



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:

Hubbard County Jail

Address: 301 Court Street, Park Rapids, MN 56470

MN Governing Rule: 2911 Local Adult Detention Facilities

Inspection Type: Biennial **Inspected By:** Lauren Bizzotto – Detention Facility Inspector **Inspected on:** 03/28/2024

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

Officials Present During Inspection: Assistant Jail Administrator Nick Weaver; Jail Administrator Joe Henry

Officials Present for Exit Interview: Assistant Jail Administrator Nick Weaver; Jail Administrator Joe Henry

Issued Inspection Report to: Jail Administrator Joe Henry; Sheriff Corey Aukes; County Coordinator Jeff Cadwell; District Supervisor 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	124	118	5	1	95.97%	Compliance rating of 100%
2911	Essential	100	93	4	3	96.00%	Compliance rating of 90%

TERMS OF OPERATION

Authority to Operate: approval **Begins On:** 05/01/2024 **Ends On:** 04/30/2026 **Facility Type:** Jail
Placed on Biennial Status: Yes **Biennial Status Annual Compliance Form Due On:** 04/30/2025
Delinquent Juvenile Hold Approval: 24 hrs exclusive of weekends and holidays **Certificate Holder:** Hubbard County Sheriff's Office
Special Conditions:

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	116	90	104.40	None.	

RULE COMPLIANCE DETAILS

Chapter 2911 - Mandatory Rules Not In Compliance

Total: 5

- 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:

During a review of inmate files, an inmate was assigned a classification level, but there was no documentation that the classification process was completed. The facility immediately completed a classification sheet on the inmate and it matched the classification level that was already assigned.

Corrective Actions:

The facility shall ensure the current process for classifying newly admitted inmates is followed. No further action is needed at this time.

Response Needed By: 05/31/2024

2. 2911.2525 ADMISSIONS. Subpart 3. Orientation to rules and services.

A facility shall develop a written policy and procedure that provides: A. a method for all newly admitted inmates to receive orientation information in a manner the inmates can understand; and B. documentation by a statement that is signed and dated by the inmate that the inmate completed orientation.

Inspection Findings:

The facility is not completing orientation as required by the Rule. The current procedure is for the inmate to sign off on being provided an inmate handbook. The staff does not review basic facility information or ensure the inmates understand the handbook and facility procedures.

Corrective Actions:

The facility shall implement an orientation process to provide important information to newly admitted inmates and they must sign and date acknowledging they have completed the orientation process. The facility must submit this process to the Department of Corrections for review.

Response Needed By: 05/31/2024

3. 2911.5800 AVAILABILITY OF MEDICAL AND DENTAL RESOURCES. Subpart 6. Medical screening.

A facility shall have a written policy and procedure that requires medical screening is performed and recorded by trained staff on all inmates on admission to the facility. The findings are to be recorded in a manner approved by the health authority. The screening process shall include procedures relating to: A. Inquiry into: (1) current illness and health problems, including dental emergencies, and other infectious diseases; (2) medication taken and special health requirements; (3) use of alcohol and other drugs that include types of drugs used, mode of use, amounts used, frequency used, date or time of last use, and history of problems that may have occurred after ceasing use, for example, convulsions; (4) past and present treatment or hospitalization for mental illness or attempted suicide; (5) other health problems designated by the health authority; and (6) signs and symptoms of active tuberculosis to include weight loss, night sweats, persistent cough lasting three weeks or longer, coughing up blood, low grade fever, fatigue, chest pain, prior history of active tuberculosis disease, and results of previous tuberculin skin or blood testing. B. Observations of: (1) behavior that includes state of consciousness, mental status, appearance, conduct, tremor, and sweating; and (2) body deformities, trauma markings, body piercings, bruises, lesions, and jaundice. C. Disposition to: (1) general population; (2) general population and referral to appropriate health care service; (3) referral to appropriate health care service on an emergency basis; and (4) other.

Inspection Findings:

The medical screening completed at intake is missing elements A(3), 6, B(1), and B(2) of this Rule part.

Corrective Actions:

The facility shall update the medical screening to contain all elements of this Rule part and submit it to the Department of Corrections for review.

Response Needed By: 05/06/2024

4. 2911.6500 STORAGE. Subpart 6. Needles and other medical sharps.

There shall be a written policy and procedure for the control and disposal of medical sharps and supplies. Medical sharps and supplies when used or stored in inmate housing areas shall be accounted for and secured in a locked area.

Inspection Findings:

A review of the medical sharps and documentation was completed, the lancet count was not accurate.

Corrective Actions:

The facility shall develop a plan to maintain an accurate system for accounting for medical sharps and submit it to the Department of Corrections for review.

Response Needed By: 05/31/2024

5. 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:

During the medication review, the medication counts did not match the documentation.

Corrective Actions:

The facility shall develop a plan to maintain an accurate system for accounting for inmates' medications. The plan must be submitted to the Department of Corrections for review.

Response Needed By: 05/31/2024

Chapter 2911 - Essential Rules Not In Compliance

Total: 4

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:

Custody staff are not completing elements J and K of this Rule part.

Corrective Actions:

The staff orientation training shall be updated to include key control, and interpersonal relations and communication skills training. The updated training plan must be submitted to the Department of Corrections for review.

Response Needed By: 05/31/2024

2. 2911.2850 INMATE DISCIPLINE PLAN. Subpart 3. Due process.

Disciplinary segregation shall be used only in accordance with due process to include at a minimum: A. published rules of conduct and penalties for violation of rules; B. written notice of alleged violation of a rule; C. the right to be heard by an impartial hearing officer and to present evidence in defense: (1) the inmate may waive the hearing in writing; and (2) a written record is made of the disciplinary hearing and sanctions or other actions taken as a result of the hearing; D. the right to appeal; E. the status of an inmate placed on disciplinary segregation for more than 30 continuous days subsequent to a disciplinary hearing shall be reviewed, approved, and documented by the facility administrator or designee at least once every 30 days, and the facility shall develop written policy, procedure, and practice that provides that inmates in disciplinary segregation receive visits from the facility administrator or designee at least once every seven days as a part of the disciplinary segregation review process; F. an inmate placed in segregation for an alleged rule violation shall have a disciplinary hearing within 72 hours of segregation, exclusive of holidays and weekends, unless documented cause can be shown for delays. Examples of causes for delay are inmate requests for delay, or logistical impossibility, as in the case of mass disturbances; and G. the facility administrator or designee can order immediate segregation when it is necessary to protect the inmate or others. This action is reviewed and documented within three working days.

Inspection Findings:

During a review of inmate discipline and hearings, there was one instance where an inmate placed in segregation for an alleged rule violation did not receive a requested disciplinary hearing within 72 hours of segregation placement.

The facility could not provide documentation showing that the facility administrator or designee reviewed and approved inmates placed on disciplinary segregation for more than 30 continuous days.

A process is in place for inmates in disciplinary segregation to receive visits from the facility administrator or designee at least once every seven days as a part of the disciplinary segregation review process; however, the documentation was missing information, and some reviews were not filled in by staff.

Corrective Actions:

The facility must conduct retraining with staff to ensure that the disciplinary hearing process is being completed as required. Once the training has been completed, documentation must be submitted to the Department of Corrections for review.

The facility must ensure that all inmates are receiving the required reviews and ensure that it is being properly documented in the inmate files.

Response Needed By: 05/31/2024

3. 2911.3100 INMATE ACTIVITIES AND PROGRAMS. Subpart 1. Written plan.

A facility administrator or designee shall have and implement a written plan for the constructive scheduling of inmate time. The plan shall: A. identify programs offered in the facility and when the programs are offered; B. identify persons conducting the program and whether or not the persons are facility staff, external community resources under contract, or volunteers; C. be consistent with established legal rights of inmates, type and status of inmates detained in the facility, and rule requirements associated with the facility's classification; D. provide inmates with the option to refuse to participate in facility programs, except work assignments and programs required by statute or court order; E. when males and females are housed in the same facility, provide comparable opportunities for participation in programs and services; and F. require documentation of programs offered and inmates participating in programs.

Inspection Findings:

Inmate participation in programming is not being documented.

Corrective Actions:

The facility shall develop a plan for tracking inmate participation in programs and submit it to the Department of Corrections for review.

Response Needed By: 05/31/2024

4. 2911.4950 RESPONSE TO RESISTANCE. Subpart 4. Equipment.

The issue, storage, inspection, and use of chemical agents, impact devices, electronic control devices, and other security devices shall be governed by written policy and procedure. All unissued security devices and equipment shall be stored in a secure, readily accessible depository located outside inmate housing and activity areas, and inventoried at least monthly to determine condition and expiration dates of the devices and equipment.

Inspection Findings:

The facility does not conduct a monthly inventory of security equipment.

Corrective Actions:

The facility shall create a monthly security equipment inventory process and submit it to the Department of Corrections for review.

Response Needed By: 05/31/2024

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

1. 2911.2525 ADMISSIONS. Subpart 4. Inmate personal property.

A facility shall have a written policy and procedure that: A. provides for the itemized inventory and secure storage of all personal property of a newly admitted inmate, including money and other valuables; B. specifies any personal property an inmate may retain in the inmate's possession; and C. provides that the inmate shall sign a receipt for all property held until release.

Inspection Findings:

During a review of inmate files, one inmate's property inventory sheet was not signed and there was no documentation that they refused to sign.

Corrective Actions:

Ensure that staff are following facility policy when inmate's refuse to sign documents or cannot sign due to safety and security precautions.

Response Needed By: 05/06/2024

Chapter 2911 - Essential Rules In Compliance With Concerns**Total: 3**

1. 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:

The program staff was unable to locate the documentation of volunteers agreeing to abide by facility rules and policies.

Corrective Actions:

Program staff shall have all volunteers sign the orientation sheet agreeing to all facility rules and policies again and keep the documentation.

Response Needed By:

2. 2911.5000 POST ORDERS; FORMAL INMATE COUNT; WELL-BEING CHECKS. Subpart 1. Post orders and accountability.

There shall be written orders for every security post that are reviewed annually and updated if necessary. A written policy and procedure shall require that personnel read, sign, and date applicable post orders at least annually, or as needed for new posts or revisions. Medium and large facilities with multiple posts may need to conduct these reviews more often.

Inspection Findings:

One custody staff did not sign off on the post orders in 2023.

Corrective Actions:

The facility must ensure that all custody staff are signing off on the annual post-order review.

Response Needed By:

3. 2911.7300 FIRE INSPECTION. Subpart 5. Fire alarm requirements.

There shall be a fire alarm and automatic detection system required, as approved by the authority having jurisdiction, or a plan for addressing these or other deficiencies within a reasonable time. The authority may approve any variances, exceptions, or equivalencies.

Inspection Findings:

The last sprinkler system inspection was completed on March 16, 2023.

Corrective Actions:

Within 30 days of this report, the facility shall have its sprinkler system inspected and documentation submitted to the Department of Corrections.

Response Needed By:

INSPECTION COMMENTS

The Hubbard County Jail was clean, organized, and well-maintained. The staff was welcoming and helpful, and the inmates made complimentary remarks about the facility and programming.

The facility will remain on biennial inspections.

JJDPA Compliance

On April 26, 2024, a Juvenile Justice and Delinquency Prevention (JJDP) Act audit was conducted. The Hubbard County Jail has received a "Rural Exception" to the JJDP Act. This allows the facility to hold a delinquent juvenile up to 24 hours, excluding weekends and holiday. The three core requirements that are looked at during the audit are Deinstitutionalization of Status Offenders (DSO), Removal of Juveniles for Adult Jail and Adult Lockups (Jail Removal), and Sight and Sound separation.

The Hubbard County Jail held or processed zero (0) juveniles between October 2023 to the date of inspection. 100% percent of the juvenile data was reviewed. The findings are as follows:

Sight and Sound Separation: The facility design and policies allow for proper sight and sound separation. This includes the route taken to Court. Policies and the court schedule also indicate proper sight and sound separation are maintained.

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

Based on the documentation reviewed, no violations of the JJDP Act were found.

Report completed By: Lauren Bizzotto – Detention Facility Inspector

Signature:

