# Indiana Department of Correction, Division of Youth Services 2018 Juvenile Detention Inspection - Compliance Report



Lake County Juvenile Center 3000 W. 93<sup>rd</sup> Avenue Crown Pointe, Indiana, 46037

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#### Auditors

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> Indiana Department of Correction Division of Youth Services 302 W. Washington St. Rm. E334, Indianapolis, IN 46204

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Facility: Lake County Juvenile Center

3000 W.93<sup>rd</sup> Avenue Crown Point, In 46307

Inspection Date: April 10, 2018

July 17, 2018

September 18, 2018

Auditors: Angela Sutton

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#### INTRODUCTION

The 2018 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 the state detention 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 all of the current detention standards or the corresponding two hundred and one (201) specifically selected proposed new juvenile detention facility standards.

Lake County Juvenile Center chose to be audited on the two hundred and one (201) new juvenile detention facility standards in 2018, for their 22nd annual detention inspection. Of the two hundred and one (201) standards audited, one hundred and eighty-five are recommended standards and sixteen (16) are mandatory standards. Compliance with 100% of the mandatory standards and 90% of the recommended standards is required to attain "Full Compliance". Centers that chose to be audited on the proposed detention standards were only required to meet the expectation of the current detention standards.

# **FACILITY INFORMATION**

Facility county:	Lake
Governing authority:	Lake County Juvenile Center
Name of facility administrator:	John Dempsey
<b>Detention Director:</b>	John Dempsey
<b>Detention facility's mission:</b>	Provide safe, secure temporary custody to juveniles
	adjudicated to the jurisdiction of the juvenile court
	who require physical restricted environment for their
	own safety or community.
Rated capacity:	64
Population on date of first audit:	41
Average daily population for the last	30.44
12 months:	
Average length of stay for the last 12	19.5 days
months:	
Year the building was built:	1977/ Renovated in 2002
Minor upgrades since last audit (i.e.	Pods painted
painting, flooring, bedding,	
furnishings):	
Major upgrades since last audit (i.e.	Security system upgraded
plumbing, electrical, security	
system):	LCJC De-escalation
De-escalation techniques training:	Aikido
Physical force techniques training:	No
Chemical agents permitted:	1.7
Name of food service provider: Name of food service supervisor:	LCJC employees Arenthia Green
Name of health care authority	Dr. T Mullaly, MD- contract
individual or agency and	Diana Borom, RN- 40 hours (LCJC)
license/certification:	Patricia Misalek, RN- 40 hours (LCJC)
Name of mental health care	Katelyn Kapelinski- 40 hours
authority individual or agency and	Jill Miller, 2 days a week
license/certification:	an inition, 2 days a wook
Education Services:	The school is staffed by 4 licensed full time teachers,
	year round, who are all employed by LCJC.
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# INSPECTION FOR COMPLIANCE WITH 201 DETENTION STANDARDS

On-site Visit conducted	Sixty (60) Total Standards audited
conducted	• Nine (9) mandatory standards
4/10/18	• Fifty-one (51) recommended standards
	• Three (3) standards were identified as non-applicable.
A 704	• Zero (0) recommended standards were left open for further action.
Auditors:	Angela Sutton and Kristin Herrmann
Facility Tour:	The tour was conducted by Detention Director John Dempsey, Asst. Director Eric Hamilton and Compliance Monitor, Regina Robinson. The center was clean, orderly and well-maintained.
Youth Interviews:	Two (2) male youth were interviewed.
	Youth interviews consisted of questions regarding facility safety and sanitation, living area temperatures, emergency and sick call procedures, staff supervision, restraint use, food allergies and food quality.
Youth Responses:	Both youth reported feeling safe at the facility. Both youth reported that the facility is clean and free of vermin/bugs. Both youth reported that the temperatures in the living and sleeping areas are cold. One youth stated that there was a crack in his window and that's why it is cold. The other youth reported that he could receive extra blankets if requested. One youth reported going through a fire drill since being at the facility. The other youth had not experienced a fire drill and reported being at the facility over a month. Both youth reported they were aware of how to obtain medical care and both had received medical care since being in the facility. Both youth reported being in multiple fights while being at the center and both were seen after by medical following the fights. Both youth reported that they had not been placed in restraints since being at the facility. Both youth reported they receive 3 meals a day, with at least 2 being hot meals. Both youth stated the food is "good". Neither youth had any suggestions to improve the facility administrators.  Youth comments were shared with facility administrators.
Staff Interviews:	Four (4) staff were interviewed: (1) Facility Administrator, (2) Line staff (security), Food Service Manager  Security Staff interviews consisted of questions regarding emergency and count procedures, handling toxic chemicals, sanitation procedures, log documentation, transportation procedures, restraint procedures and distribution of clean linen, clothing and hygiene items.

Staff Responses:	Security staff were knowledgeable on emergency procedures, and both gave consistent answers. Staff reported that only the supervisor is notified when restraints are utilized and medical is informed of their use. Staff stated the restraints are removed once the youth calms down and medical responds to all codes so they are aware when restraints are used. Youth receive 2 showers a day.
	The food service supervisor was very knowledgeable about the food service operations. Food service staff are Serve Safe certified. She reported that when the facility has a special diet request, the communication goes through medical prior to the dining hall receiving the request. The supervisor on duty completes a daily sanitation checklist, and the food service supervisor completes a weekly sanitation checklist as required by the standards.
Non-compliant Standards:	All standards are compliant.
Action Plan:	None at this time.

Standards:	Justice & Order; Medical: and Mental Health	
On-site Visit	Fifty (50) Total Standards audited	
conducted	Seven (7) mandatory standards	
<b>5/15/10</b>	Forty-three (43) recommended standards	
7/17/18	<ul> <li>Zero Standards were identified as non-applicable.</li> </ul>	
	• Zero (0) mandatory standards were left open for further action.	
	• Zero (0) recommended standards were left open for further action.	
Auditors:	Angela Sutton and Kristin Herrmann	
Facility Tour:	The facility tour was conducted by Director, John Dempsey and	
	Assistant Director Eric Hamilton.	
Youth Interviews:	Two (2) youth were interviewed, one (1) male and one (1) female. The	
	youth were asked questions regarding their intake/orientation process, rules, reward system, attorney contact, grievances, and mental	
	health/medical responsiveness.	
Youth Responses:	One youth reported being allowed to make a phone call to notify his parents upon arrival; the other youth reported that his parents were already aware that they were there. Both youth reported they received orientation in which they were informed of the programs, including the rules. Both youth reported that they received a medical, dental and mental health screenings upon arrival. Both youth reported that they are allowed to write letters; however, neither youth writes letters to their family. Both youth reported that there is a facility incentive program where in which they can earn incentives such as a later bed time and	

extra snacks. Both youth reported that they know how to contact their attorney and they are allowed to do so, if requested. One youth reported that they had filed a grievance but was still waiting on a response. It was filed within the last week. The other youth reported never filing a grievance. Both youth reported that they knew how to contact mental health and medical, if necessary. One youth reported receiving medical care while in the facility and that the medical staff took their concerns seriously. The other youth did not have any medical issues that needed to be addressed since being at the facility. Both youth reported receiving mental health services while in the facility and feeling the services had helped them while in the facility. Both youth reported that they have never feared for their safety. One youth reported having been involved in a fight while in the facility. The other youth had not been involved in a fight.

Youth comments were shared with facility administrators.

#### **Staff Interviews:**

Administrator, line staff, visiting, intake, medical and mail room staff, were interviewed

### **Staff Responses:**

All staff interviewed were knowledgeable about policy and procedure. There were no inconsistencies in responses.

Mail room- All mail is treated the same, including legal mail. Mail is opened in front of the youth and checked for contraband. Envelopes and stamps are provided to youth.

Intake Officer –Youth are provided a student handbook, and there is a manual in Spanish as well. Staff assist youth with literacy issues by reading the manual to them, if necessary. Youth who are under the influence of drugs are sent to the hospital for clearance before being accepted. Once the youth returns, they are placed on "general watch" for 24 hours and monitored by medical. Medical, mental health and dental screenings are conducted by intake staff, and the staff are health care trained to conduct the screening.

Medical- Trained staff administers medication following the standing orders, and the doctor follows up. Standing orders are reviewed, as necessary, by the health care authority. Medical, dental and mental health emergencies are sent to the local ER for treatment. There is medical staff on site 40 hours a week and on call after hours. There is a doctor on site every Tuesday. Youth can submit a health care request for non-emergency issues. First aid kits are inspected monthly by medical staff.

Non-compliant Standards:	All standards are compliant.
Recommended Action:	None at this time.
Standards:	Administration; Programs; and Education
On-site Visit conducted	<ul> <li>Fifty-one (51)Total Standards audited</li> <li>Zero (0) mandatory standards</li> </ul>
9-18-18	<ul> <li>Fifty-one (51) recommended standards</li> <li>Three (3) standards were identified as non-applicable.</li> <li>Four (4) recommended standards were left open for further action.</li> </ul>
Auditors:	Angela Sutton and Kristin Herrmann
Facility Tour:	The facility tour was conducted by Assistant Director Eric Hamilton.
Youth Interviews:	Two (2) youth were interviewed during this visit, one (1) male and one (1) female. The youth were asked questions regarding intake, personal property, orientation materials, indoor/outdoor recreation, education, and leisure activities.
Youth Responses:	Both youth reported that they were searched during their intake into the facility. Both youth reported they signed an itemized property sheet. Both youth received a shower, were given clean clothing in their size, and were allowed to contact their guardians to let them know where they were. Both youth reported that they receive an hour of large muscle movement every day. Both youth reported that they have gone outside for recreation, but that it does not happen often. Some activities that they participate in during recreation are basketball and volleyball. Both youth felt the facility meets their religious needs. Leisure activities include playing cards and watching TV. Youth reported they are allowed to check out 2 books at a time. One youth stated the education program is "great," and the other youth stated they were "not too fond" of it. One youth reported they earned 20 credits using GradPointe since being at the facility. The other youth reported that they are on the computer some of the time, but the teacher is teaching most of the time. Once the work is complete, they are allowed to watch movies or play cards. One youth reported that staff are good role models, and the other youth said that they are not good role models. When asked why, the youth elaborated that there was a specific staff that she was speaking of. This youth also reported that she didn't feel safe specifically because of this staff. Note- this concern was communicated to the administrators and the concern was addressed. When asked what could be done to improve the facility, one youth stated that there could be more activities because they sit around a lot, and when they just sit around, youth become depressed and upset.

	All comments were shared with administrators.
Staff Interviews:	Administrator, training coordinator, Intake officer, education and recreation
Staff Responses:	Staff responses were consistent with policy and procedure.
Non-compliant Standards:	There are four (4) non-compliant standards  8-3-60- Part-time staff, volunteers, and contract personnel 8-3-73- Volunteer registration and identification 8-3-75-Volunteer suggestions 8-11-8- Annual education program evaluation
Recommended Action:	8-3-60- Implement an orientation/training for volunteers. 8-3-73- Create a registration and identification system for volunteers. 8-3-75- There is not a written evaluation of the volunteer services programs. 8-11-8- Create an evaluation program; evaluation not provided.

Standards:	Administration; Security; and Justice & Order
File Review Only	• Forty (40) Total Standards audited
10-25-18	Zero (0) mandatory standards
	Forty (40) recommended standards
	• Zero (0) standards were identified as non-applicable.
	One (1) recommended standard was left open for further action.
Auditors:	Angela Sutton and Kristin Herrmann
Non-compliant Standards:	8-3-45- Annual performance review
Recommended Action:	Implement an annual employee evaluation system in 2019.

## **TECHNICAL VISIT(S)**

A technical visit was conducted at the Lake County Juvenile Center on February 6, 2018 to provide additional training on the standards with the new compliance manager.

Juvenile Detention Alternatives Initiative (JDAI) – <u>Conditions of Confinement, Facility Self-Assessment</u>-Ensuring safe and humane conditions of confinement for youth held in secure juvenile detention facilities is one of the Eight Core Strategies in JDAI.

Lake County Juvenile Center did participate in a Conditions of Confinement review during this

audit cycle. The review was conducted by representatives from Lake County.

#### **CONCLUSION**

Lake County Juvenile Center is in full compliance with the 2018 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,

## Angela D. Sutton, MA

Director of Juvenile Detention Inspections Indiana Department of Correction/Division of Youth Services

cc: Christine Blessinger, DYS, Executive Director of Youth Services Kellie Whitcomb, Director of Reentry & External Relations Honorable Thomas P. Stefaniak, Jr., Superior Court John Dempsey, Executive Director Regina Robinson, Compliance Manager pursuant to 210 IAC 8-1-5(f) File