



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:

Lac Qui Parle County Jail

Address: 600 Sixth Street, Madison, MN 56256

MN Governing Rule: 2911 Local Adult Detention Facilities

Inspection Type: Annual **Inspected By:** Sarah Johnson – Senior Detention Facility Inspector **Inspected on:** 07/23/2020

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

Officials Present During Inspection: Jail Administrator Barb Fernholz

Officials Present for Exit Interview: Jail Administrator Barb Fernholz

Issued Inspection Report to: Jail Administrator Barb Fernholz; Sheriff Allen Anderson; County Auditor/Treasurer/Coordinator Jake Sieg; Regional 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	128	122	2	4	98.44%	Compliance rating of 100%
2911	Essential	99	97	2	0	97.98%	Compliance rating of 90%

TERMS OF OPERATION

Authority to Operate: conditional approval **Begins On:** 07/01/2020 **Ends On:** 06/30/2021 **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:** Lac Qui Parle 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	7	60	4.20	None.	None.

RULE COMPLIANCE DETAILS

Chapter 2911 - Mandatory Rules Not In Compliance**Total: 2**

1. 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:

A review of well-being check video shows well-being checks were not completed in a timely manner. Also, the logged well-being checks were not verified by camera.

Corrective Actions:

It is imperative that staff complete proper well-being checks in a timely manner. Proper well-being checks need to be within 30 minutes of each other and staggered in time and route. Staff need to have a review of policy and retrained on how proper well-being checks are completed. Jail administration will need to frequently review video of well-being checks completed by all staff. It is recommend for staff that are not in compliance of well-being check requirements to be addressed through the County's discipline process. Submit corrective action for well-being checks to the Department of Correction for review. The facility will be placed on an annual inspection due to this compliance concern.

Response Needed By: 09/30/2020

2. 2911.5300 SEARCHES, SHAKEDOWNS, AND CONTRABAND CONTROL. Subpart 4. Daily inspections.

A facility shall be inspected at least daily for contraband, evidence of breaches in security, and inoperable security equipment, and shall document the inspection.

Inspection Findings:

The facility's daily inspection checks are random and not always being completed.

Corrective Actions:

Daily facility inspections need to be completed daily. I recommend a daily form to complete for verification purposes. Submit corrective action to the Department of Corrections for review.

Response Needed By: 09/30/2020**Chapter 2911 - Essential Rules Not In Compliance****Total: 2**

1. 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 recreation space is small and the limited space cannot meet the needs for active exercise and recreation.

Corrective Actions:

There is no corrective action at this time. The only way to increase the space is through a facility addition. If there is a jail expansion project in the future, recreation space must be addressed.

Response Needed By:

2. 2911.7300 FIRE INSPECTION. Subpart 4. Weekly inspection.

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

Inspection Findings:

The facility does not always conduct a weekly fire inspection for the facility. There were multiple missing weeks for the weekly fire inspection.

Corrective Actions:

It is recommended that the Jail Administrator review the required weekly checks for compliance. They could be added to the weekly post orders to remind staff when they are to be completed.

Response Needed By:**Chapter 2911 - Mandatory Rules In Compliance With Concerns****Total: 4**

1. 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:

Staff receive CPR and medication delivery but they do not receive training on all requirements of the rule such as B and E.

Corrective Actions:

Provide medical training for all staff that reflect the rule requirements. It is recommended to work with your medical provider to address more in-depth training in areas of mental health awareness and medical distress.

Response Needed By:

2. 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 policy and procedure manual has been completed through Lexipol, but there are many policies that the facility does not need in the manual.

Corrective Actions:

Go through all the facilities policies and remove what the facility does not utilize or adapt as a policy.

Response Needed By:

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

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

Inspection Findings:

The weekly lock inspections are not always being completed. There were missing weeks of the lock checks.

Corrective Actions:

All weekly lock checks need to be completed. It is recommended the lock checks are added to the weekly post orders to remind staff when they are to be completed.

Response Needed By:

4. 2911.7200 HOUSEKEEPING, SANITATION, AND PLANT MAINTENANCE. Subpart 1. General.

A facility shall have a policy and procedure that provides that the facility shall: A. be kept in good repair to protect the health, comfort, safety, and well-being of inmates and staff; B. document weekly sanitation inspections; and C. document deficiencies from the weekly sanitation inspection, if any, have been ordered.

Inspection Findings:

The weekly sanitation inspections are not always being completed. There were missing weeks of the sanitation checks.

Corrective Actions:

All weekly sanitation checks need to be completed. It is recommended the sanitation checks are added to the weekly post orders to remind staff when they are to be completed.

Response Needed By:**INSPECTION COMMENTS**

Lac Qui Parle has worked with Countryside Health Care to improve their overall medical care. Staff still have to address after hours medical care but there is better overall medical review. It is suggested as a best practice to have Countryside Health Care incorporate a medical reassessment for inmates that have been in custody for a period of time, such as a week, to reevaluate any potential medical concerns.

The facility has added more cameras to more areas of the jail for better facility review. The added cameras greatly improve staff and inmate safety.

Lac Qui Parle will have to address well-being checks. On the day of the inspection, there were well-being checks out of compliance. Both Sheriff Anderson and Jail Administrator were addressing the issue the same day as the inspection. Due to well-being checks being out of compliance, Lac Qui Parle will need to be re-inspected in one year and be placed on an annual inspection.

JJDPA Compliance

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

On July 23, 2020, a Juvenile Justice and Delinquency Prevention Act audit was conducted. The Lac Qui Parle County Jail has received a "Rural Exception" to the Juvenile Justice and Delinquency Prevention Act (JJDP). This allows the facility to hold a delinquent juvenile up to 24 hours, excluding weekends and holiday. There are three core requirements that are looked at during our facility review. Those core requirements 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 Statewide Supervision System, the Lac Qui Parle County Jail held or processed zero (0) juveniles during the federal fiscal year 2020. The findings are as follows:

DSO: I did not find any violations of the facility holding status offenders in the jail.

Jail Removal: I did not find any violations for the jail removal standard.

Sight and Sound Separation: The facility design and policies allow for proper sight and sound separation if a delinquent juvenile would have to be held. Lac Qui Parle County does not hold delinquent juveniles in the facility per their policy. All delinquent juveniles are brought to Prairie Lakes Juvenile Center in Willmar.

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

Court holding: The courtrooms do not have a secure court holding area. All delinquent juveniles are brought straight into the courtroom.

Based on the documentation that I reviewed, I did not find any violations of the JJDP act during the Lac Qui Parle County inspection.

Report completed By: Sarah Johnson – Senior Detention Facility Inspector

Signature: _____

