



# FLORIDA DEPARTMENT OF JUVENILE JUSTICE

Rick Scott, Governor

Christina K. Daly, Secretary

September 1, 2017

RECEIVED DATE IMPRINT  
OFFICE OF THE SECRETARY

SEP - 1 2017

Christina K. Daly, Secretary  
2737 Centerview Drive  
Suite 3100, Knight Building  
Tallahassee, Florida 32399

Dear Secretary Daly,

Please find the attached Office of Inspector General Annual Report for fiscal year 2016-2017. The report highlights the activities and accomplishments of our office, including the Bureau of Investigations, Bureau of Internal Audit, Background Screening Unit, Incident Operations Center and Central Communications Center.

Our office is extremely proud to assist the Department of Juvenile Justice in serving the citizens of Florida and ensuring our youthful offenders receive the highest quality of treatment and rehabilitative services possible.

We thank you again for your unwavering and continued support.

Sincerely,

A handwritten signature in black ink, appearing to read "R. Munson".

Robert A. Munson  
Inspector General

Attachment

cc: Eric Miller, Chief Inspector General

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<http://www.djj.state.fl.us>

*The mission of the Department of Juvenile Justice is to increase public safety by reducing juvenile delinquency through effective prevention, intervention, and treatment services that strengthen families and turn around the lives of troubled youth.*

# State of Florida Department of Juvenile Justice

Christina K. Daly, Secretary

## Office of Inspector General

2016 - 2017 Annual Report



Robert A. Munson, Inspector General

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## **Department of Juvenile Justice**

### **Office of Inspector General**

*Annual Report for Fiscal Year 2016-2017*

## **CHARTER OF OPERATIONS**

### **Department of Juvenile Justice Agency Mission**

To increase public safety by reducing juvenile delinquency through effective prevention, intervention and treatment services that strengthen families and turn around the lives of troubled youth.

### **Inspector General's Mission**

The Office of Inspector General provides independent oversight, through objective and timely audit and investigative services, to ensure the Florida Department of Juvenile Justice and its partners maintain the highest level of integrity, accountability and efficiency.

### **Purpose**

The Office of Inspector General (OIG) is established to provide a central point for coordination of and responsibility for activities that promote accountability, integrity, and efficiency, and to conduct independent and objective audits, investigations, and reviews relating to the programs and operations of the Department of Juvenile Justice. The OIG assists the Department in accomplishing its objectives by promoting economy and efficiency, and by preventing and detecting fraud and abuse in its programs and operations.

### **Authority**

The OIG reports directly to the Chief Inspector General. The authority of the DJJ OIG is derived from Section 20.055, Florida Statutes, and allows for full, free, and unrestricted access to all persons, records, and other information relevant to the performance of engagements.

## **OIG Core Values**

- **Leadership**
- **Professionalism**
- **Integrity**
- **Excellence**
- **Accountability**
- **Communications**
- **Teamwork**

## **Responsibilities**

The DJJ OIG is statutorily assigned specific duties and responsibilities per Section 20.055(2), Florida Statutes, which include:

- Advising in the development of performance measures, standards, and procedures for the evaluation of programs;
- Assessing the reliability and validity of information provided by the agency on performance measures and standards, and making recommendations for improvement, if necessary;
- Reviewing actions taken by the agency to improve program performance and meeting program standards;
- Providing direction for and coordinating audits, investigations, and management reviews relating to the programs and operations of the agency;
- Promoting economy and efficiency in agency programs in the administration of, or preventing and detecting fraud and abuse;
- Recommending corrective action concerning fraud, abuses, weaknesses, and deficiencies and reporting on the progress made in implementing corrective action; and
- Ensuring that an appropriate balance is maintained between audit, investigations, and other accountability activities.

The Inspector General is required by statute to provide the agency head an annual report by September 30th each year, summarizing the activities of the OIG during the immediate preceding state fiscal year. This document, which is presented to the DJJ Secretary, provides information to departmental staff and other interested parties on how the OIG accomplishes its mission.



## **Independence and Objectivity**

The OIG's activities shall be independent of department operations and the OIG staff shall be objective in performing their work. The Inspector General reports to the Chief Inspector General and is supervised by the Secretary of the Department; however, they are not subject to supervision by any other employee of the Department. This ensures that audits, investigations and other activities remain free from interference in the determination of the scope of activities, performance of work, and results. <sup>1</sup>According to standards, the OIG shall refrain from participating in any operational activities that it might be expected to review or appraise or that could otherwise be construed to compromise the independence and objectivity of the OIG.

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<sup>1</sup> Section 20.055(3)(b), Florida Statutes

## Scope of Work

The scope and assignment of the activities shall be determined by the Inspector General. However, the Secretary of the Department may at any time request the Inspector General to perform an audit, investigation or review of a special program, function, or organizational unit. The scope of work is to determine whether the department's risk management control and governance processes are adequate and functioning in a manner to ensure risks are appropriately identified and managed; significant financial, managerial, and operating information is accurate, reliable, and timely; resources are acquired economically, used efficiently and adequately protected; programs, plans, and objectives are achieved; quality and continuous improvement are fostered in the organization's control process; and significant legislative or regulatory issues impacting the department are recognized and addressed appropriately.



## Professional Standards

The Office of Inspector General complies with established professional standards in fulfilling its responsibilities. These include the *Principles and Standards for Offices of Inspector General*, published by the Association of Inspectors General, the *International Standards for the Professional Practice of Internal Auditing* and the *Code of Ethics*, published by the Institute of Internal Auditors, Inc., as well as applicable standards of the Association of Certified Fraud Examiners, and the State of Florida Auditor General's Rules.

## Accreditation

Accreditation is the certification by an independent agency that an organization has met specific requirements and prescribed standards. It has long been recognized as a means of maintaining the highest standards of professionalism. Agencies must prove compliance by providing a required number of applicable standards. The agency is required to develop and compile the proofs of compliance necessary to determine conformity. Agencies document their written directives and other written policies, interviews, and observations as primary proofs of compliance. These may include agency general orders, special orders, standard operating procedures, policy manuals, ordinances, plans, rules, training directives, state laws, court orders, and memoranda that are binding on agency members.

The Department of Juvenile Justice Office of Inspector General Bureau of Investigations received Accreditation through The Commission for Florida Law Enforcement Accreditation on June 24, 2015. The Accreditation is valid for a period of three years.



## Periodic Assessment

The Inspector General shall periodically assess whether the purpose, authority, and responsibility, as defined in the charter, continue to adequately enable the OIG to accomplish its objectives in assisting the Department successfully accomplish its objectives.

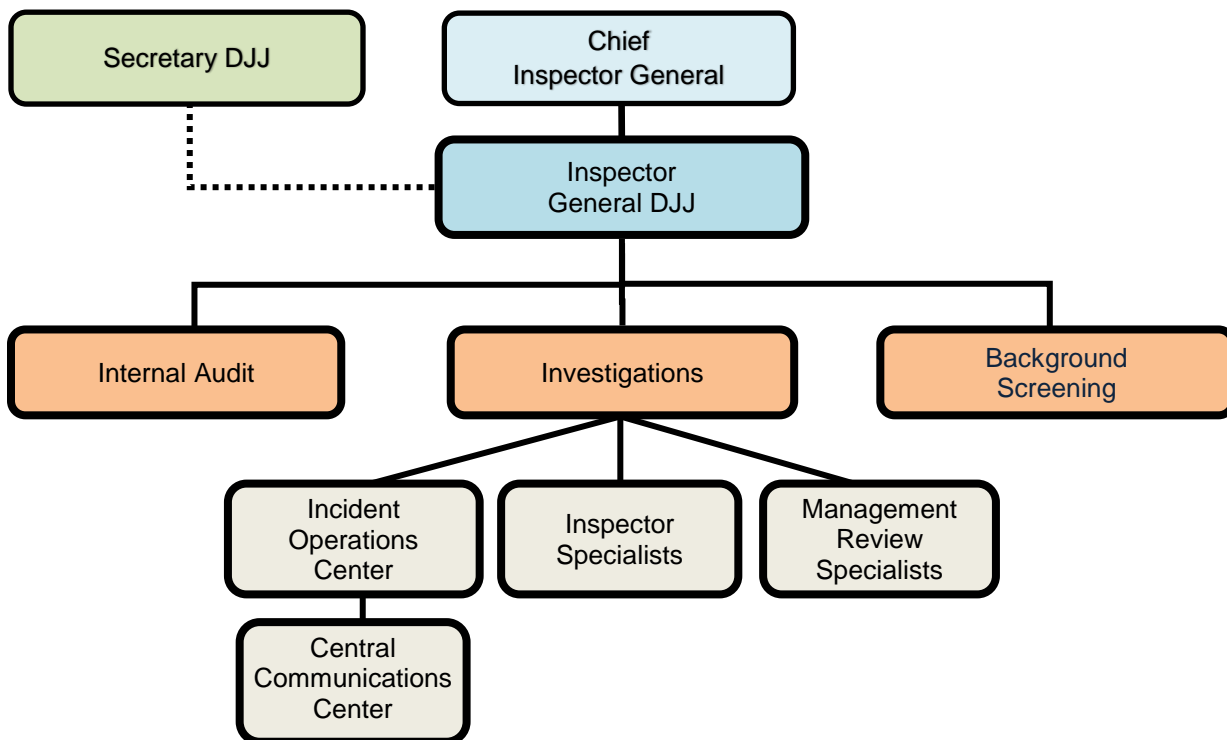
## Historic Overview

The term “inspector general” historically has been associated with maintaining and improving the operational efficiency of our nation’s armed forces. In the 1970’s, Congress adopted the idea and created civilian inspectors general to address fraud, waste, abuse and corruption in federal agencies.

An audit function was established in the Department in the 1960’s. This function evolved into audits and investigations and, in the 1980’s it was designated as the Office of Inspector General. In 1994, amendments to Section 20.055, F.S., required an OIG in each state agency.

## Organization

The DJJ Office of Inspector General is comprised of four main operating sections: The Bureau of Investigations, Bureau of Internal Audit (BIA), Incident Operations Center (IOC)/Central Communications Center (CCC, and Background Screening Unit (BSU). The organizational structure for the OIG is as follows:



## **Bureau of Investigations**

The Bureau of Investigations detects and investigates administrative violations or misconduct impacting the department. The Bureau also oversees the Management Review Unit, which is charged with conducting administrative reviews of those allegations that do not rise to the level requiring an IG investigation.

### **Incident Operations Center/Central Communications Center**

The Incident Operations Center (IOC) provides daily incident/complaint hotline coverage through the Central Communications Center (CCC). The IOC tracks and manages all reported incidents and complaints and includes all of the activities required to ensure that DJJ providers, including state-owned and operated facilities, resolve incidents and demonstrate corrective action. Activities include the review and/or investigation of all incidents received by DJJ and the coordination and assignment of adequate resources to conduct reviews or investigations based on criticality of incidents.

### **Management Review Unit**

The Management Review Unit (MRU) was moved under the Office of the Inspector General in July 2015. The MRU is comprised of ten (10) reviewers and two (2) supervisors and is responsible for conducting reviews of allegations against a Department facility or contract provider. Management reviews are conducted when incidents/allegations are determined to be severe in nature and meet one or more of the following criteria: evidence of a crisis situation; involve serious breaches in the safety and security of youth and staff; or are indicative of unaddressed systemic issues. For the 2015-2016 fiscal year, the MRU conducted and closed 325 reviews.

## **Bureau of Internal Audit**

The Bureau of Internal Audit provides independent appraisals of the performance of department programs and processes, including the appraisal of management's performance in meeting the department's information needs while safeguarding its resources.

### **Background Screening Unit**

The Background Screening Unit assists the department in meeting its goal of hiring qualified applicants who meet statutory and agency standards of good moral character by conducting background screenings pursuant to Chapters 39, 435, 984, and 985, Florida Statutes, and the Department's background screening policy and procedure.

### **Professional Affiliations**

American Institute of Certified Public Accountants  
Institute of Internal Auditors, Inc. (National and Local Chapters)  
Association of Certified Fraud Examiners  
Association of Inspectors General (National and Local Chapters)  
American Society for Industrial Security  
Florida Audit Forum

### **Staff Development**

Continued professional staff development is essential to the OIG. During FY 2015-2016, OIG Audit staff participated in numerous professional training sessions, including courses required to meet the *Standards for the Professional Practice of Internal Auditing*. The standards require each auditor to complete at least 40 hours of continuing education and training per year in order to maintain professional proficiency. The investigative staff members also attend regular training throughout the year to maintain their professional certifications. The OIG staff remains committed to seeking professional excellence through continued training and development to ensure the highest quality of service to our customers.



**Staff Certifications**

Expertise within the OIG encompasses a variety of disciplines with personnel qualified in auditing, accounting, investigations, background screening, and information technology. Staff members continually seek to augment their professional credentials which further enhance their abilities and skill level through additional training. Staff personnel are also actively involved in a number of professional organizations which assist them in maintaining a high level of proficiency in their profession and areas of certification.

The accomplishments of the staff in obtaining professional certifications represent significant time and effort by each staff member, reflecting positively on the individual as well as the Department.

The table below details the types and number of certifications held by personnel in the OIG.

Professional Certifications	No.
Certified Internal Auditor	2
Certified Public Accountants	1
Certified Inspector General	1
Certified Inspector General Investigator	11
Certified Public Manager	1
Certified Fraud Examiner	3
Certified Protection Professional	1
Certified in FDLE Criminal Justice Information Services	9
Certified FDLE Terminal Agency Coordinator	2
Certified DOJ PREA Auditor	1
Notary Public	20

**Bureau of Internal Audit**



The Bureau of Internal Audit, under the direction of the Inspector General, assists the Secretary and the Department in deterring and detecting fraud, waste and abuse and provides assurance that the Department uses its resources in an efficient and effective manner.

The Bureau of Internal Audit carries out its function for the Department under the leadership of the Director of Audit who reports to the Inspector General. In addition to the Director of Audit, the bureau is staffed by one Operation Review Specialist and two Management Review Specialists (Senior Auditors).

**Audit Responsibilities**

Pursuant to section 20.055(5), Florida Statutes, the Bureau conducts performance, information technology, financial, and compliance audits of the Department and prepares reports of its findings and recommendations. Audits are performed in accordance with the *International Standards for the Professional Practice of Internal Auditing*, published by the Institute of Internal Auditors. An audit involves obtaining an understanding of the internal control structure; assessing control risk; testing of records and responses of inquiries by obtaining corroborating evidentiary matter through inspection, observation, confirmation and other procedures.

In addition to audits, the Bureau performs non-audit services, such as special projects, and provides other management advisory and consultant services to the Department.

The Institute of Internal Auditors defines internal auditing as an independent, objective assurance and consulting activity designed to add value and improve an organization's operations. It helps an organization accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control, and governance processes.

## **Accomplishments**

During the fiscal year, the Bureau of Internal Audit completed major audits, reviews and projects consisting of the following:

- Five compliance and performance audits and one IT audit;
- Four follow-up reviews to internal audits and one follow-up review to Auditor General audit;
- Various management advisory projects and coordination with Auditor General audits.

## **Compliance and Performance Audits**

A compliance audit is a comprehensive review of the Department's adherence to state laws, regulatory guidelines, and the Department's policy and procedures. Performance audits are examinations and evaluations of the Department's systems, programs, and processes from an efficiency and effectiveness perspective. Performance audits also include determining whether the Department acquired, protected, and used its resources economically and efficiently in accordance with applicable laws and regulations.

The Bureau completed five comprehensive audits which involved both compliance and performance activities.

### **Audit of Residential Living and Treatment Environment**



The Office of Residential Services oversees the Department of Juvenile Justice (Department) development and management of residential facilities and programs. Per Florida Administrative Code (F.A.C.) 63E-7.011, a residential program shall establish an environment that is conducive to the effective delivery of delinquency intervention and treatment services. This environment shall promote and reinforce community values by giving youth opportunities to assume the responsibilities and experience the benefits of being part of a community. In Florida, all residential commitment programs are operated by private providers under contract with the Department.

The audit objectives were to provide management with reasonable assurances that the residential living and treatment environment is in compliance with Florida Statutes, F.A.C., and the Department's policies and procedures; and to assess whether the residential living and treatment environment promotes a safe, fair, and healthy environment; increases positive youth experiences; involves youth input while continuing to hold youth accountable for their actions; and teaches them skills and behaviors needed to avoid further recidivism. The audit scope was from July 1, 2015 through June 30, 2016, and related activities through the end of fieldwork.

The audit disclosed that residential commitment programs had policies and procedures in place that complied with Florida Statute, Florida Administrative Code, and Department policy and procedures to promote a safe, fair, and healthy environment; increase positive youth experiences; involve youth input while continuing to hold youth accountable for their actions; and teach them skills and behaviors needed to avoid further recidivism.

### **Audit of the Bureau of Monitoring and Quality Improvement**

The Bureau of Monitoring and Quality Improvement (Bureau) is an independent monitoring entity and a component of the Division of Program Accountability, and is responsible for providing the Department with information necessary to assess fiscal and programmatic oversight of service providers, operated by both the Department and contracted providers. The Bureau reviews service providers' processes to ensure compliance with applicable rules, laws, and contract conditions. Also, the Bureau has developed a central tracking system to ensure that required monitoring has been completed in accordance with statutes, policies and procedures. The Department and its contracted providers deliver a range of services to youth in the State of Florida, including health care, detention, executive direction, delinquency prevention, probation, and residential services.



The objectives of the audit were to provide management with reasonable assurances that:

- Selected program monitoring processes are functioning as required by applicable statutes, contract conditions, rules, policies and procedures; and
- The Department has adequate and effective internal controls in place regarding monitoring and quality improvement operations, reporting, and compliance.

The audit included the selection and limited testing of transactions and program records for the period of July 1, 2015 through December 31, 2014, and related activities through the end of fieldwork. The audit was designed to identify internal control deficiencies and noncompliance with applicable statutes, Department policies and procedures pertaining to programmatic monitoring.

The audit disclosed, in general, the Bureau has effective monitoring processes and internal controls in place to evaluate state and private providers of services to youth under the Department's jurisdiction. In addition, the Bureau has developed quality improvement standards for Department programs as required by statutes and a formal monitoring process system that is compliant with the Department of Financial Services policies and procedures. However, the audit noted the following area for improvement pertaining to monitoring for requirements for providers:

- Out of Twenty-six contracts reviewed, twenty-two contracts were programmatically monitored. Based on our review of the scope of services for the four contracts that were not programmatically monitored, programmatic monitoring was not applicable to these contracts. However, language in their contract states both programmatic and administrative monitoring should be conducted by the Department.

The audit recommended the Department modify contract language to address contracts not required to be programmatically monitored.

### **Audit of Secure Detention Supervision**



The Department of Juvenile Justice (Department) operates 21 juvenile detention centers in 21 counties, with a total of 1302 beds, in the State of Florida. Secure Detention is a physically restrictive facility for the housing of youth pending adjudications, disposition, placement or by court order. Youth placed in Secure Detention have been assessed as risks to public safety, per the Detention Risk Assessment Instrument (DRAI) and must remain in a physically secure detention center while awaiting court proceedings. Youth appear before the court within 24 hours of being taken into custody, at which time the juvenile judge determines whether there is a need for continued detention. Generally, there is a 21-day limit to secure detention, but those charged with serious offenses can be held up to 30 days.

The audit objectives were to provide management with reasonable assurances that secure detention supervision is implemented in compliance with Florida Statutes, Florida Administrative Codes, and Department policies and procedures; and to evaluate whether internal controls are in place to ensure the effectiveness of secure detention supervision for providing care, safety and protection of detained youth. The audit scope was to assess secure detention operations from July 1, 2015 through December 31, 2016, and related activities through the end of fieldwork.

The audit disclosed that, in general, juvenile detention centers had policies and procedures in place that complied with Florida Statutes, Florida Administrative Code, and Department policies and procedures regarding secure detention supervision. In addition, our review indicated facilities had internal controls in place to ensure the effectiveness of secure detention supervision in providing care, safety and protection of detained youth. However, the audit noted the following areas for improvement in one or more of the facilities:

- Visitor logbook notations were not always complete; logbook reviews were not always performed by superintendents or their designee; and logbook reviews were not always highlighted.
- Facility key control was not always demonstrated.
- Behavior Management Systems (BMS) were not always understood by staff or youth; youth point-tracking documents were not always current; justification for youths' level drops were not always documented in the living area logbooks; and youth in the highest BMS level (Level 3) were not always provided with three additional privileges.
- Youth telephone logs were not always current. It did not always reflect the number dialed; and in some instances, it could not be located for review.
- Prison Rape Elimination Act (PREA) training certificates for medical and mental health care providers were not always maintained by the facility; and superintendents did not always maintain a copy of all PREA-related incidents reported to the Central Communications Center (CCC).
- Facility Operating Procedures (F.O.P.) 5.05 and the F.O.P. Emergency Drill Reporting Form concerning suicide prevention drills were not consistent with Florida Administrative Code 63G-2.017(5)(b). Required fire drills, medical drills, and suicide prevention drills were not always documented and completed drill forms were not always signed by the shift supervisor and facility administrator; and local fire official's approval of the facility's fire drill procedures could not always be located.
- A perpetual inventory of all tools maintained by the facility was not always reviewed and signed monthly by the superintendent or designee; and inventories for all poisonous, flammable and toxic materials were not always available.
- An itemized inventory of all culinary equipment including kitchen knives and other hazardous kitchen sharps were not always maintained.
- Facility hold-over schedules were not always followed, resulting in staff working 16 hour days for two or more consecutive work days.

The audit recommended that:

- The Department ensure superintendents, assistant superintendents, or their designees follow F.A.C. 63G-2.018(3) and F.O.P. 1.13 and complete logbook reviews in a timely manner.
- The Department ensure key control management in accordance with established policies and procedures.
- All facilities update their individualized BMS plans and re-train youth and staff on the approved BMS plans; ensure BMS point tracking is consistently updated; and remind staff to document justification for a youth's level drop in the living area logbooks.
- Management implement a weekly review of youth telephone log sheets.
- Management ensure all medical and mental health care providers complete PREA training within 30 days of the date of hire in compliance with Department Policy FDJJ/1520; and ensure superintendents are compliant with F.O.P. 3.09 in requesting and maintaining copies of all PREA-related incidents reported to the CCC.
- Detention Management update Detention F.O.P. 5.05 and the Emergency Drill Reporting Form to reflect quarterly mock suicide prevention drills on each shift in accordance with F.A.C. 63G-2.017; ensure that all drills are conducted in accordance with F.A.C. 63G-2.017, documented appropriately on the Emergency Drill Reporting Form, and maintained in an approved manner; and ensure that facilities obtain and maintain the required annual letter of approval from local fire officials in accordance with Detention F.O.P. 5.03.

- The Department ensure superintendents or their designees follow F.O.P. 5.24 and 5.15 regarding tool and chemical inventories.
- The Department ensure superintendents or their designees follow F.A.C. 63G-2.016 and F.O.P. 5.15 by daily maintaining the appropriate account sheets for kitchen knives and other hazardous kitchen sharps.
- Management conduct a research or study to develop a better strategy for handling hold-over shifts.

### Audit of Human Resources Operations



The role of the Bureau of Human Resources (Bureau) is managing employment affairs for the Department. This includes employee attendance and leave, benefits, an employee assistance program, grievances, employment verification, public records request, unemployment compensation, payroll, recruitment, selection, retention, retirement, and workers compensation. They advise managers on how to manage their staff professionally. The Bureau develops and updates employee handbooks and official policies and procedures to comply with changes in the law and regulations. They work in the best interest of both the employees and the Department.

The objectives of the audit were to provide management with reasonable assurances that human resources operations comply with Florida Statutes, Florida Administrative Codes, and the Department's policies and procedures; and to evaluate whether internal controls over the operations of Human Resources are adequate and operating effectively.

The audit indicated that human resources operations had policies and procedures in place that complied with Florida Statute, Florida Administrative Code, and Department policy and procedures; and internal controls, in general were adequate and operating effectively. However, improvements were noted pertaining to the following areas:

- Employment advertisements did not include the statement, "We hire only U.S. citizens and lawfully authorized alien workers." As required by Department policy and procedures.
- Employment Eligibility verification forms were not always completed in a timely manner.
- Recruitment files could not be located for all selected new hires; and the DJJ Interview Rating Form was not included in every recruitment file.
- Employees had inappropriate access to People First.
- Procedures for Employee Separations were not always followed.
- Worker's Compensation Procedures were not always followed.

The audit recommended that the Department:

- Review and update the policies related to Human Resources.
- Ensure the Bureau staff comply with FDJJ-1003P and timely submit E-Verification.
- Ensure the Bureau staff comply with FDJJ-1003P concerning retention of recruitment files.
- Implement an annual review of the DJJ Security Role Code Report to ensure assigned security role codes are accurate for each employee.
- Update FDJJ-1003.11 to reflect current Bureau practices.
- Ensure Bureau staff follow the procedures relating to Workers' Compensation claims.

### **Audit of After School Prevention Programs**

The United States Department of Justice, Office of Justice Programs, awarded \$1,789,039 and \$1, 819,899, during State Fiscal Year 2015 and 2016, respectively, to the Department. Direct prevention services to youth in the State of Florida are provided via contracts with local governments and non-profit entities.

The audit objectives were to review performance in the following areas to assess compliance with Federal laws and regulations, and Department's policies and guidelines:

- Internal control environment;
- Sub recipient monitoring;
- After School Programs expenditures;
- Program performance and accomplishments; and
- Compliance with selected contract and grant award conditions.



The scope of the audit included a limited review of program operations for the period of July 1, 2014 through June 30, 2016, and related activities through the end of fieldwork.

The audit indicated, based on our limited review, that the Department and providers complied with the Juvenile Justice and Delinquency Prevention Act of 2002, Title II, applicable laws, regulations, and guidelines and has satisfied performance objectives of the audit. However, the following material deficiencies were noted at two of the three providers visited:

- Support documentation did not meet contract criteria to justify payment for services delivered; and
- One provider is not in compliance with OMB Circular A-133, Audit Requirements.

The audit recommended that:

- Program staff exercise due diligence when reviewing invoices for payment from providers; and
- The Department follow-up with the provider to ensure completion of the independent audit report.

### **Internal and External Audit Follow-Up Activities**

The bureau is responsible for monitoring the Department's implementation of corrective action to address recommendations in audit reports and policy reviews issued by the Auditor General (AG), the Office of Program Policy Analysis and Government Accountability (OPPAGA), and the department's Bureau of Internal Audit. The bureau provided liaison activities for AG operational audits and federal grant audits, and conducted follow-ups to monitor the status of corrective actions for one external and four internal audits. The bureau issued the following follow-up review reports:

- Follow-up on the Auditor General's Operational Audit No. 2016-195, Secure Detention Center Services and Selected Administrative Activities Operational Audit;
- Follow-up on the Audit of Probation Intake and Screening;
- Follow-Up on the Audit of Mobile Devices Usage;
- Follow-Up on the Audit of Psychotropic Medication Oversight; and
- Follow-Up on the Statewide Electronic Monitoring Program.

## Other Activities

### The Florida Single Audit Act

The Florida Single Audit Act (FSAA) was enacted in 1998 by the Florida Legislature to establish uniform State audit requirements for non-state entities expending State financial assistance equal to or in excess of \$500,000. The bureau responded to the Department of Financial Services on behalf of the agency and coordinated compliance efforts. This included providing technical assistance, meetings, inter-agency correspondence and liaison activities. The bureau is responsible for reviewing the Financial Reporting Packages received from non-state entities to ensure compliance with the Florida Single Audit Act and the Federal Office of Management and Budget (OMB) Circular A-133, including management letters and corrective action plans, to the extent necessary to determine whether timely and appropriate correction has been taken with respect to audit findings and recommendations pertaining to state and federal financial assistance. The bureau has implemented new policies and procedures to ensure compliance with the Florida Single Audit Act.

### Communication with Management

The Office of Inspector General (OIG) provides a centralized point for coordination of activities that promote accountability, integrity and efficiency. A major part of this responsibility includes keeping management informed of the many internal and external audits and related activities. The bureau also reviews the Department's response to external audit reports.

## Bureau of Investigations

The OIG Bureau of Investigations (Investigations) assists the Department in ensuring the promotion of accountability, integrity, and efficiency within the agency. In addition, Investigations assists in ensuring that only those individuals who meet statutory and Departmental standards of good moral character are selected to provide for the custody, care, safety, and protection of the youths entrusted to our supervision.



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### Investigations Unit

The investigations unit is charged with coordinating and conducting investigations designed to detect, deter, prevent, and eradicate fraud, waste, mismanagement, misconduct, and other abuses within DJJ, involving both state and contract provider employees, programs, facilities, and offices. All investigative activities are objective and unbiased. Inspectors submit detailed investigative reports, which include sworn statements and documentary evidence. The Inspector General reviews all completed cases for sufficiency and accuracy before signing and disseminating the final report. Investigations containing sustained allegations are forwarded to management, which is responsible for implementing corrective action and reporting it to the OIG.

The Chief of Investigations and the Inspector General review completed civil rights cases; however, a resolution panel presided over by the department's Equal Employment Opportunity (EEO) officer determines whether there is cause to believe either discrimination or harassment occurred. The Bureau of Investigations does not make recommendations concerning corrective action for EEO complaints.

Management Reviews are conducted by department staff to look into incidents that routinely occur in department programs or routine incidents that are the least serious in nature, yet still warrant follow-up. The results of these reviews are approved by the department's Assistant Secretaries.

## **Accomplishments**

During FY 2016-2017, the Bureau of Investigations assigned 68 complaints for Investigation, Inquiry, Referral to Management or other appropriate attention.

The Bureau of Investigations closed **61** investigations in fiscal year 2016-2017. Some of these investigations consisted of multiple allegations. The total number of allegations investigated during the period was **193**. Of the allegations investigated **82** were Sustained, **45** were Not Sustained, **62** were Unfounded, and 3 were Exonerated. The remaining one was identified as a policy deficiencies.

The Bureau of Investigations closed **12** inquiries in fiscal year 2016-2017. The total number of allegations investigated through inquires was **12**. Of these allegations, **12** were Administratively Closed.

Sustained findings were reported to management and resulted in terminations, resignations, and other disciplinary and non-disciplinary actions, as well as programmatic changes.

## **Summary of Investigations**

### **IG 16-0008 Dade Juvenile Residential Facility**

An investigation was initiated after two youth sustained injuries that required off site medical treatment. During the investigation, it was alleged that youth were threatened by staff. Thus, eight staff received a SUSTAINED finding of Improper Supervision, five staff received a Sustained finding for Violation of Policy/Rule and one Not Sustained for Use of Force: Unnecessary. There was also an Unfounded finding for Improper Conduct.

### **IG 16-0010 Tampa Residential Facility**

A staff member was alleged to have had sexual contact with a youth and a second staff member was alleged to have exhibited improper conduct. During the investigation, it was further alleged that three staff members had violated policy and two staff members had exhibit unnecessary force. An investigation determined that all allegations were false and not supported by evidence, and were therefore Unfounded.

### **IG 16-0018 Lutheran Hope House Shelter**

The CCC was called after a former youth of the shelter alleged that he was touched inappropriately by a male staff person the night he was there. A review of the video tape of the night of his stay showed no one entering his room. The youth's description of his assailant did not match any staff member working that night. The allegation of Improper Conduct/Sexual Nature was Unfounded.

### **IG 16-0023 St Johns Youth Academy**

Two youth escaped, but were subsequently apprehended by law enforcement. An allegation of improper supervision was sustained against one staff. Additionally, a sustained finding for violation of policy was made on two additional staff. The investigation further cited staff-to- physical facility and maintenance issues as contributing factors to the escape.

### **IG 16-0024 St Johns Juvenile Youth Academy**

A staff member was alleged to have exhibited improper conduct against a youth and that another staff member failed to report the allegation. Additionally, it was alleged that staff members and administration violated policy by denying abuse calls to youth. An investigation determined that all allegations were false and not supported by evidence, and were therefore Unfounded.



### **IG 16-0026 Jacksonville AMI**

The CCC was contacted after a youth at the school stated that a staff member had been asking to see his private parts and perform a sexual act on him. The investigation revealed the youth made up the allegation to be transferred to a less strict school. The allegation of Improper Conduct/Sexual Nature was Unfounded.

### **IG 16-0027 Okeechobee Youth Treatment Center**

Several youths engaged in physical altercations. Video showed one staff chasing a youth, while swinging a chair at him. Another staff was seen on video, appearing to place youth in a headlock or neck wrap. The investigation found the allegation of Improper Supervision against staff was Unfounded. There was no evidence to prove staff struck the youth with a chair. However, staff acknowledged swinging a chair in the youth's direction, so the allegation of Use of Force – Excessive against staff was Sustained. There was no evidence to prove staff placed youth in a headlock or neck wrap, therefore, the staff was Exonerated on the allegation of Use of Force – Improper, as the force used was deemed reasonable and necessary under the circumstances.

### **IG 16-0029 Columbus Juvenile Residential Facility**

A staff member allegedly wrote a youth and tried to have a sexual relationship with the youth. The investigation determined the allegation of an Improper Conduct/Staff-Youth Relationship was Sustained. There was no evidence of a sexual relationship, and law enforcement determined no criminal violation had occurred.

### **IG 16-0030 St. John's Youth Academy**

A CCC complaint was alleged that an unidentified male staff member sexually harassed a female staff member by exposing his genitals to her (PREA). The investigation revealed there was insufficient evidence to prove the allegations and the investigation for Improper Conduct was closed as Not Sustained.

### **IG 16-0033 Frances Walker Halfway House**

Staff allegedly allowed youth to engage in oral sex and other sexual relationships and failed to intervene or make appropriate notifications. The investigation determined the allegations of Improper Conduct/Staff-Youth Relationship, Improper Supervision and Failure to Report were Sustained. The allegation of Improper Supervision against an Unknown Staff was Not Sustained.

### **IG 16-0035 Kissimmee Youth Academy**

A disturbance occurred on the module and law enforcement was called to quell the situation. A review of the CCC system showed the incident was not reported as required. During the investigation, it was also discovered staff failed to conduct the required 10-minute room checks and falsified documentation, indicating those room checks were conducted. The investigation found that Failure to Report, Improper Supervision and Falsification were Sustained.

### **IG 16-0036 St. John's Youth Academy**

The CCC was contacted after prescription pills were found in youths' rooms during a contraband search. One youth advised he obtained the pills from a Licensed Mental Health Counselor staff member. The investigation also revealed the staff member allowed four youths to be in her office unsupervised. Allegations of Violation of Policy and Improper Supervision against the staff member were Sustained.

### **IG 16-0038 Juvenile Assessment Center Polk County Circuit 10**

After a youth escaped from the Juvenile Assessment Center, an investigation was conducted to determine if there was a violation regarding the supervision of youth. The investigation found that Improper Supervision against a staff member was Sustained.

### **IG 16-0039 Okeechobee Youth Treatment Center**

An anonymous caller alleged staff at the facility assault youth; bribe youth with food to not report incidents of abuse; alter or delete video footage so incidents are not available; deny youth abuse calls and medical treatment; and allow youth to monitor one another during showers when male staff are not available. The investigation determined that allegations of Improper Conduct and Use of Force - Unnecessary against three staff were Unfounded, Improper Conduct allegations against two staff were Unfounded, Improper Conduct and Violation of Policy/Rule allegations against nine staff were Not Sustained, and Improper Conduct and Violation of Policy/Rule allegations against two staff were also Not Sustained.

### **IG 16-0040 Lake Academy**

The CCC was notified regarding a youth alleging a staff member entered her room and sexually abused her. Based on the law enforcement investigation and analysis of recovered evidence, an allegation of Sexual Abuse (PREA) was Sustained against the staff member.

### **IG 16-0041 Pasco Regional Juvenile Detention Center**

A staff member was alleged to have used unnecessary force with a youth. Law enforcement closed the case, citing the incident did not rise to the level of felony child abuse. An investigation determined the allegation of unnecessary force was Sustained.

### **IG 16-0042 Brevard Group Treatment Home**

A staff member was alleged to have used excessive force with a youth. The Cocoa Police Department investigated and charged the staff with felony battery- child abuse. An investigation determined the allegation of excessive force was Sustained.

### **IG 16-0044 Polk Halfway House**

A youth alleged he was sexually abused by two female Polk Halfway House staff members. During the investigation, an additional female staff was also named. The investigation determined the allegations of Sexual Abuse-Prison Rape Elimination Act (PREA) against the three staff was Unfounded.

### **IG 16-0045 Duval Academy**

The CCC was contacted regarding two youth stealing ibuprofen from the clinic while under the supervision of a staff member. A search was conducted and the ibuprofen was recovered in a youth's room. The AFA was notified of the recovery, but he failed to notify the CCC of the recovered contraband. An allegation for Improper Supervision against the staff member was sustained. An allegation for Failure to Report against the AFA was sustained. Additionally, another youth had ingested 22 ibuprofens. The FA and the AFA both were made aware of the overdose but failed to report it. Allegations for Failure to Report against the FA and AFA were sustained. Lastly, a supervisor alleged her Shift Report regarding the incident had been altered. An allegation for falsification of documents against an unknown person was Sustained.

### **IG 16-0046 Circuit 18 Probation**

A juvenile probation officer was a collateral witness in a criminal investigation of a former youth. A subsequent administrative investigation showed the officer was Exonerated of Improper Conduct for allegedly contacting and sending the former youth money, and an allegation of Improper Conduct for viewing the former youth's face sheet was Not Sustained.

### **IG 16-0047 Duval Academy**

An anonymous letter was received with multiple allegations against administration and staff. An investigation into the allegations resulted in the following findings: Improper Supervision Sustained (1), Not Sustained (1); failure to report Sustained (3), Not Sustained (2); improper conduct Not Sustained (4), Unfounded (8); violation of policy Sustained (2); improper search Not Sustained (1); and unnecessary force Unfounded (1). Law enforcement closed the case as Information Only citing the youth denied the allegations.

### **IG 16-0048 Brevard Group Treatment Home**

A former program employee alleged the Program's Director denied youths abuse calls, and physically abused youths out of camera view. The OIG investigation determined that Violations of Policy/Rule, and Use of Force – Unnecessary, against the Director and an additional staff member were Not Sustained. A Violation of Policy/Rule for failing to complete required Protective Action Response (PAR) reports was Sustained against the Director.

### **IG 16-0049 Spring Lake Youth Academy**

A review of video surveillance showed a youth care worker engaged in horseplay with three youth. The investigation found that allegations of Use of Force and Failure to Report against two staff were Sustained.

### **16-0050 Paxen Community Connections**

A juvenile probation officer alleged that an employee gave a female youth a back and leg massage and exchanged text messages with her after the youth's release from the program. It was also alleged the Program Coordinator was cognizant of the text messaging and failed to make the appropriate notifications. The investigation determined the allegation of Improper Conduct was Not Sustained and the allegation of Failure to Report was Sustained.

### **IG 16-0051 Duval Academy**

The CCC was contacted by an anonymous person alleging a supervisor had sexual relations with two youths (PREA). The investigation determined the allegation of Sexual Abuse (PREA) against the staff member was Unfounded. There was a second allegation concerning a staff person improperly releasing confidential information. That allegation of Violation of Policy/Rule was Unfounded.

### **IG 16-0052 Martin Girls Academy**

A youth alleged that a staff member looked at her through her door window and gestured at her crotch. The youth then removed her clothing and exposed herself to staff. The allegation of Sexual Harassment (PREA) against staff was Unfounded.

### **IG 16-0053 Ft. Myers Youth Academy**

The Program Director called the CCC after a search of a youth's room led to the discovery of a love letter written to the youth by a staff person at the facility. There were indications that a physical relationship occurred as well. The investigation determined the allegation of Improper Conduct/Staff-Youth Relationship was Sustained.

### **IG 16-0054 Manatee Regional Juvenile Detention Center**

The CCC received notification that a Bradenton Police Department Officer was at the Manatee Regional Detention Center, regarding an allegation that a staff member was contacting a formerly detained, fourteen-year-old, female youth. The law enforcement investigation was closed with no evidence of a crime. The OIG investigation Sustained allegations of Improper Conduct/Staff-Youth Relationship, and Conduct Unbecoming a Public Employee, against a male detention officer.

### **IG 16-0055 Okeechobee Youth Treatment Center**

It was alleged a staff member found contraband; PREA complaints were not being reported; a nurse left a medicine cart unattended and a youth stole medication that was not reported. It was also alleged staff failed to protect youth from being bullied and staff hit youth after a fight. There were five allegations of Failure to Report that were Sustained, one allegation of Violation of Policy Rule and one allegation of Improper Conduct which were Sustained. Two allegations of Failure to report were Not Sustained and the allegations of Improper Supervision and Use of Force; Unnecessary were Unfounded.

### **IG 16-0056 Okaloosa Youth Academy**

The CCC was contacted regarding an allegation that a staff at the facility was having a sexual relationship with a youth (PREA). The youth had been released from the facility by the time the allegation was made. Contact with him through his father and mother was unsuccessful. The staff was interviewed and denied the allegation. The allegation of Sexual Abuse (PREA) was Unfounded.

### **IG 16-0062 Duval Academy**

An anonymous complainant alleged unnecessary force by two staff. An investigation determined that the allegations were false and were therefore unfounded. During the investigation, policy deficiencies addressing staff horse playing with youth were addressed. Additional allegations of improper supervision on two staff members were Sustained.

### **IG 16-0063 EEO Complaint**

The CCC was contacted by the EEO after a complaint of sexual harassment from a secretary was made against the Director of Support Services. The complaint stated that the Director made sexual comments and gestures towards her daily. During the investigation, several emails and text messages/photographs were reviewed and interviews conducted. The investigation was closed and forwarded to the EEO Board for action.

### **IG 16-0064 St. John's Youth Academy**

A staff member reportedly sent improper text messages, and video of herself nude, to a contraband cell phone recovered in the facility. The OIG investigation Sustained an allegation of Improper Conduct/Staff-Youth Relationship against the staff. No criminal charges were filed as the youth was 18 years old. A Violation of Policy/Rule was also Sustained against an additional female employee who had contacted the youth on Facebook.

### **IG 16-0065 Broward Girls Academy**

A detention supervisor alleged that in 2015, a youth formerly detained at the Broward Girls Academy, received gifts from a female staff and communicated with the staff through social media following her release from the program and staff failed to report the matter. The investigation determined the allegation of Improper Conduct/Staff-Youth Relationship was Not Sustained.

### **IG 16-0069 Gulf Academy**

A former administrator alleged that two former staff members brought contraband into the facility and provided it to youth (Not Sustained), and that one of the staff had an inappropriate relationship with a youth (Unfounded). It was further alleged that a regional director instructed administration not to report the allegations to the CCC (Not Sustained) and failed to report the allegations to the CCC (Sustained). During the investigation, additional allegations of failure to report and improper conduct against the former administrator were Sustained. The investigation further cited the lack of proper documentation in logbooks and reports.

### **IG 16-0070 Central Pasco Girls Academy**

An anonymous caller alleged that staff at Pasco Girls Academy unnecessarily strip searched youth. It was also alleged that staff has been passing notes, hugging, and possibly kissing youth. Furthermore, staff allegedly gave an electronic device to a youth for the youth to take pictures of herself for staff. Lastly the caller alleged that youth are afraid to report incidents due to staff being a relative of Assistant Facility Administrator. The investigation determined the allegation of Sexual Harassment (PREA) against staff was Not Sustained, Improper Conduct/Staff-Youth Relationship was Not Sustained, and Violation of Probation against two staff were Sustained.

### **IG 16-0071 Manatee Regional Juvenile Detention Center**

A juvenile detention officer alleged her supervisor sexually harassed her and created a hostile working environment for her. After an investigation, an Equal Employment Opportunity Resolution Panel determined there was No Cause.

### **IG 16-0072 Broward Youth Treatment Center**

This inquiry was initiated after a youth was found non-responsive in his bed and was subsequently pronounced deceased. The results of the inquiry found there was no evidence of any violations of policy or procedures by the supervising staff. Law enforcement also closed their investigation after it was determined the youth's cause of death was from natural causes.

### **IG 16-0074 Alachua Regional Juvenile Detention Center**

A youth escaped during transport to court. The youth was charged with escape and resisting arrest. An allegation of improper supervision against two staff members was Sustained.

### **IG 16-0076 Orange Regional Juvenile Detention Center**

A juvenile detention officer allegedly used excessive force against a youth. The investigation found the allegation of Use of Force – Excessive was Sustained.

### **IG 16-0077 Juvenile Probation Office**

A youth contacted administrators from her school, advising she had been receiving text messages from her JPO which made her feel uncomfortable. Investigation revealed there were 32 texts between them with some including flirting emoji's. The JPO also visited the youth at her home alone twice. Allegations for Violation of Policy/Rule (2 counts) and Improper Conduct against the JPO were Sustained.

### **IG 16-0078 Manatee Regional Juvenile Detention Center**

A female juvenile detention officer allegedly invited female youth, who were detained at the detention center, to visit her home after their release, and referred to the youth as "eye candy." The investigation found the allegation of Improper Conduct was Unfounded.

### **IG 16-0079 DJJHQ**

The Chief of Staff notified the CCC that he had been made aware the Director of Staff Development and Training (DSDT) was seen with an unauthorized passenger in a DJJ state vehicle. The investigation determined the allegation of Violation of Policy/Rule was Sustained.

### **IG 16-0080 Manatee Regional Juvenile Detention Center**

A youth alleged that the Assistant Detention Center Superintendent physically abused him and threatened to kill him during a transport back from court. Based on program video recordings and youth witness testimony, the allegations of Use of Force – Unnecessary, and Violation of Policy/Rule against the Assistant Superintendent were Not Sustained.

### **IG 16-0081 Okaloosa Youth Development Center**

The Program Director called the CCC after contraband was found in youth rooms during a routine search. The youth whose rooms where the contraband was found denied any knowledge of how it got there. The PD stated that she believed the contraband was introduced to the facility by a recently terminated Youth Care Worker. That YCW was interviewed and denied the allegation. The allegation of Improper Conduct was Unfounded.

### **IG 16-0082 Pasco Regional Juvenile Detention Center**

A detention officer alleged that her supervisor asked her out and attempted to kiss her. After an investigation, an Equal Employment Opportunity Resolution Panel determined there was No Cause.

### **IG 16-0084 Pinellas Regional Juvenile Detention Center**

Law enforcement reported a juvenile detention officer was communicating with a former youth, who was incarcerated at the Pasco County Jail. The investigation found several officers engaged in improper conduct with various youth. The investigation was closed with five Sustained findings of improper conduct, one Not Sustained finding of improper conduct, one Sustained finding of improper conduct/staff-youth relationship, and two Unfounded findings of unnecessary force.

### **IG 16-0085 Daytona Juvenile Residential Facility**

An anonymous email alleged that a staff used unnecessary force on a youth and a supervisor opened the door to allow the staff to enter the room to physically attack the youth. The investigation determined the allegation of unnecessary force against the staff was Sustained and Improper Conduct on the supervisor was Sustained. During the investigation, it was further determined that the supervisor and staff failed to complete a PAR Report. Violation of Policy against the staff and supervisor was Sustained.

### **IG 16-0086 Tampa Residential Facility**

An investigation was initiated after it was reported that a youth slipped out the back door, climbed over a fence, and escaped the facility. During the escape, the youth damaged two vehicles in the process. The allegation of Improper Supervision against the supervising staff was Sustained.

### **IG 17-0001 Duval Academy**

The CCC was contacted regarding three photographs of a staff member cuddling and kissing a former youth. The photographs were on the staff member's Facebook page. The investigation determined the allegation of Improper Conduct/ Staff-Youth Relationship was Sustained. Additionally, another staff member had contact with the youth via text messages. An allegation of Improper Conduct against that staff member was Sustained.

### **IG 17-0002 Okaloosa Youth Academy**

The PD called the CCC after he was informed by the Department of Children and Families that they had received information that a YCW at the facility was having an inappropriate relationship with a youth. Both the YCW and the youth were interviewed. Both denied the allegation. The allegation of Improper Conduct/Staff-Youth Relationship was Unfounded.

### **IG 17-0003 Spring Lake Academy**

It was alleged a staff member at Spring Lake Academy paid to have youth beat up other youths; brought in contraband, unfairly wrote behavior reports; and engaged in a sexual relationship with a youth. The investigation determined the allegation of Improper Conduct was Unfounded, Violation of Policy/Rule was Sustained and Sexual Abuse (PREA) was Not Sustained.

### **IG 17-0004 St Johns Academy**

The Mother of a youth alleged that after her son's release, staff from the facility engaged in inappropriate conversations and provided pornographic pictures to her son. The investigation resulted with the allegation of violation of policy against three staff being Sustained and one staff was Not Sustained for engaging in conversation on Facebook with the youth. An allegation of improper conduct was Unfounded. Additionally, an allegation of failure to report on the youth's JPO was Not Sustained.

### **IG 17-0005 Bay Regional Juvenile Detention Center**

The CCC was contacted after a youth reported that he had sex with a Juvenile Detention Officer after his release from the facility. It was also alleged that the same JDO had sex with another youth after his release. The incidents were investigated by the law enforcement, resulting in the JDO being charged with six counts of Unlawful Sexual Activity. The allegations of Improper Conduct/Sexual Nature (2 counts) were Sustained.

### **IG 17-0006 Orange Regional Juvenile Detention Center**

A juvenile detention officer alleged improper supervision by other staff, improper conduct by two supervisors, and sexual harassment. The complainant also alleged a supervisor failed to perform her duties. The investigation was closed with two Unfounded findings regarding improper supervision, two Unfounded findings regarding improper conduct, and an Unfounded finding of violation of policy/rule. Allegations of violation of policy/rule against three supervisors were Not Sustained.

### **IG 17-0007 Prevention & Victim Services**

The Assistant Superintendent for Prevention & Victim Services alleged that a member of the Headquarters staff may have falsified timesheets. The investigation determined that the allegation of Falsification was Unfounded and the allegation of Violation Policy/Rule was Sustained.

### **IG 17-0008 Bay Regional Juvenile Detention Center**

The CCC was contacted after a youth reported that a JDO had asked for a hug and that during the hug the JDO reached down and grabbed his crotch. The youth in question refused to be interviewed for the investigation. The JDO was interviewed and denied the allegation. The investigation determined the allegation of Sexual Abuse (PREA) was Unfounded.

### **IG 17-0009 Spring Lake Youth Academy**

A review of video surveillance showed a youth care worker allegedly using excessive force on a youth. The investigation found the allegation of Use of Force – Excessive against the staff was Sustained.

### **IG 17-0010 Okeechobee Youth Development Center**

It was alleged that two unidentified female staff members engaged in sexual intercourse with youth. Additionally, other staff were cognizant of the allegation and failed to make the appropriate notifications in a timely manner and failed to prevent further contact between the two. The investigation determined the allegations of Sexual Abuse - Prison Rape Elimination Act (PREA) was Not Sustained, Failure to Report was Not Sustained, and Improper Conduct was Unfounded.

### **IG 17-0011 Central Detention Region and Hillsborough West Regional Juvenile Detention Center**

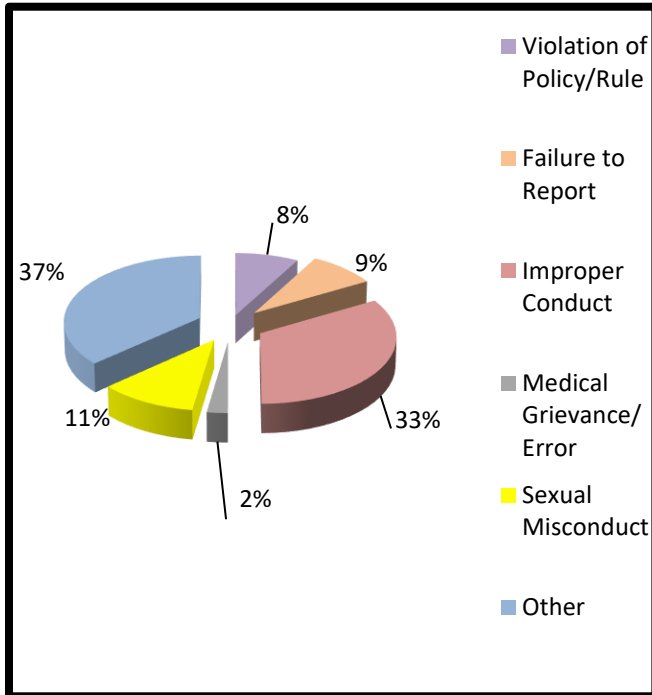
A former staff alleged the regional director and regional staff bullied detention center superintendents; detention and regional management failed to take disciplinary action against detention staff; and a staff member was given the interview questions prior to her interview for the position of assistant superintendent. The investigation was closed with three Unfounded findings of Improper Conduct, one Sustained finding of Improper Conduct, and one staff was Exonerated of alleged Improper Conduct.

### **IG 17-0012 Okeechobee Intensive Halfway House**

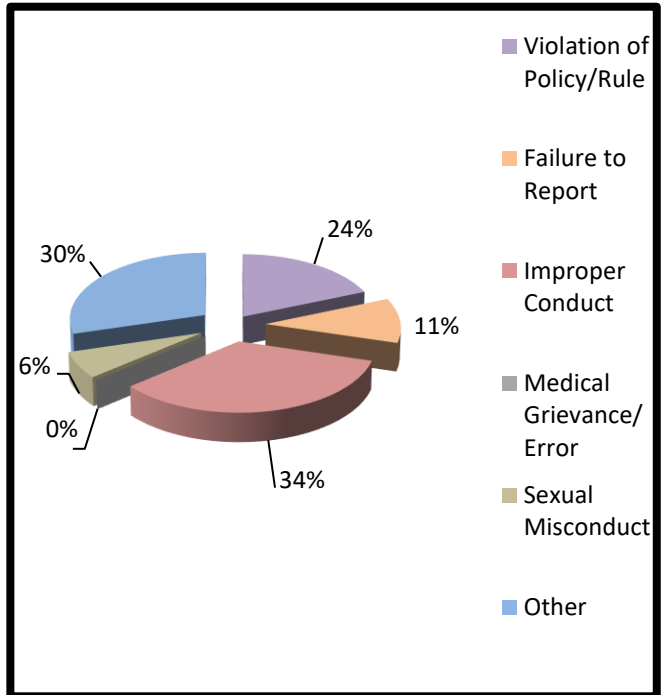
The CCC was contacted regarding a youth alleging he inappropriately touched a female staff member (PREA) during therapy sessions. The investigation determined the allegation of Sexual Abuse (PREA) against the staff member was Unfounded.

## Sustained Findings by Type

2015 - 2016



2016 - 2017



## Facility Surveys

To ensure DJJ detention centers and residential treatment programs operate in accordance with established procedures and contract requirements, the Office of Inspector General conducts unannounced site surveys to DJJ facilities on a regular basis. During these surveys, the OIG examines the facility's overall condition and operations, security of the facility, youth safety, care and living environment, staffing levels, and interviews the staff and youth. A report of the survey documenting significant findings regarding the facility, is issued to the DJJ Secretary and appropriate senior staff for follow-up action, as required. During the 2016-2017 reporting period, the OIG conducted 41 facility surveys throughout the state.



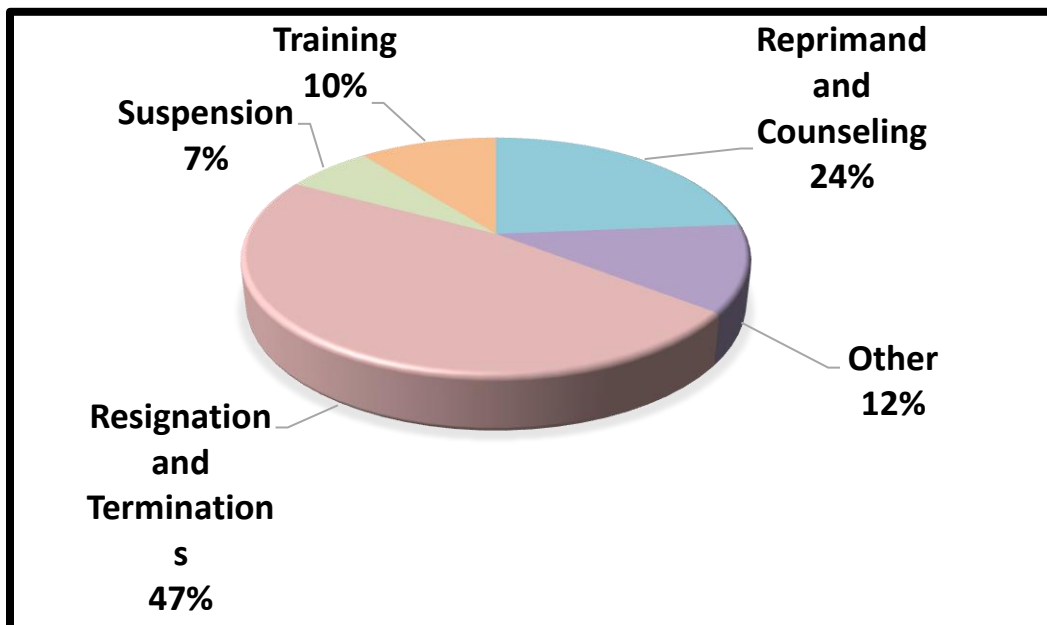


## Categorization of Investigations/Inquiries Closed

	Total	Exonerated	Sustained	Not Sustained	Unfounded	Substantiated Allegations as Percentage of Total
Arrest of Staff	0					0%
Disturbance	0				0	0%
Failure to Report	27	0	20	6	1	74%
Falsification	3	0	2	0	1	67%
Force, Excessive	7	0	4	3	0	57%
Force, Unnecessary	18	0	3	4	11	17%
Harassment/Discrimination	1	0	1	0	0	0%
Harassment/Hostile Work Environment	1	0	0	0	1	0%
Improper Conduct	61	2	13	21	25	21%
Improper Conduct/Conduct Unbecoming a Public Employee	1	0	1	0	0	0%
Improper Conduct/Sexual Nature	2	0	0	0	2	0%
Improper Conduct/Staff on Staff Relationship	3	0	1	0	2	33%
Improper Conduct/Staff-Youth Relationship	12	0	7	5	0	58%
Improper Search	1	0	0	1	0	0%
Improper Supervision	33	0	22	3	8	67%
Improper Use of Force	2	1	1	0	0	0%
Medication Error	0					0%
Misconduct	0					0%
PAR Restraint, Staff Injury	0					0%
PAR Restraint, Youth Injury	0					0%
Policy Deficiency	1					0%
Sexual Abuse (PREA)	14	0	1	4	9	7%
Sexual Harassment (EEO)	1	0	0	0	1	0%
Sexual Harassment (PREA)	1	0	0		1	0%
Sexual Misconduct (PREA)	0					0%
Other Facility Violation	0					0%
Threats By Staff	0					0%
Violation of Policy/Rule	46	0	19	20	7	41%
<b>TOTAL</b>	<b>235</b>	<b>3</b>	<b>95</b>	<b>67</b>	<b>69</b>	<b>40%</b>
Source: OIG Database						

## Disciplinary Actions

July 1, 2016 – June 30, 2017



## Incident Operations Center

The DJJ OIG established the Central Communications Center (CCC) in December 1994, which at that time was known as the Incident/Complaint Hotline. The Incident/Complaint Hotline was maintained by the DJJ OIG from December 1994 until July 2004, when it was assigned to Residential and Correctional Services. In June 2006, the CCC was reassigned to the OIG pursuant to Chapters 5 and 9, Florida Statutes. In September 2013, the department created the Incident Operations Center (IOC), housed under the OIG, to oversee the management of all reported incidents. The CCC was subsequently absorbed as a component of the IOC. The IOC is responsible for the management of all reported incidents including monitoring action taken by DJJ providers, including State-owned and operated facilities, after the resolution of incidents reported through the Central Communications Center (CCC) or the Office of Inspector General (OIG). The unit is also responsible for trend analysis and the daily review and assignment referrals of incidents accepted by the CCC. The IOC provides information to DJJ to assist in maintaining a safe environment for the treatment and care of youth in department programs.

### Operational Hours and Procedures

In October 2010, Florida Administrative Code 63F-11 was adopted into law. This rule requires both department staff and contract provider staff to report certain prescribed incidents to the CCC within 2 hours of the occurrence or knowledge of the occurrence. Incidents are called into a toll-free telephone number 7-days a week, 365 days per year. The rule was modified in August 2016 to include additional reportable requirements.

This process guarantees receipt of incidents by the duty officers as all incidents are deemed critical to department operations, thereby necessitating expedited reporting. The duty officers simultaneously enter reported incidents into the CCC Tracking System, which is a specialized management information tracking system. Once incidents are entered into the CCC tracking system notification is sent to the Secretary, Branch Representatives, and the OIG for assignment and response. In May 2014, FDJJ Policy 2020 was implemented to further define the roles of the IOC and the CCC. This policy was updated in April 2016 to incorporate move of the Management Review Unit to the OIG. The IOC is staffed by an IOC Director, CCC Supervisor, IOC Analysts, and Duty Officers

The following are some of the reportable incident types:

- Youth Deaths
- Staff Arrests
- Escapes from Secure Facilities
- Life-threatening Youth Injuries
- Disturbances
- Display/Use of Deadly Weapons
- Staff and Youth Sexual and Romantic Relationships
- Theft of Staff/Youth Owned Property
- Alleged Improper Use of Force and Abuse
- Medical/Mental Health issues including unscheduled medical transports

### **Central Communications Center Data System**

A daily report is generated from the CCC Tracking System and e-mailed each workday to the OIG, Secretary, and various department representatives to notify them of incidents received within the prior 24-hour period. Additionally, a second report is generated the following day documenting the action taken regarding the reported incident. The CCC tracking system allows the DJJ OIG and various branches to assign incidents, track the findings and corrective actions, and to close incidents without generating a paper report. The department implemented a new CCC Tracking System in April 2017 which established one centralized location for all program reviews, management reviews, and IG investigations/inquiries to be tracked. The system will allow for greater information gathering and sharing, data analysis, and work flow tracking.

### **Other IOC Functions**

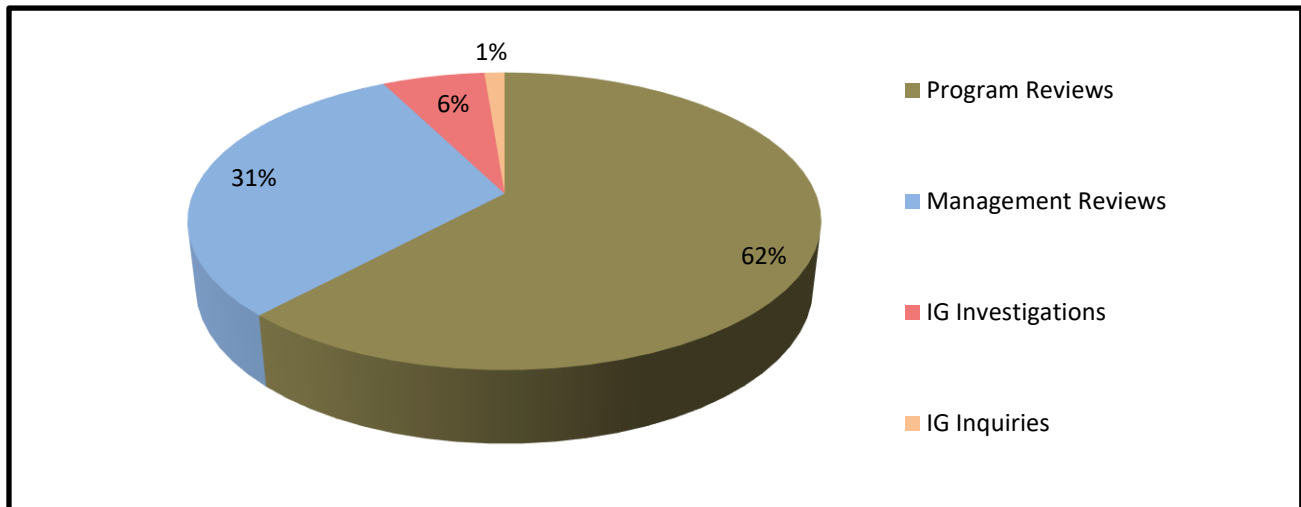
In addition to answering telephone calls, entering incidents into the CCC system, and making daily referrals to the program areas regarding received incidents, the IOC employees also perform the following functions:

- Provide assistance for all public records requests for all CCC related incidents;
- Assist in resolving employment issues by researching missing disposition information or any discrepancies with an employee's CCC incident history;
- Assist the program areas with any CCC incident changes, updates or assignments within the system
- Scan and attach any documents related to a CCC incident into the system;
- Review and input any Abuse Registry Investigations or FSN notifications received via fax/e-mail into the CCC system;
- Provide statistical data;
- Provide technical assistance to OIG Inspector Specialists and other program areas by researching the voice recording system and making the telephone recording available for viewing;
- Provide program areas with trend analysis;
- Provide initial training for Program Reviews and Managements as well as ongoing supplemental training;
- Conduct a Quality Check of all OIG investigations and inquiries as well as all management and programs reviews to ensure compliance with FDJJ Policy 2020;
- Verify staff arrests using CJIS; and,
- Provide customer service assistance and guidance to citizens who need department services.

## Accomplishments and Statistical Data

- Approximately **8,385** calls were received by duty officers.
- Duty officers entered a total of **4,882** reportable incidents into the CCC tracking system. The majority of these incidents dealt with medical issues (**2,047**), complaints against staff (**1,179**), and youth crimes while under supervision (**532**).
- Approximately **7,272** classifications were assigned to the incidents for appropriate processing and closure. Some incidents are assigned multiple classifications based on the nature of the incident. The top five classifications were Medical Transport (**923**), Improper Supervision (**564**), Media Attention (**488**), Violation of Policy/Rule (**454**), Abscond – Pre-Placement (**355**).
- A total of **974** incidents were assigned for either a review or investigation. This number comprises **603** Program Reviews, **298** Management Reviews, **61** IG Investigations, and **12** IG Inquiries.
- Revised FDJJ Policy 2020 defining the IOC and the roles of the program areas in regard to incident management.
- Began working on revisions to CCC Rule 63F-11
- Obtained approval to create a new CCC database to affect the requirements of FDJJ 2020. Held numerous one-day trainings throughout the State to train additional staff as Management Reviewers and Program Reviewers.

### **Incidents Assigned for Investigation or Management/Program Review**



## Background Screening Unit

The Background Screening Unit (BSU) is located in the Inspector General's Office. Its purpose is to assist the Department in meeting statutory and agency background screening standards for employment. The BSU conducts Level II employment background screenings pursuant to Chapters 435, 984, and 985 of the Florida Statutes (F.S.) and the Department's background screening policy and procedures. Background screening is performed on all state and contract provider directors, owners, employees, volunteers, mentors, and interns.

### Background Screening Process

Employment background screenings must be completed before an applicant is hired or a volunteer is utilized by the Department or a Department contract provider. Background screening consists of a criminal records check that is processed through the Florida Department of Law Enforcement (FDLE) and the Federal Bureau of Investigations (FBI) using the applicant's fingerprints. It also consists of a demographic search through the Judicial Inquiry System (JIS), a Clerk of the Courts Information System (CCIS), which collects and displays records that are stored in courthouses throughout the State of Florida. As a criminal justice agency, the Department has access to juvenile, sealed, and expunged criminal history information.

### Screening Types

**Livescan** (Department and Clearinghouse) is the initial screening required for potential employees and volunteers. This process allows the applicant's fingerprints to be electronically transmitted to the FDLE and the FBI, processed within 72 hours and returned to the BSU via electronic mail. The FDLE also has the ability to send an electronic notice to the BSU when a state or contract provider employee or volunteer receives a new arrest within the state of Florida.

The **5-Year Rescreen** is a national criminal records check that must be completed by all state and contract provider employees and volunteers every five years of continued service. The five-year increments are calculated from the employee's or volunteer's initial hire or service date. The purpose of rescreening is to ensure that current employees and volunteers maintain level II screening standards throughout the term of their employment and/or service.

### Ratings Process

Background screenings are rated using one of the following determinations: Eligible, Identified/Non-Caretaker Only, and Ineligible. These determinations are based on the criminal history and the position the applicant will occupy.

Applicants will receive an **eligible** rating when no disqualifying criminal conviction or no contest plea appears on the criminal record. Applicants with an eligible rating may be immediately hired or utilized by the Department or a contract provider in any position.

Certain DJJ applicants for state employment will receive an **identified/non-caretaker only** rating. This rating is applied when a disqualifying criminal conviction or no contest plea appears on the criminal record, but the person will not work in a position that has access to confidential youth records or on the grounds of a facility or program where youth are housed or receiving services. This rating will only be given to DJJ applicants for state employment and **is not** given to contract provider employees or volunteers. Applicants with this rating can only be hired in a position and at a location where there is no contact with youth or access to confidential youth records.

Applicants will receive an **ineligible** rating when a conviction or no contest plea for a disqualifying criminal offense appears on the criminal record. Applicants with this rating cannot be hired or utilized as a volunteer until an exemption from disqualification has been granted by the Department. To receive an ineligible rating, an applicant must have either been found guilty of, pled guilty to, had adjudication withheld, or pled no contest to at least one of the charges listed in Chapters 435.04 or 985.644, F.S.

## **Exemption From Disqualification**

The exemption from disqualification is a review process that was created to allow most applicants that receive an ineligible rating to be reconsidered for employment or as a volunteer. As set forth in Chapter 435, F.S., exemptions may be granted for a misdemeanor disqualifying offense as soon as the person has lawfully completed all sanctions. However, the Department may not grant an exemption from disqualification for a felony offense, until it has been at least three (3) years since the applicant completed or was lawfully released from confinement, supervision, or sanction for the disqualifying offense. An exemption from disqualification cannot be granted to any person who is a sexual predator as designated pursuant to section 775.21, F.S., a career offender pursuant to section 775.261, F.S., or a sexual offender pursuant to section 943.0435, F.S., unless the requirement to register as a sexual offender has been removed pursuant to section 943.04354, F.S.

The Secretary decides on behalf of the Department if an exemption should be granted or denied. Exemptions denied by the Secretary can be reconsidered by requesting a formal hearing with the Division of Administrative Hearings (DOAH) pursuant to section 120.57, F.S.

## **Other BSU Functions**

In addition to conducting employment background screenings, the BSU performs the following functions:

- Provides training on the Department and Clearinghouse screening process
- Conducts criminal history checks to assist in agency investigations and inquiries
- Coordinates the initial phase of the exemption process
- Reviews personnel records for incidents of physical or sexual abuse, excessive force, and misconduct
- Informs programs of employee arrests
- Provides out-of-state driver's license notifications
- Creates user accounts and manuals
- Maintains policies and procedures
- Processes background screening payments
- Conducts retention notification, removal and billing
- Corresponds with law enforcement agencies and court clerks throughout the United States
- Scans completed screening documents into an archival database for future reference and access
- Responds to telephone, fax, and e-mail inquiries

## **Statistical Data**

- **11,572** employee background screenings were conducted
- **\$64,051.55** in fingerprint processing fees and fingerprint retention fees were collected
- **380** credit card transactions and **878** checks were processed
- **166** applicants failed to submit additional information or were withdrawn by the requester and **491** applicants were statutorily disqualified, resulting in a total of **657** applicants who did not clear the screening process
- **79** applicants requested an exemption hearing for a statutorily disqualified offense appearing on their record during the criminal background check
- **506** arrest notifications were received and processed
- **11,572** record searches were conducted in the Inspector General Incident Tracking system
- Approximately **57,860** pages of documents were scanned into the BSU archival database
- Approximately **13,520** customer calls/faxes and e-mail inquiries were serviced

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