



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:

Isanti County Jail

Address: 509 Eighteenth Avenue, Cambridge, MN 55008

MN Governing Rule: 2911 Local Adult Detention Facilities

Inspection Type: Annual **Inspected By:** Chris Thoma – Detention Facility Inspector **Inspected on:** 03/09/2022

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

Officials Present During Inspection: Assistant Jail Administrator Jackie Johnson; Jail Administrator Dennis Valentyn

Officials Present for Exit Interview: Assistant Jail Administrator Jackie Johnson; Jail Administrator Dennis Valentyn; Sheriff Chris Caulk

Issued Inspection Report to: Jail Administrator Dennis Valentyn; Sheriff Chris Caulk; County Administrator Julia Lines; Regional Manager 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	126	124	1	1	99.21%	Compliance rating of 100%
2911	Essential	98	95	2	1	97.96%	Compliance rating of 90%

TERMS OF OPERATION

Authority to Operate: approval **Begins On:** 04/01/2022 **Ends On:** 03/31/2023 **Facility Type:** Jail

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

Delinquent Juvenile Hold Approval: 6 hrs **Certificate Holder:** Isanti County Sheriff's Office

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	111	85	94.35	None.	None.

RULE COMPLIANCE DETAILS

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

1. 2911.5800 AVAILABILITY OF MEDICAL AND DENTAL RESOURCES. Subpart 3. Health care policy review.

Facility policy shall ensure that each policy, procedure, and program in the health care delivery system is reviewed and documented at least annually under the direction of the health authority and revised as necessary.

Inspection Findings:

The medical policies reviewed during the inspection were in compliance with the rule. However, they have not been reviewed by the contracted medical provider since January 25, 2021.

Corrective Actions:

Ensure the responsible physician reviews and signs the medical policies annually.

Response Needed By: 07/01/2022**Chapter 2911 - Essential Rules Not In Compliance****Total: 2**

1. 2911.1200 CLERICAL AND SUPPORT EMPLOYEES WITH REGULAR OR DAILY INMATE CONTACT: TRAINING. Subpart 1. Minimal inmate contact.

A facility shall have a written policy and procedure that provides that all new clerical and support employees that have minimal inmate contact receive 24 hours of orientation and training during their first year of employment. Sixteen of these hours are completed before being independently assigned to a particular job. Persons in this category are given an additional 16 hours of training each subsequent year of employment.

Inspection Findings:

The kitchen and medical staff did not achieve the minimum number of training hours required in this part of the rule.

Corrective Actions:

Adjust the training plan to include 16 hours of training for staff with regular inmate contact. Ensure these staff members are included in the quarterly emergency drills and training.

Response Needed By:

2. 2911.3100 INMATE ACTIVITIES AND PROGRAMS. Subpart 7. Recreation plan.

The facility administrator or designee shall have a plan providing opportunities for physical exercise and recreational activities for all inmates consistent with the facility's classification and design. Class I facilities are exempt from this requirement. The plan shall include policies and procedures necessary to protect the facility's security and the welfare of inmates. Policy and procedure shall provide: A. inmates with access to recreational opportunities and equipment, including seven hours of physical exercise or recreation outside the cell and adjacent dayroom areas per week; B. recreational opportunities a minimum of five days per week; C. indoor space and equipment for active recreational activities in all Class II to Class VI facilities; D. outdoor recreational space and equipment for outdoor recreational programming in all Class VI facilities. The space and equipment shall be provided in a manner consistent with the facility's security classification; E. passive and active recreation needs and equipment for a variety of inmates consistent with the facility's classification and offenders served. As an example, activity needs of geriatric, disabled, or geriatric and disabled offenders shall be addressed; F. inmates in segregation with a minimum of one hour a day, seven days a week, of exercise outside the inmates' cells, unless security or safety considerations dictate otherwise; and G. discretionary access by inmates on segregation status to the same recreational facilities as other inmates unless security or safety considerations dictate otherwise. When inmates on segregation status are excluded from use of regular recreation facilities, the alternative area for exercise used shall be documented.

Inspection Findings:

There are two small recreation spaces in the facility but these do not meet the needs of the inmate population.

Corrective Actions:

This is a physical plant issue. It does not appear the facility can comply with the rule without significant renovation of the facility. It is recommended alternative recreational equipment be purchased to improve recreational opportunities.

Response Needed By: 07/01/2022**Chapter 2911 - Mandatory Rules In Compliance With Concerns****Total: 1**

1. 2911.6500 STORAGE. Subpart 2. Refrigeration.

Medication requiring refrigeration shall be refrigerated and secured and the temperature checked daily. There must be separate refrigeration for medications only.

Inspection Findings:

The medication refrigerator temperatures are only logged by medical staff who are not in the facility daily.

Corrective Actions:

Assign a post duty for temperature checks when medical staff are not available.

Response Needed By:**Chapter 2911 - Essential Rules In Compliance With Concerns****Total: 1**

1. 2911.7300 FIRE INSPECTION. Subpart 4. Weekly inspection.

There shall be an applicable fire code and safety inspection of the facility at least weekly by a designated staff member.

Inspection Findings:

Weekly fire inspections are being completed but not all extinguishers in the secure perimeter are being checked.

Corrective Actions:

Establish a comprehensive list of fire extinguishers within the secure perimeter, including the kitchen, and ensure they are on the weekly inspection list.

Response Needed By:

INSPECTION COMMENTS

Well-being checks:

The well-being checks reviewed during the inspection were found to be in compliance with minimum standards. No time violations were found and the checks were staggered. The well-being checks completed by Officer Dustin Savage exceeded standards.

Physical Plant:

- The recreation space for inmates does not meet minimum standards. Barring significant renovation, the facility is unable to be in compliance. Recommendations on equipment, for the two small spaces available, were given to the program coordinator during the inspection.
- Medical space is also insufficient. The Nurse's office is used for storage of medication, the medication cart, records and equipment. This same space is also used as an exam and meeting room for inmates.
- Intake space is limited and does not provide ample separation capabilities. The County is investigating the possibility of remodeling this area and has begun the design process with an architect.

Policy:

Based on the statutory language effective August 1, 2021 the following policies should be updated.

502 Inmate Reception - This policy should include the release of information requirements under state statute 241.021 Subd. 7.

511.3.2 Duty to Intercede - This policy should be updated to use the language in state statute 243.52 Subd. 3.

The Isanti County Jail has a high level of compliance and merits being placed on a biennial inspection cycle. However, due the pending retirement of the Jail Administrator, the facility is being placed on an annual inspection cycle.

JJDPA Compliance

On March 9, 2022, a Juvenile Justice and Delinquency Prevention Act audit was conducted. The Isanti County Jail has a six hour hold approval. The three core requirements included in the audit are the Deinstitutionalization of Status Offenders (DSO), Removal of Juveniles for Adult Jail and Adult Lockups (Jail Removal), and Sight and Sound Separation.

The Isanti County Jail held or processed 10 juveniles during the federal fiscal year from October 1, 2021 to the date of this inspection. 100 percent of the federal year juvenile data was reviewed. The findings are as follows:

DSO: No violations of the facility holding status offenders in the jail.

Jail Removal: No violations for the jail removal standard.

Sight and Sound Separation: The facility design and policies allow for proper sight and sound separation. Juveniles are held in a cell off of booking, away for the male population. Isanti County uses Anoka County Regional Juvenile Center for juvenile placement.

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

Based on the documentation reviewed, zero (0) violations of the JJDP Act were determined during the Isanti County inspection.

Report completed By: Chris Thoma – Detention Facility Inspector

Signature:

