

# PREA AUDIT: AUDITOR'S SUMMARY REPORT

## JUVENILE FACILITIES

NATIONAL  
PREA  
RESOURCE  
CENTER



**BJA**  
Bureau of Justice Assistance  
U.S. Department of Justice

<b>Name of Facility:</b> Hillsborough Regional Juvenile Detention Center			
<b>Physical Address:</b> 3948 W. Martin Luther King Jr. Blvd, Tampa, FL 33614			
<b>Date report submitted:</b> December 31, 2014			
<b>Auditor information</b> Dan McGehee			
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<b>Date of facility visit</b> August 13-14, 2014			
<b>Facility Information</b>			
<b>Facility Mailing Address:</b> <i>(if different from above)</i>			
<b>Telephone Number:</b> 813-871-7650			
<b>The Facility is:</b>	<input type="checkbox"/> Military	<input type="checkbox"/> County	<input type="checkbox"/> Federal
	<input type="checkbox"/> Private for profit	<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> State
	<input type="checkbox"/> Private not for profit		
<b>Facility Type:</b>	<input checked="" type="checkbox"/> Detention	<input type="checkbox"/> Correction	<input type="checkbox"/> Other:
<b>Name of PREA Compliance Manager:</b> Fernando Crespo		<b>Title:</b> Superintendent	
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<b>Agency Information</b>			
<b>Name of Agency:</b> Florida Department of Juvenile Justice			
Governing Authority or Parent Agency: Florida Department of Juvenile Justice			
<b>Physical Address:</b> 2737 Centerview Drive, Tallahassee, FL 32399			
<b>Mailing Address:</b> <i>(if different from above)</i>			
<b>Telephone Number:</b> 850-717-2533			
<b>Agency Chief Executive Officer</b>			
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# AUDIT FINDINGS

## **Program Description:**

Hillsborough Regional Juvenile Detention Center (HRJDC) located in Tampa, Florida, is a 92 bed, hardware secure facility that serves male and female juveniles detained by various circuit court(s). HRJDC is operated by the Florida Department of Juvenile Justice (FDJJ) and serves Hillsborough County area youth who are detained pending adjudication, disposition or placement in a commitment facility. The average length of stay for residents is approximately 21 days.

The facility employs 75 full-time staff. The management team consists of a superintendent, one assistant superintendent, three shift commanders, and four supervisors. Medical staff are contracted through Maxim Healthcare Services and mental health services are provided by Camelot Community Care. The Florida Department of Education provides funding to the Hillsborough County School Board to provide residents with academic educational services. Facility staff provides direct supervision of youth in a safe, secure and humane environment.

Hillsborough West Regional Juvenile Detention Center provides comprehensive mental health and substance abuse services to all detained youth, as well as education and healthcare. Various mental health services and groups are offered to youth throughout their confinement. The center has a full-time licensed clinical social worker (LCSW) serving as the designated mental health authority (DMHA) responsible for the overall coordination, implementation and supervision of all mental health and substance abuse services provided at the center. Mental health and substance abuse services are provided seven days per week by a LCSW and a non-licensed Master's level clinician. They also have two other licensed mental health counselors (LMHC) who fill in. The DMHA also provides face-to-face clinical supervision with directions, instructions, and recommendations to the one non-licensed clinician. There are no substance abuse-specific positions at the center. They currently employ one part-time licensed psychiatrist.

## **FACILITY DESCRIPTION:**

The facility appears to have been constructed in the 1980s of concrete and concrete block construction. It is located adjacent to a residential program for juveniles, both of which are next to the athletic stadiums for baseball (George Steinbrenner) and football (Raymond James Stadium). The facility is high custody with controlled entrance and egress for both staff and contractors. A metal detector and wand are used at the pedestrian entrance. There is a small control center to control entrances and monitor the 56 cameras. Cameras may also be accessed and viewed in the Superintendent and Assistant Superintendent's offices. Staff have identified additional blind spots in the facility and in areas where youth could be present and have labeled them "red check areas"—off limits for youth. The auditor suggested that perhaps mirrors could be installed to assist in improving sight lines.

There are three living units for males and one for females. Some youth are single room assigned and some males are assigned to two and three-bed rooms. Youth are screened for placement based on results from VSAB—Victimization and Sexually Aggressive Behavior screening tool. Rooms are equipped with toilets, but no sinks. Sinks are located adjacent to communal showers. Youth are locked in rooms at night with documented ten-minute checks.

The facility also contains a medical area, cafeteria, dayrooms, and classrooms. All are accessible by central hallway. Living units have their own outside recreation spaces. There is a laundry area where staff wash clothing and linens for the youth.

### **Summary of Audit Findings:**

The posting of the audit notice was not completed by staff as required. Therefore, the auditor allowed a new audit notice to be posted during the audit asking for correspondence by Sept 3, 2014 from anyone who wanted to submit comments regarding PREA.

The PREA audit of the HWJDC was conducted on August 13 and 14, 2014, by Dan McGehee, certified PREA auditor. An entrance briefing was held in the conference room with the Superintendent, Assistant Superintendent and the PREA assistant. Mr. McGehee reviewed the audit time table and process and thanked the staff for working with him on becoming PREA compliant.

A tour of the facility was then completed. The auditor examined the showers and inquired about the shower process for both boys and girls. There were no shower curtains or screens for privacy for girls, and boys showered as many as 3 at one time in communal showers. Staff stood in the doorway to supervise residents, and they are always the same gender as the ones being supervised.

Following the tour, the auditor worked in the conference room on reviewing documentation to determine standards compliance. In the afternoon, the auditor conducted interviews with seven staff.

On the second day, the auditor interviewed six residents, at least one from each living unit. Interviews with residents revealed answers that were inconsistent for the PREA questions. The intake process recently began showing a PREA video as a part of the process in addition to giving written PREA information. Over time, this should help provide a better understanding of PREA and its requirements. All of the residents knew their rights and how to report abuse. Staff interviews also revealed an understanding of PREA. They also understood first responder duties, maintaining a crime scene, and how to report abuse. All staff, both contract and state, have completed PREA training. The balance of the second morning was spent completing the documentation review.

In early afternoon, the auditor conducted an exit briefing with the Superintendent, Assistant Superintendent, and PREA assistant. He reviewed those standards in non-compliance and reviewed again the process for completing the PREA process.

### **Standards Findings:**

Number of standards exceeded: **0**

Number of standards met: **40**

Number of standards not met: **0**

Number of standards Not Applicable: **1**

### **Standard 115.311: Zero tolerance of sexual abuse and sexual harassment**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

#### **Auditor Comments:**

HRJDC PREA Facility Operating Procedure (FOP) mandates zero-tolerance of sexual abuse and sexual harassment and outlines how the facility carries out its approach to preventing, detecting and responding to sexual abuse and sexual harassment. The policy includes definitions of prohibited behaviors and sanctions for those found to have participated in prohibited behaviors. The policy also provides strategies and responses for reducing and preventing sexual abuse and harassment.

HRJDC is a juvenile detention facility governed and operated by the FDJJ which employs an agency-wide PREA Coordinator who is in an upper-level management position within the agency. The PREA Coordinator interview revealed he has sufficient time and authority to develop, implement and oversee the agency's efforts to comply with PREA standards in all operated and contracted facilities. The facility's Superintendent serves as the PREA Compliance Manager who also utilizes the services of a designated juvenile correctional officer.

### **Standard 115.312: Contract with other entities for the confinement of residents.**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

#### **Auditor Comments:**

FDJJ has approximately 50 contracts with providers for the confinement of juveniles in residential facilities throughout the State. A signed contract review revealed provider's agreement to comply with all requirements and standards of the Prison Rape Elimination Act 28 CFR Part 115 as outlined in FDJJ Policy 1919. All contracts were renewed in the past 12 months to include the requirement to comply with PREA standards.

### **Standard 115.313: Supervision and Monitoring**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

## AUDITOR'S COMMENTS

Although HRJDC PREA FOP required the facility to develop, implement and document an approved staffing plan. There is no mandate in policy for a 1:8 staff to resident ratio during waking hours or a 1:16 staff to resident ratio during sleeping hours. The staffing plan is based upon the facility's capacity of 92 residents. HRJDC PREA FOP requires the facility to document deviations from the staffing plan on the Shift Report. However, there have been no deviations from the plan.

Documentation of the annual review of the staffing plan dated July 10, 2014 was reviewed and found in compliance with all elements contained in (d)-1 of this standard.

HRJDC utilizes video monitoring combined with direct staff supervision to protect residents from sexual abuse and sexual harassment. Intermediate and upper level staff conduct unannounced rounds and these are documented in the log book as well as on the shift reports.

### Standard 115.315: Limits to cross gender viewing and searches

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

#### Auditor Comments:

HRJDC PREA FOP prohibits cross-gender strip searches, or pat down searches of youth, except in exigent circumstances. However HRJDC Admission policy FOP does not prohibit cross-gender pat searches. **The corrective action plan should require the revision of the FOP to be consistent with this standard and the PREA FOP.**

The prohibition of cross-gender visual body cavity searches is not addressed in PREA FOP; however, the policy revision should be required in the corrective action plan.

HRJDC PREA FOP states the facility must be configured to allow residents to shower; perform bodily functions and change clothing without staff of the opposite sex viewing their bodies. Staff and resident interviews confirm there is no cross-gender viewing; however, the open shower stalls with no partitions or shower curtains allow residents to be viewed naked by same sex staff and other residents while taking showers. Some male residents stated they keep their boxers on while showering to avoid exposure. **The corrective action plan should require that partitions and/or shower curtains be installed to eliminate the possibility of voyeurism by staff and/or residents.**

FDJJ Policy 1919 PREA requires opposite sex staff, volunteers and contractors entering housing units to announce their presence. Resident interviews verified this is done consistently.

HRJDC PREA FOP prohibits the search of a transgender or intersex resident solely for the purpose of determining the resident's genital status and staff interviews verified compliance.

As of December 19, 2014, the corrective action taken is satisfactory to meet the standard.

### Standard 115.316: Residents with disabilities and residents who are limited English Proficient

- Exceeds Standard (substantially exceeds requirement of standard)

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

HRJDC PREA FOP requires accommodations be made to ensure residents with disabilities or who are limited English proficient are provided meaningful access to all aspects of the facility's efforts to prevent, protect and respond to sexual abuse and harassment. This policy also states the facility prohibits the use of resident interpreter, resident readers or any kind of resident assistants except when a delay in obtaining interpreters services could jeopardize a resident's safety. Resident and staff interviews verified the facility does not use resident assistants and there were no instances of resident interpreter or readers being used in the past 12 months.

HRJDC PREA FOP describes how interpreters or other services needed to assist residents with disabilities or residents who may be limited English proficient will be provided by an active contract with Optimal Phone Interpreters.

HRJDC PREA FOP requires staff to provide PREA education in a format assessable to all residents including those who may be limited English proficient, deaf, visually impaired or otherwise with a disability, as well as to residents who have limited reading skills.

**Standard 115.317: Hiring and promotion decisions**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

Initial review of HRJDC PREA FOP revealed the policy did not specifically require consulting with the child abuse registry before hiring or enlisting services of any contractor who has contact with residents. The PREA Coordinator provided documentation that Florida State law does not allow FDJJ to contact the abuse registry for the purpose of screening applicants.

A review of staff files revealed documented criminal background checks and that questions regarding past conduct were asked and responded to during the interview process. Additionally, contract providers, who have contact with residents, had documented criminal background checks. HRJDC PREA FOP requires criminal background checks to be conducted every five years.

Applicants are required to sign acknowledging material omission regarding misconduct, or false information is grounds for termination. Additionally, the HR director supplied a written statement which she signed that all employees have successfully passed the background check. Also provided was the same for contract nurses, mental health, and teachers.

**Standard 115.318: Upgrades to facilities and technology**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

HRJDC has not acquired any new facilities or updated surveillance technology since August 20, 2012. The video monitoring system was assessed during the annual review of the staffing plan to determine if upgrades were needed to enhance the facility’s ability to protect youth from sexual abuse. Staff has identified other blind spots which exist and have implemented a “red check” sign policy where juveniles are not allowed in these spots. The auditor suggested that staff consider installing mirrors in these areas to improve sight lines.

**Standard 115.321: Evidence protocol and forensic medical examinations**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

HRJDC PREA FOP requires staff to report allegations of sexual abuse to local law enforcement (the Tampa Police Department) for criminal investigations and to the Florida Central Abuse Hotline and FDJJ’s Central Communication Center (CCC). **HRJDC has attempted to negotiate an MOU with the Tampa Police Department.**

**HRJDC is in the process of obtaining an MOU with the Tampa Rape Crisis Center for victims’ advocacy services. The auditor also requested that either an MOU or a statement of services provided be negotiated with St. Joseph’s Hospital.**

As of December 18, 2014, the corrective action taken is satisfactory to meet the standard.

**Standard 115.322: Policies to ensure referrals of allegations for investigations**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

HRJDC PREA FOP requires the immediate referral of all sexual abuse allegations to local law enforcement, the Florida Abuse Hotline and CCC. In the past 12 months, HRJDC has had no allegations of sexual abuse and has not received any allegations that occurred at another facility. Interviews with staff verified their knowledge of the policy’s requirements.

FDJJ’s website includes a PREA section which includes investigative responsibilities for conducting investigations of allegations of sexual abuse.

**Standard 115.331: Employee training**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

HRJDC PREA FOP, the training curriculum, staff training records and staff interviews indicated staff receive PREA training during initial training and annually during refresher training. The training uses “Skill Pro” and requires competency based testing at its conclusion. Specific topics as outlined in the policy and the curriculum are consistent with this standard’s requirements and are tailored to the facility’s resident population. All employees are trained as new hires regardless of their previous experience. Employees’ training records were reviewed and staff interviews verified staff comprehension of their responsibilities relating to PREA standards. Additionally, a chart was reviewed indicating that all staff had received PREA training including a recently transferred employee from another state institution.

**Standard 115.332 Volunteer and contractor training**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

HRJDC PREA FOP requires volunteers and contracted providers who have contact with residents to be trained on their responsibilities on sexual misconduct prevention, detection, reporting and responding to sexual abuse, assault or sexual harassment. Documentation provided by the volunteer coordinator for the facility revealed both the training packet and the documentation of training for volunteers approved for the facility. Further, contractors in medical, mental health and education signed that they had all received required training which was further verified in staff interviews.

**Standard 115.333: Resident Education**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

HRJDC PREA FOP requires residents to receive comprehensive education regarding the facility’s zero tolerance policy and how to report sexual abuse and sexual harassment. Intake staff explains the PREA handout to residents and residents sign verifying they received the information. Documentation of residents’ signatures were reviewed and confirmed during resident interviews. All residents interviewed stated they received this information within their first week. Beginning July 27, 2014 the facility began showing a PREA video as part of the intake process to present PREA information to residents in addition to written hand-outs. Resident interviews revealed a spectrum of answers to PREA questions. However, all residents interviewed knew their PREA rights and how to report abuse. The auditor suggested to staff that they consider how they are presenting the information to residents and also consider its repetition for better understanding.

Interviews with the PREA assistant revealed that she had posted the information for community agencies although **there was no negotiated MOU**. In interviews, residents indicated knowledge of these agencies and services as well as how to access them.



As of December 18, 2014, the corrective action taken is satisfactory to meet the standard.

**Standard 115.334: Specialized training: Investigations**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor comments:**

The Tampa Police Department and the Florida Department of Children and Families conduct criminal investigations into allegations of sexual abuse. HRJDC does not conduct any investigations.

**Standard 115.335: Specialized training: Medical and mental health care**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

HRJDC PREA FOP requires PREA training for all employees and specialized training for medical and mental health staff. The facility did not present documentation of specialized training for medical and mental health staff as staff interviews verified it had not been conducted. **The corrective action plan requires documentation of the nurses' participation in specialized PREA training for medical and mental health staff.** The nurses do not conduct forensic examinations.

As of December 18, 2014, the corrective action taken is satisfactory to meet the standard.

**Standard 115.341: Screening for risk of victimization and abusiveness**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

HRJDC PREA FOP requires staff to complete the FDJJ's Vulnerability to Victimization and Sexually Aggressive Behavior (VSAB) form if youth arrive from the Juvenile Assessment Center without a completed form. Documentation and resident interviews revealed that risk screenings were being conducted; however, Intake staff and resident interviews indicated residents were not asked whether they identify with being gay, bi-sexual, transgender or intersex.

Completed VSAB forms are maintained in residents' medical files.

**Standard 115.342: Placement of Residents in housing, bed, program, education and work assignments.**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

HRJDC PREA FOP requires victimization screening information to be used to determine a resident's room assignment and the room's proximity to direct care staff to ensure resident's safety. The facility also utilizes the Classification Alerts to ensure that staff working directly with residents are advised if the resident is identified as being at risk for victimization or posing a risk.

HRJDC PREA FOP precludes lesbian, gay, bi-sexual, transgender and intersex residents from being placed in a particular module and states that LGBTI identification or status is not an indicator of likelihood of being sexually abusive. Transgender or intersex resident's own view with respect to his/her safety will be given serious consideration. Staff interviews also verified compliance with this standard. Transgender and intersex residents are given the opportunity to shower separately from other youth.

**Standard 115.351: Resident Reporting**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

HRJDC PREA FOP provides multiple ways for residents to privately report sexual abuse, sexual harassment, retaliation and staff neglect including telling a staff member and calling Florida Abuse Hotline. The FOP further states the facility is exempt from this standard because it does not have administrative procedures in place for residents to report allegations of sexual abuse and sexual harassment through the grievance procedure while FDJJ Policy 1919 PREA allows for the use of the grievance process to report allegations of sexual abuse and sexual harassment.

**The corrective action plan should include both the revising of the FOP and the installation of locked grievances boxes in each living unit for residents' use.**

PREA FOP requires youth to have one way of reporting sexual abuse and sexual harassment to a public or private entity or office that is not a part of the agency. Residents may call the Florida Abuse Hotline. Signs are posted throughout the facility with the hotline number. Staff dial the number and then insure that the youth has privacy in conducting the call.

As of December 18, 2014, the corrective action taken is satisfactory to meet the standard.

### Standard 115.352: Exhaustion of administrative remedies

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

#### Auditor Comments:

HRJDC PREA FOP states the facility is exempt from this standard because it does not have administrative procedures in place for residents to report allegations of sexual abuse and sexual harassment through the grievance procedure while FDJJ Policy 1919 PREA allows for the use of the grievance process to report allegations of sexual abuse and sexual harassment.

**The corrective action plan should include both the revising of the FOP and the installation of locked grievances boxes in each living unit for residents' use.**

As of December 18, 2014, the corrective action taken is satisfactory to meet the standard.

### Standard 115.353: Resident access to outside confidential support services

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

#### Auditor Comments:

HRJDC PREA FOP ensures residents are provided access to outside confidential support services. The facility is in the process of obtaining a signed MOU with the Tampa Rape Crisis Center which was verified by email correspondence. **The MOU needs to be completed.**

Signs containing the outside services hotline number and basic information about the service were posted throughout the facility. **The corrective action plan should include documentation of resident education regarding services offered by the victims' advocacy organization and the inclusion of information during intake orientation.**

Attorneys and other legal representatives are provided with reasonable and private access upon request. Residents may call their parents/legal guardians and receive visits from them twice a week.

As of December 18, 2014, the corrective action taken is satisfactory to meet the standard.

### Standard 115.354: Third-party reporting

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

### **Auditor Comments:**

FDJJ's website provides the public with information regarding third-party reporting of sexual abuse or sexual harassment on behalf of a resident. Resident interviews revealed their awareness of reporting sexual abuse or sexual harassment to others outside of the facility including their parents/legal guardians.

#### **Standard 115.361: Staff and agency reporting duties**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

### **Auditor Comments**

All HRJDC staff are mandated reporters and are required by PREA FOP and FDJJ Policy 1919 to immediately report any knowledge, suspicion or information they receive regarding sexual abuse and harassment, retaliation against residents or staff who report any incidents or any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Random staff interviews also helped to verify the facility's compliance with this standard.

#### **Standard 115.362: Agency protection duties**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

### **Auditor Comments:**

HRJDC PREA FOP requires staff to take immediate action to protect a resident when he/she is identified as being subject to substantial risk of imminent sexual abuse. There was one transgender identified in the screening process currently at the facility, and treated in accordance with policy.

#### **Standard 115.363: Reporting to other confinement facilities**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

### **Auditor Comments:**

HRJDC PREA FOP requires the Superintendent to notify the head of another facility within 72 hours upon receiving an allegation that a resident was sexually abused while confined at another facility. During the past 12 months, there were no allegations received that a resident was abused while confined to another facility nor were there allegations of sexual abuse received by HRJDC from other facilities.

**Standard 115.364: Staff first responder duties**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

HRJDC PREA FOP requires staff to take specific steps to respond to a report of sexual abuse including: separating the alleged victim from the abuser; preserving any crime scene within a period of time that still allows for the collection of physical evidence; request the alleged victim not take any action that could destroy physical evidence; and ensure that the alleged abuser does not take any action to destroy physical evidence, if the abuse took place within a time period that still allows for the collection of physical evidence. There was one allegation of sexual abuse during the past 12 months. Random staff interviews revealed considerable knowledge of actions to be taken upon learning that a resident was sexually abused.

**Standard 115.365: Coordinated response**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

HRJDC PREA FOP requires the development of a written plan to coordinate actions taken in response to an incident of sexual assault among staff first responders, medical, and facility leadership. A review of the plan revealed that it covered the requirements of the standard.

Interviews with staff revealed that they are knowledgeable of their duties in response to an allegation of sexual abuse.

**Standard 115.366: Preservation of ability to protect residents from contact with abusers**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)
- Not applicable

**Auditor Comments:**

FDJJ is not a collective bargaining agency therefore this standard is not applicable.

**Standard 115.367: Agency protection against retaliation**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant

review period)

- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

FDJJ Policy 1919 PREA requires the protection of residents and staff who have reported sexual abuse or harassment or who have cooperated in a sexual abuse or sexual harassment investigation. The monitoring will take place for a period of 90 days or longer, as needed. The Superintendent is responsible for monitoring retaliation. There were no incidents of retaliation in the past 12 months.

**Standard 115.368: Post allegation protective custody**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

HRJDC would only restrict a resident to his/her single room as a last measure to keep safe a resident who alleged sexual abuse and then only until an alternative means for keeping the resident safe can be arranged.

**Standard 115.371: Criminal and administrative agency investigations**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

HRJDC PREA FOP states that FDJJ does not conduct criminal investigations of residents' allegations of sexual abuse. Local law enforcement (Tampa Police Department) and the Florida Department of Children and Families handle criminal investigations. FDJJ's Office of Inspector General (OIG) reviews allegations to identify any misconduct by staff related to FDJJ regulatory guidance.

**Standard 115.372: Evidentiary standards for administrative investigations**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

HRJDC PREA FOP states the facility shall impose no standard higher than a preponderance of the evidence in determining whether allegations of misconduct by staff are substantiated.

**Standard 115.373: Reporting to residents**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

There were no criminal or administrative investigations during the past 12 months. Therefore, no notices have been sent to residents. HRJDC PREA FOP requires the Superintendent to notify residents who alleged sexual abuse when the facility learns that the alleged abuser has been indicted on charges or convicted on a charge related to sexual abuse within the facility. The OIG will notify residents whether the allegation has been determined to be substantiated, unsubstantiated or unfounded.

**Standard 115.376: Disciplinary sanctions for staff**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

HRJDC PREA FOP mandates staff disciplinary sanctions up to and including termination for violating agency's sexual abuse or sexual harassment policies. The policy also mandates the violation be reported to local law enforcement. No employees have been terminated or disciplined in the past 12 months for violation of the facility's sexual abuse or harassment policies.

**Standard 115.377: Corrective action for contractors and volunteers**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

HRJDC PREA FOP requires volunteers and contractors in violation of the facility's policies and procedures regarding sexual abuse and harassment of residents to be reported to local law enforcement and to relevant licensing bodies unless the activity was clearly not criminal. There have been no allegations of volunteers or contractors sexual abuse or sexual harassment reported in the past 12 months.

**Standard 115.378: Disciplinary sanctions for residents**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

HRJDC PREA FOP states that residents may receive disciplinary sanctions following an administrative finding or a criminal investigation that resident engaged in youth-on-youth sexual abuse and sanctions shall be commensurate with the nature and circumstances of the sexual abuse, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories. There were no administrative or criminal findings of guilt for resident-on-resident sexual abuse in the past 12 months.

**Standard 115.381: Medical and mental health screenings; history of sexual abuse**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

HRJDC PREA FOP requires residents who disclose a history of sexual abuse or who disclose previously perpetrating sexual abuse to be referred for medical and mental health screening services within 24 hours of the screening. Staff interviews verified compliance with this standard.

**Standard 115.382: Access to emergency medical and mental health services**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

HRJDC PREA FOP requires timely and unimpeded access to emergency medical treatment, crisis intervention services and victim advocacy services. The resident victim would be transported to a local hospital for a forensic examination at no cost to the victim. Medical staff are required to document the response and timeliness of emergency medical treatment and follow-up. There have been no victims of sexual abuse in the past 12 months.

**Standard 115.383: Ongoing medical and mental health care for sexual abuse victims and abusers**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

HRJDC PREA FOP requires that a medical and mental health evaluation and treatment, as determined by



medical/mental health staff, be offered to resident victims of sexual abuse. There have been no sexual assault victims in the past 12 months; however, if services are needed, procedures are in place as verified during staff interviews.

**Standard 115.386: Sexual abuse incident reviews**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

HRJDC PREA FOP requires the Superintendent to schedule a sexual assault incident review team meeting within 30 days of the conclusion of each investigation. The policy mandates review team participation to include regional office staff, Assistant Superintendent, facility supervisor, medical and mental health staff, and OIG staff, if OIG investigated the incident, The FDJJ PREA Coordinator will prepare a report of the review team’s findings and submit the report to the Assistant Secretary for Detention Services, regional office staff and the facility’s Superintendent. There were no criminal or administrative investigations of sexual abuse in the past 12 months.

**Standard 115.387: Data collection**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

DJJ has developed a standardized instrument with definitions to collect accurate uniform data for every allegation of sexual assault. The instrument includes the data necessary to answer all questions from the most recent version of the Survey of Sexual violence conducted by the Department of Justice. HRJDC PREA FOP requires CCC to collect all data relating to PREA. A review of the annual report revealed it was completed according to this standard.

**Standard 115.388: Data Review for corrective action**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

**Auditor Comments:**

FDJJ’s annual report for fiscal year 2013-2014 indicates 32 PREA related allegations reported by detention centers and residential facilities throughout the agency; however, there were no PREA related incidents indicated for HRJDC. The FDJJ PREA Coordinator reviews data to improve the effectiveness of its prevention, protection and response policies, practices and training. The annual report is made available to the public on FDJJ’s website.

**Standard 115.389: Data storage, publication and destruction**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does NOT meet Standard (requires corrective action)

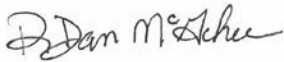
**Auditor comments:**

HRJDC PREA FOP requires that sexual abuse and sexual harassment data to be collected and securely retained for 10 years in accordance with the State of Florida's records retention schedule. The annual report is made available to the public on FDJJ's website.

**Any questions about PREA standards, required documentation or process please refer to the PREA Resource Center website under Juvenile Standards.**

**AUDITOR CERTIFICATION:**

The auditor certifies that the contents of the report are accurate to the best of his/her knowledge and no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review.



December 31, 2014

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Auditor Signature

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Date