

Indiana Department of Correction, Division of Youth Services 2019 Juvenile Detention Inspection - Compliance Report



Allen County Juvenile Center
2929 Wells Street
Fort Wayne, In 46808

Auditors

Terrie Decker, Director of Juvenile Detention Inspections, Indiana Department of Correction
Kristin Herrmann, Youth Law T.E.A.M. of Indiana
Laurie Elliott, Youth Law T.E.A.M. of Indiana

Indiana Department of Correction
Division of Youth Services
302 W. Washington St. Rm. E334, Indianapolis, IN 46204

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2929 Wells St.
Fort Wayne, In 46808

Inspection Date(s): March 19, 2019
May 29, 2019
August 26, 2019

Auditors: Terrie Decker
Director of Juvenile Detention Inspections
Division of Youth Services, Indiana Department of Correction
(317) 452-5275, TeDecker@idoc.IN.gov

Kristin Herrmann
Youth Law T.E.A.M. of Indiana
(317) 916-0786, kherrmann@youthlawteam.org

Laurie Elliott
Youth Law T.E.A.M. of Indiana
(317) 916-0786, lelliott@youthlawteam.org

INTRODUCTION

The 2019 annual juvenile detention facility evaluations conducted by the IDOC, Division of Youth Services consisted of three on-site facility inspections; staff and youth interviews; and an audit of the state detention standards. The new Indiana Juvenile Detention Facility Standards are in the process of being adopted. Detention Facilities had the option to be audited on three hundred one (301) current detention standards or the corresponding two hundred and thirty-seven (237) corresponding proposed new juvenile detention facility standards.

Allen County Juvenile Center chose to be audited on the current three hundred one (301) current juvenile detention facility standards in 2019, for their 23rd annual detention inspection. Of the three hundred and one (301) standards audited, twenty-six (26) standards require mandatory compliance and the remaining two hundred and seventy-five (275) are recommended standards. Compliance with 100% of the mandatory standards and 90% of the recommended standards is required to attain "Full Compliance."

FACILITY INFORMATION

Facility county:	Allen
Governing authority:	Allen Superior Court
Name of facility administrator:	Shane Armstrong
Detention Director:	Shane Armstrong
Detention facility's mission:	The Allen County Juvenile Center views the concept of detention as being able to provide the community a continuum of services directed toward meeting the needs of individual juveniles who, for the protection of the community themselves, must temporarily be removed from their homes
Rated capacity:	138
Population on date of first audit:	64
Average daily population for the last 12 months:	43
Average length of stay for the last 12 months:	26
Year the building was built:	2004
Minor upgrades since last audit (i.e. painting, flooring, bedding, furnishings):	Painting, LED lighting conversion
Major upgrades since last audit (i.e. plumbing, electrical, security system):	Some IP cameras added
De-escalation techniques training:	Handle with Care
Physical force techniques training:	Handle with Care
Chemical agents permitted:	No
Name of food service provider:	Summit
Name of food service supervisor:	Craig Reeve
Name of health care authority individual or agency and license/certification:	Regina Humphrey, Nurse Practitioner
Name of mental health care authority individual or agency and license/certification:	Klinton Krouse, HSPP Margaret Wallace, LMHC Keisha Thierry, LAC
Education Services:	Full day secondary program administered by the local school district. Evening HSE/adult education classes administered by the local school district.

Standards:	<u>Safety and Security</u>
On-site Visit conducted March 19, 2019	<ul style="list-style-type: none"> • <u>Eighty Two Total Standards audited</u> • <u>55 Total Safety Standards, 15 Mandatory and 40 Recommended</u> • <u>27 Total Security Standards, 0 Mandatory and 27 Recommended</u> • Number of Standards Not Applicable:2 • Number of Mandatory Standards in Compliance: 15 • Number of Recommended Standards in Compliance: 65
Auditors:	Terrie Decker, Kristin Herrmann and Laurie Elliott
Facility Tour:	The tour was conducted by Todd Stubbs, Director of Training and Security. This audit was about “space and safety”. We toured the youth living area, youth rooms, property rooms (both personal property and facility property), janitorial closet, visitation room and search area, private interview space, administrative, security areas and mechanical. We toured medical and the kitchen for proper sharps storage. And ensured that staff had access to the Emergency Manual.
Youth Interviews:	<p>Two (2) youth were interviewed, 1 female and 1 male.</p> <p>Youth interviews consisted of questions regarding facility safety and sanitation, living area temperatures, emergency and medical call procedures, staff supervision, restraint use, and transportation.</p>
Youth Responses:	Both youth reported they have never feared for their safety while at the facility. One youth reported that the living area was hot, the other had no complaint. Both youth understood how to obtain medical care and had no complaints about the process. Either had been restrained or placed in restraints during their stay. For recommendations both youth commented that they were in their rooms too much; staff needed to be more positive; they need longer time for phone calls. Complaints were made during the tour by youth that were eating that the food was not good. The male youth reported that the intercom in is living area did not work and he had to yell to get what he needed.
Staff Interviews:	<p>Facility Administrator and two line staff were interviewed.</p> <p>Facility Administrator interview consisted of questions regarding safety, overcrowding, flammable chemicals, documentation, outside transports, restraint use and emergency plans.</p> <p>Security Staff interviews consisted of questions regarding emergency and count procedures, handling toxic chemicals, sanitation procedures, log documentation, transportation procedures, restraint procedures and search procedure.</p>

Staff Responses:	Staff were knowledgeable on emergency procedures and restraint use. They answered consistently about the handling of any toxic materials and about the youth's medical care.
Non-compliant Standards:	There were no non-compliant standards and no open files.
Recommended Action:	There are no recommendations for this audit. Facility staff were prepared for out audit visit.

Standards:	Justice & Order and Food Service & Hygiene
On-site Visit conducted May 29, 2019	<ul style="list-style-type: none"> • <u>Sixty Six Total Standards audited</u> • <u>45 Total Justice and Order Standards, 0 Mandatory and 45 Recommended</u> • <u>21 Total Food Service & Hygiene Standards, 4 Mandatory and 17 Recommended</u> • Number of Standards Not Applicable: 0 • Number of Mandatory Standards in Compliance: 3 • Number of Recommended Standards in Compliance:61
Auditors:	Terrie Decker and Kristin Herrmann
Facility Tour:	The tour was conducted by Director Shane Armstrong. This audit focused on food, clothing and due process. We checked on bedding in the youth's room, checked on the hygiene the youth receive and how property was cared for and stored. We toured the kitchen to ensure that all standard requirements were being met.
Youth Interviews:	Two (2) youth were interviewed, 1 female and 1 male. Youth interviews consisted of questions regarding facility procedure about room confinement, rules and sanctions, due process, clean bedding/clothing and mail procedures. We talk about food allergies and give them an opportunity to make suggestions about procedure and process.
Youth Responses:	Both youth were respectful and willing to answer the questions asked. Overall the youth felt like the rules and procedures were fair and well understood. We always ask for suggestions and concerns from youth. Both commented that the food was not well liked and the female youth had suggestions. All were passed along to the Director.
Staff Interviews:	Facility Administrator, (2) line staff, the food services manager, intake, visitation and mail distribution personnel were interviewed during this audit.

	Questions addressed property given during the intake process and the procedure for mail distribution. We inquired about visitation procedure, confinement and due process. We also talked with the food service manager about all processes involving food purchase, storage and delivery.
Staff Responses:	All staff/personnel were knowledgeable about the areas which we covered.
Non-compliant Standards:	3-3-17 and 3-4.217
Recommended Action:	Both non-compliant standards are issue the facility may choose to change practice to include compliance. Otherwise, there are no recommendations for this audit. The facility staff were prepared for our audit visit.

Standards:	<u>Medical, Mental Health and Education</u>
On-site Visit conducted August 26, 2019	<ul style="list-style-type: none"> • <u>Fifty Total Standards audited</u> • <u>38 Total Medical Standards, 7 Mandatory and 31 Recommended</u> • <u>6 Total Mental Health Standards, Recommended</u> • <u>6 Total Education Standards, Recommended</u> • Number of Standards Not Applicable: 1 • Number of Mandatory Standards in Compliance: 7 • Number of Recommended Standards in Compliance: 42
Auditors:	Terrie Decker, Laurie Elliott and Kristin Herrmann
Facility Tour:	The tour was conducted by Director Shane Armstrong. This audit focused on medical, mental health and education. We talked with nursing staff and education staff. We were able to see how the medical room is set up, and to see the youth in the education setting. We also looked at other areas as the facility as we were touring.
Youth Interviews:	Both a male and female youth were interviewed.
Youth Responses:	With each audit we ask youth questions that pertain to the standards we are addressing during the audit and then ask if they have concerns or comments they would like to make. The youth during this audit had concerns about some staff and issues with the food. These statements were passed along to the Director.
Staff Interviews:	Medical staff, education staff, intake and direct care staff were interviewed during this audit. The Director was also interviewed.

Staff Responses:	Staff were knowledgeable about the procedures in each audit section. Medical staff noted that the policies and procedures were reviewed as required. Staff commented that they receive training as required.
Non-compliant Standards:	There were no non-compliant files during this audit.
Recommended Action:	None. Facility staff were prepared for our audit visit.

Standards:	<u>Administration & Management and Programs & Services</u>
File Review Only	<ul style="list-style-type: none"> • <u>One Hundred Three Total Standards audited</u> • <u>79 Total Administration Standards, Recommended</u> • <u>24 Total Programming Standards, Recommended</u> • Number of Standards Not Applicable: 1 • Number of Recommended Standards in Compliance: 78
Auditors:	Kristin Herrmann
Non-compliant Standards:	3-5.262, 266, 268, 271, 284, 287, 303, 304 3-1-10, 18, 26, 33, 37, 39, 45, 50, 52, 57, 58, 59, 60, 62, 63, 83
Recommended Action:	<p>The majority of these noncompliant standards reference the need for additional paperwork.</p> <p>Moving forward the recommendation I would make is for the 2020 audit cycle. In 2020 documentation showing proof of practice will only be accepted from the calendar year 2019. Therefore in your file preparations be mindful of the importance of early preparation and timely submission.</p>

Inspection Results based on CURRENT STANDARDS:

	Mandatory	Recommended
Total Standards Audited - 301	26	275
Number of Standards Not Applicable	0	5
Number of Standards in Non-Compliance	0	26
Number of Standards in Compliance	26	244
Total Percentage of Compliance	100%	90.3%

Was the facility required to implement a corrective action plan as a result of the audit? **No**

CONCLUSION

Allen County Juvenile Center is in full compliance with the 2019 Indiana Detention Center Standards Audit performed by the Indiana Department of Correction, Division of Youth Services.

A certificate of compliance will accompany this report, which becomes public information ten (10) days from the date of mailing.

Please contact me at (317) 452-5275 should you have any questions concerning this report.

Respectfully submitted,

Terrie Decker

Director of Juvenile Detention Inspections
Indiana Department of Correction/Division of Youth Services

cc: Christine Blessinger, DYS, Executive Director of Youth Services
Kellie Shafer (Whitcomb), Director of Reentry & External Relations
Honorable Andrea R. Trevino, Superior Court
Shane Armstrong, Superintendent
pursuant to 210 IAC 8-1-5(f)
File