



STATE OF INDIANA
Department of Correction

Indiana Government Center – South

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Governor

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Bruce Lemmon
Commissioner

December 11, 2012

The Honorable Terry Shewmaker
Elkhart County Circuit
Court Suite No. 204
101 N. Main
Goshen, Indiana 46526

RE: Elkhart County Juvenile Detention
2012 Juvenile Detention Standards Inspection

Dear Judge Shewmaker:

As required by 210 IAC 6, an inspection of the Elkhart County Juvenile Detention Center was conducted on March 15, 2012. Conducting the inspection from the Department of Correction were Vanessa Krause, Tom Hanlon, Esther Hinton, Shannon Bowling and Kellie Whitcomb. The Detention Center was found to be non-compliant at that time. The inspection team from the Department of Correction returned for a second inspection on March 29, 2012. The Detention Center was found to still be non-compliant at this time. Between March 29, 2012 and November 5, 2012 the Department of Correction was in constant communication with both you and Ms. Yoder. On December 10, 2012, the inspection team returned for a final re-inspection of the Detention Center for compliance in all Mandatory Standards. The inspection team consisted of Vanessa Krause, Shannon Bowling, Jan Adams, Greg Lintz and Kellie Whitcomb. The Elkhart County Juvenile Detention Center was found in compliance at this re-inspection.

The Elkhart County Juvenile Detention Center is located at 114 N. 2nd Street in Goshen, Indiana 46526. The facility was built in 1986 and accommodates 17 juveniles in its detention unit and primarily houses Elkhart County youth. The Director of the Center is Joanne Yoder.

This inspection constitutes the 16th-annual inspection of the Elkhart County Juvenile Detention Center. Compliance with all mandatory standards and at least 90% of the recommended standards is required to attain "Full Compliance".

The inspection included a review of all mandatory and recommended standards, a tour of the facility, and detention staff and residents were interviewed. During the final re-inspection on December 10, 2012, the students offered no incidents of abuse or complaints on conditions.

Summary of Tour on December 10, 2012:

1. Recommend students wear shower shoes during showers
2. Advised Ms. Yoder to not prop open fire doors
3. Advised correction of Fire Evacuation Plans
4. Advised Ms. Yoder to relocate the emergency lighting in day room
5. Advised the removal of a latex glove covering a smoke detector in the jail side of the building.

Summary of Folders:

1. Facility Standard Folders are electronic.
2. Highlighting needs to be relevant to the standard.
3. Assure that all documents showing stipulated practice are placed in folders

**Recommended Standards found to be in non-compliance: Standard#
210 IAC 6**

3-2.92 The number of juveniles does not exceed the facility's rated bed capacity. (ACA-2B-06)

The facility's population exceeded the rated bed capacity.

3-2.102 Handicapped juveniles are housed in a manner that provides for their safety and security. Rooms or housing units used by the handicapped are designed for their use and provide for interaction with the general population. Appropriate facility programs and activities are accessible to handicapped juveniles confined to the facility. (ACA 2C-09)

Rooms in housing units are not handicapped accessible.

3-3-132 Written Policy, Procedure and Practice requires that when both male and females are housed in the facility, at least one male and one female member are on duty at all times. (ACA-3A-07)

Facility does not always have a female on duty when both male and females are housed.

3-3.176 Written policy, procedure, and practice provide that juveniles charged with rule violations are scheduled for a hearing as soon as practicable but no later than seven days, excluding weekends and holidays, after the alleged violation. Juveniles are notified of the time and place of the hearing at least 24 hours in advance. (ACA-3C-13)

Need to show where the juvenile was notified.

- 3-4.240 Written policy, procedure and practice provide for the collection and recording of health appraisal data and require the following:
- The process is completed in a uniform manner as determined by the health authority.
 - Health history and vital signs are collected by health-trained or qualified health personnel.
 - Review of the results of the medical examination, tests, and identification of problems is performed by a physician.
 - Collection of all other health appraisal data is performed only by qualified health personnel. (ACA-4C-24)

Need to show qualified health care personnel are collecting health appraisal data.

The facility was found to be in compliance with 100% of all Mandatory Standards, and 98.2% of the recommended standards. **At this time the facility meets the requirements to attain "Full Compliance"**. Ms. Yoder and staff have done a tremendous job bringing many standards compliant. This report becomes public information ten (10) working days from the date of mailing. Please contact me at (317) 407-1917, or through email, if you have any questions concerning this report.

Respectfully submitted,

Shannon Bowling
Detention Inspector

Cc: Vanessa Krause, Director, Program Review Division, IDOC
Michael Dempsey, Executive Director of Juvenile Services
Joanne Yoder, Director, Elkhart County Juvenile Detention Center
File

COMMISSION ON ACCREDITATION FOR CORRECTIONS
AND THE
AMERICAN CORRECTIONAL ASSOCIATION

COMPLIANCE TALLY

Manual Type	Juvenile Detention Facilities, 3rd Edition	JDC
Supplement		
Facility/Program	Elkhart Co. Juvenile Detention Center	
Audit Dates	10-Dec-12	
Auditors	Vanessa Krause, Director	
	Shannon Bowling, Jan Adams, Kellie Whitcomb	

	MANDATORY	NON-MANDATORY
Number of Standards in the Manual	26	275
Number of Standards Not Applicable	0	1
Number of Standards Applicable	24	274
Number of Standards in Non-compliance	0	5
Number of Standards in Compliance	26	269
Percentage (%) of Standards in Compliance	100.00%	98.20%

The number of standards in the manual *minus* number of not-applicable standards *equals* the number of standards that are applicable.

The number of applicable standards *minus* the number of standards in non-compliance *equals* the number of standards in compliance.

The number of standards in compliance divided by the number of standards that are applicable *equals* the percentage of standards in compliance.