

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



St. Joseph Probate Court Juvenile Justice Center  
1000 S. Michigan Street  
South Bend, In 46601

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## Auditors

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Facility: St. Joseph Probate Court Juvenile Justice Center  
1000 S. Michigan St  
South Bend, In 46601

Inspection Date: April 5, 2018  
June 28, 2018  
September 18, 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 on two hundred thirty eight (238) current detention standards or the corresponding two hundred and one (201) specifically selected proposed new juvenile detention facility standards.

St. Joseph Probate Court Juvenile Justice Center chose to be audited on the two hundred and thirty eight (238) current juvenile detention facility standards in 2018, for their 22nd annual detention inspection. Of the two hundred and thirty eight (238) standards audited,

twenty-five (25) standards require mandatory compliance and the remaining two hundred and thirteen are recommended standards. Compliance with 100% of the mandatory standards and 90% of the recommended standards is required to attain “Full Compliance”.

## FACILITY INFORMATION

<b>Facility county:</b>	St. Joseph
<b>Governing authority:</b>	St. Joseph County
<b>Name of facility administrator:</b>	Donald Hardin
<b>Detention Director:</b>	Donald Hardin
<b>Detention facility’s mission:</b>	The Detention Department and employees are dedicated in offering juveniles educational opportunities and providing safe shelter through professional services.
<b>Rated capacity:</b>	90
<b>Population on date of first audit:</b>	35
<b>Average daily population for the last 12 months:</b>	40
<b>Average length of stay for the last 12 months:</b>	22 days
<b>Year the building was built:</b>	1997
<b>Minor upgrades since last audit (i.e. painting, flooring, bedding, furnishings):</b>	Painting of holding cells, new laundry dispenser system
<b>Major upgrades since last audit (i.e. plumbing, electrical, security)</b>	Replacement of water chiller motors, installation of new camera system
<b>De-escalation techniques training:</b>	CPI, Verbal Judo
<b>Physical force techniques training:</b>	A.C.T.
<b>Chemical agents permitted:</b>	Yes
<b>Name of food service provider:</b>	Gordon’s Stanz

<b>Name of food service supervisor:</b>	Trenton Strudivant
<b>Name of health care authority individual or agency and license/certification:</b>	James Tieman, MD
<b>Name of mental health care authority individual or agency and license/certification:</b>	April Walker, LCSW
<b>Education Services:</b>	Offering residents continuing credit and attendance opportunities through the South Bend Community School Corporation, along with other online credit systems through other community school corporations, as well as GED pre-test and testing.

**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>4-5-18</b>	<ul style="list-style-type: none"> <li>• <b><u>One hundred and one (101) Total Standards audited</u></b></li> <li>• Eighteen (18) mandatory standards</li> <li>• Eighty three (83) recommended standards</li> <li>• Zero (0) recommended standard were left open.</li> </ul>
<b>Auditors:</b>	Angela Sutton and Kristin Herrmann and Laurie Elliott
<b>Facility Tour:</b>	The tour was conducted by Detention Director Donald Hardin. The center was clean, orderly, and well-maintained. Areas observed were housing units, master control, shower areas and food service area.
<b>Youth Interviews:</b>	<p>Two (2) youth were interviewed, one (1) female and one (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>

<p><b>Youth Responses:</b></p>	<p>Both youth reported that they have not feared for their safety while at the facility. One youth reported that the temperature in the living and sleeping areas are cold, and the other youth reported that the temperature is appropriate. Both youth reported that they practice fire drills once a month, and both were able to explain the procedures. Both youth stated they were aware of how to obtain medical care at the facility and had requested medical care. One youth reported seeing medical staff within an hour of requesting aid, and the other youth reported medical didn't respond to the request. Both youth reported they receive three meals a day, with at least two meals being hot. Both youth reported the food tasted good. One youth reported female residents weren't able to go to the dining hall to eat; only the male residents were allowed. Both youth stated they received clean underclothes daily and clean outer garments three (3) times a week. One youth reported having a food allergy and receiving an altered menu for it. Neither youth reported having been placed in restraints within the facility. When asked for recommendations to make the facility better, one youth stated wanting to be able to talk to staff on first shift.</p> <p>Youth comments were shared with facility administrators.</p>
<p><b>Staff Interviews:</b></p>	<p>Facility Administrator, Food Service Staff, two (2) Line Staff, and one (1) Control Room Officer were interviewed.</p> <p>Facility Administrator interview consisted of questions regarding safety, overcrowding, flammable chemicals, documentation, outside transports, restraint use and emergency plans.</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 interview consisted of questions regarding menu substitutions, special diet requests (medical and religious), staff wellness checks (daily and annual), sanitation, meal times, storage temps for dry, frozen and refrigerated food, and line staff supervision during meals.</p>

<p><b>Staff Responses:</b></p>	<p>Administrator- Flame resistant furniture is ordered in accordance with fire inspection report requirements. The facility did not exceed its capacity during this audit cycle. If the facility neared capacity, the probation department would be contacted to see which youth was eligible for early release. Monthly generator tests are conducted by the maintenance department. Restraint use does not need approval. Medical staff is notified once the restraints are removed.</p> <p>Security staff - Staff were knowledgeable on emergency procedures and gave consistent answers. Staff reported that approval does not need to be obtained prior to staff utilizing restraints and that restraints aren't used often. Restraints are removed once the youth has been transported to the next point, either the assigned room or holding cell, whichever is applicable to the situation. Medical staff assesses the youth if there are injuries. Youth receive daily showers after recreation.</p> <p>Food Service - Staff reported that if there is a need for a meal substitution, it is documented and previous week menus are reviewed to make sure the substituted food is not a recent repeat. Medical diet requests are received from the nurse, and religious diets are approved by the facility administration. The food service head cook, who has attended a food safety course, performs the weekly sanitation inspection. All kitchen staff receives a physical upon hire and an annual TB test. Staff interviewed was not aware of any documentation regarding daily checks for staff illness/cleanliness. Kitchen staff help supervise youth eating in the dining hall.</p>
<p><b>Non-compliant Standards:</b></p>	<p>All standards were compliant</p>
<p><b>Action Plan:</b></p>	<p>None at this time</p>

<p><b>Standards</b></p>	<p><b>Justice &amp; Order, Medical and Mental Health</b></p>
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<p><b>On-site Visit conducted</b></p> <p><b>6-28-2018</b></p>	<ul style="list-style-type: none"> <li>• <b><u>Seventy-five (75) Total Standards audited</u></b></li> <li>• Seven (7) mandatory standards</li> <li>• Sixty-eight (68) recommended standards</li> <li>• One (1) Standard was identified as non-applicable.</li> <li>• Zero (0) mandatory standards were left open for further action.</li> <li>• Five (5) recommended standards were left open for further action.</li> </ul>
<p><b>Auditors:</b></p>	<p>Angela Sutton and Kristin Herrmann and Laurie Elliott</p>
<p><b>Facility Tour:</b></p>	<p>The tour was conducted by Director Donald Hardin. Areas toured were the chemical room, intake, youth rooms and housing unit and healthcare.</p>
<p><b>Youth Interviews:</b></p>	<p>Youth were asked questions regarding their intake/orientation process, rules, reward system, attorney contact, grievances, and mental health/medical responsiveness.</p>
<p><b>Youth Responses:</b></p>	<p>Both youth reported being able to make a call to notify their parents upon arrival. Only one youth reported receiving orientation materials during this admission; the other youth reasoned not receiving orientation materials because this wasn't the youth's first admission. Only one youth reported receiving a written copy of the rules but did say staff had explained the rules and that a written copy of the rules was available in the pod. Both youth reported receiving a medical and mental health screening. Both youth reported being able to make phone calls and receive visits from family members. Both youth stated they are able to write two letters to their families every Friday. Both youth reported the facility has a reward system that provides benefits, like a movie and a hot snack. One youth reported filing a grievance while at the facility and stated the grievance was addressed to their satisfaction. The other youth had never filed a grievance. Neither youth had received any mental health treatment while at the facility. Both youth reported they were aware of how to contact medical. When asked what could be done to improve the facility, one youth stated staff should not take away points in the reward system for no reason.</p> <p>Youth comments were shared with facility administrators.</p>
<p><b>Staff Interviews:</b></p>	<p>Administrator, Health Care, one (1) Intake Staff with mail room experience, and one (1) Line Staff with visitation experience.</p>

<b>Staff Responses:</b>	<p>Line staff – The line staff interviewed reported not receiving any training on responding to emergencies within four (4) minutes yet had had to respond to emergencies while on duty.</p> <p>Mail room- Youth seal outgoing legal mail without staff reading the content. Incoming legal mail is opened by the youth in front of staff after staff feels the outside of the packaging for contraband. Youth receive postage for two letters every week and can send mail to anyone who is not residing in another correctional facility.</p> <p>Visitation – Youth receive increasing visitation opportunities with increasing incentive levels of the facility’s reward system. Youth are allowed to hug their family members.</p> <p>Intake Officer – Youth are provided orientation materials; youth who cannot read have the material read to them. There are bilingual staff to help non-English speaking juveniles; interpreters are also available through the court. Intake staff perform the health screening, but the intake officer interviewed had not received any training regarding how to perform the health screening. Youth must be seen by a nurse before being assigned to a living pod. Youth who are under the influence of drugs are sent to the hospital for clearance before being accepted.</p> <p>Medical- Standing orders are reviewed weekly by the doctor. Nursing staff assess all juveniles during intake. Medical staff is available from 7:00 a.m. – 8:00 p.m. daily; the doctor is on-site once a week. Only medical staff administers medication. Youth can submit a health care request for non-emergency issues.</p> <p>Administrator- The facility has a Grievance Specialist who receives and handles all youth grievances. Medical staff is available at the facility daily from 7:00 a.m. – 7:00 p.m. and is on-call outside those hours; the medical doctor comes to the facility once a week on Tuesday/Thursday. Medical, dental and mental health emergencies are “code blue” for medical staff on-site to respond; if medical staff are not on-site, then the youth is sent to the local ER for treatment. Mental health issues are overseen by the mental health department, not the medical department.</p>
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<p><b>Non-compliant Standards:</b></p>	<p>4.244-First Aid Kits and AED's  4.248-Written suicide prevention program  4.249-Management of HIV  4.250-Communicable disease and infectious control program  4.252- Emergency transfers</p>
<p><b>Recommended Action:</b></p>	<p>4.244-Provide proof of first aid kits in the facility and of the nurse's inspection of the kits per procedure  4.248-Provide a plan that has been approved by qualified medical or mental health  4.249-Provide policy and procedure addressing standard and proof of practice following that procedure  4.250-Amend procedure to provide instruction on when and how the requirements and then proof of following those procedures  4.252-Emergency transfers-Provide documentation of sending youth to mental health facility: for next audit, amend policy and procedure to address standard requirements more clearly</p>

<p><b>Standards:</b></p>	<p><b><u>Administration; Programs; and Education</u></b></p>
<p><b>On-site Visit conducted</b>  <b>9-13-18</b></p>	<ul style="list-style-type: none"> <li>• Sixty-four (64) Total Standards audited</li> <li>• Two (2) mandatory standards</li> <li>• Sixty-two (62) recommended standards</li> <li>• Two (2) standards were identified as Non- applicable.</li> <li>• Four (4) recommended standards were left open for further action.</li> </ul>
<p><b>Auditors:</b></p>	<p>Angela Sutton and Kristin Herrmann</p>
<p><b>Facility Tour:</b></p>	<p>Facility tour conducted by Director, Donald Hardin.</p>
<p><b>Youth Interviews:</b></p>	<p>Youth were asked questions regarding the intake process, recreation, education, leisure activities, library services and safety.</p>

<p><b>Youth Responses:</b></p>	<p>Both youth reported that they were searched upon admission. The male youth stated he was pat searched during his first and second admission and strip searched during his third admission. The female youth stated she was pat searched. Both youth reported their personal property was stored in a bag, they received a shower and clean clothing in their size, and they were allowed to contact their guardians. Both youth reported that they receive one hour of large muscle movement every day but had not been outside for recreation. The female youth reported being detained for approximately two months, and the male youth reported being detained for one month. Both youth reported not receiving one hour daily of structured leisure time and also not having leisure activities, except the game Uno, made available. One youth stated being able to watch movies on the weekends. Youth reported juveniles on incentive levels three and four are allowed to check out two books at a time. The female youth stated the education program was “poor” and didn’t benefit her because she was doing busy work and not receiving credit. The male youth stated he was earning credit and that the education program was “okay.” Both youth reported that some staff are good roles models for the youth; one youth stated some staff are disrespectful. When asked what could be done to improve the facility, one youth stated being able to be outside their rooms more and the other youth stated the education program needed to be improved and that youth should be able to go outside.</p> <p>Youth comments were shared with the facility administrator.</p>
<p><b>Staff Interviews:</b></p>	<p>Staff interviewed were the Training Coordinator, Director of Education, Facility Administrator, Intake Officer,</p>
<p><b>Staff Responses:</b></p>	<p>Staff responses were consistent with facility policy.</p>
<p><b>Non-compliant Standards:</b></p>	<p>1.59-Direct care staff  1.59A-Direct care staff  5.276-Annual evaluation of the education program  5.284-Minimum recreation and leisure schedule</p>
<p><b>Recommended Action:</b></p>	<p>1.59- Ensure staff meet required training hours  1.59A-Ensure staff to meet required training hours  5.276-Provide annual evaluation of the education program  5.284- Ensure youth receive required leisure and recreation activity daily</p>

### **Performance Based Standards (PbS)**

Performance-based Standards (PbS) is a program for juvenile justice agencies, facilities and residential care providers to identify, monitor and improve conditions and rehabilitation services provided to youths using national standards and outcome measures. PbS is a field-supported and self-sustaining continuous learning and improvement program available to all residential programs serving youths across the country.

St. Joseph Probate Court Juvenile Justice Center is currently on PbS Level 1.

### **CONCLUSION**

St. Joseph Probate Court Juvenile Justice 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 James Fox, Probate Court  
Donald Hardin, Director of Detention Superintendent  
Brian Galloway, Assistant Director of Detention  
pursuant to 210 IAC 8-1-5(f)  
File