



Facility Inspection Report Issued By The Minnesota Department of Corrections Pursuant to MN Statute 241.021, Subdivision 1

Inspection and Enforcement Unit, 1450 Energy Park Drive, Suite 200, St.Paul MN 55108
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INSPECTION DETAILS
FOR:

MCF-Red Wing S.O.

Address: 1079 Highway 292, Red Wing, MN 55066

MN Governing Rule:

Inspection Type: Program Review **Inspected By:** Lauren Bizzotto – Detention Facility Inspector **Inspected on:** 06/20/2024

Inspection Method: Facility walk-through, staff interviews, staff and inmate file reviews, and facility documentation reviews.

Officials Present During Inspection:

Officials Present for Exit Interview:

Issued Inspection Report to:

RULE COMPLIANCE SUMMARY

Rule Chapter	Requirement Type	Total Applicable	Total Compliance	Total Non Compliance	Total Compliance With Concerns	Compliance Rating	Substantial Compliance Result/Criteria
2955	Mandatory	65	63	2	0	96.92%	Compliance rating of 100%
2955	Essential	2	1	1	0	50.00%	Compliance rating of 90%

TERMS OF OPERATION

Authority to Operate: approval **Begins On:** 08/01/2024 **Ends On:** 07/31/2026 **Facility Type:** Juvenile Sex Offender Program

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

Delinquent Juvenile Hold Approval:

Special Conditions:

Certificate Holder: MN Department of Corrections
1450 Energy Park Drive, Suite 200
St. Paul, MN 55108

RULE COMPLIANCE DETAILS

Chapter 2955 - Mandatory Rules Not In Compliance**Total: 2**

1. 2955.0100 STANDARDS FOR SEX OFFENDER ADMISSION AND ASSESSMENT Subpart 1. Admission procedure and new client intake assessment required.

A written admission procedure must be established that includes the determination of the appropriateness of the client by reviewing the client's condition and need for treatment, the treatment services offered by the program, and other available resources. This procedure must be coordinated with the external, nonclinical conditions required by the legal, correctional, and administrative systems within which the program operates. An intake assessment process must also be established that determines the client's functioning and treatment needs. All clients admitted to a residential juvenile sex offender treatment program must have a written intake assessment completed within the first 30 days of admission to the program.

Inspection Findings:

The two intake assessments reviewed were completed late.

Corrective Actions:

Develop a plan to ensure intake assessments are completed within 30 days of admission to the program and submit the plan to the Department of Corrections.

Response Needed By: 08/30/2024

2. 2955.0110 STANDARDS FOR INDIVIDUAL TREATMENT PLANS. Subpart 1. Initial individual treatment plan.

A written individual treatment plan for each client must be completed within 30 days of the client's entrance into the program. The individual treatment plan and the interventions designated to achieve its goals must be based on the initial treatment recommendations developed in the intake assessment with additional information from the client and, when possible, the client's family or legal guardian. Input may also be obtained from the program staff, appropriate representatives from outside social service and criminal justice agencies, and other appropriate resources. One qualified sex offender treatment staff person must be responsible for the integration and completion of the written plan, which is signed and dated and placed in the client's file.

Inspection Findings:

The two individual treatment plans reviewed were completed late.

Corrective Actions:

Develop a plan to ensure individual treatment plans are completed within 30 days of admission to the program and submit the plan to the Department of Corrections.

Response Needed By: 08/30/2024

Chapter 2955 - Essential Rules Not In Compliance**Total: 1**

1. 2955.0100 STANDARDS FOR SEX OFFENDER ADMISSION AND ASSESSMENT Subpart 7. Dimensions included in assessment.

The assessment must include, but is not limited to, baseline information about the following dimensions, as appropriate: A. a description of the client's conviction or adjudication offense, noting the facts of the criminal complaint, the client's description of the offense, any discrepancies between the client's and the official's or victim's description of the offense, and the assessor's conclusion about the reasons for any discrepancies in the information; B. the client's history of perpetration of sexually abusive and criminal sexual behavior and delineation of patterns of sexual response that considers such variables as: (1) the number and types of known and reported sexually abusive and criminal sexual behaviors committed by the client; (2) the type of sexual aggression used and any use of weapons; (3) the number, age, sex, relationship to client, and other relevant characteristics of the victims; (4) the type of injury to the victims and the impact of the sexually abusive or criminal sexual behavior on the victims; (5) the dynamics and process of victim selection; (6) the role of chemical use prior to, during, and after any sexually abusive and criminal sexual behaviors; (7) the degree of impulsivity and compulsivity, including any attempts by the client to control or eliminate offensive behaviors, including previous treatment; (8) use of cognitive distortions, thinking errors, and criminal thinking in justifying, rationalizing, and supporting the sexually abusive and criminal sexual behaviors; (9) the reported degree of sexual arousal or response prior to, during, and after any sexually abusive and criminal sexual behaviors; (10) a profile of sexual arousal or response, including any paraphilic or sexually abusive fantasies, desires, and behaviors; (11) the degree of denial and minimization, degree of remorse and guilt regarding the offense, and degree of empathy for the victim expressed by the client; and (12) the developmental progression of sexually abusive behavior over time; C. the client's developmental sexual history that considers such variables as: (1) family of origin or other caretaker attitudes about sexuality and the sexual atmosphere; (2) childhood and adolescent learning about sexuality, patterns of sexual interest, and sexual play; (3) history of reported sexual victimization; (4) sexual history time line; (5) courtship behaviors and relationships, including marriages; (6) experience of puberty; (7) exposure to and use of sexually explicit materials; (8) nature and use of sexual fantasies; (9) masturbation pattern and history; (10) sense of gender identity and sex role behavior and attitude; (11) sexual orientation; and (12) sexual attitudes and knowledge; D. the client's history of any other aggressive or criminal behavior; E. the client's personal history that includes such areas as: (1) current living circumstances and relationships; (2) prior out of home placements and living arrangements; (3) medical history; (4) educational history; (5) chemical abuse history; (6) employment and vocational history; and (7) military history; F. a family history that considers such variables as: (1) reported family composition and structure; (2) parental separation and loss; (3) family strengths and dysfunctions; (4) criminal history; (5) chemical abuse history; (6) mental health history; (7) sexual, physical, and emotional maltreatment; and (8) family response to the sexual criminality; G. the views and perceptions of significant others, including their ability or willingness to support any treatment efforts; H. personal mental health functioning that includes such variables as: (1) mental status; (2) intellectual functioning; (3) coping abilities, adaptational styles, and vulnerabilities; (4) impulse control and ritualistic or obsessive behaviors; (5) personality attributes and disorders and affective disorders; (6) learning disability or attention deficit disorder; (7) posttraumatic stress behaviors, including any dissociative process that may be operative; (8) organicity and neuropsychological factors; and (9) assessment of vulnerability; I. the findings from any previous and concurrent sex offender, psychological, psychiatric, physiological, medical, educational, vocational, or other assessments; and J. identification of factors that may inhibit as well as contribute to the commission of offensive behavior that may constitute significant aspects of the client's offense cycle and their current level of influence on the client.

Inspection Findings:

Subpart F, item 8 is missing from the initial assessment.

Corrective Actions:

The facility shall ensure this information is obtained in all initial assessments. No further action is required at this time.

Response Needed By: 08/30/2024

INSPECTION COMMENTS

The program certification will remain on biennial status.

JJDP A Compliance

Report completed By: Lauren Bizzotto – Detention Facility Inspector

Signature:

