1. **Purpose.** This operating procedure establishes regional procedures and guidelines for identifying and reporting information related to client risk prevention and incidents as defined in Section 4.

2. **Scope.**
   a. This operating procedure applies to incident reporting and client risk prevention in all Department programs and client service providers contracted with the Department in the SunCoast Region.
   
   b. It is the responsibility of all Departmental personnel, and licensed and contracted providers to report all critical incidents in a timely manner and in accordance with the requirements of this operating procedure. Failure to comply with these procedures constitutes a lack of compliance with licensure status or contract provisions.
   
   c. This operating procedure outlines the requirements for reporting incidents to the Department of Children and Families, SunCoast Region, and is applicable to both DCF staff and those agencies contracted with the Department of Children and Families, including Community-Based Care (CBC) agencies and the Managing Entity (ME) for substance abuse and/or mental health services. It is the responsibility of those agencies to develop and document their own processes, as required in 7.b. of this operating procedure, and the processes by which they will receive reports from their subcontracted agencies. Depending on individual needs, CBC agencies and the ME may require that their own subcontracted agencies meet more stringent reporting requirements than those prescribed in this operating procedure.
   
   d. Regardless of their status as an event in client risk prevention, allegations of abuse, neglect, or exploitation must always be reported immediately to the Florida Abuse Hotline and appropriate local advocacy committees as required by law. In addition, this operating procedure does not replace:
      
      (1) The investigation and review requirements provided for in CFOP 175-17, Child Death Review Procedures.
      
      (2) The reporting requirements provided for in CFOP 175-85, Prevention, Reporting, and Services to Missing Children.
      

3. **Incident Reporting and Analysis System (IRAS).** IRAS is the Department’s web-based incident reporting system and allows for the timely notification of critical incidents, provision of details of the incident and immediate actions taken, and the ability to track and analyze incident-related details. IRAS is not a case management system and cannot be utilized to capture ongoing and specific case management information, such as the progression of events and action.
   
   a. IRAS uses the DCF Web Systems Portal to provide secure access to the system. Security within the IRAS is role-based, meaning that different user roles will have access to certain system functionalities depending on the user’s level of responsibility. User roles include:
      
      (1) Viewer: Read-only access to incident details. Can also receive notifications.
      
      (2) Initiator: Can add an incident and update incident details.
(3) Incident Coordinator: Same access as initiators. In addition, coordinators can send updated incident reports to upper management and can change the status of an event.

(4) Criminal Justice Coordinator: Read-only access to incident details. Can also receive notifications.

(5) Death Review Coordinator: Same access as initiators. In addition, coordinators can send updated incident reports to upper management and can change the status of an event.

(6) Child Fatality Prevention Specialist: Same access as initiators. In addition, coordinators can send updated incident reports to upper management and can change the status of an event.

(7) Communications Designee: Read-only access to incident details. Can also receive notifications.

(8) Leadership: Can perform all functions within IRAS except add incidents, send notifications, and add/edit user profiles.

b. Access to IRAS can be requested by completing an Access Authorization Request (AAR) through the SunCoast Region Information Technology office. Access to other Departmental systems, including Lotus Notes, is not required to access IRAS.

4. Critical Incidents to be Reported.

a. Child-on-Child Sexual Abuse. Any sexual behavior between children which occurs without consent, without equality, or as a result of coercion. This applies only to children receiving services from the Department or by a licensed contract provider, i.e. children in foster care placements, residential treatment, etc.

b. Child Arrest. The arrest of a child in the custody of the Department, or in a Statewide Inpatient Psychiatric Placement (SIPP) or therapeutic group home.

c. Client Death. An individual whose life terminates while receiving services, during an investigation, or when it is known that a client died within thirty (30) days of discharge from a residential program or treatment facility. See Section 6.c. for procedures related to child deaths. When reporting a client death in the IRAS, the manner of death will be one of the following:

(1) Accident. A death due to the unintended actions of one’s self or another.

(2) Homicide. A death due to the deliberate actions of another.

(3) Natural Expected. A death that occurs as a result of, or from complications of a diagnosed illness for which the prognosis is terminal.

(4) Natural Unexpected. A sudden death that was not anticipated and is attributed to an underlying disease either known or unknown prior to the death.

(5) Suicide. The intentional and voluntary taking of one’s own life.

(6) Undetermined. The manner of death has not yet been determined.

(7) Unknown. The manner of death was not identified or made known.

d. Elopement.

(1) The unauthorized absence beyond four hours of an adult during involuntary civil placement within a Department-contracted or licensed service program.

(2) The unauthorized absence of a forensic client on conditional release in the community.

(3) The unauthorized absence of any individual in a Department-contracted or licensed residential substance abuse and/or mental health program.
e. **Employee Arrest.** The arrest of an employee of the Department or its contracted or licensed service provider for a civil or criminal offense. Concerns of employee criminal activity shall be reviewed for a referral to the Office of the Inspector General for further investigation. Special attention should be paid to arrests made for a potentially disqualifying offenses, or arrests which occurred while in the performance of an employee’s official duties.

f. **Employee Misconduct.** Work-related conduct or activity of an employee of the Department or its contracted or licensed service provider that results in potential liability for the Department; death or harm to a client; or results in a violation of statute, rule, regulation, or policy. This includes, but is not limited to, misuse of position or state property; falsification of records; failure to report suspected abuse or neglect; contract mismanagement; or improper commitment or expenditure of state funds.

g. **Escape.** The unauthorized absence of a client who is committed by the court to a State mental health treatment facility pursuant to Chapter 916 or Chapter 394, Part V, Florida Statutes.

h. **Missing Child.** When the whereabouts of a child in the custody of the Department are unknown and attempts to locate the child have been unsuccessful. Refer to CFOP 175-85, Prevention, Reporting, and Services to Missing Children, for specific instructions regarding missing children in the dependency system.

i. **Security Incident – Unintentional.** An unintentional action or event that results in compromised data confidentiality, a danger to the physical safety of personnel, property, or technology resources; misuse of state property or technology resources; and/or denial of use of property or technology resources. This excludes instances of compromised client information.

j. **Significant Injury to Clients.** Any severe bodily trauma received by a client in a treatment/service program that requires immediate medical or surgical evaluation or treatment in a hospital emergency department to address and prevent permanent damage or loss of life.

k. **Significant Injury to Staff.** Any serious bodily trauma received by a staff member as a result of work-related activity that requires immediate medical or surgical evaluation or treatment in a hospital emergency department to prevent permanent damage or loss of life.

l. **Suicide Attempt.** A potentially lethal act which reflects an attempt by an individual to cause his or her own death as determined by a licensed mental health professional or other licensed healthcare professional. Note that these incidents should only be reported if the attempt happened while the client was in the physical custody of the Department or a Department-contracted service provider, or was receiving child welfare, substance abuse, or mental health services at the time of the incident.

m. **Sexual Abuse/Sexual Battery.** An allegation of unsolicited or non-consensual sexual activity by one client to another client or a client to an employee, or any sexual activity between an employee and a client regardless of the consent of the client. For the purposes of this operating procedure, a client is defined as a dependent child in out-of-home care or receiving services in the home, or an adult residing in residential program or treatment facility for the provision of mental health and/or substance abuse services, or an adult receiving outpatient substance abuse and/or mental health services from a provider funded or licensed by the Department or a Managing Entity.

n. **Other Incidents.** The following incident types are not included in IRAS and cannot be specifically designated using the Department’s incident reporting system. However, the SunCoast Region has determined that these incidents are important to our overall risk management processes and/or may be indicative of issues needing to be addressed. These incidents should be reported in IRAS using the incident type of “Other”.
(1) **Bomb or Biological/Chemical Threat.** Any threat of harm to property or persons involving a biological/chemical agent or explosive device (received in person, in writing, by telephone, electronically or otherwise).

(2) **Media Coverage.** Media coverage or threat of public reaction that may have an impact on the Department’s ability to protect and serve its clients, or other significant effect on the Department or its contracted services providers.
   
i. Incidents with media coverage or potential media coverage require the appropriate entry on the IRAS “Media Involvement” field.

5. **General Procedures for Department Staff.**
   
a. In responding to an incident, an employee’s first obligation is to ensure the health, safety, and welfare of all individuals involved.
   
b. When a staff member has discovered that one of the above incidents has occurred, his/her first obligation is to ensure the safety and health of the individuals involved. Once the situation is stabilized, but no later than one hour from discovery of the event, it must be reported to the employee’s immediate supervisor. If the immediate supervisor is not available, the employee should move up the chain of command until a supervisor or manager has been notified, even if this means going outside the normal lines of supervision.
   
c. The employee should provide the supervisor with as much specific information as possible, ensuring that the information includes: What happened? Who was involved? When did it happen? Where did it happen? Why did it happen? How did it happen? What has been done about the incident? Who has been notified?
   
d. Child deaths that fall within the scope of CFOP 175-17, Child Death Review Procedures, shall be reported according to the requirements of Part 10.b.(1) and (2) of that procedure. This requires immediate notification through the chain of command to the Regional Director, for:
   
   (1) any child death that involves allegations of abuse or neglect, or
   
   (2) any child death discovered during the course of an investigation, or
   
   (3) any child who was receiving protection services at the time of death.
   
e. **Supervisor.**
   
   (1) The notified supervisor or designee shall ascertain what has occurred, verify the known facts with the reporting employee, and ensure that appropriate steps are/were taken to minimize immediate risk.
   
   (2) The supervisor or designee shall ensure that timely notification is/has been made to the appropriate individuals and agencies, including but not limited to the Florida Abuse Hotline, Law Enforcement, or any other department or agency either within or outside of the Department.
   
   (3) No later than two hours from notification of the incident, the supervisor shall notify the next level in his or her chain of command: Operations Program Administrator (OPA), Operations Manager (OM), or Regional Program Administrator (PA). This notification shall take place by telephone or face-to-face. (At the discretion of the OPA, OM, or PA, written instructions may be issued to staff they supervise advising of specific types of incidents that may be communicated via voice mail message or electronic report rather than direct telephone or face-to-face communication.)
   
   (4) Within 24 hours, or by the close of the next business day, the supervisor or designee shall submit an electronic incident report utilizing the Department’s Incident Reporting and Analysis System (IRAS). The incident report will be automatically forwarded to all incident coordinators within the specific circuit and program.
f. **Operations Program Administrator or other next level supervisor.**

(1) In instances in which initial notification of an incident is made upon notification of a reportable incident, the notified administrator or designee shall ensure that an incident report is completed and submitted utilizing IRAS within 24 hours or by the close of the next business day.

(2) The administrator or designee shall ensure that appropriate corrective action is/was taken to minimize both immediate and future risk. If a plan for corrective action is necessary, the administrator or designee shall oversee plan development and implementation.

(3) The administrator or designee shall ensure that timely notification is/has been made to the appropriate individuals and agencies, including but not limited to the Florida Abuse Hotline, Law Enforcement, Regional General Services, or any other department or agency either within or outside of the Department.

(4) It is the responsibility of the OPA or other next level supervisor to determine if the incident needs to be reported to the Regional Director, Deputy Regional Director, or any other staff within the region or the Department. In such cases, notification should be made in IRAS within timeframes commensurate to the criticality of the event. General guidelines for timeframes can be found in 7c(2)i below.

i. In the event the incident may have an immediate impact on the safety of the individual(s); generate media coverage; involve employee arrest, official misconduct, negligence or criminal activity as defined in sections 4 and 5 above, or those incidents the Secretary needs to know in order to brief elected, appointed, or stakeholder group leaders, or which may have Department-wide impact, the administrator shall provide immediate telephone or face-to-face notification to the Operations Manager or Regional Director who shall inform, as appropriate, the Deputy Regional Director, Director of Communications, Director of Human Resources, and/or Regional Legal Counsel.

(5) Employee related incidents of criminal activity or other types of serious wrongdoing (described in Appendix C) must be submitted to the Office of the Inspector General utilizing the “Notification to Inspector General / Investigation Report” form available on EForms. It is the responsibility of the administrator to ensure that the information required in the IG notification form and appropriate backup documentation are provided to the Regional Director (through either the Operations Manager or the Program Administrator) for submission to the OSIG within two days of discovery. (See 5.f.(3) below)

(6) It is the responsibility of the administrator or a suitable designee to track incident trends within his/her units or service center to ensure timely problem identification and implementation of appropriate risk preventative measures.

g. **Regional Director or Designee.**

(1) The Regional Director or designee shall inform the secretary, deputy secretary or assistant secretary for operations of the following incidents:

i. Client deaths as defined in this operating procedure;

ii. Allegations of employee negligence or abuse which result in client death or serious wrongdoing;

iii. Employee arrest;

iv. Other reportable incidents which are likely to have an adverse impact on the Department or generate statewide media coverage.
(2) These incidents should be reported as soon as possible, but no later than the first business day following discovery of the event. Information will, at a minimum, detail “who, what, when, and where.” Depending upon the criticality of the event, the Regional Director may provide initial notification by telephone and follow up with a written or electronic incident report or, alternatively, provide a written/electronic incident report only.

(3) Employee related incidents of criminal activity or other types of serious wrongdoing (described in Appendix C) must be submitted by the Regional Director to the Office of the Inspector General utilizing the “Notification to Inspector General / Investigation Report” form available on EForms. These incidents shall be reported within two days of discovery by staff in the region, unless a different time frame is specified. (It is the responsibility of the operations program administrator or other next level supervisor (see 6.e.) to ensure that the information required in the IG notification form and appropriate backup documentation are provided to the Regional Director (through the Operations Manager, Deputy Regional Director or Regional Program Director) for submission to the OSIG.) The notification form should be accompanied by other relevant backup documentation (e.g., police report). IG notification should not be held up in order to obtain accompanying documentation. In order to meet the specified notification time frame, it may be necessary to submit additional documents subsequent to submission of the initial notification form.

h. Performance and Planning.

(1) An incident reporting coordinator will be appointed within the Performance and Planning unit and will coordinate incident reporting activities within the region. This individual will:

(a) Receive notification of all reports entered throughout the region through IRAS,

(b) When necessary, provide additional or secondary notification of incidents to regional management or other relevant groups,

(c) When requested, provide data reports that can be used for identifying trends or the need for improvement initiatives, and

(d) Serve as the liaison for central office for issues related to the Incident Reporting and Analysis System (IRAS)

6. General Procedures for Contracted Services Providers.

a. Authority. Per provider agreement in the standard services contract, “Client Risk Prevention and Incident Reporting,” reportable situations listed in CFOP 215-6 shall be reported to the Department.

b. Internal Provider Procedures. The provider shall establish procedures for reporting, managing, following up and preventing significant incidents. Prior to contract execution, the procedures shall be submitted to the Department’s contract manager for review and approval. At a minimum, they shall include provisions for ensuring that:

(1) The provider is in compliance with any specific incident notification procedures cited in the Program Specific Model Attachment I of the Department contract executed with the provider.

(2) Calls are made to the appropriate medical, emergency or law enforcement personnel in the event of critical health or safety incidents; and that knowledge or reasonable suspicion of abuse, neglect, or exploitation of a child, aged person, or disabled adult is reported to the Florida Abuse Hotline on the statewide toll-free number (1-800-96-ABUSE).

(3) Child deaths that fall within the scope of CFOP 175-17, Child Death Review Procedures, are reported according to the requirements of Part 10(b)(1) and (2) of that procedure. This requires immediate oral notification followed by written notification within one working day for:
i. any child death that involves allegations of abuse or neglect, or

ii. any child death discovered during the course of an investigation, or

iii. any child who was receiving protection services at the time of death.

(4) A documented process is in place for regular quality assurance review of incidents, including trend analysis and, as necessary, corrective action to minimize or prevent future risk to clients.

(5) A documented process is in place for recording incidents and providing internal agency notification of reportable incidents as defined in Part 3 of this operating procedure.

(6) In responding to any incident, the primary responsibility of staff will be to ensure the health, safety, and welfare of all individuals involved.

c. Requirements for Notification and Reporting to the Department. Note that these requirements only pertain to Department staff and both Community-Based Care (CBC) agencies and the Managing Entity (ME) for Substance Abuse and Mental Health services. CBC agencies and the ME, whose subcontract agencies may not have access to IRAS, may develop internal forms or electronic processes by which initial and/or follow-up notification must occur. However, both the CBC agencies and the ME will be required to use IRAS when reporting to the Department, and should follow the timeframes outlined in this operating procedure. Additionally, for the incidents requiring immediate notification (identified below), notification to the Department should be made by the CBC/ME and not by a subcontract agency.

(1) Immediate Notification. Contract providers and their subcontracted agencies shall have a documented process in place for providing immediate incident notification to the Department in accordance with the following (child deaths are addressed separately in 6.b.(3) above):

i. the Department shall receive notification immediately, or within timeframes commensurate with the criticality of events (generally, no later than four hours from discovery), of the following reportable incidents, as defined in this operating procedure:

   (a) Client death, in cases in which the death meets the definition of 4.c., and when the death meets the following criteria:

      (i) due to or allegedly due to an accident, act of abuse, neglect or other incident occurring while in the presence of an employee, in a DCF operated or contracted facility or service center, or while in the physical or legal custody of the Department; or

      (ii) when the client is currently receiving services from the Department or a DCF-funded or contracted service provider, or a provider funded by a managing entity. Note that the requirement for immediate notification does not include natural deaths for individuals receiving mental health or substance abuse services unless the death meets the requirements of (a)(i) above; or

      (iii) when a death review is required pursuant to CFOP 175-17, Child Death Review Procedures. All child deaths should be considered a critical incident requiring immediate notification to the Department.

   (b) Child-on-Child Sexual Abuse

   (c) Sexual Abuse / Sexual Battery

   (d) Any event which is expected to generate media coverage or public reaction such that the Department may be asked to respond or provide comment. Note that this does not include “human interest” stories or other stories of general appeal that are not expected to result in media coverage beyond that of the initial story.
ii. During evening hours or weekends, the requirement for immediate Department notification may be extended to 9:00 a.m. the following work day at the discretion of Department or agency management, based upon an evaluation of the need for immediate intervention by Department management.

iii. First notification shall take place by telephone or e-mail, followed by entry into IRAS, which must be completed within 24 hours (or sooner, if requested) of the initial verbal report and shall include as much specific information as is known at the time; follow up and/or corrective action information shall be transmitted as appropriate.

iv. Immediate telephone or e-mail notification shall be made to:

   (a) the Department program office liaison as specified in the Program Specific Model Attachment I (or applicable amendment) of the Department contract and copied in Appendix A of this operating procedure; and

   (b) the Operations Manager or Regional Director, if the event requires the immediate intervention of Department management or is expected to generate media coverage or public reaction.

v. ME/CBC staff must require that their subcontract agencies report the incidents identified in 6.c.(1)(i) to the appropriate Incident Coordinator or other staff designated by the ME/CBC within such time that would allow the Department to be notified within the timeframes prescribed above.

(2) General Timeframes. Any incidents that do not meet the requirements for immediate notification as provided in section 6.c.(1) above shall be reported through entry into IRAS within 24 hours of being notified of the incident, or by the close of the next business day. The appropriate Incident Coordinator(s) will be automatically notified upon entry into IRAS and can take whatever additional action may be required. These reports will not require a phone call or e-mail to Department staff.

i. For those subcontract agencies that use IRAS, entry into that system will automatically notify both the ME/CBC and the Department, as both ME/CBC and Department staff are included as Incident Coordinators and are notified of all applicable incidents. With the exception of those incidents requiring immediate notification (see 6.c.(1) above), it is not required that the ME/CBC provide additional notification to the Department of those incidents entered into IRAS by their subcontract agencies.

(3) Follow-Up. The appropriate Incident Coordinator, as determined in IRAS by the program and circuit in which the incident occurred, will be notified of incidents through IRAS. It is the responsibility of the Incident Coordinator to review such incidents to ensure that sufficient information has been included in the report. Additionally, the Incident Coordinator will be responsible for forwarding the report to appropriate Department leadership, when necessary, using IRAS.

(4) Reporting. The provider shall have a documented process in place for providing monthly reports to the Department in accordance with the following:

i. The Department may request from its CBC agencies and/or Managing Entity an “Incident Summary Report” similar to that shown in Appendix C of this operating procedure. This report is intended to provide aggregate data summarizing all incidents which have been reported (internally and to the Department) and/or followed up during the previous month. The frequency and due date for such a report will be determined individually between the Department and the provider.

(a) Department-contracted agencies may require similar reporting of incident summaries of their subcontract agencies. In order to meet Department timeframes, the Managing
Entity (ME) or CBC agency may require that their subcontract agencies provide this summary to them prior to the Department's due date.

ii. Copies of all provider incident reports shall be available to Department personnel, or to staff for the contracting CBC/ME, for review during regularly scheduled on-site monitoring visits.

SUMMARY OF REVISED, ADDED, OR DELETED MATERIAL
This procedure was updated to reflect changes related to the implementation of the Incident Reporting and Analysis System (IRAS) and changes or CFOP 215-6. This procedure also combined the prior requirements found in 215-2 and 215-3 into a single procedure covering both Department and contract staff. This procedure now identifies those specific incidents found in IRAS, and includes those incidents not in IRAS but still determined to be needing a report as “Other” incidents. The incidents that require immediate notification have been changed to include only a client death, child-on-child sexual abuse, sexual battery, and media coverage. This procedure also defines the specific roles found in IRAS, and provides Community-Based Care agencies and the Managing Entity the authority to require more stringent reporting requirements than those required by the region.

BY DIRECTION OF THE REGIONAL DIRECTOR:

(Signed original copy on file)

Michael P. Carroll
Regional Director
SunCoast Region

Regional Operating Procedure 215-4
Incident Reporting and Client Risk Prevention

PROGRAM OFFICE CONTACTS

**Adult Services:**
- Judy Amison    Primary contact  (813) 558-5588

**Family Safety:**
- Kim Williams    Primary contact  (813) 558-5629
- Beth Pasek    Back-up contact  (813) 558-5603

**ACCESS Florida:**
- Jacob Serrano    Primary contact  (813) 558-5689
- Ben Shirley    Back-up contact  (813) 558-5954

**Substance Abuse and Mental Health:**
- Tony Collera (Central Florida Behavioral Health Network)  (813) 740-4811
- Jeff Watts    (813) 558-5706
- Robin Ragan (Children’s Mental Health)    (813) 558-5712
- Bob Holm (Substance Abuse)     (813) 558-5745

DEATH REVIEW COORDINATORS

**Child Deaths:**
- Lisa Rivera    Primary coordinator  (813) 558-5614
- Kathy Newcomb    Back-up contact  (813) 558-5615

**Adult Deaths:**
- Judy Amison    Primary coordinator  (813) 558-5588
INCIDENT REPORTING SUMMARY SHEET
SunCoast Region

<table>
<thead>
<tr>
<th>Type of Incident</th>
<th>Number of Incidents during Reporting Period</th>
<th>Cumulative Fiscal Year-to-Date</th>
<th>Comments</th>
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</thead>
<tbody>
<tr>
<td>Child-on-Child Sexual Abuse*</td>
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<tr>
<td>Child Arrest</td>
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<td>Client Death*</td>
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<td>Elopement</td>
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<td>Escape</td>
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<tr>
<td>Media Coverage*</td>
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<td>Missing Child†</td>
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<td>Security Incident – Unintentional</td>
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<td>Significant Injury to Clients</td>
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<td>Significant Injury to Staff</td>
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<td>Suicide Attempt</td>
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<td>Sexual Abuse / Sexual Battery*</td>
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<tr>
<td>Other Incident (specific details must be provided below or on additional sheet)</td>
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</tbody>
</table>

* Incidents that require immediate Department notification
† See CFOP 175-85 for specific requirements for missing children

Summary of risk prevention activities (use additional sheet if necessary):

See ROP 215-3 for incident reporting procedures
Column B should include the previous month’s total of incidents
Column C includes cumulative fiscal-year-to-date (from July 1)
REPORTING TO THE OFFICE OF THE INSPECTOR GENERAL

Per CFOP 180-4 (dated October 29, 2007), the incidents listed below may warrant a full investigation by the Office of the Inspector General (OSIG). As such, they shall be reported to the IG by the Regional Director or designee. This shall occur no later than two days of discovery by staff in the region, unless a different timeframe is specified. Notification may be made by completing a Notification/Investigation Request (form CF 1934 (electronic version in EForms)) and emailing the request to the Office of Inspector General. A request for investigation can also be made by mailing the completed form to the Office of Inspector General, 1317 Winewood Boulevard, Building 5, 2nd Floor, Tallahassee, Florida, 32399-0700; or via fax at (850) 488-1428. The report should be accompanied by other relevant backup documentation (e.g., police report). Accompanying documents may need to be submitted subsequent to the initial report in order to meet the specified notification time frame.

1. Employee negligence that results in client injury, abuse, neglect or death immediately upon verification by the district or program office;

2. Fraud;

3. Theft;

4. Breaches of confidential information by an employee, unless inadvertent and self-reported (e.g., revealing a reporter’s name, providing confidential documents to unauthorized persons, access of client files for non-business reasons, providing information from client files such as medical or benefits information, etc) immediately upon confirmation by the district;

5. Falsification of official records (e.g., intentional alteration of state documents, misrepresentation of information during an official proceeding, intentional falsification of client case records, case notes, client contact reports, visitation reports, or client home visits, creating false and fictitious files, etc.);

6. Misuse of position or state property, employees, equipment or supplies for personal gain or profit (e.g., soliciting on state time and state property, conspiracy to conceal missing state property, misuse of the Internet to conduct personal business as defined by policy, etc.);

7. Failure to report known or suspected neglect or abuse of a client;

8. Improper expenditure or commitment of public funds;

9. Computer related misconduct (e.g., accessing FLORIDA, Florida Safe Families Network (FSFN) system files of clients when there is no direct business involvement with the client, accessing inappropriate or pornographic web sites, sending threatening or harassing messages, misuse of email, etc.);

10. Miscellaneous (e.g., retaliation, unauthorized weapon on state property, criminal arrest of employee, etc.);

11. Any violation under §435, F.S., Title XXXI, Employee Screening, that would result in disqualification from client contact duties (e.g., convicted of murder, manslaughter, assault and battery, kidnapping, false imprisonment, sexual battery, theft, robbery, child abuse, abuse and neglect of an elderly or disabled adult, sale of a controlled substance, resisting arrest, contributing to delinquency of a minor, or other disqualifying offense); or,

12. Any other wrongdoing that would be a violation of statute, rule, regulation or policy, excluding job performance and related deficiencies.