISTRATIVE ACTIVITIES

Finding 7: The Department did not always timely post contract information to the Florida Accountability Contract Tracking System in accordance with State law.

Recommendation: We recommend that Department management enhance controls to ensure the timely posting of contract information to FACTS in accordance with State law.

FDLE Response: Agree. The Florida Department of Law Enforcement considers the timely availability of all agency agreements in FACTS to be of utmost importance. In doing so, this provides end users with a level of confidence that full and public disclosure is being met for those who require such research needs and capabilities. This statutory requirement has been incorporated in the OGS' internal Desk Functions, and each affected staff member has been given notice of the importance moving forward. As an added quality control measure, the General Services Purchasing Manager will perform timely reviews of executed agreements in FACTS to ensure adherence to this requirement.

Six-Month Status: Completed.

Finding 8: Department recordkeeping related to the destruction of surplus computer hard drives needs improvement.

Recommendation: We recommend that Department management ensure that Department records appropriately account for and evidence the destruction of all surplus computer hard drives.

FDLE Response: Agree. ITS has addressed the deficiency, as documented in the finding. As of May 2022, Department procedures were updated to require hard drive serial numbers be recorded in the Destruction Logs. This will permit the Department to reconcile the hard drives listed for destruction with the hard drives actually destroyed.

Six-Month Status: Completed.