

MINNESOTA STATE REGISTER

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Minnesota State Register

Judicial Notice Shall Be Taken of Material Published in the Minnesota State Register

The Minnesota State Register is the official publication of the State of Minnesota's Executive Branch of government, published weekly to fulfill the legislative mandate set forth in Minnesota Statutes, Chapter 14, and Minnesota Rules, Chapter 1400. It contains:

- Proposed Rules
- Adopted Rules
- Exempt Rules
- Expedited Rules
- Withdrawn Rules
- Executive Orders of the Governor
- Appointments
- Proclamations
- Vetoed Rules
- Commissioners' Orders
- Revenue Notices
- Official Notices
- State Grants and Loans
- Contracts for Professional, Technical and Consulting Services
- Non-State Public Bids, Contracts and Grants

Printing Schedule and Submission Deadlines

Vol. 50 Issue Number	Publish Date	Deadline for: all Short Rules, Executive and Commissioner's Orders, Revenue and Official Notices, State Grants, Professional-Technical- Consulting Contracts, Non-State Bids and Public Contracts	Deadline for LONG, Complicated Rules (contact the editor to negotiate a deadline)
#40	Monday 6 April	Noon Tuesday 31 March	Noon Thursday 26 March
#41	Monday 13 April	Noon Tuesday 7 April	Noon Thursday 2 April
#42	Monday 20 April	Noon Tuesday 14 April	Noon Thursday 9 April
#43	Monday 27 April	Noon Tuesday 21 April	Noon Thursday 16 April

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<https://www.senate.mn/>

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MN Judicial Center, Rm. 135,
25 Rev. Dr. Martin Luther King Jr Blvd., St. Paul, MN 55155
<http://www.mncourts.gov>

House Public Information Services
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State Office Building, Room 175
100 Rev. Dr. Martin Luther King Jr Blvd., St. Paul, MN 55155
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Federal Register
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U.S. Government Printing Office – Fax: (202) 512-1262
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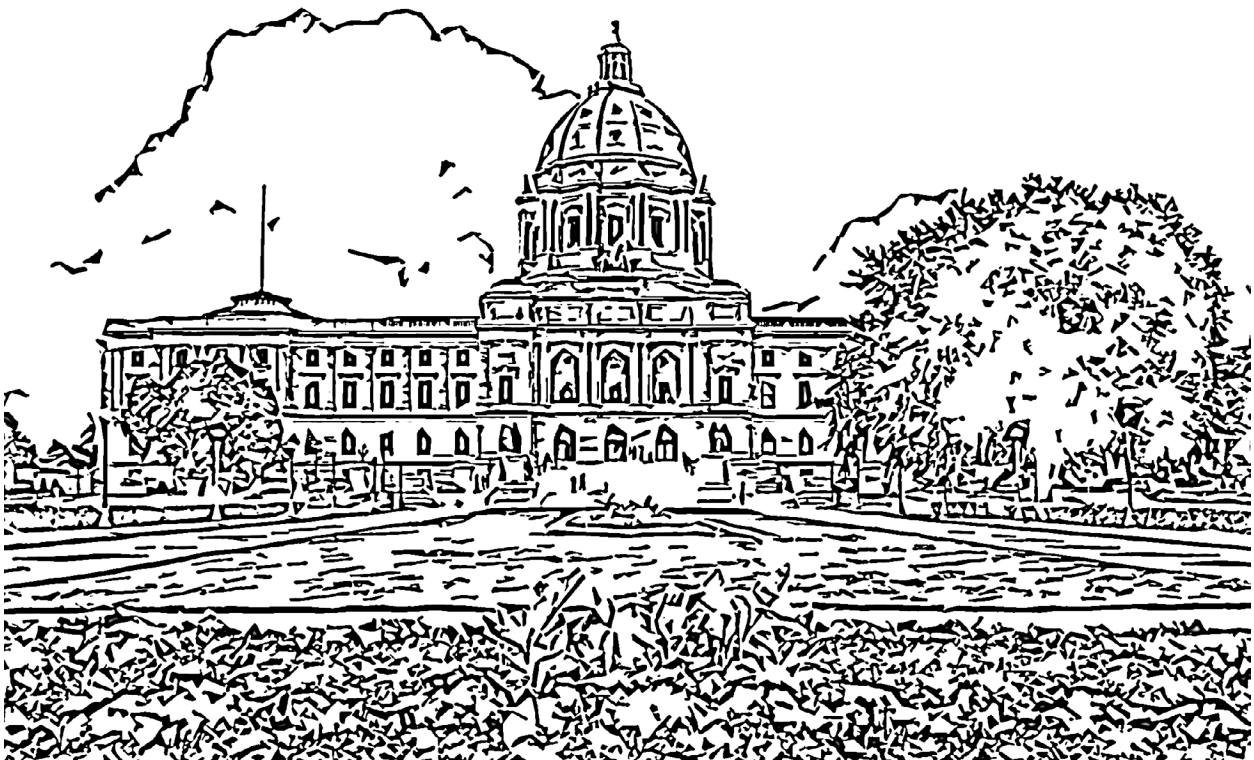
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Front Cover Artwork: A skier takes off on a snowy jump as the sun sets on a February afternoon at Spirit Mountain in Duluth, Minn. Photo by Sean Plemmons



Minnesota Rules: Amendments and Additions

NOTICE: How to Follow State Agency Rulemaking in the State Register

The State Register is the official source, and only complete listing, for all state agency rulemaking in its various stages. State agencies are required to publish notice of their rulemaking action in the State Register. Published every Monday, the State Register makes it easy to follow and participate in the important rulemaking process. Approximately 80 state agencies have the authority to issue rules. Each agency is assigned specific Minnesota Rule chapter numbers. Every odd-numbered year the Minnesota Rules are published. Supplements are published to update this set of rules. Generally speaking, proposed and adopted exempt rules do not appear in this set because of their short-term nature, but are published in the State Register.

An agency must first solicit Comments on Planned Rules or Comments on Planned Rule Amendments from the public on the subject matter of a possible rulemaking proposal under active consideration within the agency (Minnesota Statutes §§ 14.101). It does this by publishing a notice in the State Register at least 60 days before publication of a notice to adopt or a notice of hearing, or within 60 days of the effective date of any new statutory grant of required rulemaking.

When rules are first drafted, state agencies publish them as Proposed Rules, along with a notice of hearing, or a notice of intent to adopt rules without a hearing in the case of noncontroversial rules. This notice asks for comment on the rules as proposed. Proposed emergency rules, and withdrawn proposed rules, are also published in the State Register. After proposed rules have gone through the comment period, and have been rewritten into their final form, they again appear in the State Register as Adopted Rules. These final adopted rules are not printed in their entirety, but only the changes made since their publication as Proposed Rules. To see the full rule, as adopted and in effect, a person simply needs two issues of the State Register, the issue the rule appeared in as proposed, and later as adopted.

The State Register features partial and cumulative listings of rules in this section on the following schedule: issues #1-26 inclusive (issue #26 cumulative for issues #1-26); issues #27-52 inclusive (issue #52, cumulative for issues #27-52 or #53 in some years). A subject matter index is updated weekly and is available upon request from the editor. For copies or subscriptions to the State Register, contact the editor at 651-201-3204 or email at sean.plemmons@state.mn.us

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Comments on Planned Rules or Rule Amendments. An agency must first solicit Comments on Planned Rules or Comments on Planned Rule Amendments from the public on the subject matter of a possible rulemaking proposal under active consideration within the agency (*Minnesota Statutes* §§ 14.101). It does this by publishing a notice in the *State Register* at least 60 days before publication of a notice to adopt or a notice of hearing, and within 60 days of the effective date of any new statutory grant of required rulemaking.

Rules to be Adopted After a Hearing. After receiving comments and deciding to hold a public hearing on the rule, an agency drafts its rule. It then publishes its rules with a notice of hearing. All persons wishing to make a statement must register at the hearing. Anyone who wishes to submit written comments may do so at the hearing, or within five working days of the close of the hearing. Administrative law judges may, during the hearing, extend the period for receiving comments up to 20 calendar days. For five business days after the submission period the agency and interested persons may respond to any new information submitted during the written submission period and the record then is closed. The administrative law judge prepares a report within 30 days, stating findings of fact, conclusions and recommendations. After receiving the report, the agency decides whether to adopt, withdraw or modify the proposed rule based on consideration of the comments made during the rule hearing procedure and the report of the administrative law judge. The agency must wait five days after receiving the report before taking any action.

Rules to be Adopted Without a Hearing. Pursuant to *Minnesota Statutes* § 14.22, an agency may propose to adopt, amend, suspend or repeal rules without first holding a public hearing. An agency must first solicit **Comments on Planned Rules** or **Comments on Planned Rule Amendments** from the public. The agency then publishes a notice of intent to adopt rules without a public hearing, together with the proposed rules, in the *State Register*. If, during the 30-day comment period, 25 or more persons submit to the agency a written request for a hearing of the proposed rules, the agency must proceed under the provisions of §§ 14.1414.20, which state that if an agency decides to hold a public hearing, it must publish a notice of intent in the *State Register*.

KEY: Proposed Rules - Underlining indicates additions to existing rule language. ~~Strikeouts~~ indicate deletions from existing rule language. If a proposed rule is totally new, it is designated “all new material.” **Adopted Rules** - Underlining indicates additions to proposed rule language. ~~Strikeout~~ indicates deletions from proposed rule language.

Minnesota Department of Corrections

Proposed Permanent Rules Relating to Jail Facilities; Notice of Intent to Adopt Rules with a Hearing

In the Matter of the Proposed Permanent Rules Relating to Jail Facilities; Revisor’s ID No. R-4445; CAH Docket No. 22-9051-40960

Introduction. The Minnesota Department of Corrections intends to adopt rules after a public hearing under Minnesota Rules, parts 1400.2200 to 1400.2240, and Minnesota Statutes, sections 14.131 to 14.20. You may submit written comments on the proposed rules until **4:30 p.m. on Thursday, April 30, 2026.**

Public hearing. The department will hold a virtual public hearing on Thursday, May 28, 2026, at 9:00 a.m. and continuing until the hearing is completed.

The hearing will be conducted by an administrative law judge from the Court of Administrative Hearings. You can participate in the virtual hearing via Webex by using the following link along with the associated access code and password:

For a video and audio connection, join the hearing through an internet connection:

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- **Web link:** <https://minnesota.webex.com>
- **Meeting Number (access code):** 2490 427 7030
- **Password:** S3yNDJHbG62 (73963542 when dialing from a phone or video system)

For audio-only connection, join the virtual hearing by telephone:

- **Call:** 1-415-655-0003 (this is not a toll-free number)
- **Access code:** 2490 427 7030
- **Password:** 73963542

The department will schedule additional hearing days if necessary. All interested or affected persons will have an opportunity to participate by submitting either oral or written comments, statements, or arguments. Statements may be submitted without appearing at the hearing.

If the hearing is postponed or rescheduled, the department will notify organizations listed in its additional notice plan and post the notice on its *website* (<https://mn.gov/doc/about/rulemaking>).

Administrative law judge. Administrative Law Judge Moseng will conduct the hearing. The judge can be reached by contacting William Moore, Rules Coordinator, Court of Administrative Hearings, 600 North Robert Street, P.O. Box 64620, Saint Paul, Minnesota 55164-0620, telephone 651-361-7893, and william.t.moore@state.mn.us.

Subject of rules and statutory authority. The proposed rules concern the inspection and licensing of all jails throughout the state. The rules are being updated to reflect minimum standards that comply with best corrections practices, increase transparency among jails, strengthen public trust, and ensure a higher level of accountability for jails and the department when inspecting jails and enforcing minimum standards.

The statutory authority to adopt these rules is Minn. Stat. § 241.021, subd. 1, which states, “The commissioner shall promulgate pursuant to chapter 14, rules establishing minimum standards for these facilities with respect to their management, operation, physical condition, and the security, safety, health, treatment, and discipline of persons confined or incarcerated therein” and, as of 2021, requires the department issue specific guidance for 17 additional minimum standards (see *Minn. Stat. § 241.021*).

A free copy of the proposed rule is available on the *department’s rulemaking web page* or upon request to the agency contact person listed below. You may also review the proposed rule and submit written comments via the *Court of Administrative Hearings’ eComments website* (<https://mn.gov/oah/forms-and-filing/ecommments/>).

Statement of Need and Reasonableness. The statement of need and reasonableness (SONAR) contains a summary of the justification for the proposed rules, a description of who will be affected by the proposed rules, and an estimate of the probable cost of the proposed rules. You may obtain copies for the cost of reproduction by contacting the agency contact person listed below. The SONAR may be viewed on the *department’s rulemaking web page*.

Agency contact person. The contact person is Tara Rathman at Minnesota Department of Corrections, 1450 Energy Park Drive, St. Paul, MN, 55018, telephone 320-241-5537 and tara.rathman@state.mn.us. You may contact her with questions about the rules.

Public comment. You and all interested or affected persons, including representatives of associations and other interested groups, will have an opportunity to participate. The Administrative Law Judge will accept your views orally at the hearing or in writing at any time before the close of the hearing record.

Submit written comments to the Administrative Law Judge via the *Court of Administrative Hearings Rulemaking eComments website*. All evidence that you present should relate to the proposed rules. If the proposed rules affect you in any way, the agency encourages you to participate.

You may also submit written material to the Administrative Law Judge to be recorded in the hearing record for

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five working days after the public hearing ends. At the hearing the Administrative Law Judge may order this five-day comment period extended for a longer period but for no more than 20 calendar days.

After the comment period, there is a five-working-day rebuttal period during which the agency and any interested person may respond in writing to any new information submitted. No one may submit additional evidence during the five-day rebuttal period.

The Court of Administrative Hearings must receive all comments and responses submitted to the Administrative Law Judge via the *Court of Administrative Hearings Rulemaking eComments website* no later than 4:30 p.m. on the due date. If using the eComments website is not possible, you may submit post-hearing comments in person or via United States mail addressed to Judge Moseng at the address listed above.

All comments or responses received are public data and will be available for review on the *eComments website* or on the *agency's website*.

Hearing procedure. The rule hearing procedure is governed by *Minnesota Statutes*, sections 14.131 to 14.20, and by the rules of the Court of Administrative Hearings, *Minnesota Rules*, parts 1400.2000 to 1400.2240. You should direct questions about the rule hearing procedure to the Administrative Law Judge through William Moore, the CAH Rules Coordinator listed above.

Modifications. The agency may modify the proposed rules either as a result of public comment or as a result of the rule hearing process. It must support modifications by data and views submitted during the public comment and rule hearing process. The adopted rules may not be substantially different than these proposed rules unless the agency follows the procedure under *Minnesota Rules*, part 1400.2110. If the final rules are identical to the rules originally published in the *State Register*, the agency will publish a notice of adoption in the *State Register*. If the final rules are different from the rules originally published in the *State Register*, the agency must publish a copy of the changes in the *State Register*.

Adoption procedure after the hearing. After the close of the hearing record, the Administrative Law Judge will issue a report on the proposed rules. You may ask to be notified of the date that the Administrative Law Judge's report will become available and can make this request at the hearing or in writing to the Administrative Law Judge. You may also ask to be notified of the date that the agency adopts the rules, and the rules are filed with the Secretary of State, or register with the agency to receive notice of future rule proceedings by requesting this at the hearing or by writing to the agency contact person stated above.

Lobbyist registration. *Minnesota Statutes*, chapter 10A, requires each lobbyist to register with the State Campaign Finance and Public Disclosure Board. You may direct questions about this requirement to the Campaign Finance and Public Disclosure Board at: Suite #190, Centennial Building, 658 Cedar Street, St. Paul, Minnesota 55155, telephone (651) 539-1180 or 1-800-657-3889.

Alternative format/accommodation. Upon request, this information can be made available in an alternative format, such as large print, braille, or audio. To make such a request or if you need an accommodation to make this hearing accessible, please contact the agency contact person at the address or telephone number listed above.

Order. I order that the rulemaking hearing be held at the date, time, and location listed above.

Date: March 24, 2026

Signed by: Paul Schnell, Commissioner

Proposed Rules

2911.0100 INTRODUCTION.

[For text of items A and B, see Minnesota Rules]

C. This chapter does not apply to state correctional facilities under the commissioner's control.

2911.0200 DEFINITIONS.

Subpart 1. **Scope.** For the purpose purposes of this chapter, the following terms defined in this part have the meanings given them.

Subp. 2. **Administrative segregation separation.** "Administrative segregation separation" means the status of when an inmate is separated from general population because separation is the least restrictive alternative available and the inmate:

A. is prone to escape, is prone to assault staff or other inmates, poses a safety or security threat to other inmates or the facility, or likely to need needs protection from other inmates or protection from self, an inmate with a mental illness or a developmental disability who is in need of special care, or an inmate;

B. has been classified or identified as an inmate with special needs and must be separated for the inmate's health or safety; or

C. is on medical isolation or infirmary status.

[For text of subparts 3 to 5, see Minnesota Rules]

Subp. 5a. **Annual or annually.** Unless otherwise provided, "annual" or "annually" means every 12 months.

Subp. 5b. **Assessment for substance use disorder.** "Assessment for substance use disorder" means a clinical assessment to determine medically appropriate care for substance use.

[For text of subpart 6, see Minnesota Rules]

Subp. 7. [See repealer.]

Subp. 8. [Repealed, 38 SR 523]

Subp. 8a. **Care.** "Care" refers to providing health-related services and interventions necessary to address an inmate's identified medical, dental, and mental health needs.

[For text of subparts 9 to 16, see Minnesota Rules]

Subp. 17. **Classification.** "Classification" means a process for determining the needs and security requirements of detained inmates for whom confinement has been ordered and for assigning the inmates to housing units and programs according to their a facility's resources and the inmates' needs and existing resources.

[For text of subparts 18 and 19, see Minnesota Rules]

Subp. 19a. **Community-based provider.** "Community-based provider" means an entity that provides treatment primarily in a noncorrectional setting to individuals with substance use disorders or mental illnesses.

[For text of subparts 20 to 22, see Minnesota Rules]

Subp. 23. [See repealer.]

Subp. 24. [See repealer.]

[For text of subpart 25, see Minnesota Rules]

Subp. 26. **Custody personnel staff.** "Custody personnel staff" means those facility staff whose primary duty is supervision of supervising inmates.

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Subp. 26a. **Daily or day.** Unless otherwise provided, “daily” or “day” means a calendar day.

[For text of subparts 27 and 28, see Minnesota Rules]

Subp. 29. **Disciplinary segregation.** “Disciplinary segregation” means ~~the status assigned an inmate following when~~ an inmate is segregated from general population:

A. ~~after a hearing in which the inmate was found in violation of a facility rule or a postconfinement violation of state or federal law or the status assigned an inmate; or~~

B. ~~before a hearing when segregating the inmate is determined to be necessary in order for a violation under item A to reasonably ensure the facility’s security of the facility or the safety of inmates or staff.~~

Subp. 29a. **DOC Portal.** “DOC Portal” means the department’s detention information system under Minnesota Statutes, section 241.021, subdivision 1.

Subp. 29b. **Document.** “Document” means to record information in writing or electronically.

[For text of subparts 30 to 32, see Minnesota Rules]

Subp. 32a. **Emergency medication.** “Emergency medication” means psychotropic medication involuntarily given to an inmate to prevent immediate harm to the inmate or others.

[For text of subparts 33 to 35, see Minnesota Rules]

Subp. 36. **Facility administrator.** “Facility administrator” means ~~the an~~ individual who has been delegated the responsibility and authority for ~~the administration and operation of~~ administering and operating a facility. Facility administrator includes the administrator’s designee.

[For text of subparts 37 to 38a, see Minnesota Rules]

Subp. 39. **Health authority.** “Health authority” means ~~an individual or agency licensed to practice medicine and provide a person licensed to practice medicine that provides and coordinates health care services to the inmate population of the facility or the physician at an institution with final responsibility for decisions related to and for inmates and has the final responsibility for making medical judgments.~~

Subp. 40. **Health care personnel.** “Health care personnel” means an individual ~~whose primary duty is to provide health services in accordance with their respective license. The individual must be a RN, LPN, nurse practitioner, physician, or physician assistant. who is licensed, certified, or credentialed by a state, territory, or other licensing body to provide health care services:~~

A. ~~in Minnesota; and~~

B. ~~within the scope and skills of the individual’s health care profession.~~

Subp. 40a. **Health record.** “Health record” includes an inmate’s medical, dental, and mental health records.

Subp. 41. **Health-trained staff person.** “Health-trained staff person” means a ~~person custody staff member who provides assistance to the responsible physician or health care personnel in keeping with the person’s levels of:~~

A. ~~according to the staff member’s education, training, and experience; and~~

B. ~~under the direction of the facility’s health authority or other health care personnel.~~

[For text of subparts 42 to 51, see Minnesota Rules]

Subp. 52. [See repealer.]

[For text of subparts 53 and 54, see Minnesota Rules]

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Subp. 54a. **Medical emergency.** “Medical emergency” means when an inmate requires emergency care.

[For text of subpart 55, see Minnesota Rules]

Subp. 55a. **Mental health professional.** “Mental health professional” means an individual qualified to provide services under Minnesota Statutes, section 245I.04, subdivision 2, 4, 6, or 8.

Subp. 55b. **Mental illness.** “Mental illness” has the meaning given in Minnesota Statutes, section 245.462, subdivision 20, paragraph (a).

Subp. 55c. **Mental status exam.** “Mental status exam” means an exam conducted by a mental health professional to evaluate an inmate’s mental capacity, which includes evaluating an inmate’s cognition, mood, behavior, or perceptions or other clinically appropriate evaluations.

[For text of subpart 56, see Minnesota Rules]

Subp. 56a. **Overcrowded facility.** “Overcrowded facility” means a condition when the a facility’s approved bed capacity is exceeded.

[For text of subpart 56b, see Minnesota Rules]

Subp. 56c. **Monthly.** “Monthly” means a calendar month.

Subp. 56d. **Opiate antagonist.** “Opiate antagonist” has the meaning given in Minnesota Statutes, section 604A.04, subdivision 1.

[For text of subparts 57 to 58, see Minnesota Rules]

Subp. 58a. **Prescription medication.** “Prescription medication” means a medication that is required by federal law to bear the following a statement: “~~Caution: saying that~~ federal law prohibits dispensing ~~without or transferring the~~ medication to a person who does not have a prescription for the medication.”²²

[For text of subpart 59, see Minnesota Rules]

Subp. 60. **Responsible physician practitioner.** “Responsible physician practitioner” means ~~an individual~~ a licensed:

A. ~~to practice medicine and provide health services to the inmate population of the facility~~ nurse practitioner, advanced practice registered nurse, or physician assistant who provides health care services to inmates; or

B. ~~the physician at an institution~~ with final responsibility for ~~decisions related to~~ making medical judgments.

Subp. 60a. **Resources.** “Resources” includes a facility’s funding, staffing, and design.

[For text of subparts 61 to 65, see Minnesota Rules]

Subp. 65a. **Segregation area.** “Segregation area” means an area of the facility separate from general population that houses the following inmates individually:

A. inmates in administrative separation;

B. inmates requiring either prehearing detention, administrative segregation status, or in either administrative separation or disciplinary segregation; or

C. lockdown time inmates requiring disciplinary segregation for disciplinary violations. This area is ~~separate from the general population and houses inmates individually~~.

[For text of subparts 65b and 65c, see Minnesota Rules]

Subp. 65d. **Signature.** “Signature” includes an electronic signature, as defined under Minnesota Statutes, section 325L.02, paragraph (h).

Proposed Rules

[For text of subpart 66, see Minnesota Rules]

Subp. 67. **Inmate with special needs inmate.** “Inmate with special needs inmate” means an inmate whose with a mental or physical condition that requires special handling and treatment by staff accommodations or arrangements that an inmate in general population would not normally receive, including vulnerable adults as defined in Minnesota Statutes, section 626.5572.

Subp. 67a. **Step-down management.** “Step-down management” means facility procedures that support inmates in disciplinary segregation to transition out of disciplinary segregation.

[For text of subpart 68, see Minnesota Rules]

Subp. 68a. **Substance.** “Substance” has the meaning given in Minnesota Statutes, section 245G.01, subdivision 22.

Subp. 68b. **Substance use disorder.** “Substance use disorder” has the meaning given in Minnesota Statutes, section 245G.01, subdivision 23.

Subp. 68c. **Substance use disorder treatment.** “Substance use disorder treatment” has the meaning given in Minnesota Statutes, section 245G.01, subdivision 24.

Subp. 69. [See repealer.]

[For text of subpart 70, see Minnesota Rules]

Subp. 70a. **Support staff.** “Support staff” includes clerical, maintenance, food service, and contracted staff.

Subp. 70b. **Telehealth.** “Telehealth” has the meaning given in Minnesota Statutes 2024, section 256B.0625, subdivision 3b, paragraph (e).

Subp. 70c. **Under the direction of.** “Under the direction of” refers to health-trained staff providing health care services according to a facility’s policies and procedures and instructions from the health authority or other health care personnel.

[For text of subparts 71 and 72, see Minnesota Rules]

Subp. 73. **Weekly.** “Weekly” means every seven days.

Subp. 74. **Well-being check.** “Well-being check” means when a custody staff member directly observes an inmate in the facility to:

- A. ensure that the inmate is exhibiting signs of life; and
- B. identify whether the inmate is experiencing visible or audible distress.

Subp. 75. **Withdrawal management.** “Withdrawal management” means medical care provided to inmates who are experiencing withdrawal symptoms or who are at high risk of developing withdrawal symptoms because they have stopped using a substance or have reduced their substance use.

2911.0210 INCORPORATIONS BY REFERENCE.

Subpart 1. **Incorporations; generally.** The publications in this part are incorporated by reference, are not subject to frequent change, and are available on the department’s website.

Subp. 2. **Dietary Guidelines for Americans, 2020-2025.** “Dietary Guidelines for Americans, 2020-2025,” published by U.S. Departments of Agriculture and Health and Human Services (December 2020 and as subsequently amended).

Subp. 3. **DOC Portal Unusual Occurrences.** “DOC Portal Unusual Occurrences,” published by the Minnesota

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Department of Corrections (2025 and as subsequently amended).

Subp. 4. **SAMHSA Opioid Overdose Prevention Toolkit.** “SAMHSA Opioid Overdose Prevention Toolkit: Five Essential Steps for First Responders,” published by the Substance Abuse and Mental Health Services Administration (2018 and as subsequently amended).

Subp. 5. **Standards for Health Services in Jails.** “Standards for Health Services in Jails,” published by the National Commission on Correctional Health Care (2018 and as subsequently amended).

2911.0300 INTENDED FACILITY USE AND NONCONFORMANCE WITH RULES CORRECTIVE ACTION PLANS.

Subpart 1. **Intended use.**

A. A facility ~~shall~~ must be used only according to its classification, Class I to Class VI, as approved by the ~~Department of Corrections commissioner.~~

B. A Class I facility may be approved by the commissioner to house inmates serving alternative sentences for a time not to exceed any limits ~~set by~~ under Minnesota Statutes.

C. A Class II facility may house inmates serving an alternative sentence for a time not to exceed any limits ~~set by~~ under Minnesota Statutes. ~~A facility must be in compliance with a rule part, subpart, or item as designated under subpart 5a in order to meet approval requirements for continued operation unless the commissioner waives the part, subpart, or item.~~

D. The commissioner ~~shall~~ must assess a facility based on compliance with ~~rules applicable~~ requirements under this chapter that apply to the facility’s classification ~~at the time of the facility’s last inspection.~~

Subp. 2. **~~Nonconformance; Unsafe, unsanitary, or illegal conditions; restricted use.~~** When conditions do not substantially conform or where ~~if~~ specific conditions endanger the security, safety, or health, welfare, or safety of inmates or staff, the facility’s use ~~is~~ must be restricted ~~pursuant according~~ to Minnesota Statutes, section 241.021, ~~subdivision 1,~~ or legal proceedings to condemn the facility will be initiated pursuant to Minnesota Statutes, section 641.26 or 642.10.

[For text of subpart 3, see Minnesota Rules]

Subp. 4. **~~Correction of deficiencies~~ Corrective action plans.** Sanctions for violation of mandatory rules are as follows:

A. For a level one sanction, the facility inspector shall issue a written compliance order to the facility administrator and governing body for correction of deficiencies within a specified time up to 180 days.

B. For a level two sanction, the facility inspector shall issue a written compliance order to the facility administrator and governing body that requires submission of a written plan of action inclusive of time lines for correction of any deficiency allowed more than 180 days for correction. The DOC shall grant or deny approval of the action plan in writing within 30 days of receiving the action plan.

C. For a level three sanction, when compliance is not achieved within time lines ordered or action plans are not implemented as approved by the DOC, the facility inspector shall submit to the facility administrator and governing body a limited use agreement for review, signature, and return within a specified time.

D. For a level four sanction, when compliance with the rules under subpart 5a, item B, cannot be achieved because of serious life-safety and physical plant deficiencies, the commissioner shall specify a duration of time, known as the sunset authorization period, after which the facility will no longer have the authority to operate.

E. For a level five sanction, when level one to level four sanctions have not resulted in correction of deficiencies,

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~~the commissioner shall exercise restricted use or condemnation authority under subpart 2.~~

A. The commissioner must issue a corrective action plan to a facility administrator if the commissioner determines that:

(1) the facility has a deficiency that does not meet the minimum standards under this chapter or Minnesota Statutes, section 241.021, subdivision 1; and

(2) the deficiency does not meet the standards for a licensing action.

B. The corrective action plan must:

(1) be in writing;

(2) identify all deficiencies;

(3) detail what is required to remedy the deficiencies; and

(4) provide a deadline to correct each deficiency.

C. When the deficiency has been corrected, the facility administrator must submit to the commissioner documentation detailing the administrator's compliance with the corrective action plan. If the commissioner determines that the administrator has not remedied the deficiency, the facility is subject to a licensing action or an additional corrective action plan.

D. For purposes of this subpart, "licensing action" means a correction order, conditional license order, license revocation order, or temporary license suspension imposed under Minnesota Statutes, section 241.021, subdivisions 1a to 1c.

Subp. 5. [Repealed, 38 SR 523]

Subp. 5a. [See repealer.]

Subp. 6. [See repealer.]

2911.0310 FACILITY SELF-AUDIT.

A. A facility administrator must develop and follow a policy and procedure on the facility's self-audit process.

B. At least annually, a facility administrator must conduct a self-audit to evaluate the facility's compliance with this chapter. A self-audit must be:

(1) documented; and

(2) conducted using department-provided checklists of the inspection and policy requirements under this chapter and Minnesota Statutes.

2911.0330 APPROVED CAPACITY.

Subpart 1. [Repealed, 38 SR 523]

Subp. 2. **Approved bed capacity.** Approved bed capacity, excluding holding areas and beds designed for disciplinary segregation or administrative segregation purposes separation, ~~shall~~ must be based on the following criteria:

[For text of items A to D, see Minnesota Rules]

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2911.0400 VARIANCES, EMERGENCIES, AND OVERCROWDED FACILITIES.

Subpart 1. ~~Variances, generally~~ **Requesting variance; commissioner evaluation.**

A. The A facility administrator may apply for a variance by submitting a request through the DOC Portal. For each variance request, a facility administrator must:

- (1) cite the rule part for which a variance is sought;
- (2) explain why the variance is being requested, including why the facility administrator cannot comply with the cited rule requirement;
- (3) specify the length of time for which the variance is being sought;
- (4) explain why or how the variance will not jeopardize the detention of inmates or the health, safety, security, or well-being of inmates or facility staff and:
 - (a) if a variance is being requested because of financial hardship, explain why or how the variance will alleviate financial hardship; and
 - (b) explain why or how the variance will not leave the interests and well-being of inmates or facility staff unprotected; and
- (5) state the alternative measure, if any, that the facility administrator proposes to follow to comply with the intent of this chapter.

B. Granting of a variance under this part for one facility shall does not constitute a precedent for any other facility. The granting and denial of variances shall be in writing and made within 30 days of the request for a variance commissioner must grant or deny a variance through the DOC Portal within 60 days of receiving all required information under item A. The variance shall must be granted by the commissioner if, in the licensing procedure or enforcement of this chapter, all of the following are present:

- A- (1) requiring a particular facility to strictly comply with one or more of the provisions the rule part cited in the variance request will result in undue financial hardship, jeopardize the detention of inmates, or jeopardize the health, safety, security, detention; or well-being of the inmates or facility staff;
- B- the facility is otherwise in substantial conformity with this chapter or is making satisfactory progress toward substantial conformity;
- C- granting the variance will not preclude the facility from making satisfactory progress toward substantial conformity with this chapter;
- D- (2) granting the variance will not leave the interests and well-being of the inmates or facility staff unprotected; and
- E- (3) the facility will take substitute action as is necessary or available to comply facility's alternative measure, if proposed in the variance request, complies with the general purpose of this chapter to the fullest extent possible.

Subp. 1a. **Renewing variance.**

A. A facility administrator may request to renew a variance. A request must:

- (1) contain the information under subpart 1, item A; and

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(2) be submitted through the DOC Portal at least 30 days before the variance expires.

B. The commissioner must renew a variance if the facility administrator:

(1) continues to satisfy the requirements under subpart 1, item B; and

(2) demonstrates compliance with the alternative measure, if any, taken when the initial variance was granted or renewed.

Subp. 1b. **Revoking or not renewing variance.**

A. The commissioner must revoke or not renew a variance as follows:

(1) the commissioner must not renew a variance if a renewal request is received less than 30 days before the variance expires; and

(2) the commissioner must revoke or not renew a variance if the commissioner determines that the requirements under subpart 1, item B, are not being met.

B. The commissioner must notify the facility administrator through the DOC Portal within 60 days of the commissioner's determination.

Subp. 1c. **Commissioner decision is final.** The commissioner's decision to grant, deny, revoke, or not renew a variance is final and not subject to appeal under the contested case provisions of Minnesota Statutes, chapter 14.

Subp. 2. **Emergency notification declarations; notification and review.**

A. When ~~If~~ a facility administrator declares an emergency, ~~the applicable rules may be suspended during the duration of the emergency;~~ the facility administrator ~~or designee shall~~ must notify the DOC in writing through the DOC Portal within ~~72~~ 24 hours of:

(1) ~~of an~~ the emergency that results in the suspension of; and

(2) any ~~rule under this chapter~~ requirement in this chapter that the facility is unable to comply with because of the emergency and why the facility cannot comply.

B. When the commissioner is notified of an emergency under item A, the commissioner must review whether the requirement under item A, subitem (2):

(1) is related to the emergency; and

(2) jeopardizes the health, safety, and security of inmates or facility staff.

C. If the commissioner determines that the suspended requirement is not related to the emergency or jeopardizes the health, safety, and security of inmates or facility staff, the commissioner must:

(1) notify the facility administrator in writing of the violation; and

(2) order the facility administrator to immediately comply with the suspended requirement.

[For text of subparts 3 to 7, see Minnesota Rules]

Subp. 8. **Overcrowded facility plan.** Whenever an overcrowded A facility administrator must attempt to contract with other facilities to use available per diem bed space when a facility is overcrowded. If a facility condition occurs is

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~~overcrowded~~ and the conditions in subpart 7 exist, a facility ~~shall have~~ administrator must follow a written plan that requires ~~the use of~~ using available contract per diem bed space in ~~DOC-approved facilities within a 125-mile radius~~. The plan ~~shall require the following~~ must include the requirements under items A to C.

A. Unless otherwise provided by a corrective action plan or licensing action under part 2911.0300, the facility administrator may exceed approved bed capacity established under parts part 2911.0330 to 2911.0370 only when if no space is available for contract per diem usage within 125 miles.

[For text of items B and C, see Minnesota Rules]

[For text of subpart 9, see Minnesota Rules]

2911.0900 STAFFING REQUIREMENTS.

Subpart 1. Staffing plan and staffing analysis required; review.

A. ~~The A~~ facility administrator ~~shall prepare and retain~~ must develop and follow a written staffing plan: ~~The staffing plan shall identify that meets the requirements under this part and identifies:~~

~~A-~~ (1) ~~jail personnel staff~~ assignments for:

~~(1)~~ (a) facility administration and supervision;

~~(2)~~ (b) facility programs including exercise and recreation;

~~(3)~~ (c) inmate admission, ~~booking~~, supervision, and custody;

~~(4)~~ (d) support services including medical, food service, maintenance, and clerical; and

~~(5)~~ (e) other jail-relevant ~~facility-relevant~~ functions such as ~~escort and transportation of~~ escorting and transporting inmates;

~~B-~~ (2) ~~the days of the week~~ that the assignments are filled;

~~C-~~ (3) ~~the hours of the day~~ that the assignments are covered; and

~~D-~~ (4) ~~any deviations from the plan with respect to~~ during weekends, holidays, or other ~~atypical situations must be considered~~ foreseeable schedule disruptions.

B. ~~At least annually~~, the facility administrator or ~~designee shall~~ must review the facility's staffing plan ~~at least once each year~~. ~~The review shall be documented in written form sufficient to indicate that staffing plans have been reviewed and revised as appropriate to the facility's needs or referred to the facility's governing body for funding consideration.~~ After reviewing the plan, the facility administrator must document:

~~A facility with a design capacity of more than 60 beds must have a staffing analysis and staffing plan approved by the commissioner of corrections. This staffing analysis shall include all posts, functions, net annual work hours appropriate to each post, and total number of employees to fill the identified posts and functions:~~

(1) the review; and

(2) whether the facility administrator has revised the plan as needed to comply with this chapter, including the staffing ratios and staffing requirements under this part.

C. At a facility's inspection, the commissioner must review the facility's staffing plan or changes to the plan. The commissioner must approve the plan or changes if the commissioner determines that the plan or changes:

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- (1) comply with the staffing ratios and staffing requirements under this part; and
- (2) will not jeopardize the health, safety, or security of inmates or facility staff.

D. If the commissioner disapproves a facility's staffing plan, the commissioner must notify the facility in writing:

- (1) of the changes needed for approval under item C; and
- (2) that, if the changes are not made, the facility is subject to a licensing action under part 2911.0300 to reduce the facility's approved bed capacity under part 2911.0330.

Subp. 1a. Staffing analysis required.

A. A facility administrator must conduct a staffing analysis if the facility administrator has not conducted a staffing analysis before the effective date of this rule. A facility administrator conducting an initial staffing analysis must analyze:

- (1) all security posts;
- (2) facility functions;
- (3) net annual work hours appropriate to each security post; and
- (4) total number of staff needed to fill the identified posts and functions.

B. For all facilities, a facility administrator must review the facility's staffing analysis at least annually to determine if any changes are needed to the staffing plan under subpart 1.

[For text of subparts 2 to 11, see Minnesota Rules]

Subp. 12. **Sole supervision; assistance for dispatcher or custody staff person member.** ~~In~~ If a facility that uses the a dispatcher or custody position as sole supervision, the dispatcher or custody staff person member must be assisted on duty by another custody staff person member when the facility's inmate population exceeds five.

Subp. 13. [Repealed, 38 SR 523]

Subp. 14. Sole supervision; backup resource assistance.

A. ~~In facilities that use the~~ If a facility uses a dispatcher or custody position as sole supervision under subpart 12, policy and procedures shall be implemented that assure a reasonable level of the facility administrator must develop a policy and procedure on security and backup resource assistance for the dispatcher or custody person in circumstances that require emergency response assistance. The DOC shall review and approve the policy and procedures. that at a minimum:

- (1) requires a dispatcher or custody staff member to always carry a two-way communication device with a man-down feature;
- (2) states when the dispatcher or custody staff member must conduct a check-in with backup resource assistance and requires the check-ins to be documented;
- (3) describes how the facility will transfer an inmate to another facility when the facility's inmate population exceeds five and backup resource assistance is unavailable;

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(4) identifies how the facility will ensure staffing to support the dispatcher or custody staff member in an emergency; and

(5) provides how backup resource assistance will enter the facility if the dispatcher or custody staff member becomes incapacitated.

B. The two-way communication device under item A must be monitored by the backup resource assistance.

C. At least annually, the facility administrator must review the policy and procedure to determine if any changes are needed to the facility's staffing plan under subpart 1.

Subp. 15. **Ratio of custody staff to inmates, reporting incidents, and responding to emergencies.**

A. For purposes of this subpart, the following terms have the meanings given:

(1) "direct supervision" means a supervision style in which custody staff posted inside a housing unit continuously supervise inmates;

(2) "linear" means a supervision style in which custody staff supervise inmates by patrolling corridors arranged alongside cells; and

(3) "podular" means a supervision style in which custody staff supervise inmates through a control center or staff post in the center of the facility with cells, dayrooms, or program areas surrounding the perimeter in a circular or pie-shaped layout with direct sight lines into the units.

~~A. B. Except as provided under subpart 12, a facility with a design capacity of 60 50 or fewer beds shall meet the staffing ratios in this item. For inmate supervision, the overall facilitywide must have a minimum ratio of custody staff to inmates shall be for inmate supervision of one custody officer staff member to 25 inmates. These staff must be in the facility and on duty at all times and not involved in temporary duties outside of the facility. Included in this ratio are all staff who are assigned and trained in the custody and supervision of inmates as their primary duty. Staff not directly responsible for custody and supervision of inmates such as administrative, supervisory, program, bailiff, or support staff shall not be included in this ratio.~~

~~B. C. A facility with a design capacity of 60 51 or more beds shall meet the staffing ratios in this item. For inmate supervision, the overall facilitywide must have a minimum ratio or custody staff to inmates shall not be less than for inmate supervision as follows:~~

~~(1) 1 custody staff member to 60 inmates for direct supervision housing units with lockdown capability;~~

~~(2) 1 custody staff member to 48 inmates for direct supervision dormitories;~~

~~(3) 1 custody staff member to 40 inmates for indirect or podular inmate supervision; and~~

~~(4) 1 custody staff member to 25 inmates for linear housing areas.~~

~~D. When calculating the staffing ratios under items B and C:~~

~~(1) custody staff must be present in the facility, must be at their assigned posts, must be on duty at all times, and must not be involved in temporary duties outside the facility;~~

~~(2) the following staff are not included in the ratios under item C:~~

~~(a) custody staff responsible for escort and admissions under subpart 17, item A, subitems (1) and (2);~~

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(b) custody staff whose primary duty is supervising inmates outside of housing units; and

(c) custody staff responsible for external transportation or court security under subpart 17c; and

(3) override reduction under subpart 23 applies except as provided under subpart 23, item B.

~~C. A facility administrator may apply for a specific variance from the staffing requirements in this subpart from the commissioner. Consideration of this variance shall require that supervision of inmates is accomplished in an appropriate manner and that the safety and security of the facility, staff, and inmates are not compromised.~~

Subp. 16. [Repealed, 38 SR 523]

Subp. 17. **Escort, movement, or booking and admission staff.**

A. Class I to Class VI facilities' facility custody staff shall responsible for escort and admissions must be provided as follows:

~~A. (1) internal escort, rover, or movement officers in sufficient numbers as determined in the approved staffing plan under this subpart escort staff to ensure that:~~

~~(a) inmates have access to staff, programs, activities, and both health care and non-health-care services; and that~~

~~(b) the facility's safety and security of the facility is not compromised; and~~

~~B. (2) sufficient staff present to provide for the booking of offenders without a reduction in the safety or security of the facility and inmates; admissions without jeopardizing the health, safety, or security of inmates or facility staff.~~

B. As part of the written staffing plan and annual review under subpart 1, a facility administrator must determine and document whether the facility will need more admissions staff under item A, subitem (2).

C. For purposes of this subpart, "escort staff" includes rover or movement staff or other custody staff responsible for escorting inmates within or from a facility.

Subp. 17a. **Multifloor jails.**

~~C. In Class I to Class VI facilities with multifloor jails, custody staff must be posted on each floor occupied by inmates; and. For purposes of this subpart, a floor does not include a mezzanine.~~

Subp. 17b. **Post orders.**

~~D. sufficient numbers of In Class I to Class VI facilities, there must be staff to complete duties listed in post orders under part 2911.5000, subpart 1.~~

Subp. 17c. **External transportation and court security.** Class I to Class VI facility custody staff shall must not be used for the external transportation of externally transporting inmates or for court security if the level of inmate supervision, inmate admission, programs, or internal inmate movement would;

A. be reduced below minimums afforded under the facility's minimum staffing ratios under its staffing plan; or

B. jeopardize the health, safety, or security of inmates or facility staff.

[For text of subparts 18 to 22, see Minnesota Rules]

Subp. 23. **Reduced staffing ratio; custody staff override.**

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A. The ratio of custody staff to inmates under subpart 15 may be reduced proportionate to the facility's population decrease during ~~those~~ hours that inmates are released from the facility for work release, educational release, community service, or sentencing to service activities.

B. No override reduction is allowed in ~~any a~~ facility using a custody staff ~~person member~~ or dispatcher as sole supervision or ~~facilities a facility~~ using staffing patterns that employ one dispatcher and one custody staff ~~person member~~.

C. Facilities using ~~the override allowed in this subpart~~ reduction must document:

(1) the number of inmates in the facility on an hourly basis and those under the ~~facilities' facility's~~ jurisdiction that are temporarily released from the facility for work release, education release, community service, or sentencing to service programs. ~~The facility shall also document; and~~

(2) the number of available custody staff for the population housed in the facility on an hourly basis.

[For text of subparts 24 and 25, see Minnesota Rules]

Subp. 26. [See repealer.]

Subp. 27. **Control center.** A facility's control center must be staffed with at least one custody staff member or dispatcher at all times:

A. unless the facility is using sole supervision under subpart 12; or

B. except when all of the staff member's security duties can be taken over by another custody staff member or dispatch located within a secured area.

2911.1000 TRAINING PLAN.

Subpart 1. **Training plan required; documentation.**

A. A facility administrator or designee shall must:

(1) develop and ~~implement~~ follow a written training plan for the orientation of orienting new employees staff and volunteers; and

(2) provide for ~~continuing in-service~~ annual training programs for all employees and volunteers.

B. All training plans shall must be documented and describe the training's curriculum, methods of instruction, and objectives. In-service training plans shall be prepared annually and shall provide documentation indicating that training for individual employees has taken into consideration their length of service, position within the organization, and previous training completed.

Subp. 2. **Annual training according to job assignment.** All facility employees must complete annual training hours that are relevant to their assigned job duties and according to parts 2911.1200 to 2911.1500.

2911.1200 ~~CLERICAL AND SUPPORT EMPLOYEES STAFF WITH MINIMAL OR REGULAR OR DAILY~~ INMATE CONTACT; TRAINING.

Subpart 1. **Minimal inmate contact.** A facility shall have administrator must develop and follow a written policy and procedure that provides that all new clerical and support employees that support staff who have minimal inmate contact receive at least 24 hours of orientation and training during their first year of employment. Sixteen of these Of the 24 hours are, 16 hours must be completed before being independently assigned to a particular job. Persons in this category are given an additional 16 hours of training each subsequent year of employment.

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Subp. 2. **Regular or daily inmate contact.**

~~A.~~ A facility ~~shall have administrator must develop and follow a written~~ policy and procedure that provides that all ~~new clerical and support employees staff~~ who have regular or daily inmate contact receive at least 40 hours of orientation and training during their first year of employment. These hours are to be completed before being independently assigned to a particular job. The employees are given an additional 16 hours of training each subsequent year of employment.

~~B.~~ At a minimum, this training covers the following areas For staff who have regular or daily in-person contact with an inmate, staff must be trained on at least the following topics before being independently assigned to a job:

~~A-~~ (1) security procedures and regulations;

~~B-~~ (2) rights and responsibilities of inmates;

~~C-~~ (3) all applicable emergency procedures;

~~D-~~ (4) interpersonal relations and communication skills; and

(5) response-to-resistance regulations and tactics under part 2911.4950, including training on security equipment, that are necessary for staff members to perform their job duties.

~~E-~~ first aid;

Subp. 3. **Annual training.** Staff under this part must complete 16 hours of annual training after the first year of employment and every year thereafter.

2911.1300 CUSTODY STAFF; TRAINING.

Subpart 1. **Policy and procedure required; initial training.** A facility ~~shall have administrator must develop and follow a written~~ policy and procedure that ~~provides that requires~~ all custody staff to receive at least 120 hours of orientation and training during the their first year of employment.

Subp. 2. **Required training before independent assignment.** ~~Forty of these hours are completed prior to being~~ Before a custody staff member may be independently assigned to a particular post. All persons in this category are given an additional 16 hours of training each subsequent year. At a minimum, training completed before independent assignment to a particular post shall include, they must receive training on the following topics:

[For text of items A and B, see Minnesota Rules]

~~C.~~ signs of suicide risk and suicide precautions; well-being checks, including training on the facility's policy and procedure on well-being checks;

~~D.~~ vulnerable identifying special-needs inmates;

~~E.~~ response to resistance response-to-resistance regulations and tactics under part 2911.4950, including training on security equipment and, consistent with Minnesota Statutes, section 241.88, pregnancy restraints;

[For text of items F to L, see Minnesota Rules]

~~M.~~ distribution of medications admissions policy and procedure under part 2911.2525, including medical and mental health screenings;

~~N.~~ right to know the facility's policy and procedure manual under part 2911.1900; and

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O. blood-borne pathogens and communicable diseases, in cooperation with the health authority, administering first aid and CPR according to subpart 3 and medical training with instruction in:

- (1) recognizing signs and symptoms of illness and what to do in a medical emergency;
- (2) administering opiate antagonists as allowed under statute if available for use in the facility;
- (3) training on opioid emergency procedures that may include the steps under the SAMHSA Opioid Overdose Prevention Toolkit, which is incorporated by reference under part 2911.0210;
- (4) obtaining medical assistance for an inmate's medical needs;
- (5) mental health, including:
 - (a) recognizing signs and symptoms of:
 - i. a mental illness; and
 - ii. a developmental disability;
 - (b) communicating with inmates who have signs or symptoms of a mental illness or a developmental disability; and
 - (c) communication between custody staff and health care personnel on an inmate's mental health management;
- (6) recognizing signs and symptoms, including dehydration, of substance use, substance withdrawal, and substance overdose;
- (7) procedures for inmate transfers to health care facilities;
- (8) distributing medications, if part of a staff member's job duties; and
- (9) blood-borne pathogens and communicable diseases; and

P. instruction on suicide risk, suicide prevention, and procedures for suicide intervention, including:

- (1) identifying warning signs and symptoms of suicidal behavior;
- (2) communicating with and responding to a suicidal inmate or an inmate with suicidal behavior; and
- (3) communication between custody staff and health care personnel about an inmate's suicidal behavior.

Subp. 3. **Training for first aid and CPR.** All custody staff must be trained in first aid and CPR by a certified instructor teaching a certified training course. Custody staff do not need to be certified in first aid and CPR, provided they receive regular training on first aid and CPR by a certified instructor teaching a certified training course in accordance with certification standards.

Subp. 4. **Annual training.** After the first year of employment and every year thereafter, custody staff must receive at least 20 hours of annual training, which must include at least the following topics:

- A. well-being checks;
- B. admissions;

C. response to resistance; and

D. medical training and training on suicide risk and prevention under subpart 2, items O and P.

2911.1500 PROGRAM STAFF; TRAINING.

Subpart 1. **Training required; training topics.** A facility ~~shall have administrator~~ must develop and follow a written policy and procedure that provides that the facility's program personnel staff receive at least 40 hours of orientation and training in the during their first year of employment, and at least 16 hours of training each year thereafter. This training must cover, At a minimum, the training must cover the following topics:

[For text of items A to H, see Minnesota Rules]

I. administering first aid and CPR.

Subp. 2. **Annual training.** Staff under this part must complete 16 hours of annual training after the first year of employment and every year thereafter.

Subp. 3. **Training for first aid and CPR.** Part 2911.1300, subpart 3, on training for first aid and CPR applies to program staff under this part.

2911.1600 DESIGNATED TRAINING OFFICER.

A facility ~~shall~~ must have a designated training officer responsible for maintaining:

A. ~~maintenance of training plans as required in~~ under part 2911.1000;

B. ~~maintenance of training records in sufficient detail to allow inspector assessment of compliance with parts 2911.1200 to 2911.1700 training records in an organized, retrievable format that is legibly documented and accessible for all employees and includes at least the following information for each employee:~~

(1) training topics;

(2) completed training hours; and

(3) training records that describe each training; and

C. ~~documentation of documenting requirements for~~ waivers of training requirements based on equivalent training received before employment or demonstrated competency through proficiency testing.

2911.1900 POLICY AND PROCEDURE ~~MANUALS~~ MANUAL.

Subpart 1. **Manual required.** A facility ~~shall have administrator~~ must develop and follow a written policy and procedure manual that is electronically available to staff and relevant state and local regulatory authorities and defines the philosophy and method for operating and maintaining the facility. This manual shall be made available to all employees, reviewed annually, updated as needed, and staff trained accordingly.

Subp. 2. **Minimum requirements.** The manual ~~shall~~ must include, ~~at a minimum,~~ the following ~~chapters~~ policies and procedures:

[For text of items A to M, see Minnesota Rules]

N. admissions, orientation, classification, property control, and release discharge;

O. inmate activities, programs, and services; and

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P. a written suicide prevention and, intervention, and follow-up plan;

Q. well-being checks; and

R. any other policy and procedure required under this chapter.

Subp. 3. Code-of-conduct policy required.

A. A facility administrator must develop and follow a written code-of-conduct policy for facility staff to follow while working in the facility. At a minimum, the policy and procedure must explain:

(1) what conduct is expected of all staff and the consequences for violating the policy; and

(2) the expectations for interacting with the public.

B. All facility staff must be trained on the policy annually.

Subp. 4. Required manual review; staff training.

A. The A facility administrator or designee shall must review the policy and procedure manuals manual at least once each year annually. The review shall must be documented in written form sufficient to indicate that the policies and procedures have been reviewed and amended as appropriate to reflect any facility changes to the policies and procedures.

B. For each policy manual amendment or addition, all affected facility staff must:

(1) acknowledge in writing the amendment or addition; and

(2) be trained on the amendment or addition as needed for the staff member to comply with their job duties under this chapter.

2911.2100 STORAGE AND PRESERVATION OF STORING FACILITY AND INMATE RECORDS.

A. Space shall must be provided for the safe storage of to securely store facility and inmate records no matter the record's format.

B. A facility administrator must not knowingly withhold relevant records or give false or misleading records to the commissioner in connection with:

(1) an inspection;

(2) a review of an emergency or unusual occurrence;

(3) a corrective action plan or licensing action under part 2911.0300 or Minnesota Statutes, section 241.021;

(4) complaints or grievances; or

(5) any commissioner action needed to review a facility's compliance under this chapter or Minnesota Statutes.

2911.2200 FILING AND DISPOSITION OF MAINTAINING INMATE RECORDS.

Inmate records shall must be filed into individual folders or maintained through technology such as computerized-record systems that permit an inmate's record to be and readily accessed at one source accessible according to Minnesota

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Statutes, sections 15.17 and 138.17.

2911.2300 PRIVACY OF AND ACCESS TO INMATE RECORDS.

Privacy of inmate records and inmate access to ~~factual, nonconfidential~~ public and private data in the inmate's personal files ~~shall be provided in conformity with state~~ are governed according to Minnesota Statutes, chapter 13, and other applicable law.

2911.2400 DETENTION INFORMATION SYSTEM REQUIREMENTS; DOC PORTAL.

Subpart 1. **DOC Portal.** ~~The A~~ facility administrator ~~shall~~ must designate a staff ~~person~~ member responsible for reporting of information on ~~persons detained or incarcerated~~ inmates to the DOC ~~in a manner consistent with requirements in the DOC's Statewide Supervision System, Detention Entry Guide (2010) and any amendments, which is incorporated by reference, subject to frequent change, and available at the State Law Library, 25 Rev. Dr. Martin Luther King Jr. Blvd., St. Paul, MN 55155~~ Portal.

Subp. 2. **Daily reporting.** Unless otherwise ~~provided by law,~~ detention information system reporting requirements shall be met must be reported to the DOC Portal in an accurate manner daily.

2911.2500 ~~SEPARATION OF~~ SEPARATING INMATES.

Subpart 1. **General Separating inmates; when required.** A combination of separate housing units inclusive of special management areas, general population, and minimum security areas and cells, dormitories, and dayroom spaces ~~shall~~ must be provided to ~~properly segregate~~ separate inmates ~~pursuant~~ according to Minnesota Statutes, section 641.14.

The facility ~~shall~~ must provide for the separate housing of the following categories of inmates:

[For text of items A to C, see Minnesota Rules]

D. inmates requiring administrative ~~segregation~~ separation;

[For text of items E to G, see Minnesota Rules]

[For text of subpart 2, see Minnesota Rules]

2911.2525 ADMISSIONS.

Subpart 1. ~~Policies and procedures~~ **Policy and procedure required.** A facility ~~shall have written policies and procedures for processing new inmates to the facility~~ administrator must develop and follow a policy and procedure on admission to include, at a minimum, ~~the following:~~

~~A. obtaining and documenting available emergency medical information within two hours of admission;~~

A. requiring custody staff to request and document at least the following information from an inmate's arresting officer or person transporting the inmate:

(1) whether the inmate:

(a) had any suicidal comments or behaviors; or

(b) has self-reported or suspected substance use;

(2) whether the inmate has any injuries or health care concerns;

(3) whether the inmate refused medical care before admission; and

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(4) whether the inmate received medical clearance from a hospital or other health care facility before admission.

~~B. verification of verifying~~ court commitment papers or other legal documentation of detention. ~~Verification shall include checking, including verifying the inmate's admission date of admission, duration of confinement, and specific charges or convictions against them;~~

~~C. a search of the searching an~~ inmate and ~~the inmate's their~~ possessions;

~~D. inventory and storage of inventorying and storing~~ the inmate's personal property according to subpart 4;

~~E. within two hours of admission, making an initial attempt to document and conduct the:~~

~~(1) initial medical screening to include an assessment of the inmate's health status, including any medical or under part 2911.5800, subpart 6; and~~

~~(2) mental health needs screening;~~

~~F. telephone calls made by the inmate during the booking and admission process and prior to assignment to other housing areas; allowing for an inmate to make a telephone call in accordance with part 2911.3400, subparts 2 and 3;~~

~~G. within 24 hours of admission, allowing inmate access to~~ shower and hair cleansing;

~~H. issue of issuing~~ bedding, clothing, and personal hygiene items according to the rule requirements applicable to the inmate's anticipated length of stay of the inmate;

~~I. photographing and fingerprinting, including notation of noting~~ identifying marks or unusual characteristics such as birthmarks or tattoos;

~~J. interviewing to obtain the following identifying inmate data:~~

~~(1) name and aliases of person;~~

~~(2) current or last known address, or last known address;~~

[For text of subitems (3) to (9), see Minnesota Rules]

~~(10) within two hours of admission, emergency contact information, including the contact's name, relation, address, and telephone number; and~~

[For text of subitem (11), see Minnesota Rules]

~~K. initial classification of the inmate and assignment determining classification and assigning the inmate to a housing unit;~~

~~L. an assigned assigning an inmate a~~ booking number; ~~and~~

~~M. if available, obtaining an inmate's Social Security number, driver's license number, or state identification number, if available; and~~

~~N. documenting whether an inmate refused to:~~

~~(1) sign a document or provide information required under this part; or~~

~~(2) complete the admissions process.~~

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Subp. 2. **Privacy Not public data.** Intake procedures dealing with information protected by must comply with the Minnesota Government Data Practices Act, Minnesota Statutes, chapter 13, shall be conducted in a manner and location that assures the personal privacy of the inmate and the confidentiality of the transaction from unauthorized personnel.

Subp. 2a. **Data privacy.** An inmate admitted to a facility shall be advised of rights under Minnesota data privacy statutes with respect to information gathered by the facility and to whom the information will be disseminated. [Renumbered from part 2911.2700, subpart 4.]

Subp. 2b. **Official charge, legal basis for detention.** An inmate admitted to a facility shall be advised of the official charge or legal basis for detention and confinement. [Renumbered from part 2911.2700, subpart 3.]

Subp. 2c. **Intake release of information.**

A. Within two hours of an inmate's admission, staff must provide the inmate with an intake release of information form in accordance with Minnesota Statutes, section 241.021, subdivision 7, that complies with applicable state and federal law.

B. An inmate's form must be maintained until the inmate is released from custody and must be updated if requested by the inmate.

Subp. 3. **Orientation to rules and services information.**

A. A facility shall administrator must develop and follow a written policy and procedure that provides:

A. (1) provides a method for all newly admitted inmates during the admission process to receive orientation information in a language or manner the inmates that an inmate can attempt to understand; and

B. (2) documentation by requires an inmate to sign and date a statement that is signed and dated by the inmate attesting that the inmate completed orientation has read, or been read or presented, the orientation information in a language or manner that they could attempt to understand.

B. Custody staff must provide or present at least the following summary information from the facility's inmate handbook under part 2911.2700, subpart 1:

- (1) visitation procedures;
- (2) telephone procedures, including procedures for calling an attorney or another legal representative;
- (3) how to make medical requests;
- (4) mail procedures;
- (5) commissary procedures;
- (6) how to receive items if indigent;
- (7) that there is a grievance procedure;
- (8) that there are disciplinary consequences for not following the inmate handbook or a facility rule;
- (9) how to file a complaint with the department; and
- (10) how to obtain or locate a copy of the inmate handbook.

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Subp. 4. **Inmate personal property.** A facility ~~shall have~~ administrator must develop and follow a written policy and procedure that:

- A. provides for the itemized inventory and secure storage of all an inmate's personal property of a newly admitted inmate upon admission, including money and other valuables;
- B. specifies any personal property that an inmate may retain in the inmate's possession possess in the facility; and
- C. provides that the inmate shall must:
 - (1) sign a receipt for all property held until release. discharge; and
 - (2) be explained that they can request and receive a copy of the inventory record.

Subp. 5. **Program options and activities.** An inmate shall be provided written information on program options and activities within 24 hours of admission, excluding weekends and holidays. A facility staff member shall review program options and activities with inmates who are unable to read, within 24 hours of admission, excluding weekends and holidays.

A Class I facility is exempt from this requirement with the exception of those approved by the commissioner to house inmates serving alternative sentences. [Renumbered from part 2911.2700, subpart 2.]

Subp. 6. When inmate is unable or unwilling to complete the admissions process.

A. A facility administrator must develop and follow a policy and procedure on how often custody staff must attempt to complete the admissions process for an inmate who is unable or unwilling to complete the process. At a minimum, the policy and procedure must require staff, at least every six hours, to continue to make attempts to have an inmate complete the medical and mental health screenings under subpart 1.

B. Staff must document any follow-up attempts on attempting to complete the admissions process, including the medical and mental health screenings, and why they were unable to complete the admissions process and the medical and mental health screenings.

2911.2550 ~~RELEASES~~ DISCHARGES.

Subpart 1. **Release Discharge procedures.** A facility ~~shall have written procedures~~ administrator must develop and follow a policy and procedure for releasing discharging inmates that include includes, at a minimum, the following:

*[For text of items A to D, see Minnesota Rules]
[For text of subparts 2 and 3, see Minnesota Rules]*

2911.2560 DISCHARGE PLANNING.

Subpart 1. **Discharge planning; generally.**

- A. This subpart applies to all inmates except as provided under subpart 2.
- B. A facility administrator must develop and follow a policy and procedure for discharge planning. Upon an inmate's discharge, facility staff must:
 - (1) provide the inmate with a list of local, state, or federal health care, transportation, employment, educational, and other community reentry resources; and
 - (2) when applicable under part 2911.6800, subpart 3, provide the inmate with a supply of the inmate's medications.

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Subp. 2. Discharge planning; inmates with a serious and persistent mental illness.

A. This subpart applies to all inmates with a serious and persistent mental illness in accordance with Minnesota Statutes, section 641.155, subdivision 2.

B. A facility administrator must develop and follow a policy and procedure on complying with the discharge requirements under Minnesota Statutes, section 641.155, subdivision 2.

Subp. 3. Documenting refusal to participate in discharge planning. If an inmate refuses to participate in a discharge under part 2911.2550 or discharge planning under this part, the facility administrator must document the refusal in the inmate's file.

2911.2700 INFORMATION TO INMATES.

Subpart 1. ~~Information made available to inmates~~ **Inmate handbook.** Copies of all facility policies, procedures, and rules governing conduct and disciplinary consequences; procedures for obtaining personal hygiene and commissary items; and policies governing visiting, correspondence, bathing, laundry, and clothing and bedding exchange shall relating to an inmate's rights, duties, and responsibilities must be made available to all inmates in a language or be presented in a manner that each inmate can attempt to understand.

Subp. 1a. **Inmates with special needs or disabilities.** Information ~~will~~ under subpart 1 must be made available to disabled in a manner accessible to inmates with special needs or disabilities, including those that are hearing impaired, visually impaired, or unable to speak in a form that is accessible to them. Subpart 1b, item B, applies to inmates under this subpart.

Subp. 1b. **Non-English-speaking inmates.**

A. Information required under ~~this subpart shall~~ 1 must be available in English. ~~There shall be~~ A facility administrator must develop and follow procedures in place to address the language barriers of non-English-speaking inmates and to provide them the information under subpart 1.

B. ~~Policy~~ Policies and procedures shall must ensure, to the extent practical, that ~~inmates who are an inmate who is unable to speak English are~~ is provided with the information outlined in this part under part 2911.2525, subparts 2 to 5, within 24 hours of admission to the facility in a form manner that is accessible to the inmate.

Subp. 2. [Renumbered part 2911.2525, subp 5]

Subp. 3. [Renumbered part 2911.2525, subp 2b]

Subp. 4. [Renumbered part 2911.2525, subp 2a]

2911.2790 ADMINISTRATIVE SEPARATION AND DISCIPLINARY SEGREGATION; PLACEMENT GENERALLY.

An inmate must not be placed in administrative separation or disciplinary segregation solely because:

A. of their gender identity;

B. they are pregnant or six weeks postpartum; or

C. of a known diagnosis of a serious and persistent mental illness or a known developmental disability.

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2911.2800 ADMINISTRATIVE ~~SEGREGATION~~ SEPARATION.

Subpart 1. Policy and procedure on administrative segregation separation required.

A. Each A facility administrator or designee shall must develop and implement policies follow a policy and procedures procedure for administrative segregation separation.

B. Unless there is a serious and immediate safety or security concern, nothing in this chapter allows an inmate to automatically be placed in administrative separation. Each decision to place an inmate in administrative separation must:

(1) be made on a case-by-case basis; and

(2) consider any available alternatives to placement that could safely address the reason for placement unless placement is needed because of a serious and immediate safety or security concern.

C. An inmate must not remain in administrative separation any longer than necessary to address the reason for placement.

Subp. 2. **Separate and secure housing.** Administrative segregation shall separation must consist of separate and secure housing; but shall not cannot involve any more deprivation of privileges an item or activity, including programming, than is necessary to obtain the objective of protecting protect the inmate, other inmates, facility staff, or the public from serious and immediate harm.

Subp. 3. [Repealed, 38 SR 523]

Subp. 4. **Policy requirements.** Written policy and procedure shall The policy and procedure must provide that the:

A. that the reason for placing an inmate in administrative separation is documented and communicated to the inmate, including any available alternatives to placement that were considered;

B. that the facility administrator reviews the status of inmates in administrative segregation is reviewed separation at least every seven days. These policies shall provide:, documents whether continued placement is needed, and communicates the decision to the inmate;

C. how the facility administrator determines whether a more-frequent review of an inmate's status is needed;

D. how the facility administrator consults with health care personnel when providing mental health care under part 2911.2860 when conducting the administrative review;

A. E. that the administrative review is documented and placed in the inmate's file;

B. F. that the inmate in administrative segregation receive visits from separation is visited by the facility administrator or designee a minimum of at least once every seven days as a part of the administrative review process; and

C. G. that the review process that is used to release an inmate from administrative segregation separation is specified; and

H. that for all inmates placed in administrative separation, the following applies:

(1) any known inmate health or safety concerns and any observed signs of health improvements, if applicable to the reason for placement, must be documented;

(2) any health or safety concerns and health improvements must be reviewed as part of the administrative review process; and

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(3) action must be taken and documented as needed to address the concerns and health improvements.

Subp. 4a. **Requesting review of status.** An inmate may request that a facility administrator review the inmate's initial placement in administrative separation.

Subp. 4b. **Behavior-management plan.**

A. This subpart does not apply to an inmate who:

(1) requests placement in administrative separation;

(2) is placed in administrative separation for protective custody or because of a safety or security threat such as gang or criminal activity; or

(3) is placed in administrative separation for medical isolation or infirmary status.

B. If an inmate remains in administrative separation for more than seven consecutive days, a facility administrator, in consultation with health care personnel, must develop a behavior-management plan for the inmate, as applicable to the inmate's reason for placement in administrative separation. The plan must include at least the following:

(1) any known inmate behavioral problems, including:

(a) the circumstances leading to being placed in administrative separation;

(b) staff safety concerns, including inmate assaultive behavior or escape concerns; and

(c) any documented mental health concerns; and

(2) any incentives for the inmate to demonstrate positive or safe behavior that can accelerate their return to general population.

C. The facility administrator must review the inmate's behavior-management plan at least every seven days as part of the administrative review process. The facility administrator must:

(1) evaluate the inmate's behavior and progress in the plan;

(2) determine whether the plan should be amended; and

(3) evaluate the inmate's progress toward transitioning out of administrative separation, if applicable to the inmate's reason for placement.

Subp. 5. [Repealed, 38 SR 523]

Subp. 6. [See repealer.]

Subp. 7. **Deprivation report.**

A. ~~Written~~ The policy and procedure shall must provide that whenever when an inmate in administrative segregation separation is deprived of any usually authorized item or activity usually authorized under a facility's policy and procedure on administrative separation, a report of the action is must be made and forwarded to the facility administrator or designee, who must then determine whether the item or activity should continue to be deprived. The determination must be documented.

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B. This subpart does not apply if an inmate is on suicide watch.

2911.2850 INMATE DISCIPLINE ~~PLAN~~; DISCIPLINARY SEGREGATION.

Subpart 1. **Plan.** A facility ~~shall have an administrator~~ must develop and follow a written inmate discipline plan that explains the:

A. administrative disciplinary sanctions for specific behaviors, omissions, the serious, major, and minor facility rule violations;

B. administrative hearing process for handling serious, major, and minor facility rule violations; the;

C. right to internal review, and the review process; appeal process for an inmate found guilty of a facility rule violation; and

D. process for determining whether and when step-down management will be used for an inmate in disciplinary segregation.

Subp. 2. **Disciplinary segregation.**

A. A facility administrator or designee shall have and implement policies and procedures must develop and follow a policy and procedure for disciplinary segregation. An inmate on disciplinary segregation status must be separated from the general population. Except as provided under item B, a facility is subject to the following limitations on placing an inmate in disciplinary segregation:

(1) for a minor violation, an inmate must not be placed in disciplinary segregation longer than ten consecutive days;

(2) for a major violation, an inmate must not be placed in disciplinary segregation longer than 30 consecutive days; and

(3) for a serious violation, an inmate must not be placed in disciplinary segregation longer than 60 consecutive days.

B. A facility administrator may continue an inmate's placement beyond the limits under item A, subitems (2) and (3), if the facility administrator:

(1) determines and documents that continued placement is needed because the inmate continues to pose a safety or security threat to other inmates or facility staff;

(2) documents that there are no available alternatives to continued placement in disciplinary segregation;

(3) consults with health care personnel providing health care services under part 2911.2860; and

(4) for a serious violation only, notifies the department that continued placement is needed.

C. The following applies to all inmates in disciplinary segregation:

(1) any known inmate health or safety concerns and any observed signs of health improvements must be documented;

(2) any health or safety concerns and health improvements must be reviewed as part of the administrative review process under subpart 3a; and

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(3) action must be taken and documented as needed to address the concerns and health improvements.

Subp. 3. Due process.

A. Disciplinary segregation shall ~~must~~ be used only in accordance with due process to include at a ~~minimum~~ least:

~~A. (1) published rules of conduct and penalties for violation of violating facility rules;~~

~~B. (2) written notice of alleged violation of a facility rule;~~

~~C. (3) the right to be heard by an impartial hearing officer uninvolved in the underlying incident and to present evidence in defense; and~~

~~(4) the right to appeal.~~

~~B. (1) the An inmate may waive the right to a hearing in writing; and,~~

~~(2) A written documented record is must be made of the disciplinary hearing and sanctions or other actions taken as a result of the hearing;~~

~~D. the right to appeal;~~

Subp. 3a. Review required.

~~E. A. The status of an inmate placed on in disciplinary segregation for more than 30 continuous days subsequent to after a disciplinary hearing shall must be reviewed, approved, and documented by the facility administrator or designee at least once every 30 seven days; and. Every seven days, the facility administrator and, as applicable because of any health concerns, health care personnel must review the following:~~

~~(1) the inmate's compliance with segregation area rules, including positive and negative behaviors displayed;~~

~~(2) any signs or symptoms of deterioration in the inmate's physical or mental health, including suicidal ideation or self-harm;~~

~~(3) whether the inmate's reason for placement has been resolved and the inmate can safely transition to administrative separation or be returned to general population; and~~

~~(4) whether referral for step-down management is appropriate.~~

~~B. The facility shall administrator must develop written and follow a policy; and procedure; and practice that provides that inmates requires the facility administrator to visit with an inmate in disciplinary segregation receive visits from the facility administrator or designee at least once every seven days as a part of the disciplinary segregation review process;~~

Subp. 3b. Timing for hearing.

~~F. An inmate placed in segregation for an alleged rule violation shall must have a disciplinary hearing within 72 hours, excluding holidays and weekends, of segregation, exclusive of holidays and weekends, an alleged facility rule violation that may result in disciplinary segregation according to the facility's discipline plan:~~

~~A. unless the inmate waived their right to a hearing; or~~

~~B. unless documented cause can be shown for delays. Examples of causes for delay are inmate requests for delay;~~

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~~or logistical impossibility, as in the case of mass disturbances; and delay such as an inmate request for delay or logistical impossibility, as in the case of a mass disturbance.~~

~~G. the facility administrator or designee can order immediate segregation when it is necessary to protect the inmate or others. This action is reviewed and documented within three working days.~~

Subp. 4. **Other limitations on disciplinary actions.**

~~A. A facility shall have written The policy, and procedure, and practice that provides must provide that whenever if an inmate in disciplinary segregation is deprived of any usually authorized item or activity usually authorized under the facility's policy and procedure on disciplinary segregation, a report of the action is must be made and forwarded to the facility administrator, who must determine whether the item or activity should continue to be deprived. The determination must be documented.~~

~~B. This subpart does not apply if an inmate is on suicide watch.~~

[For text of subpart 5, see Minnesota Rules]

~~Subp. 6. **Removing clothing and bedding.** The facility administrator or designee shall have a policy and procedure must provide for removing clothing and bedding from an inmate. The following shall be included as follows:~~

~~A. clothing and bedding shall must be removed from an inmate only when if the inmate's behavior threatens the health, safety, or security of self, other persons, or property, and, when appropriate, alternative clothing and bedding shall must be issued;~~

[For text of items B and C, see Minnesota Rules]

~~D. the review shall under item C must be documented.~~

Subp. 7. **Disciplinary records.**

~~A. A facility shall have written The policy and procedure, that provides must provide that, when for rule violations require formal resolution, that result in disciplinary segregation, a staff members member must prepare a disciplinary report and forward it to the designated supervisor.~~

~~B. A disciplinary reports prepared by staff members shall report must include the following information:~~

~~A: (1) the specific facility rules violated;~~

~~B: (2) a formal statement of the charge;~~

~~C: (3) an explanation of the event, which should include including who was involved, what transpired, and the event's time and location of the occurrence;~~

~~D: (4) unusual inmate behavior;~~

~~E: (5) staff and inmate witnesses;~~

~~F: (6) disposition of any physical evidence;~~

~~G: (7) any immediate action taken, including the any response to resistance; and~~

~~H: (8) the reporting staff member's signature, and the date and time that the report is made.~~

Subp. 8. **Behavior-management plan.**

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A. If an inmate remains in disciplinary segregation longer than the limits under subpart 2, item A, a facility administrator, in consultation with health care personnel, must develop a behavior-management plan for the inmate, as applicable to the inmate's reason for placement in disciplinary segregation. The plan must include at least the following:

(1) any known inmate behavioral problems, including:

(a) the circumstances leading to being placed in disciplinary segregation;

(b) staff safety concerns, including inmate assaultive behavior or escape concerns; and

(c) any documented mental health concerns; and

(2) any incentives for the inmate to demonstrate positive or safe behavior that can accelerate their return to administrative separation or general population.

B. The facility administrator must review the inmate's behavior-management plan at least every seven days as part of the administrative review process. The facility administrator must:

(1) evaluate the inmate's behavior and progress in the plan;

(2) determine whether the plan should be amended; and

(3) evaluate the inmate's progress toward transitioning out of disciplinary segregation, if applicable to the inmate's reason for placement.

2911.2860 MENTAL HEALTH CARE FOR INMATES IN ADMINISTRATIVE SEPARATION AND DISCIPLINARY SEGREGATION.

Subpart 1. Health visits.

A. At least every seven days, health care personnel must attempt to visit with an inmate, either in person or via telehealth, in a segregation area to determine whether an inmate needs mental health services.

B. Health care personnel must document:

(1) each visit and whether an inmate was referred to a mental health professional for mental health care; or

(2) whether an inmate was unable or unwilling to visit with health care personnel.

Subp. 2. Mental status exam.

A. An inmate in administrative separation must receive a mental status exam as clinically indicated.

B. If an inmate is in disciplinary segregation for longer than 30 consecutive days, a mental health professional must conduct an initial mental status exam for the inmate and, if clinically indicated, at least every seven days thereafter.

Subp. 3. Staff observation; notification required. A facility's policy and procedure on administrative separation and disciplinary segregation must specify when health care personnel and custody staff must notify the facility administrator that an inmate's physical or mental health exhibits signs or symptoms of deterioration, including suicidal ideation or self-harm.

Subp. 4. Documentation required.

A. A mental health professional must document all conducted mental status exams and other care provided under

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this part and whether an inmate refused care.

B. Health care personnel and custody staff must document:

(1) whether they notified the facility administrator when required under subpart 3; and

(2) any action that health care personnel or custody staff have taken to address any signs or symptoms of an inmate's deterioration.

2911.2870 HEALTH CARE IN ADMINISTRATIVE SEPARATION AND DISCIPLINARY SEGREGATION.

Subpart 1. **Health care.** An inmate in administrative separation or disciplinary segregation is entitled to the same health care that inmates in general population receive.

Subp. 2. **Notification to health care personnel; health care review.**

A. Custody staff must notify health care personnel within 24 hours after an inmate is placed in administrative separation or disciplinary segregation.

B. After being notified of an inmate's placement, health care personnel must:

(1) review the inmate's health record; and

(2) recommend to custody staff any accommodations that the inmate may require in administrative separation or disciplinary segregation.

C. All actions under this subpart must be documented.

Subp. 3. **Health and well-being.**

A. Custody staff must ensure that an inmate in administrative separation or disciplinary segregation is hygienic and that they receive food, water, and exercise to ensure their health and well-being.

B. Custody staff must document any inmate noncompliance toward maintaining the inmate's health and well-being under this subpart.

2911.2880 ANNUAL REPORTING ON ADMINISTRATIVE SEPARATION AND DISCIPLINARY SEGREGATION.

A facility administrator must annually report the following data on administrative separation and disciplinary segregation to the commissioner through the DOC Portal:

A. the number of inmates placed in administrative separation and disciplinary segregation during the past calendar year; and

B. the number of primary disciplinary violations for each category of serious, major, or minor that resulted in disciplinary segregation.

2911.3100 INMATE ACTIVITIES AND PROGRAMS.

[For text of subparts 1 to 4, see Minnesota Rules]

Subp. 5. **Substance abuse programs.** A facility shall have administrator must develop and follow a written plan for providing services substance abuse programming for inmate chemical dependency issues inmates.

[For text of subpart 6, see Minnesota Rules]

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Subp. 7. **Recreation plan.** The facility administrator ~~or designee shall~~ must have a plan providing opportunities for physical exercise and recreational activities for all inmates consistent with the facility's classification and design. Class I facilities are exempt from this requirement.

The plan ~~shall~~ must include policies and procedures necessary to protect the facility's security and the welfare of inmates.

Policy and procedure ~~shall~~ must provide:

[For text of items A to E, see Minnesota Rules]

F. inmates in administrative separation or disciplinary segregation with ~~a minimum of at least~~ one hour a day, seven days a week, of exercise outside of the inmates' cells; unless:

(1) security or safety considerations dictate otherwise; or

(2) otherwise provided under parts 2911.2800 to 2911.2850; and

G. ~~discretionary access by inmates on segregation status in administrative separation or disciplinary segregation to the same recreational facilities as other inmates unless security or safety considerations dictate otherwise or otherwise provided under parts 2911.2800 to 2911.2850.~~ When ~~inmates on segregation status are an inmate in administrative separation or disciplinary segregation is~~ excluded from use of regular recreation facilities, the alternative area for exercise used ~~shall~~ must be documented in the facility's policy and procedure.

Subp. 8. Limiting access to programming.

A. A facility administrator may limit an inmate's access to activities and programs under this part if the inmate's behavior threatens the safety or security of individuals in the facility.

B. Any limitation must be documented.

2911.3200 INMATE VISITATION.

The ~~A~~ facility administrator ~~or designee shall~~ must develop and ~~implement~~ follow an inmate visiting policy. ~~The policy shall be in writing and include that includes offering at least eight hours of weekly on-site visitation. The visitation must include either free video or free in-person noncontact visitation. A facility may offer a combination of on- and off-site visitation if a free visitation option is always offered. The policy and procedure must include the following:~~

[For text of items A to D, see Minnesota Rules]

E. that all facilities schedule ~~a minimum of eight visiting hours per week:~~

[For text of subitems (1) and (2), see Minnesota Rules]

[For text of items F to M, see Minnesota Rules]

2911.3400 ~~TELEPHONE~~ COMMUNICATION ACCESS.

Subpart 1. Policy and procedure required.

A. A facility ~~shall have~~ administrator must develop and follow a ~~written~~ policy and procedure that provides for inmate access to a telephone. ~~If a facility uses other communication services, as defined under Minnesota Statutes, section 241.252, subdivision 6, the policy and procedure must include their use and any restrictions.~~

B. Unless provided by any other law to the contrary, a telephone call under this part includes voice communications, as defined under Minnesota Statutes, section 241.252, subdivision 6.

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Subp. 2. **Attorney consultation.** ~~Attorney/client~~ Attorney-client telephone consultation ~~shall~~ must be allowed in a manner consistent with Minnesota Statutes, section 481.10.

Subp. 3. **Access on admission or placement into housing unit.** ~~A newly admitted inmates shall inmate must~~ be permitted a local or collect long-distance telephone call to a family member or significant other ~~during the admission process~~ according to part 2911.2525, subpart 1, item F.

Subp. 4. **Telephone access.**

A. ~~Inmates shall~~ An inmate must be allowed telephone access or access to other communication services to maintain contact with family members or significant others. Nonlegal calls may be made at the inmate's expense of the inmate. The minimum time allowed per call shall be ten minutes except where there are substantial reasons to justify limitations.

B. Nonlegal telephone conversations may be monitored and recorded.

Subp. 5. **Denied communication access.** ~~Reasons for denial of telephone~~ If an inmate is denied access shall be documented to a telephone or other communication services, custody staff must document why access was denied.

2911.3500 VOLUNTEERS.

~~When~~ If volunteers are used in facility programs, a written facility administrator must develop and follow a policy and procedure shall provide that a staff member is responsible for coordinating the volunteer service program that includes the training plan under part 2911.1000. The policy includes and procedure must include the following elements:

[For text of items A and B, see Minnesota Rules]

C. an orientation training program that is appropriate to the nature of the a volunteer's assignment; and includes at least the following:

(1) security precautions for working in a secure facility; and

(2) all applicable emergency procedures.

D. a requirement that volunteers agree in writing to abide by follow all facility rules and, policies, and procedures, with emphasis on security and confidentiality privacy of information; and

[For text of item E, see Minnesota Rules]

2911.3650 INMATE UNIFORM ISSUE AND BEDDING ALLOWANCE.

Subpart 1. **Bedding and linen.** An inmate admitted to ~~the a~~ facility ~~shall~~ must be issued:

A. one bath towel;;

B. one washcloth;;

C. one clean, fire-retardant mattress;;

D. two sheets or one sheet and a clean mattress cover, blankets sufficient to provide comfort under existing temperature conditions at least one blanket and one bedding item to cover the mattress; and

E. a pillow built into a mattress or one pillow and one pillow case, if applicable pillowcase.

[For text of subparts 2 to 4, see Minnesota Rules]

2911.3700 DISASTER PLAN; EMERGENCIES AND OR UNUSUAL OCCURRENCES.

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Subpart 1. **Emergency Disaster plan.**

A. A facility ~~shall have administrator must develop and follow~~ a written disaster plan. The plan ~~shall must~~ include policies and procedures designed to protect the public by securely detaining inmates who represent a danger to the community or to themselves when the entire facility must be evacuated ~~in total~~.

B. The disaster plan shall also must include:

~~A. (1) the location of alarms and fire fighting firefighting~~ equipment;

~~B. (2) an emergency drill policy as follows requiring:~~

~~(+) (a) at least annual drills that must be conducted at all facility locations facilities; and~~

~~(2) (b) drills shall that must be conducted even when evacuation of extremely dangerous inmates may is not be included;~~

~~C. (3) specific assignments and tasks for personnel staff;~~

~~D. (4) persons and local emergency departments to be notified;~~

~~E. (5) a procedure for evacuation of promptly evacuating inmates from the facility; and~~

~~F. (6) arrangements for temporary confinement of temporarily confining inmates.~~

Subp. 2. **Quarterly review of emergency procedures.** ~~There shall be A facility administrator must review of emergency procedures at least once every three months. The review shall, which must include:~~

[For text of items A to F, see Minnesota Rules]

Subp. 3. [See repealer.]

Subp. 4. **Reporting of emergencies or unusual occurrences.**

A. ~~Incidents of Except for deaths, an unusual or serious nature shall emergency or unusual occurrence must be reported to the DOC Portal within ten days of the incident in writing to the Department of Corrections in the format required by the department. The reports shall A report must include:~~

~~(1) the names of persons individuals involved, including staff and inmates;;~~

~~(2) the nature of the emergency or unusual occurrence;;~~

~~(3) the actions taken;; and~~

~~(4) the date and time of the emergency or unusual occurrence.~~

B. ~~Unusual occurrences requiring reporting to the DOC include such occurrences as An emergency or unusual occurrence that must be reported includes:~~

~~A. (1) attempted suicide;~~

~~B. (2) suicide;~~

~~C. (3) homicide;~~

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~~D. (4) death; by means other than suicide or homicide, including death that occurred outside the facility while the inmate was receiving medical care stemming from an incident or need for medical care at the facility that occurred while the individual was detained or confined in the facility;~~

~~E. (5) serious injury or illness subsequent to detention, including incidents resulting in hospitalization for medical care emergency care for mental health care, that requires emergency care outside the facility;~~

~~F. (6) hospitalization associated with mental health needs serious injury, including any injury to an inmate that requires the inmate to be hospitalized or receive care that could not be provided by health care personnel in a nonclinical setting, regardless of whether the facility has a clinical setting within the facility;~~

~~G. (7) attempted escape or attempted escape;~~

~~(a) from a secured facility; or~~

~~(b) from custody;~~

~~H. (8) incidents of fire requiring medical treatment of staff or inmates or a response by a local fire authority;~~

~~I. (9) riot, meaning a disturbance by three or more inmates acting together by intentional act or threat of violence to person or property;~~

~~J. (10) assaults of one inmate by another that result in criminal charges or outside medical attention;~~

~~K. (11) assaults of staff by inmates that result in criminal charges or outside medical attention, whichever occurs first;~~

~~L. (12) injury to inmates through response to resistance by staff controlling inmate behavior uses of force that result in substantial bodily harm, as defined under Minnesota Statutes, section 609.02, subdivision 7a;~~

~~M. (13) occurrences of infectious diseases and action taken relative to same when a medical authority has determined if the health authority or other health care personnel determines that the inmate must be isolated from other inmates;~~

~~N. (14) reporting of all notices of intent to file litigation against the facility resulting from matters related to the detention or incarceration of detaining or incarcerating an inmate;~~

~~O. (15) sexual misconduct, such as inmate on inmate, staff on inmate, and inmate on staff; and~~

~~P. (16) use of sexual materials, electronic media for sexual purposes, or both; restraining, according to Minnesota Statutes, section 241.88, an inmate who is pregnant or has given birth within the preceding three days;~~

~~(17) emergency medication administered under part 2911.6700, subpart 1b;~~

~~(18) an inmate refusing to consume food or fluids for more than nine consecutive meals; and~~

~~(19) any other emergency or unusual occurrence listed on the DOC Portal.~~

~~C. In the event of If custody staff or health care personnel determine that there is an emergency such as serious injury or illness or injury where when death may be imminent, individuals facility staff must attempt to immediately notify emergency contacts designated by the inmate shall be notified. Permission for notification, if possible, shall must be obtained from the inmate according to part 2911.2525, subpart 2c.~~

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Subp. 5. **Inmate death and death reviews.** A facility ~~shall have~~ administrator must develop and follow a written policy and procedure that specifies actions to be taken in the event of if an inmate death dies and that is consistent with Minnesota Statutes, section 241.021, subdivision 8. When an inmate death occurs:

[For text of items A and B, see Minnesota Rules]

C. the department must be notified according to Minnesota Statutes, section 241.021, subdivision 1;

~~C. D.~~ personal belongings shall ~~must~~ be handled in a responsible and legal manner responsibly and legally;

~~D. E.~~ records of a deceased inmate shall ~~must~~ be retained for a period of time specified by county policy;

~~E. F.~~ the facility administrator or designee shall ~~must~~ ensure observance of all pertinent laws and allow appropriate state and local investigating authorities full access to all facts surrounding the death; and

~~F. G.~~ in the event if the death involves a “vulnerable adult”, notification procedures shall ~~must~~ be followed in a manner consistent with statutory requirements Minnesota Statutes, section 626.557.

[For text of subparts 6 and 7, see Minnesota Rules]

Subp. 8. **Critical incident debriefing.**

A. Critical incident debriefing must be offered to a staff member identified as having experienced trauma or stress due to a death, suicide attempt, staff assault, and any other emergency or unusual occurrence under subpart 4 that is identified in a facility’s policy and procedure under this part.

B. A facility administrator must develop and follow a policy and procedure on critical incident debriefing that at a minimum:

(1) describes a time frame and structure for providing critical incident debriefing;

(2) identifies the supportive services to be offered to all facility staff; and

(3) provides how to identify staff members who have experienced trauma or stress due to a death, suicide attempt, or staff assault and any other emergency or unusual occurrence identified in the facility’s policy and procedure.

C. A staff member identified as having experienced trauma or stress under this subpart must be offered critical incident debriefing. For each identified staff member, a facility administrator must document:

(1) any critical incident debriefing provided; and

(2) whether supportive services were offered.

2911.3800 **FOOD HANDLING PRACTICES SERVICE.**

Food service ~~shall~~ must be provided according to ~~Minnesota Department of Health rules~~ state and local codes and ordinances, with all health and food-handling inspections and other orders documented and maintained.

2911.3900 **DIETARY ALLOWANCES.**

Subpart 1. **Generally Menu planning required.** ~~Nutritional needs of adult inmates, and juvenile inmates housed in an adult facility, shall be met in accordance with inmate needs or as ordered by a medical professional, and meet the dietary allowances contained in this part which are based upon 2005 MyPyramid guidelines for a weekly 2,400-calories per day and meeting the 2002 Dietary Reference Intakes:~~

A. ~~A facility governed by this chapter shall~~ must have menu planning sufficient to provide each inmate the

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specified food servings per day contained in subparts 2 to 7. ensure that an inmate:

(1) is offered a balanced diet:

(a) approved by a licensed dietitian or nutritionist under Minnesota Statutes, sections 148.621 to 148.633;

and

(b) consisting of foods and beverages that are intended for human consumption;

(2) except as provided under part 2911.4100, subpart 3, is offered at least three meals daily served at regular times with:

(a) at least one meal that is a hot entree;

(b) a substantial evening meal under part 2911.4100, subpart 1; and

(c) no more than 14 hours between meals except as provided under part 2911.4100, subpart 2, or when absent from the facility when required by or allowed under law;

(3) who is pregnant or lactating is offered a diet:

(a) according to part 2911.4200, subpart 4; and

(b) as ordered by the health authority or other health care personnel; and

(4) if applicable, is offered a diet according to part 2911.4300 that does not conflict with the inmate's religious dietary law.

B. If an inmate's religious dietary request under item A, subitem (5), cannot be accommodated, staff must document why.

C. Food served under this subpart must include servings of protein, dairy, vegetables, fruits, bread or cereal, and other food according to the Dietary Guidelines for Americans, which is incorporated by reference under part 2911.0210.

Subp. 2. [See repealer.]

Subp. 3. [See repealer.]

Subp. 4. [See repealer.]

Subp. 5. [Repealed, 38 SR 523]

Subp. 6. [See repealer.]

Subp. 7. [See repealer.]

Subp. 8. [See repealer.]

Subp. 9. [Repealed, 38 SR 523]

2911.4000 ANNUAL FOOD SERVICE REVIEW.

A facility's menu content and cycle shall and therapeutic and religious diets under parts 2911.4200 and 2911.4300 must be approved and reviewed at least once annually by a registered licensed dietitian or nutritionist to ensure compliance with part parts 2911.3900 to 2911.4300 and 2911.4600. The review and findings shall must be

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documented and on file.

2911.4100 MEALS.

Subpart 1. **Substantial evening meal.** There shall not be more than 14 hours between a substantial evening meal and breakfast. A substantial evening meal is classified as means a serving of three or more menu items at one time to include a high quality high-quality protein such as meat, fish, eggs, or cheese. The Unless a meal variation is being used under subpart 3, a meal shall must represent no less than 20 at least 30 percent of the day's total nutrition-requirements caloric intake.

Subp. 2. **Snack.** If a nourishing snack is provided at bedtime, up to 16 hours may elapse between the substantial evening meal and breakfast. A nourishing snack is classified as means a combination of two or more food items from two of the four food groups, such as cheese and crackers, or fresh fruit and cottage cheese the following foods: protein, dairy, vegetables, fruits, and bread or cereal.

Subp. 3. ~~Three meals~~ **Meal variations.** Where inmates are not routinely absent from the facility for work or other purposes, at least three meals shall be made available at regular times during each 24-hour period. Meal variations may be allowed based on weekend and holiday food service demands provided basic nutritional goals are met. As an example, a facility may provide a brunch on Saturdays, Sundays, or holidays in lieu of separate breakfast and lunch meals.

Subp. 4. [See repealer.]

2911.4200 ~~THERAPEUTIC NONRELIGIOUS~~ DIETS.

Subpart 1. **Medical diets.** A facility housing inmates An inmate in need of medically prescribed a therapeutic diets shall diet must have documentary documented evidence that the diets are dietitian-approved and provided as diet has been ordered by health services the health authority or other health care personnel. A healthier general menu contributing to the management of chronic diseases may minimize the need for medical diets.

Subp. 2. **Food-allergy diets.** The seven most common food allergies causing anaphylactic reactions are foods such as fish, shellfish, tree nuts, peanuts, soy, wheat, and milk. A dietitian-approved An allergy diet shall must be provided to an inmate as medically necessary and shall meet the nutritional guidelines under part 2911.3900.

Subp. 3. **Vegetarian or vegan diets.** A facility may provide reasonable animal protein substitutions at meals for inmates requesting vegetarian or vegan diets. A facility may offer vegetarian or vegan diet must be dietitian-approved and meet the nutritional guidelines under part 2911.3900 diets.

Subp. 4. **Pregnancy.** A facility shall ~~develop~~ must offer a diet that meets the increased calcium and calorie requirements of pregnant or lactating inmates. Pregnant or lactating inmates shall must be provided a substitution or supplements as ordered by the medical professional or health services the health authority or other health care personnel. A pregnancy diet must be dietitian-approved and meet the nutritional guidelines under part 2911.3900.

2911.4300 RELIGIOUS DIETS.

A facility ~~shall have a written policy and procedure that provides for~~ must offer special diets or meal accommodations for inmates whose religious sincerely held beliefs require adherence to religious certain dietary laws practices. Creation of religious diets shall involve a dietitian and strive to meet the nutritional guidelines under part 2911.3900 A facility administrator must consult with a licensed dietitian or nutritionist when creating a religious diet and must document the consultation.

2911.4400 ~~USE OF~~ USING FOOD IN OR AS DISCIPLINE IS PROHIBITED.

Food shall must not be withheld or used as punishment discipline. Facilities must not provide different menus for segregation areas for purpose of discipline.

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2911.4500 ~~SUPERVISION OF SUPERVISING MEAL SERVING.~~

Subpart 1. **Staff supervision.** Meals ~~shall~~ must be served under the direct ~~staff~~ supervision of staff.

Subp. 2. **Policy and procedure required.** The policy and procedure on health concerns under part 2911.5800, subpart 8, must state when and how custody staff must communicate an inmate's food and liquids refusal and associated health concerns to health care personnel.

2911.4600 MENU RECORDS AND SUBSTITUTION.

All menus ~~shall~~ must be planned; ~~and~~ dated, and ~~available~~ posted for food service staff to review at least one week in advance. ~~Notations shall be made of~~ Food service staff or custody staff must document any substitutions in the meals ~~actually~~ or meal variations served, and substitutions ~~shall~~ and meal variations must be of equal nutritional value.

2911.4800 COMMISSARY.

Subpart 1. **List of approved commissary items** ~~to be purchased by staff member at local store.~~

A. A facility with an approved bed capacity under part 2911.0330 of more than 50 inmates ~~shall~~ must establish, maintain, and operate a commissary. ~~The A facility shall have~~ administrator must develop and follow a written policy and procedure regarding on the commissary ~~operation~~ that must allow an inmate to purchase approved items not furnished by the facility.

B. Class I facilities are ~~not required to provide commissary services exempt from this part.~~

[For text of subparts 2 to 4, see Minnesota Rules]

Subp. 5. *[See repealer.]*

2911.4900 SECURITY INSPECTION.

~~The A facility shall have~~ administrator must develop and follow a written policy and procedure to require ~~the facility administrator or designee to inspect all areas within the security perimeter, and inspection of the perimeter security, all areas within the secure perimeter,~~ and equipment at least ~~monthly~~ weekly and initiate corrective action if needed.

2911.4950 RESPONSE TO RESISTANCE.

Subpart 1. **Policies and procedures.**

A. ~~The~~ In accordance with Minnesota Statutes, section 243.52, a facility administrator ~~or designee shall have~~ written policies and procedures must develop and follow a policy and procedure to provide for response to resistance, including training on restraining an inmate known to be pregnant or who has given birth within the preceding three days in accordance with Minnesota Statutes, section 241.88. ~~All personnel~~ Each staff member directly involved in the a response ~~shall~~ must submit a written reports report to the facility administrator or designee ~~no later than the conclusion of the shift before the staff member's shift ends.~~

B. ~~Submission of these reports~~ A report may be delayed ~~when~~ if a staff member sustains serious injury, hospitalization, or both.:

(1) is hospitalized; or

(2) as defined under Minnesota Statutes, section 609.02, sustains bodily harm, substantial bodily harm, or great bodily harm.

[For text of subparts 2 and 3, see Minnesota Rules]

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Subp. 4. **Equipment.**

A. The issue, storage, inspection, and use of chemical agents, impact devices, electronic control devices, and other security devices ~~shall must~~ be governed by ~~written~~ policy and procedure.

B. All unissued security devices and equipment ~~shall must~~ be:

(1) stored in a secure, readily accessible depository located outside inmate housing and activity areas; and

(2) inventoried at least ~~monthly~~ weekly to determine condition and expiration dates of the devices and equipment.

[For text of subparts 5 to 7, see Minnesota Rules]

2911.5000 POST ORDERS; ~~AND FORMAL INMATE COUNT; WELL-BEING CHECKS.~~

Subpart 1. **Post orders ~~and accountability; policy and procedure required.~~**

A. ~~There shall be~~ A facility administrator must annually review written orders for every security post ~~that are~~ reviewed annually and ~~updated~~ update the orders if necessary to reflect changes in facility policies and procedures.

B. ~~A written~~ The facility administrator must develop and follow a policy and procedure shall require that personnel requiring custody staff to read, sign, and date applicable post orders at least annually; or as needed for new posts or revisions. Medium and large facilities with multiple posts may need to conduct these reviews more often.

[For text of subparts 2 to 4, see Minnesota Rules]

Subp. 5. [See repealer.]

2911.5010 WELL-BEING CHECKS.

Subpart 1. **Policy and procedure required.**

A. A facility administrator must develop and follow a policy and procedure requiring custody staff to conduct inmate well-being checks according to parts 2911.5010 to 2911.5025.

B. Unless the context indicates otherwise, “well-being check” includes a more-frequent well-being check defined under part 2911.5015, subpart 1.

Subp. 2. **Frequency.** A well-being check must be conducted at least once every 30 minutes.

Subp. 3. **Staggered checks.**

A. A facility’s policy and procedure under subpart 1 must state how custody staff will stagger well-being checks:

(1) in time; and

(2) in direction as applicable to the facility’s physical design.

B. This subpart does not apply to more-frequent well-being checks.

Subp. 4. **Manner.** The following requirements apply to well-being checks:

A. a custody staff member may not use a recording or monitoring device in lieu of directly observing an inmate; and

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B. a custody staff member must stop when conducting a well-being check as defined in part 2911.0200, subpart 74, unless the custody staff member can verify that a cell or area is unoccupied by inmates.

Subp. 5. **Documentation.** Custody staff must document a well-being check:

A. immediately after conducting the well-being check or immediately upon returning to the staff member's post; and

B. using a uniform procedure according to the facility's policy and procedure under subpart 1.

Subp. 6. **Missed well-being check because of facility emergency.**

A. If a custody staff member does not conduct a well-being check because of an emergency in the facility, the staff member must:

(1) as soon as possible but no later than the end of their shift, document the emergency and explain the specific reason the well-being check was not conducted; and

(2) notify the staff member's supervisor.

B. After being notified under item A, the staff member's supervisor must review and approve the staff member's documentation within 72 hours.

C. Notwithstanding parts 2911.5010 to 2911.5025, a missed well-being check is not a deficiency under part 2911.0300, subpart 4, if the emergency and missed well-being check are documented and approved according to this subpart.

Subp. 7. **Notifying health care personnel.** A facility's policy and procedure must specify when a well-being check requires custody staff to notify health care personnel that an inmate requires health care services, including emergency care, and how notification is documented.

Subp. 8. **Audits required.**

A. A facility administrator must develop and follow a policy and procedure on auditing well-being checks under parts 2911.5010 to 2911.5025.

B. At least every three months, a facility administrator must audit well-being checks of at least ten percent of the facility's custody staff or at least two custody staff members, whichever is greater. For each staff member being audited, a time block of at least four video hours of well-being checks must be randomly reviewed. The audited well-being checks must include well-being checks conducted on at least two different days, times, and staff shifts.

C. When auditing a well-being check, the facility administrator must:

(1) document the audit with the dates, times, and staff shifts of the audited footage; and

(2) verify whether the well-being checks complied with parts 2911.5010 to 2911.5025.

D. If a well-being check did not comply with parts 2911.5010 to 2911.5025, the facility administrator must:

(1) document the reason for the noncompliance; and

(2) take and document any action needed to address the noncompliance.

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2911.5015 MORE-FREQUENT WELL-BEING CHECKS; GENERALLY.

Subpart 1. **Definition.** For purposes of parts 2911.5010 to 2911.5025, “more-frequent well-being checks” means conducting a well-being check at least every 15 minutes.

Subp. 2. **More-frequent well-being checks.** A facility’s policy and procedure under part 2911.5010, subpart 1, must specify when custody staff must conduct more-frequent well-being checks:

A. for an inmate:

(1) on suicide watch;

(2) who is exhibiting signs or symptoms of mental deterioration or self-harm;

(3) who is exhibiting signs or symptoms of withdrawal from substance use; or

(4) who has not completed the medical and mental health screenings under part 2911.5800, subpart 6, after custody staff’s initial attempt; and

B. when otherwise directed by health care personnel.

2911.5020 MORE-FREQUENT WELL-BEING CHECKS; EVALUATION AND CARE PLAN.

Subpart 1. **Notifying health care personnel for evaluation.**

A. Custody staff must place an inmate on more-frequent well-being checks when required under part 2911.5015, subpart 2. Upon placing an inmate on more-frequent well-being checks, custody staff must notify health care personnel of the placement and the reason for placement, unless health care personnel directed the placement. If health care personnel place an inmate on more-frequent well-being checks, health care personnel must notify custody staff of the placement and the reason for placement.

B. After being notified or directing placement, health care personnel must evaluate whether the inmate should remain on more-frequent well-being checks.

Subp. 2. **Care plan.** If clinically indicated, health care personnel must develop a care plan for an inmate on more-frequent well-being checks.

Subp. 3. **Continuing more-frequent well-being checks.**

A. An inmate must continue to be subject to more-frequent well-being checks until health care personnel determines that the inmate’s health or safety would not be jeopardized if the inmate were subject to 30-minute well-being checks.

B. Nothing prevents a facility administrator from keeping an inmate on more-frequent well-being checks after health care personnel determines that 30-minute well-being checks are warranted.

Subp. 4. **Renewed placement.** An inmate must be subject to more-frequent well-being checks if the inmate’s reason for placement reoccurs, and subparts 1 to 3 apply to renewed placement under this subdivision.

2911.5025 WELL-BEING CHECKS; DOCUMENTATION REQUIRED.

In addition to the documentation requirements under parts 2911.5010 to 2911.5020, the following items under parts 2911.5010 to 2911.5020 must be documented:

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- A. the reason for placing an inmate on more-frequent well-being checks;
- B. all notifications to custody staff or health care personnel under parts 2911.5010, subpart 7, and 2911.5020, subpart 1;
- C. all determinations by health care personnel on whether to continue or discontinue more-frequent well-being checks; and
- D. any inmate care plans under part 2911.5020, subpart 2.

2911.5800 ~~AVAILABILITY OF MEDICAL AND, DENTAL, AND MENTAL HEALTH~~ RESOURCES.

Subpart 1. ~~Availability of resources; general.~~

- A. Each facility must have or contract with a health authority.
- B. Under the direction of a ~~In cooperation with the~~ health authority, a facility ~~shall~~ administrator ~~must~~ develop ~~and follow~~ a ~~written~~ policy and procedure that provides for ~~the delivery of~~ ~~delivering~~ health care services, including medical, dental, and mental health services.
- C. When health care personnel are not present in a facility for 24 consecutive hours, the facility must have a health-trained staff member present in the facility who can ensure access to health care for inmates under the direction of the health authority and other health care personnel.

Subp. 1a. **Telehealth.** If a facility provides telehealth services, the facility administrator must develop and follow a policy and procedure for providing telehealth services. At a minimum, the policy and procedure must:

- A. list the telehealth services that the facility offers;
- B. identify any training that facility staff may need in order to comply with the facility's policy and procedure;
- C. require that an inmate is educated on using telehealth technology before the inmate's telehealth appointment;
- D. require a telehealth visit to be documented and the documentation placed in the inmate's health record;
- E. list the technology needed for providing telehealth services; and
- F. ensure that the technology is maintained and securely stored.

Subp. 2. ~~Health care Responsibility for clinical judgments; policy and procedure; security regulations.~~

A. Medical, dental, and mental health matters involving clinical judgments are the sole province of the responsible physician, dentist, and psychiatrist or qualified psychologist respectively; however, applicable health care personnel.

B. Security regulations applicable to facility personnel also apply to all health care personnel.

Subp. 2a. **Health care policies and procedures.** All health-care-related policies and procedures under this chapter must be developed in consultation with a facility's health authority.

Subp. 3. **Health care policy review.** Facility policy shall ensure that Each facility policy, procedure, and program in the for delivering health care delivery system is services must be reviewed and documented at least annually under the direction of in cooperation with the health authority and revised as necessary needed to reflect changes to policies, procedures, or programs.

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Subp. 4. **Policy and procedure for emergency health care.** A facility ~~shall~~ administrator must develop and follow a written policy and procedure that requires that the facility provide 24-hour emergency care availability as outlined in a written plan, which includes provisions for the following arrangements for emergency care. At a minimum, the policy and procedure must provide for:

- ~~A.~~ 24-hour emergency care and 24-hour on-site first aid and CPR;
- ~~A. B.~~ emergency evacuation of the an inmate from ~~within~~ the facility;
- ~~B. C.~~ use of using an emergency medical vehicle, available on a 24-hour basis;
- ~~C. D.~~ use of using one or more designated ~~hospital~~ emergency rooms or other appropriate health care facilities;
- ~~D. E.~~ emergency on-call physician, mental health services, and dental services when the an emergency health facility is not located in a ~~nearby community~~ an adjacent county; and
- ~~E. F.~~ security procedures that provide for the immediate transfer of ~~inmates~~ an inmate when appropriate: for emergency care; and
- ~~G.~~ a plan, including contact information, for contacting on-call health care personnel, emergency medical services, and other community emergency contacts.

Subp. 5. [See repealer.]

Subp. 6. **Medical screening.**

~~A.~~ A facility ~~shall have~~ administrator must develop and follow a written policy and procedure that requires staff to conduct and document medical screening is performed and recorded by trained staff and mental health screenings on all inmates on upon admission to the facility according to part 2911.2525. The findings are to screening results must be recorded in a manner approved by documented under the direction of the health authority. The screening process shall must include procedures relating to:

~~A. (1)~~ inquiry into:

- ~~(1)~~ (a) current illness and health problems, including dental emergencies, and ~~other~~ infectious diseases;
- ~~(2)~~ (b) whether an inmate is pregnant or has given birth in the past six months;
- ~~(3)~~ (c) medication taken, possessed, or prescribed and special health requirements for which the medication was prescribed, if any;
- ~~(4)~~ (d) substance use of alcohol and other drugs that include, including types of ~~drugs~~ substances used, mode of use, amounts used, frequency used, date or time of last use, and history of problems that may have occurred after ceasing stopping use, for example, convulsions;
- ~~(5)~~ (e) mental illness, using a screen approved by the department under Minnesota Statutes, section 641.15, subdivision 3a;
- ~~(6)~~ (f) past and present treatment or hospitalization for mental illness or attempted suicide current or past suicidal ideation;
- ~~(7)~~ (g) other health problems listed in the Standards for Health Services in Jails, J-E-02, which is incorporated by reference under part 2911.0210, or designated by the health authority; and

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~~(6) (h) signs and symptoms of active tuberculosis to include weight loss, night sweats, persistent cough lasting three weeks or longer, coughing up blood, low-grade low-grade fever, fatigue, chest pain, prior history of active tuberculosis disease, and results of previous tuberculin skin or blood testing; and~~

~~B. (2) observations of:~~

~~(1) (a) behavior that includes state of consciousness, mental status, appearance, conduct, tremor, and sweating; and~~

~~(2) (b) body deformities, ~~trauma markings scars~~, body piercings, bruises, lesions, and jaundice.~~

~~C. Disposition to:~~

~~(1) general population;~~

~~(2) general population and referral to appropriate health care service;~~

~~(3) referral to appropriate health care service on an emergency basis; and~~

~~(4) other.~~

B. An inmate's medical and mental health screenings under this subpart may be conducted by either health-trained staff or health care personnel.

Subp. 6a. **Mental health screening.** The facility's policy and procedure under subpart 6, item A, must detail under what circumstances an inmate's mental health screening results require:

A. health-trained staff to notify health care personnel of the screening results; and

B. health care personnel to:

(1) refer the inmate to see a mental health professional for a mental status exam under part 2911.5830, subpart 2; or

(2) visit with an inmate under part 2911.5830, subpart 3.

Subp. 6b. **Substance use screening.** The facility's policy and procedure under subpart 6, item A, must detail under what circumstances an inmate's screening results require health-trained staff to:

A. notify health care personnel of the screening results; or

B. if the facility offers substance use disorder treatment, notify health care personnel for possible inmate referral for an assessment for substance use disorder under part 2911.5820.

Subp. 7. **Health care follow-up.**

A. A facility ~~shall administrator must~~ develop ~~written and follow a~~ policy and ~~procedures that require that an~~ inmate who presents with a chronic or persistent medical condition be provided with a health care follow-up procedure on health care follow-ups. Except as provided under parts 2911.5810 to 2911.5830, an inmate's health care follow-up must be documented and at a minimum:

(1) be provided:

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(a) within 14 days of an inmate's admission; or

(b) sooner than 14 days if the inmate presents with a chronic or persistent medical condition or requires emergency care; and

(2) be provided in response to an inmate's medical and mental health needs identified in the medical and mental health screenings under subpart 6, including providing any needed prescription medication in accordance with this chapter.

B. A health-care follow-up must be conducted by health care personnel. After conducting the health-care follow-up, health care personnel must:

(1) develop a care plan if a care plan is medically necessary;

(2) communicate with the inmate on their care in a language or manner that the inmate can attempt to understand; and

(3) communicate the inmate's health care needs to custody staff in accordance with part 2911.6200, subpart 2a.

Subp. 8. **Health complaints concerns.** A facility shall develop a written policy and procedure that requires that inmates' health complaints are acted upon daily by health-trained staff, followed by triage and treatment by health care personnel if indicated.

A. A facility administrator must develop and follow a policy and procedure that requires that an inmate's health concerns are acted on by health-trained staff daily or more frequently if needed to address the health concerns, followed by triage and care by health care personnel if needed. At a minimum, the policy and procedure must:

(1) state how an inmate or custody staff can communicate the inmate's health concerns to other custody staff and to health care personnel;

(2) when health care needs cannot be deferred, require custody staff to notify on-call health care personnel or emergency medical services of:

(a) an inmate's emergency health care needs; or

(b) an inmate's unexpected medical, dental, or mental health care needs; and

(3) specify when health-trained staff must take and document vital signs and:

(a) communicate the vital signs to health care personnel; and

(b) document that the vital signs were communicated to health care personnel.

B. Nothing in this subpart overrides a staff member's duty to report under Minnesota Statutes, section 243.52, subdivision 3.

Subp. 8a. **Health services for inmates who are pregnant or postpartum.** A facility administrator must develop and follow a policy and procedure that:

A. provides for a process to test inmates who can become pregnant, if under 50 years of age, for pregnancy on or before day 14 of incarceration, unless the inmate refuses the test according to Minnesota Statutes, section 241.89;

B. provides at least the following for an inmate who is pregnant or up to six months postpartum:

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(1) prenatal care, including prenatal vitamins, and postpartum care if applicable, according to Minnesota Statutes, section 241.89;

(2) that any restraints used on a pregnant or postpartum inmate are governed according to Minnesota Statutes, section 241.88, when applicable; and

(3) a plan for pregnant inmates who show signs of active labor or miscarriage; and

C. states whether the facility will stock emergency delivery kits.

Subp. 8b. Quarterly health reviews required.

A. A facility administrator must develop and follow a policy and procedure for the health authority to conduct a health review every three months. The health authority or other health care personnel must collect the following data:

(1) the number of mental status exams provided;

(2) how many inmates received withdrawal management; and

(3) the number of assessments for substance use disorder and how many inmates received substance use disorder treatment.

B. After conducting a quarterly review, the health authority or other health care personnel must provide the data to the facility administrator in writing.

C. If a health authority or other health care personnel is unable to provide the data, the facility administrator must document why the data cannot be provided.

Subp. 9. **Sick call.** A facility ~~shall~~ administrator must develop and follow a written policy and procedure that requires a continuous response to health care requests and that sick call, conducted by ~~a physician or other~~ health care personnel, is available to each inmate according to the facility's design capacity as follows:

A. in ~~small facilities or less~~ with fewer than 60 inmates, sick call is held at least once per week ~~at a minimum~~;

B. in ~~medium-sized~~ facilities of 60 to 200 inmates, sick call is held at least three days per week;

C. in facilities of over 200 inmates, sick call is held ~~a minimum of~~ at least five days per week; and

[For text of item D, see Minnesota Rules]

Subp. 10. **Infirmary.** ~~Operation of an infirmary within a facility: male and female~~ Inmates of different genders may be housed in separate rooms in a common infirmary area. Direct staff supervision of the infirmary must be provided at all times when ~~male and female~~ inmates reside of different genders are in the infirmary.

Subp. 11. ~~Examinations~~ Informed consent.

A. Notwithstanding any other requirement under this chapter, examinations, treatments, and procedures, including sharing an inmate's health records, affected by ~~informed consent~~ informed-consent standards governed by state or federal law ~~shall~~ must be observed for inmate care.

B. The informed consent of ~~the~~ an inmate's parent, guardian, or legal custodian must be obtained when required by law.

C. ~~Where health~~ If care treatment must be provided against an inmate's will, ~~it~~ the care must be provided according to law and part 2911.6700, subpart 1b.

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Subp. 12. ~~Ambulance services~~ **Emergency medical vehicle.** ~~Ambulance services shall~~ An emergency medical vehicle must be available on a 24-hour-a-day basis, but an emergency medical vehicle need not be used when custody staff can safely transport an inmate under the direction of the health authority.

Subp. 13. **Privacy of care.** A facility administrator must develop and follow a policy and procedure on privacy of care for inmate health care that provides at least the following:

A. how health-care-related interactions between an inmate and health care personnel will be conducted to ensure the inmate's privacy; and

B. what precautions will be taken to provide privacy when safety or security prevents normal adherence to privacy under item A.

2911.5810 WITHDRAWAL MANAGEMENT FOR SUBSTANCE USE.

Subpart 1. **Policy and procedure required for withdrawal management.** A facility administrator must develop and follow a policy and procedure on withdrawal management. At a minimum, the policy and procedure must:

A. specify how health care personnel will assess an inmate's need for withdrawal management;

B. state when an inmate's screening or assessment results require staff to provide withdrawal management;

C. specify how health-trained staff and health care personnel will screen for and provide withdrawal management, including for an inmate who is pregnant;

D. state where an inmate will be transferred when health care personnel determines that the inmate requires a higher level of care than what the facility can provide; and

E. require that information on any care for withdrawal management that an inmate is receiving, including potential adverse reactions to medication taken for withdrawal management, is communicated to the inmate in a language or presented in a manner that they can attempt to understand.

Subp. 2. **Coordinating with community-based provider.** A facility administrator may coordinate with a community-based provider to provide withdrawal management, including a provider that is a withdrawal management program under Minnesota Statutes, chapter 245F. Except as provided under Minnesota Statutes, section 241.021, subdivision 4f, nothing under this part allows a community-based provider to supersede the clinical judgment of health care personnel.

Subp. 3. **Ongoing monitoring required for withdrawal management.**

A. Health-trained staff must monitor an inmate who requires withdrawal management under the direction of the health authority and other health care personnel. The monitoring instructions must be documented and must:

(1) be specific to the individual inmate;

(2) describe what withdrawal signs or symptoms that staff should monitor and how often; and

(3) state when staff must contact health care personnel or seek emergency care for the inmate.

B. If a facility does not have a dedicated housing unit for withdrawal management, custody staff or health care personnel, or both, must document all inmates who are being monitored for risk of withdrawal and all inmates who are receiving withdrawal management. At a minimum for each inmate, staff must document:

(1) the substance for which monitoring is being conducted; and

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(2) the frequency of monitoring.

Subp. 4. **Continuity of care.** For an inmate who receives withdrawal management while detained, facility staff must:

A. provide the inmate information on or communicate to the inmate about:

(1) withdrawal management and substance use disorder treatment; and

(2) how to contact the facility after discharge to request medical information or medical records relating to any withdrawal management that the inmate received;

B. if requested by the inmate at discharge, provide the inmate a list of the inmate's prescription medications, including frequency, amount, and last date of use, or if the information is unavailable, tell the inmate how to receive this information after discharge;

C. when applicable under part 2911.6800, subpart 3, provide the inmate with a supply of the inmate's medications;

D. offer the inmate an opiate antagonist, if clinically indicated, and educate the inmate on its use upon discharge if provided; and

E. provide the inmate with any other information required under part 2911.2560.

Subp. 5. **Documentation.** The following items under this part must be documented:

A. case notes for any withdrawal management provided to an inmate;

B. why an inmate who was referred for withdrawal management did not receive it;

C. if an inmate was transferred to a health care facility for withdrawal management;

D. record or acknowledgment of any coordination with a community-based provider; and

E. all completed actions or information provided under subpart 4.

2911.5820 SUBSTANCE USE DISORDER TREATMENT.

Subpart 1. **Policy and procedure for substance use disorder treatment; when required.** A facility administrator must develop and follow a policy and procedure on substance use disorder treatment if the facility offers the treatment. At a minimum, the policy and procedure must:

A. specify how health care personnel will assess for substance use disorders and provide substance use disorder treatment;

B. specify a process for discontinuing substance use disorder treatment for an inmate if the inmate chooses to discontinue treatment;

C. require that information on any substance use disorder treatment that an inmate receives, including potential adverse reactions to medication taken for substance use disorder treatment, be communicated to the inmate in a language or be presented in a manner that they can attempt to understand; and

D. detail a process for ensuring an inmate's continuity of care in accordance with Minnesota Statutes, section 241.021, subdivision 4f, if the inmate has been prescribed medication for substance use disorder treatment before

admission.

Subp. 2. Substance use disorder treatment; generally.

A. Nothing under this part requires an inmate to receive substance use disorder treatment or prevents an inmate from discontinuing treatment. If an inmate chooses to receive substance use disorder treatment:

(1) health care personnel must document any case notes for the inmate on the inmate's substance use disorder treatment;

(2) all medical decisions must be made independently of the inmate's classification; and

(3) an inmate's decision on their treatment must be made between only the inmate and health care personnel or a community-based provider.

B. An inmate must not be denied substance use disorder treatment programming:

(1) as a disciplinary measure; or

(2) if the inmate:

(a) has a positive drug screen; or

(b) is in administrative separation or disciplinary segregation.

C. A facility administrator may limit an inmate's access to substance use disorder treatment programming if the inmate's behavior threatens the safety or security of individuals in the facility, but programming must still be provided or offered:

(1) at the inmate's cell door; or

(2) in the presence of custody staff.

D. An inmate's prescription medication for substance use disorder treatment may be changed or discontinued only according to part 2911.6800, subpart 2b.

Subp. 3. Coordinating with community-based provider. A facility administrator may coordinate with a community-based provider to provide substance use disorder treatment, including a provider that is an opioid treatment program under Minnesota Statutes, chapter 245G. Except as provided under Minnesota Statutes, section 241.021, subdivision 4f, nothing under this part allows a community-based provider to supersede the clinical judgment of health care personnel.

Subp. 4. Continuity of care. For an inmate who receives substance use disorder treatment while detained, health care personnel must:

A. provide the inmate information on or communicate to the inmate about:

(1) substance use disorder treatment; and

(2) how to contact the facility after discharge to request medical information or medical records relating to any substance use disorder treatment that the inmate received;

B. make a referral to a community-based provider for continued substance use disorder treatment, if available;

C. if requested by the inmate at discharge, provide the inmate a list of the inmate's prescription medications.

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including frequency, amount, and last date of use, or if the information is unavailable, tell the inmate how to receive the information after discharge;

D. when applicable under part 2911.6800, subpart 3, provide the inmate with a supply of the inmate's medications;

E. provide the inmate with an injection of a federally approved long-acting injectable medication for substance use disorder treatment upon discharge if:

(1) clinically indicated;

(2) the inmate consents; and

(3) the facility's resources allow;

F. offer the inmate an opiate antagonist, if clinically indicated, and educate the inmate on its use upon discharge, if provided; and

G. provide the inmate with any other information required under part 2911.2560.

Subp. 5. Documentation. The following items under this part must be documented:

A. any inmate case notes for substance use disorder treatment;

B. any limitations on an inmate's substance use disorder treatment under subpart 2;

C. if applicable, the reason for an inmate discontinuing substance use disorder treatment;

D. record or acknowledgment of any coordination with a community-based provider; and

E. all completed discharge actions or provided information under subpart 4.

2911.5830 MENTAL STATUS EXAM AND MENTAL HEALTH CARE.

Subpart 1. Policy and procedure required for mental health care. A facility administrator must develop and follow a policy and procedure on mental health care. At a minimum, the policy and procedure must:

A. specify how health-trained staff and health care personnel will screen for mental illness in accordance with this chapter;

B. detail how the facility will provide mental health care, including for an inmate in administrative separation or disciplinary segregation; and

C. specify when the following information must be provided to an inmate in a language or manner that they can attempt to understand:

(1) if available in the facility, psychoeducational resources; and

(2) information on any received mental health care, including potential adverse reactions to any prescription medication.

Subp. 2. Mental status exam; when required.

A. Except as provided under subpart 3, a mental health professional must conduct a mental status exam for an

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inmate who is referred under part 2911.5800, subpart 6a. The exam must be conducted:

- (1) within 14 days of referral; or
- (2) sooner if the inmate's safety is at risk.

B. An inmate must receive an additional mental status exam when required by the facility's policy and procedure under subpart 1.

C. If a mental status exam cannot be conducted under this subpart, health care personnel must document and explain why:

- (1) they were unable to conduct a mental status exam; and
- (2) if applicable, why a mental status exam could not be conducted within 14 days of a referral.

Subp. 3. When mental health professional is unavailable.

A. If a mental health professional is unavailable according to subpart 2, item A, health care personnel must visit with an inmate who is referred under part 2911.5800, subpart 6a. The visit must occur:

- (1) within 14 days of referral; or
- (2) sooner if the inmate's safety is at risk.

B. After visiting with an inmate, health care personnel must document any case notes for the inmate and, if clinically indicated, refer the inmate to a mental health professional for possible mental health care.

C. If health care personnel cannot visit with an inmate under this subpart, health care personnel must document and explain why.

Subp. 4. Case notes and mental health care. After conducting a mental status exam under subpart 2, a mental health professional must:

- A. document any case notes for the inmate;
- B. recommend and discuss any mental health care with the inmate in a language or in a manner that the inmate can attempt to understand;
- C. if clinically indicated, refer the inmate to another mental health professional for additional mental health care; and
- D. as needed for the inmate, make recommendations to custody staff on the inmate's mental health management, classification, and ability to participate in programming.

Subp. 5. Access to mental health care; exceptions.

- A. An inmate must not be denied mental health care, including:
 - (1) as a disciplinary measure; or
 - (2) if the inmate is in administrative separation or disciplinary segregation.
- B. A facility administrator may limit an inmate's access to mental health care if the inmate's behavior threatens

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the safety or security of individuals in the facility, but care must still be provided or offered:

- (1) at the inmate's cell door; or
- (2) in the presence of custody staff.

C. Nothing under this part requires an inmate to accept mental health care or prevents an inmate from discontinuing care.

Subp. 6. **Telehealth services allowed.** Nothing under this part prevents a facility from providing mental health care using telehealth services in accordance with part 2911.5800, subpart 1a.

Subp. 7. **Continuity of care.** For an inmate who has received mental health care while detained, health care personnel must:

- A. allow access to information on or communicate with an inmate about mental health care;
- B. provide information on or communicate to the inmate about how to contact the facility after discharge to request medical information or medical records relating to any mental health care that the inmate received;
- C. if requested by the inmate, provide a list of the inmate's prescription medications, including frequency, amount, and last date of use, or if the information is unavailable, tell the inmate how to receive the information after discharge;
- D. when applicable under part 2911.6800, subpart 3, provide the inmate with prescription medication; and
- E. provide the inmate with any other information required under part 2911.2560.

Subp. 8. **Documentation.** The following items under this part must be documented:

- A. all mental status exams received by an inmate and the reason for the inmate's mental status exam;
- B. any limited inmate access to mental health care under subpart 5 and the reason for the limitation;
- C. record or acknowledgment of any coordination with a community-based provider; and
- D. all actions taken or information provided under subpart 7.

2911.5840 PSYCHIATRIC EMERGENCY.

Subpart 1. **Definition.** For purposes of this part, "psychiatric emergency" means an acute disturbance in thought, behavior, mood, or social relationship that requires immediate intervention to protect an inmate or others from imminent harm.

Subp. 2. **Policy and procedure required.** A facility administrator must develop and follow a policy and procedure on psychiatric emergencies. At a minimum, the policy and procedure must:

- A. detail that custody staff must notify health care personnel when an inmate is experiencing a psychiatric emergency;
- B. state what custody staff must do if health care personnel are unavailable to determine any needed emergency care;
- C. require that health care personnel determines any medically necessary care, including whether to administer

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emergency medication under subpart 3; and

D. require facility staff to document any action taken to respond to a psychiatric emergency.

Subp. 3. Emergency medication.

A. Health care personnel may administer emergency medication to an inmate according to part 2911.6700, subpart 1b, item A.

B. If an inmate receives emergency medication, the inmate must receive more-frequent well-being checks in accordance with part 2911.6700, subpart 1b, item C.

Subp. 4. Care at health care facility; returning to facility. If an inmate is taken to a health care facility in response to a psychiatric emergency, the inmate must receive follow-up care, as determined medically necessary by health care personnel, upon returning to the inmate's facility.

2911.5850 MENTAL HEALTH SUPPORT; TRAUMATIC EVENT.

Subpart 1. Mental health care; policy and procedure.

A. Mental health care must be offered to an inmate identified as having experienced trauma or stress due to a death, suicide attempt, inmate assault, and any other emergency or unusual occurrence under part 2911.3700, subpart 4, that is identified in a facility's policy and procedure under this part. A facility administrator must develop and follow a policy and procedure that:

(1) identifies the health care personnel responsible for providing mental health care under item B;

(2) details when and how health care personnel must provide mental health care under this part; and

(3) provides how to identify inmates as having experienced trauma or stress due to a death, suicide attempt, or inmate staff assault and any other emergency or unusual occurrence identified in the facility's policy and procedure.

B. At least one of the following mental health services must be offered:

(1) one-on-one interventions;

(2) grieving groups; or

(3) another clinically appropriate service for mitigating and responding to trauma or stress.

Subp. 2. Documentation.

A. Health care personnel must document whether mental health care was offered to an inmate under this part and whether:

(1) mental health care was provided; or

(2) the inmate declined mental health care.

B. If the inmate received care, health care personnel must document the care in the inmate's health record.

2911.6000 FIRST AID.

Subpart 1. [Repealed, 38 SR 523]

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Subp. 2. **First aid equipment.** Facility policy shall require that First aid kits are must be available in designated areas of the facility.

Subp. 3. [Renumbered 2911.6200 subp 1a]

2911.6200 MEDICAL ~~AND~~, DENTAL, AND MENTAL HEALTH RECORDS.

Subpart 1. [Renumbered subp 1b]

Subp. 1a. **Medical ~~and~~, dental, and mental health records.**

~~A. A facility shall record complaints of illness or injury and actions taken. Medical or, dental, and mental health records are must be maintained on inmates under for an inmate receiving medical or, dental, or mental health care.~~

~~B. Records shall~~ An inmate's health record must include:

~~(1) complaints of illness or injury and actions taken to address or treat the illness or injury;~~

~~A: (2) the limitations and any known inmate disabilities of the inmate;~~

~~B: (3) instructions for inmate care and any treatment;~~

~~C: (4) orders for medication, including stop any discontinue date;~~

~~D: (5) any special treatment or diet;~~

~~E: (6) any activity restriction; and~~

~~F: (7) times and dates when the inmate was seen by medical health care personnel, including by emergency medical services or other health care personnel not working in the facility; and~~

~~(8) any other health-care-related information required under this chapter.~~

~~C. Medical and, dental, and mental health records shall must be available to staff for consultation in case of illness and for recording medication administration of medications.~~

Subp. 1b. ~~Release of information~~ **Consent forms.** release of information Consent forms must comply with applicable federal and state regulations.

Subp. 2. **Data practices.** ~~The medical~~ An inmate's health record file shall must be maintained separately:

~~A. marked or otherwise distinguished from the inmate's file; and~~

~~B. maintained~~ according to the Minnesota Government Data Practices Act, Minnesota Statutes, chapter 13.

Subp. 2a. **Medical sharing information.** ~~The responsible physician or health care personnel shall share with the facility administrator information regarding an inmate's medical management, security, and ability to participate in programs. A facility administrator must develop and follow a policy and procedure for a responsible practitioner and other health care personnel to share with custody staff information on an inmate's:~~

~~A. medical, dental, and mental health management;~~

~~B. classification; and~~

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C. ability to participate in programming.

Subp. 3. **Available information.** ~~Medical~~ An inmate's health record file information available to health-trained staff and custody personnel shall minimally staff must include, at a minimum, summary medical information provided by the health authority or other health care personnel that ensures sufficient detail to allow health-trained staff persons or other custody personnel staff to ensure medical care of inmates in their custody in a manner consistent with that prescribed by the a responsible physician practitioner or other health care personnel.

[For text of subparts 4 and 5, see Minnesota Rules]

Subp. 6. ~~Transfer of~~ **Transferring records.**

A. A facility shall have administrator must develop and follow a written policy and procedure regarding the transfer of on transferring health records and information that establishes the following requirements under this subpart. This subpart applies to:

(1) referrals or transfers between:

(a) facilities; and

(b) facilities and state correctional facilities; and

(2) referrals or transfers for medical, dental, or mental health services provided in a noncorrectional facility.

~~A. B.~~ Summaries or copies of the an inmate's health record are must be sent to the facility to which the inmate is transferred or referred when the inmate is transferred or referred. Upon the request and written authorization of the inmate, physicians or medical facilities in the community shall be provided health record information; and

~~B. C.~~ The facility administrator or designee, which may include the responsible physician, health care personnel, or health-trained staff of the facility from which the inmate is being transferred, shall or referred must minimally share the inmate's information under subpart 2a with the facility administrator of the facility or noncorrectional facility designated to receive the inmate information regarding the inmate's medical management, security, and ability to participate in programs. In the absence of informed consent. If there are no informed-consent forms signed by the inmate involved, the information may be provided in summary manner summarized to ensure a level of medical care consistent with the inmate's needs.

2911.6400 DELIVERY, SUPERVISION, AND CONTROL OF DELIVERING, SUPERVISING, AND CONTROLLING MEDICATION.

~~In consultation with the health authority,~~ A facility administrator shall have must develop and follow a written policy and procedure for the secure storage, delivery, administration, and control of medication according to parts 2911.6500 to 2911.6800 and Minnesota Statutes, section 241.021, subdivision 4f.

2911.6500 MEDICATION STORAGE.

Subpart 1. **Locked area.** Medication shall must be stored in a locked area. The storage area shall must be kept locked when not in use by authorized staff health-trained staff or health care personnel.

Subp. 2. **Refrigeration.** Health-trained staff or health care personnel must refrigerate and secure medication requiring refrigeration shall be refrigerated and secured and check the temperature checked daily. There must be separate refrigeration for medications only.

[For text of subpart 3, see Minnesota Rules]

Subp. 4. **Medication.**

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A. Stock supplies of prescription medications may be maintained at the discretion and upon the approval of, if approved by the facility's health authority, as follows:

(1) prescription medication shall ~~must~~ be kept in its original container, bearing the original label; and

(2) poisons and medication intended for external use shall ~~must~~ be clearly marked.

B. A limited quantity of life-saving prescription medications as approved by the ~~medical~~ health authority may be maintained in emergency kits if the facility has health-trained staff or health care personnel who can administer the medications in the emergency kit.

Subp. 5. ~~Controlled Substances.~~ There shall be ~~A facility administrator must develop and follow~~ a procedure for maximum security storage of and accountability for ~~controlled~~ substances.

Subp. 6. ~~Needles and other medical sharps.~~ There shall be ~~A written facility administrator must develop and follow~~ a policy and procedure for the ~~health-trained staff and health care personnel~~ to control and ~~disposal~~ dispose of medical sharps and supplies. Medical sharps and supplies ~~when used or stored in inmate housing areas shall ~~must~~~~ be accounted for and secured in a locked area.

2911.6600 MEDICATION DELIVERY.

Subpart 1. ~~Delivering medication.~~ A ~~person delivering health-trained staff member trained according to subparts 2 and 3 must deliver~~ medication to an inmate ~~must do so~~ under the direction of the ~~responsible~~ health authority or ~~other~~ health care personnel.

Subp. 2. ~~Training.~~ Only ~~persons health-trained staff~~ who have received training appropriate to ~~this assignment delivering medication according to this part~~ may deliver medication.

Subp. 3. ~~Refresher training.~~ ~~At least annually, a nonmedical health-trained staff person member delivering medication shall ~~must~~~~ receive refresher training ~~a minimum of once every three years in cooperation with the health authority.~~

[For text of subpart 4, see Minnesota Rules]

Subp. 5. ~~Recording deliveries.~~ A ~~person responsible for delivering medications shall do so according to orders, and health-trained staff member must~~ record the delivery of medications ~~in a manner approved by the health care authority under the direction of the health authority or other health care personnel.~~

Subp. 6. ~~Deliveries by health-trained staff~~ **Self-administering medication.** Medication shall be delivered to an inmate by health-trained staff.

A. ~~Except as provided under item B, an inmate shall administer~~ ~~must self-administer~~ the inmate's medication, ~~including injectable medication, under staff supervision~~ ~~direct supervision of health-trained staff or health care personnel.~~

B. ~~Direct supervision is not required when an inmate is self-administering topical medications and eye or ear drops.~~

Subp. 7. ~~Identification procedures.~~ There shall be ~~a written Health-trained staff must follow a policy and procedure for the identification of the recipient of~~ ~~identifying an inmate who is receiving the delivered medication.~~ ~~Health care personnel must be consulted when the policy and procedure is developed or updated.~~

[For text of subpart 8, see Minnesota Rules]

Subp. 9. **Reports on adverse reaction reports reactions and medication errors.** There shall be procedures for

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A. Health-trained staff must follow a policy and procedure to report any adverse reaction incidents or medication errors to health care personnel.

B. The adverse reaction to a drug shall and medication errors must be documented, and health-trained staff must document whether they reported the incident or error.

Subp. 10. ~~Refusal of prescribed~~ **Refusing prescription medications; documentation.** ~~There shall be procedures for~~

A. Health-trained staff must follow a policy and procedure to report an inmate's refusal of prescribed prescription medication to the attending physician, responsible physician, or health care personnel. The refusal and any directives by the health care personnel shall must be documented.

B. Health-trained staff must document whether they reported the refusal.

Subp. 11. [See repealer.]

[For text of subparts 12 and 13, see Minnesota Rules]

Subp. 14. **Expiration of medication order.** Health-trained staff must notify health care personnel shall be notified of an impending expiration of a medication order so that it can be determined health care personnel can determine whether the to continue or change the medication should be continued or altered. This subpart applies to an inmate who was prescribed medication before admission, to the extent consistent with Minnesota Statutes, section 241.021, subdivision 4f.

Subp. 15. **Nonprescription medication.** A facility's health authority is responsible for determining which over-the-counter nonprescription medication to make available to for inmates shall be approved by health care personnel. Delivery of nonprescription medication by custody staff shall be documented.

[For text of subpart 16, see Minnesota Rules]

2911.6700 MEDICATION ADMINISTRATION.

Subpart 1. [See repealer.]

Subp. 1a. **Policy and procedure on voluntary and involuntary medication administration.** A facility administrator must develop and follow a policy and procedure on voluntary and involuntary administration of neuroleptic, nonneuroleptic, and psychotropic medications to inmates. The policy and procedure must:

A. provide direction for health care personnel on administering medication in a medical emergency when an inmate does not have decision-making capacity, as defined under Minnesota Statutes, section 145C.01, subdivision 1b;

B. provide direction for and specify the medications that health-trained staff may administer; and

C. provide how facility staff will ensure that an inmate's Jarvis Order will be followed while the inmate is detained in the facility.

Subp. 1b. **Involuntary medication administration; emergency medication.**

A. This subpart applies to an inmate who is involuntarily medicated.

B. If an inmate without decision-making capacity, as defined under Minnesota Statutes, section 145C.01, subdivision 1b, receives emergency medication because of a medical emergency, health care personnel must document:

(1) why health care personnel declared a medical emergency;

(2) whether health care personnel attempted any less-restrictive measures to care for the inmate before

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declaring a medical emergency;

- (3) the reason for the emergency medication and the order directing the medication administration;
- (4) any force used by custody staff to ensure that the medication was safely administered; and
- (5) any follow-up care after the medication was administered.

C. After an inmate receives emergency medication under this subpart, the inmate must be subject to more-frequent well-being checks under part 2911.5015 until health care personnel determines that the inmate's health or safety would not be jeopardized by returning to 30-minute well-being checks.

Subp. 2. [See repealer.]

Subp. 3. [See repealer.]

Subp. 4. **Administering opiate antagonist.** Custody staff may administer an opiate antagonist according to Minnesota Statutes, section 151.37, subdivision 12.

2911.6800 MEDICATION CONTROL.

Subpart 1. **Records.** Records of receipt, the quantity of the drugs, and the disposition of all prescription medications shall must be maintained in detail to enable an accurate accounting.

Subp. 1a. **Definition.** For purposes of this part, "bioequivalent medication" means where two or more drugs with identical active ingredients or two different dosage forms of the same drug possess similar bioavailability and produce the same effect at the site of physiological activity.

Subp. 2. **Verifying prescription medications.**

A. An inmate's own supply of prescription medications brought into the facility shall must be verified prior according to this subpart before dispensing.

B. Within 24 hours of an inmate's admission, staff must attempt to verify that an inmate's prescription medication has been ordered by health care personnel legally authorized to prescribe the medication in accordance with their licensure. After verifying an inmate's prescription medication, staff must document the verification.

C. If staff cannot verify an inmate's prescription medication within 24 hours of an inmate's admission, staff must:

(1) document why they were unable to verify the prescription medication within 24 hours of the inmate's admission;

(2) notify the health authority or health care personnel that they have not verified an inmate's prescription medication; and

(3) document the notification to the health authority or health care personnel and record any response, if received, from the health authority after the initial notification.

D. A facility administrator must develop and follow a policy and procedure on how often staff must attempt to verify an inmate's prescription medication. Any follow-up attempts must be documented.

Subp. 2a. **Prescription medication; continuity of care.** After an inmate's medication has been verified according to subpart 2, the inmate must receive any prescription medication prescribed before admission, in accordance with Minnesota Statutes, section 241.021, subdivision 4f. The facility's health authority may substitute a brand-name

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prescription medication with a bioequivalent generic medication without obtaining the inmate's written consent or contacting the prescribing provider.

Subp. 2b. Discontinuing or changing prescription medication.

A. If a facility health authority wishes to discontinue a medication prescribed before an inmate was admitted or replace the medication with a different medication, the health authority must first seek written consent from the inmate.

B. If the inmate declines or is unable to provide written consent, the health authority may only discontinue the medication prescribed before admission if the health authority determines the prescription medication is not medically appropriate for the inmate based on their medical condition or status and:

(1) the health authority first consults with the prescribing provider; or

(2) the health authority has made at least two unsuccessful attempts, using different methods of communication if available, to contact the prescribing provider.

C. The health authority is authorized to replace medication prescribed before admission with a nonbioequivalent drug for reasons unrelated to whether the prescribed medication is medically appropriate when the health authority:

(1) has determined that the new medication is at least as effective as the existing medication for the inmate's condition; and

(2) has obtained approval for the change from the prescribing provider of the original medication; or

(3) has made at least two unsuccessful attempts, using different methods of communication if available, to contact the prescribing provider and has allowed at least seven days for the provider to object to the proposed change in medication.

D. If a facility's health authority determines that it is not clinically appropriate for an inmate to continue taking medication prescribed by the health authority, the health authority must:

(1) if clinically indicated, prescribe alternative prescription medication;

(2) as applicable, document why alternative prescription medication was discontinued or prescribed; and

(3) explain, or have health care personnel explain, to the inmate in a language or manner that the inmate can attempt to understand:

(a) why the prescription medication has been discontinued; and

(b) if applicable, why the inmate is receiving alternative prescription medication.

E. Health care personnel may discontinue or change an inmate's prescription medication if the inmate's actions related to the medication endanger the health or safety of the inmate, other inmates, or facility staff.

F. This subpart applies to an inmate who was prescribed medication before admission, to the extent consistent with Minnesota Statutes, section 241.021, subdivision 4f.

Subp. 3. Prescribed Prescription medication upon transfer or release discharge.

A. ~~Prescribed~~ If available in the facility, prescription medication shall ~~must~~ be given to an inmate or to the appropriate authority upon the inmate's transfer or release, discharge unless the attending physician health authority decides that in the medical interest of the inmate the medications should not be transferred or released with the

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inmate.

B. The action taken shall be documented health authority must document whether they authorized providing an inmate's prescription medication upon transfer or discharge or, if applicable, why they denied the prescription medication.

Subp. 4. ~~Destruction of~~ **Destroying medication.** ~~The destruction of~~ Health care personnel must destroy medication on expiration dates or when retention is no longer necessary or suitable must be, consistent with requirements of the Minnesota Pollution Control Agency.

2911.7100 INMATES WITH SPECIAL NEEDS.

Subpart 1. **Postadmission screening.** ~~The facility written~~ A facility administrator must develop and follow a policy and procedure shall require that requires postadmission screening and referral for care of inmates with special needs, whose adaptation to the correctional environment is significantly impaired an inmate with special needs.

Subp. 2. [See repealer.]

[For text of subpart 3, see Minnesota Rules]

Subp. 4. Care plan; when required.

A. If clinically indicated by an inmate's special needs assessment under part 2911.2600, subpart 1, item I, a responsible practitioner or other health care personnel must:

(1) develop a written care plan for the inmate and discuss the care plan with the inmate in a language or manner that they can attempt to understand; and

(2) communicate with custody staff any accommodations that the inmate may require and document the accommodations in the inmate's file.

B. The care plan must be documented and placed in the inmate's health record.

RENUMBERING INSTRUCTION. The revisor of statutes shall renumber the provisions of Minnesota Rules listed in column A as those listed in column B. The revisor of statutes shall also make any necessary cross-reference changes consistent with the renumbering.

Column A	Column B
<u>2911.0200, subpart 3</u>	<u>2911.0200, subpart 5c</u>
<u>2911.0200, subpart 56a</u>	<u>2911.0200, subpart 56e</u>
<u>2911.0200, subpart 56b</u>	<u>2911.0200, subpart 56f</u>
<u>2911.0200, subpart 65c</u>	<u>2911.0200, subpart 65e</u>
<u>2911.0900, subpart 1</u>	<u>2911.0900, subpart 1b</u>

TERM CHANGE. The following terms are changed wherever they appear in Minnesota Rules, chapter 2911, as follows:

A. "custody personnel" is changed to "custody staff";

B. "data privacy" is changed to "data practices";

C. "health care personnel" is changed to "health care staff";

D. “inmate” is changed to “incarcerated person”; and

E. “responsible physician” is changed to “responsible practitioner.”

REPEALER. Minnesota Rules, parts 2911.0200, subparts 7, 23, 24, 52, and 69; 2911.0300, subparts 5a and 6; 2911.0360; 2911.0370; 2911.0600; 2911.0700; 2911.0800; 2911.0900, subpart 26; 2911.1350; 2911.1800; 2911.2800, subpart 6; 2911.3600, subpart 7; 2911.3700, subpart 3; 2911.3900, subparts 2, 3, 4, 6, 7, and 8; 2911.4100, subpart 4; 2911.4800, subpart 5; 2911.5000, subpart 5; 2911.5800, subpart 5; 2911.6600, subpart 11; 2911.6700, subparts 1, 2, and 3; and 2911.7100, subpart 2, are repealed.

EFFECTIVE DATE. Minnesota Rules, parts 2911.0100 to 2911.7100, and the repealer are effective 90 calendar days after publication in the State Register.

Executive Orders

The governor has the authority to issue written statements or orders, called Executive Orders, as well as Emergency Executive Orders. The governor's authority is specified in the Constitution of the State of Minnesota, Article V, and in *Minnesota Statutes* § 4.035. Emergency Executive Orders, for protection from an imminent threat to health and safety, become effective immediately, are filed with the secretary of state, and published in the *State Register* as soon as possible after they are issued. Other Executive Orders become effective 15 days after publication in the *State Register* and filing with the secretary of state. Unless otherwise specified, an executive order expires 90 days after the date the governor who issued the order vacates office.

Office of the Governor

Executive Order 26-05: Establishing a Council to Document the Impacts of Operation Metro Surge and Operation PARRIS on Minnesotans

I, Tim Walz, Governor of the State of Minnesota, by the authority vested in me by the Constitution and applicable statutes, issue the following executive order:

In December 2025, the federal government began Operation Metro Surge – an immigration enforcement action described by the U.S. Department of Homeland Security as the largest the agency had ever attempted. Subsequently, the federal government launched Operation PARRIS in January 2026 to further focus on refugee communities in Minnesota. When these operations began to scale down in February 2026, the Department of Homeland Security had left Renee Good and Alex Pretti dead and communities across Minnesota traumatized, living in fear, separated from their families, and pushed to the brink of financial ruin.

Over a period of more than 10 weeks, masked and armed immigration agents detained children, indiscriminately used chemical agents, violated the civil rights of peaceful protestors, detained American Indians, and conducted unwarranted stops and arrests of our neighbors simply because of the color of their skin. At the Bishop Henry Whipple Building at Fort Snelling agents have detained individuals in squalid conditions and prevented access to counsel.

Despite the deployment of over 3,000 federal agents to Minnesota, our communities demonstrated strength, unity, grace, and an unrelenting desire to support each other. Leaders organized response efforts, advocated for their communities, and defended the values that make us Minnesotan. Neighbors banded together to protect one another, deliver groceries, and help pay bills. Parents and community members patrolled their neighborhoods to keep them safe. Educators and caregivers organized carpools, walked children to and from school, and packed meals for families. Restaurants operated at a loss to feed people in need. Through it all, Minnesotans have persevered and made their voices heard, loudly and peacefully.

Executive Orders

While I am inspired by our resiliency and perseverance, we cannot turn a blind eye to what has happened here. The only way we move forward is with accountability. Minnesotans demand and deserve a public record that reflects the violent, cruel, inhumane, and deeply disturbing actions of federal immigration agents, and the dignity of our response. This record can help serve as a step towards our state's long-term recovery.

For these reasons, I order as follows:

1. The Governor's Council on Recording the Truth of Operation Metro Surge and Operation PARRIS ("the Council") is established.
2. The Council, of no more than 15 members, will include the following representation:
 - a. A chair, with experience in leadership, law, civil rights, or other relevant expertise, to be appointed by the Governor;
 - b. A vice-chair, who is a representative of the Advocates for Human Rights ("AHR") to be appointed by that organization;
 - c. A representative from the American Civil Liberties Union of Minnesota, to be appointed by that organization;
 - d. Up to 12 additional members, to be appointed by the Governor, with experience and perspective in the following areas:
 - i. Immigration;
 - ii. Civil and human rights;
 - iii. Education;
 - iv. Law enforcement;
 - v. Faith and religion;
 - vi. Business;
 - vii. Health, including mental health and trauma; or
 - viii. Community impact; and
 - e. A designee from each of the Governor's Office, the Attorney General's Office, and the Minnesota Department of Human Rights will serve as ex-officio, non-voting members.
3. By October 31, 2026, the Council will create a report of the preliminary findings and recommendations to prevent recurrence of the conduct of federal agents, the harms and abuses endured by Minnesota residents, businesses, schools, childcare, and local communities, and the ways that Minnesotans united and persevered during Operation Metro Surge and Operation PARRIS. By December 1, 2026, the Council will create a final report to be delivered to the Governor, the majority and minority leaders of the Minnesota legislature, and Minnesota's congressional delegation.
4. The state of Minnesota has entered into an agreement with the Advocates for Human Rights, an organization of national experts in human rights. AHR will build a robust process to collect stories from community and then work with the Council to prepare for public presentations, and solicit information through public forums, personal testimony, publicly available video, and any other means.
5. By June 1, 2026, the Council will confer with AHR to select the topics for story collection and presentation. Topics may include, but are not limited to:
 - a. Human and civil rights violations;
 - b. Impact on immigrants;
 - c. Use of chemical munitions;
 - d. Actions taken against US citizens;
 - e. Peaceful protests;
 - f. Digital documentation of federal action;
 - g. Economic harms;

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- h. Impacts on children; and
 - i. Activism to support schools, childcare, and local businesses.
- 6. The Council will host a minimum of four public meetings to hear presentations on the selected topics. The Council will direct AHR to collect stories, data, testimony, and other relevant information on the selected topics. The Council will determine the venue, structure, and timing of each of these public meetings. AHR will prepare a summary of each of these meetings, along with any other relevant data, for potential inclusion in a final report.
- 7. State agencies will present data and information to the Council, at the Council's request.
- 8. The Council does not have a law enforcement role and will avoid any interference with ongoing investigations and prosecutions. In particular, the Council will not engage in reporting around the shootings of Renee Good, Julio Cesar Sosa-Celis, or Alex Pretti. Instead, the Council will refer potential violations of law to entities responsible for investigating and enforcing such violations.
- 9. Minnesota Management and Budget will engage Management Analysis and Development as project consultants to provide staffing and administrative support for the Council. The Department of Administration will process travel reimbursements if requested for Council members, as appropriate.
- 10. This Executive Order is effective fifteen days after publication in the State Register and filing with the Secretary of State. It will remain in effect until rescinded by proper authority or until it expires in accordance with Minnesota Statutes 2025, section 4.035, subdivision 3.

A determination that any provision of this Executive Order is invalid will not affect the enforceability of any other provision of this Executive Order. Rather, the invalid provision will be modified to the extent necessary so that it is enforceable.

Signed on March 25, 2026.

Tim Walz, GOVERNOR

Filed According to Law:

Steve Simon, SECRETARY OF STATE

Commissioner's Orders

Various agency commissioners are authorized to issue "commissioner's orders" on specified activities governed by their agency's enabling laws. See the *Minnesota Statutes* governing each agency to determine the specific applicable statutes. Commissioners' orders are approved by assistant attorneys general as to form and execution and published in the *State Register*. These commissioners orders are compiled in the year-end subject matter index for each volume of the *State Register*.

Minnesota Department of Natural Resources Commissioner's Order: Identification of Known Calcareous Fens

Statutory authority: *Minnesota Statutes*, section 103G.223

Supplements

- Identification Order No. 05-001, dated March 4, 2005, published March 14, 2005 (29 SR 1061-1065)
- Identification Order No. 08-001, dated May 6, 2008, published June 2, 2008 (32 SR 2148-2154)
- Commissioner's Order dated August 20, 2009, published August 31, 2009 (34 SR 278)
- Commissioner's Order dated November 23, 2009, published December 7, 2009 (34 SR 823)
- Commissioner's Order dated April 16, 2016, published July 5, 2016 (40 SR 8)
- Commissioner's Order dated September 29, 2021, published October 11, 2021 (46 SR 436)

BACKGROUND

WHEREAS, calcareous fens, as identified by the Commissioner of Natural Resources by written order published in the State Register, may not be filled, drained, or otherwise degraded, wholly or partially, by any activity, unless the commissioner, under an approved management plan, decides some alteration is necessary (*Minnesota Statutes*, section 103G.223); and

WHEREAS, the commissioner issued orders identifying known calcareous fens in Minnesota dated March 4, 2005 (published in the State Register on March 14, 2005; 29 SR 1061-1065), May 6, 2008 (published June 2, 2008; 32 SR 2148-2154), August 20, 2009 (published August 31, 2009; 34 SR 278), November 23, 2009 (published December 7, 2009; 34 SR 823), April 16, 2016 (published July 5, 2016; 40 SR 8); and September 29, 2021 (published October 11, 2021; 46 SR 436); and

WHEREAS, additional calcareous fens have since been discovered, verified and documented as follows:

- Blue Mounds State Park Calcareous Fen Designation Report dated March 5, 2025
- Mountain Lake 30 Calcareous Fen Designation Report dated March 5, 2025
- Kingston WMA Calcareous Fen Designation Report dated March 5, 2025
- Ortonville 25 Calcareous Fen Designation Report dated March 5, 2025
- Pembina WMA Calcareous Fen Designation Report dated March 5, 2025
- Whispering Ridge AMA Calcareous Fen Designation Report dated March 5, 2025
- Skandia WMA Calcareous Fen Designation Report dated March 5, 2025
- Hill River 8 Calcareous Fen Designation Report dated March 5, 2025
- Viking 1 Calcareous Fen Designation Report dated March 5, 2025
- Suess WMA South **Calcareous Fen Designation Report dated March 5, 2025**
- St. Martin 15 West Calcareous Fen Designation Report dated March 5, 2025

Commissioner's Orders

St. Martin 15 East Calcareous Fen Designation Report dated March 5, 2025

ORDER

NOW, THEREFORE, IT IS HEREBY ORDERED, pursuant to authority vested in me by law, including *Minnesota Statutes*, section 103G.223, that in addition to those identified in the March 14, 2005, May 6, 2008, August 20, 2009, November 23, 2009, April 16, 2016, and September 29, 2021 Orders, the following described lands have been identified as containing a calcareous fen as defined in *Minnesota Rules*, part 8420.0935, subpart 2:

County	Calcareous Fen Site Name	Fen ID No.	Township	Range	Section
Rock	Blue Mounds State Park	41120	103N	45W	NESE24
Cottonwood	Mountain Lake 30	41739	106N	34W	SWSE30
Meeker	Kingston WMA	42024	121N	29W	SENW28
Big Stone	Ortonville 25	42025	121N	46W	NENE25
Pennington	Pembina WMA	42456	153N	45W	E1/2NW and W1/2NE and NWSW16
Redwood	Whispering Ridge AMA	41829	114N	36W	NWNW32
Murray	Skandia WMA	42026	108N	41W	W30
Polk	Hill River 8	37723	149N	40W	SSW8
Marshall	Viking 1	42427	154N	45W	WNE1
Olmsted	Suess WMA South	42604	105N	15W	SWNW and NWSW22
Stearns	St. Martin 15 West	34571	124N	32W	SWSW15
Stearns	St. Martin 15 East	42603	124N	32W	SESW15

This order is effective upon publication in the State Register as required in the statutory authority.

Sarah Strommen, Commissioner

Date: March 13, 2026

AGENCY CONTACT. For additional information or to receive this document in an alternative format please contact: Jennie Skancke, Ecological and Water Resources Division, Department of Natural Resources, 500 Lafayette Rd, St. Paul, MN 55155, Phone: 651-259-5721, Email: Jennie.Skancke@state.mn.us.

State Grants & Loans

In addition to requests by state agencies for technical/professional services (published in the State Contracts Section), the *State Register* also publishes notices about grants and loans available through any agency or branch of state government. Although some grant and loan programs specifically require printing in a statewide publication such as the State Register, there is no requirement for publication in the *State Register* itself. Agencies are encouraged to publish grant and loan notices, and to provide financial estimates as well as sufficient time for interested parties to respond.

SEE ALSO: Office of Grants Management (OGM) at: <https://mn.gov/admin/citizen/grants/>

Department of Employment and Economic Development (DEED) Notice of Grant Opportunity

NOTICE IS HEREBY GIVEN that the Minnesota Department of Employment and Economic Development (DEED) places notice of any available grant opportunities online at <https://mn.gov/deed/about/contracts/open-rfp.jsp>

State Grants & Loans

Minnesota Department of Human Services Notice of Grant Opportunities

NOTICE IS HEREBY GIVEN that the Minnesota Department of Human Services (DHS) places notice of any available grant opportunities on the DHS Grant Requests for Proposals website: *Open grants, RFPs and RFIs*.

Department of Public Safety State Fire Marshal

Notice of Award Application for Fire Department Turnout Gear Washers and or Dryers

The Minnesota Department of Public Safety, with funding from the Fire Safety Account (*Sec. 299F.012 MN Statutes*), through the State Fire Marshal Division, has authorized a \$1,000,000 matching award program to assist eligible fire departments in the purchase of a commercial turnout gear washer/extractor and/or a gear dryer. In recent years, fire departments across Minnesota have implemented turnout gear decontamination procedures post fire events to help reduce firefighter exposure to toxic combustion byproducts. At the same time mechanical turnout gear washers/extractors have been introduced as an effective and efficient means by which firefighters can best clean their soiled turnout gear and greatly reduce their exposure to combustion byproducts. Award program information and application are available at dps.mn.gov/divisions/sfm/fire-depts/gear-washer-and-extractor-program.

The award application is due by Friday, May 1, 2026 at 4pm CST.

Department of Public Safety Fire Service Advisory Committee

Notice of Request for Submissions for State Fiscal Year 2027 One-Time Fire Safety Account Proposals

The Department of Public Safety (DPS) and Fire Service Advisory Committee (FSAC) are requesting submissions from eligible organizations with proposals in one (1) of three (3) areas:

1. Minnesota Board of Firefighter Training and Education.
2. Programs and staffing for the State Fire Marshal division.
3. Fire-related regional response team programs and any other fire service programs that have the potential for statewide impact.

Complete details on eligibility can be found in MN Statute 299F.012, Subd.2.

The Presentation Policy and Presenter Information must be followed and an application submitted. The application and copies of guidance documents can be found at this webpage: <https://dps.mn.gov/divisions/co/programs/fire-service-advisory-committee/Pages/default.aspx>.

Questions can be directed to:

Allison Marcus
Department of Public Safety
445 Minnesota Street
Saint Paul, MN 55101
Telephone: 651.201.7257
Email address: allison.marcus@state.mn.us

State Grants & Loans

Deadline for submission of the required documents is 4:30 p.m. Central Time on Thursday, May 14, 2026.

This Request for Submissions does not obligate the State or the Department of Public Safety to certify eligibility of the recipients for the funds; and the State and DPS each reserves the right to cancel this Request. All expenses incurred in responding to this notice are solely the responsibility of the responder.

State Contracts

Informal Solicitations: Informal solicitations for professional/technical (consultant) contracts valued at over \$5,000 through \$50,000, may either be published in the *State Register* or posted on the Department of Administration, Office of State Procurement (OSP) Website. Interested vendors are encouraged to monitor the P/T Contract Section of the OSP Website at <https://mn.gov/admin/osp> for informal solicitation announcements.

Formal Solicitations: Department of Administration procedures require that formal solicitations (announcements for contracts with an estimated value over \$50,000) for professional/technical contracts must be published in the *State Register*. Certain quasi-state agency and Minnesota State College and University institutions are exempt from these requirements.

Requirements: There are no statutes or rules requiring contracts to be advertised for any specific length of time, but the Office of State Procurement strongly recommends meeting the following requirements: \$0 - \$5000 does not need to be advertised; \$5,000 - \$25,000 should be advertised in the *State Register* for a period of at least seven calendar days; \$25,000 - \$50,000 should be advertised in the *State Register* for a period of at least 14 calendar days; and anything above \$50,000 should be advertised in the *State Register* for a minimum of at least 21 calendar days.

Contact the Office of State Procurement at: (651) 296-2600

Minnesota State Colleges and Universities (Minnesota State) Notice of Bid and Contracting Opportunities

Minnesota State advertises contract opportunities for goods and services on its Vendor and Supplier Opportunities website (<https://www.minnstate.edu/vendors/index.html>). New notices may be added daily and will remain posted for the duration specified in each individual notice. For questions or to report any issues viewing the information on the website, please email Minnesota State at Sourcing@MinnState.edu.

Minnesota Competency Attainment Board (MNCAB) Request for Information: Forensic Navigator Case Management System

The Minnesota Competency Attainment Board (MNCAB) invites qualified vendors to submit information for the development of a Forensic Navigator Case Management System to streamline and enhance the agency's ability to perform all facets of case management workflow in accordance with our legislative charter.

The request for Information does not obligate MNCAB to award a contract or complete the project, and it reserves the right to cancel the solicitation if it is in the agency's best interest.

Interested submissions must be received by MNCAB no later than 11:59 p.m. CST, May 1, 2026. Electronic proposal submissions may be sent to Darrell Hill, RFI Administrator at darrell.hill@mncab.us with the subject line: "Request for Information - Forensic Navigator Case Management System". Please contact the RFI Administrator if an alternate submission method is necessary.

A complete copy of the Request for Information may be found on the Minnesota Competency Attainment Board website at www.mn.gov/cab.

State Contracts

Minnesota Department of Transportation (MnDOT) Engineering Services Division Notices Regarding Professional/Technical (P/T) Contracting

P/T Contracting Opportunities: MnDOT is now placing additional public notices for P/T contract opportunities on the MnDOT's Consultant Services website. New public notices may be added to the website on a daily basis and be available for the time period as indicated within the public notice.

Taxpayers' Transportation Accountability Act (TTAA) Notices: MnDOT is posting notices as required by the TTAA on the MnDOT Consultant Services website.

MnDOT's Prequalification Program: MnDOT maintains a Pre-Qualification Program in order to streamline the process of contracting for highway related P/T services. Program information, application requirements, application forms and contact information can be found on MnDOT's Consultant Services website. Applications may be submitted at any time for this Program.

MnDOT Consultant Services website: www.dot.state.mn.us/consult

If you have any questions regarding this notice, or are having problems viewing the information on the Consultant Services website, please email the Consultant Services Helpline at ptconsultantserviceshelpline.dot@state.mn.us.

Minnesota Zoo Request for Proposals for Interpretive Curation, Development, and Design for the Minnesota Zoo Center for Wildlife Conservation

PROJECT NAME: Interpretive Curation, Development, and Design for the Minnesota Zoo Center for Wildlife Conservation

DETAILS: The Minnesota Zoological Garden is requesting proposals for a qualified, third-party exhibitry design team to curate, collaboratively plan, develop, design, and provide production support (through project completion) for the interpretive features in the forthcoming Minnesota Zoo Center for Wildlife Conservation—an immersive, multi-use space dedicated to highlighting the Zoo's global conservation impact over the last 50 years.

The selected exhibitry design vendor will develop a build-ready visitor-centered experience that incorporates engaging physical design elements, digital content, audio visual features, storytelling, and a deep integration of the Zoo's conservation legacy. Design will pertain to primarily the interior and minimally to the exterior of the space. This scope of work will include exterior naming signage, plus likely interior naming signs and a donor recognition feature. The Zoo will use the pricing design/design development package from this scope of work to solicit bids for an interpretive fabrication and installation contractor.

An optional pre-proposal meeting will be held at 9:00 am, Central Time, April 10, 2026.

Work is anticipated to start in May 2026.

COPY REQUEST: To receive a copy of the Request for Proposals, please send a written request by email to:

Lisa Fay, Contracts Coordinator
Minnesota Zoological Garden
lisa.fay@state.mn.us

PROPOSAL DEADLINE: Proposals in response to the Request for Proposals in this advertisement must be received by email not later than 10:00 am, Central Time, April 27, 2026. **Late proposals will not be considered.** Faxed

or mailed proposals will **not** be considered.

This request does not obligate the State of Minnesota to award a contract or complete the proposed program, and the State reserves the right to cancel this solicitation if it is considered in its best interest. All costs incurred in responding to this solicitation will be borne by the responder.

Non-State Public Bids, Contracts & Grants

The State Register also serves as a central marketplace for contracts let out on bid by the public sector. The *State Register* meets state and federal guidelines for statewide circulation of public notices. Any tax-supported institution or government jurisdiction may advertise contracts and requests for proposals from the private sector. It is recommended that contracts and RFPs include the following: 1) name of contact person; 2) institution name, address, and telephone number; 3) brief description of commodity, project or tasks; 4) cost estimate; and 5) final submission date of completed contract proposal. Allow at least three weeks from publication date (four weeks from the date article is submitted for publication). Surveys show that subscribers are interested in hearing about contracts for estimates as low as \$1,000. Contact editor for further details.

Besides the following listing, readers are advised to check: <https://mn.gov/admin/osp> as well as the Office of Grants Management (OGM) at: <https://mn.gov/admin/citizen/grants/>.

JE Dunn Construction

Request for Qualifications: Minnesota State Patrol Headquarters BP1 Precast Concrete

DUE DATE AND TIME: April 8th, 2026, at 3:00 P.M. CENTRAL TIME, USA

Responses to this Request for Qualifications (RFQ) must be returned to JE Dunn Construction at the following location, or by email. Paper (hard copy) or e-mailed electronic copies will be accepted.

JE Dunn Construction
Attn: Steven Dueck
800 Washington Ave N, Suite 600
Minneapolis, MN 55401
Steven.dueck@jedunn.com

Project Description

JE Dunn Construction has been selected as the Construction Manager for New Minnesota St. Patrol Headquarters, located in Roseville, MN.

Work will consist of demolishing the approximately 200,000 SF existing building and constructing a new 110,000 SF St. Patrol Headquarters building. The new building will include approximately 65,000 SF for office and training space and 45,000 SF for an enclosed garage for vehicles and equipment storage.

The intent of this RFQ process is to select subcontractors for the opportunity to be a bidding subcontractor for precast concrete on this project.

Project Construction Budget

1. Approximate construction budget: \$77,000,000

Non-State Public Bids, Contracts & Grants ==

Schedule

1. Projected Construction Schedule:
 - a. Abatement and Existing Building Demolition: June 2026 to Fall 2026.
 - b. New Construction: Fall 2026 to March 2028.

The full RFQ can be accessed and downloaded here: *State Patrol Headquarters BPI - Precast Concrete*

Metropolitan Airports Commission (MAC) Notice of Call for Bids for 2026 MAC Technology Upgrades

Airport Location: Minneapolis-St. Paul International Airport
Project Name: 2026 MAC Technology Upgrades
MAC Contract No.: 106-2-1093
Bids Close At: 2:00 PM on April 14, 2026
Bid Opening Conference Call: 3:00 PM on April 14, 2026
Teleconference Dial In #: 1-612-405-6798
Conference ID #: 897 927 742#

Notice to Contractors: Electronic Bid Submission for the project listed above will be received by the MAC, a public corporation, via *QuestCDN's website* until the official time and date as displayed in QuestCDN Online.

Note: You can sign up on our portal (<https://metroairports.bonfirehub.com>) to receive email notifications of new business opportunities.

Small Businesses (SB): The goal of the MAC for the utilization of Small Businesses on this project is 13%.

Bid Security: Each bid shall be accompanied by a "Bid Security" in the form of a certified check made payable to the MAC in the amount of not less than five percent (5%) of the total bid, or a surety bond in the same amount, running to the MAC, with the surety company thereon duly authorized to do business in the State of Minnesota.

Availability of Construction Documents: Plans and specifications are available at QuestCDN Online indicated below and at the Minnesota Builders Exchange; Rochester Builders Exchange; Dodge Data and Analytics; and NAMC-UM Plan Room. Bidders desiring drawings and specifications for personal use may secure a complete digital set at the *QuestCDN website*. Bidders may download the complete set of digital documents for \$22.00, or other fee as determined by QuestCDN, by entering eBidDoc™ #10101639 in the "Search Projects" page. Contact Quest Construction Data Network at (952) 233-1632 or info@questcdn.com for assistance. Hard copy drawings and specifications will not be made available to Bidders. Bid documents for this project may be viewed for no cost at QuestCDN Online. For this project, bids will **ONLY** be received electronically. Contractors submitting an electronic bid will be charged an additional \$42.00, or other fee as determined by QuestCDN, at the time of bid submission via the online electronic bid service QuestCDN Online.

MAC Internet Access of Additional Information: A comprehensive Notice of Call for Bids for this project will be available on March 23, 2026, at MAC's web address of <https://metroairports.bonfirehub.com>.

— Non-State Public Bids, Contracts & Grants

Metropolitan Airports Commission (MAC) Notice of Call for Bids for 2026 Baggage System Upgrades

Airport Location: Minneapolis-St. Paul International Airport
Project Name: 2026 Baggage System Upgrades
MAC Contract No.: 106-2-1116
Bids Close At: 2:00 PM on April 15, 2026
Bid Opening Conference Call: 3:00 PM on April 15, 2026
Teleconference Dial In #: 1-612-405-6798
Conference ID #: 897 927 742#

Notice to Contractors: Electronic Bid Submission for the project listed above will be received by the MAC, a public corporation, via *QuestCDN's website* until the official time and date as displayed in QuestCDN Online.

Note: You can sign up on our portal (<https://metroairports.bonfirehub.com>) to receive email notifications of new business opportunities.

Small Businesses (SB): The goal of the MAC for the utilization of Small Businesses on this project is 13%.

Bid Security: Each bid shall be accompanied by a "Bid Security" in the form of a certified check made payable to the MAC in the amount of not less than five percent (5%) of the total bid, or a surety bond in the same amount, running to the MAC, with the surety company thereon duly authorized to do business in the State of Minnesota.

Availability of Construction Documents: Plans and specifications are available at QuestCDN Online indicated below and at the Minnesota Builders Exchange; Rochester Builders Exchange; Dodge Data and Analytics; and NAMC-UM Plan Room. Bidders desiring drawings and specifications for personal use may secure a complete digital set at the *QuestCDN website*. Bidders may download the complete set of digital documents for \$22.00, or other fee as determined by QuestCDN, by entering eBidDoc™ #10075386 in the "Search Projects" page. Contact Quest Construction Data Network at (952) 233-1632 or info@questcdn.com for assistance. Hard copy drawings and specifications will not be made available to Bidders. Bid documents for this project may be viewed for no cost at QuestCDN Online. For this project, bids will ONLY be received electronically. Contractors submitting an electronic bid will be charged an additional \$42.00, or other fee as determined by QuestCDN, at the time of bid submission via the online electronic bid service QuestCDN Online.

MAC Internet Access of Additional Information: A comprehensive Notice of Call for Bids for this project will be available on March 30, 2026, at MAC's web address of <https://metroairports.bonfirehub.com>.

Metropolitan Airports Commission (MAC) Notice of Call for Bids for 2026 Landside Pavement Rehabilitation

Airport Location: Minneapolis-St. Paul International Airport
Project Name: 2026 Landside Pavement Rehabilitation
MAC Contract No.: 106-3-765
Bids Close At: 2:00 PM on April 15, 2026
Bid Opening Conference Call: 3:00 PM on April 15, 2026
Teleconference Dial In #: 1-612-405-6798
Conference ID #: 897 927 742#

Notice to Contractors: Electronic Bid Submission for the project listed above will be received by the MAC, a public corporation, via *QuestCDN's website* until the official time and date as displayed in QuestCDN Online.

Note: You can sign up on our portal (<https://metroairports.bonfirehub.com>) to receive email notifications of new

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business opportunities.

Small Businesses (SB): The goal of the MAC for the utilization of Small Businesses on this project is 16%.

Bid Security: Each bid shall be accompanied by a “Bid Security” in the form of a certified check made payable to the MAC in the amount of not less than five percent (5%) of the total bid, or a surety bond in the same amount, running to the MAC, with the surety company thereon duly authorized to do business in the State of Minnesota.

Availability of Construction Documents: Plans and specifications are on file for inspection at the office of Kimley-Horn and Associates, Inc.; at the QuestCDN Online indicated below and at the Minnesota Builders Exchange; Rochester Builders Exchange; Dodge Data and Analytics; and NAMC-UM Plan Room. Bidders desiring drawings and specifications for personal use may secure a complete digital set at the *QuestCDN website*. Bidders may download the complete set of digital documents for \$22.00, or other fee as determined by QuestCDN, by entering eBidDoc™ #9882449 in the “Search Projects” page. Contact Quest Construction Data Network at (952) 233-1632 or info@questcdn.com for assistance. Hard copy drawings and specifications will not be made available to Bidders. Bid documents for this project may be viewed for no cost at QuestCDN Online. For this project, bids will **ONLY** be received electronically. Contractors submitting an electronic bid will be charged an additional \$42.00, or other fee as determined by QuestCDN, at the time of bid submission via the online electronic bid service QuestCDN Online.

MAC Internet Access of Additional Information: A comprehensive Notice of Call for Bids for this project will be available on March 30, 2026, at MAC’s web address of <https://metroairports.bonfirehub.com>.

Metropolitan Airports Commission (MAC) Notice of Call for Bids for 2026 Landside Utility Rehabilitation

Airport Location:	Minneapolis-St. Paul International Airport
Project Name:	2026 Landside Utility Rehabilitation
MAC Contract No.:	106-3-766
Bids Close At:	2:00 PM on April 15, 2026
Bid Opening Conference Call:	3:00 PM on April 15, 2026
Teleconference Dial In #:	1-612-405-6798
Conference ID #:	897 927 742#

Notice to Contractors: Electronic Bid Submission for the project listed above will be received by the MAC, a public corporation, via *QuestCDN’s website* until the official time and date as displayed in QuestCDN Online.

Note: You can sign up on our portal (<https://metroairports.bonfirehub.com>) to receive email notifications of new business opportunities.

Small Businesses (SB): The goal of the MAC for the utilization of Small Businesses on this project is 15%.

Bid Security: Each bid shall be accompanied by a “Bid Security” in the form of a certified check made payable to the MAC in the amount of not less than five percent (5%) of the total bid, or a surety bond in the same amount, running to the MAC, with the surety company thereon duly authorized to do business in the State of Minnesota.

Availability of Construction Documents: Plans and specifications are on file for inspection at the office of Kimley-Horn and Associates; at the QuestCDN Online indicated below and at the Minnesota Builders Exchange; Rochester Builders Exchange; Dodge Data and Analytics; and NAMC-UM Plan Room. Bidders desiring drawings and specifications for personal use may secure a complete digital set at the *QuestCDN website*. Bidders may download the complete set of digital documents for \$22.00, or other fee as determined by QuestCDN, by entering eBidDoc™ #9921815 in the “Search Projects” page. Contact Quest Construction Data Network at (952) 233-1632 or info@questcdn.com for assistance. Hard copy drawings and specifications will not be made available to Bidders. Bid documents for this project may be viewed for no cost at QuestCDN Online. For this project, bids will **ONLY** be received electronically.

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Contractors submitting an electronic bid will be charged an additional \$42.00, or other fee as determined by QuestCDN, at the time of bid submission via the online electronic bid service QuestCDN Online.

MAC Internet Access of Additional Information: A comprehensive Notice of Call for Bids for this project will be available on March 30, 2026, at MAC's web address of <https://metroairports.bonfirehub.com>.

Metropolitan Airports Commission (MAC) Notice of Call for Bids for 2026 Miscellaneous Airfield Construction Phase 1 – Airside Artificial Turf

Airport Location:	MSP International Airport
Project Name:	2026 Miscellaneous Airfield Construction Phase 1 – Airside Artificial Turf
MAC Contract No.:	106-1-404
Bids Close At:	2:00 PM on April 15, 2026
Bid Opening Conference Call:	3:00 PM on April 15, 2026
Teleconference Dial In #:	1-612-405-6798
Conference ID #:	897 927 742#

Notice to Contractors: Electronic Bid Submission for the project listed above will be received by the MAC, a public corporation, via *QuestCDN's website* until the official time and date as displayed in QuestCDN Online.

Note: You can sign up on our portal (<https://metroairports.bonfirehub.com>) to receive email notifications of new business opportunities.

Small Businesses (SB): The goal of the MAC for the utilization of Small Businesses on this project is 8%.

Bid Security: Each bid shall be accompanied by a "Bid Security" in the form of a certified check made payable to the MAC in the amount of not less than five percent (5%) of the total bid, or a surety bond in the same amount, running to the MAC, with the surety company thereon duly authorized to do business in the State of Minnesota.

Availability of Construction Documents: Plans and specifications are at the QuestCDN Online indicated below and at the Minnesota Builders Exchange; Rochester Builders Exchange; Dodge Data and Analytics; and NAMC-UM Plan Room. Bidders desiring drawings and specifications for personal use may secure a complete digital set at the *QuestCDN website*. Bidders may download the complete set of digital documents for \$22.00, or other fee as determined by QuestCDN, by entering eBidDoc™ #10120501 in the "Search Projects" page. Contact Quest Construction Data Network at (952) 233-1632 or info@questcdn.com for assistance. Hard copy drawings and specifications will not be made available to Bidders. Bid documents for this project may be viewed for no cost at QuestCDN Online. For this project, bids will **ONLY** be received electronically. Contractors submitting an electronic bid will be charged an additional \$42.00, or other fee as determined by QuestCDN, at the time of bid submission via the online electronic bid service QuestCDN Online.

MAC Internet Access of Additional Information: A comprehensive Notice of Call for Bids for this project will be available on March 30, 2026, at MAC's web address of <https://metroairports.bonfirehub.com>.

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Metropolitan Airports Commission (MAC)

Notice of Call for Bids for 2026 Terminal 2 Roadway Additional Lane

Airport Location: Minneapolis-St. Paul International Airport
Project Name: 2026 Terminal 2 Roadway Additional Lane
MAC Contract No.: 106-3-789
Bids Close At: 2:00 PM on April 16, 2026
Bid Opening Conference Call: 3:00 PM on April 16, 2026
Teleconference Dial In #: 1-612-405-6798
Conference ID #: 897 927 742#

Notice to Contractors: Electronic Bid Submission for the project listed above will be received by the MAC, a public corporation, via *QuestCDN's website* until the official time and date as displayed in QuestCDN Online.

Note: You can sign up on our portal (<https://metroairports.bonfirehub.com>) to receive email notifications of new business opportunities.

Small Businesses (SB): The goal of the MAC for the utilization of Small Businesses on this project is 19%.

Bid Security: Each bid shall be accompanied by a "Bid Security" in the form of a certified check made payable to the MAC in the amount of not less than five percent (5%) of the total bid, or a surety bond in the same amount, running to the MAC, with the surety company thereon duly authorized to do business in the State of Minnesota.

Availability of Construction Documents: Plans and specifications are on file for inspection at the office of Kimley-Horn and Associates, Inc.; at the QuestCDN Online indicated below and at the Minnesota Builders Exchange; Rochester Builders Exchange; Dodge Data and Analytics; and NAMC-UM Plan Room. Bidders desiring drawings and specifications for personal use may secure a complete digital set at the *QuestCDN website*. Bidders may download the complete set of digital documents for \$22.00, or other fee as determined by QuestCDN, by entering eBidDoc™ #9936757 in the "Search Projects" page. Contact Quest Construction Data Network at (952) 233-1632 or info@questcdn.com for assistance. Hard copy drawings and specifications will not be made available to Bidders. Bid documents for this project may be viewed for no cost at QuestCDN Online. For this project, bids will **ONLY** be received electronically. Contractors submitting an electronic bid will be charged an additional \$42.00, or other fee as determined by QuestCDN, at the time of bid submission via the online electronic bid service QuestCDN Online.

MAC Internet Access of Additional Information: A comprehensive Notice of Call for Bids for this project will be available on March 30, 2026, at MAC's web address of <https://metroairports.bonfirehub.com>.

