



# 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:

### Clay County Jail

**Address:** 915 Ninth Avenue, Moorhead, MN 56560

**MN Governing Rule:** 2911 Local Adult Detention Facilities

**Inspection Type:** Biennial **Inspected By:** Troy Okerlund – Detention Facility Inspector

**Inspected on:** 03/31/2022 to 04/11/2022

**Inspection Method:** On-site inspection, review of logs, review of inmate files, and review of documentation.

**Officials Present During Inspection:** Assistant Administrator Justin Roberts; Jail Administrator Kari Tuton

**Officials Present for Exit Interview:** Assistant Administrator Justin Roberts; Jail Administrator Kari Tuton

**Issued Inspection Report to:** Jail Administrator Kari Tuton; Sheriff Mark Empting; County Administrator Stephen Larson; Regional Manager Jake 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	115	10	1	92.06%	Compliance rating of 100%
2911	Essential	102	94	7	1	93.14%	Compliance rating of 90%

## TERMS OF OPERATION

**Authority to Operate:** approval

**Begins On:** 07/01/2022 **Ends On:** 06/30/2024

**Facility Type:** Jail

**Placed on Biennial Status:** Yes

**Biennial Status Annual Compliance Form Due On:** 06/30/2023

**Delinquent Juvenile Hold Approval:** no approval

**Certificate Holder:** Clay 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	204	93	189.72	None.	None.

## RULE COMPLIANCE DETAILS

### Chapter 2911 - Mandatory Rules Not In Compliance

**Total: 10**

- 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:**

While reviewing the facility policy, inspector looked through multiple policies labeled booking and referencing rule 2911.2525. Facility inspector was unable to locate a policy requiring staff to verify court commitment papers and other legal documentation of detention. Additionally, the policy must require checking the date of admission, duration of confinement, and specific charges.

Facility staff were also unable to locate a policy requiring that facility staff obtain and document emergency medical information within two hours of admission.

Facility inspector located a policy under booking and referencing DOC rule 2911.3400, within that policy it said inmates shall be permitted a telephone call once the booking process is complete or at the discretion of the booking officer. This policy was found to be in contrast with 2911.2525 subpart 1 F that states telephone are allowed for inmates during the booking and admission process and prior to the assignment to other housing areas.

**Corrective Actions:**

**The facility must modify their policy to add all of the required language from Minnesota rule 2911.2525 subdivision 1. The facility should also clarify their policy as to when inmate is authorized to make a telephone call while in the booking process, it should be consistent with the requirements from 2911. The Department recommends but is not requiring the facility streamline the policy in regard to 2011.2525 admissions and the booking process.**

**Response Needed By: 09/30/2022**

**2. 2911.2550 RELEASES. Subpart 1. Release procedures.**

A facility shall have written procedures for releasing inmates that include, at a minimum, the following: A. verification of identity; B. verification of authority to release; C. return of stored property with a receipt for the inmate to sign, unless the property is held for authorized investigation or litigation; and D. arrangements for completion of any pending action, such as grievances, or claims for damaged or lost possessions.

**Inspection Findings:**

While reviewing facilities policy on release procedures "arrangements for completion of any pending action, such as grievances, or claims for damaged or lost possessions" was not located within the policy. While conducting the on-site inspection it was learned that facility has no written procedures to address this issue. Per the rule this is a required minimum standard that the facility shall have written procedures for.

**Corrective Actions:**

**Create written procedures or policy that address the requirements within the rule of 2911.2550 subdivision 1, specifically "arrangements for completion of any pending action, such as grievances, or claims for damaged or lost possessions."**

**Response Needed By: 09/30/2022**

**3. 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:**

Per the rule the facility shall have a written policy and procedure that shall include consideration of juvenile or adult status. The facility does not house juveniles, and under facility policy 4.23.00 separation of inmates does not reference this classification requirement in the rule.

**Corrective Actions:**

**Although the facility only houses adult offenders, it may have the potential to house juvenile offenders and the rule does require that the language of juvenile or adult status be added in regard to the classification consideration policy criteria. The facility must add juvenile or adult status to its classification consideration requirements within policy.**

**Response Needed By: 09/30/2022**

**4. 2911.2750 INMATE HYGIENE. Subpart 1. Personal hygiene.**

The facility administrator or designee shall have and implement a written policy for personal hygiene practices of all inmates to include special assistance for those inmates who are unable to care for themselves. A written policy and procedure shall require that articles needed for personal hygiene are available to all inmates, and include at a minimum, the following: A. soap; B. toothbrush; C. toothpaste; D. shampoo; E. shaving equipment; F. materials essential to feminine hygiene; G. comb; and H. toilet paper.

**Inspection Findings:**

While reviewing facility policy inspector was unable to locate the hygiene items that are available to all inmates. Per the rule policy and procedure should identify articles needed for personal hygiene and that they are available to inmates. 2911.2750 Sub 1 A-H Must be identified in policy.

**Corrective Actions:**

**Per the rule the facility shall have a written policy and procedure that requires the minimum items identified in Rule 2911.2750 sub 1 A-H (soap, toothbrush, toothpaste, shampoo, shaving equipment, materials essential to feminine hygiene, comb, and toilet paper).**

**Response Needed By: 09/30/2022**

**5. 2911.3200 INMATE VISITATION**

The facility administrator or designee shall develop and implement an inmate visiting policy. The policy shall be in writing and include: A. attorney/client interviews allowed in a manner consistent with Minnesota Statutes, section 481.10; B. a schedule of visiting hours that includes the days and times for visits that includes visits during the normal business day, and evenings or weekends; C. establishment of a uniform number of permissible visits and the number of visitors permitted per visit; D. that an adult inmate be permitted an initial visit with a member or members of the inmate's immediate family at the next regularly scheduled visiting period; E. that all facilities schedule a minimum of eight visiting hours per week: (1) a minimum of three separate and distinct visiting days per week; and (2) 20 minutes' duration minimum for each visit unless the number of persons attempting to visit exceeds the facility's ability to meet this requirement, or the inmate's behavior dictates a need to terminate a visit earlier; F. allowed visits for identified members of an inmate's immediate family; G. when a visit to an inmate is denied for reasonable grounds on the belief that the visit might endanger the security of the facility, the action and reasons for denial shall be documented; H. that visitors register, giving names, addresses, and relationship to inmate; I that any area used for inmate visiting may be subject to audio monitoring, recording, or both. The facility shall use signs and the inmate handbook to inform the inmate about audio monitoring and recording. Professional visits not be audio recorded, unless a court order has been issued; J. that policies for parents, guardians, and attorneys visiting juveniles are unrestrictive as administratively possible and the initial visit of a juvenile by parents, guardians, and attorneys be permitted at any time; K. picture identification of visitors be required for identification purposes; L. that juvenile children be allowed to visit parents, regardless of age, as deemed appropriate by the parent or guardian accompanying the child and when a dispute over children visiting occurs between the inmate and the parent or legal guardian, the inmate be referred to the court for resolution; and M. facility policy and procedures setting forth criteria for authorized friend visiting.

**Inspection Findings:**

While reviewing policy and the inmate handbook there were references to recording, but it did not always clearly state "audio monitoring" as required in the rule. Days and times of visiting must be published.

**Corrective Actions:**

**The signs and inmate handbook must clearly state that inmates are subject to both audio monitoring and recording. Days and times of visiting must be published in policy per the rule.**

**Response Needed By: 09/30/2022**

## 6. 2911.3700 EMERGENCIES AND UNUSUAL OCCURRENCES. Subpart 5. Inmate death.

A facility shall have a written policy and procedure that specifies actions to be taken in the event of an inmate death. When an inmate death occurs: A. the date, time, and circumstances of the inmate's death shall be recorded in the inmate's record; B. if the inmate dies in the facility, the coroner or medical examiner's office shall be notified; C. personal belongings shall be handled in a responsible and legal manner; D. records of a deceased inmate shall be retained for a period of time specified by county policy; E. the facility administrator or designee shall ensure observance of all pertinent laws and allow appropriate investigating authorities full access to all facts surrounding the death; and F. in the event the death involves a "vulnerable adult" notification procedures shall be followed in a manner consistent with statutory requirements.

**Inspection Findings:**

The rule states that if facility shall have a policy in regard to the actions that need to be taken upon an inmate death. While reviewing policy, inspector could not find the required text within the rule for 2911.3700 Sub 5 (A, D, and F).

**Corrective Actions:****Facility policy and procedure must specify within policy:**

- A. The date and time and circumstances of inmate's death shall be recorded in the inmates record.**
- D. Records of a deceased inmate shall be retained for a period of time specified by county policy.**
- F. In the event the death involves a vulnerable adult notification procedures shall be followed in a manner consistent with statutory requirements.**

**Response Needed By: 09/30/2022**

## 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:**

Facility inspector reviewed well-being check video of Red River room for March 15th, 2022, from 6am to 10am. Of the six rounds of well-being checks reviewed six of the rounds contained checks found to be completed at a pace that was too fast to be regarded as a well-being check. Signs of life such as movement, rise and fall of chest and other signs of life would be difficult to determine at such a quick pace.

Facility inspector reviewed well-being check video of Maple East for March 20th, 2022, from 8pm to midnight. Of the six rounds of well-being checks reviewed, one of the rounds were found to be completed at a pace that was too fast to be regarded as a well-being check. Signs of life such as movement, rise and fall of chest and other signs of life would be difficult to determine at such a quick pace. On one of the rounds observed staff failed to check on the Maple East pod resulting in a gap of checks from 2055 to 2059. This resulted in a 1 hour and 4 minute gap, and a check that was 34 minutes late.

In the previous facility inspection it was noted by the inspector that well-being checks were occurring at a pace that was too fast to be regarded as a well-being check.

**Corrective Actions:**

**Non-complaint well-being checks must be addressed immediately and corrected. It is recommended that the facility begin an audit program to verify compliance of well-being checks with both quality and timeliness. In the previous inspection it was stated that corrective action for well-being checks was initiated. The previous corrective action failed to address the current deficiencies with well-being checks. Facility inspector recommended several audit protocols that will enhance compliance.**

**Response Needed By: 09/30/2022**

## 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:**

Inspector observed cleaning bottles throughout the facility with no labels. Unknown chemicals without labels should be treated as flammable, toxic, and caustic.

**Corrective Actions:**

**OSHA requires secondary container labels when operations in a work-place setting includes the transferring of smaller amounts from the original container to a secondary container such as a bottle. The facility must attach appropriate labels identifying the product consistent with Hazard Communication Standard, 29 CFR 1910.1200 (Employers are to provide information to their employees about the hazardous chemicals to which they are exposed, by means of a hazard communication program, labels and other forms of warning, safety data sheets, and information and training.)**

**Response Needed By: 09/30/2022**

9. 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:**

While reviewing the medical refrigerator it was observed that the temperature check log had not been documented in three days.

**Corrective Actions:**

**Monitor the temperature daily for the medication refrigerator and log this action daily.**

**Response Needed By: 09/30/2022**

10. 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:**

Medication accounting could not be verified during the inspection. While reviewing inmate medication it was found that medication count was off. It was reported that the contracted nursing staff were short staffed.

**Corrective Actions:**

**Bring staffing levels up to meet the needs of the facility. Review books and create an audit program if warranted. If an ongoing issue is present, corrective action must be taken.**

**Response Needed By: 09/30/2022**

**Chapter 2911 - Essential Rules Not In Compliance**

**Total: 7**

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:**

While reviewing facility policy inspectors we're unable to find within policy where clerical and support employees with regular daily inmate contact are receiving interpersonal relations and communication skills which is required at a minimum within the rule.

**Corrective Actions:**

**Policy must identify that at a minimum interpersonal relations and communication skills training is received by clerical and support employees with regular daily inmate contact.**

**Response Needed By: 09/30/2022**

2. 2911.1300 CUSTODY STAFF TRAINING.

A facility shall have a written policy and procedure that provides that all custody staff receive 120 hours of orientation and training during the first year of employment. Forty of these hours are completed prior to being 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: A. security procedures; B. supervision of inmates; C. signs of suicide risk and suicide precautions; D. vulnerable inmates; E. response to resistance regulations and tactics; F. report writing; G. inmate rules and regulations; H. rights and responsibilities of inmates; I. fire and emergency procedures; J. key control; K. interpersonal relations and communication skills; L. diversity training; M. distribution of medications; N. right to know; and O. blood-borne pathogens and communicable diseases.

**Inspection Findings:**

While reviewing policy it was found not all the minimum training required in the rule was identified in policy. Vulnerable inmate, Rights and responsibility of inmates.

**Corrective Actions:**

**Policy must be updated to include training for vulnerable inmates and rights and responsibility of inmates. Additionally, it is recommended but not required to add distribution of medication, right know, and blood borne pathogens and communicable diseases training within the facilities custody staff training policy. Although the 3 aforementioned are in policy elsewhere it may be advantageous to have policy that closely reflects the "Shall include" requirements of Minnesota Rule 1300.**

**Response Needed By: 09/30/2022**

3. 2911.1400 ADMINISTRATIVE AND MANAGERIAL STAFF TRAINING.

A facility shall have a written policy and procedure that provides that the facility's administrative and managerial staff receive at least 16 hours of orientation. Orientation training shall include, at a minimum, general management and related subjects, data practices, decision-making processes, labor law, employee-management relations, the interaction of elements of the criminal justice system, and relationships with other service agencies. After orientation, a facility's administrative and managerial staff shall receive at least 16 hours of training annually.

**Inspection Findings:**

While reviewing policy it was found not all the minimum training required in the rule was identified in policy: Data practices.

**Corrective Actions:**

**Policy must be updated to include training for data practices**

**Response Needed By: 09/30/2022**

4. 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:**

While reviewing the facilities policy it stated that "The Jail Administrator or designee will review the inmate's status every seven days." The Rule requires inmates in disciplinary segregation receive visits from the facility administrator or designee at least once every seven days.

**Corrective Actions:**

**Written policy and procedure shall provide that inmates on administrative segregation receive visits from the facility administrator or designee a minimum of once every seven days as part of the administrative review process.**

**Response Needed By: 09/30/2022**

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5. 2911.3100 INMATE ACTIVITIES AND PROGRAMS. Subpart 3. Library service.

The facility administrator or designee shall develop a library service including access to current leisure reading material such as books, magazines, and newspapers. Legal books and references requested by inmates shall be made available to the extent resources permit. The facility shall not be responsible for the purchase of legal books and references used by inmates. The facility shall have a designated staff person who coordinates and supervises library services.

**Inspection Findings:**

facility policy (10.10.00) states "inmates on disciplinary segregation will not have access to the library." The rule requires legal books and references requested by inmates shall be made available to the extent resources permit. If the facility wants to bar an inmate from access to the library it should be done on an individual basis, with cause, and requires a deprivation report be made and forwarded to the appropriate authority. While speaking with facility staff they stated that all inmates are allowed access to the library and they were unaware of this policy.

**Corrective Actions:**

**The facility will need to modify policy to be consistent with 2911. Jail staff stated that they will remove section 3 of the policy that states inmates on disciplinary segregation will not have access to the library.**

**Response Needed By: 09/30/2022**

6. 2911.3500 VOLUNTEERS.

When volunteers are used in facility programs, a written policy and procedure shall provide that a staff member is responsible for coordinating the volunteer service program. The policy includes the following elements: A. lines of authority, responsibility, and accountability for the volunteer services; B. a procedure for the screening and selection of volunteers; C. an orientation training program appropriate to the nature of the assignment; D. a requirement that volunteers agree in writing to abide by all facility rules and policies, with emphasis on security and confidentiality of information; and E. a statement that the administrator may discontinue a volunteer activity at any time by written notice.

**Inspection Findings:**

Per the rule the facility is required to note within policy that the administrator may discontinue a volunteer activity at any time by written notice. Currently the policy states that the administrator may suspend or discontinue volunteer services at any time.

**Corrective Actions:**

**The facility simply needs to update the policy and add the requirement that the administrator may suspend or discontinue volunteer services at any time "by written notice."**

**Response Needed By: 09/30/2022**

7. 2911.3600 CLOTHING AND BEDDING PROPERTY. Subpart 8. Protective clothing.

A facility shall have written policy, procedure, and practice that provides for the issue of special and, where appropriate, protective clothing and equipment to inmates participating in special work assignments. The clothing is available in quantities that permit exchange as frequently as the work assignment requires.

**Inspection Findings:**

While reviewing the policy, inspector could not locate a policy that identified the issuance of special and appropriate protective clothing and equipment to inmates participating and special work assignments. The clothing should be available in quantities that permit exchange as frequently as the work assignments require. While on site conducting the inspection the policy and procedure for the issuance of this special protective clothing could not be located.

**Corrective Actions:**

**Protective clothing is sometimes required while inmates assist with laundry or kitchen services. For example, if laundry detergent has hazards located on the label the appropriate protective gear such as gloves, goggles, or respirator should be addressed within the policy. Regardless if these hazards currently exist the facility is still required to have a policy, procedure, and practice that provides for the issue of special and where appropriate protective clothing and equipment to inmates participating in special work assignments.**

**Response Needed By: 09/30/2022**

**Chapter 2911 - Mandatory Rules In Compliance With Concerns****Total: 1**

## 1. 2911.2550 RELEASES. Subpart 2. Transportation.

An inmate shall be permitted to make arrangements for transportation prior to release.

**Inspection Findings:**

While reviewing policy there was a vague reference that transportation requirements must be made in the event of wind chill warnings. After speaking to facility staff, they stated inmates were permitted to make arrangements for transportation prior to release. It is recommended that this be clarified and included in policy that inmates shall be permitted to make arrangements for transportation per the rule. It is not required to be in policy but it is in the facility's best interest that staff are aware that the facility is required to provide this to inmates.

**Corrective Actions:**

**It is recommended but not required that the facility add "An inmate shall be permitted to make arrangements for transportation prior to release" to their policy.**

**Response Needed By:****Chapter 2911 - Essential Rules In Compliance With Concerns****Total: 1**

## 1. 2911.3700 EMERGENCIES AND UNUSUAL OCCURRENCES. Subpart 4. Reporting of unusual occurrences.

Incidents of an unusual or serious nature shall be reported within ten days of the incident in writing to the Department of Corrections in the format required by the department. The reports shall include the names of persons involved, staff and inmates, nature of the unusual occurrence, actions taken, and the date and time of the occurrence. Unusual occurrences requiring reporting to the DOC include such occurrences as: A. attempted suicide; B. suicide; C. homicide; D. death, by means other than suicide or homicide; E. serious injury or illness subsequent to detention including incidents resulting in hospitalization for medical care; F. hospitalization associated with mental health needs; G. attempted escape or escape from a secured facility; H. incidents of fire requiring medical treatment of staff or inmates or a response by a local fire authority; I. riot; J. assaults of one inmate by another that result in criminal charges or outside medical attention; K. assaults of staff by inmates that result in criminal charges or outside medical attention; L. injury to inmates through response to resistance by staff controlling inmate behavior; M. occurrences of infectious diseases and action taken relative to same when a medical authority has determined that the inmate must be isolated from other inmates; and N. reporting of all notices of intent to file litigation against the facility resulting from matters related to the detention or incarceration of an inmate; O. sexual misconduct, such as inmate on inmate, staff on inmate, and inmate on staff; and P. use of sexual materials, electronic media for sexual purposes, or both. In the event of an emergency such as serious illness or injury where death may be imminent, individuals designated by the inmate shall be notified. Permission for notification, if possible, shall be obtained from the inmate.

**Inspection Findings:**

Policy still states that the facility has 10 days to notify the Department of Corrections if a death occurs within the facility.

**Corrective Actions:**

**Per 241.021, policy should be updated to be consistent with state statute:**

**All facility administrators of correctional facilities are required to report all deaths of individuals who died while committed to the custody of the facility, regardless of whether the death occurred at the facility or after removal from the facility for medical care stemming from an incident or need for medical care at the correctional facility, as soon as practicable, but no later than 24 hours of receiving knowledge of the death, including any demographic information as required by the commissioner.**

**Response Needed By:**



**INSPECTION COMMENTS**

The facility is fairly new and in great condition. While observing the contact between custody staff and inmates' facility inspectors noted the professionalism, kindness, and positivity that exuded from the custody and supervisory staff. The jail is currently in transition. The previous jail administrator was at the facility for less than a year and the new jail administrator has recently taken over the new position. New employees have recently moved into the top three leadership roles.

While at the facility it was discussed the facility is meeting most expectations, however there are a few things within policy that need to be corrected. It was found that although policy may be in conflict with 2911 the actual procedures carried out by the facility and its staff are compliant with 2911 such as allowing all inmates access to the library or that staff is receiving the appropriate training. However, policy will need to be modified to be compliant with 2911 and reflect the required training that the jail is providing.

As noted in the inspection notes the facility should review their policy and confirm it's consistent with not only the rule but Minnesota State statutes that govern county jails. Items that were discussed was implementing a plan for conducting a death review within 90 days of the inmate's death consistent with state statute. Providing and documenting training to staff who have contact with pregnant inmates consistent with Minnesota State statute 241.88 subdivision 2.

**JJDP A Compliance**

The Clay County Jail has no juvenile hold approval, as there is a juvenile detention facility in the county. The Jail has held no Juveniles since October 1, 2021.

**Report completed By:** Troy Okerlund – Detention Facility Inspector

**Signature:**

