

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



LaPorte County Juvenile Services Center
0364 S. Zigler Road
LaPorte, IN 46350

Auditors

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Indiana Department of Correction
Division of Youth Services
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Inspection Date(s): April 17, 2019
June 26, 2019
September 25, 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) 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.

LaPorte County Juvenile Services 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. LaPorte County Juvenile Services 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:	LaPorte
Governing authority:	LaPorte Circuit Court
Name of facility administrator:	Erika Stallworth
Detention Director:	Dennis Orr
Detention facility’s mission:	To provide services and programs to the juvenile courts of LaPorte County. The primary goal is to effectively service the troubled youth of the county by intervening in the least restrictive manner. LaPorte County recognizes that juveniles, being different from adults, shall be served in a manner different than and separately from adults. The facility is structured to provide services to juveniles as opposed to being punitive and protects juveniles from abuses that might occur in adult institutions. All programs will meet applicable Constitutional, Federal and State laws, local ordinances and standards and regulations set forth by the Office of Juvenile Justice and Delinquency Prevention, Indiana Department of Child Services, Indiana Department of Correction and the American Correctional Association. This policy will be reviewed at least annually by the Director, the Judge of La Porte Circuit Court and or his/her designee and the Advisory Board and revised as needed.
Rated capacity:	12
Population on date of first audit:	6
Average daily population for the last 12 months:	3.9
Average length of stay for the last 12 months:	19.8

Minor upgrades since last audit (i.e. painting, flooring, bedding, furnishings):	Tiling replaced in the staff lounge and the Secure intake area.
Major upgrades since last audit (i.e. plumbing, electrical, security system):	Had the Simplex fire panel replaced. Parking lot was repaved and striped. New water mix temperature valve was installed to better track the shower temperatures and allow for remote adjustments.
De-escalation techniques training:	Handle with Care
Physical force techniques training:	Handle with Care
Chemical agents permitted:	No
Name of food service provider:	LaPorte County Juvenile Services
Name of food service supervisor:	Kathleen Wilfong
Name of health care authority individual or agency and license/certification:	Dr. Michael Brown, MD – private contract
Name of mental health care authority individual or agency and license/certification:	Lynn Roe, LSW Caroline Maslankowski, LSW
Education Services:	Education services are provided by La Porte County Juvenile Services. Youth attend school year round and are eligible to earn credits towards their high school diploma if they are currently enrolled in school when they arrive at the detention center.

Standards:	<u>Safety and Security</u>
On-site Visit conducted March 20, 2019	<ul style="list-style-type: none"> • <u>58 Total Standards Audited</u> • <u>36 Total Safety Standards, 6 Mandatory and 30 Recommended</u> • <u>22 Total Security Standards, 0 Mandatory and 22 Recommended</u> • Number of Standards Not Applicable: 2 • Number of Mandatory Standards in Compliance: 6 • Number of Recommended Standards in Compliance: 50
Auditors:	Terrie Decker, Kristin Herrmann and Laurie Elliott
Facility Tour:	The tour was conducted by Detention Director Dennis Orr. 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:	The youth reported feeling safe and understand the procedures of the facility. Both did report that the rooms can get cold, and the closer to the outer wall of the facility the colder they get. One youth even reporting that the water in the toilet freezes. The only suggestion made was to ask that the youth be allowed to pick one a meal a month that they want to have. Concerns and suggestion were passed along to the Detention Director.
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:	The Administrator had appropriate responses to the questions. Staff were comfortable and answered appropriately to the questions asked. There were no concerns mentioned by staff.
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 conducted June 26, 2019	<ul style="list-style-type: none"> • <u>Fifty Seven Total Standards audited</u> • <u>38 Total Justice and Order Standards, 0 Mandatory and 38 Recommended</u> • <u>19 Total Food Service & Hygiene Standards, 3 Mandatory and 16 Recommended</u> • Number of Standards Not Applicable: 0 • Number of Mandatory Standards in Compliance: 3

	<ul style="list-style-type: none"> • Number of Recommended Standards in Compliance: 53
Auditors:	Terrie Decker and Kristin Herrmann
Facility Tour:	The tour was conducted by Assistant Director Dennis Orr. 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:	<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 give them an opportunity to make suggestions about procedure and process.</p>
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. The only concern voiced by the youth were staff inconsistencies. These concerns and any suggestions were passed along to the Director.
Staff Interviews:	<p>Facility Administrator, (2) line staff, intake, visitation and mail distribution personnel were interviewed during this audit.</p> <p>Questions addressed property given during the intake process and the procedure for mail distribution. We inquired about visitation procedure, confinement and due process. The food services manager was unavailable during this audit.</p>
Staff Responses:	All staff/personnel were knowledgeable about the areas which we covered.
Non-compliant Standards:	8-6-29
Recommended Action:	<p>None. This noncompliant standard is referencing documentation to satisfy this standard.</p> <p>Facility staff were prepared for our audit visit.</p>

Standards:	<u>Medical, Mental Health and Education</u>
On-site Visit conducted September 25, 2019	<ul style="list-style-type: none"> • <u>Forty-one Total Standards audited</u> • <u>29 Total Medical Standards, 7 Mandatory and 22 Recommended</u> • <u>6 Total Mental Health Standards, Recommended</u>

	<ul style="list-style-type: none"> • <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: 33
Auditors:	Terrie Decker and Kristin Herrmann
Facility Tour:	The tour was conducted by Assistant Director Dennis Orr. This audit focused on medical, mental health and education. 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 as the facility did not have any female youth during 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 concern noted by the youth was that staff needed to be polite and kind. These statements were passed along to the Assistant Director.
Staff Interviews:	Education staff, intake and direct care staff were interviewed during this audit. The Assistant Director was also interviewed. Medical staff was not available during this audit.
Staff Responses:	Staff were knowledgeable about the procedures in each audit section. We were able to discuss any medical concerns with the Assistant Director as the medical staff was not available on this date. Direct care staff commented that they receive training as required
Non-compliant Standards:	8-8-2
Recommended Action:	Standard 8-8-2 refers to facility administrators attending a meeting with the medical provider, the recommendation for this standard would be to attend these meetings. Facility staff were prepared for our audit visit. Medical staff were not available during this visit.

Standards:	<u>Administration & Management and Programs & Services</u>
File Review Only	<ul style="list-style-type: none"> • <u>Eight-one Total Standards audited</u> • <u>61 Total Administration Standards, Recommended</u> • <u>20 Total Programming Standards, Recommended</u> • Number of Standards Not Applicable: 2 • Number of Recommended Standards in Compliance: 79
Auditors:	Kristin Herrmann

Non-compliant Standards:	None
Recommended Action:	No recommendations on the desk audit. 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

LaPorte Juvenile Services 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, LaPorte Juvenile Services 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 Thomas Alevizos, Circuit Court
Erika Stallworth, Director
Dennis Orr, Assistant Director
pursuant to 210 IAC 8-1-5(f)
File