

PREA AUDIT: AUDITOR'S SUMMARY REPORT

Juvenile Facilities



[Following information to be populated automatically from pre-audit questionnaire]

Name of facility:	ML King House		
Physical address:	24455 Crocker Road, Mt. Clemens, Mi 48036		
Date report submitted:	2/27/2016		
Auditor Information	James L. Roland Jr. – The Nakamoto Group		
Address:	11820 Parklawn Drive, Suite 240 Rockville, MD 20852		
Email:	james.roland@nakamotogroup.com		
Telephone number:	419-610-5668		
Date of facility visit:	February 23-24, 2016		
Facility Information			
Facility mailing address: (if different from above)			
Telephone number:	586-463-7130		
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 checked="" type="checkbox"/> Private not for profit		
Facility Type:	<input type="checkbox"/> Detention	<input type="checkbox"/> Correction	<input checked="" type="checkbox"/> Other
Name of PREA Compliance Manager:	Alexis Terry	Title: PREA Compliance Manager	
Email address: aterry@hccsnet.org		Telephone number:	586-463-7130
Agency Information			
Name of agency: Juvenile Justice Programs (JJP) Michigan Department of Human Services (DHS)			
Governing authority or parent agency:	Department of Human Services State of Michigan		

Physical address:	Juvenile Justice Programs 120 N. Washington Square, Suite 300 PNC Building Lansing, Michigan 48933		
Mailing address: <i>(if different from above)</i>			
Telephone number:	517-335-3489		
Agency Chief Executive Officer			
Name:	Nick Lyon	Title:	MDHHS Director
Email address:	GrijalvaN@michigan.gov	Telephone number:	517-241-119
Agency-Wide PREA Coordinator			
Name:	Patrick Sussex	Title:	PREA Juvenile Coordinator
Email address:	SussexP@Michigan.gov	Telephone number:	517-648-6503

AUDIT FINDINGS

NARRATIVE:

The site visit for PREA audit of the M L King House facility was conducted on February 22-23, 2016 to determine compliance with the 2012 Prison Rape Elimination Act standards. At the time of this audit the facility population was fifteen (15) residents. The total staff population was eleven (11). The auditor toured the facility and conducted formal staff and resident interviews. The auditor interviewed nine (9) resident juveniles. In addition, the auditor questioned ten (10) staff and youth specialists, eight (8) specialized staff and three (3) random staff, about PREA training, how to report, to whom to report, filing reports, available interventions, conducting interviews, evidence collection, follow up, and monitoring retaliation. Specialized staff interviewed included the Director, PREA compliance manager, Director of Training, Treatment Specialist Coordinator, Treatment Specialist 1 (x2), Human Resource Manager, and the PREA Coordinator.

An entrance meeting was held with the following persons in attendance: PREA Juvenile Compliance Coordinator Patrick Sussex, PREA facility Manager and Acting Director Alexis Terry, and Director of Training Thomas DuRussei-Weston.

DESCRIPTION OF FACILITY CHARACTERISTICS:

Mission Statement of the Michigan Department of Health and Human Services

Child welfare professionals will demonstrate an unwavering commitment to engage and partner with families we serve to ensure safety, permanency, and well-being.

Holy Cross Children's Services (HCCS) MISSION

The M L King House operates as a facility of the Holy Cross Children's Services (HCCS). HCCS is a Catholic-oriented, non-profit child care and family preservation organization headquartered in Clinton, Michigan. HCCS conducts residential and community-based programs throughout the State of Michigan. Its purpose is to serve the needs of Michigan families and children without regard to race, creed or economic status. HCCS is a member of Boysville of Michigan, Inc.

HCCS seeks to provide for the social, emotional, educational, economic and spiritual needs of its clients and co-workers with the goal of empowering children and families to function effectively in their community. HCCS provides a community-oriented living and working environment and seeks to be an effective advocate on issues which affect children and families. HCCS maintains programs which incorporate peer influence, individual attention, family involvement, formal education and co-worker team work.

HCCS PURPOSE

HCCS provides temporary residence, supportive post residential services, in-home family based, specialized foster family, and other community based programs, for troubled and neglected young people, who can benefit from the therapeutic experience provided by the Agency. In accepting a young person for treatment, HCCS does not become a substitute family. Instead, it becomes an environment where both the young person and his or her family can reassess their relationship and build anew.

HCCS has as its primary goal the strengthening and reunification of each family unit, it continues to investigate, develop and implement new programs to advance this goal.

All members of the HCCS community recognize that their primary obligation is to the well-being of the youth and families they serve. Therefore, all are desirous of working toward the creation and maintenance of conditions which are conducive to the delivery of the highest level of professional services.

SUMMARY OF AUDIT FINDINGS:

An exit meeting was held with the following persons in attendance: Director Barb LaRue, PREA Agency Compliance Coordinator Patrick Sussex and PREA Manager Jim McClain.

Number of standards exceeded: 1

Number of standards met: 38

Number of standards not met: 0

Not Applicable: 0

§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)

The Agency meets the standard with their policies and practice. Holy Cross Children's Services policy General Administration and HCCS PREA Policy clearly meets this standard. The facility PREA Plan exceeds zero tolerance as required by the standard. In addition to the facility PREA Compliance Manager, the Agency also employs a fulltime PREA Juvenile Compliance manager to ensure they are meeting all the PREA standards. The zero tolerance policy is posted on the Department of Human Services website <http://www.mfia.state.mi.us/olmweb/ex/JR/Public/JR5/560.pdf>.

§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)

The agency (MI Department of Human Services) has entered into or renewed the contracts for the confinement of juvenile justice residents with private providers since Aug. 20, 2012. All contracts include the requirement that the facility(s) adopt and comply with the PREA standards. There are approximately 52 contracted juvenile justice residential programs operating in 34 facilities, and three publicly-operated facilities. M L King House is a public facility.

§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)

Acting Director Alexis Terry completes an annual review of the post audits and staffing plan. M L King House policy states that they will adhere to direct care staff to youth ratios of 1:8 during waking hours and 1:10 during sleeping hours. After reviewing population logs for the last twelve months the facility operated within the 1:8 ratio during waking hours and the 1:10 ratio during sleeping hours. Minimum ratios were met at all times except in the case of unforeseen and temporary circumstances. There are adequate resources to meet PREA and other confinement requirements. The review included an assessment of the facilities' phone access and staffing levels. They do not operate below the critical post requirements. Documentation of unannounced rounds that cover all shifts was reviewed for compliance. Three new video cameras were added to the facility in the last twelve months.

§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)

Staff of the opposite gender are required to announce their presence when entering the resident-housing unit(s) by stating "female on the unit". This was documented during interviews with staff and juveniles, as well as recorded in housing unit log books. M L King House employees are not permitted to conduct cross gender pat-down searches. Staff have been trained on conducting pat-down searches of transgender and intersex residents in a professional manner. All searches are conducted by staff of the same gender as the resident.

§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)

M L King House PREA policy complies with this standard. The information is provided verbally and in written form, and the information is in a language and format that the youth can understand. The facility has not had residents with limited English proficiency serve enough to require special accommodations to fully benefit from the PREA. The facility does not use resident interpreters. The policy states that an interpreter service would be provided if needed.

§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)

M L King House PREA policy clearly meet all the components of this standard. All employees have had their criminal background check completed before hiring and are required to have them done again every 5 years. Nine contractors have been employed by the facility in the past year. All had criminal backgrounds checks completed. A tracking system is in place to ensure they will be completed every five years.

§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)

Three (3) new video cameras have been upgraded in the last twelve months. The staffing plan and incident reports are accessed to determine if upgrades are indicated.

§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)

M L King House PREA policy clearly meets this standard. All other medical services are conducted outside of the facility. All staff have been trained in evidence protocol. Forensics would be conducted by outside personnel. In the event of a sexual assault the shift supervisor is called, then the Director of M L King House. The Director determines when the resident should be transported to Macomb/McLaren General Hospital for a SAFE/SANE exam. The MOU with Macomb Community Mental Health Crisis Center would provide for victim advocate services. The MOU was reviewed for accuracy. The phone number to the center is posted in each housing unit. All criminal investigations are conducted by Child Protective Services and/or the Mt. Clemmens Policy Department.

§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)

M L King House PREA policy was reviewed during on-site inspection to verify the components were met. All investigations would be done by Child Protective Services (CPS) or the Mt. Clemmons Police Department. There have been zero (0) allegations of sexual abuse or sexual harassment in the past twelve months.

§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)

M L King House PREA policy has been explained in its entirety to all staff. M L King House policy covers all training required by this standard. All staff interviewed indicated that they received the required PREA training. All training records were reviewed for compliance. Training curriculum was reviewed for compliance. All documentation included employee signatures and dates.

§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)

M L King House PREA policy meets the requirements of this standard. Contractor and volunteer training sign-in sheets were reviewed for training received. Volunteers and contractors all receive the required PREA training.

§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)

M L King House policy 201 Client/Intake summaries and M L King House PREA policy meets the requirements of this standard. At intake, juveniles receive an HCCS Preventing Sexual Assault Youth Orientation Packet. It is also discussed with the resident youth by their counselor during their orientation to the facility. Intake packets were reviewed for compliance. All intake packets are signed for by the resident. There are signs posted throughout the facility with the phone number to call to report an incident. These notices are also posted in each housing unit.

§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)

M L King House PREA policy meets the requirements of this standard. The preliminary gathering of information of suspected incidents is conducted by the Director. Criminal investigations are conducted outside of the facility by the CPS or the Mt. Clemmons Police Department.

§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)

The facility does not employ a medical staff. All medical treatment is conducted as outpatient services through the local hospital emergency room. The facility employs licensed social workers and has recently contracted with a psychologist for additional mental health services.

§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)

M L King House PREA policy Section 3 includes all components required by this standard. Interviews with the Director and two (2) staff members for treatment services verified that there is a thorough system for collecting this information and providing continued re-assessment and follow-up services as needed. An intake screening form is used to gather data at intake. These documents were reviewed for compliance.

§115.342 – Use of Screening Information

- 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)

M L King House PREA policy section 3 includes all components required by this standard. A review of the documents associated with these procedures indicates the information from the risk screening is used to ensure the safety of each resident. The facility does not use isolation for sexual victimization.

§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)

M L King House PREA policy includes all components required by this standard. Staff and juvenile interviews were clearly documented. The procedures for reporting are clearly stated in the resident PREA information packet, orientation packet, and on posters located throughout the facility.

§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)

M L King House PREA policy covers all of the components of this standard. Zero grievances were filed last year that alleged sexual abuse. It was clear from interviews that preventing sexual assault in this facility is a responsibility that the personnel at M L King House take extremely seriously.

§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)

M L King House PREA policy covers all components of this standard. Residents are provided emergency services and support through the free hotline phone call services that the residents are allowed to make. The number is posted in each housing unit. They also can have private conversations with their legal service provider and to their parents on visitation. The residents are also allowed two phone calls per week. There is also a grievance procedure in place that the resident can use to file a complaint.

§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)

Information is made available through posters posted throughout the building with the Child Protective Services (CPS) toll-free number and other reporting options, the information is included in the Youth PREA Orientation, and the information is listed on the DHS Website at http://michigan.gov/documents/dhs/PREA_Website_Info_Final_445753_7.pdf?20140211132725

§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)

The Michigan Mandated Reporting Law and M L King House PREA policy contain all the components of this standard. The Mandated Reporter’s Resource Guide that includes a copy of the Child Protection Law is available online at:

http://www.michigan.gov/documents/dhs/Pub-112_179456_7.pdf This was also verified through interviews with random staff.

§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)

M L King House PREA policy meets the components of this standard. If a juvenile was at risk of sexual victimization, they could temporarily be placed in another unit and/or transferred to another facility. There have been no residents placed in this status in the past twelve months. This was also verified through interviews with random staff. The facility does not have or use an Isolation Room.

§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)

M L King House PREA policy meets all the components of this standard. This was also verified through interviews with Director and PREA Coordinator. If a report is received of sexual abuse from another facility, the Director must report Director-to-Director to the other facility within 72 hours. All incident reports must be completed before the end of the employees shift. The facility has not received any allegation of sexual abuse or harassment from another facility in the past twelve months.

§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)

M L King House PREA policy includes all the components of this standard. All staff are trained in first responder duties. This was also verified through interviews with random staff and an examination of the training records.

§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)

M L King House policy PREA Coordinated Response Plan meets the components of this standard. All staff interviewed were able to report what coordinated efforts would be put in place once a report was made.

§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)

The facility does not have a labor contract with any labor unions, and is able to protect victims from abusers.

§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)

M L King House PREA policy includes all components of this standard. The following staff are designed to monitor for possible retaliation: the Treatment Specialist Coordinator, the Director and the PREA Program Manager.

§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)

M L King House PREA policy meets the components of this standard. Residents could temporarily be placed in the other dormitory unit but only as a last resort when other restrictive measures are inadequate to keep the youth safe from other youth, and only until an alternate means of keeping all youth safe can be arranged. Staff may not deny a youth otherwise under control, access to daily large-muscle exercise and legally-required educational programming or special education services. The facility does not use isolation.

§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)

M L King House PREA policy meets all of the components of this standard. During the last 12 months there have been zero (0) allegations. The CPS or local police department conduct all criminal investigations. Internal investigations are started by the Director.

§115.372 – Evidentiary Standard 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)

M L King House PREA policy meets the components of this standard. Appropriate measures are taken to protect the due process rights of the residents. There have been zero (0) allegations within the last twelve months.

§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)

M L King House PREA policy meets all of the components of this standard. There have been zero (0) allegations within the last twelve months. The facility has an MOU with the Clinton Township Police for investigative services. Residents are informed of the investigative process. Youth and Family Grievances require that all grievances have a written response, including the rationale for the decision, to youth or family member within five calendar days. Copies of all grievances must be maintained in a chronological file, in addition to the grievance log, along with any return receipts or confirmations, in accordance with the Record Retention Schedule.

§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)

M L King House PREA policy includes all the components of this standard. There have been zero (0) allegations within the last twelve months. Disciplinary sanctions for rule violations are located in the Michigan Employee Handbook. The Handbook was reviewed for compliance of the 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)

M L King House PREA policy contains all the components of this standard. Contractors and volunteers are subject to all the expectations as employees relative to contact with youth. Contractors may not continue to have contact with youth and will have contracts terminated upon any finding of child abuse or sexual abuse. There have been no incidents in the last twelve months. All contractors and volunteers are included and trained in the requirements of the PREA.

§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)

M L King House PREA policy meets all of the components of this standard. Appropriate measures must be taken to protect the due process rights of youth who are, or who may be, subject to discipline, isolation, or confinement. This policy ensures youth are treated fairly under a consistent system of discipline that teaches and encourages appropriate behaviors, and discourages inappropriate behaviors. The orientation packet addresses all disciplinary sanctions for juvenile residents. The facility does not use isolation.

§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)

M L King House PREA policy meets the components of this standard. Youth are required to meet with medical and mental health practitioners per standard operating protocol for treatment. Treatment plans must be based on the youth's assessed risk and assessment of the youth and family's strengths and needs. The treatment needs of youth are identified and prioritized. Through interviews with specialized staff, the facility has a thorough system for collecting this information and also has the capacity to provide continued re-assessment and follow-up services as needed. No resident disclosed prior victimization during screening.

Additional screening is conducted by the group leader/therapist with the use of the Massachusetts Youth Screening Instrument (MAYSI) version 2, and the Michigan Juvenile Justice Assessment System (MJJAS). All screening documentation is kept in the resident permanent treatment file.

§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)

M L King House PREA policy meets the components of this standard. Services are provided to the residents at no cost to them. The facility provides timely, unimpeded access to free emergency medical and crisis intervention services. Resident treatment plans are updated to reflect changes to youth progress.

§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)

M L King House PREA policy meets standards of this component. The victim of sexual assault or attempted sexual assault must be provided mental health assistance and counseling as determined necessary and appropriate. Victims and perpetrators of a substantiated sexual assault must be encouraged to complete an HIV test. The perpetrator must be requested to complete an HIV test. If the perpetrator will not voluntarily take an HIV test, the facility Director or designee may seek a court order compelling the test. Mental health evaluations must be conducted with 60 days of learning of the abuse history.

§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)

M L King House PREA policy meets the components of this standard. Facility management reviews each incident of sexual abuse for cause, staffing, and physical barriers, and makes recommendations for prevention and implementation of remedy(s). Interviews with the administrative team indicate that all incidents are reviewed and documented. The team includes the Director, PREA coordinator and Treatment Program Manager. There have been zero (0) incidents in the last twelve months.

§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)

Data collection is an Agency and M L King House PREA policy. All components of the standard are covered in those two policies. The standardized instrument used is the Survey of Sexual Violence as developed and utilized by the Bureau of Justice Assistance and conducted by the U.S. Census Bureau. Data is collected, aggregated, and published on the agency (DHS) Website for all public residential facilities and all private facilities that contract with the state to provide juvenile justice residential services. The most recent data published is from calendar year 2012. Data from calendar year 2015 has been collected and will be published. See:

http://michigan.gov/documents/dhs/PREA_Website_Info_Final_445753_7.pdf?20140211132725

§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)

Data was collected for the 2015-2016 calendar year is being aggregated and posted to the public. In addition to that, data information of activates and compliance status was included

in that report. This report was prepared for the Director of DHS to move forward with the PREA. This report recommended that the governor sign for assurance and also listed general recommendations for achieving full compliance. Specifically the 2015 data is being collected to compare with the 2012 data. Once this is collected, it will be analyzed and compared with the previous year's data. Recommendations will be made from this data. This information was obtained by an interview with the agency PREA coordinator and a review of the 2014 data and the March 2014 report to the Governor on the PREA.

§§115.389 – Data Storage, Publication, and Destruction

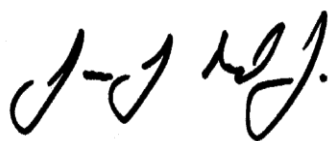
- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

This occurs annually as administered by the agency (DHS). Data collected is aggregated and published on the DHS Website. See link

http://michigan.gov/documents/dhs/PREA_Website_Info_Final_445753_7.pdf?20140211132725

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.



James L. Roland Jr.

Auditor Signature

3/1/2016

Date