

5.19.15 1/3

Dear Ms. Malagon,

Hi. Included here are some other important issues I wanted you to be aware of. Please see the enclosed email regarding *Tumor Boards*, a required Standard by the accrediting organization Commission on Cancer (CoC). Follow-up is another Standard also required by the CoC. I keep track of the data presented at these Boards. This enclosed email was regarding GI Tumor Board attendance. It appears that there were two sign-in sheets for the 3.2.15 meeting, one showing the Pathology doctor as attending and the other not checked off (as attending). Herna does not appear concerned about that. Also, this nurse, Joy Ness, and another nurse, Yohanna Zaldumbide (Thoracic Tumor Board), often report the weekly cases late, outside of the one week deadline set by the Cancer Committee. Zaldumbide is currently late several months in her reporting despite multiple requests from her supervisor. Reporting data this late raises other serious concerns, including, how can these nurses accurately record what was stated if they are filling out the case specific details months later? Also, I assume you know that Harry Goldszmidt is the Chief Financial Officer at SCCC. He has been there awhile and knows some of the Registry employees.

Regarding another issue, *my computer passcode*, Herna changed my sign-on into our abstracting system Metric within the past few months and gave me a new code. I am sure he gave it to Arias as well. Moreover, I had also complained to UM via email, in this same timeframe, that a friend of Arias' in IT (Fils Emmanuel) had *entered my computer without authorization*. During the recent email migration, when we were told to follow certain steps beforehand, a screen came up stating who had entered the computer. These entries are easily deleted but Emmanuel's name was there for entering my computer on 1.5.15. I emailed Emmanuel about this. He did not reply but came to my office. When he went into my computer, his 1.5.15 entry was gone. He did not say anything about it. I have no idea how many other times he (or anyone else) may have entered my computer without my knowledge and permission in the past. See more...

I wrote a letter to Jessica Pacheco 3.6.15 outlining many complaints within the department, including this unauthorized computer entry. I also complained that someone had *diverted my printing requests* to Nicola Jones Mattis' computer. This is what I wrote: "Also, late last week my printing requests were not processing in a timely manner. Three of my test emails (the same emails) eventually printed, however, under Nicola Jones' name (I have those emails). I think it highly unlikely that she also printed out the three exact same emails I did. Pedro from IT had to come over and reset something on the printer and on his laptop so that I could print again. In light of the many serious complaints I have had regarding data fraud, theft of money, and many other extremely serious instances of retaliation and abuse, I would like someone to please review who, if anyone, has accessed my computer without legitimate reason and also what may have caused the very strange printing problem."

As an auditor, it may also be of interest to you that Arias never works an *eight hour day*, leaving at about 3:30 every day, never arriving by 7:30 (check by log-in or camera). I also expressed my concern to Pacheco that Frances Pena was a costly, inappropriate, hire. She has never worked in a Registry, has no degree as far as I know (required for the CTR), and is a very mean, unproductive, abusive person. (See Pena's HR file and my complaints.) She also likely makes more money than all the CTRs, and we are not even paid at the market value.

Pena has apparently worked for several different doctors at UMH Pathology only to be handed off because, among other things, she didn't want to work. The bias regarding my maltreatment by Pena (as

instructed by Arias and reported to Pacheco and Joanne McCool), and including other harassment and retaliation such as four fabricated “warnings” for reporting deliberate SCCC data manipulations and omissions between 2005-2014 and for reporting Arias’ return to UM to the National Cancer Registrars Association (NCRA) and to the OIG, is striking. My four “warnings” cannot be proven to have merit (because they don’t), yet Pena apparently has all kinds of definitive written disparagements, well documented, and she appears to not have a care in the world. Herna, as nasty as he has been to me, well documented in many emails, also probably has not one warning. In light of your investigation, it would be interesting to also know who protects Pena as well as who really rehired Arias (that was from above Herna I am sure).

It is also clear that the timing of the *four “warnings”* recently given to me is, as stated, retaliatory for my NCRA and OIG reporting, including the 9/014 cases deliberately left undone (you have this list). Within a week of that reporting, Dr. MacKinnon “resigned” as Director of the Florida Cancer Data System (FCDS). If you will recall, FCDS is managed by UM, which hires, fires, promotes, etc. those employees. In essence, *UM oversees its own overseer*. I certainly could not go to FCDS with my complaints, not only due to the conflicted relationship with UM, but because Herna’s wife Megsys is also a long-term data manager at FCDS. I have been very vocal that FCDS should be a stand-alone facility totally managed by the State, something that UM does not want to see happen. Some of those related emails may also be interesting to know about as well in terms of your investigation.

Also, as mentioned at our meeting last week at your office, the first instructions I knew about regarding the falsification of data were shortly after Arias was hired. That would have been in 2008, February or March I believe. A point I failed to mention when you asked the reason someone might do this falsification, is that the *survival rate* increases when no vital statistics are researched. Although deaths are also determined by other ways, I do enter many deaths from our hospital data. I believe there are statistics regarding hospital data that potential patients can use to review and compare facilities. *Money* was the reason I had mentioned to you at the meeting; follow-up can take quite a bit of time, certainly longer, when done correctly.

I had also told you that shortly *after those 2008 falsified “follow-up” instructions* I reported, Roberto Urruchi (Tito) joined Armand and me for lunch at Urology where I was training Armand to abstract. Tito, with a slight edge, stated to me exactly, or very close to, “So, how about that “follow-up?” I replied “No comment”. I believe that that was the only time Tito ever came to Urology while Armand and I were there, perhaps about two years.

Regarding my reporting, after I filed *my initial OIG complaint, April 24, 2012*, and about the time UM received a copy, *Francis Moore, Arias’ “best friend”*, whom she had hired to work at UMH in the Tumor Registry, *never returned back to work*. He had not been friendly to me and never spoke to me before he left. He entered one of the five “follow-ups” from 2010-12 (and Arias the other four) in that 2012 case I showed you. I had been asked to help out with the SCCC backlog when shortly thereafter I saw this case. Two cancers and all their treatments for that case were missed since 2009 because Arias and Moore only entered a date of contact and did no other patient research. I was immediately moved back to UMH cases after reporting this SCCC case. As mentioned, we work with lists of 35-40 patients per page for abstracting and follow-up. I think Moore was there for about a year.

I had mentioned also that *Herna, against direct instructions from Compliance, had showed SCCC staff the OIG report* before their 2012 interviews with Compliance. He did this in order to strongly disparage me and to scare staff from telling the truth. He later told me that staff had signed a document regarding

what they knew. Dr. McCafferty had told me that the 2012 investigation had found “irregularities” and had wanted me to see the report. However, I have not yet seen it.

I was also told the past year or more ago that staff at SCCC had spent weeks going back over follow-up to *make information appear current*. However, although more cases may now appear complete, the date the follow-up was entered may actually be years after the initial case was finished, including new primary cancers, recurrences, and treatments (as in the case I sent to UM Compliance in 2012). (In the computer a completed case is notated by a “C”. A non-reportable designation is “N”, and a suspense case [waiting for review] is “S”. “I” is incomplete.) Should you need names and associated codes, someone at the State level should be able to provide that to you. *Please be aware that it seems some abstractor codes for specific individuals have changed over time (this may be true for Nicola Jones Mattis, for one). I would suggest that you specifically request ANY and ALL abstractor codes for ALL employees since 2005, or whatever year you want.* If you would like my assistance with employee names, etc. please let me know. I would not recommend speaking with anyone at FCDS or with Tyra Hilton in Tallahassee if you want to try to ensure confidentiality of your requests. I mentioned to you in my last email the State six month time requirement for all cancer cases and treatment submissions. Follow-up, under Commission on Cancer guidelines, goes federally to the CDC and to the National Cancer Data Base. This repository (NCDB) is the source of statistics for many studies on cancer including by federal agencies CDC, NIH, DOD, NCI, etc. It is also managed in part by the American Cancer Society and a major source of their statistics. I am happy to answer any further questions.

Thank you very much again,

*Judy*

Judith Futerfas MS, CTR