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



# Delaware County Juvenile Detention Center 3412 W Kilgore Avenue Muncie, Indiana 47303

## **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

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

Facility: Delaware County Juvenile Detention Center

3412 W Kilgore Avenue Muncie, Indiana 47303

Inspection Date(s): April 4, 2019

July 18, 2019 Sept 12, 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

#### 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.

Delaware County Juvenile 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. Delaware County Juvenile 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:	Delaware
Governing authority:	Delaware County Juvenile Detention Center
Name of facility administrator:	James Williams
<b>Detention Director:</b>	James Williams
<b>Detention facility's mission:</b>	We help catch children who have fallenFallen
	on hard times, Fallen between the cracks, Fallen
	from grace.
	We pick them up, we stand for them. We teach
	them to stand on their own. Then we watch them
	give back.
Rated capacity:	42
Population on date of first audit:	21
Average daily population for the last	28
12 months:	
Average length of stay for the last 12	18
months:	
Minor upgrades since last audit (i.e.	None
painting, flooring, bedding,	
furnishings):	
Major upgrades since last audit (i.e.	None
plumbing, electrical, security	
system):	
<b>De-escalation techniques training:</b>	Therapeutic Crisis Intervention
Physical force techniques training:	Therapeutic Crisis Intervention
Chemical agents permitted:	No
Name of food service provider:	Youth Opportunity Center
Name of health care authority	Dr. Mark Reedy – 6 hours a week
individual or agency and	Jody Zachary, RN – 40 hours a week
license/certification:	
Name of mental health care	Dr. Craig Buckles MD – 15 hours a week - contract
authority individual or agency and	
license/certification:	

<b>Education Services:</b>	Juveniles are given the opportunity to participate in
	education services in 90 minute blocks. Juveniles are
	provided homework sent from their home school.
	The juveniles sit in a traditional style classroom and
	are aided by the teacher and teacher's aide.

Standards:	Safety and Security
On-site Visit conducted	<ul> <li>58 Total Standards Audited</li> <li>36 Total Safety Standards, 6 Mandatory and 30 Recommended</li> </ul>
March 20, 2019	22 Total Security Standards, 0 Mandatory and 22  Becommonded
	<ul><li>Recommended</li><li>Number of Standards Not Applicable:2</li></ul>
	Number of Mandatory Standards in Compliance: 6
	Number of Recommended Standards in Compliance:50
Auditors:	Terrie Decker and Kristin Herrmann
Facility Tour:	The tour was conducted by Director James Williams. 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
X 4 D	procedures, staff supervision, restraint use, and transportation.
Youth Responses:	Both youth reported feeling safe. The female youth complained about it sometimes being cold in her room and mentioned that there were ants in
	another youth's room. The young man suggested more time for phone
	calls, more food at breakfast and being allowed to have commissary.
	Both commented that they understood how to obtain medical treatment
	and both had been through a fire drill. This information was passed
	along to the Director. We went with him to check on the room with ants.
Staff Interviews:	Two (3) staff were interviewed: (1) Control room operator and (2) line
	staff.
	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.
Staff Responses:	Staff were knowledgeable about emergency procedures and were consistent in answering the other questions presented. They had no concerns that needed to be passed onto the Director.
Non-compliant Standards:	None
Recommended Action:	None. Facility staff were prepared for our audit visit.

Standards:	Justice & Order and Food Service & Hygiene
On-site Visit	Fifty-seven Total Standards audited
conducted	• 38 Total Justice and Order Standards, 0 Mandatory and 38
July 18, 2019	Recommended
July 10, 2019	19 Total Food Service & Hygiene Standards, 3 Mandatory and
	16 Recommended
	Number of Standards Not Applicable:2
	Number of Mandatory Standards in Compliance: 3
	Number of Recommended Standards in Compliance:53
Auditors:	Terrie Decker and Kristin Herrmann
Facility Tour:	The tour was conducted by Director James Williams. 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
Youth Interviews:	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. Concerns and suggestions from each youth were passed
	along to the Director.
Ctoff Intonsion	Facility Administrator (2) line stoff inteles visitation on 1 mail
Staff Interviews:	Facility Administrator, (2) line staff, intake, visitation and mail distribution personnel were interviewed during this audit.
	distribution personner were interviewed during this addit.

	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	None
Standards:	
Recommended	None. Facility staff were prepared for our audit visit.
Action:	

Standards:	Medical, Mental Health and Education
On-site Visit conducted September 12, 2019	<ul> <li>Forty-one Total Standards audited</li> <li>29 Total Medical Standards, 7 Mandatory and 22         Recommended</li> <li>6 Total Mental Health Standards, Recommended</li> <li>6 Total Education Standards, Recommended</li> <li>Number of Standards Not Applicable: 0</li> <li>Number of Mandatory Standards in Compliance: 7</li> <li>Number of Recommended Standards in Compliance: 33</li> </ul>
Auditors:	Terrie Decker and Kristin Hermann
Facility Tour:	The tour was conducted by Director James Williams. This audit focused on medical, mental health and education. Medical staff were not available, however, we were able to talk with the medically trained 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.
<b>Youth Interviews:</b>	We interviewed one male and one 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 asked us to pass along that he would like longer phone calls. This was passed along to the Director.
Staff Interviews:	Medically trained 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. Staff commented that they receive training as required
Non-compliant Standards:	8-11-8

Recommended	This noncompliant is in reference to the education evaluation.
Action:	Facility staff were ready for our audit visit.

Standards:	Administration & Management and Programs & Services
File Review Only	Eight-one Total Standards audited
	• 61 Total Administration Standards, Recommended
	• 20 Total Programming Standards, Recommended
	Number of Standards Not Applicable: 2
	Number of Recommended Standards in Compliance: 69
Auditors:	Terrie Decker
Non-compliant Standards:	8-3-22, 27, 62, 64, 66, 71, 75; 8-10-12, 13, 19
Recommended Action:	A couple of the noncompliant files are a result of not receiving a standard file for review. Part of the issue for this audit was the lateness of the delivery of files and running out of time for completion. The recommendation would be a more timely delivery and assistance in the audit preparation.  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.

#### **CONCLUSION**

Delaware County Juvenile Detention 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 94% of the recommended standards.

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

Therefore, Delaware County Juvenile Detention 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 Shafer (Whitcomb), Director of Reentry & External Relations Honorable Kim Dowling, Circuit Court James Williams, Director pursuant to 210 IAC 8-1-5(f) File