



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:

Jackson County Jail

Address: 400 Sherman Street, PO BOX 229, Jackson, MN 56143

MN Governing Rule: 2911 Local Adult Detention Facilities

Inspection Type: Annual **Inspected By:** Justin Roberts – Detention Facility Inspector **Inspected on:** 08/04/2022

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

Officials Present During Inspection: Sheriff Shawn Haken; Interim Jail Administrator Brandon Hendrickson

Officials Present for Exit Interview: Interim Jail Administrator Brandon Hendrickson

Issued Inspection Report to: Sheriff Shawn Haken; Interim Jail Administrator Brandon Hendrickson; County Administrator Ryan Krosch; Records 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	127	111	10	6	92.13%	Compliance rating of 100%
2911	Essential	98	83	8	7	91.84%	Compliance rating of 90%

TERMS OF OPERATION

Authority to Operate: approval **Begins On:** 09/01/2022 **Ends On:** 08/31/2023 **Facility Type:** Jail

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

Delinquent Juvenile Hold Approval: 24 hrs exclusive of weekends and holidays **Certificate Holder:** Jackson 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	18	80	14.40	None.	None.

RULE COMPLIANCE DETAILS

Chapter 2911 - Mandatory Rules Not In Compliance

Total: 10

- 2911.0900 STAFFING REQUIREMENTS. Subpart 1. Staffing plan and staffing analysis.

The facility administrator shall prepare and retain a staffing plan. The staffing plan shall identify: A. jail personnel assignments for: (1) facility administration and supervisors; (2) facility programs including exercise and recreation; (3) inmate admission, booking, supervision, and custody; (4) support services including medical, food services, maintenance, and clerical; and (5) other jail-relevant functions such as escort and transportation of inmates; B. the days of the week that the assignments are filled; C. the hours of the day that the assignments are covered; and D. any deviations from the plan with respect to weekends, holidays, or other atypical situations must be considered. The facility administrator or designee shall review the facility's staffing plan at least once each year. The review shall be documented in written form sufficient to indicate that staffing plans have been reviewed and revised as appropriate to the facility's needs or referred to the facility' governing body for funding consideration. A facility with a design capacity of more than 60 beds must have a staffing analysis and staffing plan approved by the commissioner of corrections. This staffing analysis shall include all posts, functions, net annual work hours appropriate to each post, and total number of employees to fill the identified posts and functions.

Inspection Findings:

The facility has not conducted an annual staffing review as required under the rule.

Corrective Actions:

The facility must complete an annual staffing review and submit it to the DOC.

Response Needed By: 09/30/2022

2. 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:

During policy review, a policy and procedure addressing this rule could not be located.

Corrective Actions:

The facility must update it's policy to address all elements of this rule.

The facility has been working towards updating it's policies and switch to Lexipol, it is recommended that they make this switch as soon as possible to help aid the facility in making sure that all requirements are being addressed.

Once this policy has been updated, it must be submitted to the DOC for review.

Response Needed By: 11/30/2022

3. 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:

During policy review, a policy could not be located that address this rule.

Additionally, the facility is only providing a copy of the inmate rule book as part of orientation. This does not meet the requirements of the rule.

Corrective Actions:

The facility needs to add this rule into policy.

Additionally, the facility needs to create an orientation process that meets the rule. This was discussed during the inspection.

Once this policy and process has been updated, it must be submitted to the DOC for review.

Response Needed By: 10/31/2022

4. 2911.2750 INMATE HYGIENE. Subpart 1. Personal hygiene.

The facility administrator or designee shall have and implement a written policy for personal hygiene practices of all inmates to include special assistance for those inmates who are unable to care for themselves. A written policy and procedure shall require that articles needed for personal hygiene are available to all inmates, and include at a minimum, the following: A. soap; B. toothbrush; C. toothpaste; D. shampoo; E. shaving equipment; F. materials essential to feminine hygiene; G. comb; and H. toilet paper.

Inspection Findings:

During policy review, a policy addressing this rule could not be located.

Corrective Actions:

The facility must update it's policy to address all elements of this rule.

The facility has been working towards updating it's policies and switch to Lexipol, it is recommended that they make this switch as soon as possible to help aid the facility in making sure that all requirements are being addressed.

Once this policy has been updated, it must be submitted to the DOC for review.

Response Needed By: 11/30/2022

5. 2911.3700 EMERGENCIES AND UNUSUAL OCCURRENCES. Subpart 2. Quarterly review of emergency procedures.

There shall be a review of emergency procedures once every three months. The review shall include: A. assignment of persons to specific tasks in case of emergency situations; B. instructions in the use of alarm systems and signals; C. systems for notification of appropriate persons outside the facility; D. information on the location and use of emergency equipment in the facility; E. specification of evacuation routes and procedures; and F. that the review be documented and require signature or initialing by all staff.

Inspection Findings:

During policy review, a policy addressing this rule could not be located. This was addressed during the facility's last inspection.

Additionally, during the inspection it was discovered that staff are reviewing selected emergency procedures quarterly. However the rule requires that all emergency procedures are reviewed quarterly.

Corrective Actions:

It is recommended that this rule be added to policy to make sure that staff are aware of the duties required.

Also the facility needs to make sure that they are having all staff review all emergency procedures quarterly. Proof of this will need to be submitted to the DOC.

Response Needed By: 10/31/2022

6. 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:

During policy review, it was discovered that the facility's policy does not fully address this rule. The only information found in policy that comes close to addressing this rule was in Policy D-01 and called the well-being checks "head counts."

During a review of video of well-being checks it was discovered that some well-being checks are being conducted at to quick of a pace to look for signs of life or distress. Additionally the well-being checks being conducted at night of C Pod are being done from the corridor/hallway. With how dark C Pod is and the distance from where the officer is compared to where the inmate is, I find it very unlikely that staff could observe signs of life or distress.

Corrective Actions:

The facility must review the rule and add the missing elements of the rule to their policy.

Once this policy has been updated, it must be submitted to the DOC for review.

Additionally the facility must address the pace at which the well-being checks are being conducted. Also the facility must address the well-being check being conducted of the A-Pod at night. Staff must enter A Pod on the overnight shift so that they can observe signs of life or distress.

The facility must also conduct training with all staff to address the policy on well-being checks and the changes to the procedure of how well-being checks should be conducted. Proof of training must be submitted to the DOC for review.

It is also recommended that the facility's administration create an audit process to make sure that well-being checks are being conducted on time and at a pace that can observe signs of life or distress.

Response Needed By: 09/30/2022

7. 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:

During policy review, it was discovered that the facility does not have a policy that addresses this rule.

It was verified onsite during the inspection that this annual review is being ocmpleted.

Corrective Actions:

The facility must update it's policy to address all elements of this rule.

The facility has been working towards updating it's policies and switch to Lexipol, it is recommended that they make this switch as soon as possible to help aid the facility in making sure that all requirements are being addressed.

Once this policy has been updated, it must be submitted to the DOC for review.

Response Needed By: 11/30/2022

8. 2911.5800 AVAILABILITY OF MEDICAL AND DENTAL RESOURCES. Subpart 8. Health complaints.

A facility shall develop a written policy and procedure that requires that inmates' health complaints are acted upon daily by health-trained staff, followed by triage and treatment by health care personnel if indicated.

Inspection Findings:

During policy review, a policy addressing this rule could not be located.

Corrective Actions:

The facility must update it's policy to address all elements of this rule.

The facility has been working towards updating it's policies and switch to Lexipol, it is recommended that they make this switch as soon as possible to help aid the facility in making sure that all requirements are being addressed.

Once this policy has been updated, it must be submitted to the DOC for review.

Response Needed By: 11/30/2022

9. 2911.6000 FIRST AID. Subpart 2. First aid equipment.

Facility policy shall require that first aid kits are available in designated areas of the facility.

Inspection Findings:

During policy review, a policy addressing this rule could not be located. However during the inspection it was verified that the facility does have a first aid kit.

Corrective Actions:

The facility must update it's policy to address all elements of this rule.

The facility has been working towards updating it's policies and switch to Lexipol, it is recommended that they make this switch as soon as possible to help aid the facility in making sure that all requirements are being addressed.

Once this policy has been updated, it must be submitted to the DOC for review.

Response Needed By: 11/30/2022

10. 2911.6200 MEDICAL AND DENTAL RECORDS. Subpart 6. Transfer of records.

A facility shall have a written policy and procedure regarding the transfer of health records and information that establishes the following requirements: A. summaries or copies of the health record are sent to the facility to which the inmate is transferred. Upon the request and written authorization of the inmate, physicians or medical facilities in the community shall be provided health record information; and B. The facility administrator or designee, which may include the responsible physician, health care personnel, or health-trained staff of the facility from which the inmate is being transferred, shall minimally share with the facility administrator of the facility designated to receive the inmate information regarding the inmate's medical management, security, and ability to participate in programs. In the absence of informed consent forms signed by the inmate involved, the information may be provided in summary manner to ensure a level of medical care consistent with the inmate's needs.

Inspection Findings:

During policy review, a policy for this rule could not be located.

Corrective Actions:

The facility must update it's policy to address all elements of this rule.

The facility has been working towards updating it's policies and switch to Lexipol, it is recommended that they make this switch as soon as possible to help aid the facility in making sure that all requirements are being addressed.

Once this policy has been updated, it must be submitted to the DOC for review.

Response Needed By: 11/30/2022

Chapter 2911 - Essential Rules Not In Compliance

Total: 8

1. 2911.1400 ADMINISTRATIVE AND MANAGERIAL STAFF TRAINING.

A facility shall have a written policy and procedure that provides that the facility's administrative and managerial staff receive at least 16 hours of orientation. Orientation training shall include, at a minimum, general management and related subjects, data practices, decision-making processes, labor law, employee-management relations, the interaction of elements of the criminal justice system, and relationships with other service agencies. After orientation, a facility's administrative and managerial staff shall receive at least 16 hours of training annually.

Inspection Findings:

During policy review, a policy and procedure for this rule could not be located

Corrective Actions:

The facility must update it's policy to address all elements of this rule.

The facility has been working towards updating it's policies and switch to Lexipol, it is recommended that they make this switch as soon as possible to help aid the facility in making sure that all requirements are being addressed.

Once this policy has been updated, it must be submitted to the DOC for review.

Response Needed By: 11/30/2022

2. 2911.1500 PROGRAM STAFF TRAINING.

A facility shall have a written policy and procedure that provides that the facility's program personnel receive at least 40 hours of orientation and training in the first year of employment, and at least 16 hours of training each year thereafter. This training must cover, at a minimum: A. security procedures and regulations; B. planning; C. development, and implementation of treatment, educational, and recreational programs; D. inmate and staff rules and regulations; E. rights and responsibilities of inmates; F. emergency procedures; G. interpersonal relations; H. interaction of elements of the criminal justice system; and I. first aid.

Inspection Findings:

During policy review, a policy and procedure for this rule could not be located.

Corrective Actions:

The facility must update it's policy to address all elements of this rule.

The facility has been working towards updating it's policies and switch to Lexipol, it is recommended that they make this switch as soon as possible to help aid the facility in making sure that all requirements are being addressed.

Once this policy has been updated, it must be submitted to the DOC for review.

Response Needed By: 11/30/2022

3. 2911.2800 ADMINISTRATIVE SEGREGATION. Subpart 4. Policy.

Written policy and procedure shall provide that the status of inmates in administrative segregation is reviewed every seven days. These policies shall provide: A. that the review is documented and placed in the inmate's file; B. that the inmate in administrative segregation receive visits from the facility administrator or designee a minimum of once every seven days as a part of the administrative review process; and C. that the review process that is used to release an inmate from administrative segregation is specified.

Inspection Findings:

During policy review, a policy addressing this rule could not be located.

Corrective Actions:

The facility must update it's policy to address all elements of this rule.

The facility has been working towards updating it's policies and switch to Lexipol, it is recommended that they make this switch as soon as possible to help aid the facility in making sure that all requirements are being addressed.

Once this policy has been updated, it must be submitted to the DOC for review.

Response Needed By: 11/30/2022

4. 2911.3400 TELEPHONE ACCESS.

A facility shall have a written policy and procedure that provides for inmate access to a telephone. Attorney/client telephone consultation shall be allowed in a manner consistent with Minnesota Statutes, section 481.10. Newly admitted inmates shall be permitted a local or collect long-distance telephone call to a family member or significant other during the admission process. Inmates shall be allowed telephone access to maintain contact with family members or significant others. Nonlegal calls may be made at the expense of the inmate. The minimum time allowed per call shall be ten minutes except where there are substantial reasons to justify limitations. Nonlegal telephone conversations may be monitored and recorded. Reasons for denial of telephone access shall be documented.

Inspection Findings:

During policy review it was discovered that there is not a policy that addresses this rule.

Corrective Actions:

The facility must update it's policy to address all elements of this rule.

The facility has been working towards updating it's policies and switch to Lexipol, it is recommended that they make this switch as soon as possible to help aid the facility in making sure that all requirements are being addressed.

Once this policy has been updated, it must be submitted to the DOC for review.

Response Needed By: 11/30/2022

5. 2911.3600 CLOTHING AND BEDDING PROPERTY. Subpart 8. Protective clothing.

A facility shall have written policy, procedure, and practice that provides for the issue of special and, where appropriate, protective clothing and equipment to inmates participating in special work assignments. The clothing is available in quantities that permit exchange as frequently as the work assignment requires.

Inspection Findings:

During policy review, it was discovered that the facility's policies do not address this rule.

Corrective Actions:

The facility must update it's policy to address all elements of this rule.

The facility has been working towards updating it's policies and switch to Lexipol, it is recommended that they make this switch as soon as possible to help aid the facility in making sure that all requirements are being addressed.

Once this policy has been updated, it must be submitted to the DOC for review.

Response Needed By: 11/30/2022

6. 2911.4900 SECURITY INSPECTION.

The facility shall have a written policy and procedure to require the facility administrator or designee to inspect all areas within the security perimeter, and equipment at least monthly and initiate corrective action if needed.

Inspection Findings:

During policy review it was discovered that the facility does not have a policy that addresses this rule, this was addressed in the facility's past inspection.

It should be noted that although there is not a policy that addresses this as required, the facility is practicing this and it is documented.

Corrective Actions:

The facility must update it's policy to address all elements of this rule.

The facility has been working towards updating it's policies and switch to Lexipol, it is recommended that they make this switch as soon as possible to help aid the facility in making sure that all requirements are being addressed.

Once this policy has been updated, it must be submitted to the DOC for review.

Response Needed By: 10/31/2022

7. 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:

During policy review, a policy addressing this rule could not be located.

Corrective Actions:

The facility must update it's policy to address all elements of this rule.

The facility has been working towards updating it's policies and switch to Lexipol, it is recommended that they make this switch as soon as possible to help aid the facility in making sure that all requirements are being addressed.

Once this policy has been updated, it must be submitted to the DOC for review.

Response Needed By: 11/30/2022

8. 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:

During policy review, a policy addressing this rule could not be located. The facility does have post orders as required, but it does not address the required parts of the rule in policy.

Corrective Actions:

The facility must review this rule and add the required parts of the rule into it's policy.

Once this policy has been updated, it must be submitted to the DOC for review.

Response Needed By: 11/30/2022

Chapter 2911 - Mandatory Rules In Compliance With Concerns

Total: 6

1. 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 policy review, it was discovered that the facility's policy did not address all elements of the rule. Specifically the policy is missing elements A, F, J, and M.

Although these items are missing in policy, the majority of them are actually being done as part of the admission process.

Corrective Actions:

The facility needs to add these elements of the rule as required by the rule.

Once the policy is updated, the facility should review it's admission process to make sure that it is meeting all of the required elements.

Response Needed By:

2. 2911.2600 CLASSIFICATION OF INMATES. Subpart 1. Policy and procedure.

A facility shall have a written policy and procedure that provides for inmate classification in terms of level of custody required, housing assignment, participation in facility programs, and use of any overrides. The facility's policy and procedure on classification shall include consideration of the following: A. inmate gender; B. juvenile or adult status; C. category of offense; D. severity of current charges, convictions, or both; E. degree of escape risk; F. potential risk of safety to others and self; G. institutional disciplinary history; H. serious offense history; I. special needs assessment, inclusive of vulnerable adults, which includes a determination of how medical needs, mental health needs, developmental disability, or other behavioral or physical limitations or disabilities may impact on the classification of an inmate and appropriate housing of same; and J. special management inmate status.

Inspection Findings:

During policy review, it was discovered that not all of the elements of the rules are a part of the facility's policy. Specifically the policy is missing elements A, B, E, G, I, and J.

Corrective Actions:

The facility must review the policy and add these missing elements into policy as the rule requires.

The classification process was reviewed during the inspection and it appeared that all the missing elements in the policy are actually being addressed in the classification process. However the facility should review it's process once the policy is updated to make sure that it is meeting the requirements.

Response Needed By:

3. 2911.2900 GRIEVANCE PROCEDURE.

A written grievance procedure with at least one level of appeal shall be made available to all inmates.

Inspection Findings:

During policy review, it was discovered that the facility has two policies that address grievances, each policy contains different information. Specifically the policies are D-11 and C-07.

Corrective Actions:

It is recommended that the facility review these policies and combine them into one policy making sure that all information is included and that the policies don't contradict each other.

Response Needed By:

4. 2911.3300 CORRESPONDENCE. Subpart 3. Inspection and censorship.

A facility must have a written policy and procedure that requires that: A. inmate letters, both incoming and outgoing, may be opened and inspected for contraband; B. inmates are notified in writing when incoming or outgoing letters are rejected; and C. letters shall not be read or censored if they are between an inmate and an elected official, officials of the DOC, attorneys, or other officers of the court, but inspection of incoming mail from the specified class of persons noted may be opened only to inspect for contraband and only in the presence of the inmate.

Inspection Findings:

During policy review, it was discovered that the facility's policy does not address all the elements of the rule as required. Specifically the policy is missing element B and does not fully address element C.

Corrective Actions:

The facility must review it's policies and address the missing elements.

Response Needed By:

5. 2911.3700 EMERGENCIES AND UNUSUAL OCCURRENCES. Subpart 5. Inmate death.

A facility shall have a written policy and procedure that specifies actions to be taken in the event of an inmate death. When an inmate death occurs: A. the date, time, and circumstances of the inmate's death shall be recorded in the inmate's record; B. if the inmate dies in the facility, the coroner or medical examiner's office shall be notified; C. personal belongings shall be handled in a responsible and legal manner; D. records of a deceased inmate shall be retained for a period of time specified by county policy; E. the facility administrator or designee shall ensure observance of all pertinent laws and allow appropriate investigating authorities full access to all facts surrounding the death; and F. in the event the death involves a "vulnerable adult" notification procedures shall be followed in a manner consistent with statutory requirements.

Inspection Findings:

During policy review it was discovered that the facility's policy on this rule is missing all the required elements. Specifically it is missing element E of the rule.

Corrective Actions:

The facility must review it's policy and add the missing element into it's policy.

Response Needed By:

6. 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:

During policy review the facility's policy that address this rule does not contain all required elements of the rule. Specifically the policy is missing elements A (5) and (6).

Corrective Actions:

The facility must review it's current policy and add the missing elements of this rule.

Response Needed By:**Chapter 2911 - Essential Rules In Compliance With Concerns****Total: 7****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:

The facility's policy is missing elements of this rule, specifically it is missing elements D: vulnerable inmates and M: distribution of medications.

The facility is meeting the required number of training hours annually for custody staff. However with new hires the training records provided make it difficult to determine what training is being completed.

Corrective Actions:

The facility needs to add all the elements of this rule.

Additionally the facility should provide more description in the Training Log report for new officers, currently the Training Log report only documents these courses as "Jail Training," the log should reflect the specific topics covered.

Response Needed By:**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 policy review, it was discovered that the facility's policy does not include all elements of the rule as required. Specifically the facility is missing element F.

Corrective Actions:

The facility must review its policy and make sure that all elements of the required rule are included.

Response Needed By:**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:

During policy review it was discovered that this rule is addressed in policy however it does not cover elements B, C, and D.

Corrective Actions:

The facility must add the missing elements to it's policy.

Response Needed By:

4. 2911.3100 INMATE ACTIVITIES AND PROGRAMS. Subpart 6. Work assignments for adults.

Class II to Class VI facilities shall have a written inmate work assignment plan that provides for inmate work, subject to the number of work opportunities available and the maintenance of facility security. Work assignments must provide: A. that adults not under sentence may volunteer to work but shall not be compelled to participate in work beyond maintaining the immediate living area; B. eligibility criteria for work activities; C. that sentenced inmates shall not be compelled to work more than ten hours per day; D. that work shall not be required of an inmate that cannot be done by the inmate due to physical limitations; E. work opportunities for disabled inmates; and F. inmate working conditions that comply with all applicable federal, state, or local work safety laws, rules, and regulations.

Inspection Findings:

During review of policy it was discovered that the facility does have a policy that addresses this rule however it does not address elements A and C.

Corrective Actions:

The facility should review it's policies and add the missing elements to the policy.

Response Needed By:

5. 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:

The facility does have a recreation/program space available for inmates to use. Included in this space is a stationary exercise bike and an elliptical machine for inmates to use. There is limited other space to provide any other type of physical activity.

Corrective Actions:

The facility needs to make sure that it is allowing all inmates the required amount of time and opportunity to use this exercise equipment to comply with this rule.

The facility should also address this space limitations in any future remodel or building construction plans.

Response Needed By:

6. 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:

During policy review it was discovered that the facility's policy addressing this rule does not address all required elements. Specifically it does not address elements B, D, and E.

Corrective Actions:

The facility must review it's policy and address the missing elements as required in the rule.

Response Needed By:

7. 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:

During policy review it was discovered that the facility's policy that addresses this rule does not address all the elements of the rule. Specifically the policy is missing elements A,F,G (just attempted escape), J,K,L,N,and P.

Additionally the facility's policy does not address the change for Death Notification to the DOC. As of August 2021 facilities are required to notify the DOC of an in-custody death within 24 hours.

Corrective Actions:

These elements must be added to policy as required by the rule.

Although the policy doesn't address the listed elements, it does appear that the facility is reporting these elements as required.

The facility must also include the changes to the time requirement for Death Notifications reporting to the DOC.

Response Needed By:

INSPECTION COMMENTS

Comments:

Policy: The facility's policies are in need of a major review and update. There are several locations throughout the policies where the policy does not meet all elements of the rule as required. In speaking with Jail Administrator Brandon Hendrickson, the facility is currently in the process of switching all policies to Lexipol, JA Hendrickson is in the process of customizing Lexipol so that it fits his facility. It is recommended that JA Hendrickson transition to Lexipol as soon as possible, this will resolve a lot of the issues not in compliance during this inspection.

Physical Plant: The facility is small and showing it's age. The facility utilizes 3 small housing units, 2 of the units are dorm style and have very small dayroom spaces attached to them. The other housing unit has 3 cells and a dayroom space that allow for lockdown. However the way this space is designed, it makes it difficult for staff to conduct proper well-being checks. There are a number of blind spots within the facility. The program/recreation space is small and limits the facility's ability to provide a variety of programs and recreation. The facility has also experienced a number of plumbing issues as a result of the facility's age. The facility is clean, it is clear staff take pride in keeping the facility clean.

According to the National Institute of Corrections, the average life expectancy of a jail facility operated 24 hours per day, seven days per week, is approximately 30 years, depending on usage. The County is actively in the process of designing a new facility, however nothing has been finalized. Given the issues described and the age of the facility, the County should continue to proceed towards a new facility and must continue to maintain it's current facility until construction is completed.

Well-Being Checks: A video review of well-being checks show that the checks are being completed within the required 30 minutes. However several of the checks reviewed were completed at a pace considered to fast to observe signs of life and/or distress. This was discussed with JA Hendrickson during the inspection. Well-being check training should be provided to all staff.

Additionally, well-being checks in C Pod are being conducted from the hallway/corridor outside of the pod. Specifically at night it would be difficult to observe signs of life and/or distress from this distance. The facility should be having staff at night entering this unit to conduct well-being checks. The facility does have a concern regarding staff safety, however the facility also has an obligation to see to inmate safety as well. This was discussed with JA Hendrickson at the time of the inspection.

Hardel Sherrell Act: The facility needs to review the Hardel Sherrell Act that had a few items go into law August of 2021, the facility still hasn't addressed them in policy.

The areas include:

- Death Notification to the MN DOC
- Death Review Team
- Deadly Use of Force, to include chock holds and prone restraint
- Duty to Report Excessive Use of Force or Neglect

The Jackson County Jail will remain on annual inspection status.

JJDP A Compliance

On August 4, 2022, a Juvenile Justice and Delinquency Prevention (JJPD) Act audit was conducted. The Jackson 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 holidays. The three core requirements that are reviewed 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.

According to the DOC Portal System, the Jackson County Jail processed four (4) juveniles from October 1, 2021 to August 4, 2022. The findings are as follows:

The Jackson County Jail does not allow any juveniles in the jail per the jail policy without prior approval by the Judge, regardless of time of day. A juvenile log is kept for juveniles court ordered for fingerprinting. The jail is the only finger printing station in Jackson County.

DSO: No violations of the facility holding status offenders in the jail were found. The juveniles brought into the facility were indeed there for a delinquent offenses.

Jail Removal: Files and DOC Portal data indicate that any juveniles brought into the jail are removed well within the 24 hour time frame allowed by the JJDP A.

Sight and Sound Separation: The facility design and policies allow for proper sight and sound separation.

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

Based on the documentation that reviewed, no violations of the JJDP Act were identified during the Jackson County jail inspection.

Report completed By: Justin Roberts – Detention Facility Inspector

Signature:

