

The personnel investigations into the mismanagement of the Lead Program conducted by the DER are now complete. Two individual specific investigations involving the Home Environmental Health Manager and the Environmental Health Field Supervisor were conducted by the DER given the complexity of the investigations and the lack of experience of the personnel staff within the MHD.

The reports containing the findings and recommendations of the first investigation concerning Lisa Lien, Home Environmental Health Manager, was delivered to former Commissioner McManus on June 11<sup>th</sup> (a supplementary report involving allegations that surfaced as the original investigation was being conducted was delivered on June 28<sup>th</sup> ). Ms. Lien submitted a resignation, in lieu of discharge, after disciplinary proceedings were concluded. Her resignation became effective on July 30<sup>th</sup>. A summary of the general findings and recommendations resulting from the investigation is presented below.

*The investigator identified many deficiencies within the CLPPP, as well as outcomes that indicate either passive management of the program, lack of ownership of the deficiencies and unexamined assumptions. The 1/29/18 internal analysis performed by the MHD, the May 2018 audit performed by the DHS and the 5/21/18 Report from HUD provided evidence of a mismanaged program, fraught with violations of federal and state requirements as well as omissions in documentation and file management. The lack of self-examination of the focus on primary prevention rather than upon abatement of qualifying units in which a child with a statutorily qualifying EBLL resides reveals a passive, unadjusted management style. While a deficiency in one area of the program could be addressed, the CLPPP is a program in which mismanagement in many critical aspects has led to, in many cases, a noncompliant approach to assisting those who need services the most – children who have been poisoned by lead.*

**Recommendation:** *Ms. Lien is an employee of the MHD with 26 years of service; she has had only one disciplinary action, which was the 12/11/17 10-day suspension. Despite the fact that both HUD and the DHS recently identified key deficiencies in the program, Ms. Lien maintains that there were no problems in the management of the CLPPP. It is difficult to envision how she could then address the identified deficiencies when she so strongly denies that they exist, despite the fact that technical experts from two organizations to which her program is accountable have found evidence to the contrary. That being said, her passive management style, the deficiencies in documentation and in compliance and her lack of consistency in her responses during the investigation suggest that further disciplinary action should be taken, up to and including discharge.*

The second investigation report involving Mr. Richard Gaeta, Environmental Health Field Supervisor, was delivered to the Health Department's Human Resources office on August 3<sup>rd</sup>. Mr. Gaeta was discharged on August 31<sup>st</sup> and a disciplinary appeal was received on Sept 6<sup>th</sup>. A discharge appeal hearing, as required by Wisconsin state statutes will be scheduled for the City Service Commission in October. The general findings and recommendations included in the report are summarized below.

*Mr. Gaeta's approach to his work has resulted in neither assessment of the effectiveness and impact of current practices (e.g. restrictions on applicants, resisting the use of HUD funding for units in which children with EBLs reside) nor in following the documentation and compliance expectations of HUD. Accordingly, it is difficult to envision Mr. Gaeta being able to effectively support the MHD's efforts to rebuild the program. The issues of non-compliance with rules, regulations and expectations, exceeding the authority of his position, incompetence and poor*

*judgment pervade his performance and behavior. It is also difficult to understand how Mr. Gaeta felt it was appropriate to administer his own deduction structure and, according to his staff, to sometimes deduct for failed clearance wipes in addition to citing contractors under the Ordinance. This represents a view of his own authority that far exceeds his position.*

***Recommendation:*** *Mr. Gaeta's approach is not conducive to executing and promoting the changes necessary to comply with HUD's requirements to lift the Stop Work Order. Mr. Gaeta adamantly defends a program that is in serious need of repair, as directed by the monitoring agency/source of funding. Placing Mr. Gaeta back in a supervisory role within the CLPPP would therefore be problematic. Accordingly, I recommend that the Commissioner consider disciplinary action, up to and including demotion or discharge.*

A third investigation conducted as a result of a complaint filed on March 8<sup>th</sup> by Angie Hagy, Disease Control and Environmental Health Services Director, against a number of employees in the Health department was conducted by an outside law firm. The allegations included violations of the Harassment Policy and the Workplace Violence Prevention Policy by three management employees. The report containing the findings and recommendations of that investigation was delivered to former Commissioner McManus on August 21<sup>st</sup>. A disciplinary suspension and a warning notice were issued by former Commissioner McManus to two employees of the MHD based on the findings of the report.

*The investigator wrote: I did not find evidence of discrimination, harassment or a hostile work environment based on race as it relates to Ms. Hagy. However, I do find that the actions described herein demonstrate an environment full of bullying and unprofessionalism which affected the effective functioning of the Health Department. I find that the actions described herein contributed to the poor morale in the Health Department. Moreover, the lack of clear roles, responsibility and authorities, compounded by poor communication and significant personality conflicts (that were not properly or promptly addressed), led to a dysfunctional environment that started under the leadership of the previous Commissioner and that continues today.*

Since the onset of the investigations, the MHD has received a significant number of request for records under the state's Public Records Law. Records responsive to the requests include records related to copies or personnel files, records related to complaints filed against employees, records generated as a result of personnel investigations and the investigations themselves as well as disciplinary actions resulting from those investigations. Other requests received by the MHD include records in the form of texts between members of the MHD and former Commissioner Baker. Given that the personnel investigations are now complete, the MHD is in the process of determining, after conducting the Public Records Law balancing test, what records are subject to disclosure, and, in certain circumstances, of notifying certain employees that the requests have been made and that the records will be released. These employees have a right to seek a court order to attempt to restrict the release of the requested records; however, such an action must be filed within ten (10) business days after receipt of the aforementioned notice.

Based on those requirements it is expected that the MHD will release records associated with the first two investigations on or about the week of September 17<sup>th</sup> if no court action is pursued. Records

associated with the investigation into Ms. Hagy's complaint are anticipated to be released on or about September 27<sup>th</sup> if no court action is sought.

Please note that records requests received by MHD for texts between former Commissioner Baker and the Director of Nursing that were considered evidence in conjunction with the third investigation referenced above will be released today as those records are not subject to the notification requirements documented above.

You are being provided with a copy of those records at the same time they are released to the requester(s). You will note that they contain sensitive information that will reflect poorly on MHD staff. Some of them document an unprofessional work environment plagued with gossip, behavior designed to cast a negative light on peers, actions that undermined attempts to address deficiencies within the Lead Program, lack of accountability and ownership, and lack of team work especially under an incident command structure designed to facilitate a response to a public health emergency.