



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 ADC

Address: 401 Fourth Avenue, Minneapolis, MN 55415

MN Governing Rule: 2911 Local Adult Detention Facilities

Inspection Type: Biennial **Inspected By:** Sarah Johnson – Senior Detention Facility Inspector **Inspected on:** 09/23/2020

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

Officials Present During Inspection: Captain Sherman Otto; Captain Mike Wresh; Sergeant Scott Larson

Officials Present for Exit Interview: Captain Sherman Otto; Captain Mike Wresh; Sergeant Scott Larson

Issued Inspection Report to: Captain Kathy Hughes; Captain Sherman Otto; Captain Mike Wresh; Lieutenant Patti Graves; Sheriff David Hutchinson; County Administrator David Hough; Regional Manager Dayna Burmeister; Major Dewanna Witt

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	121	3	2	97.62%	Compliance rating of 100%
2911	Essential	101	100	1	0	99.01%	Compliance rating of 90%

TERMS OF OPERATION

Authority to Operate: conditional approval **Begins On:** 10/01/2020 **Ends On:** 09/30/2022 **Facility Type:** Adult Detention Center

Placed on Biennial Status: Yes **Biennial Status Annual Compliance Form Due On:** 09/30/2021

Delinquent Juvenile Hold Approval: no approval **Certificate Holder:** Hennepin County Sheriff's Department

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	835	95	793.25	None.	None.

RULE COMPLIANCE DETAILS

Chapter 2911 - Mandatory Rules Not In Compliance

Total: 3

- 2911.0300 INTENDED USE AND NONCONFORMANCE WITH RULES Subpart 4. Correction of deficiencies.

Sanctions for violation of mandatory rules are as follows. A. For a level one sanction, the facility inspector shall issue a written compliance order to the facility administrator and governing body for correction of deficiencies within a specified time up to 180 days. B. For a level two sanction, the facility inspector shall issue a written compliance order to the facility administrator and governing body that requires submission of a written plan of action inclusive of time lines for correction of any deficiency allowed more than 180 days for correction. The DOC shall grant or deny approval of the action plan in writing within 30 days of receiving the action plan. C. For a level three sanction, when compliance is not achieved within time lines ordered or action plans are not implemented as approved by the DOC, the facility inspector shall submit to the facility administrator and governing body a limited use agreement for review, signature, and return within a specified time. D. For a level four sanction, when compliance with the rules under subpart 5a, item B, cannot be achieved because of serious life-safety and physical plant deficiencies, the commissioner shall specify a duration of time, known as the sunset authorization period, after which the facility will no longer have the authority to operate. E. For a level five sanction, when level one to level four sanctions have not resulted in correction of deficiencies, the commissioner shall exercise restricted use or condemnation authority under subpart 2.

Inspection Findings:

This is written notice of a level one sanction to Hennepin County Adult Detention Center. Due to well-being checks being out of compliance for two inspection cycles, the Department of Corrections is issuing written compliance orders for rule standard 2911.5000 Subpart 5 Well-being.

Corrective Actions:

Hennepin County must submit corrective action in writing to the Department of Corrections for review by November 15, 2020. The Inspection and Enforcement Unit will return to the facility in 90 days to verify compliance for well-being checks. At such time, if compliance is not substantiated, a level two sanction shall be issued in writing to the officials of Hennepin County.

Response Needed By: 11/15/2020

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:

There were multiple areas of concern for well-being checks. Logs show well-being checks are being completed exactly every 30 minutes apart and not staggered as required. Video review verified staff members were not always completing well-being checks appropriately. When staff were completing well-being checks in units E and F, they were not always going into the linear day spaces to personally observe inmates, they are observing them from the door. A proper well-being check cannot be done standing at the doorway of units. It was observed that during sleeping hours some staff completed well-being checks at a pace too fast to confirm signs of life. I was unable to verify proper well-being checks during the sleeping hours for the City Hall building due to poor camera quality. This issue should be rectified with the new camera system that is planned in 2021.

Corrective Actions:

The Officials of Hennepin County ADC will need to submit corrective action to the Department of Corrections to ensure checks are being completed appropriately. This is a repeat concern for this facility. Staff need to stagger their time and to enter the units fully to properly view inmates. Staff members need to slow down and be more deliberate at each cell to ensure the well-being of each inmate. The Inspection and Enforcement Unit will return in 3 months to do a well-being check review.

Response Needed By: 11/15/2020

3. 2911.6800 CONTROL. Subpart 3. Prescribed medications upon transfer or release.

Prescribed medication shall be given to an inmate or to the appropriate authority upon transfer or release, unless the attending physician decides that in the medical interest of the inmate the medications should not be released with the inmate. The action taken shall be documented.

Inspection Findings:

Medications are still not released with inmates. This has been an on-going compliance issue for several inspection cycles. There may be alternatives available to meet the rule that will address the standard; such as having the provider send a prescription verification with the releasing inmate.

Corrective Actions:

Submit a written plan to the Department of Correction which details how this compliance issue will be solved moving forward. The Department of Corrections will work with Hennepin County Officials to resolve this ongoing standards issue.

Response Needed By: 11/15/2020**Chapter 2911 - Essential Rules Not In Compliance****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:

Due to a retirement and a replacement of the staff that submits emergencies and unusual occurrences, emergencies were not submitted properly for 2020.

Corrective Actions:

Hennepin County is currently in the process of submitting all emergencies and unusual occurrences for the past 6 months. It is imperative that all reportable incidents are submitted within 10 days of the incident in the future.

Response Needed By:**Chapter 2911 - Mandatory Rules In Compliance With Concerns****Total: 2**

1. 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:

The facility did not have a starting inventory count for their tool and knife inventory on one of their culinary cabinets.

Corrective Actions:

The facility has rectified the tool control inventory count as of this report. No further action is required.

Response Needed By:

2. 2911.5550 LOCKS AND KEYS. Subpart 3. Regular testing.

Locks to security doors or gates shall be tested for proper function at least weekly to ensure proper operation.

Inspection Findings:

The locks are tested weekly but the lock inspection documentation should be expanded to list and identify all the emergency exit doors.

Corrective Actions:

Create a lock inspection form that list out all emergency exit doors that need to be checked weekly. This will provide the documentation necessary for verification that all locks were tested.

Response Needed By:

INSPECTION COMMENTS**Inmate programs and mental health needs:**

The programs department is providing individual programming specifically for inmates identified with mental health concern or special management needs. These activities, in addition to other mental health services, is an excellent behavior and mental health management tool.

The facility has utilized the Integrated Access Team (IAT) for the past 5 years. The IAT is a much needed service that identifies and provides continued services to inmates after they are released from the facility.

Classification:

The facility applies a thorough and extensive classification system at intake and again after an inmates first court appearance. The combination of behavioral health needs, medical, and criminal history provide an in-depth needs approach to classification.

Physical Plant:

The facility addressed the communications system deficiencies with a new door commander and communications system in both buildings. This was a substantial project that will greatly improve overall operations quality.

Painting:

The showers have started to be painted and the shower project will continue into 2021, along with painting cell blocks.

New Cameras:

The facility will be replacing and adding new cameras throughout both buildings. Added cameras will greatly improve the visibility and verifications of well-being checks and the overall safety for both staff and inmates.

The jail was granted a waiver by A.C.A in regard to not meeting the 1/10 ratio for showers and toilets in certain city hall cell blocks. The Department of Corrections will officially address a wavier with the facility for these areas.

LEVEL ONE SANCTION:

A level one sanction has been placed on Hennepin County ADC. As noted in 2911.0300 Subp. 4 Correction of deficiencies, a compliance review of Rule 2911.5000.Subp.5 well-being checks will be conducted again in three months by the Inspection and Enforcement Unit. The Department of Corrections will continue to work with the Officials of Hennepin County to resolve this issue.

JJDPA Compliance

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

The Hennepin County Jail has no delinquent juvenile hold approval. Any juveniles held at the facility have been certified as adults.

There are no violations of the JJDP Act for the Hennepin County Jail.

Report completed By: Sarah Johnson – Senior Detention Facility Inspector

Signature: 