## **Florida Department of Juvenile Justice**

Simone Marstiller, Secretary

# Office of Inspector General 2019 Annual Report



## **Robert A. Munson, Inspector General**

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## **Department of Juvenile Justice**

## **Office of Inspector General**

Annual Report for Fiscal Year 2018-2019

## 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 Integrity Accountability Teamwork Professionalism Excellence Communications

## **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.

## **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.

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



## **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<sup>,</sup> 2015. The Accreditation was valid for a period of three years.

In June 2018, the Bureau of Investigations was awarded re-accreditation by the Commission for Florida Law Enforcement Accreditation. This re-accreditation will be valid through June 2021.

## **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.

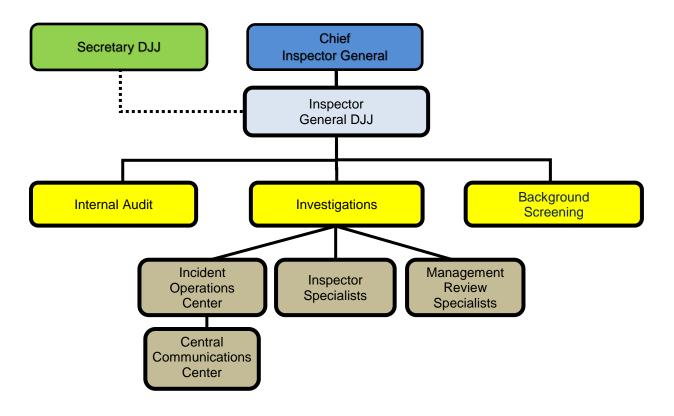
### **Historic Overview**

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 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 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; serious breaches in the safety and security of youth and staff; or are indicative of unaddressed systemic issues. For the 2018-2019 fiscal year, the MRU conducted and closed 143 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 Association of Certified Fraud Examiners American Society for Industrial Security Institute of Internal Auditors, Inc. Association of Inspectors General Florida Audit Forum

### **Staff Development**

Continued professional staff development is essential to the OIG. During FY 2018-2019, 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 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 numerous 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 Auditor	2
Certified Inspector General	1
Certified Inspector General Investigator	11
Certified Public Manager	3
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. The bureau's staff is composed of an Audit Director, an Operation Review Specialist, and two Management Review Specialists (Senior Auditors).

## Audit Responsibilities

Pursuant to section 20.055(6), 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 this fiscal year, the Bureau of Internal Audit completed major audits, reviews and projects of the following:

- Four compliance and performance audits;
- Five follow-up reviews to internal audits; and
- 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 Detention Food Services



Detention Services facility procedures require detention facilities to provide meals to detained youth that are nutritionally balanced, well planned, and of sufficient quantity and quality to meet the needs of detained youth. During Fiscal Year 2017-18, the Department expended approximately \$5,558,000 for food services. The Department also participates in the National School Lunch Program (NSLP) which is administered by the Florida Department of Agriculture and Consumer Services (FDACS). The NSLP is a federally funded program that assists schools and other agencies in providing nutritious lunches to children at reasonable prices. The Department was reimbursed approximately \$2,062,992 (Fiscal Year 2017-18) from FDACS for meals served to youth. Also, the U.S. Department of Agriculture (USDA) provides donated commodity foods to the Department that are used in preparation of youth meals. In Fiscal Year 2017-18, commodity foods received from the USDA were valued at approximately \$200,530.

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

- meals claimed for reimbursement from the National School Lunch Program are served only to youth eligible for those meals;
- there is a system in place to ensure that meals claimed for reimbursement from the National School Lunch Program yields accurate claims;
- food purchases are accounted for, necessary, reasonable, and adequately documented; and
- the Detention Food Services Program is operating in accordance with selected federal grant requirements and Department policies and procedures.

The audit disclosed that, in our opinion, Detention Food Services complied in all material requirements of the National School Lunch Program and Department policies and procedures; however, we identified opportunities to improve internal controls related to food safety and the meal count process. Specifically, we found:

- A Food Service Director's ServSafe Certification had expired (January 15, 2019). Detention Services policies and procedures require Food Service Directors to maintain ServSafe Certifications. We recommended Detention Food Services implement a tickler system or a similar process to ensure compliance with policies and procedures;
- One facility had not posted its most recent food safety inspection report as required by federal regulations; once notified of the oversight, the facility immediately posted the inspection report. We recommended that Detention Food Services comply with federal regulations pertaining to food safety inspections; and

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• We found weaknesses at the time of meal distribution/point of service process at one facility; it should be noted that the facility took immediate corrective actions based on recommendations from the Statewide Food Service Coordinator; a subsequent observation of the meal count process was well organized and efficient. To ensure compliance with federal regulations, we recommended that a staff member independent of Detention Food Services conduct an unannounced follow-up review of the meal count process at this facility.

#### **Audit of Detention Security**

Detention security is the process to ensure the protection of youth within the Department's custody, Detention employees, and contracted staff. This process includes:

- Security audits;
- Security devices; such as CCTV, lighting, radios, cellular phones, recording devices, electronic controls, metal detectors, mechanical restraints, fencing hardware cloth, razor wire, and sally ports;
- Master Control maintaining chronological documentation of all activity;
- Communication amongst officers;
- Key control;
- The location and movement of all youth;
- Visual observation reports when youth are confined to a room;
- Review of alerts regarding youth;
- Staff positioning for optimum sight and sound supervision;
- Contraband searches;
- Disposal of contraband;
- Criminal gang knowledge;
- Reporting disturbances to the Central Communication Center;
- Plan for hostage situations;
- Overcrowding contingency plan;
- Firearm and weapon control;
- Training on emergency situations;
- Escape attempt procedures; and
- Vehicle searches prior to youth transportation to and from a facility.

The overall objectives of this audit were to assess how effectively Detention's security policies are being implemented, identify where vulnerabilities might exist in current security procedures, and if applicable, determine what issues are influencing non-compliance. The audit focused on Detention security operations from July 1, 2017, through June 30, 2018, and related activities through the end of fieldwork.

The audit disclosed that, in general, the Department had effectively implemented Detention security policies and procedures that complied with Florida Statutes, Florida Administrative Codes (F.A.C.), and Facility Operating Procedures (FOP). However, we noted the following areas for improvement:

- Key control is inefficient;
- All volunteer background screenings or rescreens were not available or there was not a current list of volunteers to verify background screenings; and
- Security/Safety Quarterly Facility Inspections were missing.





#### We recommended the Department:

- Develop and implement a streamlined standard procedure for issuing keys across all facilities that would alleviate duplication and diminish master control's obligations;
- Retrain on volunteer screening requirements and revise the FOP; and
- Ensure all facilities are being inspected on a quarterly basis.



#### **Audit of Health Services Operations**

The Office of Health Services (OHS) is responsible for assisting the Department with the oversight of medical, mental health, substance abuse, and developmental disability services to youth in the Department's care. The Office of Health Services provides clinical technical assistance, administrative rule and policy development, contract enhancement, standardization and monitoring, staff training and support, legislative support, quality assurance standards for health, mental health/substance abuse services, parental assistance, research and resource assistance, and inter-agency collaborations.

The audit focused on Health Services operations from July 1, 2017, through June

30, 2018, and related activities through the end of fieldwork. The audit disclosed that, in general, the Office of Health Services (OHS) had complied with Florida Statutes, Florida Administrative Codes, and Department policy. However, we noted the following areas for improvement:

- The oversight role of OHS was not clearly defined;
- OHS had not implemented policies and procedures to govern their oversight processes;
- The Electronic Medical Records (EMR) System did not include youth in residential programs;
- OHS did not always timely verify deficiencies in the Program Monitoring and Management (PMM) system in accordance with Department policy FDJJ-2000; and
- Department policy FDJJ-2000 needs improvement.

We recommended the Department:

- assess the level of risk it is willing to accept regarding OHS' clinical oversight currently limited to Detention facilities, but not present in Residential and Probation programs; and define the official oversight role of OHS in writing;
- develop and implement procedures that clearly outline OHS operating processes, including benchmarks that establish timeliness and accuracy, to better assess operational efficiency and effectiveness;
- continue advancing the Electronic Medical Record (EMR) across all program areas and ensure Department technology support staff are available 24/7 to reset passwords for the EMR system to ensure youths' medical and mental health/substance abuse records are continuously available and up-to-date;
- ensure OHS staff conduct deficiency verification reviews in accordance with Department policy FDJJ-2000 guidelines and that OHS management implement control mechanisms to ensure compliance with Department policy FDJJ-2000 guidelines; and
- revise policy FDJJ–2000 to address OHS protocols that prevent them from fully complying with the current policy, define the timeframe for the escalation process from a minor to a major deficiency, and allow for the confirmation of a timely deficiency review and approval beyond the first verification.



### Audit of Residential Maximum-Risk Programs

The Office of Residential Services (Office) provides continued care for a youth who is committed to the custody of the Department. In Florida, all residential commitment programs are operated by private providers under contract with the Department. Each program is monitored regularly and evaluated through the Department's Bureau of Monitoring and Quality Improvement, and by Contract Managers. Unlike the adult correctional system, each youth in a residential commitment program must receive educational and vocational services. Additionally, as one of the requirements for release, each committed youth must complete an individually-designed treatment plan based upon his or her rehabilitative needs. Consequently, committed youth also receive behavioral health, mental health, substance abuse and sex offender treatment services based on the youth's identified needs.

The audit disclosed that, in general, youth committed to maximum-risk residential programs are secure, safe, and receiving services in accordance with established rules; and that oversight measures implemented by the Department are effectively ensuring that provider programs are properly staffed, and that services provided meet the needs and safety of committed youth. However, we noted the following areas for improvement:

- Medical drills required by Department contracts with residential program providers were not consistent with drills required by the Florida Administrative Codes (F.A.C.); were not always conducted; and were not monitored by Department personnel;
- Intercom capability at sally ports and secure pedestrian gates was not always maintained in working order;
- Facility Master Control Continuous Logbook entries did not always capture required information, and Visitation Logbook entries were sometimes incomplete;
- Shift reports were not always completed; some shift briefing sign-in sheets were missing; and shift briefing reports did not appear to be maintained in the living units for 48 hours, as required;
- Controlled Observation forms were not always completed; in some cases, the Observation Safety Check form or the Health Status Checklist were missing; and documentation was not always timely reviewed;
- Youth Individual Management Records contained documents and assessments that were not always timely developed, administered, or completed;
- Not all facilities maintained critical identifying information for each youth in an administrative hard-copy file; and
- The Department oversight of Facility Security Audit and Safety Inspection Reports needs improvement.

We recommended the Department:

- Revise the Monitoring and Quality Improvement (MQI) Standards for Residential Services Programs to incorporate the medical drills required by the Department's Residential Program contracts;
- Develop and implement measures that will provide appropriate oversight of all maximum-risk program security and safety items listed in F.A.C. 63E-7.013(1)(d);
- Develop and implement training on logbook entry requirements geared specifically for the provider's staff responsible for managing the facility's master control logbook.
- Remind program providers of the importance of accurate, complete shift reports and the specific guidelines for maintaining these reports in the living units for up to 48 hours; and continue to monitor compliance in accordance with MQI Standards for Residential Services Programs;
- Remind program providers of the importance of completing and maintaining control observation reports; and continue to monitor compliance in accordance with MQI Standards for Residential Services Programs;
- Remind program providers of the F.A.C. 63E-7 guidelines pertaining to: youth Individual Performance Plans (IPPs); youth performance summaries; and RPACT assessments and reassessments; and the importance of retaining all youth documentation; and continue to monitor compliance in accordance with MQI Standards for Residential Services Programs;

- Request residential program providers develop and maintain an administrative hard-copy of critical identifying information on committed youth; and amend MQI Standards for Residential Services Programs to incorporate review of the administrative hard-copy file of critical identifying information for committed youth; and
- Temporarily split the Central Region Residential Facilities security audit and safety inspection responsibility equally between the North and South Region's Security and Safety Specialist positions until a Security and Safety Specialist position is established in the Central Region; and establish a uniform tracking system for monitoring submitted Facility Security and Safety Inspection Reports.

## **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 five internal audits (no external audit follow-up was due in this fiscal year). The bureau issued the following follow-up review reports:

- Follow-up on the Audit of General Counsel Operations;
- Follow-up on the Audit of IT Network Security;
- Follow-Up on the Audit of Detention Security;
- Follow-Up on the Audit of Probation Day Treatment; and
- Follow-Up on the Audit of Facility Services.

## **Other Activities**

#### The Florida Single Audit Act

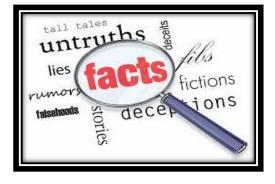
The Florida Single Audit Act (FSAA) was enacted in 1998 by the Florida Legislature to establish uniform State audit requirements for non-state entities expending State financial assistance equal to or in excess of \$750,000. The bureau responded to the Department of Financial Services on behalf of the 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.



## **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 address 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 2018-2019, the Bureau of Investigations assigned **86** complaints for Investigation, Inquiry, Referral to Management or other appropriate attention.

The Bureau of Investigations closed **69** investigations in fiscal year 2018-2019. Some of these investigations consisted of multiple allegations. The total number of allegations investigated during the period was **197**. Of the allegations investigated **63** were Sustained, **56** were Not Sustained, **74** were Unfounded, and **4** were Exonerated.

The Bureau of Investigations closed **21** inquiries in fiscal year 2018-2019. The total number of allegations investigated through inquires was **21**. Of these allegations, **21** were Administratively Closed.

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

## **Summary of Investigations**

#### 2018-00194 Walton Academy for Growth and Change

A Juvenile Probation Officer, who was a member of a regional gang task force, notified the CCC that two employees at the Walton Academy for Growth and Change were alleged members of a criminal gang. Following an investigation, the allegation of Improper Conduct against one employee was Unfounded and the allegation of Improper Conduct against the other employee was Not Sustained.

#### 2018-00409 Miami Regional Juvenile Detention Center

It was alleged a juvenile detention officer supervisor falsified documents at the direction of her superiors. An allegation of Falsification was Not Sustained; an allegation of Violation of Policy/Rule was Sustained; and two other allegations of Violation of Policy/Rule were Not Sustained.

#### 2018-01457 Okeechobee Youth Treatment Center

An anonymous caller reported several concerns and allegations against Okeechobee Youth Treatment Center, Facility Administrator and unknown staff. The investigation was closed with the following findings: Falsification against staff was Unfounded; Improper Conduct against staff was Unfounded; Improper Supervision against (2) staff was Unfounded and Use of Force – Unnecessary against an Unknown Staff was Unfounded.

#### 2018-01496 Okeechobee Intensive Halfway House

It was alleged that a youth care worker falsified 10-minute checks and numerous instances wherein youth were left unsupervised by staff for several minutes. Four allegations of Improper Supervision were Sustained, one allegation of Violation of Policy/Rule was Sustained, and one allegation of Falsification was Sustained.

#### 2018-01551 Okeechobee Sex Offender Facility

A youth at the facility alleged that three staff were intimidating other youth for talking with him, and he was being targeted because of his sexual orientation. An investigation determined that two of the allegations of Improper Conduct were Unfounded, and one allegation of Improper Conduct was Not Sustained. The youth further alleged that five staff allowed youth under their supervision to slap box and that three of those staff were slap boxing and horse playing with the youth. The investigation determined that five allegations of Improper Conduct were Unfounded.

#### 2018-01674 Okeechobee Intensive Half Way House

An anonymous complainant alleged a youth was subjected to excessive force during a PAR restraint incident and was coerced into not reporting the abuse to the State Abuse Registry. Based on program video, statements by the victim youth, staff witnesses, and subject staff member, an allegation of Use of Force – Unnecessary was Sustained against the subject staff member. However, there was no evidence indicating the youth was coerced to prevent him from reporting abuse.

#### 2018-01692 Dade Youth Academy

It was alleged staff offered snacks to youth in the program to assault other detainees, which resulted in one youth sustaining facial injuries. It was also alleged that staff denied youth abuse calls. An investigation resulted in the following findings: Not Sustained regarding the allegation of Improper Conduct against two staff, Not Sustained as to the allegation of Violation of Policy/Rule against three staff and Sustained against one employee.

#### 2018-01759 Okeechobee Youth Treatment Center Substance Abuse

The mother of a youth alleged a female staff member engaged in sexual activity with her son at the facility and provided him with contraband. The allegation of Sexual Abuse (PREA) was Unfounded; however, an allegation of Improper Conduct was Sustained against an unknown staff member. Allegations of Improper Conduct against a known staff member and a former staff member were Not Sustained.

#### 2018-01833 St Johns Youth Academy

A youth alleged another youth in the facility had engaged in sexual acts with a Youth Care Worker (YCW). It was also alleged that a male YCW brought contraband into the facility. The allegation of Sexual Abuse (PREA) and one allegation of Violation of Policy/Rule were Not Sustained. However, another allegation of Violation of Policy/Rule was Sustained.

#### 2018-01886 Palm Beach Youth Academy

A youth alleged that while he was detained at Palm Beach Youth Academy, he had a platonic relationship with a female staff member from December 2017 through January 2018, and that following his release, his relationship with the staff continued and became sexual. During the investigation, the youth denied the allegation as did the former employee. The allegation of Sexual Abuse (PREA) against staff was Not Sustained.

#### 2018-01950 Southwest Florida Regional Juvenile Detention Center

It was alleged a juvenile detention officer showed favoritism towards a youth and following the youth's release, the youth spent the night at the officer's home. During the investigation it was alleged several staff were made aware of the possible relationship but failed to report it. The investigation yielded a Sustained finding for Improper Conduct and five Substantiated findings for Failure to Report. There was no evidence to indicate any sexual activity occurred.

#### 2018-02091 Pinellas Regional Juvenile Detention Center

A publicly available law enforcement report indicated a juvenile detention officer had been engaged in a personal relationship with a former youth, who had been detained at the center. An allegation of Improper Conduct/Staff-Youth Relationship was Sustained. There was no indication any inappropriate physical activity occurred while the youth was detained at the facility.

#### 2018-02262 Okaloosa Youth Academy

A youth at the facility reported that a youth care worker allowed him to fondle her breasts. The allegation of Sexual Abuse (PREA) was subsequently Not Sustained.

#### 2018-02347 Palmetto Youth Academy

A youth alleged sexual abuse against a staff member who had reportedly touched his genitals and slapped him on the buttocks. The staff member also tried to choke him unconscious during a PAR restraint. Surveillance video showed no evidence of sexual abuse as described by the youth. However, video showed the subject staff had improperly restrained the youth during a PAR incident. Therefore, an allegation of Use of Force – Improper, was Sustained against the staff.

#### 2018-02498 Orange Regional Juvenile Detention Center

A youth alleged that staff had been verbally and physically abusing her. The youth also alleged staff sexually assaulted her. An allegation of Sexual Abuse (PREA) was Sustained, three allegations of Violation of Policy/Rule were Sustained; an allegation of Use of Force – Unnecessary was Unfounded and an allegation of Improper Conduct was Unfounded.

#### 2018-02566 Miami Youth Academy

It was alleged that a youth observed a female engage in sexual intercourse with an unknown youth in a facility bathroom. It was further alleged that staff brought contraband into the facility and youth were bullied for food and clothing. There were no

witnesses or corroborating evidence regarding the allegations. Therefore, the allegation of Sexual Abuse-Prison Rape Elimination Act (PREA) and Improper Conduct against staff was Unfounded.

#### 2018-02567 DJJ HQ EEO

A female DJJ employee filed a sexual harassment complaint against a male coworker, alleging he tried to view her breasts when she expressed breast milk, and touched her in inappropriate manner. The DJJ EEO Panel determined there was No Cause in the allegation.

#### 2018-02714 Sexual Abuse (PREA), Duval Shelter

An allegation was made that a male staff supervisor at the Duval Shelter engaged in sexual intercourse with a female youth inside the facility. The allegation was Not Sustained.

#### 2018-02747 Manatee Regional Juvenile Detention Center

An investigation was initiated following a medical incident concerning an unresponsive fifteen-year old, female youth who had attempted suicide in her cell. The youth subsequently expired at a local hospital. The investigation determined a detention officer had failed to properly conduct checks on the youth and an allegation of Improper Supervision was Sustained against the officer. Additional allegations of Failure to Report and Violation of Policy/Rule were Sustained against a detention center supervisor regarding a prior suicide attempt by the youth. Furthermore, after that prior suicide attempt, the center's supervising mental health clinician did not have the youth immediately assessed for risk of suicide. An allegation of Violation of Policy/Rule was Sustained against the clinician.

#### 2018-02900 Improper Conduct-Sexual Nature, Hastings Youth Academy

An allegation of Improper Conduct was made against a Hastings Youth Care Worker for meeting a youth at a hotel following the youth's release from the program. The YCW and the youth consumed alcoholic beverages and engaged in sexual intercourse. The allegation of Improper Conduct - Sexual Nature was Sustained.

#### 2018-02982 FN-LSF-SE Lippman Youth Shelter

It was alleged that a former staff and youth were involved in an inappropriate relationship. It was unknown if the relationship occurred inside or outside of the facility or if the relationship was of a sexual nature. The investigation was closed with a Not Sustained finding of Improper Conduct/Staff-Youth Relationship. There was also a Policy Deficiency finding regarding the allegation of Improper Conduct.

#### 2018-03004 Orange Regional Juvenile Detention Center

A juvenile detention officer alleged sexual harassment by a supervisor. An Equal Employment Opportunity Resolution Panel convened and determined there was No Cause to indicate the alleged harassment/discrimination occurred.

#### 2018-03042 Okeechobee Youth Development Center

An attorney for a youth at the facility alleged excessive force was used on the youth by the Facility Administrator and two other staff. An investigation determined that the three allegations of Excessive Force were false and were, therefore Unfounded. The attorney further alleged that on another occasion excessive force was again used on the youth by the Facility Administrator and one other staff. The two allegations were Not Sustained. Additional allegations of Violation of Policy/Rule were Sustained on one staff member and Not Sustained on another, Improper Conduct by a staff member was Not Sustained, and Excessive Force by a staff member was Sustained.

#### 2018-03114 Tampa Residential Facility

A former staff alleged that reports were missing, the FA purchased meals for youth to keep the youth from reporting incidents, youth were allowed out of rooms after lockdown, during which time, they participated in consensual sexual activity, youth and staff were not allowed to contact the CCC or Abuse Registry, contraband seized in youths rooms was not reported, staff directed a youth to attack another staff, and staff failed to report that another staff member was terminated after being found in a room with a youth. Allegations of Violation of Policy against four staff were Unfounded or Not Sustained, Improper Conduct against two staff were Not Sustained, Improper Supervision against five staff were Not Sustained, Failure to Report against two staff were Not Sustained, and Sexual Abuse (PREA) against one staff was Not Sustained.

#### 2018-03147 Leon Juvenile Regional Detention Center

An administrative staff member at Leon Detention filed a complaint that a Juvenile Detention Officer had choked her in her office during a heated discussion. The investigation into the complaint revealed that the two individuals were involved in an on again-off again romantic relationship. Allegations of Improper Conduct against both staff were Sustained.

#### 2018-03160 Walton Academy for Growth and Change

Several youths at the facility allegedly forced another youth into an open dorm room and attempted to sexually batter him. An investigation was conducted after it appeared that a staff member supervising the youth had an earlier altercation with the victim and failed to stop the youths who tried to batter the same youth. Allegations of Improper Supervision and Unnecessary Use of Force were Sustained against the staff member.

#### 2018-03182 Manatee Regional Juvenile Detention Center

A youth alleged that a juvenile detention officer touched her inappropriately. The allegation of Sexual Abuse (PREA) was Unfounded.

#### 2018-03262 Sexual Abuse (PREA), St Johns Youth Academy

A staff at St. Johns Youth Academy assigned to Master Control allegedly had sexual intercourse with one of the youths in the facility. The allegation of Sexual Abuse (PREA) was Unfounded.

#### 2018-03320 Volusia Regional Juvenile Detention Center

An investigation into a disturbance at the detention center exonerated two supervisors for Improper Supervision and Violation of Policy/Rule, and the allegations against two other officers were Not Sustained. An allegation of Violation of Policy/Rule was Sustained against one supervisor. Due to lack of a specific Department policy, there were no findings for allegations of Violation of Policy/Rule against four staff.

#### 2018-03349 Orange Youth Academy

A youth's mother alleged staff physically abused youth in the facility and paid another youth to physically assault youth. It was also alleged that staff revealed information about youth to another youth's mother via Facebook and brought illegal substances into the facility. The investigation was closed with an Unfounded finding of Use of Force – Excessive against three staff. The allegation of Improper Conduct/Threats by staff was Unfounded and the allegation of Violation of Policy/Rule against staff was Unfounded.

#### 2018-03350 Volusia Regional Juvenile Detention Center

A male youth alleged that a female Juvenile Detention Officer (JDO) had sexual intercourse with him, then changed the allegations to the female JDO asked him to have sexual intercourse, then changed the allegations again, stating the female JDO used sign language to tell him that she was sexually excited and that she liked him. An investigation determined the

youth's allegations were inconsistent with his statements to DCF and law enforcement, and there was no supporting evidence. The allegation of Sexual Harassment (PREA) against the staff was subsequently Unfounded.

#### 2018-03360 Okeechobee Juvenile Offender Correctional Center

A youth alleged a youth care worker instructed him to fight another youth. The allegation of Improper Conduct was Not Sustained.

#### 2018-03621 Administration Residential

It was alleged that a DJJ Senior Management Analyst violated the Dual Employment policy with regards to her part-time work by maintaining secondary employment after a request for dual employment authorization was denied. It was also alleged that the employee worked her secondary job while using sick leave on her primary job with DJJ. Two allegations of Violation of Policy/Rule were Sustained.

#### 2018-03867 Pinellas Regional Juvenile Detention Center

An investigation into allegations of sexual abuse (PREA) was conducted based on a complaint by a youth and her mother. The matter was also investigated by law enforcement, however, the Florida State Attorney's Office decided not to pursue criminal charges. The allegations of sexual abuse (PREA) and improper conduct/staff-youth relationship were Not Sustained

#### 2018-03886 Alachua Academy

A program supervisor alleged that one of her subordinates threatened her with physical violence after she attempted to verbally counsel the employee. The allegation of Threats Against Staff was subsequently Unfounded.

#### 2018-03948 Miami Youth Academy

An anonymous complainant alleged that a female staff sexually harassed several male youths in the program. It was also alleged the facility administrators attempted to bribe the youth with a shortened stay in the program if the matter was not reported. The investigation was closed with a finding of Not Sustained for the allegation of Sexual Harassment (PREA) and an Unfounded finding against two staff for the allegation of Improper Conduct.

#### 2018-04161 Central Pasco Girls Academy

The Facility Administrator observed on surveillance video recordings that a male staff member and a female youth were in the same dorm bathroom together. The youth later alleged that she was coerced into having sexual contact with the staff. The investigation revealed that the staff member may have also victimized the youth during an earlier, unreported, incident. The staff member was subsequently arrested and charged with sexual battery and terminated after confessing to law enforcement officers, he had sexual contact with the youth.

#### 2018-04516 Kissimmee Youth Academy

A youth alleged a female youth care worker engaged in sexual activity with two other youth in the program. During the investigation it was determined two youth care workers were made aware of the allegation but failed to report it. The investigation yielded a Not Sustained finding of Sexual Abuse (PREA) and two Sustained findings of Failure to Report.

#### 2018-04535 St. Johns Youth Academy

During the investigation of a previously reported incident, it was revealed that a female program staff member learned of a sexual abuse allegation from a program youth and failed to report the information within the mandatory two-hour reporting requirement. An allegation of Failure to Report was Sustained.

#### 2018-04584 Kissimmee Youth Academy

An investigation was initiated after contraband cell phones and photographs of youth taken inside the facility came to light. One youth alleged he obtained the phone from a youth care worker (YCW) at the facility. However, the allegation of Violation of Policy/Rule was Not Sustained. An allegation of Improper Search against an unknown person was Sustained.

#### 2018-04625 Alachua Academy

An investigation into alleged Falsification and Improper Conduct by staff resulted in five Unfounded findings and one Not Sustained finding. An allegation of Falsification was Sustained against an unknown subject.

#### 2018-04745 Use of Force-Excessive, Duval Academy

The program Assistant Facility Administrator reported that a youth made an allegation of Use of Force-Excessive against him when he escorted the youth to his assigned dorm room. Surveillance video of the incident showed the AFA did not deploy proper PAR techniques as trained. Therefore, the allegation of Use of Force-Excessive was Sustained.

#### 2018-04793 Alachua Academy

A female youth alleged that a male maintenance staff member had sexual contact with three female youths during a work detail in the facility. Furthermore, the youth reportedly told a female staff, who failed to report the allegation. The allegation of sexual abuse against the maintenance staff member was Unfounded and the allegation of Failure to Report against the female staff member was Not Sustained.

#### 2018-04905 Collier Regional Juvenile Detention Center

It was alleged the Superintendent shoved, dragged, and choked a youth, which resulted in bruising. A review of the surveillance video revealed that the staff's restraint techniques were not complaint with the PAR policy. The allegation of Use of Force - Improper was Sustained.

#### 2018-05142 Dade Juvenile Residential Facility

It was alleged that a youth witnessed a youth care worker engaging in sexual activity with two youth in the program. An allegation of Sexual Abuse (PREA) against the staff was Not Sustained.

#### 2018-05249 Broward Regional Juvenile Detention Center

The assistant detention center superintendent reported the escape of a youth from a secure detention facility. It was alleged that staff failed to immediately call a Code Green upon learning of the escape. The investigation was closed with a Sustained finding of Improper Supervision against one staff, an Unfounded finding of Improper Supervision against a second staff, and a Not Sustained finding of Improper Supervision against a third staff. An allegation of Violation of Policy/Rule was also Sustained.

#### 2018-05419 Dove Academy

An anonymous letter enumerated a list of complaints against the program director. The complaints alleged she ignored staff recommendation, allowed parents to introduce contraband to the facility, and she falsified records. The allegations of Violation Policy Rule, Falsification of Documents, and Improper Conduct were all determined to be Unfounded.

#### 2018-05644 Volusia Regional Juvenile Detention Center

A female youth alleged that a male Juvenile Detention Officer (JDO) provided his telephone number, communicated with the youth by telephone and had engaged in sexual activity at the JDO's residence. An investigation determined the youth's statements were inconsistent with statements made to DCF and law enforcement and there was insufficient evidence to prove or disprove the allegation. The allegation of Improper Conduct/ Staff-Youth Relationship was Not Sustained.

#### 2018-05697 Violation of Policy, Gulf Academy

The mother of a former youth reported that shortly after her son's release, he received a letter in the mail from a Youth Care Worker. The employee admitted mailing the letter and putting her address on the envelope but claimed the letter was authored by a youth still in the program. The subject also admitted to communicating with the released youth via social media. Based on interviews conducted and evidence reviewed, it was determined that the subject did not follow proper protocols for approving outgoing mail for current youth and for contacting a youth released from the program. An allegation of Violation of Policy was Sustained.

#### 2018-05704 Palm Beach Youth Academy Substance Abuse

A youth care worker alleged another youth care worker was involved in a sexual relationship with a youth in the program. The investigation was closed with an Unfounded finding on the allegation of Sexual Abuse (PREA).

#### 2018-05751 RAP House Shelter

An investigation into alleged Improper Conduct by a staff member at a provider-operated shelter program resulted in a Sustained finding of Improper Conduct and a Not Sustained finding of Improper Conduct/Sexual Nature.

#### 2018-05871 Sexual Abuse (PREA), Gulf Academy

A Program Therapist allegedly performed a sex act on a youth in her office. The youth could not provide specific dates or times as to when the alleged incident occurred, and no surveillance video could be obtained. The subject also denied engaging in any sexual activity with any youths in the program. The allegation of Sexual Abuse (PREA) was subsequently Unfounded.

#### 2018-05881 Leon Regional Juvenile Detention Center

The Superintendent reported an allegation of possible misconduct. The investigation determined the two allegations of Violation of Policy/Rule were Sustained, and another allegation of Violation of Policy/Rule was Not Sustained.

#### 2019-00059 Okeechobee JOCC Max Risk

An anonymous caller alleged there were inappropriate relationships between staff and youth at the facility. It was specifically alleged that staff visited a youth who was being housed in the county jail, contacted a youth via telephone and allowed the youth to use the staff's cell phone. The investigation was closed with a Sustained finding of Improper Conduct Staff-Youth Relationship and a Not Sustained finding of Improper Conduct Staff-Youth Relationship. The allegation of Improper Conduct and Sexual Abuse (PREA) were Unfounded. An allegation of Sexual Abuse (PREA) was Unfounded.

#### 2019-00075 Highlands Youth Academy

A youth alleged that two female staff members were having inappropriate relationships with two male program youths. The investigation determined there was no evidence to support his claims and allegations of Improper Conduct/Staff-Youth Relationships were Unfounded. However, one female staff had provided a youth with unauthorized food and an allegation of Violation of Policy/Rule was Sustained against her. Additionally, Failure to Report and Violation of Policy/Rule allegations were Sustained against two other staff who failed to report the initial allegations.

#### 2019-00148 Polk Halfway House

An investigation into alleged Falsification, Sexual Abuse (PREA), Failure to Report, and Improper Conduct by staff at this provider-operated residential program resulted in eight Unfounded findings. As there was no probable cause for the Sexual Abuse (PREA) and no complainant, other than the original anonymous complainant, law enforcement did not further investigate the matter.

#### 2019-00202 Leon Regional Juvenile Detention Center

A video containing sexually explicit content was discovered on the DJJ computer of the former Superintendent. The investigation was closed with a Sustained finding of Improper Conduct.

#### 2019-00205 Improper Conduct, Duval RJDC

Improper Conduct was alleged between the Superintendent and one of his subordinate employees. The complainant claimed the subordinate had a consensual, sexual relationship with the Superintendent, and when she ended the affair, he and another Assistant Superintendent conspired to change her schedule from dayshift to night shift without providing her adequate notice. The Superintendent admitted to engaging in inappropriate, sexual conversations with the complainant but denied that the relationship was physical. Both the Superintendent and the Assistant Superintendent acknowledged the complainant's schedule was changed, but claimed it was necessary to meet immediate staffing needs. A report of investigative findings was submitted to the EEO Resolution Panel. The Panel determined there was Cause to believe the alleged sexual harassment occurred on behalf of the Superintendent but found No Cause of harassment on behalf of the Assistant Superintendent.

#### 2019-00308 Miami Dade Regional Juvenile Detention Center

An auto finance company requested employment verification for a reported DJJ employee. During the verification, DJJ Human Resources was unable to locate the employee and noted irregularities in the paycheck voucher that was supplied to the auto finance company. During the investigation, it was discovered the information on the paycheck voucher was linked to a DJJ employee at the facility. The employee at the facility admitted to falsifying the document to make it appear as if the initial person was employed with the agency. As a result, the allegation of Falsification was Sustained.

#### 2019-00434 Pinellas Regional Juvenile Detention Center

A youth alleged that a detention officer gave him unauthorized contraband (food) and his personal phone number so that the officer could help him out upon his release. The youth further alleged the officer solicited him for sex and had performed a sex act on another detention center youth. Law enforcement's investigation into the allegations resulted in five Substantiated incidents of sexual abuse against the detention center officer, who was arrested and terminated. Allegations of Improper Conduct and Violation of Policy/Rule were also Sustained against the officer. Additional allegations of Failure to Report (concerning either alleged sexual abuse or violations of facility operating procedures) were Sustained against four other detention center staff members.

#### 2019-00577 Improper Conduct, Duval RJDC

During OIG investigation 201900205, a staff member alleged a separate incident of Improper Conduct against the facility Superintendent. The complainant alleged she was sexually harassed when her supervisor grabbed her hair and buttocks while making sexual comments toward her in his office. The subject denied the allegations against him. A report of investigative findings was submitted to the EEO Resolution Panel. The Panel determined there was No Cause to believe the alleged harassment took place.

#### 2019-00921 Leon Regional Juvenile Detention Center

A juvenile detention officer contacted the DJJ Equal Employment Opportunity Officer and filed a sexual harassment complaint against her direct supervisor and alleged his conduct made her uncomfortable. The subject allegedly made suggestive comments to her and acted in a jealous manner after he saw her off duty speaking with a male friend. The DJJ EEO panel determined there was No Cause in the allegation.

#### 2019-00950 Highlands Youth Academy Substance Abuse (HYASA)

A former Youth Care Worker (YCW) and former HYASA youth were arrested and taken into custody together by local Law enforcement. There was insufficient evidence to prove or disprove that the former youth and former YCW exchanged contact information, arranged to meet outside the facility, or had an inappropriate relationship at the facility. Therefore, the allegation

of Improper Conduct/ Staff-Youth Relationship was Not Sustained. During the investigation it was determined that the former youth and the former YCW had been observed by multiple staff on live camera and video recordings entering a room out of camera view. The allegation of Violation of Policy/Rule was Sustained.

#### 2019-00960 Hillsborough Girls Academy

The Assistant Facility Administrator reported that it was alleged that staff touched a youth in an inappropriate manner. The investigation was closed with an Unfounded finding of Sexual Abuse (PREA).

#### 2019-01002 Probation Circuit 5

A youth on probation alleged that his Juvenile Probation Officer (JPO) had asked and received five Percocet pills from the youth and the youth's mother, and the JPO had asked for additional pills. The allegation of Misconduct/Conduct Unbecoming a Public Employee yielded insufficient evidence and was Not Sustained.

#### 2019-01093 Dade Juvenile Residential Facility

A male youth alleged that he observed a female staff having sexual intercourse in her office with an unknown youth. The reporting youth was unable to identify the victim youth or provide additional information. The allegation of Sexual Abuse (PREA) was Unfounded.

#### 2019-01176 Leon Regional Juvenile Detention Center

A youth reported to a detention officer that he had sex with another officer while he was being treated at the hospital. That allegation was determined to be Unfounded. During the investigation, it was determined that a detention officer and a facility captain learned of the PREA allegation and failed to report it in a timely manner. Allegations of Failure to Report were Sustained on both subjects. It was also determined that the policy governing staff ratio and youth hospital stays was not clear an allegation of Violation of Policy/Rule was determined to be a Policy Deficiency.

#### 2019-01211 Pompano Youth Treatment Center

An anonymous complainant alleged that a youth care worker was having sexual intercourse with an unnamed youth in the program and bragging about it. The allegation of Sexual Abuse (PREA) was subsequently Unfounded.

#### 2019-01390 Marion Youth Academy

A Quality Improvement Reviewer alleged Improper Conduct against the Assistant Facility Administrator during a QI review. An investigation determined that the allegation of Improper Conduct yielded insufficient evidence and was Not Sustained.

## **Facility Surveys**

To ensure Department of Juvenile Justice detention centers and residential treatment programs operate safely and securely and in accordance with established procedures and contract requirements, the Office of Inspector General conducts unannounced facility site surveys at DJJ facilities on a continuing basis. During these surveys, OIG inspectors examine the facility's overall physical condition and operations, security of the facility, youth safety, care and living environment, staffing levels, and conducts interviews of the staff and youth. A report of the survey, documenting findings regarding the facility is issued to the DJJ Secretary and appropriate senior staff for any follow-up action deemed necessary. During the 2018-2019 reporting period, the OIG conducted 40 facility surveys throughout the State of Florida.

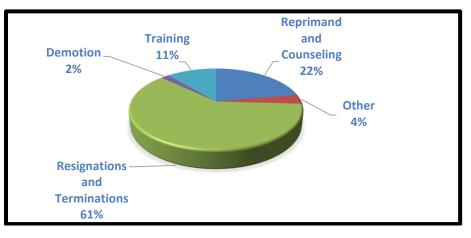


## **Sustained Findings by Type**



## **Disciplinary Actions**

July 1, 2018 – June 30, 2019



	Total	Exonerated	Sustained	Not Sustained	Unfounded	Substantiated Allegations as Percentage of Total
Arrest of Staff	0	0	0	0	0	0%
Conduct Unbecoming a Public Employee	0	0	0	0	0	0%
Failure to Report	21	0	13	6	2	62%
Falsification	11	0	5	1	5	45%
Force, Excessive	10	0	1	2	7	10%
Force, Unnecessary	5	1	2	0	2	40%
Harassment	0	0	0	0	0	0%
Harassment/Discrimination	1	0	0	0	0	0%
Hostile Work Environment	0	0	0	0	0	0%
Hostile Work Environment-Threats by Staff	0	0	0	0	0	0%
Improper Conduct	44	0	6	13	24	14%
Improper Conduct/Computer Misuse	0	0	0	0	0	0%
Improper Conduct/Conduct Unbecoming a Public Employee	0	0	0	0	0	0%
Improper Conduct/Sexual Nature	3	0	1	1	1	33%
Improper Conduct/Staff on Staff Relationship	0	0	0	0	0	0%
Improper Conduct/Staff-Youth Relationship	9	0	2	5	2	22%
Improper Conduct/Staff-Family of Youth Relationship	0	0	0	0	0	0%
Improper Conduct/Threats by Staff	1	0	0	0	1	0%
Improper Conduct/Verbal Threats	1	0	0	0	1	0%
Improper Search	1	0	1	0	0	0%
Improper Supervision	21	1	6	7	7	29%
Improper Use of Force	2	0	2	0	0	0%
Misconduct/Conduct Unbecoming a Public Employee	1	0	0	1	0	0%
Policy Deficiency	7	0	0	0	0	0%
Sexual Harassment	4	0	0	0	0	0%
Sexual Harassment/Staff-on-Staff	1	0	1	0	0	0%
Sexual Abuse (PREA)	25	0	2	6	17	8%
Sexual Harassment (PREA)	1	0	0	0	1	0%
Sexual Misconduct (PREA)	1	0	1	0	0	0%
Violation of Policy/Rule	46	5	18	12	8	39%
TOTAL	216	7	61	54	78	39%
Source: OIG Database						

## **Categorization of Investigations/Inquiries Closed**

Source: OIG Database

## **Incident Operations Center**

The DJJ Office of Inspector General 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 and State-owned and operated facilities, following a substantiated or sustained finding. The unit is also responsible for trend analysis and the daily review and assignment/disposition 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 Incident Tracking and Report 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 review 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 examples of 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 Incident Tracking and Report 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 allows for greater information gathering and sharing, data analysis, and work flow tracking.

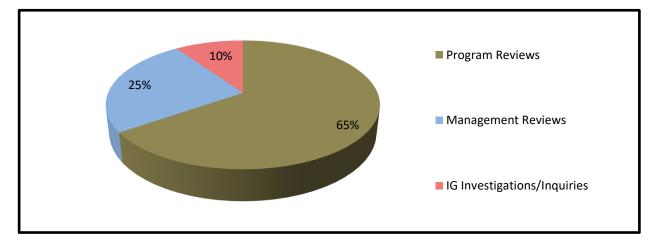
## **Other IOC Functions**

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 to 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 FSFN 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 program 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.

## **Statistical Data**

- Approximately **7,357** calls were received by the CCC.
- Duty officers logged a of **4**,355 reportable incidents and **1**,408 non-reportable incidents into the CCC tracking system. Most of these incidents dealt with medical issues (**1**,851), complaints against staff (**1**,355), and program disruptions (**1**,215).
- Approximately **6,559** 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 (**1,395**), Violation of Policy/Rule (**463**), Improper Supervision (**331**), Medical Other (**310**), and Contraband Recovered/Discovered (**285**).
- A total of **986** incidents were assigned for either a review or investigation. This number comprises **644** Program Reviews, **247** Management Reviews, and **95** IG Investigations/Inquiries.



## **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 contracted 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 contracted provider. Background screening is the process for checking a person's criminal history. The person's fingerprints are processed by the Florida Department of Law Enforcement (FDLE) and the Federal Bureau of Investigation (FBI). The process also consists of a demographic search through the Judicial Inquiry System (JIS), which provides access to the Comprehensive Case Information System (CCIS). CCIS collects and displays the criminal records 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 of potential employees and volunteers. Through this process, the applicant's fingerprints are electronically transmitted to the FDLE and the FBI and within 72 hours the result of the criminal search is returned to the BSU. Livescan also allows FDLE to send an electronic notice to the BSU when a state or contracted provider employee or volunteer receives a new Florida arrest.

The 5-Year Rescreen/Resubmission is the national criminal records check completed for all state and contracted provider employees and volunteers every five years of continued service. The five-year increments for DJJ employees and volunteers are calculated from the initial hire or service date. For provider employees and volunteers screened through the Clearinghouse, a fingerprint expiration date is located on the applicant's personal profile page. The purpose of rescreening is to ensure current employees and volunteers maintain level II screening standards throughout the term of their employment and/or service.

## **Ratings/Determination Process**

Background screenings are rated using one of the following determinations: Eligible, Identified/Non-Caretaker Only, and Not Eligible. 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 hired or utilized by the Department or contracted 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 contact with youth, 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 contracted 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 a **not eligible** 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 a not eligible 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, 985.644, or 985.666, F.S.

### **Exemption from Disqualification**

The exemption from disqualification is a review process that allows most applicants who receive a not eligible rating to be reconsidered for employment or as a volunteer. As set forth in Section 435.07, F.S., exemptions may be granted for a misdemeanor disqualifying offense as soon as the person is lawfully released and completes all sanctions. For a felony offense, the Department may not grant an exemption from disqualification 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 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 nationally with law enforcement agencies and court clerks
- Collects Annual Affidavits
- Scans completed screening documents into an archival database for future reference and access
- Responds to telephone, fax, and e-mail inquiries

### **Statistical Data**

- 16,177 employee background screenings were conducted
- \$23,294.91 in fingerprint processing fees and fingerprint retention fees were collected
- 91 credit card transactions and 366 checks were processed
- **108** applicants failed to submit additional information or were withdrawn by the requester and **943** applicants were statutorily disqualified, resulting in a total of **1,051** applicants who did not clear the screening process
- **111** applicants requested an exemption hearing for a statutorily disqualified offense appearing on their record during the background screening process
- **816** arrest notifications were received and processed
- 16,177 record searches were conducted in the Inspector General Incident Tracking system
- Approximately **80,885** pages of documents were scanned into the screening archival database
- Approximately 18,177 customer calls/faxes and e-mail inquiries were serviced

#### **OIG Staff Directory**

#### Robert Munson Wanda Glover

#### Internal Audit

*Michael Yu* Roosevelt Brooks Karen Miller Kelly Neel

#### **Investigations**

Brian Donaldson Gary Bussell Gerard Ward Richard Bodnar Darvin Graham Shewanda Hall Jackie Lurry Jeffrey McGuiness Reginald McNeill Mark Meadows Sonja Robinson Tracey Shearer Katie Turner Martina Walker

#### **Incident Operations Center**

Holly Queen Rachel Pate Therman Gullette Richard Jones Safa Shariat

#### Central Communications Center

*Melaney Rosier* Chad Bennett Dierdre Harris Adrian Nealy Juliara Rapuzzi

#### Management Review Team

Darrell Furuseth Melinda Gouldsbury Sarah Bechtel Ami Dieterle Lori Hardyman Bonita Johnson Michael Lindsey Claudia McFarlane-Paul Janie McGeorge Cordell Nelson Scott Pedersen

#### **Background Screening Unit**

Myra Burks Lisa Y. Alexander Sharon G. Washington Tequila James Sara Keys Thomas Pena Erika Ross Michele Bell Yazmin Burns Inspector General Administrative Assistant III

#### Audit Director

Operations Review Specialist Management Review Specialist Management Review Specialist

#### **Chief of Investigations**

Senior Management Analyst Supervisor Senior Management Analyst Supervisor Inspector Specialist Inspector Specialist OPS Senior Clerk Inspector Specialist Inspector Specialist Inspector Specialist Senior Management Analyst I Inspector Specialist Inspector Specialist Staff Assistant

Senior Management Analyst Supervisor Government Operations Consultant III

Operations Review Specialist Operations Review Specialist Operations Review Specialist

#### **Operations Management Consultant III, Supervisor**

Government Operations Consultant I Government Operations Consultant I Government Operations Consultant I OPS – Government Operations Consultant

#### Senior Management Analyst Supervisor

Senior Management Analyst Supervisor Government Operations Consultant II Operations & Management Consultant I Government Operations Consultant II Government Operations Consultant II Government Operations Consultant II

#### Senior Management Analyst Supervisor

Senior Management Analyst I Senior Management Analyst I Government Operations Consultant I Government Operations Consultant I Government Operations Consultant I Staff Assistant Senior Clerk



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