Indiana Department of Correction, Division of Youth Services

2022 Juvenile Detention Inspection - Compliance Report



Lake County Juvenile Center

3000 W. 93rd Avenue

Crown Pointe, IN 46037

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Auditors

Rachel McCaffrey, Director of Juvenile Detention Inspections, Indiana Department of Correction

Kristin Herrmann, Youth Law T.E.A.M. of Indiana

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**

**2022 Juvenile Detention Inspection - Compliance Report**

Facility: Lake County Juvenile Center

3000 W. 93rd Avenue

Crown Pointe, IN 46037

On-Site Inspection Dates: May 24, 2022 and September 14, 2022

Certification Completed By:

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**INTRODUCTION**

The 2022 annual juvenile detention facility audits conducted by the IDOC, Division of Youth Services included two on-site facility inspections, staff and youth interviews, and a file review of 2021 documents of the state detention standards.

Detention facilities were audited on the three hundred and one (301) enacted Indiana Juvenile Detention Facility Standards.  Since new, proposed standards were in the process of being promulgated, detention facilities had the option of submitting documentation under the enacted citations for the three hundred and one (301) standards or the corresponding two hundred and thirty-seven (237) proposed standards.

Lake County Juvenile Center chose to provide documentation corresponding to the two hundred and thirty-seven (237) proposed juvenile detention facility standards in 2022, for their 26th 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**

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| **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 during on-site visits:** | 31 and 36 |
| **Average daily population for the last 12 months:** | 40 |
| **Average length of stay for the last 12 months:** | 30 days |
| **Minor upgrades since last audit (i.e. painting, flooring, bedding, furnishings):** | None |
| **Major upgrades since last audit (i.e. plumbing, electrical, security system):** | None |
| **De-escalation techniques training:** | Corrections 1 Academy |
| **Physical force techniques training:** | A.C.T./Corrections 1 Academy |
| **Chemical agents permitted:** | No |
| **Name of food service provider:** | Summit Food Service LLC |
| **Name of food service supervisor:** | Dashonna Smith |
| **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 McKenith, LCPC |
| **Education Services:** | The school is staffed by 4 licensed full-time teachers, year-round, who are all employed by LCJC. |

**Lake County 2022 Audit**

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| **May 24, 2022** | **Lake County First Site Visit** |
| **Inspectors:** | Rachel McCaffrey, Laurie Elliott, and Danielle Zagone |
| **Facility Tour:** | The facility tour was conducted by the assistant director, Eric Hamilton. |
| **Youth Interviews:** | Two youth were interviewed.  Youth interviews consisted of questions regarding procedure about safety, medical, mental health, programming, education, kitchen, due process, and intake. |
| **Youth Responses:** | Both youth stated that during intake they were asked medical questions and were told about the facility rules and expectations. Both youth said that they felt safe in the facility and felt that the rules and consequences for breaking those rules were fair. |
| **Staff Interviews:** | Two line staff were interviewed.  Staff were interviewed over the proper procedures in areas such as safety, security, and intake process. |
| **Staff Responses:** | All staff/personnel were knowledgeable about the areas which we covered. |

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| **September 14, 2021** | **Lake County Second Site Visit** |
| **Inspectors:** | Rachel McCaffrey and Laurie Elliott |
| **Facility Tour:** | The facility tour was conducted by the assistant director, Eric Hamilton. |
| **Youth Interviews:** | Two youth were interviewed.  Youth interviews consisted of questions regarding procedure about safety, medical, mental health, programming, education, kitchen, due process, and intake. |
| **Youth Responses:** | Both youth felt that their medical and mental health was taken seriously and kept confidential from staff and other youth. They, also, felt that any medical or mental health concerns were spoken about in a way that they could easily understand. |

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| **Auditor(s):**  **Kristin Herrmann** | **Lake County Standards Audit** |
| **Administration and Management**  **Standards** | * Sixty-Two Total Standards, 62 Recommended * Number of Standards in Compliance: 54 * Number of Standards in Non-Compliance: 7 * Number of Standards Not Applicable: 0 |
| *Recommended Action for Non-Compliant Administration and Management Standards:* | *8-3-6: Provide documentation of annual meetings*  *8-3-7: Provide annual review of organizational chart*  *8-3-21: Provide documentation of petty cash*  *8-3-40: Require physicals of direct care staff*  *8-3-55: Provide documentation of completed training*  *8-3-57: Provide documentation of completed training*  *8-3-62: Provide documentation of guardian signature* |
| **Safety Standards** | * Thirty-Four Total Standards, 6 Mandatory and 28 Recommended * Number of Standards in Compliance: 32 * Number of Standards in Non-Compliance: 1 * Number of Standards Not Applicable: 1 |
| *Recommended Action for Non-Compliant Safety Standards:* | *8-4-20: Provide contact visitation* |
| **Security Standards** | * Twenty-Three Total Standards, 23 Recommended * Number of Standards in Compliance: 23 * Number of Standards in Non-Compliance: 0 * Number of Standards Not Applicable: 0 |
| *Recommended Action for Non-Compliant Security Standards:* | *Not Applicable* |
| **Justice and Order Standards** | * Thirty-Seven Total Standards, 37 Recommended * Number of Standards in Compliance: 36 * Number of Standards in Non-Compliance: 1 * Number of Standards Not Applicable: 0 |
| *Recommended Action for Non-Compliant Justice and Order Standards:* | *8-6-37: Provide Contact Visitation* |
| **Food Service and Hygiene** | * Nineteen Total Standards, 3 Mandatory and 16 Recommended * Number of Standards in Compliance: 16 * Number of Standards in Non-Compliance: 3 * Number of Standards Not Applicable: 0 |
| *Recommended Action for Non-Compliant Food Service and Hygiene Standards:* | *8-7-11: Do not have more than 14 hours between dinner and breakfast*  *8-7-14: Provide documentation of linen procedures*  *8-7-16: Provide documentation of linen procedures* |
| **Medical Standards** | * Twenty-Eight Total Standards, 7 Mandatory and 21 Recommended * Number of Standards in Compliance: 28 * Number of Standards in Non-Compliance: 0 * Number of Standards Not Applicable: 0 |
| *Recommended Action for Non-Compliant Medical Standards:* | *Not Applicable* |
| **Mental Health Standards** | * Six Total Standards, 6 Recommended * Number of Standards in Compliance: 6 * Number of Standards in Non-Compliance: 0 * Number of Standards Not Applicable: 0 |
| *Recommended Action for Non-Compliant Mental Health Standards:* | Not Applicable |
| **Programs and Services Standards** | * Twenty Total Standards, 20 Recommended * Number of Standards in Compliance: 18 * Number of Standards in Non-Compliance: 2 * Number of Standards Not Applicable: 0 |
| *Recommended Action for Non-Compliant Programs and Services Standards:* | *8-10-13: Provide documentation as proof of practice*  *8-10-16: Provide documentation as proof of practice* |
| **Education Standards** | * Six Total Standards, 6 Recommended * Number of Standards in Compliance: 6 * Number of Standards in Non-Compliance: 0 * Number of Standards Not Applicable: 0 |
| *Recommended Action for Non-Compliant Education Standards:* | *Not Applicable* |

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 93.55% 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 2022 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: Crissy Simmons, Director of External Relations

Honorable Thomas P. Stefaniak, Jr., Superior Court

John Dempsey, Director

pursuant to 210 IAC 8-1-5(f)

File