

Indiana Department of Correction, Division of Youth Services 2021 Juvenile Detention Inspection - Compliance Report



Lake County Juvenile Center
3000 W. 93rd Avenue
Crown Pointe, IN 46037

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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3000 W. 93rd Avenue
Crown Pointe, IN 46037

On-Site Inspection Dates: 5/5/2021 and 9/27/2021

Auditors: Rachel McCaffrey
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INTRODUCTION

The 2021 annual juvenile detention facility evaluations conducted by the IDOC, Division of Youth Services included two on-site facility inspections; staff and youth interviews; and an audit of the state detention standards.

While the proposed Indiana Juvenile Detention Facility Standards 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-seven (237) proposed juvenile detention facility standards.

Lake County Juvenile Center chose to be audited on the two hundred and thirty-seven (237) proposed juvenile detention facility standards in 2021, for their 25th 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. Lake County Juvenile 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:	Lake
Governing authority:	Lake County Juvenile Center
Name of facility administrator:	John Dempsey
Detention Director:	John Dempsey
Detention facility's mission:	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:	18
Average daily population for the last 12 months:	26
Average length of stay for the last 12 months:	40 days
Minor upgrades since last audit (i.e. painting, flooring, bedding, furnishings):	General repairs.
Major upgrades since last audit (i.e. plumbing, electrical, security system):	Time clocks installed for staff at entrances.
De-escalation techniques training:	LCJC De-escalation
Physical force techniques training:	Aikido
Chemical agents permitted:	No
Name of food service provider:	LCJC employees
Name of food service supervisor:	Christy White
Name of health care authority individual or agency and license/certification:	Dr. T Mullaly, MD – contract Diana Borom, RN – 40 hours (LCJC) Patricia Misalek, RN – 40 hours (LCJC) Adoness Torres, RN – 40 hours (LCJC)
Name of mental health care authority individual or agency and license/certification:	Dr. Jill Miller, LCP Scott McKeith, LCPC Sharon Curtis, MD Psychiatrist
Education Services:	The school is staffed by 4 licensed full-time teachers, year-round, who are all employed by LCJC.

Lake County 2021 Audit

Standards:	<u>All Mandatory Standards, Security Standards, and Training Plan (8-3-52)</u>
Standards Reviewed:	<ul style="list-style-type: none"> • <u>Fifty-One Total Standards Audited</u> • <u>16 Mandatory and 35 Recommended</u> • <u>1 Administration Standard, 7 Safety Standards, 23 Security Standards, 3 Food Service and Hygiene Standards, 15 Medical Standards, and 2 Mental Health Standards</u> • Number of Standards Not Applicable: 0 • Number of Mandatory Standards in Compliance: 16 • Number of Recommended Standards in Compliance: 35
Auditor(s):	Rachel McCaffrey, Kristin Herrmann, and Danielle Zagone (Inspection) Kristin Herrmann (Files)
Facility Tour:	The facility tour was conducted by Regina Robinson. This inspection focused on mandatory standards. Areas such as medical, janitorial closet, kitchen, visitation rooms, search areas, private interview rooms, youth rooms, youth living areas, personal and property areas, mechanical and safety areas were inspected. It was ensured that staff had access to the Emergency Manual.
Youth Interviews:	Four youth were interviewed between both on-site visits.
Youth Responses:	The youth interviewed were asked a series of questions pertaining to the mandatory and security standards. All the youth felt like the facility was clean and good working order. A couple of them said that they felt cold in the facility. This complaint was brought to detention staff and was addressed accordingly.
Staff Interviews:	Two line staff members were interviewed.
Staff Responses:	The staff interviewed were asked a series of questions pertaining to mandatory and security standards. All the staff were able to describe what actions to take during a fire or emergency situation. Facility and room searches are conducted daily at various times. The permanent log on the housing units has information like notification of count to intake, inventory, activity, movement, etc. Mechanical restraints are utilized and are approved through the training the staff receive on the proper use of mechanical restraints.
Non-compliant Standards:	None
Recommended Action:	None

Standards:	Safety, Justice & Order, and Education Standards
Standards Reviewed:	<ul style="list-style-type: none"> • <u>70 Total Recommended Standards Audited</u> • <u>27 Safety Standards, 37 Justice & Order Standards, and 6 Education Standards</u> • Number of Standards Not Applicable: 0 • Number of Recommended Standards in Compliance: 60
Auditor(s):	Kristin Herrmann
Youth Interviews:	Four youth were interviewed between both on-site visits.
Youth Responses:	The youth interviewed were asked a series of questions pertaining to safety, justice and order, and education standards. All of those interviewed felt positive about the education program and felt that if they asked for assistance that they would be assisted appropriately. They all stated that they were given a handbook to read upon admission and have access to one if the ask. They felt that the rules and sanctions of the facility were fair and understandable.
Non-compliant Standards:	8-6-2, 8-6-3, 8-6-12 through 8-6-16, 8-6-37, 8-4-10, 8-4-17
Recommended Action:	Recommended action for 8-6-12 through 8-6-16 is to document youth being advised of disciplinary system and the youth refusing to attend.

Standards:	<u>Food Service & Hygiene, Medical, Mental Health, and Program Standards</u>
Standards Reviewed:	<ul style="list-style-type: none"> • <u>Fifty-Three Total Standards Audited</u> • <u>16 Food Service & Hygiene Standards, 13 Medical Standards, 4 Mental Health Standards, and 20 Programs & Services Standards</u> • Number of Standards Not Applicable: 0 • Number of Recommended Standards in Compliance: 50
Auditor(s):	Rachel McCaffrey, Kristin Herrmann, and Danielle Zagone (Inspection) Kristin Herrmann (Files)
Youth Interviews:	Four youth were interviewed between both on-site visits.
Youth Responses:	The youth interviewed were asked a series of questions pertaining to food service, hygiene, medical, mental health, and program standards. Upon intake they all received the required items such as clothing, shoes, and toiletries. One youth had a food restriction and said that they did receive substitutes to replace what they could not have. All the youth felt confident that they would be able access medical assistance if

	needed. They felt that their medical and mental health information was taken seriously and kept confidential.
Non-compliant Standards:	8-10-13, 8-7-16, 8-7-11
Recommended Action:	Recommended action is for dinner and breakfast times to be within the fourteen-hour window.

Standards:	<u>Administration Standards</u>
Standards Reviewed:	<ul style="list-style-type: none"> • <u>Sixty-One Total Standards Audited</u> • <u>61 Administration Standards</u> • Number of Standards Not Applicable: 2 • Number of Recommended Standards in Compliance: 53
Auditor(s):	Kristin Herrmann
Non-compliant Standards:	8-3-9, 8-3-14, 8-3-21, 8-3-40, 8-3-41, 8-3-57
Recommended Action:	Recommended action is for new staff and annual in-service training documentation to be provided.

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

CONCLUSION

Lake 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 91.20% of the recommended standards.

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

Therefore, Lake County Juvenile Detention Center is in compliance with the 2021 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 (812) 929-3980 should you have any questions concerning this report.

Respectfully submitted,

Rachel McCaffrey

Director of Juvenile Detention Inspections

Indiana Department of Correction/Division of Youth Services

cc: Danielle Zagone, Director of External Relations, IDOC
Honorable Thomas P. Stefaniak, Jr., Superior Court
John Dempsey, Director
Regina Robinson, Compliance Manager
pursuant to 210 IAC 8-1-5(f)
File