



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
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INSPECTION DETAILS FOR:

Damascus Way Reentry Center Inc.

Address: 5730 Olson Memorial Highway, Golden Valley, MN 55422

MN Governing Rule: 2920 Adult Community-Based Residential Correctional Facility

Inspection Type: Biennial **Inspected By:** Jen Pfeifer – Detention Facility Inspector

Inspected on: 06/16/2021 to 06/21/2021

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

Officials Present During Inspection: Associate Director Craig Fruen

Officials Present for Exit Interview: Associate Director Craig Fruen

Issued Inspection Report to: Associate Director Craig Fruen; Executive Director Tierre Webster

RULE COMPLIANCE SUMMARY

Rule Chapter	Requirement Type	Total Applicable	Total Compliance	Total Non Compliance	Total Compliance With Concerns	Compliance Rating	Substantial Compliance Result/Criteria
2920	Mandatory	24	24	0	0	100.00%	Compliance rating of 100%
2920	Essential	76	71	4	1	94.74%	Compliance rating of 90%

TERMS OF OPERATION

Authority to Operate: approval **Begins On:** 07/01/2021 **Ends On:** 06/30/2023 **Facility Type:** Adult Community-Based Residential Correctional Facility

Placed on Biennial Status: Yes **Biennial Status Annual Compliance Form Due On:** 06/30/2022

Delinquent Juvenile Hold Approval: no approval **Certificate Holder:** Damascus Way, Inc.

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
Adult Community-Based Residential Correctional Facility	Male	26	100	26.00	None.	None.

RULE COMPLIANCE DETAILS

Chapter 2920 - Essential Rules Not In Compliance**Total: 4****1. 2920.5900 SECURITY PROCEDURES.**

Written policies regarding security measures are required and must include: A. that the staff shall maintain a system of accounting for the residents at all times; B. that the facility shall have written procedures for the reporting of absconders; C. that the facility shall notify appropriate probation officers, parole officers, victims, if legally required, and other relevant officials as soon as it has been determined that a resident is missing; D. that the written policy shall prohibit weapons of any kind from being brought into the facility except by peace officers during the course of duties. The facility may have policy regarding the use of chemical agents by trained staff members; and E. a key inventory system for facility and resident keys.

Inspection Findings:

There is a system of accounting for residents in the facility, however it is not consistent with what policy requires.

Corrective Actions:

Facility policy requires that checks be completed once every hour and many checks were found to exceed that one hour time frame. Ensure that accountability checks are being completed according to policy. The Department of Corrections will complete a 3 month follow up check to ensure compliance.

Response Needed By: 09/30/2021**2. 2920.6200 SEARCHES.**

In compliance with applicable laws, the facility shall maintain and post written policies and procedures for conducting searches of residents, their belongings, and all areas of the facility to control contraband and locate missing or stolen property. The facility must have a policy that addresses searches of visitors.

Inspection Findings:

There is no system in place for documentation of searches completed or a place to document if anything is found that is not allowed.

Corrective Actions:

Create a system for searching resident rooms and property for contraband. Document when searches are complete. Submit a copy of this search form by July 30, 2021.

Response Needed By: 07/30/2021**3. 2920.6400 FIRE SAFETY; POLICY AND PROCEDURES.**

Written policy and procedures must specify the facility's fire prevention regulations and practices. New staff must be trained on these procedures during facility orientation. These procedures must include: A. provision for an adequate fire protection service; B. a system of fire inspection and testing of equipment determined by the local fire official; C. smoke detectors; D. annual fire drills and extinguishers; and E. procedures requiring one staff member to be knowledgeable about potential fire hazards and to make monthly inspections that must be documented.

Inspection Findings:

The facility is not completing monthly fire inspections.

Corrective Actions:

The facility must train and a staff member must be knowledgeable about potential fire hazards and completely monthly fire inspections for the facility. These inspections must be documented.

Submit check list for these fire inspections to the Department of Corrections by July 31, 2021.

Response Needed By: 07/31/2021

4. 2920.7600 PERSONNEL RECORDS. Subpart 1. General requirement; contents of record.

The adult community-based residential correctional facility shall maintain an accurate personnel record on each employee which shall include: A. initial application; B. appropriate results of employment investigation, if done; C. training and experience verification; D. wage and salary information; E. job performance evaluation completed at least annually; F. training programs which the employee participated in after employment began; G. documentation of sick leave, leave of absence, and vacation; H. grievance and disciplinary actions, if any; I. tuberculosis screening as required by law; J. dates of employment and termination with reason for termination; and K. results of a criminal history check.

Inspection Findings:

Personnel files did not contain required documentation.

Corrective Actions:

Personnel files did not contain background checks and other elements required by the rule. Ensure that all files have the this information.

Response Needed By:

Chapter 2920 - Essential Rules In Compliance With Concerns

Total: 1

1. 2920.4400 ADMISSION FORM.

The adult community-based residential correctional facility referral form on each client to be admitted into residency includes at a minimum: A. name; B. address; C. date of birth; D. sex; E. reason for referral; F. whom to notify in case of emergency; G. date information gathered; H. signature of both interviewee and interviewer gathering information; I. name of referring agency of committing authority; J. special medical problems or needs; K. legal status, including jurisdiction, length, and conditions of placement; L. financial arrangements for medical care; M. financial arrangements for placement; N. present medications; O. driver's license or Minnesota state identification number; and P. vehicle title and vehicle insurance, if applicable.

Inspection Findings:

There is an admission form but it is not used consistently in all resident files.

Corrective Actions:

The facility created a form for admissions after the last inspection but it is not being completed for all residents. Ensure that the admissions form is being completed and located in all files.

Response Needed By:

INSPECTION COMMENTS

Damascus Way moved into their new facility in January of 2021.
This facility has created a much improved living environment for the residents.
The facility is clean, provides much needed program and meeting space and meals are now being prepared and served by a certified kitchen manager.

It is highly recommended that the case managers receive training on creating case plans and the management of offenders. Many of the case plans were vague and case notes did not consistently reflect when goals were being met or how to achieve the goals that were set forth in the case plan.

Training in the areas of mental health, recognizing signs of medical distress and vulnerable adult training is highly recommended.

Emergency evacuation drills, tornado drills and cut down drills are also recommended. It is imperative that your staff are aware and practice your procedures prior to an emergency situation.

The facility will be placed on biennial inspections at this time.

JJDP A Compliance

N/A.

Report completed By: Jen Pfeifer – Detention Facility Inspector

Signature:

