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



Hamilton County Juvenile Detention Center 18106 Cumberland Road Indianapolis, IN 46218

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 ReportFacility:Hamilton County Juvenile Detention Center
18106 Cumberland Rd.
Noblesville, In 46060Inspection Date(s):April 2, 2019
June 11, 2019
September 23, 2019Auditors:Terrie Decker
Director of Juvenile Detention Inspections
Division of Youth Services, Indiana Department of Correction

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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 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.

Hamilton County Juvenile Detention Center chose to be audited on the two hundred and thirtyseven (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." <u>Again, Centers that chose to be audited on the proposed detention standards were only required to meet the expectation of the current detention standards.</u> Hamilton County Juvenile Detention Center chose to also provide documentation on the extra standards with exclusively new requirements. <u>The breakdown of each audit listed below is only reflective of the current standards.</u>

FACILITY INFORMATION

Facility county:	Hamilton
Governing authority:	Superior Court 1
Name of facility administrator:	Kija Ireland, Captain Juvenile Division Commander
Detention Director:	Angela Houston, Lieutenant
Detention facility's mission:	To provide our youth with a safe, secure and
	healthy environment through positive
	reinforcement; and provide the youth with an
	opportunity for behavioral change through
	various programs.
Rated capacity:	24
Population on date of first audit:	11
Average daily population for the last	12
12 months:	
Average length of stay for the last 12	19
months:	
Minor upgrades since last audit (i.e.	None
painting, flooring, bedding,	
furnishings):	
Major upgrades since last audit (i.e.	Additional cameras were installed in cell (rooms)
plumbing, electrical, security	numbers 104, 112 and 113 (115 is pending
system):	installation)
De-escalation techniques training:	Tools for de-escalation
Physical force techniques training:	Close Quarter Combat Protective Training
Chemical agents permitted:	Yes
Name of food service provider:	Hamilton Co Jail
Name of food service supervisor:	Cindy Girtman
Name of health care authority	Advanced Correctional Healthcare
individual or agency and	
license/certification:	
Name of mental health care	Advanced Correctional Healthcare
authority individual or agency and	
license/certification:	
Education Services:	Creating a classroom environment that fosters,
	promotes and develops an understanding of the
	relationship of healthy body function and exercise;

that motivates each student to cultivate physical fitness, and appropriate social and emotional adjustment; that discovers and develop talents of students in physical achievement; and that develops strength, skill, agility and coordination in individual, dual and team physical activities and sports in
dual and team physical activities and sports, in accordance with each student's ability.
accordance with each student's ability.

Standards:	Safety and Security
On-site Visit	<u>58 Total Standards Audited</u>
conducted	• <u>36 Total Safety Standards, 6 Mandatory and 30 Recommended</u>
March 20, 2019	• 22 Total Security Standards, 0 Mandatory and 22
Water 20, 2017	Recommended
	Number of Standards Not Applicable: 0
	Number of Mandatory Standards in Compliance: 6
	• Number of Recommended Standards in Compliance: 52
Auditors:	Terrie Decker and Kristin Herrmann
Facility Tour:	The tour was conducted by Lt. Angela Houston and Ashley Horning.
	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. Both commented that they understood
	how to obtain medical treatment and both had been through a fire drill.
	The female youth suggested that the boys and girls be allowed to talk
	with each other, in her case she was only one of two females and she wanted someone else to talk to.
Staff Interviews:	Facility administrator and three (3) staff were interviewed: (1) Control
	room operator and (2) 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:	The control room staff didn't seem to be quite sure about emergency procedure and count, however, they do operate both the adult and juvenile portion of the facility. Both staff were knowledgeable about emergency procedures and were consistent in answering the other questions present.
Non-compliant Standards:	None
Recommended Action:	None. Facility staff were prepared for our audit visit. Standard submission was complete prior to our visit.

Standards:	Justice & Order and Food Service & Hygiene	
On-site Visit	<u>Fifty-Seven Total Standards audited</u>	
conducted	• <u>38 Total Justice and Order Standards, 0 Mandatory and 38</u>	
June 11, 2019	Recommended	
	• <u>19 Total Food Service & Hygiene Standards, 3 Mandatory and</u>	
	<u>16 Recommended</u>	
	Number of Standards Not Applicable: 1	
	• Number of Mandatory Standards in Compliance: 3	
	Number of Recommended Standards in Compliance: 54	
Auditors:	Terrie Decker and Kristin Herrmann	
Facility Tour:	The tour was conducted by Capt. Kija Ireland, Lt Angela Houston and	
	Ashley Horning. 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:	Only (1) youth was interviewed during this audit as the facility had only	
	had one youth in care until the previous night.	
	Youth interview 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.
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Youth Responses:	The youth was respectful and willing to answer the questions asked.
	Overall the youth felt like the rules and procedures were fair and well
	understood. He made a suggestion that visits last longer, that was
	passed along to Capt. Ireland and Lt. Houston.
Staff Interviews:	Facility Administrator, (2) line staff, the food services manager, intake,
Stan men views.	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. Food service manager was asked about
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	food purchase, storage and delivery.
Staff Responses:	All staff/personnel were knowledgeable about the areas which we
	covered.
Non-compliant	None
Standards:	
Recommended	None.
Action:	
	Facility staff were prepared for our audit visit. Standard submission
	was complete prior to our visit.

Standards:	Medical, Mental Health and Education
On-site Visit conducted September 23, 2019	 Forty-one Total Standards audited 29 Total Medical Standards, 7 Mandatory and 22 <u>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: 34
Auditors:	Terrie Decker and Kristin Herrmann
Facility Tour:	The tour was conducted by Capt. Kija Ireland. This audit focused on medical, mental health and education. We talked with HCA 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:	Two male youth were interviewed (there were no female youth in detention on this date.)

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 made
	suggestions for better commissary and warmer water. These statements
	were passed along to Capt. Ireland.
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Staff Interviews:	Medical staff, mental health 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 and mental health 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.
Action:	Facility staff along with madical and mantal health staff wars proposed
	Facility staff, along with medical and mental health staff, were prepared
	for our visit. Standard submission was complete prior to our audit visit.

Standards:	Administration & Management and Programs & Services
File Review Only	<u>Eight-one Total Standards audited</u>
	<u>61 Total Administration Standards, Recommended</u>
	20 Total Programming Standards, Recommended
	• Number of Standards Not Applicable: 0
	• Number of Recommended Standards in Compliance: 79
Auditors:	Kristin Herrmann
Non-compliant Standards:	8-3-14 and 8-3-40
Recommended Action:	None. Both noncompliant standards for this audit are based on the facility decision to not adhere. The first pertains to needing a report presented, while the second is due to physical exams not being a requirement.
	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

Hamilton 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 99% of the recommended standards.

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

Therefore, Hamilton 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 Paul Felix, Circuit Court Kija Ireland, Captain Juvenile Division Commander pursuant to 210 IAC 8-1-5(f) File