

# FLORIDA DEPARTMENT OF JUVENILE JUSTICE PROCEDURE



**Title:** Incident Operations Center and Incident Review Procedures

**Related Rule:** 63F-11, Florida Administrative Code (F.A.C.)

This procedure applies to both the Incident Operations Center (IOC) and the review components of incident management. The purpose of this procedure is to support the Department's efforts to ensure the safety of youth, staff, and the general public, while improving youth and program outcomes.

## I. DEFINITIONS

**Central Communications Center (CCC)** – The unit located in Department headquarters and within the IOC that is charged with receiving reports regarding incidents and events involving youth in Department custody or under supervision, and state and contracted employees from all Department and provider facilities, programs funded in whole or in part, offices or sites operated by the Department, a provider or grantee.

**CCC Daily Report** – The report reflects all incoming information for the prior twenty-four (24) hour period (6:01 a.m. to 6:00 a.m.) and distributed each administrative workday to the Secretary, Executive Leadership Team (ELT), and other authorized recipients.

**Central Communications Center (CCC) Desk Guide** – Training materials and guidelines used by the CCC duty officer to assist in obtaining accurate detailed incident information from a complainant.

**Central Communications Center (CCC) Duty Officer** – The designated Department employee who receives and processes the information received by the CCC.

**Central Communications Center (CCC) Supervisor** – This position supervises the CCC duty officers and the day-to-day operations of the CCC, a unit of the IOC, reporting to the IOC director in the Office of Inspector General (OIG).

**Daily Determination (DD)** - A process in which the OIG reviews all information received about an incident, including updates and the program area's recommendations and instructions, in order to determine which entity is responsible for investigating or reviewing an incident by using all available information and Appendix A. The IOC will send a daily report, excluding weekends and holidays, by close of business documenting initial incident dispositions and assignments in accordance with timeframes outlined in Appendix B.

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**Incident Operations Center (IOC)** - The unit within the OIG that is charged with receiving, logging, and transmitting pertinent incident information from Department employees, providers, grantees, facility staff, parents, youths, or the general public to executive management. The unit is responsible for the management of reportable incidents, trend analysis based on documented incidents, the daily review and initial assignment of incidents accepted by the CCC, and review of all completed reviews and Inspector General (IG) Investigations. The IOC consists of the CCC, IOC director, CCC supervisor, IOC analysts and CCC duty officers

**Incident Operations Center (IOC) Analyst** – This position reports to the IOC director and serves as the point of contact between the IOC and the program areas. This position is responsible for trend analysis, monitoring status updates, quality compliance, and other tasks required to ensure incidents are managed consistently across the Department.

**Incident Operations Center (IOC) Director** – This position reports to the chief of investigations in the Office of Inspector General and directs and supervises the CCC supervisor, IOC analysts, and the overall operations of the IOC and the incident management process.

**Information Only** – A finding type used when an incident that does not require further action or review is closed as “Information Only.”

**Information/Arrest** – A finding type used when an incident that does not require further action or review is closed as “Information/Arrest” due to the subject being arrested.

**Inspector General Investigation (IG Investigation)** – An investigation conducted by the Department’s Office of Inspector General (OIG) based on statutory requirements. The OIG investigates those complaints that are serious in nature and generally fall into one or more of the following categories: Whistleblower complaints; Equal Employment Opportunity Complaints (EEOC); incidents involving a death or serious injury of a youth while in the custody of the Department or provider; complaints of staff-on-youth sexual misconduct, computer misuse (involving pornography or threats), fraud or other criminal acts by Department employees or providers; disturbances resulting in a significant law enforcement response. Additionally, the OIG will investigate incidents and complaints as directed by the Secretary or Inspector General.

**Management Review** - Review of incidents that are evaluated as severe in nature and meet one or more of the following criteria: evidence of a crisis situation; involve serious breaches in the safety and security of youth and staff; or are indicative of unaddressed systemic issues. Unless accepted by the Office of Inspector General for investigation, the following incident types require a management review: escape; systematic falsification of records or documents; non-consensual youth-on-youth contact; and staff-on-youth sexual contact. Other incident types may be assigned for a management review at the discretion of the OIG. This level of review shall only be completed by staff designated as management review specialists.

**Management Review Coordinators (MRC)** – The staff designated to supervise the management review specialists. These staff are responsible for the coordination and assignment of an incident to a specific management review specialist and review/approval of the management reviews. These staff must receive the same training as the management review specialists.

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**Management Review Specialist (MRS)** –The staff member designated and specifically trained to conduct management reviews as their full time job responsibility.

**Non-Reportable Incident** - An incident that is received by the CCC that does not meet the criteria of a reportable incident, as defined in 63F-11.004, F.A.C.

**Program Area** – Includes Detention Services, Prevention and Victim Services, Probation and Community Intervention, and Residential Services.

**Program Area Assistant Secretary** – Directs and oversees program area activities related to incident responses.

**Program Area Liaison** – Oversees the day-to-day management of incidents after they are assigned to the program area for action. This person shall ensure program reviews are assigned appropriately to limit any conflict of interest by the program reviewer. The program area liaison is the primary interface between the program area and the IOC. This person may also serve as the designee for the program area assistant secretary.

**Program Review** - Review of incidents that are administrative and are not considered severe in nature. These incidents may involve issues of safety/security of youth and staff but do not appear to be indicative of unaddressed systemic issues; interruptions of normal program/facility operations or procedures; or is the trigger of a crisis. Program reviews are conducted by program area staff.

**Program Reviewer** – The program area staff member assigned to gather information and conduct program reviews. Only Department employees are authorized to serve in this capacity and must be trained and approved by the OIG to conduct program reviews. Program reviewers shall ensure they have no conflict of interest when completing reviews and not conduct reviews when a conflict exists. A conflict may exist if the reviewer directly supervises the person they are reviewing, has direct involvement in the incident in question, or stands to gain personal, financial, or legal benefit. For instance, it would be a conflict for a juvenile probation officer supervisor (JPOS) to complete a review involving a juvenile probation officer (JPO) under their supervision. Additionally, a juvenile detention officer supervisor (JDOS), assistant superintendent, etc. shall not conduct the review if they were involved in the incident needing review. Any reviewer with a conflict of interest shall immediately notify the program area liaison.

**Provider** – An entity with which the Department has contracted for services or other tangible deliverables. For the purposes of this procedure, a state operated facility or program is also considered a provider.

**Rule Reportable Incident** – Any incident classified as reportable, as defined in 63F-11.004, F.A.C.

**Substantiated by Provider** – At the discretion of the program area and the IOC, an incident that does not require further action or review may be closed with a finding of “Substantiated by Provider.” In order to meet this criteria, the contracted provider must have taken documented corrective action and the incident must not involve any youth injuries. These incidents are considered substantiated for purposes of risk assessments, statistics, and background screening.

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### **II. STANDARDS/PROCEDURES**

#### **A. Incident Received**

1. Incidents shall be reported to the CCC via phone, US mail, voice mail, e-mail, facsimile, walk-in, or any other form of communication.
2. Incidents must be reported to the CCC within two hours of occurrence, or within two hours of the affected facility, office, or staff becoming aware of the incident, with the exception of those incidents specified in paragraph 63F-11.004(3)(d), F.A.C.
3. The CCC shall receive/accept all reportable incidents for further evaluation. If received, all non-reportable incidents shall be documented and forwarded to the program areas for follow up as necessary.
4. The CCC duty officer shall check voice mail, facsimile, and e-mail upon arriving for duty and no less than every 1 hour during the shift, following call return requirements specified in 63F-11.003(1)(b.) (2) F.A.C.

#### **B. Log Incident and Notify**

1. Using questions from the CCC Desk Guide, the CCC duty officer shall gather and record the following information (as available) in the required fields in the CCC system, collectively known as the incident report:
  - a. Program Area
  - b. Incident Date
  - c. Incident Time
  - d. Category(s)
  - e. Program
  - f. Reported By
  - g. Phone Number
  - h. Background Information
  - i. Immediate Actions Taken
2. Submission of the incident report in the system generates a unique identifier (number) for all reported incidents, which is used to identify incidents for all reporting, tracking, and analytical purposes.
  - a. The CCC duty officer shall provide the incident number to the reporter with instructions to provide this number when corresponding with the CCC, IOC or the program area regarding the incident.
3. The CCC duty officer shall utilize the CCC system search capabilities to ensure the reported incident is not a duplicate of other active or non-active incidents.
  - a. If a duplicate is located, the CCC duty officer shall enter the related incident number in the related incident(s) field of the current record. The CCC system updates both records with the data required to link the incidents for retrieval purposes.
  - b. If the report is a duplicate, the CCC duty officer shall close the duplicate incident in the system. The system maintains the record for reporting and analysis purposes.
4. Upon completion of the incident intake report, the CCC duty officer shall utilize the CCC system to notify the appropriate designated program area representatives of the details of the incident report using

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the established group email function (refer to CCC Desk Guide). This applies to non-duplicative incidents only.

- a. Upon receipt of this initial notification, the program area assistant secretary or designee shall initiate preliminary review activities.
- b. The program area shall take subsequent actions necessary to protect youth, prevent further harm, or reduce immediate risk.
- c. Any updates reported to the CCC duty officer or the IOC analyst will be noted in the CCC system and an update email will be sent using the established group email function.
- d. Updates provided to any member of the Executive Leadership Team will also need to be provided to the IOC for inclusion into the CCC database.

### **C. Conduct Initial Review**

1. Upon receipt of an incident, the CCC duty officer uses the CCC email system to notify the program area that an incident involving the program area has been received. The program area management staff shall ensure updates are entered into the CCC database within 24 hours after the associated CCC Report is generated.
  - a. The program area operations staff member shall provide a prompt assessment of the status of the incident, including notifying the program area of any findings and/or actions that were previously initiated for the incident. Program areas may develop their own initial assessment process. *[NOTE: The program area operations staff member does not conduct a program review of the incident at this time. Instead, only additional clarification of known existing facts regarding the incident will be required to be documented in the CCC database.]*
  - b. Program area management verifies the incident record in the CCC system reflects the current incident status by 1:00 p.m. EST, in accordance with Appendix B, and provides any additional information that can assist in determining closure or assignment for investigation or review.
  - c. The program area liaison is responsible for ensuring recommendations for assignment or closure, along with any instructions, are documented prior to the associated daily determination.

### **D. Determination of Review Type**

The Office of Inspector General (OIG) staff will review all information received regarding a specific incident in order to determine how the incident is managed by the Department. Incidents reported to the CCC that are not accepted for investigation or management review by the OIG but cannot be immediately closed as “Information Only” or “Information/Arrest,” will be assigned to the appropriate program area for a program review.

1. During the daily determination process, the Office of Inspector General shall facilitate the review of all reported incidents.
  - a. The review type (program review, management review, IG investigation/inquiry) will be made based upon the facts of the incident known at the time of assignment utilizing established criteria (Appendix A), program area recommendations, and any updates.

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- b. Generally the established criteria will serve as a guide for the initial assignment. However, additional facts may become known, requiring a change of assignment.
    - c. Factors to be considered in the assignment of a review are as follows: severity of the incident; impact on safety and security of staff and youth; the program area involved; history of prior incidents; the anticipated time required to complete the review; and program management discretion.
      - In cases with no injuries where the provider has reached an internal substantiated finding and taken corrective action, the program area may request the IOC close the incident as “Substantiated by Provider.”
  2. Assignment types include:
    - a. Investigation, inquiry, or management review by the Office of Inspector General;
    - b. Referral to the program area as a program review; or
    - c. Closure in the CCC database as “Information Only” or “Information/Arrest.”
    - d. Closure in the CCC database as “Substantiated by Provider.”
  3. Following the associated daily determination process, the IOC analyst shall update the assignment in the CCC database accordingly by 5:00 p.m. on each business day.
  4. The program area liaison/designee and the OIG shall then assign the incident/review to the designated personnel by noon the following day.
  5. There may be circumstances which necessitate an immediate assignment of an incident prior to the initiation of the daily determination process based on Appendix A or requests by the ELT. Additionally, assignments may be delayed in order to allow more time to gather facts.
  6. Should the program area assistant secretary or designee wish to elevate the review to the OIG, justification for the change will be sent via email, to the chief of investigations (COI) with a copy sent to the IOC director. Upon concurrence by the COI, the IOC is authorized to effect the change in the CCC system.
  7. Reportable incidents not involving program areas:
    - a. If a reportable incident is received that does not involve one of the four program areas, the IOC will document all available information and if possible, close the case based on established guidelines.
    - b. In those cases that cannot be immediately resolved, the IOC will consult with the OIG for further direction.

### **E. Conduct Review**

#### **1. Program Reviews**

- a. Typically do not require site visits; however, one may be conducted if necessary.
- b. At a minimum, interviews shall be conducted with the victim and subject, if available/applicable.
- c. Resolution of these incidents may require the analysis of related documents, such as policies and procedures, logbooks, review of video(s) (if available), etc.
- d. The timeframe to complete a program review should not exceed 60 calendar days from date of assignment.
- e. Any extensions must be approved by the program area assistant secretary or designee. Written justification for extensions must be documented. Three or more extensions must be approved by the program area assistant secretary.

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- f. The findings and/or actions taken and request for case closure shall be approved by the program area assistant secretary or designee.
- g. Must be completed in accordance with program/management review training curriculum.

**2. Management Reviews**

- a. Require a site visit be conducted, except for cases that would be strictly limited to documentation reviews, i.e. probation supervision cases.
- b. Formal face-to-face interviews shall be conducted with the victim, all witnesses, and subject, if available/applicable.
- c. Resolution of these incidents require a review and analysis of related documents such as policies and procedures, logbooks, videos (if available), etc.
- d. The timeframe to complete a management review should not exceed 60 calendar days from date of assignment.
- e. Any extensions must be approved by the management review coordinator or designee. Written justification for the extension must be documented. Three or more extensions must be approved by the COI.
- f. The findings and/or actions taken shall be reviewed and accepted by the program area assistant secretary or designee.
- g. May only be conducted by management review specialists.
- h. Must be completed in accordance with program/management review training curriculum.

**F. Completion of Status Updates and Extensions\***

- 1. The assigned reviewer must utilize the CCC database to document up-to-date case status. At a minimum, an entry shall be made every 14 calendar days. Entries should document all activity completed to date and whether case closure is on target for completion.
- 2. The assigned reviewer must complete all appropriate screens in the CCC system within the 60-calendar day timeframe.
- 3. Any program review or management review not closed by the reviewer within the 60-calendar day timeframe requires a request for extension and approval by the respective program area assistant secretary/designee or OIG/designee. All extension requests and approvals will be documented in the CCC system. Only the program area assistant secretary or OIG chief of investigations may approve the third or greater extension request.
- 4. When granting extensions, the program area assistant secretary or designee should consider the complexity of the review, any Department of Children and Families (DCF) involvement, level of cooperation by the program and/or subject(s)/victim(s)/witness(es), caseload, etc. If the due date falls on a holiday or weekend, it is due the following business day. Extensions will be granted in 14 calendar day increments; however, in special circumstances involving law enforcement or external agencies such as DCF, the extension can be longer if credible information from the external partner indicates a longer timeframe is required. This does not eliminate the requirement for 14 calendar day status updates by the assigned reviewer

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5. The program area liaison/designee or management review coordinator shall input approved extension dates into the CCC system, including the reason and revised due date.
6. The IOC analyst shall track all open program and management reviews using the CCC system. Tracking shall include, but is not limited to, the number of reviews assigned to each reviewer, timeframes for completion of reviews, and disposition of the reviews. This information shall be provided to the program areas as a system-generated report.

**G. Completion of the Program Review and Report Submission**

1. The assigned program reviewer shall enter all information related to the review into the appropriate screens in the CCC system. If the program has completed disciplinary or corrective actions prior to the case being submitted, the program reviewer shall attach all available supporting documentation. Upon completion, the assigned reviewer shall use the CCC system to submit the report and associated documents for review and acceptance by program area leadership staff.
2. The program area leadership staff shall review and approve and/or reject the review within 30-business days (combined days in both the Regional and Program Area queues). In cases where there are substantiated findings against a non-state employee, a portion of the draft report will be sent to the program and subjects who will then have 5-business days to respond and/or contest the findings in writing. The program will receive the redacted investigative summary and the subject will receive his/her redacted interview summary and findings.
3. If the findings are contested, the program area will have 10-business days to resolve. Any challenges must be resolved prior to submission to the IOC for closure. All contested responses and related final decisions shall be included in the CCC database and the final report.
4. The program area assistant secretary shall review and approve or reject the review within 10 business days.
5. Once the incident has received assistant secretary approval in the CCC system, the IOC analyst will review the incident using the Incident Closure Checklist to ensure all required documents are present and all requirements have been met to include corrective action and data integrity. The IOC analyst shall review and approve the review within 10-business days. An incident is considered resolved when the IOC has approved and closed the review in the CCC system.
  - a. If any issues are identified during the IOC quality check, the IOC analyst may, depending on the complexity, either reject the incident or communicate their concerns to the assigned reviewer and the program area approver for resolution.
  - b. Unless otherwise documented, the program area shall provide the IOC analyst with the needed documents/information within 5-business days.

**H. Completion of the Management Review Report Submission**

1. The assigned management reviewer shall enter all information related to the review into the appropriate screens in the CCC system. If the program has completed disciplinary or corrective actions prior to the case being submitted, the management reviewer shall attach all available supporting documentation. Upon completion, the assigned reviewer shall use the CCC system to submit the report and associated documents for review and approval to the management review coordinator (MRC).



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2. In cases where there are substantiated findings against a non-state employee, the MRC or designee shall send the draft report to the program and subjects who will then have 10-business days to respond and/or contest the findings in writing. The provider will receive the redacted investigative summary and the subject will receive his/her redacted interview summary and findings.
3. If the findings are contested, the MRC will have 10-business days to resolve. All contested responses and related final decisions shall be included in the CCC database and the final report.
4. Once the MRC has approved the case, the case will be forwarded to the program area's queue for review, action, and acceptance. Any corrective action should be attached at this point.
5. The program area leadership staff shall have 20-business days to complete all corrective action and forward to the IOC for review and closure.
6. The IOC analyst will review the incident using the Incident Closure Checklist to ensure all required documents are present and all requirements have been met to include corrective action and data integrity. The IOC analyst shall review, approve, and close the review within 10-business days. An incident is considered resolved when the IOC has approved and closed the review in the CCC system.
  - a. If any issues are identified during the IOC quality check, the IOC analyst may, depending on the complexity, either reject the incident or communicate their concerns to the assigned reviewer and the management review coordinator for resolution.
  - b. Unless otherwise documented, the MRC shall provide the IOC analyst with the needed documents/information within 5-business days.

### **I. Completion of the OIG Cases and Submission**

1. The OIG will follow internal guidelines, Department policies and state statute.
2. Once the case is completed, the assigned inspector specialist will submit the report to the respective investigations coordinator (IC) for review and approval. At this time, the assigned inspector shall use the CCC system to document case submission to the IC. If the program has completed disciplinary or corrective actions prior to the case being submitted, the inspector shall attach all available supporting documentation into the CCC database. Additionally, the inspector shall document DCF and law enforcement involvement if applicable.
3. Once the draft report has been approved through the IG, the IC or designee shall send the draft report in accordance with established state statute and OIG policies and procedures.
4. After the 20-business day review period, the assigned IC will enter the summary of findings and document the case approval into the CCC database. All contested responses and related final decisions shall be included in the CCC database and the final report.
5. The IG or designee will then approve and submit the case in the CCC system which will automatically forward the case to the program area for review and completion of any required disposition forms/corrective actions. The program area will have 30-calendar days to enter/attach documentation of actions taken.
6. Once the program area has reviewed the report, they will submit the case to the IOC for quality review and closure.
7. The IOC analyst will review the incident using the Incident Closure Checklist to ensure all required documents are present and all requirements have been met to include corrective action and data integrity. The IOC analyst shall review and close the case within 10-business days.

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- a. If any issues are identified during the IOC quality check, the IOC analyst will communicate the concerns to the COI for resolution.

**J. Complaint Against Staff Findings for Program Reviews, Management Reviews, and Inspector General Referrals**

1. Program and Management Reviews:
  - a. Substantiated: The evidence supports the allegation occurred and was a violation of rule, policy, or state statute.
  - b. Unsubstantiated: The evidence supports the allegation did not occur.
  - c. Inconclusive: The evidence was unable to prove or disprove the allegation.
  - d. Substantiated by Provider: The provider determined the evidence supports the allegation occurred and was a violation of rule, policy, or state statute and the provider took documented completed corrective action.
  - e. Information/Arrest: The specific classification regarding a staff arrest is closed as information/arrest and is documented for statistical purposes only.
2. Inspector General Investigations/Inquires shall adhere to the internal policies set forth by the Office of Inspector General.

**K. Falsification Allegations**

1. If the alleged falsification contributes to great bodily harm or the death of an individual in the care and custody of the Department, or if the appropriate assistant secretary or ELT member determines the allegations should be referred to law enforcement, the assigned staff will collect and secure evidence (i.e. witness statements, video recordings, logbooks, etc.) and contact the appropriate law enforcement agency to report the incident for criminal investigation. The subject of the investigation shall not be interviewed by Department personnel until after the law enforcement investigation is either concluded or the Department has been notified that law enforcement has declined to investigate.
2. For all other falsification allegations and those that law enforcement declines to investigate, the matter will be referred for an OIG investigation/inquiry, management review, or to the appropriate program area for a program review. Prior to substantiating a finding of falsification of records, the reviewer/investigator shall consult with the Office of General Counsel (OGC) for legal determination as to whether the activity alleged would constitute falsification. While some staff actions may not meet the legal determination for falsification, they may still constitute a violation of policy/rule which should be addressed by the reviewer/investigator.
3. For State employees, a substantiated or sustained finding of record falsification will result in the employee being dismissed. For provider employees, when a Regional Director or designee receives notice that record falsification has occurred (i.e. through receipt of an IG report, a management review report, program review report, etc.), he/she will forward a copy of the report to the contract provider and request documentation of completed corrective action.

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### **L. Third Party Reviews**

1. If allegations involve people who are not Department or direct contract provider staff, the reviewer must first review contracts, agreements, etc., in order to determine if the Department has any oversight authority.
  - a. These documents will need to state the third party entity is required to follow the rules and policies of the provider and/or the Department, AND is subject to review by the provider and/or the Department.
  - b. The applicable section of these documents should be included in the Documents Reviewed section of the CCC.
  - c. If unable to determine oversight authority, the reviewer will contact the OGC for guidance before proceeding with the review.
2. If it is determined the Department has oversight authority, the reviewer will follow the normal management review process, and
  - a. Notify the employer that a review is being conducted and if applicable, the allegations against the staff.
  - b. If requested and part of the third party's right by contract, they may bring a representative to the interview.
    - The representative may not interfere with the review but may give advice to the person they are representing.
3. If it is determined the Department does not have oversight authority, the following applies:
  - a. In cases where a policy violation may have been committed by the third party, notify the employer and/or the agency with oversight and file a formal complaint.
  - b. In cases where the third party may have committed a criminal act, to include potential Prison Rape Elimination Act (PREA) violations, contact the appropriate law enforcement agency.
    - The reviewer should monitor the progress of any outside agency investigation.
    - The reviewer should only proceed with their review when given clearance by law enforcement to do so.
  - c. In those cases where the third party is the subject, for CCC purposes, list them as "Other" in the Involvement Type field and their Person Type as "Third Party."
    - It is important in these instances to include the results of any outside agencies investigation(s) in the Investigative Summary field of CCC.
  - d. If the third party's involvement is that of a witness, then identify them as such in the CCC Involvement Type field.
    - You may interview them after notifying their employer as indicated in 2 (a) above and allowing a representative as outlined in 2 (b) above.
    - If it is unknown whether the third party is a witness or a subject, further investigate in order to determine the third party's involvement type prior to interviewing them.
  - e. In those cases where the third party is the only one thought to have violated policy and the outside agencies investigation does not find them at fault:
    - Close the classification with a finding of "Information Only" and list their involvement type as "Other" and their Person Type as "Third Party."

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- i. In cases where evidence indicates the third party is in violation of policy and/or it is no longer reasonable to allow them to remain in a facility, the reviewer will list any action taken in the Investigative Summary field. Whether or not the third party is able to continue working at a Department or contracted facility should be included.
- ii. In cases where the third party has not been found or suspected of violating a policy, notes in the Investigative Summary field should indicate such.
  - When reviewing prior CCC involvement, the Department’s Background Screening Unit will need to check the Investigative Summary field when a potential applicant is listed as “Other” or has an “O” listed in the Involvement Type field of a CCC incident to ensure they were not a third party participant.
- f. In these cases, the reviewer shall notify the appropriate contract manager and assistant secretary that the contract does not provide for third party reviews by the Department.
  - It is the expectation that language in the contract or interagency agreement allow all third parties to be subject to review by the Department as necessary.

**M. Provider/Subject Responses for Program and Management Reviews**

- 1. If the affected contracted provider or non-state employed subject disagrees with substantiated findings, they will have the opportunity to request a review of the findings.
- 2. Upon receipt of the program/management review report, the affected parties shall have 5-business days for program reviews and 10-business days for management reviews to provide written comments to the designated liaison.
- 3. The designated liaison will provide a response to the provider/subject within 10-business days.
- 4. All responses are resolved and attached in the CCC database prior to submission to the IOC for closure.

**N. Conduct Program Area Level Trend Analysis**

- 1. The IOC analyst shall conduct ongoing incident trend analysis according to steps outlined in the IOC’s desktop procedures to identify patterns or trends that may be used to identify larger issues, which may not be evident in a single incident.
- 2. The IOC will also respond to specific requests from program areas.

**O. Track and Report\***

- 1. The IOC serves as a central resource for maintaining and reporting current status on all reported incidents.
- 2. The IOC will produce a bi-weekly report documenting incidents closed and the status of all open incidents. This report shall be distributed to the program area assistant secretaries, their designees, and other members of the ELT.

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**III. RESPONSIBILITY AND DUTIES**

**A. CCC Duty Officer**

1. Designated DJJ employee who receives and processes the information reported to the CCC.
2. Checks various reporting channels during assigned shift to ensure timely response to incidents.
3. Conducts analysis to ensure duplicate reports are linked in the system.
4. Ensures compliance with 63F-11.003 and 63F-11.004 F.A.C.
5. Updates Incident records with initial information from the program areas that affects determination of responsibility.

**B. CCC Supervisor**

1. Directs and supervises the daily operations of the CCC call center.
2. Supervises the CCC duty officers.
3. Collects data and assists the IOC director in producing incident trend reports.
4. Ensures incidents are classified correctly.
5. Oversees workload in CCC call center and ensures CCC call center has adequate staffing during hours of operation.
6. Provides technical assistance to program areas and contracted providers in the area of incident reporting.

**C. IOC Analyst**

1. Reviews, classifies, and assigns incidents reported to the CCC to the appropriate program area.
2. Notifies the program areas of incidents assigned for action.
3. Monitors the status of open incidents in program areas and reports on their status to management as requested.
4. Conducts proactive follow-up with program area staff to ensure status updates are provided in a timely manner.
5. Provides preliminary review of incidents slated for closure.
6. Conducts program area incident trend analysis.
8. Completes the IOC Incident Closure Checklist to ensure data integrity and compliance with Department policy.

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**D. IOC Director**

1. Designated Department employee who manages and supervises the IOC.
2. Facilitates the daily determination process to determine the responsibility for the handling of incidents.
3. Ensures the creation and dissemination of the CCC Daily Report.
4. Creates a bi-weekly Department-wide Review Status Summary.
5. Ensures incidents are reviewed for data integrity and completeness.
6. Conducts Department-wide incident trend analysis.

**E. Management Review Coordinator**

1. Supervises the management review specialists and oversees workload.
2. Assigns management reviews to the appropriate management review specialist.

**F. Management Review Specialist**

1. Completes assigned management reviews at the direction of the OIG.
2. Reports status on open management reviews.
3. Requests incidents to be escalated, through chain of command, when IG investigations may be needed.

**G. Office of Inspector General**

1. Directs the daily determination process and selects incidents for action.
2. Responds to program areas requests to review incidents that are potential candidates for IG action (Investigation or Inquiry).
3. Conducts investigations and reports findings when completed.
4. Investigations coordinators supervise the inspector specialists and oversee workloads by assigning reviews to the appropriate inspector specialist.

**H. Program Area Assistant Secretary**

1. Directs program area staff in researching and responding to incidents.
2. Accountable for completion of program reviews.
3. Reviews program/management review reports and approves actions.
4. Has the final authority regarding the outcome of all formal responses contesting program review findings.

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**I. Program Area Program Reviewer**

1. Completes assigned program reviews at the direction of the assistant secretary.
2. Reports status on open program reviews.
3. Requests incidents to be escalated, through chain of command, when IG action may be needed.

**J. Program Area Liaison**

1. Coordinates with program area staff in researching and responding to incidents.
2. Assigns program reviews to the appropriate program reviewer.
3. Ensures provider/subject responses are processed according to policy and coordinates with the program area assistant secretary, when needed.
4. Coordinates with the IOC on any assignment issues.
5. Ensures updates and recommendations are provided to the IOC by 1:00 p.m. (excluding weekends and holidays) based on Appendix B.

**K. Staff Development and Training**

1. Designs training curricula required for OIG staff to conduct program and management review training. The training is developed with input from the IOC, the OIG, and the program areas.

**\*Implementation to begin when the CCC system is updated. If applicable/feasible, a workaround will be developed.**