Indiana Department of Correction, Division of Youth Services

2017 Juvenile Detention Inspection - Compliance Report



Dickinson Juvenile Justice Center

Johnson County Juvenile Detention Center

1121 Hospital Road

Franklin, Indiana 46131

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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**

**2017 Juvenile Detention Inspection - Compliance Report**

Facility: Dickinson Juvenile Justice Center

 Johnson County Juvenile Detention Center

1121 Hospital Road

Franklin, Indiana 46131

Inspection Date(s): May 17, 2017

 August 9, 2017

 November 9, 2017

Auditors: Kellie Whitcomb

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**INTRODUCTION**

The 2017 annual juvenile detention facility evaluations conducted by the IDOC, Division of Youth Services consisted of on-site facility inspections; staff and youth interviews; and an audit of seventy-four (74) specifically selected, current Juvenile Detention Facility Standards.  The new Indiana Juvenile Detention Facility Standards are in the process of being adopted.  Detention Facilities had the option to be audited utilizing the selected seventy-four (74) current detention standards or utilizing the corresponding fifty-one (51) new juvenile detention facility standards.

Johnson County Juvenile Center chose to be audited on the fifty-one (51) new juvenile detention facility standards in 2017, for their 21st annual detention inspection.  Of the fifty-one (51) standards audited, seventeen (17) standards are mandatory compliance and the remaining thirty-four (34) are recommended standards.  Compliance with 100% of the mandatory standards and 90% of the recommended standards is required to attain “Full Compliance”.

**STANDARDS REVIEWED**

The 2017 IDOC audit consisted of the review of fifty-one of the current standards within the following nine categories.

Safety 6 Mandatory & 3 Recommended

Topics: fire safety codes; preventing fire and toxic smoke; facility capacity; facility lighting; heating and cooling systems; flammable, toxic, and caustic materials; alternative power source; fire and emergency evacuations; safety, sanitation and health codes

Security 0 Mandatory & 6 Recommended

Topics: detention staff log; security inspections; daily count; transportation procedures; mechanical restraints; facility vehicles

Justice and Order 0 Mandatory & 6 Recommended

Topics: facility handbook; confidential contact; discrimination; grievance process; correspondence for juveniles; juvenile visits

Medical 7 Mandatory & 3 Recommended

Topics: health care authority; services provided pursuant to written orders; emergency services, daily health care requests; intake health screening; informed consent; health-related situation response time; first aid kits; management of pharmaceuticals; medical experiments prohibited

Mental Health 1 Mandatory & 0 Recommended

Topic: written suicide prevention program

Administration and Management 0 Mandatory & 6 Recommended

Topics: employee background check; development and training program; orientation training; new employee training; direct care staff; part-time staff, volunteers, and contract personnel

Food Service and Hygiene 3 Mandatory & 3 Recommended

Topics: dietitian review of menu; therapeutic diets; sanitation inspection; employee sanitation; issuance of bedding and linens; clothing issuance

Programming and Services 0 Mandatory & 4 Recommended

Topics: recreation schedule; indoor and outdoor recreation; minimum recreation and leisure schedule

Education 0 Mandatory & 3 Recommended

Topics: comprehensive education program; remedial reading services; compliance with child labor laws

**METHODOLOGY**

First Site Visit (**May 17, 2017**)

Standard Categories Reviewed: Safety and Security

Description of visit: The first on-site visit consisted of a review of additional documentation and observations of the facility to verify the facility’s practice is ongoing and not limited to the information presented in the standard files. An evacuation drill was performed. The following interviews were conducted: facility administrator, control room officer, line staff, and juveniles.

Second Site Visit (**August 9, 2017**)

Standard Categories Reviewed: Justice and Order, Medical, and Mental Health

Description of the visit: The second on-site visit consisted of a review of additional documentation and observations of the facility to verify the facility’s practice is ongoing and not limited to the information presented in the standard files. The following interviews were conducted: facility administrator, line staff, mail room staff, intake officer, health care authority or representative, and juveniles.

Third Site Visit (**November 9, 2017**)

Standard Categories Reviewed: Administration and Management, Food Services and Hygiene, Programs and Services, and Education

Description of the visit: The third on-site visit consisted of a review of additional documentation and observations of the facility to verify the facility’s practice is ongoing and not limited to the information presented in the standard files. The following interviews were conducted: intake officer, education director or representative, recreation leader, food service manager, line staff, and juveniles.

**FACILITY INFORMATION**

|  |  |
| --- | --- |
| **Facility county** | Johnson |
| **Governing authority** | Johnson Circuit Court |
| **Name of facility administrator** | Kristi Bruther, Director |
| **Rated capacity** | 48 |
| **Average daily population for the last 12 months** | 15.18 |
| **Average length of stay for the last 12 months** | 13.01 |
| **Notable building changes since the 2016 audit**  | N/A |
| **Notable administrative or staffing changes since the 2016 audit** | N/A |
| **Other notable changes since the 2016 audit** | N/A |

**INSPECTION RESULTS**

|  |  |  |
| --- | --- | --- |
|  | **Mandatory** | **Recommended** |
| **Total Number of Standards** | 17 | 34 |
| **Number of Standards Not Applicable** | **0** | **0** |
| **Number of Standards in Non-Compliance** | **0** | **0** |
| **Number of Standards in Compliance** | **17** | **34** |
| **Total Percentage of Compliance** | **100%** | **100%** |

Was the facility required to implement a corrective action plan required as a result of the audit? **No**

Recommendations: **See attachment**

**CONCLUSION**

Johnson County Juvenile Detention Center is in full compliance with the 2017 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) 914-7347 should you have any questions concerning this report.

Respectfully submitted,

**A Sutton**

Angela D. Sutton, MA

Director of Juvenile Detention Inspections

cc: Christine Blessinger, DYS, Executive Director of Youth Services

Kellie Whitcomb, Director of Reentry & External Relations

 Honorable K. Mark Loyd

Kristi Bruther, Facility Director, Johnson County Juvenile Detention Center

File

**RECOMMENDATIONS**

**Safety:**

**8-4-16 -** Amend procedure to address standard requirements; remove email

**8-4-17 -** Amend procedure to address standard requirements; remove email and

 boiler certification pictures

**Justice & Order:**

**8-6-6 -** Provide proof of practice of the use of the reading assistance and

 communication materials (e.g. amend signature form to indicate use of either

 material or director statement if none used)

**8-6-22 -** Amend procedure to indicate how confidential contact is made via phone,

 mail, and visit

**8-6-23 -** A proof of practice consistent with procedure is showing all juveniles have

 access to programming (e.g. log book entries showing that everyone is

 participating in programming**)**

**8-6-27 -** Amend procedure and handbook to outline the steps of the appeal process;

 Amend grievance form to indicate whether the grievance was appealed and

 the outcome of that appeal

**8-6-28 -** Amend procedure to indicate who reviews the policy annually

**8-6-36 -** Amend procedure to indicate how confidential contact is provided that's

 consistent with 8-6-22 and amend to discuss, if and when, visits are

 terminated or denied for safety and security concern**s**

**8-8-12 -** Provide proof of practice of emergency services for dental and mental

 health needs or director statement that there were none this audit period.

**8-8-17 -** Amend procedure to indicate how youth can initiate a health care request;

 Provide proof of practice of youth initiating request

**8-8-18 -** The Policy and Procedure acknowledgement is not sufficient because it

 doesn't acknowledge the training curriculum**.**

**8-8-28 -** Provide proof of practice of incident report with 4 minute response or a

 drill and first aid and CPR certification; The Policy and Procedure

 acknowledgement is not sufficient because it doesn't acknowledge the

 training curriculum; Amend the training power point to specifically require

 a 4 minute response

**8-8-31 –** Provide proof of practice of (a)(1), (a)(2)(A) and (a)(2)(E) requirements and

 (a)(6) inventory

**Mental Health:**

**8-9-5 -** Have the Mental Health Care Authority degree be readable on the signature

 form

**Administration:**

**8-3-51 -** Amend policy to include "qualified designee"

**Food Service & Hygiene:**

**8-7-3 -** The Policy Acknowledgement form does not need to be included in standards

where it's not asked for.

**Programs & Services:**

**8-10-1 -** Amend procedure to include hair care in part (4)

**8-10-12 -** In the future, include proof of youth participating in activities inside and

 outside, such as a log book entry