



Facility Inspection Report Issued By The Minnesota Department of Corrections Pursuant to MN Statute 241.021, Subdivision 1

Inspection and Enforcement Unit, 1450 Energy Park Drive, Suite 200, St.Paul MN 55108
Telephone: 651-361-7146 Fax: 651-642-0314 Email: ie-support.doc@state.mn.us

INSPECTION DETAILS FOR:

Anoka County Jail

Address: 325 E Jackson Street, Anoka, MN 55303

MN Governing Rule: 2911 Local Adult Detention Facilities

Inspection Type: Biennial **Inspected By:** Jen Pfeifer – Senior Detention Facility Inspector **Inspected on:** 11/08/2022

Inspection Method: Facility tour, staff and resident interviews, employee and resident file reviews, video footage review, and related documentation reviews.

Officials Present During Inspection: Commander Sheila Larson; Lieutenant Carrie Wood

Officials Present for Exit Interview: Commander Sheila Larson

Issued Inspection Report to: Commander Sheila Larson; Lieutenant Carrie Wood; County Administrator Rhonda Sivarajah; Regional Manager Jacob McLellan

RULE COMPLIANCE SUMMARY

Rule Chapter	Requirement Type	Total Applicable	Total Compliance	Total Non Compliance	Total Compliance With Concerns	Compliance Rating	Substantial Compliance Result/Criteria
2911	Mandatory	126	119	3	4	97.62%	Compliance rating of 100%
2911	Essential	102	101	1	0	99.02%	Compliance rating of 90%

TERMS OF OPERATION

Authority to Operate: approval **Begins On:** 12/01/2022 **Ends On:** 11/30/2024 **Facility Type:** Jail

Placed on Biennial Status: Yes **Biennial Status Annual Compliance Form Due On:** 11/30/2023

Delinquent Juvenile Hold Approval: no approval **Certificate Holder:** Anoka County Sheriff's Office
325 E. Jackson Street
Anoka, MN 55303

Special Conditions: None.

Approved Capacity Details **Operational Capacity is calculated as a percent of Approved Capacity beds.*

Bed Type	Gender	Approved Capacity	%Operating Capacity	Operational Capacity	Bed Details	Conditions
Secure	Coed	238	90	214.20	None.	None.

RULE COMPLIANCE DETAILS

Chapter 2911 - Mandatory Rules Not In Compliance**Total: 3**

1. 2911.2525 ADMISSIONS. Subpart 1. Policies and procedures.

A facility shall have written policies and procedures for processing new inmates to the facility to include, at a minimum, the following: A. obtaining and documenting available emergency medical information within two hours of admission; B. verification of court commitment papers or other legal documentation of detention. Verification shall include checking the date of admission, duration of confinement, and specific charges; C. a search of the inmate and the inmate's possessions; D. inventory and storage of the inmate's personal property; E. initial medical screening to include an assessment of the inmate's health status, including any medical or mental health needs; F. telephone calls made by the inmate during the booking and admission process and prior to assignment to other housing areas; G. shower and hair cleansing; H. issue of bedding, clothing, and personal hygiene items according to the rule requirements applicable to the anticipated length of stay of the inmate; I. photographing and fingerprinting including notation of identifying marks or unusual characteristics such as birthmarks or tattoos; J. interviewing to obtain the following identifying data: (1) name and aliases of person; (2) current address, or last known address; (3) health insurance information; (4) gender; (5) age; (6) date of birth; (7) place of birth; (8) race; (9) present or last place of employment; (10) emergency contact including name, relation, address, and telephone number; and (11) additional information concerning special custody requirements or special needs; K. initial classification of the inmate and assignment to a housing unit; L. an assigned booking number; and M. Social Security number, driver's license number, or state identification number, if available.

Inspection Findings:

The policy does not address obtaining emergency medical information within two hours of admissions.

Corrective Actions:

The facility shall add the required language into the policy manual. Submit updated policy to the Department of Corrections by December 31, 2022.

Response Needed By: 12/31/2022

2. 2911.5800 AVAILABILITY OF MEDICAL AND DENTAL RESOURCES. Subpart 3. Health care policy review.

Facility policy shall ensure that each policy, procedure, and program in the health care delivery system is reviewed and documented at least annually under the direction of the health authority and revised as necessary.

Inspection Findings:

The medical policies have not been signed by the medical authority.

Corrective Actions:

Ensure that the medical policies have been reviewed and signed by the medical authority. Submit to the Department of Corrections by December 31, 2022.

Response Needed By: 12/31/2022

3. 2911.6500 STORAGE. Subpart 6. Needles and other medical sharps.

There shall be a written policy and procedure for the control and disposal of medical sharps and supplies. Medical sharps and supplies when used or stored in inmate housing areas shall be accounted for and secured in a locked area.

Inspection Findings:

An inventory of sharps is being completed; however, sharps counts were not accurate.

Corrective Actions:

The facility shall ensure that all sharps are accurately accounted for.

Response Needed By: 12/31/2022

Chapter 2911 - Essential Rules Not In Compliance**Total: 1**

1. 2911.1200 CLERICAL AND SUPPORT EMPLOYEES WITH REGULAR OR DAILY INMATE CONTACT: TRAINING. Subpart 2. Regular or daily inmate contact.

A facility shall have a written policy and procedure that provides that all new clerical and support employees who have regular or daily inmate contact receive 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. At a minimum, this training covers the following areas: A. security procedures and regulations; B. rights and responsibilities of inmates; C. all applicable emergency procedures; D. interpersonal relations and communication skills; and E. first aid.

Inspection Findings:

Anoka County recently moved to a contract medical provider. There were no records indicating the medical staff received the required training under this rule part.

Corrective Actions:

Ensure that all medical staff with regular inmate contact receive at least the minimum number of training hours on topics listed in this section of the rule as well as quarterly emergency procedures and annual drills.

Arrange for orientation and security training for all new contract staff members.

Response Needed By: 02/28/2023**Chapter 2911 - Mandatory Rules In Compliance With Concerns****Total: 4**

1. 2911.5000 POST ORDERS; FORMAL INMATE COUNT; WELL-BEING CHECKS. Subpart 5. Well-being.

A facility shall have a system providing for well-being checks of inmates. A written policy and procedure shall provide that all inmates are personally observed by a custody staff person at least once every 30 minutes. Thirty-minute checks should be staggered. If a well-being check does not occur due to an emergency, it must be documented in the jail log and have supervisory review and approval. More frequent observation is required for those inmates of a special need classification who may be harmful to themselves. Examples of inmates of a special need classification include those classified as potentially suicidal, or as mentally ill, or those experiencing withdrawal from drugs or alcohol.

Inspection Findings:

Well-being checks were viewed as being in compliance with the 30-minute time frame allowed in the rule, however checks were observed as being at too fast a pace to determine the well-being of the inmate.

Corrective Actions:

The facility has a well-defined auditing process in place so there is no further corrective action at this time.

Response Needed By:

2. 2911.5800 AVAILABILITY OF MEDICAL AND DENTAL RESOURCES. Subpart 1. Availability of resources, general.

Under the direction of a health authority, a facility shall develop a written policy and procedure that provides for the delivery of health care services, including medical, dental, and mental health services.

Inspection Findings:

The facility has medical policies integrated into Lexipol, however they are still in the process of working through them with the medical authority.

Corrective Actions:

Continue to work with the medical authority to create policies for approval.

Response Needed By:

3. 2911.6500 STORAGE. Subpart 2. Refrigeration.

Medication requiring refrigeration shall be refrigerated and secured and the temperature checked daily. There must be separate refrigeration for medications only.

Inspection Findings:

A separate, dedicated, medication refrigerator is being utilized in the medical unit and is equipped with a local alarm if temperature is not maintained. However, the refrigerator temperatures are not being logged consistently.

Corrective Actions:

Establish a daily logging mechanism to track refrigerator temperatures.

Response Needed By: 12/31/2022

4. 2911.6500 STORAGE. Subpart 5. Controlled substances.

There shall be a procedure for maximum security storage of and accountability for controlled substances.

Inspection Findings:

Controlled substances were accounted for, however, one of the medications was not signed as given.

Corrective Actions:

The facility shall ensure that all controlled medications are recorded and signed as given according to facility policy.

Response Needed By:

INSPECTION COMMENTS

Physical Plant: The Anoka County Jail was built in 1982 and remodeled in 2000. It is the oldest county jail in the metro area. The intake area is not of adequate size for the number of inmates processed annually. The property room and storage areas are also undersized for the population. The design of the intake area does not provide sufficient holding cells or separation capabilities. The separation capabilities of the facility as a whole are lacking, especially given the current pandemic and additional separation requirements needed to keep inmates safe. The medical unit is also short on space. Exam rooms are being utilized for medication and supply storage as well as office space. Other areas of the jail lacking appropriate space for the number of inmates served, include programming and recreation.

The remodel in 2000 added officer work stations into the linear style housing units but the placement of the work stations allows for inmate access above the officer and makes inmate supervision more difficult.

The National Institute of Corrections estimates the life expectancy of the jail facility, utilized 24 hours a day, to be 25 to 30 years. The Anoka County Jail has been operating for almost 40 years bringing into question original infrastructure items such as cast-iron plumbing and old electrical work. It is recommended that the elected officials of Anoka County continue to develop plans for the future needs of the incarcerated population.

Well-being checks: The well-being checks reviewed during this inspection were found to be in compliance with the rule, however the pace appeared to be too fast to ensure the well-being of the inmates.

Inspection Status: This was the commander's first inspection. Operationally, the facility is in substantial compliance with the rule. The facility will be moved to a biennial inspection cycle.

JJDPA Compliance

On November 8,2022, a Juvenile Justice and Delinquency Prevention Act audit was conducted. The Anoka County Jail has no juvenile hold approval. According to the DOC Portal system and facility records, the Anoka County Jail held or processed zero (0) juveniles between October 2022 and the day of inspection.

DSO: No violations were found in the area of holding any status offenders.

Jail Removal: No juveniles were held at the facility.

Sight and Sound Separation: The facility has no delinquent juvenile hold approval.

The facility does not participate in any "Scared Straight" programs for any youth under public authority. No violations of the JJDP act were found during the Anoka County jail inspection.

Report completed By: Jen Pfeifer – Senior Detention Facility Inspector

Signature:

Jennifer Pfeifer
