

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



Grant County Juvenile Detention Center  
501 S. Adams Street  
Marion, Indiana 46953

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## Auditors

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Division of Youth Services  
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2019 Juvenile Detention Inspection - Compliance Report**

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Inspection Date(s): April 24, 2019  
July 17, 2019  
October 2, 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) of 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 it’s effort, if applicable, will be recognized in the next paragraph.

Grant 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. Grant 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

<b>Facility county:</b>	Grant
<b>Governing authority:</b>	Grant County Sheriff’s Department
<b>Name of facility administrator:</b>	Brenda Chambers
<b>Detention Director:</b>	Brenda Chambers
<b>Detention facility’s mission:</b>	To provide short term in secure custody to juveniles who are accused or adjudicated pending court action or pending transfer.
<b>Rated capacity:</b>	46
<b>Population on date of first audit:</b>	4
<b>Average daily population for the last 12 months:</b>	10
<b>Average length of stay for the last 12 months:</b>	30
<b>Minor upgrades since last audit (i.e. painting, flooring, bedding, furnishings):</b>	New Cameras
<b>Major upgrades since last audit (i.e. plumbing, electrical, security system):</b>	None
<b>De-escalation techniques training:</b>	Not provided
<b>Physical force techniques training:</b>	Not provided
<b>Chemical agents permitted:</b>	No
<b>Name of food service provider:</b>	Grant County Juvenile Detention Center
<b>Name of food service supervisor:</b>	Shelia Wofford
<b>Name of health care authority individual or agency and</b>	Quality Correctional Care (QCC)

<b>license/certification:</b>	
<b>Name of mental health care authority individual or agency and license/certification:</b>	Family Service Society and Cornerstone Behavioral Health Center (PRN)
<b>Education Services:</b>	Provided by Marion Community Schools

**INSPECTION FOR COMPLIANCE WITH 201 DETENTION STANDARDS**

<b>Standards:</b>	<b><u>Safety and Security</u></b>
<b>On-site Visit conducted</b>  March 20, 2019	<ul style="list-style-type: none"> <li>• <b><u>58 Total Standards Audited</u></b></li> <li>• <b><u>36 Total Safety Standards, 6 Mandatory and 30 Recommended</u></b></li> <li>• <b><u>22 Total Security Standards, 0 Mandatory and 22 Recommended</u></b></li> <li>• Number of Standards Not Applicable: 3</li> <li>• Number of Mandatory Standards in Compliance: 6</li> <li>• Number of Recommended Standards in Compliance: 49</li> </ul>
<b>Auditors:</b>	Terrie Decker and Kristin Herrmann
<b>Facility Tour:</b>	The tour was completed by staff with Kristin Herrmann. 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.
<b>Youth Interviews:</b>	<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>
<b>Youth Responses:</b>	Both youth responded with no concerns for safety or other issues. They both understood about the medical care and emergency plan. Both mentioned they would like more rec or more rec opportunities, such as a weight room. One reported not always getting rec. These comments were passed along to the Director.

<b>Staff Interviews:</b>	<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>
<b>Staff Responses:</b>	One staff interviewed was fairly new to the facility. He did not seem comfortable with questions about the count procedure but otherwise he had no concerns. The other staff and Administrator's answers were appropriate for the questions asked.
<b>Non-compliant Standards:</b>	8-6-19
<b>Recommended Action:</b>	N/A

<b>Standards:</b>	<b>Justice &amp; Order and Food Service &amp; Hygiene</b>
<b>On-site Visit conducted</b>  <b>July 17, 2019</b>	<ul style="list-style-type: none"> <li>• <b><u>Fifty-seven Total Standards audited</u></b></li> <li>• <b><u>38 Total Justice and Order Standards, 0 Mandatory and 38 Recommended</u></b></li> <li>• <b><u>19 Total Food Service &amp; Hygiene Standards, 3 Mandatory and 16 Recommended</u></b></li> <li>• Number of Standards Not Applicable: 0</li> <li>• Number of Mandatory Standards in Compliance: 3</li> </ul> <p>Number of Recommended Standards in Compliance: 49</p>
<b>Auditors:</b>	Terrie Decker and Kristin Herrmann
<b>Facility Tour:</b>	The tour was conducted by Lt. Brenda Chambers. 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.
<b>Youth Interviews:</b>	<p>Two (2) youth were interviewed, 1 female and 1 male.</p> <p>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</p>

	give them an opportunity to make suggestions about procedure and process.
<b>Youth Responses:</b>	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. Both you commented that there was not anything more they would recommend for the facility to change. Overall they thought that the facility was “as it should be
<b>Staff Interviews:</b>	Facility Administrator, food services manager, (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. In the food service area we looked at the storage and delivery of food.
<b>Staff Responses:</b>	All staff/personnel were knowledgeable about the areas which we covered.
<b>Non-compliant Standards:</b>	8-6-3; 8-6-13; 8-6-21; 8-6-30
<b>Recommended Action:</b>	The listed non-compliant standards exist due to lack of documentation for proof of practice.

<b>Standards:</b>	<b><u>Medical, Mental Health and Education</u></b>
<b>On-site Visit conducted</b> <b>October 2, 2019</b>	<ul style="list-style-type: none"> <li>• <b><u>Forty-one Total Standards audited</u></b></li> <li>• <b><u>29 Total Medical Standards, 7 Mandatory and 22 Recommended</u></b></li> <li>• <b><u>6 Total Mental Health Standards, Recommended</u></b></li> <li>• <b><u>6 Total Education Standards, Recommended</u></b></li> <li>• Number of Standards Not Applicable: 1</li> <li>• Number of Mandatory Standards in Compliance: 7</li> <li>• Number of Recommended Standards in Compliance: 33</li> </ul>
<b>Auditors:</b>	Terrie Decker and Kristin Herrmann
<b>Facility Tour:</b>	The tour was conducted by Lt. Chambers and medical staff. 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.
<b>Youth Interviews:</b>	A male and female youth were interviewed during this audit.
<b>Youth Responses:</b>	Both youth were willing to answer the questions asked during this audit.

	We always ask for any suggestions or concerns. One youth had a medical question/concern and a comment about staff, while the other had no comments. The statements made were passed along to medical and to the Lt.
<b>Staff Interviews:</b>	Medical staff, education staff, intake and direct care staff were interviewed during this audit. The Director was also interviewed.
<b>Staff Responses:</b>	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
<b>Non-compliant Standards:</b>	None
<b>Recommended Action:</b>	N/A

<b>Standards:</b>	<b><u>Administration &amp; Management and Programs &amp; Services</u></b>
<b>File Review Only</b>	<ul style="list-style-type: none"> <li>• <b><u>Eight-one Total Standards audited</u></b></li> <li>• <b><u>61 Total Administration Standards, Recommended</u></b></li> <li>• <b><u>20 Total Programming Standards, Recommended</u></b></li> <li>• Number of Standards Not Applicable: 1</li> <li>• Number of Recommended Standards in Compliance: 74</li> </ul>
<b>Auditors:</b>	Terrie Decker and Kristin Herrmann
<b>Non-compliant Standards:</b>	8-3-14, 8-3-32, 8-3-40, 8-3-62, 8-3-63, 8-10-13
<b>Recommended Action:</b>	<p>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.</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>

## CONCLUSION

Grant 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, Grant 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: Angela Sutton, DYS, Executive Director of Youth Services  
Honorable Dana Kenworthy, Superior Court II/Brian McLane, Magistrate  
Brenda Chambers, Director  
pursuant to 210 IAC 8-1-5(f)  
File