

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



Dearborn County Juvenile Center
219 West High Street
Lawrenceburg, IN 47025

Auditors

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Indiana Department of Correction
Division of Youth Services
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Inspection Date(s): April 11, 2019
June 20, 2019
September 19, 2019

Auditors: Terrie Decker
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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 policy and procedure and supportive documentation of practice showing compliance with the state detention standards. There are two hundred and eighty-six proposed new Indiana Juvenile Detention Facility Standards that are in the process of being promulgated. Detention Facilities had the option to be audited on three hundred one (301) current detention standards or the corresponding two hundred and thirty-three (233) proposed new juvenile detention facility standards and four (4) current standards that will be deleted when the new standards are promulgated, for a total of two hundred and thirty-seven (237) standards.

The proposed standards include both the requirements of the current standards and new requirements not in effect; therefore, compliance for this year's audit was determined by a facility proving compliance with only the current requirements. However, facilities opting to be audited on the proposed standards did provide documentation on those new requirements and received feedback on their progress implementing them. There are two hundred and eight-six (286) total proposed standards, fifty-three (53) having exclusively new requirements. This year, facilities had the option of also providing documentation on their effort to implement these fifty-three (53) new standards. Since the proposed new requirements and new standards are not yet in effect, the facility's progress on them is not referenced in this report, though its effort, if applicable, will be recognized in the next paragraph.

Dearborn County Detention Center chose to be audited on the two hundred and thirty-seven (237) proposed juvenile detention facility standards in 2019, for their 23rd annual detention

inspection. Of the two hundred and thirty-seven (237) standards audited, sixteen (16) standards require mandatory compliance and the remaining two hundred and twenty-one (221) are recommended standards. Compliance with 100% of the mandatory standards and 90% of the recommended standards is required to attain “Full Compliance.” Again, Centers that chose to be audited on the proposed detention standards were only required to meet the expectation of the current detention standards. Dearborn County Detention Center chose to also provide documentation on the extra standards with exclusively new requirements. The breakdown of each audit listed below is only reflective of the current standards.

FACILITY INFORMATION

Facility county:	Dearborn
Governing authority:	Dearborn County Juvenile Center
Name of facility administrator:	Traci Agner
Detention Director:	Traci Agner
Detention facility’s mission:	The Dearborn County Juvenile Center has been established for the protection and detention of youth in the least restrictive alternative of care. Specifically, the juvenile center shall provide for the juveniles basic needs, such as shelter, food, clothing and medical care. The Dearborn County Juvenile Center shall also prevent the abridgment of the juvenile’s legal rights during his/her detainment at the facility and provide for physical, emotional, religious, educational and social needs of juveniles during detainment. Juveniles will be housed in a safe, secure and humane environment. The Dearborn County Juvenile Center will also maintain the level of security necessary with the Juvenile Center to prevent and assure that juveniles live free of fear from assaults or intimidation by staff or other juveniles.
Rated capacity:	20
Population on date of first audit:	5
Average daily population for the last 12 months:	6.95
Average length of stay for the last 12 months:	17.25
Minor upgrades since last audit (i.e. painting, flooring, bedding, furnishings):	Murals painted on day area tables. Repaired wind damaged fence (perimeter)

Major upgrades since last audit (i.e. plumbing, electrical, security system):	None
De-escalation techniques training:	No specific curriculum used
Physical force techniques training:	Aikido Control Training (A.C.T.)
Chemical agents permitted:	No
Name of food service provider:	Dearborn County
Name of Food Service Supervisor:	Kathy Prarat – Jail Matron
Name of health care authority individual or agency and license/certification:	Dr David Dobbs, M.D. – 2 hours a week/contract Ron Phillips, RN – 3 hours a week/contract
Name of mental health care authority individual or agency and license/certification:	Ryan Vogt-Foster, MSW, LCSW – 1.5 hours a week Melissa Hughes, MSW, LCSW – 1.5 hours a week
Education Services:	Residents receive all work through their home school districts. Credit recovery is also provided through Plato.

Standards:	<u>Safety and Security</u>
On-site Visit conducted March 20, 2019	<ul style="list-style-type: none"> • <u>58 Total Standards Audited</u> • <u>36 Total Safety Standards, 6 Mandatory and 30 Recommended</u> • <u>22 Total Security Standards, 0 Mandatory and 22 Recommended</u> • Number of Standards Not Applicable: 1 • Number of Mandatory Standards in Compliance: 6 • Number of Recommended Standards in Compliance: 46
Auditors:	Terrie Decker and Kristin Herrmann
Facility Tour:	The tour was conducted by Director Traci Agner. 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:	Two (2) youth were interviewed, (1) male and (1) female. Youth interviews consisted of questions regarding facility safety and sanitation, living area temperatures, emergency and medical call procedures, staff supervision, restraint use, and transportation.

Youth Responses:	Both youth reported feeling safe. There were no concerns by either youth. The only suggestion given was that sometimes the food is cold, and sometimes it doesn't look very good. This information was passed along to the Director.
Staff Interviews:	<p>Facility Administrator and two (2) staff were interviewed: (1) Control room operator and (1) line staff.</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 about emergency procedures and were consistent in answering the other questions presented. Both staff were veteran staff that had a lot of respect for the facility and the way that he was being managed. They had no concerns that needed to be passed onto the Director.
Non-compliant Standards:	N/C 8-4-10; 8-4-11; 8-4-15; 8-4-18; 8-4-24
Recommended Action:	<p>There are no recommendations for these noncompliant standards due to the fact they are noncompliant due to building design.</p> <p>Facility staff were well prepared for this audit visit. Any standard that remained open was closed during the visit.</p>

Standards:	Justice & Order and Food Service & Hygiene
On-site Visit conducted June 20, 2019	<ul style="list-style-type: none"> • <u>Fifty-Seven Total Standards audited</u> • <u>38 Total Justice and Order Standards, 0 Mandatory and 38 Recommended</u> • <u>19 Total Food Service & Hygiene Standards, 3 Mandatory and 16 Recommended</u> • Number of Standards Not Applicable: 2 • Number of Mandatory Standards in Compliance: 3 • Number of Recommended Standards in Compliance: 52
Auditors:	Terrie Decker and Kristin Herrmann
Facility Tour:	The tour was conducted by Director Traci Agner. 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. The food is provided to this center by the jail, therefore there was no tour of the food service area. We were at the facility when lunch was served.
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. When asked about suggestions for the facility both youth commented about the taste of the food. This information was passed along to the Director.
Staff Interviews:	Facility Administrator, (2) line staff, 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.
Staff Responses:	All staff/personnel were knowledgeable about the areas which we covered.
Non-compliant Standards:	None
Recommended Action:	None. The facility staff were well prepared for our audit visit.

Standards:	<u>Medical, Mental Health and Education</u>
On-site Visit conducted September 19, 2019	<ul style="list-style-type: none"> • <u>Forty-one Total Standards audited</u> • <u>29 Total Medical Standards, 7 Mandatory and 22 Recommended</u> • <u>6 Total Mental Health Standards, Recommended</u> • <u>6 Total Education Standards, Recommended</u> • Number of Standards Not Applicable: 0 • Number of Mandatory Standards in Compliance: 7 • Number of Recommended Standards in Compliance: 33
Auditors:	Terrie Decker and Kristin Herrmann
Facility Tour:	The tour was conducted by Director Traci Agner. This audit focused on medical, mental health and education. We talked with education

	staff. Medical staff were not available. 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:	We interviewed both a male and female youth.
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. One youth during this audit had concerns about some staff. These statements were passed along to the Director.
Staff Interviews:	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. Staff commented that they receive training as required.
Non-compliant Standards:	8-8-2
Recommended Action:	This noncompliant standard is the requirement of the HCA and facility administrator meeting quarterly. While that is done, it is not documented, therefore, moving forward begin documentation. Facility staff were well prepared for our audit visit. The HCA was not available to meet with us.

Standards:	<u>Administration & Management and Programs & Services</u>
File Review Only	<ul style="list-style-type: none"> • <u>Eight-one Total Standards audited</u> • <u>61 Total Administration Standards, Recommended</u> • <u>20 Total Programming Standards, Recommended</u> • Number of Standards Not Applicable: 2 • Number of Recommended Standards in Compliance: 60
Auditors:	Kristin Herrmann
Non-compliant Standards:	8-3-7 and 8-3-75
Recommended Action:	<p>These noncompliant standards are easily remedied with documentation. The first one listed is about youth being advised of policy change and the second pertains to volunteers being advised to make suggestions.</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>

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CONCLUSION

Dearborn County Juvenile Center chose to be audited on the proposed standards, which corresponds with the current (301) detention standards and received a score of 100% compliance with the mandatory standards and 96% of the recommended standards.

The facility received a separate scoresheet indicating their level of compliance with the new proposed detention standards.

Therefore, Dearborn County Juvenile Center is in 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 Shafter (Whitcomb), Director of Reentry & External Relations
Honorable James D. Humphrey, Circuit Court
Traci Agner, Director
pursuant to 210 IAC 8-1-5(f)
File