

#### State of Florida Department of Children and Families

Ron DeSantis
Governor

Shevaun L. Harris Secretary

June 10, 2021

Sherrill F. Norman, Auditor General State of Florida Auditor General G74 Claude Pepper Building 111 West Madison Street Tallahassee, Florida 32399-1450

#### Dear Sherrill Norman:

In accordance with Section 20.55(6)(h), Florida Statutes, enclosed is our six-month corrective action status report on Auditor General Report No. 2021-082, *Selected Administrative Activities and Child Care Provider Regulation Prior Audit Follow-Up*, issued December 18, 2020.

The Office of Information Technology Services provided an update to finding #1 and indicated that corrective action to this finding has been fully implemented. The Office of Child Welfare provided updates to findings #2 and #3 and indicated that corrective actions to these findings have been fully implemented.

If I may be of further assistance, please let me know.

Sincerely,

Shevaun L. Harris Secretary

**Enclosure** 

CC:

Keith R. Parks, Inspector General
Andrew Taylor, Acting Chief Information Officer
Tony Lloyd, Assistant Secretary for Administration
Matt Howard, General Services Director
Bonny Allen, Information Security Manager
Patricia Medlock, Assistant Secretary for Child Welfare
Hue Reynolds, Director of Child Care Regulation
Kathy Dubose, Staff Director, Joint Legislative Auditing Committee
Lisa Norman, Audit Manager, Florida Auditor General's Office

2415 North Monroe Street, Suite 400, Tallahassee, Florida 32303-4190

# OIG – Internal Audit Section Six-Month Corrective Action Status Report Department of Children and Families - Selected Administrative Activities and Child Care Provider Regulation Prior Audit Follow-Up Auditor General Report No. 2021-082, Issued December 18, 2020

Findings	Recommendation	Agency Response	Corrective Action Status
Finding 1:  Despite policy prohibitions on text and instant messaging using Department mobile devices, 1,450 Department cellular telephones were used to send or receive 62,498 text messages during the period January 2020 through March 2020, according to monthly billing statements for Department Headquarters. Additionally, the Department had not disabled iMessaging on Department Apple devices and Department	Recommendation  We recommend that Department management enhance mobile device controls to enforce policy prohibitions on text messaging and iMessaging on Department mobile devices. We also recommend that, should text messages and iMessages be sent or received by Department mobile devices, management ensure that such messages are retained in accordance with State law.	The Department concurs with Finding #1 and will review current policy and actual practices associated with text messaging and iMessaging on DCF smartphones and determine whether the Department has need to take advantage of these functions for business purposes going forward. Based on the results of this analysis and final determination, the Department will document a position on the use of text messaging and iMessaging on DCF smartphones and update policies and practices accordingly by December 31, 2020. The Department will also identify the administration and operational enforcement measures and electronic record retention solutions necessary to support Department policy changes, then establish a schedule for implementation by January 22, 2021.	Fully Implemented  On March 1, the Department published its revised electronic text messaging policy, which now permits electronic text messaging. The Department installed SMARSH (text messaging retention) software on Department-owned and leased cellular devices.  The Department started sending notifications to DCF staff via Department e-mail ten days before implementing the revised electronic text messaging policy and procedures.  Texting messaging and iMessaging cellular functions are permitted for official business use.  All text messages are retained in compliance with State public record

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Finding 2:			
As similarly noted in our report No. 2019-101, Department controls for ensuring the timely conduct of child care provider reinspection's to determine whether violations had been corrected need improvement.	We recommend that Department management continue efforts to ensure that child care provider reinspections are timely and effectively conducted. Such efforts should include periodic monitoring of the timeliness and effectiveness of the reinspections conducted by the regions and documentation to evidence the actions taken to address any noted deficiencies.	The Department concurs with the finding and will continue to conduct quarterly monitoring within each Region which includes a review of reinspection completion dates. Additionally, supervisors and program analysts will coordinate timely review of tasks associated with reinspections on a weekly basis to ensure staff are keeping up with due dates and completing re-inspections in accordance with the 10-day policy. Documented review of the follow up will be placed within the monitoring tool.	Fully Implemented  The Department continues to address this issue during quarterly monitoring fo each Region. During the last quarter, some reinspections may have been impacted by COVID-19 as many providers were non-operational which caused a delay in when licensing counselors were able to conduct reinspections.  The Department re-started reporting on the noncompliance over 10 days for the 3 <sup>rd</sup> quarter (Jan-Mar). During this reporting period, the numbers have drastically improved in all regions.  Program analysts continue to coordinate on a weekly basis with supervisors to support counselors in meeting the 10-day requirement.

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Finding 3:			
Department records did not always evidence that family day care homes satisfied child immunization records requirements. A similar finding was noted in our report No. 2019-101.	We recommend that Department management strengthen controls to ensure that Checklists are retained in Department records evidencing that family day care home immunization records are current.	The Department concurs with the finding and will conduct training for staff responsible for processing registered homes to ensure all staff utilize the Registered Home Checklist document consistently. The supervisor will continue to monitor each registration packet prior to approval. If the supervisor is unavailable, the file will be reviewed by the manager to complete the checklist. A copy of the completed checklist will be scanned to the provider's electronic file as the cover page for each registration year.	Fully Implemented  Staff members responsible for processing registered homes were actively involved in the development and implementation of the checklist, which was counted as their training on the new process.  The Department updated the checklist to include a field for immunization record/exemption and a date shredded field.  All registered home packets require a completed checklist. The review of the
			packet is conducted by the supervisor (or manager) to verify completion before the registration is approved.
			The completed checklist is the cover page of the packet that is maintained in the registration file.