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



Elkhart County Juvenile Detention Center 114 North 2nd St. Goshen, In 46526

Auditors

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Facility: Elkhart County Juvenile Detention Center

114 North 2nd St. Goshen, In 46526

Inspection Date(s): March 20, 2019

May 31, 2019 August 21, 2019

Auditors: Terrie Decker

Director of Juvenile Detention Inspections

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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.

Elkhart 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. Elkhart 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:	Elkhart
Governing authority:	Elkhart Circuit Court
Name of facility administrator:	Susan Mora
Detention Director:	Susan Mora
Detention facility's mission:	Ensure public safety by providing a safe, secure environment for lawfully detained juveniles. Provide for the juveniles' basic needs, including: shelter, food, clothing, personal hygiene and medical care while in detention. Protect juveniles' rights while detained in the Juvenile Detention Center. Provide continual improvement in programming and services in: education, visitation, counseling, supervision, medical, food, recreation, library materials, addictions and religious services.
Rated capacity:	17
Population on date of first audit:	14
Average daily population for the last 12 months:	11
Average length of stay for the last 12 months:	25.8 days
Minor upgrades since last audit (i.e. painting, flooring, bedding, furnishings):	Painting and general building maintenance. New clothing, bedding for residents as needed.
Major upgrades since last audit (i.e. plumbing, electrical, security system):	N/A
De-escalation techniques training:	Positive Peer Culture
Physical force techniques training:	Handle with Care
Chemical agents permitted:	No
Name of food service provider:	Elkhart County Jail

Name of health care authority	Dr. J. Foster, DO, Correct Care Solutions
individual or agency and	
license/certification:	
Name of mental health care	Oaklawn
authority individual or agency and	
license/certification:	
Education Services:	Provides a constructive, proactive education system
	to meet the diverse needs of each resident. Students
	are able to earn high school credits. A variety of
	programs are offered: TASC preparation health and
	hygiene, therapeutic group learning options, career
	exploration and yoga.

Standards:	Safety and Security
On-site Visit conducted March 20, 2019	 58 Total Standards Audited 36 Total Safety Standards, 6 Mandatory and 30 Recommended 22 Total Security Standards, 0 Mandatory and 22 Recommended
	 Number of Standards Not Applicable: 1 Number of Mandatory Standards in Compliance: 6 Number of Recommended Standards in Compliance: 51
Auditors:	Terrie Decker, Kristin Herrmann and Laurie Elliott
Facility Tour:	The tour was conducted by Susan Mora, Director and Ricky Kaestner, Assistant Director. 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 female and 1 male 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, one described an incident in which she was threatened and she felt as though it was handled appropriately. There were no concerns about bugs and vermin. One youth did speak of the unit being hot. Both commented that they understood how to obtain medical treatment and both had been through a fire drill. On a comment on how to improve things at the facility one youth stated that

	the food needed improvement.
Staff Interviews:	Facility Administrator and two (2) staff were interviewed: (1) Control room operator and (1) line staff.
	Facility Administrator interview consisted of questions regarding safety, overcrowding, flammable chemicals, documentation, outside transports, restraint use and emergency plans.
	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:	Both staff were knowledgeable about emergency procedures and were consistent in answering the other questions presented. Staff did corroborate the youth's statement about it can sometimes get warm in the unit, but said the temp is adjusted when that occurs.
Non-compliant Standards:	There are no non-compliant standards
Recommended Action:	None. The facility Administrators were prepared for the audit. Paperwork was turned in timely prior to the audit visit.

Standards:	Justice & Order and Food Service & Hygiene
On-site Visit conducted	Fifty-seven Total Standards audited Total Justice and Order Standards 0 Mandatory and 38
	• 38 Total Justice and Order Standards, 0 Mandatory and 38 Recommended
May 31, 2019	• 19 Total Food Service & Hygiene Standards, 3 Mandatory and
	16 Recommended
	Number of Standards Not Applicable: 0
	Number of Mandatory Standards in Compliance: 3
	Number of Recommended Standards in Compliance: 54
Auditors:	Terrie Decker
Facility Tour:	The tour was conducted by Director Susan Mora and Assistant Director
	Ricky Kaestner. 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.
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 ask each youth, in every facility, if they have any
	suggestions they would like to pass along to the Director. Both youth
	asked for more time to complete showers. This information was shared
	with the Director and Assistant 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. Due to the food being provided by the
	Sheriff's Department we did not talk with the food services manager.
Staff Responses:	All staff/personnel were knowledgeable about the areas which we
	covered. Both staff at this facility had been employed for a long period
	of time, therefore they were comfortable with the questions asked.
Non-compliant	None
Standards:	
Recommended	None. The Administrators were prepared for the audit visit. Paperwork
Action:	was received timely prior to the visit.

Standards:	Medical, Mental Health and Education
On-site Visit conducted August 21, 2019	 Forty-one Total Standards audited 29 Total Medical Standards, 7 Mandatory and 22 Recommended
	• <u>6 Total Mental Health Standards, Recommended</u>
	• 6 Total Education Standards, Recommended
	Number of Standards Not Applicable: 0
	Number of Mandatory Standards in Compliance: 7
	Number of Recommended Standards in Compliance: 34
Auditors:	Terrie Decker and Kristin Herrmann
Facility Tour:	The tour was conducted by Director Susan Mora and Assistant Director
	Ricky Kaestner. This audit focused on medical, mental health and
	education. We talked with HCA staff and nursing staff. Education staff
	was not available. We were able to see how the medical room is set up,
	and to see the youth in the education setting (education being led by
	staff on this day) We also looked at other areas as the facility as we

	were touring.
Youth Interviews:	We talked with a male and female youth this audit.
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 only issue noted by one youth
	was the food. This information was passed along to the Director.
Staff Interviews:	Medical 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	None
Standards:	
Recommended	None. Administrators and Medical staff were prepared for the audit
Action:	visit. Required paperwork was received timely, prior to the audit.

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: 60
Auditors:	Terrie Decker
Non-compliant	8-3-7, 9, 14, 21, 24, 29, 36, 37, 40, 41, 47, 49, 51, 53, 54, 55, 56, 57, 60
Standards:	
Recommended	There are no recommendations. Elkhart County made a decision not to
Action:	submit the above listed files due to their recent move into a new facility.
	In addition to the standards for this audit, they were also required to
	work on standards that were required for a move into a new facility. Due to the success with the previous audits they continued to be
	compliant.
	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

Elkhart 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 90% of the recommended standards.

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

Therefore, Elkhart 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 Michael Christofeno, Circuit Court Susan Mora, Director pursuant to 210 IAC 8-1-5(f) File