PAR20-02



Internal Audit

City of West Palm Beach Internal Auditor's Office

Beverly Mahaso Esq., CIA, CFE Chief Internal Auditor February 6, 2020



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Audit Committee City of West Palm Beach 401 Clematis Street West Palm Beach, Florida

RE: POST AUDIT REVIEW OF FIRE RESCUE'S CONTROLLED SUBSTANCES, MEDICAL RECORDS, AND EQUIPMENT REPORT NO. AUD18-02

Dear Audit Committee Members:

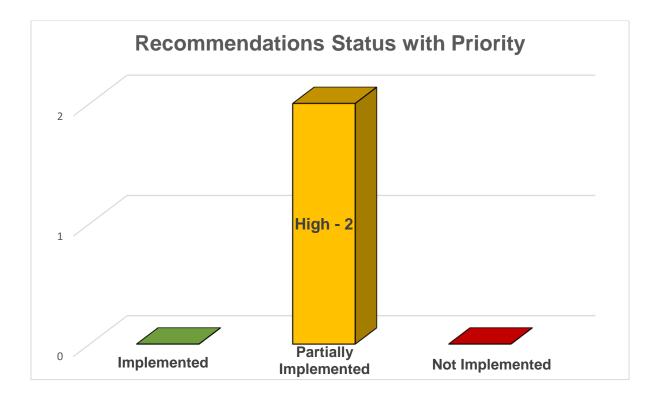
In FY2018, the Internal Auditor's Office released an audit of Fire Rescue's Controlled Substances, Medical Records, and Equipment. We performed certain procedures, as enumerated below, with respect to activities of the Fire Department in order to render a conclusion on the status of the recommendations made as a result of that review.

This Post Audit Review (PAR) consisted primarily of inquiries of City personnel and examinations of various supporting documentation. It was substantially less in scope than an audit in accordance with generally accepted government auditing standards.

The evidence obtained provided a reasonable basis for our conclusions; however, had an audit been performed, other matters might have come to our attention that would have been reported to you and our conclusions may have been modified.

The audit contained two (2) recommendations that addressed the audit's findings. Based on the review performed, we concluded that both recommendations were partially implemented.

We have enclosed a table listing all the recommendations with the current statuses. We found that management made significant efforts to take corrective action. Further, we note that the Fire Department is actively continuing to make improvements. As such, additional steps may have been taken to implement the recommendations after the conclusion of this Post Audit Review. We will conduct another Post Audit Review in approximately 6 to 12 months, resources permitting, at which time we will review all additional changes made after the conclusion of this Post Audit Review.



We thank the personnel at the Fire Department for their assistance in conducting this review and on continuing implementation efforts.

Respectfully Submitted,

s/ Beverly Mahaso Chief Internal Auditor

CC:

Christina Lambert, Commission President Kelly Shoaf, Commissioner Cory Neering, Commissioner Richard Ryles, Commissioner Joseph Peduzzi, Commissioner Keith James, Mayor Faye Johnson, City Administrator Diana Matty, Fire Chief



AUDIT RECOMMENDATIONS

| No. | Auditor's Condition and | Management's Response | Management's Status Update |
|----------|---------------------------------------|----------------------------------|---------------------------------------|
| | Recommendation | management o Response | management 5 otatas opuate |
| 1 | Condition: | Paper based inventory system - | Management Update |
| High | The EMS Division is responsible | Management agrees with the | January 2020 |
| Priority | for the purchase, storage, | implementation of an | |
| | administration, and disposal | electronic inventory system. The | Partially Implemented |
| | of all controlled substances utilized | EMS Division spent the past | |
| | by the West Palm Beach Fire | year working on the | The Fire Department is currently |
| | Rescue Department. Both | cumbersome transition to the | looking into a software for an |
| | suppression and rescue apparatus | paperless EMS report system, | electronic inventory system. |
| | carry controlled substances, as | SafetyPAD. We will begin | Additional research is being |
| | well as other lifesaving | research of an electronic system | performed to determine if current |
| | medications. We reviewed the | as soon as the new budget year | software can be configured to provide |
| | controls in place over the inventory | begins on October 1, | a more electronic process for orders, |
| | life-cycle process and noted that | 2018. We agree that it would | distribution, and inventory |
| | the entire system remains paper- | improve tracking controls. | reconciliations. |
| | based, with current controlled | | |
| | substance logs maintained and | | |
| | carried on each apparatus, and | | Target Implementation Date – |
| | prior month's logs remaining back | | December 2020 |
| | at EMS' Administrative Base. In | | |
| | FY18, a request for an electronic | | |
| | inventory system was deferred to | | |
| | FY19. We were not provided with | | |
| | documentation for any routine | | |
| | audits, or surprise counts | | |
| | performed of either the controlled | | |
| | substances, or general medication | | |

Legend
Implemented
Partially Implemented
Not Implemented

| | | EQUIPMENT | |
|-----------------------|--|--|--|
| | inventory within the Department. During our visits to all 9 City Fire Stations, we determined that in order to protect against expiration dates, some controlled substances are transferred from the suppression to the rescue apparatus, as the rescues will use the medications first, which adds to the challenge of tracking inventory. | | |
| | Recommendation: The Department should evaluate and consider the implementation of an inventory system that will enable EMS management to track all medications, including controlled substances, in a manner which ensures accountability and transparency. Ideally, an electronic system would greatly improve controls and tracking of controlled substances. | | |
| 2 High Priority | Condition: The EMS Division is responsible for the ordering and securing of | Reconciliation of Inventory - Management will ensure that periodic reconciliations | Management Update January 2020 |
| | controlled substance medications used in the pre-hospital setting. As part of our review, we requested copies of the DEA Form 222, which is utilized for ordering | between supplies on hand and SafetyPad Data are conducted. We will create a schedule | Partially Implemented The Fire Department made updates to the Controlled Substance Vehicle Logs and in 2019 SafetyPAD was |

Legend Implemented Partially Implemented Not Implemented

| EQUIPMENI | | | | | |
|-----------|-------------------------------------|----------------------------------|---------------------------------------|--|--|
| | controlled substances. After review | in addition to ensuring that | updated so that a witness could sign | | |
| | of three completed forms, we | crews obtain hospital signatures | for controlled substance waste. | | |
| | noted that the forms appeared to | when appropriate. | | | |
| | be incomplete: the National Drug | Preparation of the schedule and | Fire is currently looking into a | | |
| | Code information was not entered, | training analysis will commence | software for an electronic inventory | | |
| | information was blank for the | on October 1, 2018. | system and additional research is | | |
| | number of packages received, and | | being performed to determine if | | |
| | the date of receipt was not stated. | | current software can be configured to | | |
| | We were not provided with any | | provide a more electronic process for | | |
| | inventory records showing at what | | orders, reconciliations, and | | |
| | points re-orders were done of the | | distribution. | | |
| | controlled substances and how | | | | |
| | those records were reconciled with | | Target Implementation Date – | | |
| | the actual usage and waste of | | December 2020 | | |
| | controlled substances records per | | | | |
| | SafetyPAD, or the paper-based | | | | |
| | system utilized on the apparatus. | | | | |
| | We requested information from the | | | | |
| | SafetyPAD system for controlled | | | | |
| | substances and other specialty | | | | |
| | medications administered for the | | | | |
| | period January 2017 – June 2018. | | | | |
| | There were 665 instances of | | | | |
| | administration of controlled | | | | |
| | substance medications and | | | | |
| | specialized medications carried | | | | |
| | only by the EMS Captains. Our | | | | |
| | review of SafetyPAD data showed | | | | |
| | that there were no signatures by | | | | |
| | hospital personnel of any | | | | |
| | controlled substances waste by the | | | | |

Legend
Implemented
Partially Implemented
Not Implemented

| receiving hospital for the patient. In addition, the chronology of the calls, and required signatures did not follow a consistent pattern. We also reviewed the Controlled Substance Vehicle Logs in use as of August 7, 2018 and noted that the logs in use appear to pre-date the revision of the Administrative Policy in 2017, as they are dated 2016. Therefore, they do not include critical information that would allow for a reconciliation such as: run (call) number, date, time, amount of medication | |
|---|--|
| administered, or amount of wasted medication. Recommendation: The Department should initiate a system of periodic inventory reconciliations between supplies on hand and SafetyPAD data of | |
| medications administered. | |