

2026 McLean County Juvenile Detention Center Inspection Report

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Executive Summary

The Department of Juvenile Justice conducted an annual inspection of the McLean County Juvenile Detention Center on April 15, 2026, pursuant to 730 ILCS 5/3-15-2(b). While there were several areas of strength observed, there was one area of non-compliance noted with respect to the requirements of 20 Ill. Adm. Code 2602 County Juvenile Detention Standards ("County Detention Standards").

Areas of Non-Compliance

Section	Requirement
2602.50 Admission Procedures	The admitting staff member shall contact the parents, guardian or other responsible person, at the time of the first visit, to obtain the medical history of the youth, including current medication and Medicaid/insurance information. Current prescription medication shall be continued without interruption unless a qualified medical professional determines in consultation with the prescribing physician, youth, and family that continuation is not indicated.

Methodology

- Interviews Conducted
 - Superintendent
 - Assistant Superintendent
 - Program Coordinator/PREA Coordinator
 - Mental Health Practitioner
 - Detention Officer (1)
 - Educator
 - Medical Doctor
 - Youth (4)
- Documents Reviewed
 - Sample Youth Files
 - Sample Medical Files
 - MAR tracking
 - New Employee Background Check Documentation
 - Nursing Credentials
 - Mental Health Credentials
 - Grievance Log and Sample Grievances
 - Health Department Inspection Report (12/19/25)
 - Sample Incident Reports
 - Menu with Caloric Counts
 - Program Calendar and Attendance Documentation
 - Confinement Data
 - School Attendance Data
 - Resident Handbook
 - Sample Youth Risk Assessments

- Facility Policies

Overview

The McLean County Juvenile Detention Center is a 26-bed facility located in Normal, Illinois. The facility has a main common area with three primary living units, an outdoor recreation space, gymnasium and large classroom that are easily accessible from the main common area. The physical plant was in good condition, clean, and had a lot of natural lighting. Facility administrators reported the average daily population is approximately 15 youth, however there were only eight youth detained at the time of the inspection.

Admission Policy and Procedures, Prison Rape Elimination Act

The facility conducts youth intakes 24 hours a day. All youth receive a Resident Handbook that includes an overview of resident rights, behavior program information, and the Prison Rape Elimination Act (PREA). A PREA Orientation video is shown to all youth upon intake, and youth take a test to affirm their understanding. The facility has implemented the use of an assessment of risk of victimization. The program manager maintains the results and a log of youth responses, along with documentation of any youth allegations and follow-up investigations. Examples of completed PREA Risk Assessments were observed, including re-assessments of youth who had been detained for extended periods of time. The facility has not completed a formal PREA audit. Administrators report they are attempting to have one done in 2027.

Recommendations:

- Complete a formal PREA audit.

Personnel, Staffing and Supervision

Over the past year, facility administrators have transitioned to an improved staffing plan. Four additional positions have been approved by the Administrative Office of Illinois Courts (AOIC). There are now six total supervisory positions, four assigned to supervision of direct care staff, one Program Supervisor (who also serves as the PREA Coordinator), and a Training Supervisor. At the time of the inspection, two of the direct care supervisory positions were vacant due to recent departures. Program and Training Supervisors filled in as needed.

The facility was fully staffed with 19 detention counselors on the date of the audit. On average, the facility runs shifts with four or five detention counselors during waking hours, a number that is more than sufficient given the population size at the facility.

Detention Programs, Youth Discipline, and Confinement

The facility has maintained a robust programming schedule, with programming delivered both internally and via external partnerships. The Program Coordinator maintains a programming calendar that includes substance abuse groups, leisure groups, life skills groups, art groups and external volunteer

programming. Interviewed youth reported frequent participation in many programs, including a music program that occurred a few days prior to the inspection. The program coordinator tracks youth attendance at all programming activities and documents any youth absences with the reason for such absence. The volume, consistency, and documentation of daily programming continues to be a significant strength of the facility. The facility offers in-person family visitation two days per week.

The facility continues to utilize a “no fail” behavioral management system, where each day, youth start at the highest behavioral level, “A”, and during the day they may be placed on a lower level based on their behavior. If they remain on “A” level until the end of the day, the youth can earn privileges in the facility. For example, a youth can choose not to participate in group programming once a week after accruing 30 consecutive “A” days. Levels also impact when a youth goes to bed in the evening, with lower behavioral levels equating to earlier bedtimes.

If a youth engages in disruptive behavior during the day, their level is lowered to a “B” level. If the youth retain their “B” level throughout the day, they start the next day with an “A.” Youth on “B” level who engage in further disruptive behavior can be moved to “C” level. Youth who engage in continued, prolonged extreme behavior may be lowered to Group 3, which can lead to placement on a special security status. In the past Group 3 status came with 12-24 hours of confinement. This has changed however, as youth are now released from confinement upon the youth’s de-escalated behavior. Staffing levels have remained strong enough over the past year so there has been minimal use of confinement for operational reasons. The facility is now compliant with County Detention Standards related to youth confinement.

Medical and Health Care

The facility has been without a full-time nurse since September 2025. The job has been posted, but there have not been any applicants as of the time of the inspection. Administrators attribute the lack of candidates to the posted salary, which is less than other nursing positions in the county. The salary should be increased in order to attract more candidates. In the interim, a medical doctor (contracted through Advance Correctional Healthcare) is on-site once per week, and a part-time nurse is on call and comes in when needed. While this does mitigate the absence of a full-time nurse, it does not replace the need for one.

One youth, who had been admitted eight days prior to the inspection date, reported they had not received their medication since they arrived at the facility. The youth acknowledged they had not reported the medication during the intake process and only did so the day prior. County Detention Standards also require facilities to “contact the parents, guardian or other responsible person, at the time of the first visit, to obtain the medical history of the youth, including current medication and Medicaid/insurance information.” The facility had contacted the youth’s probation officer (a form was observed in the youth’s file), but there is not an existing process at the facility to directly ask parent/guardians if the youth is on any medication unless it is reported by the youth. The facility should start formally asking the parent/guardians of all youth about the medical history and medication upon admission.

Areas of Noncompliance and Recommendations

- Section 2602.50 Admission Procedures states: “The admitting staff member shall contact the parents, guardian or other responsible person, at the time of the first visit, to obtain the medical history of the youth, including current medication and Medicaid/insurance information. Current prescription medication shall be continued without interruption unless a qualified medical professional determines in consultation with the prescribing physician, youth, and family that continuation is not indicated.”
 - Recommendations:
 - Directly contact parent/guardians during the intake process for all youth and inquire about the youth’s medical history and current medication. Ensure parent/guardian responses are documented.
 - Increase the nursing position salary to attract more applicants.

Mental Health Services

A Licensed Clinical Social Worker (LCSW) has been on contract since 1999. The contract calls for 10 hours of services to be offered each week, however the LCSW and facility administrators estimates the LCSW spends approximately 15 hours per week at the facility. The LCSW runs groups every Wednesday afternoon, focusing on topics such as emotional intelligence, mindfulness, self-talk, and relaxation. Much of her work with youth is 1:1, primarily seeing youth upon their request or referral from a staff member. The LCSW does assessments for all youth identified as a suicide risk and reviews the mental health screenings that are completed by nursing staff during the intake process. She completes assessments for all new intakes and develops treatment plans for youth when indicated. The facility is seeking to hire a full-time mental health position going forward.

Education

Since the last inspection, the facility has hired an additional educator. There are now two teachers who are employees of the Regional Office of Education (ROE), one of which has a special education endorsement. Youth at the facility are enrolled through the Normal Illinois School District (Unit 5). Youth largely take classes via the Edmentum Online Learning System or complete work sent by their home schools.

There was one youth at the facility who had graduated in December 2025. That youth was not attending any educational programming, rather he was recreating alone on his living unit. This youth did have the opportunity to go into the classroom but chose not to. While there are some educational materials available to youth and the facility is compliant with the educational requirements of the County Detention Standards, it is recommended that the facility increase the amount of post-graduate educational programming opportunities for youth graduates.

Recommendations

- Identify additional educational resources for high school graduates.

Recommendations

Section	Recommendations
Education	• Identify additional educational resources for high school graduates.
Admissions	• Complete a formal PREA audit. • Directly contact parent/guardians during the intake process for all youth and inquire about the youth's medical history and current medication. Ensure parent/guardian responses are documented.
Medical	• Increase the nursing position salary to attract more applicants.