



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:

Blue Earth County Jail

Address: 401 Carver Road, Mankato, MN 56002

MN Governing Rule: 2911 Local Adult Detention Facilities

Inspection Type: Annual **Inspected By:** Jen Pfeifer – Detention Facility Inspector **Inspected on:** 06/22/2021 to 06/28/2021

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

Officials Present During Inspection: Jail Administrator James Saleda

Officials Present for Exit Interview: Jail Administrator James Saleda

Issued Inspection Report to: Jail Administrator James Saleda; Sheriff Brad Peterson; County Administrator Robert Meyer; Regional Manager Dayna Burmeister

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	125	115	9	1	92.80%	Compliance rating of 100%
2911	Essential	100	95	2	3	98.00%	Compliance rating of 90%

TERMS OF OPERATION

Authority to Operate: conditional approval **Begins On:** 07/01/2021 **Ends On:** 06/30/2022 **Facility Type:** Jail
Placed on Biennial Status: No **Biennial Status Annual Compliance Form Due On:**
Delinquent Juvenile Hold Approval: 6 hrs **Certificate Holder:** Blue Earth County Sheriff's Office
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	146	90	131.40	None.	None.

RULE COMPLIANCE DETAILS

Chapter 2911 - Mandatory Rules Not In Compliance

Total: 9

- 2911.0900 STAFFING REQUIREMENTS. Subpart 1. Staffing plan and staffing analysis.

The facility administrator shall prepare and retain a staffing plan. The staffing plan shall identify: A. jail personnel assignments for: (1) facility administration and supervisors; (2) facility programs including exercise and recreation; (3) inmate admission, booking, supervision, and custody; (4) support services including medical, food services, maintenance, and clerical; and (5) other jail-relevant functions such as escort and transportation of inmates; B. the days of the week that the assignments are filled; C. the hours of the day that the assignments are covered; and D. any deviations from the plan with respect to weekends, holidays, or other atypical situations must be considered. The facility administrator or designee shall 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' governing body for funding consideration. 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.

Inspection Findings:

The staffing plan has not been updated and there was no documentation provided of a yearly review.

Corrective Actions:

Complete an updated staffing plan through the DOC Portal Portal by October 29, 2021. Staffing plans shall be reviewed yearly and the jail shall maintain documentation of these reviews.

Response Needed By: 10/29/2021

2. 2911.1900 POLICY AND PROCEDURE MANUALS.

A facility shall have a written policy and procedure manual that is electronically available to staff and relevant 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. The manual shall include, at a minimum, the following chapters: A. correctional standards required under this chapter; B. administration and organization; C. fiscal management; D. personnel; E. training; F. inmate records; G. safety and emergency; H. security and control; I. sanitation and hygiene; J. food service; K. medical and health care services; L. inmate rules and discipline; M. communication, mail, and visiting; N. admissions, orientation, classification, property control, and release; O. inmate activities, programs, and services; and P. a written suicide prevention and intervention plan. The facility administrator or designee shall review policy and procedure manuals at least once each year. The review shall be documented in written form sufficient to indicate that policies and procedures have been reviewed and amended as appropriate to facility changes.

Inspection Findings:

There is no yearly review documented by administration.

Corrective Actions:

The policy manual shall be reviewed yearly and documented by administration. Policy should be updated to reflect current practice and current accepted language. Policies shall also reflect the current jail administrator. Provide update policy manual to the Department of Corrections by December 31, 2021.

Response Needed By: 12/31/2021

3. 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 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:

During a previous review, the admissions process was found to be non-existent during the overnight hours. Inmates were not completing the admissions process and were placed in holding cells for the night prior to the officers gathering the required information at the time of intake.

Corrective Actions:

The facility has been working to ensure all new intakes are completing the required admissions procedures at the time of initial intake. The inspector will follow-up with the facility to ensure compliance.

Response Needed By: 07/30/2021

4. 2911.2525 ADMISSIONS. Subpart 3. Orientation to rules and services.

A facility shall develop a written policy and procedure that provides: A. a method for all newly admitted inmates to receive orientation information in a manner the inmates can understand; and B. documentation by a statement that is signed and dated by the inmate that the inmate completed orientation.

Inspection Findings:

There was no documentation provided of a signed statement by the inmate that they received orientation at the time of intake.

Corrective Actions:

Ensure that all inmates are receiving orientation during the admissions process and that the orientation is documented.

Response Needed By: 07/30/2021

5. 2911.2600 CLASSIFICATION OF INMATES. Subpart 1. Policy and procedure.

A facility shall have a written policy and procedure that provides for inmate classification in terms of level of custody required, housing assignment, participation in facility programs, and use of any overrides. The facility's policy and procedure on classification shall include consideration of the following: A. inmate gender; B. juvenile or adult status; C. category of offense; D. severity of current charges, convictions, or both; E. degree of escape risk; F. potential risk of safety to others and self; G. institutional disciplinary history; H. serious offense history; I. special needs assessment, inclusive of vulnerable adults, which includes a determination of how medical needs, mental health needs, developmental disability, or other behavioral or physical limitations or disabilities may impact on the classification of an inmate and appropriate housing of same; and J. special management inmate status.

Inspection Findings:

Classifications are not being completed consistently will all staff. Some forms were incomplete and others did not indicate how or what the officer determined to classify.

Corrective Actions:

Facility administrators and supervisors must ensure that all classifications are being completed on every new intake and that inmates are being properly classified.

Response Needed By: 07/30/2021

6. 2911.3700 EMERGENCIES AND UNUSUAL OCCURRENCES. Subpart 1. Emergency plan.

A facility shall have a written disaster plan. The plan shall 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 facility must be evacuated in total. The plan shall also include: A. location of alarms and fire fighting equipment; B. an emergency drill policy as follows: (1) at least annual drills at all facility locations; and (2) drills shall be conducted even when evacuation of extremely dangerous inmates may not be included; C. specific assignments and tasks for personnel; D. persons and emergency departments to be notified; E. procedure for evacuation of inmates; and F. arrangements for temporary confinement of inmates.

Inspection Findings:

There was no documentation of an evacuation drill provided at the time of the inspection.

Corrective Actions:

The facility shall be completing yearly evacuation drills and documenting these drills. It is strongly recommended that a review of these drills be completed by administration be completed to determine areas of concern, ways for improvement and areas where the drills worked well. Fire, severe weather, man down and cut down drills shall be added to the yearly training plan. These drills shall be documented.

Response Needed By: 10/29/2021

7. 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 found to be out of compliance with the 30 minute time frame allowed in the rule. Checks were also viewed as being completed to quickly to ensure the safety and well-being of inmates.

Corrective Actions:

Due to multiple instances where it was found that well-being checks were out of compliance with the rule, the facility was asked to complete a retrain all of all staff on the importance of well-being checks and the required elements in the rule. This was completed in December 2020 and was documented in training records. The facility has implemented a system for regular auditing of well-being checks, however well-being checks continue to be out of compliance with the rule.

Response Needed By: 07/30/2021

8. 2911.5450 DANGEROUS MATERIALS.

A facility shall have a written policy and procedure that specifies that materials dangerous to either security or safety shall be properly secured. Storage and use of flammable, toxic, and caustic materials must be in accordance with all applicable laws and regulations of governing jurisdictions. The policy must cover control and use of tools and culinary and medical equipment.

Inspection Findings:

Chemicals were found to be corrosive and flammable.

Corrective Actions:

Remove all chemicals for inmate use that are corrosive, flammable, or those that are listed to cause irreversible eye damage or skin burns.

Response Needed By: 07/30/2021

9. 2911.6800 CONTROL. Subpart 1. Records.

Records of receipt, the quantity of the drugs, and the disposition of all prescription medications shall be maintained in detail to enable an accurate accounting.

Inspection Findings:

There is no system for accounting of medications.

Corrective Actions:

The facility is currently using electronic MARS which does not have the capability to account for medications. The nurse has a system to do this manually, but it is not being completed on a regular basis and with all medications. The facility shall work with the medical authority to ensure medications are being accounted for. The inspector will follow up with the facility to ensure compliance with the rule.

Response Needed By: 07/30/2021

Chapter 2911 - Essential Rules Not In Compliance**Total: 2**

1. 2911.4900 SECURITY INSPECTION.

The facility shall have a written policy and procedure to require the facility administrator or designee to inspect all areas within the security perimeter, and equipment at least monthly and initiate corrective action if needed.

Inspection Findings:

There was no documentation of a monthly security inspection being completed.

Corrective Actions:

Create a security inspection and complete monthly. As discussed at the time of the inspection, the jail may incorporate elements of the security inspection with the weekly fire and sanitation inspection so that they are completed and the same time and not missed. Send a copy of this form to the Department of Corrections by August 31, 2021.

Response Needed By: 08/31/2021

2. 2911.5000 POST ORDERS; FORMAL INMATE COUNT; WELL-BEING CHECKS. Subpart 1. Post orders and accountability.

There shall be written orders for every security post that are reviewed annually and updated if necessary. A written policy and procedure shall require that personnel 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.

Inspection Findings:

There was no documentation provided for the review of POST orders annually.

Corrective Actions:

All post orders shall be reviewed annually by Correctional Staff and those reviews shall be documented. Post Orders shall be updated to include current Jail Administrator's name and signature.

Response Needed By: 10/29/2021**Chapter 2911 - Mandatory Rules In Compliance With Concerns****Total: 1**

1. 2911.1000 TRAINING PLAN.

A facility administrator or designee shall develop and implement a training plan for the orientation of new employees and volunteers and provide for continuing in-service training programs for all employees and volunteers. Training plans shall be documented and describe 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.

Inspection Findings:

The training plan is sufficient, however, it does not include the objectives for each training. Drills, post order review and other elements of training discussed at the time of the inspection should be added.

Corrective Actions:

Update the training plan to include objectives for each training. It is further recommended that trainings directly related to Signs and Symptoms of Mental Illness, Emotional Disturbance, and Chemical Dependency. Include specific drills to be completed and post order review. Submit to the Department of Corrections by August 30, 2021.

Response Needed By:

Chapter 2911 - Essential Rules In Compliance With Concerns**Total: 3****1. 2911.2700 INFORMATION TO INMATES. Subpart 1. Information made available to inmates.**

Copies of policies 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 be made available to all inmates. Information will be made available to disabled inmates including those that are hearing impaired, visually impaired, or unable to speak in a form that is accessible to them. Information required under this subpart shall be available in English. There shall be procedures in place to address the language barriers of non-English-speaking inmates. Policy and procedures shall ensure, to the extent practical, that inmates who are unable to speak English are provided with the information outlined in this part within 24 hours of admission to the facility in a form that is accessible to the inmate.

Inspection Findings:

There is a policy in place that says the facility will provide information to inmates in a way that is accessible to them, however when speaking with the jail administrator there was no clear process of how inmates who were hard of hearing would receive this information without significant delay.

Corrective Actions:

**Ensure that all staff are aware of the policies that are in place for inmates who do not speak English or who are hearing impaired.
Update policy to reflect current practice.**

Response Needed By:**2. 2911.2800 ADMINISTRATIVE SEGREGATION. Subpart 4. Policy.**

Written policy and procedure shall provide that the status of inmates in administrative segregation is reviewed every seven days. These policies shall provide: A. that the review is documented and placed in the inmate's file; B. that the inmate in administrative segregation receive visits from the facility administrator or designee a minimum of once every seven days as a part of the administrative review process; and C. that the review process that is used to release an inmate from administrative segregation is specified.

Inspection Findings:

The facility is reviewing the status of inmates housed in administrative segregation however the reviews are not documented in the inmates file.

Corrective Actions:

After the review team meets weekly, the results of those reviews shall be documented in the inmates file.

Response Needed By:**3. 2911.2850 INMATE DISCIPLINE PLAN. Subpart 3. Due process.**

Disciplinary segregation shall be used only in accordance with due process to include at a minimum: A. published rules of conduct and penalties for violation of rules; B. written notice of alleged violation of a rule; C. the right to be heard by an impartial hearing officer and to present evidence in defense: (1) the inmate may waive the hearing in writing; and (2) a written record is made of the disciplinary hearing and sanctions or other actions taken as a result of the hearing; D. the right to appeal; E. the status of an inmate placed on disciplinary segregation for more than 30 continuous days subsequent to a disciplinary hearing shall be reviewed, approved, and documented by the facility administrator or designee at least once every 30 days, and the facility shall develop written policy, procedure, and practice that provides that inmates 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; F. an inmate placed in segregation for an alleged rule violation shall have a disciplinary hearing within 72 hours of segregation, exclusive of holidays and weekends, unless documented cause can be shown for delays. Examples of causes for delay are inmate requests for delay, or logistical impossibility, as in the case of mass disturbances; and 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.

Inspection Findings:

Facility process does not allow for an inmate to waive the right to a hearing in writing.

Corrective Actions:

**The facility shall provide the inmate with a copy of the violation reports. These reports shall allow the inmate to sign whether or not they would like a hearing or waive their right.
The facility shall create a document with this information and submit to the Department of Corrections within 30 days of receipt of this report.**

INSPECTION COMMENTS

Jail comments:

The facility is clean and appears to be well-maintained, however grab bars located in the showers in some of the units are extremely corroded and need to be replaced. The facility will need to ensure those showers remain unoccupied until the bars are replaced.

According to the facility administrator, the admissions process in the facility has been addressed with all staff as a result of deficiencies found prior to the inspection. Although admissions paperwork is now being completed at the time of intake, classifications are not being completed consistently with staff. This was discussed at length at the time of the inspection. All classifications shall be completed on each newly admitted inmate and follow the criteria set forth using the model identifiers.

Well-being checks were found to be out of compliance throughout the year during the inspectors review of special incidents that were submitted through the DOC Portal System. Retraining was completed and documented and a system for auditing well-being checks was implemented. A review of those audits found that a significant number of well-being checks continue to be out of compliance with the rule. The facility will need to remain diligent in addressing those well-checks that are out of compliance.

A three month video review will be completed by the inspector to monitor progress. Correctional Officers also need to slow down the pace of each check to ensure they are able to determine the safety and well-being of each inmate they are supervising.

It is recommended that a complete evacuation drill be completed. Man down, cut-down, and other scenario based drills are strongly recommended. Annual fire drills shall be added to the yearly training plan.

Upon review of the intake medical screen it was noted that the brief mental health screen was added to this screen but that key elements of the brief mental health screen used for scoring had been omitted and the screen was not being scored at the time of intake. The Brief Mental Health Screen should be given in it's original form and scored as it was intended at the time of intake and not days later by the nurse. Mental Health referral numbers shall be reported to the Department of Corrections based on the results of the mental health screen. This was discussed at length with administration and medical at the time of the inspection.

The jail will be placed on annual inspections.

JJDPA Compliance

Compliance Report for the monitoring Facilities Pursuant to the Juvenile Justice Delinquency Prevention Act of 2002.

On June 22, 2021, a Juvenile Justice and Delinquency Prevention Act audit was conducted. The Blue Earth County Jail is in a metropolitan statistical area and has 6 hour hold. There are three core requirements that are looked at during our facility review. Those core requirements are Deinstitutionalization of Status Offenders (DSO), Removal of Juveniles for Adult Jail and Adult Lockups (Jail Removal), and Sight and Sound separation.

According to the DOC Portal System, the Blue Earth County Jail held or processed zero (0) juveniles during the federal fiscal year 2020-2021. Blue Earth County Jail does not hold or process any juveniles in the jail. The findings are as follows:

DSO: I did not find any violations of the facility holding status offenders in the jail.

Jail Removal: I did not find any violations for the jail removal standard.

Sight and Sound Separation: The facility design and policies allow for proper sight and sound separation. Blue Earth County does not hold delinquent juveniles in the facility per their policy. Juveniles are brought to Carver County Juvenile Detention Center or Juvenile Alternative Facility in Scott County.

The facility does not participate in any "Scared Straight" programs for any youth that are under public authority.

Court holding: There is four secure court holding cells at Blue Earth County with two in one area and two in another area. There is a separate juvenile entrance and secure hallway for juveniles only that lead to the court holding cells. Juvenile court is time phased from adults in addition to physical plant separation.

Based on the documentation that I reviewed, I did not find any violations of the JJDP act during the Blue Earth County inspection.

Report completed By: Jen Pfeifer – Detention Facility Inspector

Signature: _____

Jennifer Pfeifer