

PREA AUDIT: Auditor's Summary Report

JUVENILE FACILITIES



Name of Facility: AMIKIDS- YOUTH ENVIRONMENTAL SERVICES (YES)			
Physical Address: 4337 SAFFOLD ROAD, WIMAUMA, FLORIDA 33598			
Date report submitted			
Auditor information: Tracy S. Maxwell			
Address: 1761 REDWOOD LANE, MIDDLEBURG 32068			
Email: TORCHLIGHT4CHANGE@GMAIL.COM			
Telephone number: 904-349-0045			
Date of facility visit July 24-25			
Facility Information			
Facility Mailing Address: (if different from above)			
Telephone Number: 813-671-5213			
The Facility is:	<input type="checkbox"/> Military	<input type="checkbox"/> County	<input type="checkbox"/> Federal
	<input type="checkbox"/> Private for profit	<input type="checkbox"/> Municipal	<input type="checkbox"/> State
	<input type="checkbox"/> Private not for profit		
	<input type="checkbox"/>		
Facility Type:	<input type="checkbox"/> Detention	<input type="checkbox"/> Correction	<input type="checkbox"/> Other:
Name of PREA Compliance Manager: DERWINJAMES		Title: Executive Director: Joseph CHESTNUT	
Email Address: Yes-Ed@Amikids.org		Telephone Number: 813-671-5213	
Agency Information			
Name of Agency: AMIKIDS			
Governing Authority or Parent Agency: (if applicable)			
Physical Address: 5915 BENJAMIN CENTER DRIVE, TAMPA, FLORIDA 33634			
Mailing Address: (if different from above)			
Telephone Number: 813-887-3300			
Agency Chief Executive Officer			
Name: O. B STANDER		Title: PRESIDENT & CEO	
Email Address: CSSTAFFORD@AMIKIDS.ORG			
Telephone: 813-887-3300			
Agency Wide PREA Coordinator:			
Name: Wendell Watson		Title: PREA Coordinator	
Email Address: WIW@amikids.org		Telephone Number: 813-887-3300	

AUDIT FINDINGS

NARRATIVE:

AMIkids YES operates by the values and standards of AMIkids, Inc. and creates an environment in which students of all types can learn and thrive. With a strong belief in positive reinforcement and individualized attention, we consistently hold true to the following principles:

- Bonding (Social Development Model)
- Family atmosphere
- Productive discipline
- Positive learning environment
- Gender responsiveness
- Cultural relevance
- High expectation for success

DESCRIPTION OF FACILITY CHARACTERISTICS:

AMIkids YES program was established in January 6, 1994. The facility is comprised of one general administration building, two open-bay resident housing units, four resident classrooms, one large community group room and one resident dining facility area. The age range of the population is 14 to 18. The design capacity is 30 male residents. The total number of residents admitted to the facility during the past 12 months was 39.

SUMMARY OF AUDIT FINDINGS:

The notification of the on-site audit was posted on May 26, 2014, six weeks prior to the first date of the on-site audit. The posting of the notices was verified by photographs received electronically from the PREA Coordinators. The photographs indicated notices were posted in various locations throughout the facility including the housing unit and administrative areas. The Pre-Audit Questionnaire, policies and supporting documentation were received on June 9, 2014. The documents were uploaded to a UBS flash drive.

The on-site audit was conducted July 24-25, 2014. A brief meeting was conducted with the Facility Administrator and PREA Compliance Manager. At the conclusion of the meeting, a complete tour of the facility was conducted including the resident's sleeping, showering areas and all areas where residents primarily spend their time.

My initial assessment of the facility was that the youth were under direct supervision of the staff at all times and were engaged in various activities and programming. The Facility Administrator and Executive Staff acknowledged where the blind spots were located in the facility but noted that residents are never left without supervision. There are 42 surveillance cameras located throughout the facility. The surveillance system does not capture youth in showers or in their rooms. It is noted in the facility assessment document and validated during the audit walk through additional surveillance cameras are needed and recommended for the kitchen area and large classroom.

During the two-day on-site visit, 12 staff including those from all three shifts were randomly selected and interviewed. All interviews validated staff knowledge of PREA standards and their responsibilities as first responders. Thirteen residents were also randomly selected and interviewed. Residents were well informed of their right to be free from sexual abuse and harassment, how to report sexual abuse and harassment, and the community based victim advocate service providers.

There were no reported allegations of sexual abuse or sexual harassment noted during the past 12 months.

Number of standards exceeded: **0**

Number of standards met: **37**

Number of standards not met: **0**

Number of standards Not Applicable: 4

Standard 115.311- Zero Tolerance of Sexual Abuse and Sexual Harassment; PREA Coordinator

- 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 agency has one dedicated PREA Compliance Manager, who is also performing duties as the Assistant Facility Administrator. In my interview with the PREA Compliance Manager, he validated his responsibilities and confirmed sufficient time to oversee the facility’s PREA compliance efforts of preventing, detecting and responding to sexual abuse and harassment in the facility. In addition to the facility PREA Compliance Manager, the agency has two dedicated upper-level, agency wide PREA Coordinators. The Florida Department of Juvenile Justice and AMIKIDS-YES PREA Coordinators confirmed during interviews there was sufficient time and authority to develop, implement and oversee efforts for all facilities.

The AMIKIDS-YES Facility policy 6.11 and The Florida Department of Juvenile Justice PREA Policy 1919 included definitions of prohibited behaviors and sanctions for prohibited behaviors. The agencies PREA Coordinator and the facility PREA Coordinator/ Facility Administrator both conveyed the agency’s zero-tolerance environment towards all forms of sexual abuse and harassment with the facility.

Standard 115.312- Contracting 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)
- Non- Applicable Standard

Auditor comments:

AMIKIDS-YES is a stand-alone facility contracted and governed by The Florida Department of Juvenile Justice and does not contract for confinement of its residents.

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 comments:

An assessment was conducted on April 28, 2014. The assessment included physical plant layout and blind-spot areas. The facility deploys 32 surveillance cameras throughout the facility which covers blind-spots. All unannounced upper-level supervisors' rounds were also included on the assessment. There were no documented occurrences of exigent needs for deviations from the facility staffing plan. The facility's PREA Policy 6.11 requires intermediate-level or higher-level staff unannounced rounds to monitor, deter sexual harassment and sexual abuse.

In reviewing the facility's policy 6.13 and documentation submitted, the staffing plan assessment, considerations were documented and validated for staffing ratios of 1.6 during awake hours and 1.10 during non-wake hours.

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:

AMIKIDS-YES Facility Policy 6.15 prohibits cross-gender searches except in exigent circumstances and must document reasoning for the opposite gender search. The policy additionally prohibits staff from examining a transgender or intersex youth for the sole purpose of determining the resident's genital status. Body cavity searches require the Director's authorization and must be conducted by licensed medical personnel in a medical establishment. The Search Log indicated there were no cross-gender strip searches or body cavity searches of residents in the past 12 months. This standard was validated compliant during resident and staff interviews.

The policy limits pat-down searches to male staff absent exigent circumstances. This was validated during interviews with both residents and staff.

Policy requires female staff, volunteers and contractors entering the housing unit to announce themselves upon entering the areas where the likelihood of residents performing bodily functions occur and shower except in exigent circumstances or when viewing is incidental to routine room checks. It is noted that female staff do not enter into the housing area of residents. There was no documented deviation from this policy.

Staff and Contractor training records along with staff interviews validated 100% compliance training on cross-gender pat searches, searches of transgender and intersex residents and Zero tolerance policy concerning sexual harassment and sexual abuse of Residents and Staff.

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:

AMIKIDS-YES has entered into an interagency agreement between The Florida Department of Juvenile Justice, The Department of Children and Families-Sun Coast Region and Hillsborough Kids Inc to provide interpreter services, a hearing impaired specialist, a vision impaired specialist, an audiologist, an English as a second language specialist, equipment and technology for residents, as needed. AMIKIDS-YES Policy 6.16 requires the facility to take steps 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. PREA posters in various languages were posted throughout the facility for residents.

Policy 6.16 also states the facility will not rely on resident interpreters, resident readers or any kind of resident assistants except when a delay in obtaining interpreters services could jeopardize resident's safety. Staff interviews validates compliance the facility does not use resident assistants and there were no instances of resident interpreter or readers being used in the past 12 months.

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:

AMIKIDS-YES Facility Policy 6.17 specifically addresses all elements as required by this standard. A review of 12 full-time employees and 4 volunteers/ contractors files and interviews revealed that all hired during the past 12 months had documented criminal background checks. Questions regarding past conduct were asked during the interview process. Additionally, signed acknowledgement forms concerning zero-tolerance of sexual harassment and sexual abuse were present in the files.

The policy also validated compliance based on the requirement to conduct background checks every five years.

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:

AMIKIDS- YES has not acquired any new facilities since August 20, 2012. Additionally, the facility upgraded its surveillance system with additional cameras and video monitoring system upgrades on May 30 2013. The enhancement increases the facility's ability to protect residents from sexual abuse.

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:

AMIKIDS-YES Policy 6.21 and The Florida Department of Juvenile Justice Policy 1919 requires the Facility Director contact The Florida Department of Juvenile Justice and The Department of Children and Families who will conduct administrative investigations of abuse allegations; however, criminal investigations are conducted by the Hillsborough County Sheriff's Office. The Office of the Inspector General will also conduct an administrative investigation apart from any criminal investigation to identify staff misconduct.

AMIKIDS-YES has a Memorandum of Understanding with Tampa General Hospital who will provide SAFE and SANE services and a signed agreement with Crisis Center of Tampa who will provide victim advocate services. Hillsborough County Sheriff's Office acknowledged in writing that a uniform evidence protocol would be followed to maximize the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.

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:

AMIKIDS-YES Policy 6.22 requires referrals of sexual abuse allegations to be submitted to the Hillsborough County Sheriff's Office, Florida Department of Children and Families and the Office of the Inspector General. In the past 12 months, AMIKIDS-YES has had no allegations of sexual abuse or sexual harassment noted during a 12 month period. The Florida Department of Juvenile Justice (FDJJ) Division of Youth Services' website describes the investigative responsibilities for conducting investigations for the facilities it operates and funds. AMIKIDS-YES Policy 6.22 describing how referral investigative responsibilities are handled for allegations of sexual abuse was verified compliant.

Standard 115.331- Employees 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:

AMIKIDS-YES Policy 6.31 and The Florida Department of Juvenile Justice Policy 1919 documents training requirements for PREA. The training curriculums, documented staff training records and staff interviews validates compliance. The PREA training covered requirements for direct care workers, medical personnel and contractors during initial training and annual refresher training. Specific topics covered during PREA training are consistent with this standard's requirements and is tailored to the facility's male resident population. All employees are trained as new hires regardless of their previous experience. Employees sign training rosters and are required to score 70% on a final exam verifying comprehension of PREA training.

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:

AMIKIDS-YES and The Florida Department of Juvenile Justice Policy 1919 require volunteers and contractors who have contact with residents to receive PREA training. This training is provided online. Employees sign training rosters and are required to score 70% on a final exam verifying comprehension of PREA training. Acknowledged completion Certificates were reviewed for volunteers and contractors. Interviews with volunteers and contractors revealed they are knowledgeable concerning their responsibilities relative to PREA and the agency's zero tolerance policy regarding sexual abuse and harassment.

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:

AMIKIDS requires residents to receive information during intake within 24-hours regarding the facility's zero tolerance policy and how to report sexual abuse and harassment. Additionally, The Florida Department of Juvenile Justice requires residents participate in comprehensive training that is conducted within 10-days of arrival. Residents are provided a handout entitled "What You Should Know about Sexual Abuse/Assault/Harassment" which includes information on prevention/intervention, self-protection, reporting and treatment/counseling. Intake staff or case management staff reviews the handout with the residents and residents sign verifying receipt of the information. Documentation of residents' signatures were reviewed and confirmed during resident interviews. All residents interviewed stated they received this information the same day they arrived at the facility and periodically thereafter. Case management staff presents the PREA information in a manner that is accessible to all residents. During the facility tour PREA posters and reporting instructions were posted throughout the facility. If needed, the facility has facility staff and an agreement to provide translation services, hearing and visual impairment services for residents with disabilities or who may be limited English deficient.

Standard 115.334- Specialized Training: Investigation

- 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)
- Non-Applicable Standard

Auditor comments:

There are no facility investigators. All criminal and administrative investigations are referred to outside agencies.

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:

The Florida Department of Juvenile Justice Policy# 1919 requires that all AMIKIDS-YES full-time, part-time medical and mental health care practitioners receive specialized training. The training documentation reviewed validated that all staff received this training from the National Institution of Corrections. While conducting interviews with the Health Services Administrator, it was validated that medical staff do-not conduct forensic examinations.

Standard 115.341- Obtaining information from 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:

AMIKIDS Policy 6.41 addresses the screening process for vulnerability to victimization and sexual aggressive behavior by using the Florida Department of Juvenile Justice Form RC 8050-2. All facility residents are screened within twenty-four hours upon arrival at the facility. Those residents who score vulnerable to victim or sexually aggressive are included into the alert system, as well as receiving further assessments, as identified. Residents who are identified or report as prior sexual victims are referred to the medical and mental health professionals within 14 days or arrival. The screening documentation instrument met the tenets of the standard.

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:

AMIKIDS-YES has open-bay dorms for residents. Victimization screening information may be used to determine a resident's dorm assignment and its proximity to direct care staff in the housing unit to ensure resident's safety.

AMIKIDS-YES Policy 6.42 and Florida Department of Juvenile Justice Policy 1919 preclude gay, bi-sexual, transgender and intersex residents being placed in a particular housing unit. Isolation rooms are prohibited by the Florida Department of Juvenile Justice. Facility staff and residents interviews validated compliance.

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:

AMIKIDS-YES Policy 6.51 provides ways for residents to report sexual abuse and harassment including; a pre-programmed telephone line to an outside agency; the facility provides the addresses in resident's handbooks and posters throughout the facility. Instructions for reporting are provided to all residents during the intake process. Instructions include the Victims Assistance Program so they or their family members can write to an outside agency; and they may report to any staff member or family member. The policy also references reporting mechanisms for staff to privately report. Resident and staff interviews validated compliance with this 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)
- Non- Applicable

Auditor comments:

It is AMIKIDS-YES policy that a resident grievance regarding sexual abuse is an allegation of sexual abuse. Therefore reporting and investigation policy and procedures will be initiated. YES does not have administrative procedures to address resident grievances regarding sexual abuse due to them being considered an allegation of sexual abuse. Allegations of sexual harassment grievances will be addressed through the facility's grievance process.

There have been no grievances relating to sexual abuse filed in the past 12 months. Staff and resident interviews validate their knowledge of how the grievance process is used to report sexual abuse or harassment.

Standard 115. 353- Resident Access to Outside Support Services and Legal Representation

- 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:

AMIKIDS-YES staff are mandated reporters and are required by AMIKIDS-YES Policy 6.53 and Florida Department of Juvenile Justice 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 and resident interviews validated the facility's compliance with this standard.

Interviews with the case management staff and health service professional validated their responsibility to inform residents 18 years old of their duty to report and limitations of confidentiality.

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:

AMIKIDS-YES through The Florida Department of Juvenile website informs the public with information regarding third-party reporting of sexual abuse or sexual harassment on behalf of any facility resident. Also, parents receive information regarding third party reporting. Resident interviews revealed their awareness of reporting sexual abuse or harassment to others outside of the facility.

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:

Under Florida Department of Juvenile Justice Policy 1919 all AMIKIDS-YES staff are mandated reporters. Staff is required 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 and health professional interviews validated their technical knowledge and 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:

AMIKIDS-YES Policy 6.62 requires residents identified as being at risk for sexual victimization to be monitored and to receive ongoing counseling from mental health or other qualified staff. Residents are provided services consistent with the community of care. There were no residents identified as being at risk for sexual abuse in the past 12 months, as indicated on a log maintained by the facility and as revealed in interviews with the Facility Director, PREA Compliance Manager and other random staff.

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:

AMIKIDS-YES received no allegations of sexual abuse from other facilities during the past 12 months. Upon receiving an allegation that a resident was sexually abused while confined at another facility, AMIKIDS-YES Policy 6.63 and Florida Department of Juvenile (FDJJ) Justice Policy 1919 requires facility leadership immediately notify the Florida Department of Juvenile Justice Central Communications Center. The FDJJ will in turn notify the facility and the facility management overseeing the facility where the alleged abuse occurred.

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:

There were no allegations of sexual abuse or sexual harassment during the past 12 months. AMIKIDS Policy 6.64 and The Florida Department of Juvenile Justice Policy 1919 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 that still allows for the collection of physical evidence; request that 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. Random staff and first responder interviews validated their technical 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:

Interviews with the Facility Administrator, PREA Compliance Manager and other professional staff validated their technical knowledgeable of their duties in response to a sexual assault. AMIKIDS-YES Policy 6.65, and The Florida Department of Juvenile Justice Policy 1919 gives technical directions concerning coordinated actions taken in response to an incident of sexual assault among staff first responders, medical, and facility leadership.

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)
- ☒ Non-Applicable Standard

Auditor comments:

AMIKIDS-YES is not in a Collective bargaining Agreement.

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:

All AMIKIDS-YES staff are charged with monitoring for possible retaliation. There were no incidents of retaliation in the past 12 months reported. This was validated during my interview with the PREA Compliance Manager and Facility Administrator. AMIKIDS-YES Policy 6.67 and The Florida Department of Juvenile Justice Policy 1919 requires the monitoring of residents and staff who have reported sexual abuse or harassment or who have cooperated in a sexual abuse or harassment investigation. The monitoring will take place for a period of 90 days or longer, as needed.

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:

There are no isolation rooms or segregation housing rooms used at AMIKIDS-YES to protect residents who alleged to have suffered sexual abuse. Random staff interviewed validated resident(s) are monitored constantly by staff. The Florida Department of Juvenile Justice Policy 1919 provide guidelines for the use of room restriction as a last measure to keep residents who alleged sexual abuse safe 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:

There were no reported investigations of alleged resident sexual abuse in the facility in the past 12 months. AMIKIDS-YES Policy 6.71 and The Department of Juvenile Justice Policy 1919 establishes investigation guidelines for reporting allegations of sexual abuse to the Hillsborough County Sheriff's Office, The Office of The Inspector General and The Florida Department of Children Services for investigations.

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:

The Florida Department of Juvenile Justice Policy 1919 states the outside investigative entities, the Hillsborough County Sheriff's office and the Florida Department of Children Services, shall impose a standard of preponderance of evidence or lower standards of proof for determining if allegations 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 was no criminal and administrative investigation during the past 12 months. AMIKIDS-YES Policy 6.73 and The Florida Department of Juvenile Justice Policy 1919 establishes processes to notify residents should the need arise and an allegation proves substantiated, unsubstantiated or unfounded. The Agencies PREA Coordinators and facility PREA Coordinator validated their technical knowledge of the process during their interviews.

Standard 115. 376- Disciplinary 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:

There were no employees terminated or disciplined in the past 12 months for violation of the facility's sexual abuse or harassment policies. AMIKIDS-YES Policy 6.11 requires staff disciplinary sanctions up to and including termination for violating facility's sexual abuse or harassment policies. The policy also mandates that the violation be reported to law enforcement.

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:

The Florida Department of Juvenile Justice Policy 1919 and AMIKIDS-YES Policy 6.77 requires volunteers and contractors in violation of the facility's policies and procedures regarding sexual abuse and harassment of residents be reported to local law enforcement and relevant licensing bodies unless the activity was clearly not criminal. During the interview with the Facility Administrator/PREA Coordinator, it was reported that there have been no volunteers or contractors reported in the past 12 months.

The policy also requires the facility staff to take remedial measures and prohibit future contact with residents in the case of any violation of the facility's sexual abuse and harassment policies by contractors or volunteers.

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:

There has been no reported case of resident-on-resident sexual abuse cases in the past 12 months. AMIKIDS-YES Policy 6.78 establishes disciplinary sanctions for residents engaged in resident-on-resident sexual abuse.

Standard 115. 381- Medical and Mental screening; 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:

There were no residents who disclosed prior victimization during their initial screening process. During the interview with the Health Services Administrator, she validated that although there were no disclosures all residents were offered follow-up meetings with medical and mental health providers. AMIKIDS-YES Policy 6.81 and The Florida Department of Juvenile Justice Policy 1919 requires mental health and medical staff to monitor and provide counseling on an on-going basis for residents who disclose a history of sexual abuse or who disclose previously perpetrating sexual abuse.

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:

There has been no reported case of sexual abuse in the past 12 months. The Florida Department of Juvenile Justice Policy 1919 and AMIKIDS-YES Policy 6.82 mandates residents receive timely, unimpeded care on-site and off-site emergency care and crisis intervention services.

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:

There have been no allegations of sexual assault or sexual harassment victims in the past 12 months. AMIKIDS-YES Policy 6.83 references medical and mental health evaluation and, appropriate, treatment to all residents who have been victimized or have been an abuser in any jail, lockup, or juvenile facility.

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:

The Florida Department of Juvenile Justice Policy 1919 and AMIKIDS-YES Policy 6.86 requires an incident review team of every sexual abuse allegation at the conclusion of the investigation within 30 days. The review team includes the PREA Manager/ Facility Administrator, Department program staff mental and medical health providers with input from line supervisors. The facility has a specific review form to capture all aspects of the incident.

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:

The Florida Department of Juvenile Justice Policy 1919 requires the collection of accurate, uniform data for every allegation of sexual assault. The agency's PREA Coordinator and PREA Manager collect all data relating to PREA and forward to The Florida Department of Juvenile Justice.

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:

There has been no allegations of sexual abuse during the past 12 months. The Florida Department of Juvenile Justice Policy 1919 requires the review of data for corrective action to improve the effectiveness of its prevention, protection and response policies, practices and training.

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:

The Florida Department of Juvenile Justice Policy 1919 directs that data from every allegation of sexual misconduct at its facilities shall be collected at Central Communications Center. The PREA Coordinator will review data collected in order to assess and improve the effectiveness of the Department's sexual misconduct prevention, detection and response policies, practices and training. The policy established that aggregated sexual abuse data be reviewed annually and placed on the facility's website after all personal identifiers are removed. All data collected will be maintained for at least 10 years after the date of the initial collection.

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.



Auditor's Signature

Date: August 22, 2014