

# Guidelines for Serving Individuals with a History of Sexual Aggression

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## Brief Rationale:

The intent of these guidelines is to appropriately plan for and provide services for individuals who have a **documented history of engaging in sexual aggression, sexual battery or otherwise engaged in nonconsensual sexual behavior with another individual, with or without police involvement.** Although only a small portion of individuals with intellectual and developmental disabilities present sexually aggressive behaviors, it is of the utmost importance that we responsibly address their unique needs and create safe environments for everyone. Advocacy efforts by the courts and other community groups often identify APD as the resource to meet the needs of this segment of the population. This set of Guidelines will provide general procedures to be followed when supporting these individuals in order to facilitate successful community living. Serving these individuals involves team collaboration at different stages including prior to placement transitioning and during placement, emphasizing ongoing preventative measures.

## Prior to Transition to Community Living

1. The “Sexually Maladaptive Recipient Characteristics” should be completed when considering community placement, either by the staff of the APD forensic facility or the assigned Waiver behavior analysis provider in the community.
2. The local Field Office should establish a collaborative team with providers to assess the risks of serving the individual and developing an individualized safety plan in advance of placement.
3. The Team should include the WSC, Group Home Manager, Behavior Analyst, Guardian, Day Program Manager, Companion, Job Coach, Mental Health Counselor/Psychologist, and School Rep, as appropriate.
4. The team should produce a safety plan that specifies safeguards for the individual under all circumstances. This safety plan will be available at the time of placement, and will continue to be implemented until the team determines that modification is needed. It should be reviewed in coordination with behavior plan reviews and updated as needed, but not less than annually, and is to be incorporated into the Support Plan, as well as the behavior plan, when appropriate.
5. Special considerations:
  - a) Is there a court order? What does it specify?
  - b) Is there a Probation Officer or other requirements established by the court?
  - c) Does the person need to register locally as a “sex offender”?
  - d) List, or history, of previous charges or acts of sexual aggression
  - e) Police reports
6. The “safety plan” should address, at minimum:
  - a) Court order stipulations, when appropriate
  - b) Behaviors of concern
  - c) Triggers, high-risk situations, environmental stressors and personal stressors
  - d) Known predatory “grooming” behaviors\*
  - e) Media concerns (including social media)
  - f) Avoidance behaviors to be prompted
  - g) Level or type of routine supervision required
  - h) Staff assignments, including size or gender
  - i) Home location
  - j) Bedroom assignments (roommates and location within the home)
  - k) Community limitations (allowable activities, van routes, supervision)
  - l) Day program or work environment supervision

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- m) Alarms and monitoring devices
- 7. The location of the Group Home should be away from places related to previous criminal offenses. The FDLE Conditional Release Program and the Florida Registration and Related Sex Offender Law for offenses against victims less than 16 years of age prohibits living within 1000 feet of a school, day care center, park, playground, designated public school bus stop, or other place where children regularly congregate.
- 8. The guardian or individual must sign and agree to placement restrictions, specified in their "safety plan", that is part of the Support Plan.

### **Once Transitioned to a Community Residential Program**

1. The program director for residential and day treatment services must take timely, necessary action as to the level of supervision, environment, and routines as changing circumstances may dictate to ensure safety.
2. Supervision needs to be provided by able individuals (e.g., size, gender, training, fitness criteria as indicated in the safety plan) who have signed off that they have been trained in and are capable of implementing the safety plan.
3. Monitor safety plans for fidelity like any other behavior plan.
4. Specify supervision requirements in the support plan, behavior plan, or safety plan, and give all providers a copy to sign at the time of training that they understand and are capable of implementing the requirements of the expected level of supervision identified in the safety plan.
5. Require single bedrooms and overnight supervision. Motion detectors or alarms on the door may be used. An alarm does not replace staff supervision.
6. Consider measures for elopement in all environments and individualize according to the history of the individual. Do not allow wandering off.
7. Search rooms and remove high risk items such as pictures of children if the individual has offended against children. No pornography allowed. Include this in the safety plan.
8. Do not allow interactions with children or go to places where children congregate such as playgrounds, schools, or school bus stops.
9. Do not allow the individual to assume the lead or serve in a caregiver role to prevent abuse of vulnerable individuals.
10. Be watchful of "grooming behaviors." This is a subtle, gradual, and escalating process of building trust with potential victims and caregivers. It is deliberate and purposeful. Abusers may groom others for weeks, months, or even years. It usually begins with behaviors that may not seem inappropriate. "Grooming Behaviors" may include: Sharing common interests in sports, music, or movies, giving gifts or special privileges, befriending caregivers or creating a special relationship, looking for opportunities to have time alone with potential victims. Also, moving from non-sexual touching to "accidental" sexual touching.
11. The licensing rule 65G-2 includes a number of relevant requirements including the following:
  - a) The facility must have a written policy regarding sexual activity involving residents.
  - b) Direct service providers must be trained in the policy regarding sexual activity.
  - c) Establish a dress code for both residents and direct service providers outlining what clothing is acceptable and when.
  - d) Respect personal space such as knocking before entering a bedroom.
  - e) Make sure everyone sleeps in separate beds.
  - f) Assist or supervise residents when bathing, showering, or toileting if the resident requires assistance or supervision, but residents and staff may not bathe, shower, or toilet simultaneously.
  - g) Reasonable guidelines shall be established concerning the level and type of supervision required for residents.

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- h) Encourage, model, and support open communication among residents and direct service providers about events occurring in the facility to encourage reporting inappropriate sexual behavior.
  - i) Give all direct service providers information related to sexually aggressive residents including the date of the sexual abuse incident, type of abuse, brief narrative of the event, type of treatment the resident received, and the outcome of the treatment.
  - j) Make sure newly placed residents with a history of sexual aggression have 24-hour visual supervision until a reduction in supervision is approved by the APD Field Office.
  - k) Do not allow residents with a history of sexual aggression to share a bedroom with another resident.
  - l) Do not leave residents known to be sexually aggressive or vulnerable to sexual exploitation alone in a bedroom or bathroom behind closed doors. Only one resident may use the bathroom at any time the bathroom door is closed.
12. Establish "House Rules", including but not limited to:
- a) One person at a time should use the bathroom. If the bathroom has several stalls, provide 1:1 supervision (65G-2).
  - b) Make sure everyone gets dressed in private, and everyone leaves the bathroom dressed.
  - c) Teach residents to knock and ask permission to enter rooms.
  - d) Supervise and limit media access as necessary including parental controls on electronic devices. Avoid websites that involve minors or pornography.
  - e) Do not allow tickling, horseplay, or wrestling.
  - f) Restrict possession of cameras, cell phones with cameras, video games that can access the internet or take pictures. Restrict binoculars or telescopes if there is the possibility of voyeurism. This can also be a part of precursor behavior.
  - g) Monitor telephone and mail services if they are used to engage in dangerous or harassing behaviors or to contact victims or potential victims.
  - h) Establish a dress code (65G-2).
  - i) Limit access to bedrooms by establishing and enforcing house rules on who is allowed to visit whose bedroom and under what conditions (65G-2).

### **General Precautions and Preventative Measures for Ongoing Support:**

Depending on the nature of the individual's history, be aware of settings where children congregate such as (not all inclusive):

- Schools, day care facilities, bus stops or playgrounds, swimming pools with children, sections of parks with children's equipment, beaches, or water parks
- Health clubs with attached child care
- The children's section of a library or a movie theatre with movies targeted at children
- Restaurants with playgrounds or activities for children, e.g. Burger King, Chuck E. Cheese, McDonald's, etc.
- Areas of a store where children may congregate (near animals, toys, clothing, video games, etc.)
- Zoos and museums

Preventative measures to consider:

- Enter public restrooms and stay in the section where people wash their hands. Do not talk with the consumer while in the restrooms but observe and intervene as needed.

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- Prevent access to children's toys or items related to kids
- Prevent access to books, TV shows, visual media focused on children
- Prevent access to pornography obtained through magazines, TV, internet, and videogames
- Consider going late in the day to the grocery store when children are less prevalent
- Avoid shopping at retail stores during the "back to school" weeks when children are more prevalent
- Avoid malls, amusement parks, libraries during school holidays and days in which school lets out early
- Use alarms on bedroom doors or windows and exits to the environment as needed
- Identify potential "contraband" and randomly conduct room sweeps for those items
- Apply "parental controls" and do periodic checks of previous internet sites accessed
- Go to restaurants catering to adults

### **THE MOST CRITICAL PREVENTATIVE MEASURE OF ANY SAFETY PLAN**

#### **VIGILANCE - Line of sight supervision – Knowing where and what the individual is doing at all times!**

Everyone involved in the care of these individuals must be constantly reminded to maintain professional boundaries and treat each individual with respect and dignity and in accordance with the Bill of Rights. They should be trained to make the sound decisions that balance safety and individual rights which they will inevitably be called upon to make. This is sensitive work, so frequent, direct visual oversight by service managers of all workers is a must. Reasonable precautions should be provided (preferably in writing) when employing staff with limited experience, to enforce the serious nature of their adherence to line of sight supervision, when required.

**PLEASE KEEP IN MIND THAT THIS IS NEITHER ALL-INCLUSIVE NOR TAILORED TO MEET THE SPECIFIC NEEDS OF ANY INDIVIDUAL. SAFETY PLANS SHOULD BE INDIVIDUALIZED WITH THE PARTICIPATION OF PROFESSIONALS HAVING EXPERTISE IN THE SUBJECT MATTER.**

#### References:

*Vermont Best Practices Manual: Supervisions and Treatment of Sex Offenders with Developmental Disabilities.* By the "Best Practices Manual Committee." Waterbury, Vermont: Vermont Agency of Human Services, 2005.

"The Grooming Process" Retrieved 4-10-14 from:

[http://dcf.vermont.gov/stepup/educate/how\\_it\\_happens/grooming](http://dcf.vermont.gov/stepup/educate/how_it_happens/grooming)

J. Burton and L. Rasmussen (1998). *Treating Children with Sexually Abusive Behavior Problems.* Binghamton, New York: Hawoth Press Inc.

Licensure of Residential Facilities, 65G-2, F.A.C., specifically **65G-2.009 Resident Care and Supervision Standards, section (9) SEXUAL ACTIVITY**

\*Grooming Behaviors – In this context, "grooming" refers to a process that a sexual predator may engage in with a potential victim over a period of months or even years to break down a child's defenses and increase the child's acceptance of physical touch, and vulnerability to sexual abuse without discovery. This process may also include behavior of the sexual predator that serves to persuade parents or adults of his/her trustworthiness with children.