



# 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:

### 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:** Annual **Inspected By:** Jen Pfeifer – Detention Facility Inspector

**Inspected on:** 06/22/2020 to 06/22/2020

**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	21	2	1	91.67%	Compliance rating of 100%
2920	Essential	76	63	10	3	86.84%	Compliance rating of 90%

## TERMS OF OPERATION

**Authority to Operate:** conditional approval **Begins On:** 07/01/2020 **Ends On:** 06/30/2021 **Facility Type:** Adult Community-Based Residential Correctional Facility

**Placed on Biennial Status:** No **Biennial Status Annual Compliance Form Due On:**

**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	18	100	18.00	None.	None.

## RULE COMPLIANCE DETAILS

**Chapter 2920 - Mandatory Rules Not In Compliance****Total: 2**

## 1. 2920.3600 INSURANCE COVERAGE.

It is mandatory that the facility have professional liability insurance, workers' compensation, and physical plant insurance.

**Inspection Findings:**

There was no copy of the current insurance form at the time of the inspection.

**Corrective Actions:**

**Submit insurance information to the Department of Corrections by August 3, 2020.**

**Response Needed By: 08/03/2020**

## 2. 2920.7400 HEALTH CARE AND MEDICAL SERVICES. Subpart 3. Medication.

The program health care plan shall adhere to state and federal laws and rules regarding distribution of medications. The plan shall stipulate that medications be administered only as instructed by a licensed physician. It is mandatory that: A. the program administrator establish policies and procedures for reviewing the safe use, storage, and disbursement of prescription drugs. The policies must address which medication the residents are not allowed to keep on the resident's person; B. medications that cannot be kept on the resident's person must be kept in a secured area and documented when given to a resident; C. there are policies and procedures to address destruction of medication; and D. there are policies regarding the use of over-the-counter medications.

**Inspection Findings:**

Medication forms were found to not contain the name of the resident, the medication name, or dose that is to be taken. Medications are not always being signed for. Medications considered to be allowed in resident rooms are not logged for accountability.

**Corrective Actions:**

**The facility should be following all state and federal regulations when it comes to medication delivery and accountability. All staff shall be trained on the medication policy and documentation shall be submitted to the Department of Corrections. The medication log shall be completed in such a manner as discussed at the time of inspection.**

**Response Needed By: 08/03/2020****Chapter 2920 - Essential Rules Not In Compliance****Total: 10**

## 1. 2920.2700 OPERATIONS MANUAL.

The adult community-based residential correctional facility shall have a policy and procedure manual that defines the philosophy and method for operating and maintaining the facility. This manual must be made available to all employees, reviewed annually, updated as needed, and used to train employees. The manual must include the following chapters: A. standards required by this chapter; B. administration and organization; C. fiscal management; D. personnel; E. training; F. admissions, orientation, property procedures, and discharge; G. resident activities; H. resident records; I. medical and health care services; J. resident rules and discipline; K. communication, mail, and visiting; L. safety and emergency; M. security and resident accountability; N. sanitation and hygiene; and O. food service. The program administrator or designee shall annually review the policy and procedure manual. The review must be documented in writing sufficient to indicate that policies and procedures have been reviewed and amended as appropriate to facility changes.

**Inspection Findings:**

The policy manual has not been updated for 5 years.

**Corrective Actions:**

**The policy manual shall be reviewed annually and updated as necessary. This review shall be documented. Update policy manual and submit to the Department of Corrections. This must be completed as part of the preoccupancy requirements.**

**Response Needed By:**

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2. 2920.3000 ANNUAL WRITTEN BUDGET.

The program administrator or designated employee shall prepare an annual written budget of anticipated revenues and expenditures which is approved by the governing board.

**Inspection Findings:**

There was not a written budget available at the time of the inspection.

**Corrective Actions:**

**Submit budget to the Department of Corrections by August 3rd, 2020.**

**Response Needed By: 08/03/2020**

3. 2920.3400 WRITTEN FISCAL SYSTEM.

The facility shall have a written fiscal system that accounts for all income and expenditures on an ongoing basis and shall include internal controls, petty cash, bonding, signature control on checks, resident funds, and employee expense reimbursement.

**Inspection Findings:**

There was no written fiscal system available at the time of the inspection.

**Corrective Actions:**

**Submit the written fiscal records to the Department of Corrections prior to the new facility opening.**

**Response Needed By:**

4. 2920.3700 PERSONNEL POLICIES; GENERAL. Subpart 3. Policies available to commissioner.

The personnel policies shall be available to the commissioner.

**Inspection Findings:**

There were no personnel policies provided at the time of the inspection.

**Corrective Actions:**

**Provide personnel policies to the Department of Corrections prior to the new facility opening.**

**Response Needed By:**

5. 2920.4300 ADMISSIONS POLICIES.

The adult community-based residential correctional facility shall establish clearly defined and written admissions policies and procedures, which state the age range, sex, and characteristics of acceptable clients. Admission policies must be available to be disseminated to all referral sources and the commissioner. The referral agency must provide the name, date of birth, and the authority a particular person holds before the person is admitted to the facility.

**Inspection Findings:**

There were no admissions policies available at the time of the inspection.

**Corrective Actions:**

**Admissions policies will need to be submitted to the Department of Corrections prior to the new facility opening.**

**Response Needed By:**

## 6. 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: 08/03/2020**

## 7. 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 inmates in place but it is not consistent with policy.

**Corrective Actions:**

**Well-being checks shall be recorded with the actual time of the check. Staff will also physically go room to room to check if a resident is in the house or out to work. These must be completed according to facility policy.**

**Response Needed By: 08/03/2020**

## 8. 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.**

**Response Needed By: 12/31/2020**

## 9. 2920.6600 BUILDINGS AND GROUNDS. Subpart 1. General.

Building and grounds must be clean and in good repair. There must be a maintenance budget for ongoing repair and replacement of equipment for the facility.

**Inspection Findings:**

The carpet is in need of repair. Vents need to be cleaned and various other areas of the building are in need of attention both cosmetically and structurally.

**Corrective Actions:**

**Damascus is in the process of building so no major renovations will be completed at this time.**

**Response Needed By:**

10. 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: 08/03/2020**

**Chapter 2920 - Mandatory Rules In Compliance With Concerns**

**Total: 1**

1. 2920.5000 INVOLVEMENT OF RESIDENT IN FAMILY AND COMMUNITY ACTIVITIES. Subpart 2. Involvement in community.

It is mandatory that the facility uses community resources where appropriate to assist residents: A. in learning to use leisure time constructively; B. in finding suitable employment; C. in locating financial assistance through community resources; D. in education and vocational training programs and; E. with services to become self-sufficient, including assistance in obtaining housing, transportation, medical and dental services, and money management.

**Inspection Findings:**

The facility only provides job search.

**Corrective Actions:**

**Create programming that assists residents with using their leisure time constructively, money management, any type of life skills or cognitive thinking. These types of groups will only enhance the offenders tool box when they are released from your facility into the community.**

**Response Needed By:**

**Chapter 2920 - Essential Rules In Compliance With Concerns**

**Total: 3**

1. 2920.3200 FINANCIAL AUDIT.

The facility fiscal process must include an annual financial audit.

**Inspection Findings:**

The financial audit was not complete at the time of the inspection.  
This is usually completed in March.

**Corrective Actions:**

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**Submit financial audit to the Department of Corrections by August 3, 2020.****Response Needed By:**

## 2. 2920.6500 DISASTERS AND EMERGENCIES; PLANS AND PROCEDURES. Subpart 3. Absconding.

The facility must report absconding and all incidences of litigation filed against the facility resulting from matters related to the placement of a resident on the department quarterly reporting form.

**Inspection Findings:**

Varying temperatures were noted in almost every room inspected.

**Corrective Actions:**

**Ensure systems are in good working order to maintain consistent temperatures in each room.**

**Response Needed By:**

## 3. 2920.6600 BUILDINGS AND GROUNDS. Subpart 3. Heating equipment.

Heating equipment shall be in good condition, vented, and capable of maintaining consistent uniform temperatures as well as eliminating drafts. A comfortable temperature range shall be maintained in all rooms occupied by residents.

**Inspection Findings:**

Varying temperatures were noted in many of the rooms inspected.

**Corrective Actions:**

**Ensure that equipment is in good working order to ensure the ability to maintain consistent temperatures throughout the facility.**

**Response Needed By:**

**INSPECTION COMMENTS**

Construction is near completion of the new facility.  
However, there are no new policies and procedures in place for the new facility.  
There was no current policy/procedure manual supplied at the time of the inspection for the inspector to review.

Personnel files are in need of organization and contain incomplete documentation. All personnel files shall contain the elements required in the rule.

It is highly recommended that the case managers receive training on creating case plans and the management of offenders. 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.

Medications are not being logged consistently according to facility policy. Policy must be followed to ensure proper delivery procedures.  
Documentation shall be accurate.

Documentation of well-being checks must be accurate. Each resident shall be observed and accounted for at the time of the check unless they are noted to be at work. Well-being checks are not being completed in the time frame allowed in policy.  
This was noted in the last two inspections.

The deficiencies listed in this report continue to be on-going issues for the facility with no documentation of change in the last two inspection cycles.

The facility will remain on annual inspections.

**JJDP A Compliance**

N/A.

Report completed By: Jen Pfeifer – Detention Facility Inspector

Signature:

