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ETHICS DISCLOSURE STATEMENT CONFLICTS OF INTEREST – DECISIONS AND VOTING

State Form 55860 (R / 10-15) OFFICE OF THE INSPECTOR GENERAL IC 4-2-6-9 DEC \$ 2024

INDIANA STATE ETHICS COMMISSION

In accordance with IC 4-2-6-9, you must file your disclosure with the State Ethics Commission no later than seven (7) days after the conduct that gives rise to the conflict. You must also include a copy of the notification provided to your agency appointing authority and ethics officer when filing this disclosure. This disclosure will be posted on the Inspector General's website

General's website.					
Name (last)	Name (first)		Name (middle)		
Denham	Amber				
Name of office or agency		Job title			
Indiana Department of Health		Public Health Nurse Surveyor			
Address of office (number and street) 2 N Meridian Street		City Indianapolis		ZIP code 46204	
Office telephone number	Office e-mail address (required)	<u> </u>		***************************************	
(317) 473-0325	adenham@health.in.gov	,			
Describe the conflict of interest:					
Ms. Denham currently serves as a Public Health Nurse Surveyor in the Home and Community-Based Care Division at					
IDOH. Ms. Denham is assigned to a survey area that included survey activity of ViaQuest Hopsice. As a result, she					
conducted a re-licensure and recertification surevy in July of 2024 and revisited Viaquest for a follow-up survey in August					
2024. On November 6, 2024 Ms. Denham contacted Ethics Officer, Erin Elam about the possibility of seeking employment					
at ViaQuest due to a personal family situation and the availability of a position that fit her needs at Viaquest. Ms. Elam					
instructed her to speak to her supervisors about the matter to gage support for an post-employment waiver and a					
screening feasability.					

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Describe the screen established by your ethics officer: (Attach additional pages as needed.) After meeting with her direct supervisor and department director a screen was out in place.	ce on November 20, 2024.
Ms. Denham was screened out of all survey activity involving ViaQuest and instructed no	ot to access IDOH documents
or speak with other surveyors regarding ViaQuest. On November 25, 2024 Ms. Denham	interviewed with ViaQuest
and was offered employment	
A Post-Employment Waiver has also been filed and will be heard by the State Ethics Co	mmission on December 12, 2024.
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AFFIRMATION	
Your signature below affirms that your disclosures on this form are true, complete, and continued the knowledge and belief. In addition to this form, you have attached a copy of your written depointing authority and ethics officer.	
Signature of state officer employee or special state appointee	Date signed (month, day, year) 12/03/2024
Printed full name of state officer, employee or special state appointee Amber Denham	,
FOR ETHICS OFFICER USE ONLY	
Your signature below affirms that you have reviewed this disclosure form and that it is trubest of your knowledge and belief. You also attest that your agency has implemented the	
Signature of ethics officer	Date signed (month, day, year) 12/03/2024
Printed full name of ethics officer	
Erin R. Elam	

From:

Elam, Erin R

To:

Weaver, Lindsay

Cc:

Kent, Amy (IDOH); Ferguson, Jon

Subject:

Ethics Disclosure regarding Conflict of Interest to be filed Tuesday, December 3, 2024 2:45:00 PM

Date:

Attachments:

Amber Denham Disclosure.pdf

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Good afternoon, Dr. Weaver-

There is currently a Post-Employment Waiver for IDOH employee Amber Denham set to be heard by the State Ethics Commission on December 12th. Before Amber interviewed with the agency that the Post-Employment Waiver addresses, she contacted me, and a screen was put in place at that time to ensure she had no regulatory contact with that agency during the hiring process. The OIG has suggested that I file a disclosure regarding that screen and as part of the disclosure process, I must notify you that it will be filed. The disclosure in question is attached and will be filed today.

Erin Elam | Staff Attorney & Ethics Officer

Office of Legal Affairs

office: 317-234-8361 · fax: 317-234-6278

eelam@health.in.gov health.in.gov









Confidentiality Statement: This message and any attachments may be confidential. If you are not the intended recipient, please 1) notify me immediately; 2) do not forward the message or attachment; 3) do not print the message or attachment; and 4) erase the message and attachment from your system.