



# 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:

### Koochiching County Jail

**Address:** 715 Fourth Street, International Falls, MN 56649

**MN Governing Rule:** 2911 Local Adult Detention Facilities

**Inspection Type:** Annual **Inspected By:** Troy Okerlund – Detention Facility Inspector **Inspected on:** 05/18/2022 to 05/26/2022

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

**Officials Present During Inspection:** Jail Administrator Carrie Geiss

**Officials Present for Exit Interview:** Chief Deputy Jon Froemke; Jail Administrator Carrie Geiss; Sheriff Perryn Hedlund

**Issued Inspection Report to:** Chief Deputy Jon Froemke; Jail Administrator Carrie Geiss; Sheriff Perryn Hedlund; County Administrator Jenny Herman; Regional Manager Jacob 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	127	97	14	16	88.98%	Compliance rating of 100%
2911	Essential	100	81	13	6	87.00%	Compliance rating of 90%

## TERMS OF OPERATION

**Authority to Operate:** approval **Begins On:** 07/01/2022 **Ends On:** 06/30/2023 **Facility Type:** 90 Day Lockup  
**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:** Koochiching 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	30	80	24.00	None.	None.

## RULE COMPLIANCE DETAILS

**Chapter 2911 - Mandatory Rules Not In Compliance** **Total: 14**

- 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 is currently working on a written staffing plan that meets the requirements within the rule.

**Corrective Actions:**

**The facility must complete and submit a written staffing plan for the facility, for approval by the DOC.**

**Response Needed By: 11/16/2022**

**2. 2911.1000 TRAINING PLAN.**

A facility administrator or designee shall develop and implement a training plan for the orientation of new employees and volunteers and provide for continuing in-service training programs for all employees and volunteers. Training plans shall be documented and describe curriculum, methods of instruction, and objectives. In-service training plans shall be prepared annually and shall provide documentation indicating that training for individual employees has taken into consideration their length of service, position within the organization, and previous training completed.

**Inspection Findings:**

The facility is currently working on a written training plan that meets the requirements within the rule.

**Corrective Actions:**

**The facility must complete and submit a written training plan for the facility.**

**Response Needed By: 11/16/2022**

**3. 2911.1900 POLICY AND PROCEDURE MANUALS.**

A facility shall have a written policy and procedure manual that is electronically available to staff and relevant regulatory authorities and defines the philosophy and method for operating and maintaining the facility. This manual shall be made available to all employees, reviewed annually, updated as needed, and staff trained accordingly. The manual shall include, at a minimum, the following chapters: A. correctional standards required under this chapter; B. administration and organization; C. fiscal management; D. personnel; E. training; F. inmate records; G. safety and emergency; H. security and control; I. sanitation and hygiene; J. food service; K. medical and health care services; L. inmate rules and discipline; M. communication, mail, and visiting; N. admissions, orientation, classification, property control, and release; O. inmate activities, programs, and services; and P. a written suicide prevention and intervention plan. The facility administrator or designee shall review policy and procedure manuals at least once each year. The review shall be documented in written form sufficient to indicate that policies and procedures have been reviewed and amended as appropriate to facility changes.

**Inspection Findings:**

The rule states that the manual shall include at minimum certain chapters. A review of policy found some chapters like fiscal management are missing while other chapters don't adequately address requirements within the rule such as a written suicide prevention. The facility is missing the intervention part of the plan.

**Corrective Actions:**

**Review the requirements in Rule 2911.1900 and modify policy chapters to be complaint with the rule. State Statutes must be taken into consideration when modifying policy to ensure the facility is in compliance with both the rule and state statutes.**

**Response Needed By: 11/16/2022**

## 4. 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:**

Upon review it was found that policies and procedures for processing new inmates do not include all minimum requirements in subpart 1 within policy. Additionally, the facility worked at creating a mental health screening form consistent with the approved form, however it's not an exact match. Showering and hair cleansing it not consistently happening at booking time frame.

**Corrective Actions:**

**The facility's policies on admissions must include all of the minimum requirements in subpart 1, A through M. Additionally the facility must use one of the three DOC approved mental health screen forms Per Minnesota State statute 641.15 subdivision 3A. When updating the policy in regard to J (10) Obtaining emergency contact information, this be updated to reflect the requirement in state statute that facilities receive release of information during intake: Subd. 7. Intake release of information. New intakes must be allowed to shower.**

**Response Needed By: 11/16/2022**

## 5. 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:**

The facility appears to be using appropriate considerations for inmate classification. However, the facility policy needs to be modified to reflect the classification requirements A through J within policy as some are not clearly identified in policy.

**Corrective Actions:**

**Review the rule and the "shall include consideration" requirements. Modify facility policy and procedure to reflect the considerations required under the rule and state statutes.**

**Response Needed By: 11/16/2022**

## 6. 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:**

Facility policy does not include all language required in rule. The facility is missing shampoo, feminine hygiene, and comb as required hygiene items for inmates.

**Corrective Actions:**

**Policy must be modified to include all the required hygiene items available to inmates within policy specifically the ones listed in subpart 1, A through H.**

**Response Needed By: 11/16/2022**

7. 2911.3200 INMATE VISITATION

The facility administrator or designee shall develop and implement an inmate visiting policy. The policy shall be in writing and include: A. attorney/client interviews allowed in a manner consistent with Minnesota Statutes, section 481.10; B. a schedule of visiting hours that includes the days and times for visits that includes visits during the normal business day, and evenings or weekends; C. establishment of a uniform number of permissible visits and the number of visitors permitted per visit; D. that an adult inmate be permitted an initial visit with a member or members of the inmate's immediate family at the next regularly scheduled visiting period; E. that all facilities schedule a minimum of eight visiting hours per week: (1) a minimum of three separate and distinct visiting days per week; and (2) 20 minutes' duration minimum for each visit unless the number of persons attempting to visit exceeds the facility's ability to meet this requirement, or the inmate's behavior dictates a need to terminate a visit earlier; F. allowed visits for identified members of an inmate's immediate family; G. when a visit to an inmate is denied for reasonable grounds on the belief that the visit might endanger the security of the facility, the action and reasons for denial shall be documented; H. that visitors register, giving names, addresses, and relationship to inmate; I that any area used for inmate visiting may be subject to audio monitoring, recording, or both. The facility shall use signs and the inmate handbook to inform the inmate about audio monitoring and recording. Professional visits not be audio recorded, unless a court order has been issued; J. that policies for parents, guardians, and attorneys visiting juveniles are unrestrictive as administratively possible and the initial visit of a juvenile by parents, guardians, and attorneys be permitted at any time; K. picture identification of visitors be required for identification purposes; L. that juvenile children be allowed to visit parents, regardless of age, as deemed appropriate by the parent or guardian accompanying the child and when a dispute over children visiting occurs between the inmate and the parent or legal guardian, the inmate be referred to the court for resolution; and M. facility policy and procedures setting forth criteria for authorized friend visiting.

**Inspection Findings:**

The facility appears to be missing some required language in policy per the rule. Additionally, it was found the facility has nine hours of visiting a week, however, the time is split between male and female.

**Corrective Actions:**

**Specific language that must be included in the visitation policy required by the rule:**

**A. Attorney client interviews allowed in a manner consistent with Minnesota State Statute 481.10.**

**C. Establishment of the uniform number of permissible visits and the number of visitors permitted per visit.**

**D. That an adult inmate be permitted and initial visit with a member or members of the inmates immediate family at the next regularly scheduled visiting.**

**E. That all facilities schedule minimum of eight hours of visiting per week.**

**I. That any area used for inmate visiting may be subject to audio monitoring, recording, or both. The facility shall use signs and the inmate handbook to inform the inmates about audio monitoring and recording. Professional visits shall not be audio recorded unless court order has been issued.**

**J. That policies for parents and guardians, and attorneys visiting juveniles are unrestrictive as administratively possible and the initial visit for a juvenile by parent, guardians, and attorneys be permitted at anytime.**

**M. Facility policy and procedure setting forth criteria for authorized friend visiting.**

**Both male and females should have a minimum of eight hours of visiting available each week.**

**Response Needed By: 11/16/2022**

8. 2911.3700 EMERGENCIES AND UNUSUAL OCCURRENCES. Subpart 1. Emergency plan.

A facility shall have a written disaster plan. The plan shall include policies and procedures designed to protect the public by securely detaining inmates who represent a danger to the community or to themselves when the facility must be evacuated in total. The plan shall also include: A. location of alarms and fire fighting equipment; B. an emergency drill policy as follows: (1) at least annual drills at all facility locations; and (2) drills shall be conducted even when evacuation of extremely dangerous inmates may not be included; C. specific assignments and tasks for personnel; D. persons and emergency departments to be notified; E. procedure for evacuation of inmates; and F. arrangements for temporary confinement of inmates.

**Inspection Findings:**

Within the emergency response to fire the facility will move the inmates to the sheriff's garage. This may not significantly address the rule requirement of arrangements for temporary confinement of inmates.

**Corrective Actions:**

**Arrangements for temporary confinement of inmates should identify a location off site and any transportation needed to facilitate movement of inmates.**

**Response Needed By: 11/16/2022**

## 9. 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:**

The policy is currently being updated to address statutory changes in regard to inmate deaths in county correctional facilities. The policy does not currently address the record retention requirement required within the rule and vulnerable adult notification procedures.

**Corrective Actions:**

**The policy must address deaths that involve vulnerable adults and the notification procedures and indicate within policy that the records of the deceased inmate shall be retained for a period of time specified by county policy. It is also recommended that the policy be modified to be more consistent with Minnesota State Statute 241.021.**

**Response Needed By: 11/16/2022**

## 10. 2911.5000 POST ORDERS; FORMAL INMATE COUNT; WELL-BEING CHECKS. Subpart 4. Counting.

A facility shall have a written policy describing the system of counting inmates. Formal counts shall be completed with an official entry made in the daily log at least once each eight hours. The facility shall maintain a system that identifies the whereabouts of all inmates in custody and includes a system of accountability for inmates approved for temporary absences from their assigned housing units. A written policy and procedure shall provide that staff regulate inmate movement.

**Inspection Findings:**

The facility regulates inmate movement however it doesn't have a written policy and procedure as required by the rule.

**Corrective Actions:**

**The facility must have a written policy and procedure that require staff regulate inmate movement.**

**Response Needed By: 11/16/2022**

## 11. 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:**

Camera review of twelve well-being checks found, six rounds contained checks found to be completed at a pace that was too fast to be regarded as a well-being check. Signs of life such as movement, rise and fall of chest and other signs of life would be difficult to determine at such a quick pace.

A review of past inspections shows facility inspector noted concerns about well-being checks dating back to 2017. The reoccurring complaint is that checks are being performed at a pace that is too fast or checks exceed 30 minutes with one inspection in 2019 noting a four-hour gap. The facility has made great strides to perform all well-being checks within less than 30 minutes of each other however checks are still being done at a pace that is too fast. Non-complaint well-being checks must be addressed immediately and corrected. Policy does not address supervisory approval of late well-being checks.

**Corrective Actions:**

**All staff must be trained in the importance of well-being checks, the consequences for conducting late well-being checks and the requirements outlined in the rule. It is strongly encouraged that the facility produce a training video showing all staff a standardized and consistent checks during daytime and nighttime hours. The video should highlight compliant and non-compliant well-being checks. Correctional facilities have reported that it is beneficial to have staff watch video of their own non-compliant well-being checks during training. The facility shall create a system of auditing well-being checks for both line staff and supervisory staff who conduct checks. Checks shall be staggered and at a pace sufficient to observe the well-being of the inmate. The facility must complete a minimum of two audits on each staff member (who are charged with performing checks) every month. Documentation shall include well-being check logs, the results of the audit of logs and video documentation and any follow up with staff who are not in compliance with the standard.**

**Policy must be modified to include that if a well-being check did not occur due to an emergency it must be documented in the jail log and have supervisory review and approval.**

**Response Needed By: 07/29/2022**

12. 2911.6600 DELIVERY. Subpart 15. Nonprescription medication.

Over-the-counter nonprescription medication available to inmates shall be approved by health care personnel. Delivery of nonprescription medication by custody staff shall be documented.

**Inspection Findings:**

Staff did not document delivery of nonprescription medication to the inmates in their medical file.

**Corrective Actions:**

**Staff need to document delivery of nonprescription medication within the inmates medical file.**

**Response Needed By: 11/16/2022**

13. 2911.6600 DELIVERY. Subpart 16. Keep-on-person medications.

There shall be a policy and procedure for keep-on-person medications that provides for: A. medications identified and approved by the health authority as appropriate for self-administration and storage in an inmate's cell; B. procedures for an inmate's overdose of the medication; C. consequences if too much medication is found in the inmate's possession; D. how the distribution of medications under this subpart is going to be documented; and E. nonprescription medications, if any, that are available to inmates through vending machines or commissary. Keep-on-person medications shall be documented for each inmate.

**Inspection Findings:**

Although the facility does not allow keep on person medications the rule requires that they have a policy. The facility currently does not have a policy but is working on one.

**Corrective Actions:**

**Develop a policy and procedure as required by the rule for keep on person medications that provides direction on items listed in subpart 16 A through E.**

**Response Needed By: 11/16/2022**

14. 2911.7100 INMATES WITH SPECIAL NEEDS. Subpart 3. Management of inmates.

A policy and procedure shall be developed for the management of inmates with special needs and shall include: A. procedures that require referral for emergency admission under Minnesota Statutes, chapter 253B, of persons considered to be mentally ill or developmentally disabled, and in imminent danger of injuring self or others if not immediately restrained; and B. procedures for accessing and using emergency services according to Minnesota Statutes, chapter 253B, for adults who are experiencing an emotional crisis or mental illness.

**Inspection Findings:**

Policy doesn't address procedures that require referral for emergency admission under Minnesota State Statute 253B.

**Corrective Actions:**

**Modify the policy to meet the "shall include" requirements of subdivision 3 A & B.**

**Response Needed By: 11/16/2022****Chapter 2911 - Essential Rules Not In Compliance****Total: 13****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:**

Right to know, blood borne pathogens and communicable disease training could not be found in policy as a minimum training requirement completed before independent assignment.

**Corrective Actions:**

**Ensure facility staff complete right to know and blood borne pathogens and communicable disease training before independent assignments within the jail.**

**Response Needed By: 11/16/2022****2. 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:**

Upon a detailed review it was found that policy did not state that administrative and managerial staff receive data practices training required by the rule.

**Corrective Actions:**

**Update facility training to include data practices training and continue with all of the other required training in Minnesota ruled 2911.1400.**

**Response Needed By: 11/16/2022****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:**

Policy states that after three days in administrative segregation the jail administrator will review the inmate status. However, policy does not specify whether this reoccurs every three days or it's a one-time event. Additionally, the review process that is used to release an inmate for administrative segregation must be specified per the rule.

**Corrective Actions:**

**The facility must modify its policy and practices so they conform with 2911.2800 subdivision 4 of the rule.**

**Response Needed By: 11/16/2022****4. 2911.2800 ADMINISTRATIVE SEGREGATION. Subpart 6. Protective custody.**

Written policy and procedure shall provide that an inmate is separated from the general population for purposes of protective custody only when there is documentation that protective custody is warranted and segregation is the least restrictive alternative available.

**Inspection Findings:**

The jail administrator took over approximately a year ago and the facility is in the process of updating their policy and procedures. This is a policy and procedure that they have identified as needing updating. Currently facility staff couldn't find a defined protective custody policy and procedure.

**Corrective Actions:**

**Develop or modify an existing policy to address protective custody as required in the rule.**

**Response Needed By: 11/16/2022**

5. 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:**

The facility must update their written plan in regard to activities and programs. Currently the facility does not meet all the requirements of subpart 1.

**Corrective Actions:**

**Increased programming would be difficult given the design and limited space in the facility. There is one room that is not of adequate size to facilitate programming for all inmates. No active recreation space is available. The facility must identify persons conducting the program and whether or not the persons are facility staff, external community resources under contract, or volunteers. The facility will also need to document programs offered and inmates participating in the program.**

**Response Needed By: 11/16/2022**

6. 2911.3100 INMATE ACTIVITIES AND PROGRAMS. Subpart 3. Library service.

The facility administrator or designee shall develop a library service including access to current leisure reading material such as books, magazines, and newspapers. Legal books and references requested by inmates shall be made available to the extent resources permit. The facility shall not be responsible for the purchase of legal books and references used by inmates. The facility shall have a designated staff person who coordinates and supervises library services.

**Inspection Findings:**

The facility has a small library and tasks needed to maintain it are assigned when they arise.

**Corrective Actions:**

**Per the rule requirement, the facility must have a designated staff person who coordinates and supervises the library services.**

**Response Needed By: 11/16/2022**

7. 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:**

Facility inspector was unable to locate written inmate work assignment that provided inmate work opportunities for disabled inmates.

**Corrective Actions:**

**The facility must draft a new policy or modify existing policy to include all of the requirements for work assignments under subdivision 6 A through F.**

**Response Needed By: 11/06/2022**

8. 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 design and layout of this facility does not allow for any active recreation opportunities. Adding multiple exercise equipment to provide physical activity in very limited space to exercise all large muscle groups does not appear to be a viable alternative. The space is approximately 12 feet by 22 feet. Currently it's being used as the library, video courtroom, programming space, recreation space, and has at times stored kitchen refrigeration equipment with chairs, desks, bookshelves, video court conferencing equipment, and one piece of exercise equipment the room is already overcrowded.

**Corrective Actions:**

**Since the last inspection the facility has added a piece of exercise equipment in an attempt to try to make the best out of the limited space that's available. The County must submit a plan to the DOC to show how they intend to become in compliance with this rule part.**

**Response Needed By: 11/16/2022**

9. 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 current policy needs additional information about the screening and selection of volunteers and the orientation training program appropriate to the nature of the assignment for volunteers.

**Corrective Actions:**

**The facility must modify their policy to include all the elements required within the rule A through E with special attention to screening and selection of volunteers and an orientation program appropriate to the nature of the assignment.**

**Response Needed By: 11/16/2022**

10. 2911.3600 CLOTHING AND BEDDING PROPERTY. Subpart 6. Excess personal clothing and abandoned property.

An inmate's excess personal clothing, abandoned property, or both shall be picked up by the inmate, or released to a designated family member or friend from whom a signed property release has been secured. Property shall be stored in containers designed for this purpose and properly identified, inventoried, and secured. A documented disposition on all abandoned property shall be maintained.

**Inspection Findings:**

The facility did not have a documented disposition on abandoned property, however the facility stated they have not destroyed or had large amounts of abandoned property that they could recall. The facility received a complaint about inmate missing property. A property inventory and signed property release could not be located.

**Corrective Actions:**

**It is required that the facility incorporate subdivision 6 within their policy and procedure. Additionally, any abandoned property shall be documented and any excess personal property shall be inventoried and documented with a signed property release when the property is released. These records should remain on file with the facility consistent with their data retention policy.**

**Response Needed By: 11/16/2022**

11. 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:**

The facility currently doesn't have a protective clothing policy and the facility currently doesn't have positions that would require inmates to wear protective clothing such as working with hazardous, toxic, or caustic materials.

**Corrective Actions:**

**As required by the rule the facility shall have a written policy and procedure and practice that provides for the issue of special and wear appropriate protective clothing and equipment to inmates participating in special work assignments.**

**Response Needed By: 11/16/2022**

12. 2911.3700 EMERGENCIES AND UNUSUAL OCCURRENCES. Subpart 6. Work stoppage.

A facility shall have a written plan that provides for continuing operations in the event of a work stoppage or other job action. A copy of the plan must be available to all supervisory personnel who are required to familiarize themselves with the plan.

**Inspection Findings:**

The facility discussed steps that they would take in regard to a work stoppage but a written plan and copies for supervisory personnel don't currently exist.

**Corrective Actions:**

**The facility must have a written plan that provides for continuing operations in the event of a work stoppage. A copy of the plan must be available to all supervisory personnel who are required to familiarize themselves with the plan.**

**Response Needed By: 11/16/2022**

13. 2911.5800 AVAILABILITY OF MEDICAL AND DENTAL RESOURCES. Subpart 9. Sick call.

A facility shall develop a written policy and procedure that requires that there is a continuous response to health care requests and that sick call, conducted by a physician or other health care personnel is available to each inmate as follows: A. In small facilities of less than 60 inmates, sick call is held once per week at a minimum; B. in medium sized facilities of 60 to 200 inmates, sick call is held at least three days per week; C. in facilities of over 200 inmates, sick call is held a minimum of five days per week; and D. if an inmate's custody status precludes attendance at sick call, arrangements are made to provide sick call services in the place of the inmate's detention.

**Inspection Findings:**

While reviewing sick call procedures it was found that staff will attempt to treat minor injuries or ailments through over-the-counter drugs. Currently appointments are being scheduled for inmates when staff sees a need. Per policy the public nurse comes in once a week but is not reviewing all sick call slips, meeting with the ill or injured inmates, or signing off on the slip.

**Corrective Actions:**

**Per the rule requirement a physician or healthcare personnel must hold a sick call once per week and see the inmates who have made health care request through sick call. This process must be documented.**

**Response Needed By: 07/29/2022**

**Chapter 2911 - Mandatory Rules In Compliance With Concerns****Total: 16**

1. 2911.0300 INTENDED USE AND NONCONFORMANCE WITH RULES Subpart 2. Nonconformance, unsafe, unsanitary, or illegal conditions.

When conditions do not substantially conform or where specific conditions endanger the health, welfare, or safety of inmates or staff, the facility's use is restricted pursuant to Minnesota Statutes, section 241.021, subdivision 1, or legal proceedings to condemn the facility will be initiated pursuant to Minnesota Statutes, section 641.26 or 642.10.

**Inspection Findings:**

Well-being checks have been found out of compliance in all facility inspections since 2019 and physical plant issues continue to be a concern. Both the design of the facility and structural deterioration are not in compliance with the Rule. Lighting in the housing units doesn't allow for a clear view of staff going in and out of the units during sleeping hours. The jail is currently using a 12 by 22 foot room for courtroom space, programming space, recreation space, library space, and it has also been used to house kitchen appliances at times. Jail space is insufficient to support a Class II jail classification.

**Corrective Actions:**

**Corrective action is addressed in each section of this report as well as the summary statement.**

**Response Needed By: 11/16/2022**

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:**

The rule states that a training program shall be established by the facility administrator in cooperation with the health authority when reviewing the requirements such as first aid training. Facility policy states that continuing education and recertification will be provided through resources obtained by Koochiching County. It's unclear within policy if the health authority cooperates in the required medical training A through F required in the rule. Within policy it states that the Koochiching County Public Health Department will provide limited services to the Koochiching County Jail. Documentation provided shows Dr. Reiners with the Rainy Lake Clinic as the party who reviews the medical portion and over the counter medications that the jail has been allowed to pass out to inmates. Although it does not clearly state he's the medical authority.

**Corrective Actions:**

**Once the medical authority has clearly been defined the facility will need to work with them in cooperation to implement their required medical training.**

**Response Needed By:**

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:**

The policy states: The handbook will contain all orientation information. The Jail staff will assist the inmate with reading the information if the inmate is not able to read. If the inmate cannot read English, then the handbook will be translated by using the translation service provided on the Internet. This will then be printed out and given to the inmate. The inmate will then sign that they have received an inmate handbook. Facility texting devices require the inmates to acknowledge the handbook as well.

**Corrective Actions:**

**It is recommended that policy and procedure be modified to more closely aligned with the requirements of the rule that facility shall develop a written policy and procedure that provides documentation by a statement that is signed and dated by the inmate that the inmate completed orientation.**

**Response Needed By:**

4. 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:**

The facility has a complaint policy however an inmate complaint was substantiated in regard to inmate personal property that went missing along with a signed inmate inventory sheet.

**Corrective Actions:**

**The facility took responsibility and he's taking action to correct procedures in regard to inmate personal property, inventory, and signed releases.**

**Response Needed By:**

5. 2911.2550 RELEASES. Subpart 1. Release procedures.

A facility shall have written procedures for releasing inmates that include, at a minimum, the following: A. verification of identity; B. verification of authority to release; C. return of stored property with a receipt for the inmate to sign, unless the property is held for authorized investigation or litigation; and D. arrangements for completion of any pending action, such as grievances, or claims for damaged or lost possessions.

**Inspection Findings:**

A recent complaint to the DOC from a facility inmate stated their personal property was not returned. Upon review of the complaint it was found the facility did not have a current inventory or a signed property release sheet by the outgoing inmate. Facility policy addresses these things and it appears to be an isolated incident, this occurred approximately a week before the inspection and staff was working diligently to correct any outstanding issues.

**Corrective Actions:**

**Verify that staff are familiar with facility policies and following facility policies.**

**Response Needed By:**

6. 2911.2700 INFORMATION TO INMATES. Subpart 4. Data privacy.

An inmate admitted to a facility shall be advised of rights under Minnesota data privacy statutes with respect to information gathered by the facility and to whom the information will be disseminated.

**Inspection Findings:**

It was reported that inmates are being advised of their rights under the Minnesota data privacy statute with respect to information gathered by the facility.

**Corrective Actions:**

**It is recommended but not required that the facility modify their policy to include that inmates shall be advised of their rights under Minnesota data privacy statutes.**

**Response Needed By:**

7. 2911.2750 INMATE HYGIENE. Subpart 4. Indigent inmates.

An indigent inmate shall receive the personal hygiene items in subpart 1 at facility expense.

**Inspection Findings:**

When the facility modifies subpart 1 to identify all required hygiene items this portion will also be in compliance. Currently it appears that the facility is complying, it just needs to update policy to reflect that.

**Corrective Actions:**

**Modify subpart 1 and subpart 4 will become compliant as well.**

**Response Needed By:**

8. 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 documentation from a health care professional is ambiguous as to whether or not they're accepting responsibility as the health authority.

**Corrective Actions:**

**The facility must outline the responsibilities and working relationship that's required with the health authority and have the responsible person review policy, procedures, training and acknowledge responsibility as being the health authority.**

**Response Needed By: 11/16/2022**

9. 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 findings of the medical screening are to be recorded in a manner approved by the health authority. The facility is currently adding clearer language as to who is their designated health authority and the responsibilities and oversight that person has.

**Corrective Actions:**

**The facility must more clearly define their health authority and the responsibilities of that individual in regard to jail operations and policy.**

**Response Needed By:**

10. 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:**

Currently health complaints are being addressed by facility health trained staff. Follow up by triage and treatment should be conducted by health care personnel. Current practice is that facility health trained staff provide care and schedule nonemergent community care appointments. This could be interpreted as the staff making clinical judgments.

**Corrective Actions:**

**It is recommended that health trained staff continue to act upon inmate health complaints daily however inmates sick call request should be reviewed weekly by a physician and or health care personnel who then makes clinical judgments as to the health care needs of the inmates.**

**Response Needed By:**

11. 2911.6200 MEDICAL AND DENTAL RECORDS. Subpart 1a. Medical and dental records.

A facility shall record complaints of illness or injury and actions taken. Medical or dental records are maintained on inmates under medical or dental care. Records shall include: A. the limitations and disabilities of the inmate; B. instructions for inmate care; C. orders for medication including stop date; D. any special treatment or diet; E. activity restriction; and F. times and dates when the inmate was seen by medical personnel. Medical and dental records shall be available to staff for consultation in case of illness and for recording administration of medications.

**Inspection Findings:**

Facility policy does not reflect all of the required information that shall be documented in inmates medical and dental files.

**Corrective Actions:**

**Facility policy should be modified to meet all of the requirements in the rule in regard to information that must be documented in an inmate's medical and dental record.**

**Response Needed By:**

12. 2911.6400 DELIVERY, SUPERVISION, AND CONTROL OF MEDICATION.

In consultation with the health authority, a facility administrator shall have a written policy and procedure for the secure storage, delivery, administration, and control of medication according to parts 2911.6500 to 2911.6800.

**Inspection Findings:**

Current practice leaves it ambiguous as to if the facility has a health authority.

**Corrective Actions:**

**After clarification of the health authority that individual should approve written policy and procedure for the secure storage, delivery, administration, and the control of medication according to parts 2911.6500 to 2911.6800.**

**Response Needed By:**

13. 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:**

No temperature checks had been conducted on the medical refrigerator. Medication was currently not being stored in the medical refrigerator.

**Corrective Actions:**

**It is recommended that staff check the temperature of the medical refrigerator to make sure it's in working order so it is ready and operable when needed.**

**Response Needed By:**

14. 2911.6600 DELIVERY. Subpart 1. Delivering medication.

A person delivering medication to an inmate must do so under the direction of the responsible health authority or health care personnel.

**Inspection Findings:**

The facility has a local physician review the medical portion and over the counter medications that the jail has been allowed to pass out to inmates. This current agreement does not clearly specify that facility staff delivering medication to an inmate are operating under the direction of the responsible health authority.

**Corrective Actions:**

**It is recommended that you define the health authority, the responsibilities that that individual has and their acknowledgement and agreement.**

**Response Needed By:**

15. 2911.6600 DELIVERY. Subpart 9. Adverse reaction reports.

There shall be procedures for health-trained staff to report any adverse reaction incidents to health care personnel. The adverse reaction to a drug shall be documented.

**Inspection Findings:**

Adverse reaction reports when not immediately life threatening are reviewed by health-trained staff. Currently inmates in the facility only see a health care professional when symptoms are severe and they are transported outside of the facility.

**Corrective Actions:**

**All adverse reaction reports must be documented and relayed to health care personnel.**

**Response Needed By:**

16. 2911.7000 TUBERCULOSIS SCREENING, SEPARATION OF INMATES WITH INFECTIOUS DISEASE. Subpart 1. Policy.

A facility shall have a written policy and procedure that addresses the management of serious and infectious diseases. This policy and procedure shall be updated as new information becomes available.

**Inspection Findings:**

The rule requires referral for inmates with special needs whose adaptation to the correctional environment is significantly impaired. Policy states that staff will screen and observe inmates with special needs and will take necessary steps to provide help and/or treatment that the inmate needs.

**Corrective Actions:**

**Policy should be more aligned with the requirements and language required in the rule.**

**Response Needed By:**

**Chapter 2911 - Essential Rules In Compliance With Concerns****Total: 6**

1. 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:**

Facility policy reads: During the admission process or as soon as convenient thereafter, a person has the right to communicate with a member of his family (or a close friend) and with his attorney by making a reasonable number of telephone calls or in some other reasonable manner. No minimum time allowed for a call was found within facility policy.

**Corrective Actions:**

**It is recommended that policy language is more reflective of Minnesota Rule 2911.3400 such as: 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. Although a subtle change current facility policy states "soon as convenient thereafter" the admissions process. It is recommended to include the minimum time allowed per call of ten minutes except where there are substantial reasons to justify limitations.**

**Response Needed By:**

2. 2911.3600 CLOTHING AND BEDDING PROPERTY. Subpart 5. Quantity of clothing.

The facility shall have available sufficient clothing to ensure each inmate clean clothing appropriate to the season.

**Inspection Findings:**

Policy states that inmates will receive one pair of socks and fails to note undergarments within the clothing policy (2911.3600). The policy also says clothing exchange will be Monday and Thursday. This indicates inmates will be wearing the same pair of socks Thursday, Friday, Saturday, Sunday, and then turning them in on Monday for a new pair. Typically, two sets of clothing are issued so one could be worn while the inmate exchanges the dirty pair. Further review confirmed inmates are allowed to launder their clothes every day.

**Corrective Actions:**

**Policy should be updated to reflect actual practices and provide sufficient clothing to ensure each inmate clean clothing appropriate to the season.**

**Response Needed By:**

3. 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:**

Facility policy on required reporting of unusual occurrences is lacking for the following required reportable events:

1. hospitalization associated with mental health needs
2. injury to inmates through response to resistance by staff controlling inmate behavior
3. occurrences of infectious disease in action taken relative to same when a medical authority has determined that the inmate must be isolated from other inmates
4. reporting of all notices of intent to file litigation against the facility resulting from matters related to the detention or incarceration of an inmate
5. sexual misconduct, such as inmate on inmate, staff on inmate, and inmate on staff

**Corrective Actions:**

**Although not required under the rule it is recommended that the facility add all the reporting of unusual occurrence requirements within their policy. Policy should be updated to reflect new statutory changes that require the facility to notify the DOC of a death within 24 hours. Within the suicide policy it states if a death occurs the facility would have 10 days to notify the DOC, under the new statutory reporting requirements the facility would have 24 hours.**

**It is also recommended that the facility update their policy and procedure in regard to MN State Statute 241.021 Sub 8 that requires the facility to conduct a death review within 90 days of a death.**

**Response Needed By:**

4. 2911.4200 THERAPEUTIC DIETS. Subpart 1. Medical diets.



A facility housing inmates in need of medically prescribed therapeutic diets shall have documentary evidence that the diets are dietitian-approved and provided as ordered by health services. A healthier general menu contributing to the management of chronic diseases may minimize the need for medical diets.

**Inspection Findings:**

Policy review identified a confusing between rule 2911.4200 and 2911.4000.

**Corrective Actions:**

**Current facility policy may be too short to address all of the requirements within the rule. It is recommended that the facility review the rule and their policy to make sure that their policy and actions are consistent with and in compliance with the rule.**

**Response Needed By:**

5. 2911.4300 RELIGIOUS DIETS.

A facility shall have a written policy and procedure that provides for special diets or meal accommodations for inmates whose religious beliefs require adherence to religious dietary laws. Creation of religious diets shall involve a dietitian and strive to meet the nutritional guidelines under part 2911.3900.

**Inspection Findings:**

During the inspection it was stated that religious diets are agreed upon by the inmates and kitchen staff. It was unclear how involved the dietitian was with religious diets. Religious diets must also be dietitian approved so they meet nutritional guidelines.

**Corrective Actions:**

**Creation of religious diets shall involve a dietitian and strive to meet the nutritional guidelines under part 2911.3900.**

**Response Needed By:**

6. 2911.4950 RESPONSE TO RESISTANCE. Subpart 1. Policies and procedures.

The facility administrator or designee shall have written policies and procedures to provide for response to resistance. All personnel directly involved in the response shall submit written reports to the facility administrator or designee no later than the conclusion of the shift. Submission of these reports may be delayed when a staff member, sustains serious injury, hospitalization, or both.

**Inspection Findings:**

Policy and procedures was found to be lacking in regard to use of force incidents with pregnant females, prone position, and duty to report.

**Corrective Actions:**

**It is recommended that the facility add additional policies and procedures to address use of force incidents with pregnant females and detailed policies to address the new statutory language involving the use of prone position and duty to report. MN State Statute 243.52 subdivision 2 (use of force) and subdivision 3 (duty to report).**

**Response Needed By:**

## INSPECTION COMMENTS

The Koochiching County Jail is still showing considerable signs of deterioration. Since the last inspection, some of the perimeter glazing has been replaced but the integrity of the rusted metal window jams is suspect. The issues with heaving and drooping floors are not correctable without significant remodeling. The kitchen is drastically undersized, and storage is lacking.

Other undersized areas causing operational issues include medical and mental health space for the care of inmates, inmate property room, and the vehicle sally port. The intake area is drastically undersized. The fingerprint machine is placed in another room with ITV court and the kitchen refrigerator. There is no secure court holding area. Inmates are walked from the jail through public areas to get to the courtrooms. This is a safety and security concern. The facility has a 12 by 22-foot room that has desks and chairs for programming space, shelves filled with books to be used as library space, TV and equipment needed for televised court, the space is also used for professional visiting and has a treadmill and is the facilities recreation space. It was stated that the space also is sometimes used to house kitchen appliances. With the room needed to perform all of those tasks it doesn't have adequate space to ensure inmates have acceptable space to perform any of those everyday events and programs.

The National Institute of Corrections estimates that correctional facilities operating 24/7 have an average life expectancy of approximately 25-30 years based on the occupancy rate of the facility. The Koochiching County Jail has now been operating for more than 40 years. In January of 2021, the County contracted with ICS for a local jail and justice system assessment. One of the conclusions in this report was the need for "new jail space." Since the last inspection the County has started the process of researching and building a new facility.

The Koochiching County Jail will remain on an annual inspection cycle.

## JJDPA Compliance

The Juvenile Justice and Delinquency Prevention (JJDP) Act audit was conducted on May 18, 2022. The Koochiching County Jail has 24 hours delinquent juvenile hold approval. The three core requirements of the JJDP Act are Deinstitutionalization of Status Offenders (DSO), Removal of Juveniles for Adult Jail and Adult Lockups (Jail Removal), and Sight and Sound separation.

According to facility records the Koochiching County Jail held or processed one (1) juvenile from October 1, 2021 through the date of inspection.

DSO: No violations of the facility holding any status offenders.

Jail Removal: No juveniles were held in the jail longer than the approved limit.

Sight and Sound Separation: The design of the facility makes sight and sound separation difficult but with operational adaptations, it is achievable.

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

Based on the information reviewed during this compliance check, there were no violations of the JJDP Act during the Koochiching County Jail inspection.

Report completed By: Troy Okerlund – Detention Facility Inspector

Signature: \_\_\_\_\_

