

Florida Department of Juvenile Justice

Eric S. Hall, Secretary

Office of Inspector General 2022 Annual Report



Robert A. Munson, Inspector General

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Department of Juvenile Justice

Office of Inspector General

Annual Report for Fiscal Year 2021-2022

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 immediately 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. ¹According 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.

¹ 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 Office of Inspector General Bureau of Investigations received Accreditation through the Commission for Florida Law Enforcement Accreditation in June 2015 and was Reaccredited in June 2021. The Bureau of Investigations will seek Reaccreditation for a third time in the Spring of 2024.

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.

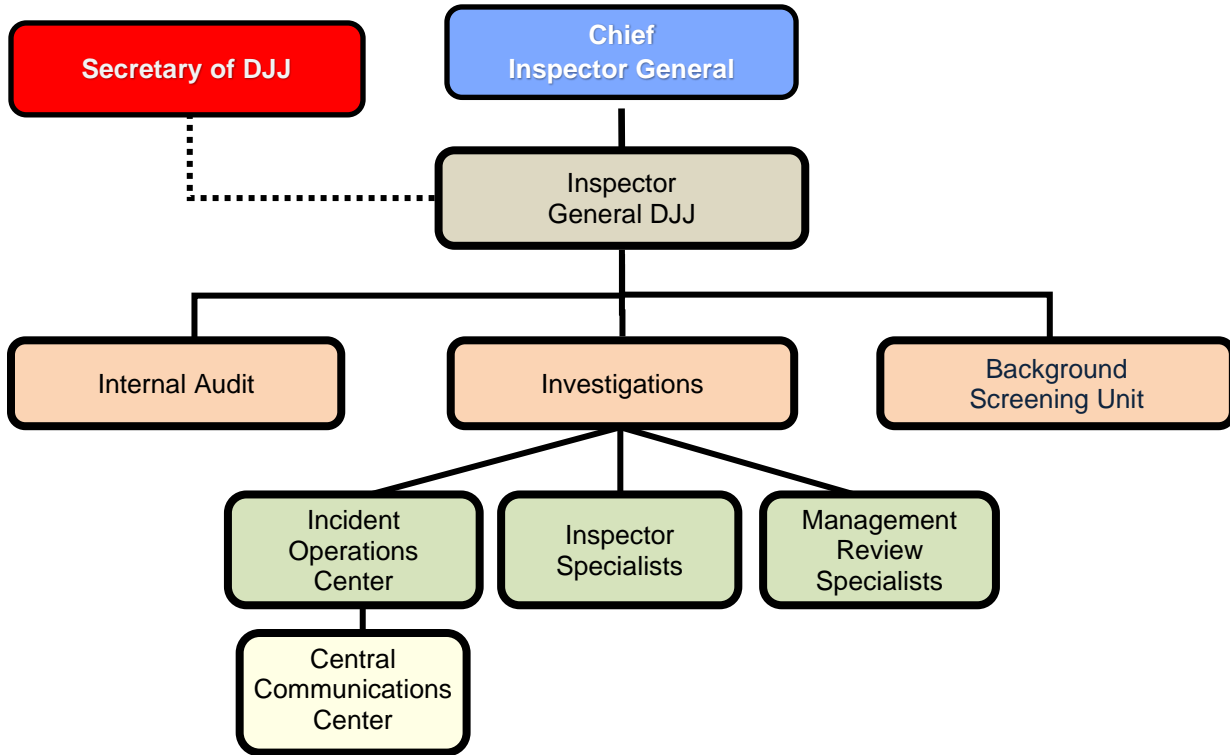
Historic Overview

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 Management Review Unit (MRU) is comprised of ten reviewers and two 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; serious breaches in the safety and security of youth and staff; or are indicative of unaddressed systemic issues. For the 2021-2022 fiscal year, the MRU conducted and closed 141 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 2021-2022, 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 every two years 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	2
Certified Inspector General Investigator	11
Certified Public Manager	2
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 (Bureau), 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, cybersecurity, 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 for FY 2021-2022

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

- Five compliance, performance, and cybersecurity audits.
- One Management Review.
- Three follow-up reviews to internal audits.
- Various management advisory projects and coordination with Auditor General audits.

Compliance, Cybersecurity, 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. A cybersecurity audit involves a comprehensive analysis and review of the IT infrastructure of the Department. It detects vulnerabilities and threats, displaying weak links, and high-risk practices. It is a primary method for examining compliance. The Bureau completed two compliance, two performance, and one cybersecurity audits.



Compliance Audit of Department Contract Procurement Procedures



The state's purchasing laws are designed to promote fair and open competition in the public procurement process. The goal is to reduce the appearance and opportunity for favoritism; and foster public confidence that contracts are awarded equitably and economically.

The use of state term contracts is mandatory for Florida agencies in accordance with section 287.056, F.S. A state term contract is a contract that is competitively procured by the Florida Department of Management Services for selected products and services for use by state agencies and eligible users. Two of the 119 Agency's contracts examined by the auditors were state term contracts. Ninety of the 119 contracts were for direct services to youth which included the two state term contracts. Twenty-nine of the 119 contracts examined were for minor construction projects.

The overall objectives of this audit were to determine if complete and accurate data was recorded in Florida Accountability Contracts Tracking System (FACTS) as described in section 215.985(14)(a), F.S., for a selected sample of Agency contracts, evaluate a selected sample of contracts for compliance with Chapter 287 and other applicable procurement statutes, and analyze the overall Agency contracting process to identify any trends in vendor preference.

The audit disclosed no trends in vendor preference by the Agency; also, we concluded that in general, the Agency has implemented processes to ensure compliance with state purchasing laws. However, the audit disclosed that some contracts were not posted into FACTS within 30 calendar days.

We recommended the Agency implement independent reviews of data inputted into FACTS by Agency staff; namely, there should be checks and balances related to the input of data into FACTS. Checks and balances ensure that no one person has absolute control over decisions related to the FACTS's process. Independent reviews of the process increase the chance that errors, and omissions will be prevented and detected in a timely manner.

Audit of Internal Controls and Data Security for HSMV Driver Licenses



The Department of Juvenile Justice (Department) is tasked with planning and coordinating comprehensive statewide transportation services for youth under its jurisdiction. To determine the suitability of individuals (employees and volunteers) responsible for transporting youth, the driving status of these individuals are obtained from the Department of Highway Safety and Motor Vehicles (DHSMV).

On June 23, 2021, the Department renewed a Memorandum of Understanding (MOU), Contract Number HSMV-690-21, with DHSMV. This MOU outlines the conditions and limitations under which the DHSMV agrees to provide access to their Database.

Pursuant to the MOU, the Department should conduct an audit of internal control and data security based on the following: The Department must submit an Internal Control and Data Security Audit from a currently licensed Certified Public Accountant, on or before the first anniversary of the execution date of this MOU or within one hundred twenty (120) days from receipt of a request from the DHSMV. Government agencies may submit the Internal Control and Data Security Audit from their Agency's Internal Auditor or Inspector General.

The overall objectives of this audit were to provide Department management and DHSMV with reasonable assurances that the Department is in compliance with the Memorandum of Understanding, and internal controls are in place to adequately prevent, deter, and detect fraud and misuse of data (unauthorized access, distribution, use, modification, or disclosure of personal data).

The audit indicated that the Department of Juvenile Justice (Department) has developed internal controls that materially comply with the Memorandum of Understanding.

Also, data security policies and procedures have been approved by a Risk Management IT Security Professional. This conclusion is based on the review of Department Information Technology policies and procedures, Bureau of Information Technology's Organizational Chart, and the Bureau Chief's position description. Information received from DHSMV is housed in a secure data base (Central Communications Center).

Audit of Detention Mental Health Services

Detention is the custody status for youth who are held pursuant to a court order or after being taken into custody for a violation of the law. Youth are detained under specific criteria outlined in Florida Statutes. Generally, there is a 21-day limit to secure detention, but those charged with a serious offense can be held longer. These youth are awaiting court dates or placement in a residential program. The Department operates 21 detention facilities in 21 counties located across 3 regions, throughout the state of Florida. A significant number of youths in the Department's care have a mental illness, substance abuse issue and/or have experienced childhood trauma which impacts their behavior and treatment needs. Issues must be addressed through assessments, evaluations, crisis intervention and treatment services.



Camelot Community Care is the contracted provider for mental health and substance abuse services provided in each detention center. Contract 10676 is the contract between the Department and Camelot Community Care for medical and mental health services. In each facility, mental health services are provided by a licensed mental health professional who serves as the designated mental health clinician authority (DMHCA), a registered mental health counselor, and a psychiatrist. Some facilities may have additional licensed and non-licensed staff to meet the needs of the youth. Clinical services provided by the

detention centers include mental health and substance abuse evaluations, mental health treatment planning, individual, group and family therapy, mental health crisis intervention services, on-site psychiatric services, and availability for substance abuse services.

The Office of Health Services Electronic Medical Records system (OHS EMR) in the Department's Juvenile Justice Information System (JJIS) is where medical and mental health documents are produced and stored for each youth in Detention obtaining medical and mental health services. The Office of Health Services' senior behavior analysts provide quarterly monitoring and technical assistance for mental health services provided in the 21 detention facilities. OHS has 3 Licensed Mental Health Professionals (LMHPs) to cover the three regions. The monitoring is conducted to assess a facility's compliance with the Department's mental health and substance abuse services rule and the Bureau of Monitoring and Quality Improvement's Standards.

The overall objectives of this audit were to determine if mental health services were provided to youth in accordance with laws, rules, contracts, policies, and procedures; and if sufficient oversight of mental health services was in place to ensure mental health services were appropriately provided to youth.

The audit disclosed that, in general, mental health services were provided to youth in Detention facilities in accordance with laws, rules, contracts, policies and procedures, and sufficient oversight of mental health services was in place to ensure mental health services were appropriately provided to youth. However, the audit disclosed that:

- The Designated Mental Health Clinician Authority (DMHCA) did not always meet the 40 hours on-site per week required by contract.
- Documentation of Licensed Mental Health Professional and Licensed/Certified Substance Abuse Professionals Direct Supervision Logs did not always appear accurate or complete.
- Facilities did not always meet the ratio of mental health staff to youth required in contract.
- Not all observation logs were present and accurate.
- Not all mental health services documents had the required signatures.
- Not all documents were present in the Office of Health Services Electronic Medical Record (OHS EMR).
- Documents were not always completed or signed timely.

We recommended the Department:

- enhance the oversight or monitoring of LMHP's onsite hours to enforce the contract; and ensure LMHPs spend adequate time fulfilling their clinical and administrative responsibilities.
- enhance monitoring of the direct supervision of non-licensed staff provided by LMHP.
- ensure mental health staff to youth ratio requirements are being met.
- ensure Detention and mental health staff are completing and reviewing logs appropriately.
- ensure documents are signed by those required.
- ensuring all documentation is uploaded or completed in the OHS EMR. We also recommend updating the rule if requirements are no longer necessary.
- ensure documents critical for youth's mental health services are completed and accomplished within the time frames specified in rule and procedures.

Audit of Residential Vocational Training



The Office of Residential Services oversees Residential commitment programs operated by private providers under contract with the Department. Unlike the adult correctional system, each youth in a Residential commitment program must receive educational and vocational services. Most of the Department's Residential program contracts require the programs to provide traditional and non-traditional prevocational and vocational services either directly by the local school district in which the Residential program is located, or through a contract between the local school district and the provider. Additionally, the Department has one contract with the Home Builders Institute, Inc. (HBI) to provide vocational training overlay services for 131 available slots for youth in Residential programs.

There are three types of career education. Type 1 career education programs teach personal accountability skills and behaviors that are appropriate for students in all age groups and ability levels and lead to work habits that help maintain employment and living standards. Type 2 career education programs include Type 1 program content and an orientation to the broad scope of career choices based upon personal abilities, aptitudes, and interest. Exploring and gaining knowledge of occupation options and the level of effort required to achieve them is an essential prerequisite to skill training. Type 3 career education programs include Type 1 program content and the competencies or prerequisites needed for entry into a specific occupation.

The overall objectives of this audit were to determine whether youth in Residential programs are receiving vocational training in accordance with laws, rules, contracts, Department policies and procedures, and if youth are obtaining employment related to the vocational training received when returning to the community.

The audit disclosed that, in general, vocational training services were provided to youth in Residential programs in accordance with laws, rules, contracts, Department policies and procedures, and some youths were obtaining employment related to the vocational training received when returning to the community. However, the audit disclosed that:

- Type 3 career and professional education course (CAPE) requirements in statute and rule were not being met in one program.
- Vocational trainings required in contract were not always being provided.
- Florida Administrative Codes and Department contracts did not provide adequate guidelines for statutorily required vocational training for youths who have obtained a high school diploma/GED.
- The Department has not established guidelines for the reporting of vocational trainings provided or certifications awarded to youth in Residential programs. Additionally, only one provider is required to maintain data concerning youth employment upon the youth's release back to the community.
- Academic and Career Education Needs Assessments were not being conducted in one program.
- HBI vocational training slots available at the programs were not always filled at a reasonable rate.
- Some youths' records were not made available for review.

We recommended the Department:

- work with the local school district to implement mutually acceptable vocational trainings that will lead to certifications that meet the requirement of Florida statutes and rules.
- review each provider's contract to determine if the vocational trainings are relevant to the youths being served by the provider; then, monitor to ensure the contract-specific vocational trainings are being provided.
- develop guidelines to address vocational trainings provided to youth that have already achieved their high school diploma/GED.
- develop specific reporting guidelines for providers regarding vocational trainings provided and certificates awarded to youth. Additionally, the Department should establish uniform guidelines to capture all youth employment resulting from vocational
- training received to quantify the correlation between vocational training and recidivism and determine what vocational trainings are supporting a youth's success when returning to the community.

- ensure that required assessments are administered in all programs to begin the development of a youth's interest in and goal of gaining a career.
- perform a study to determine whether the total number of allotted HBI slots should be reduced and/or possibly re-assigned to be more fiscally beneficial to the Department.
- ensure that providers have systems and processes in place to ensure compliance with youth's record keeping requirements.

Audit of Cybersecurity Continuous Monitoring

The Bureau of Information Technology (BIT), located within the Office of Administrative Services, works in conjunction with the Department of Management Services' Florida Digital Service (FLDS) to establish network security for the Department.

As part of the network security services to the Department, FLDS provides monitoring for malware and suspicious traffic that could infect or breach the network. FLDS notifies the BIT of malware and unusual network traffic alerts. Additionally, FLDS is responsible for vulnerability scanning and continuous monitoring of 100 Department servers located at the State Data Center (SDC).

The BIT is responsible for information technology (IT) planning and resource management, including technology planning, server administration and support services, internet security and firewall management, network telecommunication services, video conferencing services, and applications development, support, and maintenance. Data administration, data line installation, management, and monitoring at all Department sites are also included.

60GG-2, Florida Administrative Code (F.A.C.), known as the Florida Cybersecurity Standards (FCS), establishes cybersecurity standards for information technology (IT) resources. State Agencies must comply with these standards in the management and operation of state IT resources. This rule is modeled after the National Institute of Standards and Technology (NIST) Framework for Improving Critical Infrastructure Cybersecurity, Version 1.1, and the Federal Information Security Management Act of 2002 (44 U.S.C. §3541, et seq.).

F.A.C. 60GG-2.004(2) Security Continuous Monitoring states, each agency shall determine the appropriate level of monitoring that will occur regarding IT resources necessary to identify cybersecurity events and verify the effectiveness of protective measures. Such activities shall include:

- (a) monitoring the network to detect potential cybersecurity events.
- (b) monitoring for unauthorized IT resource connections to the internal agency network.
- (c) monitoring the physical environment to detect potential cybersecurity events.
- (d) monitoring user activity to detect potential cybersecurity events.
- (e) monitoring for malicious code.
- (f) monitoring for unauthorized mobile code.
- (g) monitoring external service provider activity to detect potential cybersecurity events.
- (h) monitoring for unauthorized personnel, connections, devices, and software.
- (i) performing vulnerability scans.

The lack of cybersecurity continuous monitoring controls could affect the confidentiality, integrity, and availability of data and IT resources. The unauthorized disclosure, modification, or destruction of information and disruption of access to information could have an adverse effect on organizational operations, assets, or individuals. The objectives of this audit were to assess the Department's cybersecurity practices in the following areas:

- Monitoring the network to detect potential cybersecurity events.
- Monitoring the physical environment to detect potential cybersecurity threats.
- Monitoring user activity to detect potential cybersecurity events.



- Monitoring for malicious code.
- Monitoring for unauthorized mobile code.
- Monitoring for unauthorized personnel, connections, devices, and software.
- Monitoring for external service provider activity to detect potential cybersecurity events.
- Performing vulnerability scans which are part of the System Development Life Cycle.

As an audit of a state agency's information technology security program, this document and associated records are confidential and exempt from public disclosure pursuant to section 282.318(4)(g), Florida Statutes (F.S.).

Management Review: American Rescue Plan Act (ARPA) Funds General Risk Readiness Review



The American Rescue Plan Act of 2021 (ARPA) provides significant support to state and local governments, businesses, individuals, and other entities. The Department has been appropriated \$15,133,879 for its Deferred Building Maintenance Statewide Plan.

The objective of this review was to assess the status of the implementation of internal controls, which should help mitigate the risk of fraud, waste, or abuse, in programs expending ARPA funds. This "General" review focused on the internal controls of the agency's

Procurement/Acquisition, Budget, Legal, and Finance & Accounting functions. An agency would typically perform this review once and perform the "Program Risk Readiness Review" for each program identified as requiring additional oversight activities. This review should provide important feedback to operating/program managers; however, operating/program managers are ultimately responsible for ensuring that adequate internal controls are in place to deter fraud, waste, or abuse.

The review indicated that, in general, internal controls are implemented and no follow-up activities are required.

Internal and External Audit Follow-Up Activities

The Bureau of Internal Audit (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 three internal audits (no external audit follow-up was due in this fiscal year). The Bureau issued the below follow-up review reports:

- Follow-up on the Audit of Probation Supervision.
- Follow-up on the Audit of Detention Mental Health; and
- Follow-up on the Audit of Bureau of Contract Management.

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

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 if 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 2021-2022, the Bureau of Investigations assigned **77** complaints for investigation, inquiry, referral to management or other appropriate action.

The Bureau of Investigations closed **58** investigations in fiscal year 2021-2022. Most of these investigations included multiple allegations. The total number of allegations investigated during the period was **232**. Of the allegations investigated, **98** were determined to be Sustained, **61** were Not Sustained, **73** were Unfounded, and **0** were Exonerated. There were **6** EEO cases with **16** allegations, **10** were found with No Cause and **6** were found to have Cause.

The Bureau also closed **13** inquiries in fiscal year 2021-2022. The total number of allegations investigated through inquiries was **16**. Of these allegations, **16** were Administratively Closed.

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

Summary of Investigations

202005222 Broward Regional Juvenile Detention Center

Fraudulent charges were discovered on four different state issued WEX vehicle cards assigned to the facility, with an estimated total loss of \$60,000.00. Initially, it could not be determined whether the charges were made by a DJJ employee or someone outside of the agency. The Fort Lauderdale Police Department conducted a criminal investigation and filed charges against a vendor employee for Larceny, Fraud Swindle-Obtain Property 50k dollars or more and Fraud Use-Use ID of 50k dollars or more without consent for charges, totaling \$54,846.51. The OIG closed its investigation with an Unfounded finding against an unknown DJJ employee for Loss/Theft/Destruction of Department Property.

202101595 Alachua Academy

A female youth alleged a male staff sexually abused her, provided her with contraband, and that she viewed multiple images and videos depicting child pornography on his personal cell phone. Upon further investigation, three additional youths made allegations against the same staff. The staff member was terminated and arrested by law enforcement. Three Sexual Abuse allegations and two allegations of Violation of Policy were sustained against the subject. An allegation of Improper Conduct and a Use of Force allegation were not sustained.

202101999 Alachua Regional Juvenile Detention Center

It was alleged a male staff member touched a male youth in a sexual manner. The investigation determined the youth was frustrated with the staff member and admitted to lying about the abuse. The investigation was Unfounded regarding the Sexual Abuse (PREA) complaint as well as for two allegations of Improper Conduct (denying an abuse call and blocking a door).

202102289 Marion Youth Academy

It was alleged that a female staff engaged in sexual activity with several youth in the facility. The investigation yielded findings of Unfounded for Sexual Abuse (PREA) and Sustained for Failure to Report.

202102707 Miami Girls Academy

A youth alleged she had sexual intercourse with a male staff while in the program. The staff was arrested and charged with Sexual Battery on a Minor and Sexual Misconduct of a Detention Facility Employee with an Inmate. A second youth also alleged the same staff discussed performing oral sex on her. During the investigation, there was sufficient evidence to investigate another staff for failing to report the allegations within the required timeframe. This investigation closed with the following findings: An allegation of Sexual Abuse (PREA) was Sustained; an allegation of Improper Conduct was Sustained; an allegation of Sexual Abuse (PREA) was Not Sustained; and an allegation of Failure to Report was Sustained.

202103337 Everglades Youth Academy

An investigation and assessment relative to a riot by youths was conducted at the Everglades Youth Academy. As a result, the investigation was closed with the following findings: Three allegations of Violation of Policy/Rule were Sustained; an allegation of Use of Force – Improper was Sustained; an allegation of Improper Supervision was Sustained, and an allegation of Improper Conduct was Sustained. Furthermore, the investigation concluded that nine months after an earlier riot at the then-Okeechobee JOCC, the issue of control/supervision remained on-going and was detrimental to this agency's obligation to ensure the safety and welfare of staff and committed youth.

202103405 Duval Academy

A youth's mother reported that her son was sexually abused by a female staff member and that the staff member has continued communicating with her son following his release from the program. One allegation of Sexual Abuse (PREA) was Not Sustained, and one allegation of Violation of Policy/Rule was Sustained.

202103577 Lake Academy

A complainant alleged that while formerly detained at the Lake Academy, four female youth were sexually abused by a male staff member. The investigation revealed that after her release from the program, the complainant engaged in a relationship with the (now former) staff member. They have a child in common and were involved in a custody dispute over the child. Four allegations of Sexual Abuse (PREA) against the former staff were Not Sustained. However, a Violation of Policy/Rule was Sustained against him, as he had contact with former program youth via social media while still employed by Lake Academy.

202103586 / 202103603 Palm Beach Youth Academy

A youth alleged that a staff member brought a vape pen and cell phone into the facility. Later, the same youth further alleged that the same female staff was having a sexual or inappropriate relationship with another youth and paid youth to fight other youth. The investigation was closed with an Unfounded finding of Sexual Abuse (PREA); an Unfounded finding of Improper Conduct/Staff-Youth Relationship; an Unfounded finding of Improper Conduct; a Not Sustained finding of Violation of Policy/Rule (introduction of contraband); and a Sustained finding of Violation of Policy/Rule (introduction of contraband).

202103767 Marion Youth Academy

It was alleged a youth reported overhearing two female staff members having sex with a male youth. Allegations of Sexual Abuse (PREA) were determined to be Unfounded against both staff. Law enforcement closed its cases by exception and DCF closed its case with No Indicators of Sexual Abuse.

202103831 Southwest Florida Regional Juvenile Detention Center (EEO)

A Juvenile Justice Detention Officer (JJDO) alleged that she was sexually harassed by a Juvenile Justice Detention Officer Supervisor (JJDOS). The JJDO also alleged the JJDOS questioned her sexuality which strained the work relationship. The DJJ EEO Resolution Panel rendered a finding of No Cause for Sexual Harassment.

202103855 Jacksonville Youth Academy

It was alleged a male staff member asked a youth if he wanted to have sex with a man and later touched the youth sexually during a strip search. An investigation determined the allegation of Improper Conduct was Not Sustained, and the allegation of Sexual Abuse (PREA) was Unfounded.

202103887 / 202103889 Miami Bridge Shelter (North & South)

An anonymous complainant alleged that staff at the Miami Bridge Shelter, North and South locations, offered youths gifts in exchange for sexual favors and engaged in child pornography. Staff also reportedly participated in illegal drug use and provided youths with contraband. Following an investigation, the allegations of Improper Conduct of a Sexual Nature against two staff; Violation of Policy/Rule (drug usage by staff); and Violation of Policy/Rule (providing unauthorized items to youth) were all determined to be Unfounded.

202104177 Palm Beach Youth Academy

An anonymous complainant alleged that two years ago a Youth Care Worker was involved in a sexual relationship with an unnamed youth. An allegation of Sexual Abuse (PREA) was Not Sustained; however, an allegation of Violation of Policy/Rule (Improper Relationship) was Sustained.

202104278 Marion Youth Academy

It was alleged that a female staff had sexual relations with a male youth in the facility. It was further alleged that the same staff had failed to properly supervise youth in the facility. During the investigation, it was determined that the subject staff requested another staff allow her to talk to the youth to talk on a cell phone. The investigation yielded findings of Unfounded for Sexual Abuse (PREA), Sustained for Violation of Policy/Rule, Sustained for one count of Improper Conduct. Unfounded for another count of Improper Conduct, and Not Sustained for two additional allegations of Improper Conduct.

202104369 Circuit 11 Probation (EEO)

It was reported that a Juvenile Probation Officer alleged her supervisor kissed her in her office. The allegation of Sexual Harassment resulted in a finding of No Cause against the Juvenile Probation Officer Supervisor.

202104376 Collier Regional Juvenile Detention Center

A Collier Detention Center officer alleged that staff and youth were involved in sexual relationships. An allegation of Sexual Abuse (PREA) involving unidentified staff was Unfounded. A second allegation of Improper Conduct/ Staff-on-Staff Sexual Nature, developed through the investigation, was Not Sustained, as there was no evidence to support the alleged improper conduct.

202104498 Youth Environmental Services Non-Secure

An investigation was conducted as a result of a riot by some youth at the Youth Environmental Services Non-Secure program. The investigation was closed with a finding of Unfounded for Improper Supervision; a finding of Sustained for Improper Supervision; a finding of Sustained for Threats by Staff, and a Sustained finding for the allegation of Failure to Report within the required timeframe.

202104521 Palm Beach Regional Juvenile Detention Center

It was alleged in an anonymous letter, that a female Juvenile Justice Detention Officer was having an inappropriate relationship with a male youth. During the investigation, the OIG found there was sufficient cause to investigate additional officers for failing to report their knowledge of the allegation. The investigation yielded the following findings: An allegation of Sexual Abuse (PREA) was Not Sustained; an allegation of Improper Conduct Staff-Youth Relationship was Sustained and two allegations of Failure to Report were Sustained.

202104644 / 202104668 Everglades Youth Academy Max Risk

An anonymous youth and an anonymous letter both alleged various allegations against staff and the facility, including claims of contraband circulating, youth fights being placed on social media and staff allowing bullying amongst the population. The investigation was closed with a Not Sustained finding of Sexual Abuse (PREA); an Unfounded finding of Sexual Abuse (PREA); five Sustained findings of Improper Conduct; two Unfounded findings of Improper Conduct; one Not Sustained finding of Improper Conduct; and one Sustained finding of Improper Supervision.

202104705 Volusia Regional Juvenile Detention Center

It was alleged a female staff member gave a sponge bath to a female youth, forced female youths to shower with the curtain open, asked youth for their social security numbers, provided candy and snacks from outside the facility to youth, unofficially telephoned youth's parents and provided them personal information. It was also alleged complaints against the staff member were being ignored. An investigation determined the allegations were Not Sustained for Sexual Abuse-PREA and Improper Conduct.

202105006 St. Lucie Juvenile Assessment Center (EEO)

A Juvenile Justice Officer (JJO) alleged that a Juvenile Probation Officer Supervisor (JPOS) suggested they date and have an intimate relationship. The JPOS also allegedly made several sexual advances towards the JJO. When the JJO declined the requests, the JPOS became upset and reportedly made comments which made the JJO fearful of losing her job. The report was submitted to the EEO Resolution Panel which rendered a finding of No Cause for Sexual Harassment; a finding of Cause for Violation of Law or Agency Rules; and a finding of Cause for Conduct Unbecoming.

202105272 Lake Academy

A female youth alleged that while she was detained in the Lake Academy, another youth resident told her she had sexual contact with a male staff member in the program's kitchen area. There was insufficient evidence to either prove or disprove that the contact occurred, therefore, the allegation of Sexual Abuse (PREA) was Not Sustained. An additional allegation of Improper Conduct and Failure to Report were closed as Not Sustained as well.

202105381 Manatee Regional Juvenile Detention Center

A youth alleged a Juvenile Justice Detention Officer Supervisor (JJDOS) choked him. During the investigation the OIG found sufficient evidence to investigate possible falsification and other policy violations. The investigation resulted in the following findings: an allegation of Use of Force–Excessive was Sustained; one allegation of Improper Conduct was Sustained; a second allegation of Improper Conduct was Not Sustained; an allegation of Violation of Policy/Rule (failure to properly document incident) was Sustained, and two allegations of Falsification were Sustained.

202105412 Pinellas Regional Juvenile Detention Center

It was alleged that a female staff was involved in an inappropriate relationship with a male youth who had been in the facility. It was subsequently determined that the staff had used her personal cell phone in the facility to communicate with the youth and provided confidential information about other youth and staff to the youth. The investigation yielded Sustained findings for Improper Conduct/Staff-Youth Relationship, Violation of Policy/Rule, and Improper Conduct.

202105955 Broward Regional Juvenile Detention Center

It was alleged that over the course of five months, a staff member made several threats to physically assault other staff members at the facility. Most recently the staff member left a profanity laced voicemail threatening to physically harm an Administrator and kitchen staff. The investigation was closed with a Sustained finding.

202106298 Everglades Youth Academy Max Risk

An anonymous email alleged several staff introduced contraband into the program. During the investigation, the OIG found sufficient evidence to investigate two Administrators for failing to report the allegations within the required timeframe. In addition, the OIG found sufficient evidence to investigate an Administrator for failing to turn over illegal contraband to law enforcement. The investigation was closed with the following findings: four Unfounded findings for Improper Conduct (Introduction of Contraband); one Sustained finding for Improper Conduct (Introduction of Contraband); two Sustained findings for Failure to Report; and one Sustained finding for Violation of Policy/Rule (failing to turn over illegal contraband to law enforcement).

202106006 Everglades Youth Academy Max Risk

The mother of a youth alleged there were videos on social media showing facility youth being attacked. How the videos appeared on social media was unknown. Allegations of Improper Conduct (Introduction of Contraband) and Improper Supervision (allowing youth to fight and place video recordings on social media) were Sustained.

202106455 Broward Regional Juvenile Detention Center

A former Broward RJDC supervisor alleged that staff were verbally and physically abusing youth at the detention center and that unidentified staff drank alcohol on-duty. The former supervisor did not respond to attempts to obtain further information on the allegations. Youth and staff interviews conducted did not support the allegations, and the investigation was closed as Unfounded for Improper Conduct, Violation of Policy/Rule, and Use of Force - Unnecessary.

202106560 Circuit 15 Juvenile Assessment Center/202108388 Circuit 15 Probation/202108390 Program Accountability

The West Palm Beach Police Department notified the OIG of an investigation regarding allegations of sexual activity between a contracted G4S male staff at the Circuit 15 Juvenile Assessment Center and a female youth who was briefly detained at the facility. The male staff was charged with Unlawful Sexual Activity with a Minor and two counts of Soliciting a Child for Unlawful Sexual Conduct. During the criminal investigation an additional female youth also alleged to have had sexual relations with the same male staff. The OIG investigation concluded with the following findings: Two allegations of Improper Conduct/Sexual Nature were Sustained; an allegation of Violation of Policy/Rule (allowing youth to possess her cellphone) was Sustained; two allegations of Improper Supervision for failing to conduct 10-minute checks were Sustained; two allegations of Failure to Report were Sustained; two allegations of Violation of Policy/Rule (failing to maintain staff training/input staff information into SVS) were Sustained; an allegation of Violation of Policy/Rule (failing to ensure staff are background screened) was Sustained; and an allegation of Violation of Policy/Rule (failing to maintain oversight over the contract) was Sustained.

202106593 Hillsborough Regional Juvenile Detention Center

It was alleged multiple staff were involved in Improper Conduct/Staff-on-Staff Sexual Nature (6), Improper Conduct (5), Use of Force – Unnecessary (1) and Failure to Report (5). The Investigation yielded findings of Unfounded for all allegations.

202106828 Melbourne Center for Personal Growth/202108164 Circuit 11 Probation

The father of a youth reported that his son told him that a male staff entered his room and touched him inappropriately. During the investigation, there was sufficient evidence to also investigate the youth's Juvenile Probation Officer for Failure to Report. The investigation was closed with an Unfounded finding for Sexual Abuse (PREA) and a Sustained finding for Failure to Report.

202107295 St. Lucie Regional Juvenile Detention Center

An investigation was conducted regarding allegations that a Juvenile Detention Officer viewed inappropriate media in the presence of youths and made inappropriate comments in the presence of youths. During the investigation it was also determined the JDO officer failed to conduct room checks within the required time frame. The investigation resulted in a Sustained finding for Improper Conduct; a Sustained finding for Improper Conduct/Computer Misuse, and a Sustained finding for Improper Supervision.

202107536 Miami Girls Academy

The Department of Children and Families submitted an intake report which alleged that sometime between March 2020 and December 2020, a male staff entered a female youth's room and digitally penetrated her. Law enforcement closed the case as Unfounded. The OIG closed the case with an Unfounded finding of Sexual Abuse (PREA).

202107871 Volusia Regional Juvenile Detention Center

It was alleged that a staff had brought in a vape pen, cell phone, took photographs of youth in the facility, and provided the photographs to family members for payment. The investigation yielded findings of Sustained for Improper Conduct and

Violation of Policy/Introduction of Contraband (Cell phone), and a finding of Not Sustained for Violation of Policy/Introduction of Contraband (vape pen). During the investigation it was alleged that another staff had had brought in a vape pen, cell phone, took photographs of youth in the facility, and provided the photographs to family members for payment. The investigation yielded findings of Unfounded for Improper Conduct and Violation of Policy/Introduction of Contraband (Cell phone), and a finding of Not Sustained for Violation of Policy/Introduction of Contraband (vape pen).

202107894 Everglades Youth Academy Max Risk

A program staff alleged that a fire occurred inside the facility but was never reported. It was also alleged that staff allowed youth to bully one another, and an Administrator consumed alcoholic beverages while on duty. The investigation was closed with an Unfounded finding for Improper Conduct; a Sustained finding for Improper Supervision; and a Sustained finding for Failure to Report.

202108027 Bay Regional Juvenile Detention Center

A youth escaped from the facility, and it was alleged a staff member assisted the youth in the escape. An investigation determined that that allegation was Not Sustained; however, a violation of policy against the staff member was Sustained for not reporting information they heard about a possible escape attempt.

202108085 Center for Success and Independence Ocala

A youth alleged that he engaged in sexual activity with a female staff member on campus. The youth also alleged that the same staff member engaged in sexual activity with two additional youth and that the staff was paid for the sex acts via CashApp. As a result of this investigation, four allegations of Sexual Abuse were Not Sustained, one allegation of Improper Conduct was Unfounded, and a second allegation of Improper Conduct was Not Sustained.

202108133 St Johns Youth Academy

A former employee made several allegations against current and former staff members. As a result of this investigation, one allegation of Sexual Abuse (PREA) was Not Sustained, one allegation of Sexual Abuse (PREA) was Unfounded, three allegations of Improper Conduct were Not Sustained, two allegations of Improper Conduct were Unfounded, two Violations of Policy/Rule were Sustained, and one Violation of Policy/Rule was Unfounded.

202108195 Brevard Regional Juvenile Detention Center

A private citizen alleged that a medical staff member was engaged in a sexual relationship with a youth in the facility. It was further alleged that while at work, the medical staff member sent the complainant videos and pictures through messaging apps. The investigation was closed with an Unfounded finding for Sexual Abuse (PREA); and a Sustained finding for Violation of Policy/Rule (Introduction of Contraband).

202108231 Pompano Youth Treatment Center/202201955 Charles Britt Academy

The mother of a youth alleged that her son engaged in a sexual relationship with a case manager while he was detained at Pompano Youth Treatment Center (PYTC). The mother further alleged that the case manager provided her son with a cell phone, clothes, toiletries and continued to maintain contact with her son after his transfer to Charles Britt Academy. An OIG investigation resulted in the following findings: An allegation of Sexual Abuse (PREA) was Not Sustained, an allegation of Improper Conduct/Staff-Youth Relationship was Not Sustained; an allegation of Violation of Policy/Rule (Conduct Unbecoming) was Not Sustained; an allegation of Violation of Policy/Rule (allowing unauthorized communication with a youth/failing to document a telephone call) against a Charles Britt Academy Case Manager was Sustained; and an allegation of Failure to Report against a Charles Britt Academy Case Manager was Sustained.

202108272 / 202200881 Volusia Regional Juvenile Detention Center

The Central Communications Center (CCC) received a complaint that unidentified detention center staff were violating policy concerning the supervision of youth on precautionary observation. The allegation that the two detention supervisors, a detention officer, and two juvenile probation officers had not properly supervised youth placed on precautionary observation was Sustained. Allegations of Improper Supervision against one detention officer and one probation officer were Not Sustained.

202108369 Cypress Creek Maximum Risk Facility (Cypress Creek Juvenile Offender Correctional Center)

A youth alleged that a staff member placed a vape pen in his room. A subsequent search of the youth's room led to the item being discovered. Later the youth's father reported his son alleged that drugs were being brought into the program and a second staff member choked the youth and called him a racial slur. As a result of the investigation, an allegation of Violation of Policy/Rule was Sustained; an allegation of Improper Conduct was Not Sustained; an allegation of Improper Conduct against an unknown staff member was Unfounded; and an allegation of Use of Force – Unnecessary against an unknown staff member was Unfounded.

202108498 St. John's Youth Academy

A youth attempted suicide by tying cloth around his neck. The youth was transported off-site and medically treated. Allegations of Improper Supervision against two staff members were Sustained.

202108641 Crestview Youth Academy

A Guardian Ad Litem was observed on video surveillance handing an unknown substance to a youth during visitation. The youth was observed placing the substance in his mouth and later tested positive for THC. The OIG investigated the staff for Improper Search and Improper Supervision. The complaints against the staff were determined to be Unfounded.

202108674 Lake Academy

A youth alleged a staff member inappropriately touched her under her underwear during a search, prompting an investigation. The investigation determined the allegation of Sexual Abuse (PREA) was Unfounded.

202108755 Collier Regional Juvenile Detention Center

A Juvenile Justice Detention Officer (JJDO) and a contracted employee alleged a hostile work environment against each other, to include threats of violence. During the investigation there was sufficient evidence to further investigate the JJDO for additional allegations. The investigation yielded four Sustained findings of Misconduct/Conduct Unbecoming against the JJDO; and a Not Sustained finding of Improper Conduct against the contracted employee.

202201241 Pinellas Juvenile Assessment Center (EEO)

A (probationary) juvenile probation officer (JPO) notified the DJJ Equal Employment Opportunity (EEO) officer that a Senior JPO was creating a hostile work environment for him at the Pinellas Juvenile Assessment Center, through inappropriate comments. Additionally, the JPO felt as if he was being discriminated against by a JPO Supervisor. An investigation of the facts was submitted to the EEO resolution panel for a determination. There was cause to believe the Senior JPO created a hostile work environment. The Senior JPO submitted his resignation. There was no cause to believe the JPO Supervisor discriminated against the probationary JPO.

202201259 Escambia Regional Juvenile Detention Center (EEO)

Anonymous complaint of Sexual Harassment against staff was received. The EEO Resolution Panel determined there was “cause” to believe sexual harassment occurred and the staff member was terminated.

202201285 Deep Creek Youth Academy

A DJJ employee discovered multiple allegations made to DCF that were not properly reported to the CCC. As a result of the investigation, five allegations of Use of Force were Not Sustained, six allegations of Violation of Policy/Rule were Unfounded, and additional allegations of Medical Neglect and Improper Conduct were also Unfounded. One allegation of Failure to Report was Sustained.

202201404 Everglades Youth Academy Max Risk/202202359 Residential South Region

The mother of a youth alleged that her son was physically assaulted by a staff member several months prior. The OIG subsequently found sufficient evidence to investigate program and regional staff for Failure to Report. The investigation was closed with the following findings: one Sustained finding for Use of Force- Unnecessary; one Sustained finding for Improper Conduct; two Not Sustained findings for Failure to Report; two Sustained findings for Failure to Report; one Sustained finding for Violation of Policy/Rule (Negligence of duty); and one Sustained finding for Violation of Policy/Rule (Failure to document a youth’s Controlled Observation placement).

202201551 Les Peters Academy

An individual identifying herself as the sister of an unnamed youth at the program alleged that a shift supervisor engaged in inappropriate relationships with youth and made sexual comments and gestures towards youth. It was also alleged that a second staff member was involved in romantic relationships with youth. The OIG and law enforcement jointly investigated the allegations which resulted in the following: A Not Sustained finding for Sexual Abuse (PREA); a Not Sustained finding for Improper Conduct/Staff-Youth Relationship; a Not Sustained finding for Violation of Policy/Rule (Improper Conduct) and an Unfounded finding regarding the second staff member for Improper Conduct/Staff-Youth Relationship.

202201563 Duval Regional Juvenile Detention Center

A male youth alleged he was sexually abused by a male staff member. He further alleged that a female staff member instigated a physical altercation between he and another youth. The allegation of Sexual Abuse (PREA) and the allegation of Improper Conduct were Not Sustained.

202201811 St. John’s Youth Academy

A male youth alleged he was sexually abused by a female staff member in the storage freezer at the facility and then threatened by the staff members if he filed a complaint. The allegations of Sexual Abuse (PREA) and Threats by Staff (2) were Not Sustained.

202202079 Volusia Regional Juvenile Detention Center (EEO)

A female staff member filed several EEO complaints against employees at the facility. An EEO resolution panel determined there was “no cause” that the alleged Sexual Harassment and Hostile Work Environment occurred.

202202161 Miami-Dade Regional Juvenile Detention Center

Letters were discovered in a youth’s room that indicated a Juvenile Justice Detention Officer (JJDO) desired a sexual/romantic relationship with the youth. Further analysis of the letters indicated a second JJDO might have known about the desires but failed to report the matter. Lastly, there was some indication a third JJDO might have had inappropriate relationships with

youth at the facility. The investigation resulted in a Sustained finding for Sexual Abuse (PREA); an Unfounded finding for Failure to Report against the second staff; and an Unfounded finding for Improper Conduct/Staff-Youth Relationship against the third staff.

202202262 Broward Regional Juvenile Detention Center (EEO)

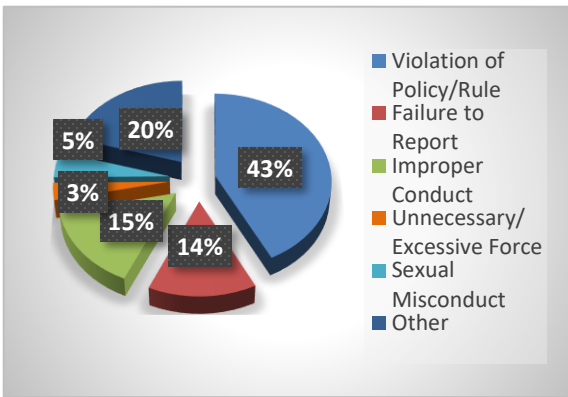
A Juvenile Justice Detention Officer (JJDO) alleged that a male staff touched her buttocks after giving her a hug. The male staff also allegedly made a derogatory comment towards her. The report was submitted to the DJJ EEO Resolution Panel which found no cause for Sexual Harassment but a finding of cause for Conduct Unbecoming against the male staff.

202202335 Pasco Regional Juvenile Detention Center

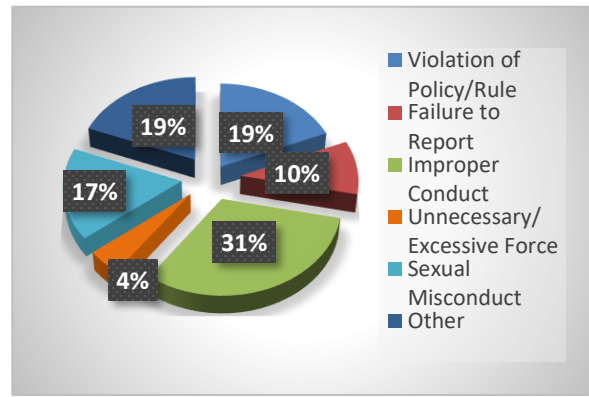
It was alleged that two detention officers failed to provide proper supervision over a youth who had escaped from the detention center's recreation yard. Allegations of Improper Supervision (2) were Sustained against the staff, as video showed the youth repeatedly went over to a gate in the perimeter fence without the staff redirecting him back to recreational activities. The youth climbed through a gap in the gate and escaped. Additionally, a Violation of Policy/Rule was Sustained against one of the staff who failed to complete required annual training concerning security and escapes.

Sustained Findings by Type

2020 - 2021

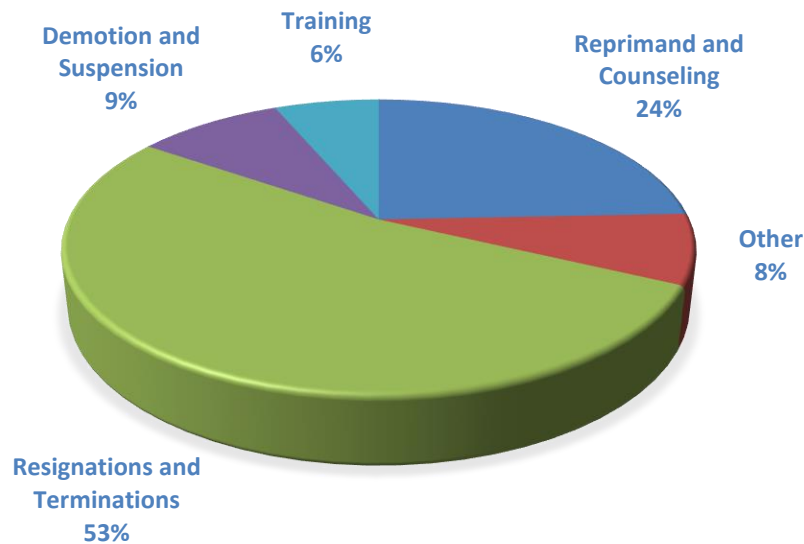


2021 - 2022



Disciplinary Actions

July 1, 2021 – June 30, 2022



Categorization of Investigations Closed

	Total	Exonerated	Sustained	Not Sustained	Unfounded	Other	Substantiated Allegations as Percentage of Total
Arrest of Staff	0	0	0	0	0	0	0%
Failure to Report	24	0	14	4	6	0	58%
Falsification	2	0	2	0	0	0	100%
Force, Excessive	6	0	1	5	0	0	17%
Force, Unnecessary	5	0	1	1	3	0	20%
Harassment	1	0	0	0	0	1	0%
Harassment/Discrimination	3	0	0	0	0	3	0%
Hostile Work Environment	4	0	0	0	0	4	0%
Hostile Work Environment-Threats by Staff	0	0	0	0	0	0	0%
Improper Conduct	57	0	16	18	23	0	28%
Improper Conduct/Computer Misuse	1	0	1	0	0	0	100%
Improper Conduct/Conduct Unbecoming a Public Employee	2	0	0	0	0	2	0%
Improper Conduct/Sexual Nature	4	0	2	0	2	0	50%
Improper Conduct/Staff on Staff Relationship	8	0	0	2	6	0	0%
Improper Conduct/Staff-Youth Relationship	8	0	2	3	3	0	25%
Improper Conduct/Staff-Family of Youth Relationship	0	0	0	0	0	0	0%
Improper Conduct/Threats by Staff	4	0	2	2	0	0	50%
Improper Conduct/Verbal Threats	0	0	0	0	0	0	0%
Improper Search	1	0	0	0	1	0	0%
Improper Supervision	24	0	20	2	2	0	83%
Improper Use of Force	1	0	1	0	0	0	100%
Misconduct/Conduct Unbecoming a Public Employee	4	0	4	0	0	0	100%
Medication Neglect	1	0	0	1	0	0	0%
Sexual Harassment	5	0	0	0	0	5	0%
Sexual Harassment/Staff-on-Staff	0	0	0	0	0	0	0%
Sexual Abuse (PREA)	36	0	4	16	16	0	11%
Sexual Harassment (PREA)	0	0	0	0	0	0	0%
Sexual Misconduct (PREA)	0	0	0	0	0	0	0%
Violation of Laws or Agency Rules	1	0	0	0	0	1	0%
Violation of Policy/Rule	46	0	28	7	11	0	61%
TOTAL	248	0	98	61	73	16	40%

Facility Surveys

The OIG assists the Department of Juvenile Justice to ensure detention centers and residential treatment programs operate safely and securely and in accordance with established procedures and contract requirements by conducting unannounced facility site surveys at DJJ facilities on a continuing basis. OIG inspectors examine the facility's overall physical condition and operations, security, youth safety, food service, medical facilities, housing environment, staffing levels, and conducts interviews of the staff and youth. A Facility Survey Report is forwarded to the DJJ Secretary and appropriate senior staff for informational purposes and any follow-up action deemed necessary. As a result of Government mandated COVID-19 travel restrictions, OIG facility surveys were limited from March 2020 until February 2022, therefore, a fewer number of facility surveys were conducted in FY 2021-2022.



Incident Operations Center

The DJJ Incident Operations Center (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 CCC tracking system enables all program reviews, management reviews, and IG investigations/inquiries to be tracked. The system allows for greater information gathering and sharing, data analysis, and workflow tracking.

Other IOC Functions

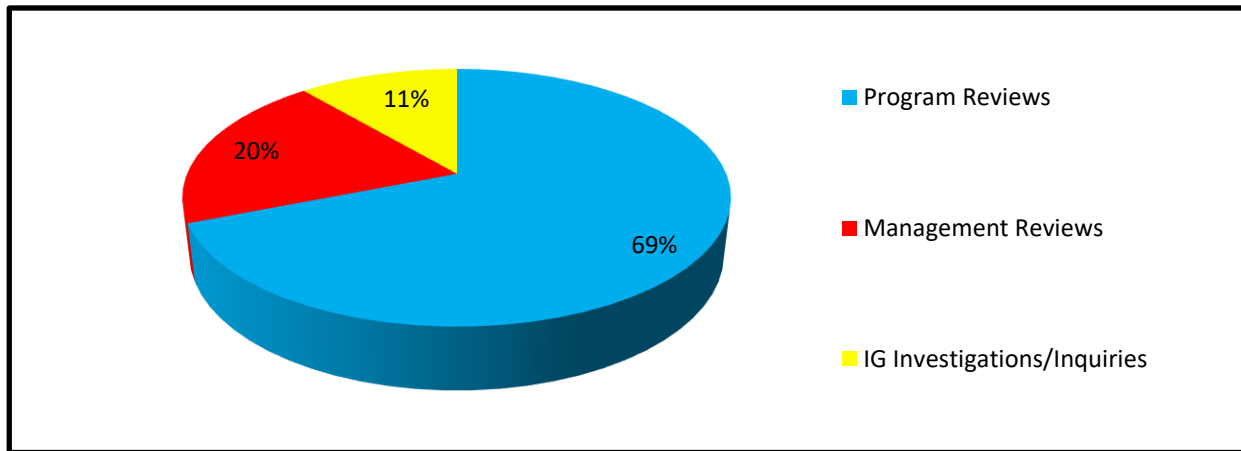
In addition to answering telephone calls, entering incidents into the CCC system, and making daily referrals to the program areas regarding received incidents, the IOC employees also perform the following functions:

- 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 FSNF 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 **8,038** calls were received by the CCC.
- Duty officers logged a of **6,333** reportable incidents and **1,705** non-reportable incidents into the CCC tracking system. The majority of these incidents dealt with miscellaneous events (**3,285**), medical issues (**1,232**), and complaints against staff (**1,197**).
- Approximately **15,646** 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 Public Health Emergency (**3,931**), Violation of Policy/Rule (**1,504**), Improper Supervision (**1,292**), Medical Transport (**1,153**), and Use of Force-Improper (**793**),
- A total of **757** incidents were assigned for either a review or investigation. This number comprises **522** Program Reviews, **150** Management Reviews, and **85** IG Investigations/Inquiries.

Incidents Assigned for Investigation or Management/Program Review



Background Screening Unit

The Background Screening Unit (BSU) is located within the Office of the Inspector General. 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 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 how the Department checks a person’s criminal history to determine if they meet statutory requirements to work or volunteer. The person’s fingerprints are submitted to the Florida Department of Law Enforcement (FDLE) and the Federal Bureau of Investigation (FBI) for processing and a demographic search of the Comprehensive Case Information System (CCIS), a database that collects and displays the criminal records stored in courthouses throughout the State of Florida, is performed. Also, as a criminal justice agency, the criminal history reports received from the FDLE and FBI display all adult arrests and may also include juvenile, sealed, and expunged criminal history information.

Screening Types

The Department conducts two types of background screenings; **Livescan** which is the initial screening of potential employees and volunteers and **Rescreening/Resubmissions** that occur every 5 years of continued service.

Through the **Livescan** process, applicants seeking employment or to volunteer with the Department or a contracted provider are fingerprinted. The fingerprints are electronically transmitted to the FDLE and the FBI and within 72 hours the criminal search result is returned to the BSU. Livescan fingerprinting also allows FDLE to send an electronic notice to the BSU when an employee or volunteer receives a new Florida arrest.

The **5-Year Rescreen/Resubmission** is a national criminal records check completed for all state and contracted provider employees and volunteers. The fingerprints from the Livescan screening are kept on file by FDLE and resubmitted to the FBI every 5-Years of continued services. The purpose of rescreening/resubmission is to ensure current employees and volunteers maintain level II screening standards throughout the term of their employment and/or service. FDLE recently implemented Federal Rap Back Services. This service keeps the fingerprints of employees and volunteers on file and will provide

notification to the Department when a person is fingerprinted for a new arrest or criminal registration in the United States. National Rap Back Services, when fully implemented, will eliminate the need for 5-Year Rescreening/Resubmission.

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 applicants seeking state employment with the Department 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 applicants for state employment with the Department 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 985.66, F.S.

Exemption for 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 processes
- Operates Livescan Devices and Photograph Equipment
- Coordinates the Installation of new Department Livescan Devices
- 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
- Creates and maintains policies and procedures
- Processes background screening invoices
- Processes retention notification, billing, and deletions

- Corresponds nationally with law enforcement agencies and court clerks
- Collects and catalogs Annual Affidavits
- Scans completed screening documents into an archival database for future reference and access
- Responds to in-person, telephone, fax, and e-mail inquiries

Statistical Data

- **14,505** employee background screenings were conducted
- **\$2,277.28** in fingerprint processing fees and fingerprint retention fees were collected
- **30** credit card transactions and 104 checks were processed
- **1,075** applicants were statutorily disqualified, failed to submit needed information, or were withdrawn by the requester
- **64** applicants requested an exemption hearing for an offense appearing on their record that was statutorily disqualifying
- **286** arrest notifications were received and processed
- **14,505** record searches were conducted in the Inspector General Incident Tracking system
- Approximately **72,525** pages of documents were scanned into the screening archival database
- Approximately **16,202** customer calls/faxes and e-mail inquiries were serviced

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