



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
Telephone: 651-361-7146 Fax: 651-642-0314 Email: ie-support.doc@state.mn.us

INSPECTION DETAILS FOR:

Hennepin County ACF - North

Address: 1345 Shenandoah Lane, Plymouth, MN 55447

MN Governing Rule: 2911 Local Adult Detention Facilities

Inspection Type: Biennial **Inspected By:** Sarah Johnson – Senior Detention Facility Inspector **Inspected on:** 12/23/2020

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

Officials Present During Inspection: Correctional Institution Manager Erica Johnson; Superintendent Sean Chapman

Officials Present for Exit Interview: Correctional Institution Manager Erica Johnson

Issued Inspection Report to: Correctional Institution Manager Erica Johnson; Director Karen Kugler; Superintendent Sean Chapman; County Administrator David J. Hough; 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	126	122	1	3	99.21%	Compliance rating of 100%
2911	Essential	101	99	0	2	100.00%	Compliance rating of 90%

TERMS OF OPERATION

Authority to Operate: conditional approval **Begins On:** 02/01/2021 **Ends On:** 01/31/2023 **Facility Type:** Adult Correctional Facility

Placed on Biennial Status: Yes **Biennial Status Annual Compliance Form Due On:** 01/31/2022

Delinquent Juvenile Hold Approval: no approval **Certificate Holder:** Hennepin County Community Corrections

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	Female	78	95	74.10	None.	None.

RULE COMPLIANCE DETAILS

Chapter 2911 - Mandatory Rules Not In Compliance**Total: 1**

1. 2911.5800 AVAILABILITY OF MEDICAL AND DENTAL RESOURCES. Subpart 1. Availability of resources, general.

Under the direction of a health authority, a facility shall develop a written policy and procedure that provides for the delivery of health care services, including medical, dental, and mental health services.

Inspection Findings:

Currently, the medical policies have not been reviewed by the health authority for the year.

Corrective Actions:

Submit health care review documentation of the medical policies for the facility when they have been completed by the health authority.

Response Needed By: 12/30/2020**Chapter 2911 - Mandatory Rules In Compliance With Concerns****Total: 3**

1. 2911.1350 MEDICAL TRAINING FOR CUSTODY STAFF.

By policy and procedure a training program shall be established by the facility administrator in cooperation with the health authority, that provides instruction in the following areas: A. first aid training for custody personnel responsible for the supervision, safety, and well-being of prisoners; B. recognition of signs and symptoms of illness and knowledge of action required in potential emergency situations; C. administration of first aid and cardiopulmonary resuscitation (CPR). Recertification training shall occur as required with respect to first aid and CPR. The training shall be documented; D. methods of obtaining assistance; E. recognition of signs and symptoms of mental illness, developmental disabilities, emotional disturbance, and chemical dependency; and F. procedures for inmate transfers to appropriate medical facilities or other health care providers.

Inspection Findings:

The facility has developed mental health training which is to be implemented by the end of 2020. the facility does not have training that addresses letter B of the rule: recognition of signs and symptoms of illness and knowledge of action required in potential emergency situations.

Corrective Actions:

it is imperative that Hennepin County provide medical and mental health training for all staff. Staff must be able to recognize and address medical needs of the inmates. Submit a training plan for staff medical training to the Department of Corrections for review.

Response Needed By:

2. 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:

The majority of well-being checks are done in a timely manor. The facility has implemented a review of well-being checks by correctional supervisors before the end of each shift. Well-being checks that are over 30 minutes result in coaching and or disciplinary action from the facility.

When video was reviewed it was noted during sleeping hours some of the staff completed the well-being checks at a pace that was too fast to be regarded as a well-being check. Well-being checks need to be completed at a pace that verifies all inmates are ok.

Corrective Actions:

The facility must submit a plan of corrective action that addresses the pace of well-being checks to the Department of Correction by February 15th, 2020. A review of well-being checks will be conducted by the Department of Corrections 3 months after implementation of corrective action.

Response Needed By:

3. 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:

With the current medication system the facility uses, there is not a procedure in place for accurate accounting of all prescriptions that are received at intake.

Corrective Actions:

Create a system of accountability for all prescription medications received at intake. Submit documentation of new medication procedures to the Department of Corrections for review.

Response Needed By: 01/30/2021**Chapter 2911 - Essential Rules In Compliance With Concerns****Total: 2**

1. 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:

There is a large percentage of staff that need to finalize their first aid and CPR training. This delay is primarily due to COVID restrictions on in-person training. Also, it cannot be verified if all staff received the required evacuation drill.

Corrective Actions:

It is recommended to continue to try to provide classroom or instructor training when it is safe to do so. Also, determine which staff need to complete the mandatory a fire and evacuation drill and record completed drill in their training files. It is imperative that all staff receive the fire and evacuation drills.

It is also recommended to incorporate training drills into the training curriculum, such as serious medicals, inmate suicide, man down, and serious assault drills.

Response Needed By:

2. 2911.1600 DESIGNATED TRAINING OFFICER.

A facility shall have a designated training officer responsible for: A. maintenance of training plans as required in part 2911.1000; B. maintenance of training records in sufficient detail to allow inspector assessment of compliance with parts 2911.1100 to 2911.1700; and C. documentation of waivers of training requirements based on equivalent training received before employment or demonstrated competency through proficiency testing.

Inspection Findings:

Training records cannot verify if all staff have completed the mandatory evacuation drill. Records indicated a number of incomplete trainings for staff that are no longer working or are currently on leave, giving it the appearance of insufficient training.

Corrective Actions:

It is recommended for clarity to put in the end of service date for staff that are no longer at the facility. Also, update training documentation for current staff that have or have not completed an emergency evacuation drill for the facility.

Response Needed By:

INSPECTION COMMENTS

Pandemic Planning:

The facility has worked with the Minnesota Department of Health to create thorough and effective COVID protocols designed to protect all inmates and staff. Staff are trained and are knowledgeable in maintaining protective COVID protocols.

Programing:

The Hennepin ACF North has programing within the facility that address the needs of the inmates. They have provided services that bridges the gap from confinement to community for when an inmate is released.

The facility would benefit from have active recreation activities for the building beside the use of outdoor recreation which is seasonal. It is recommended to add exercise equipment that would provide the females active recreation.

The Hennepin County ACF-North will continue to be on a biennial status.

JJDPA Compliance

A Juvenile Justice and Delinquency Prevention Act audit was conducted December 23th, 2020. The Hennepin County Adult Correctional Facility-North has no approval to hold delinquent juveniles.

According to DOC Portal system and facility records the Hennepin County A.C.F.-North held or processed 0 (zero) juveniles during the federal fiscal year 2021.

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

Jail Removal: Any juveniles brought to the A.C.F. were certified as adults.

Sight and Sound Separation: The facility houses no delinquent juveniles.

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

Based on these facts and documentation that I reviewed, I did not find any violations of the JJDP act during the Hennepin County A.C.F. North inspection.

Report completed By: Sarah Johnson – Senior Detention Facility Inspector

Signature: _____

