



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

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## INSPECTION DETAILS FOR:

### Arrowhead Juvenile Center

**Address:** 1918 N Arlington Avenue, Duluth, MN 55811

**MN Governing Rule:** 2960 Children's Residential Facility

**Inspection Type:** Biennial **Inspected By:** Monaie Hebert – Detention Facility Inspector **Inspected on:** 12/16/2020 to 12/17/2020

**Inspection Method:** This inspection consisted of a review of the physical plant, including all of the units, living space, bedrooms, school rooms, nursing area, recreation areas, kitchen/dining room, intake area, art room and supply areas. I also reviewed staff and resident files, training files, medication logs, resident handbook, policy and procedures, grievances, DRT documentation, recreation schedule, resident rights posted, federal compliance and camera/well-being checks.

**Officials Present During Inspection:** Superintendent Becky Pogatchnik

**Officials Present for Exit Interview:** Superintendent Becky Pogatchnik

**Issued Inspection Report to:** Executive Director Kay Arola; Superintendent Becky Pogatchnik; Regional Manager Dayna Burmeister

## RULE COMPLIANCE SUMMARY

Rule Chapter	Requirement Type	Total Applicable	Total Compliance	Total Non Compliance
2960	Mandatory	316	315	0

## TERMS OF OPERATION

**Authority to Operate:** approval **Begins On:** 11/01/2020 **Ends On:** 10/31/2022 **Facility Type:** Secure Juvenile Detention/Residential Facility

**Placed on Biennial Status:** Yes **Biennial Status Annual Compliance Form Due On:** 10/31/2021

**Delinquent Juvenile Hold Approval:** Not Applicable **Certificate Holder:** Arrowhead Juvenile Center  
1918 N. Arlington Avenue  
Duluth, MN 55811

**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	Pre 96 LTSR	Post 96 LTSR	Bed Details	Conditions
Interchangeable secure residential/detention	Coed	48	100	48.00	0	16	This includes 16 long-term secure beds.	None.

## RULE COMPLIANCE DETAILS

**Chapter 2960 - Mandatory Rules In Compliance With Concerns****Total: 1****1. 2960.0360 SECURITY POLICIES AND PROCEDURES. Subpart 1. Content of policies and procedures.**

A license holder who offers correctional program services must develop security policies and procedures regarding the following: A. control and recovery of contraband; B. delivery and service procedures; C. prohibition of firearms and other weapons in resident areas and measures to ensure that weapons are inaccessible to residents; D. search procedures; E. escort of residents outside the secured area; and F. one half hour interval well being checks, when residents are not under direct supervision.

**Inspection Findings:**

The facility utilizes an electronic system to track well-being checks. In doing so, they identify and address out-of-compliance checks immediately. In discussions with administration and a review of their process, there were some incidents of non-compliance identified. Supervisors receive reports and review camera footage weekly for compliance. As aforementioned, incidents of non-compliance are identified and addressed with the specific staff immediately. When addressing with staff, there is progressive actions ranging from a formal file letter, formal discipline and termination if appropriate.

In an inspection review of cameras, there were no late checks identified, however, there were some staff who do not appear to be pausing long enough during their well-being check to ensure resident safety. Noted: The electronic system forces staff to identify the resident's actions at the time of check, therefore, checks in which a resident was identified as awake, would not be included.

**Corrective Actions:**

**The facility's quality control is excellent, overall. They do identify any late occurring check immediately. The process and progressive discipline is adequate. The facility should consider a more in depth training on well-being checks to ensure quality and timeliness. Additionally, remind staff that during camera checks, the camera reviewer will not know if the resident is immediately visible and moving.**

**Response Needed By:****INSPECTION COMMENTS**

The Arrowhead Juvenile Center biennial inspection was completed on December 17-18, 2020, using Minnesota Rules, Chapter 2960, governing juvenile residential facilities. Sections of the 2960 standards that are applicable to the programs at this facility include: Administrative, Group Residential, Secure, Detention, Corrections and Restrictive Procedures. This inspection was conducted by Monaie Hebert, Juvenile Inspector, of the Inspection and Enforcement Unit.

This scheduled inspection visit consisted of a physical plant safety and security inspection. The physical plant inspection included intake, medical area, resident living areas, resident bedrooms, bathrooms, visiting/meeting/group rooms, gym/recreation areas, kitchen and classroom areas of the secure facility.

The inspection also included discussions with multiple staff, supervisors, direct care staff, nursing staff and administration, as well as discussions with and observation of staff interactions with residents. Documentation review included staff personal and training files, resident files, daily logs, treatment plans, menus, recreation schedules, grievance documentation, well-being checks and other pertinent facility documentation. There was also a review of the facility policy and procedure manual, resident handbook and overviews for the program.

The following comments and concerns are a result of the inspection.

While these may not be specific rule violations, these are areas that provide constructive feedback to help address potential facility issues.

1) The facility response to COVID-19 follows CDC guidelines and includes masks for residents and staff, and an area for all entering to sanitize hands prior to entry into the facility. The accommodations for quarantined youth (either positive or pending test results) and PPE for staff is good.

2) While many facilities have struggled to maintain consistent programming throughout the past several months due to COVID-19 restrictions to outside agencies and staffing issues, AJC has maintained consistent programming, including treatment delivery.

3) The facility has excellent staff retention. Many staff are long term employees with years of experience working with juveniles. Many staff functioning as case managers or supervisors are either classified as probation agents or were former agents with a high level of professionalism, training and experience.

4) The facility was exceptionally clean and maintained. In interviews with residents, feedback was positive and indicated that residents feel safe and cared for.

Concerns not noted in the inspection:

1) The facility currently utilizes a disciplinary room time duration given in terms of shifts vs hours. They also conduct their DRT reviews per shift instead of a specific time (beginning of each shift). While this is in compliance as it appears to be done each shift, it is difficult to track time. Consider adding number of hours or changing shifts to hours of DRT. Add times of reviews, instead of beginning of shift and ensure staff are adding detail to the review.

2) Each resident grievance is addressed by the unit supervisor with the resident. This is an excellent practice. However, some grievances do not indicate detail of the interaction. Consider requiring more detail regarding that interaction with the resident. Also consider adding a space for the resident to indicate which resident right, if any, has been violated. This practice encourages critical thinking for residents and identifies whether it is a valid grievance or a complaint/criticism.

The inspection went very well. There were great discussions with all unit supervisors and administrators. All appear to be appreciative of feedback and motivated to take actions necessary for continued positive improvement. I would like to sincerely thank you for your cooperation during this licensing visit.

Please contact me if you have any questions regarding this report, at 651-261-1657.

#### JJDPA Compliance

Federal compliance review of data from October 1, 2020 to December 17, 2020 was reviewed and identified no violations.

Report completed By: Monaie Hebert – Detention Facility Inspector

Signature: \_\_\_\_\_

