

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



Youth Care Center  
727 Chestnut St  
Evansville, In 47713

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Auditors

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Facility: Youth Care Center  
727 Chestnut St  
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Inspection Date: May 17, 2018  
August 14, 2018  
October 23, 2018

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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.

Youth Care Center chose to be audited on the two hundred and one (201) new juvenile detention facility standards in 2018, for their 21st annual detention inspection. Of the two hundred and one (201) standards audited, sixteen (16) standards require mandatory compliance and the remaining one hundred and eighty-five (185) are recommended 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 expectations of the current detention standards.

## FACILITY INFORMATION

<b>Facility county:</b>	Vanderburgh
<b>Governing authority:</b>	Youth Care Center
<b>Name of facility administrator:</b>	Marcus Head/ Joshua Nichols
<b>Detention Director:</b>	Marcus Head/Joshua Nichols
<b>Detention facility's mission:</b>	<p>A. To provide the highest quality of treatment and individual care to children who are in trouble with the law and to children in need of services</p> <p>B. To always be family inclusive in our approach to helping children and to look beyond our current function to see what needs we might address through program diversification or expansion of our program</p> <p>C. To include community experts and /or services in our attempt to resolve bio/psycho/socio/spiritual/medical needs of our at-risk youth</p>
<b>Rated capacity:</b>	40
<b>Population on date of first audit:</b>	23
<b>Average daily population for the last 12 months:</b>	18
<b>Average length of stay for the last 12 months:</b>	20.9 days
<b>Year the building was built:</b>	1989 (Renovated 2007)
<b>Minor upgrades since last audit (i.e. painting, flooring, bedding, furnishings):</b>	Painting in residents rooms as needed to cover scratches
<b>Major upgrades since last audit (i.e. plumbing, electrical, security system):</b>	N/A
<b>De-escalation techniques training:</b>	Non-violent physical crisis intervention
<b>Physical force techniques training:</b>	Non-violent physical intervention
<b>Chemical agents permitted:</b>	No
<b>Name of food service provider:</b>	CRS One
<b>Name of food service supervisor:</b>	Justin Dillon
<b>Name of health care authority individual or agency and license/certification:</b>	Kim Sullenger- RN- 30 hours a week
<b>Name of mental health care authority individual or agency and license/certification:</b>	David Westfall, LMHC- 40 hours a week
<b>Education Services:</b>	Residents are provided education in the common areas on both the male and female units. Monday-Friday from 8:15am-1:45pm with a break at 10:00am

	for staff and residents and lunch from 11:30am-12pm. Residents resume education at 12:15pm. All residents complete the TABE assessment to determine where they are academically before they are assigned lesson plans by the teacher. We also provide a GED instructor that comes to the facility.
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**INSPECTION FOR COMPLIANCE WITH 201 DETENTION STANDARDS**

<b>Standards:</b>	<b><u>Safety; Security; and Food Service &amp; Hygiene</u></b>
<b>On-site Visit conducted</b>  <b>5-17-18</b>	<ul style="list-style-type: none"> <li>• <b><u>Sixty (60) Total Standards audited</u></b></li> <li>• Nine (9) mandatory standards</li> <li>• Fifty-one (51) recommended standards</li> <li>• Two (2) standards were identified as non-applicable.</li> <li>• Zero (0) mandatory standards were left open for further action.</li> <li>• Zero (0) recommended standards were left open for further action.</li> </ul>
<b>Auditors:</b>	Angela Sutton and Kristin Herrmann
<b>Facility Tour:</b>	The tour was conducted by Executive Director Marcus Head. The center was clean, orderly, and well-maintained. The youth were in school during the time of the tour.
<b>Youth Interviews:</b>	<p>Two (2) youth were interviewed, 1 female and 1 male.</p> <p>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.</p>
<b>Youth Responses:</b>	Both youth reported feeling safe at the facility. Both youth reported that the facility is clean and there are not bugs or vermin. Both youth reported that the temperatures in the living and sleeping areas are comfortable. Both youth reported going through a fire drill since being at the facility, and both were knowledgeable of the procedures. Both youth stated they were aware of how to obtain medical care 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. Both youth stated they receive clean clothes every day and clean bedding weekly. Neither youth had been placed in restraints, been involved in a fight or placed in isolation since being at the facility. Neither youth had any suggestions on how the facility could be improved.

	Youth comments were shared with facility administrators.
<b>Staff Interviews:</b>	<p>Control room operator/line staff, Line staff and Food Service Supervisor were interviewed.</p> <p>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.</p> <p>Food service staff interviews consisted of questions regarding menu compliance/deviation, weekly kitchen inspection, production log, meal times, medical exam and re-exam of kitchen staff and daily wellness monitoring of kitchen staff.</p>
<b>Staff Responses:</b>	<p>Security staff answers were consistent in regards to evacuating youth in the event of an emergency. The facility is not handicap accessible and does not accept youth who require special accommodations. Both staff reported mechanical restraints can be utilized at the discretion of the staff after an attempt to deescalate; however, both staff reported that restraints aren't used often. Both staff stated the restraints are removed once the youth calms down and youth are checked every 15 minutes while the restraints are on the youth. Youth are assessed by medical only if an injury occurs as a result of restraint use. Youth receive 1 shower a day and can request an extra shower if needed after strenuous exercise</p> <p>Food Service Supervisor reported that if there is a need for a meal substitution, the Director will approve it and the item will be substituted for a similar item. This is documented on the substitution log. All staff are Serve Safe trained to conduct the weekly sanitation inspection. All meals are documented on the meal production log, the number of meals and what the meal consists of. All kitchen staff receive a physical upon hire, a yearly TB test, and are checked daily by a center supervisor for any visible illness. Youth dine in their day room.</p>
<b>Non-compliant Standards:</b>	All standards were found compliant.
<b>Action Plan:</b>	None
<b>Standards:</b>	<b><u>Justice &amp; Order; Medical: and Mental Health</u></b>
<b>On-site Visit conducted</b>  <b>8-14-18</b>	<ul style="list-style-type: none"> <li>● <b><u>Fifty (50) Total Standards audited</u></b></li> <li>● Seven (7) mandatory standards</li> <li>● Forty-three (43) recommended standards</li> <li>● One (1) Standard was identified as non-applicable.</li> </ul>

	<ul style="list-style-type: none"> <li>• Zero (0) mandatory standards were left open for further action.</li> <li>• Zero (0) recommended standards were left open for further action.</li> </ul>
<b>Auditors:</b>	Angela Sutton and Kristin Herrmann
<b>Facility Tour:</b>	The facility tour was conducted by Facility Director, Marcus Head.
<b>Youth Interviews:</b>	Two (2) male youth were interviewed.
<b>Youth Responses:</b>	<p>Both youth reported being allowed to make a phone call to notify their parents upon within 24 hours of arrival. Both youth stated they completed an orientation in which they were informed of the programs provided by the detention center. Both youth reported receiving medical, dental and mental health screenings during intake. Both youth stated the rules are fair. Both youth reported they had received visits from their family and are allowed to make free phone calls to their family at least 3 times a week. Both youth reported that they are allowed to write unlimited letters to their families. Both youth reported that there is a facility reward system for positive behavior. Both youth reported that they are allowed to and are aware of how to contact their attorney. Both youth reported that they have never filed a grievance while at the facility, with one youth stating “this was the best facility I have ever been in.” One youth was aware that there was an appeal process, and the other was not. Both youth reported that they know how to contact medical, but only one youth had contacted medical, and he stated that medical was attentive to his needs. Both youth reported that they have never feared for their safety while in the facility. Neither youth has ever been involved in any fights while at the facility. When asked if there was anything that could be done to improve the facility, one youth said that there should be more programs for youth to assist with anger issues. The other youth said there should be assistance with placement issues.</p> <p>Youth comments were shared with facility administrators.</p>
<b>Staff Interviews:</b>	Healthcare and Facility Administrator
<b>Staff Responses:</b>	Medical- There is a medical professional on site 40 hours a week, and the Nurse Practitioner is on site twice a month but can come more often, if necessary. Medical is also on call after hours. Standing orders are reviewed annually by the Health Care Authority (HCA). Medical emergencies are sent to the local ER for treatment. Youth can submit a health care request for non-emergency issues. First aid kits are inspected monthly by medical staff.

	<p>Facility Administrator- The facility ensures juveniles aren't discriminated against by allowing all youth to participate in all programs. The facility does have a grievance system, and grievances go directly to the facility director. If the youth is not satisfied with the answer that he receives from the director, the appeal process is to the court liaison. Staff have the authority to restrict visitation if concerns arise. The staff must notify the facility administrator to discuss concerns and determine if the restriction needs to continue. All staff are health trained to administer medication. Parents are notified if a youth is seriously injured and needs to be transported to the hospital. Mental health issues are addressed by a LMHC at the facility; however, serious mental health issues are referred out.</p>
<b>Non-compliant Standards:</b>	All standards are compliant.
<b>Recommended Action:</b>	None at this time.

<b>Standards:</b>	<b><u>Administration; Programs; and Education</u></b>
<b>On-site Visit conducted 10-23-18</b>	<ul style="list-style-type: none"> <li>• <b>Fifty-one (51) Total Standards audited</b></li> <li>• Zero (0) mandatory standards</li> <li>• Fifty-one (51) recommended standards</li> <li>• Four (4) standards were identified as non-applicable.</li> <li>• Zero (1) recommended standard was one left open for further action.</li> </ul>
<b>Auditors:</b>	Angela Sutton and Kristin Herrmann
<b>Facility Tour:</b>	The facility tour was conducted by Acting Facility Director Joshua Nichols and Mr. Casavant.
<b>Youth Interviews:</b>	Two (2) male youth were interviewed during this visit. The youth were asked questions regarding intake, personal property, orientation materials, indoor/outdoor recreation, education, and leisure activities.

<b>Youth Responses:</b>	<p>Both youth reported that a same-sex search pat down search was performed upon admission. Both youth reported their personal property was stored in a property bag and they signed an itemized property sheet. Both youth received a shower, were given clean clothing in their size, and were allowed to contact their guardian. Both youth reported that they receive an hour of large muscle movement every day. Both youth reported they go outside sometimes for recreation. Some activities that they play during recreation are basketball and volleyball. Both youth felt the facility meets their religious needs. Both youth reported that they receive an hour of daily structured leisure time. Leisure activities include cards, movies and board games. Youth reported they are allowed to have 2 books at a time in their room. Books are kept on the cart in the unit. The youth reported that there are good books and the books are provided by the Central Library. Both youth stated the education program is okay. One youth didn't know if he was receiving credits towards a high school diploma. Both youth reported that staff are good role models to the youth. Neither youth has ever feared for their safety while at the facility. When asked what could be done to improve the facility, both youth answered no.</p> <p>Comments were shared with facility administration.</p>
<b>Staff Interviews:</b>	Staff from Administration, education and intake were interviewed.
<b>Staff Responses:</b>	All staff responses were consistent with policy.
<b>Non-compliant Standards:</b>	8-3-35- Employee background checks
<b>Recommended Action:</b>	8-3-35- Implement the sex offender background check prior to hiring an employee.

<b>Standards:</b>	<b><u>Administration; Security; and Justice &amp; Order</u></b>
<b>File Review Only 10-25-18</b>	<ul style="list-style-type: none"> <li>• <b><u>Forty (40) Total Standards audited</u></b></li> <li>• Zero (0) mandatory standards</li> <li>• Forty (40) recommended standards</li> <li>• Zero (0) standards were identified as non-applicable.</li> <li>• Zero (0) recommended standards were left open for further action.</li> </ul>
<b>Auditors:</b>	Angela Sutton and Kristin Herrmann



<b>Non-compliant Standards:</b>	All standards are compliant.
<b>Recommended Action:</b>	None

**SUBSEQUENT UNNACCOUNCED VISIT(S)**

There was an unannounced visit to Youth Care Center to look into an allegation of abuse during the 2018 audit cycle. Department of Child Services completed an investigation on the allegation.

**CONCLUSION**

Youth Care 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 Brent Niemeier  
Joshua Nichols, Executive Director  
pursuant to 210 IAC 8-1-5(f)  
File