



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:

Marshall County Jail

Address: 208 E Colvin Avenue, SUITE 1, Warren, MN 56762

MN Governing Rule: 2911 Local Adult Detention Facilities

Inspection Type: Annual **Inspected By:** Troy Okerlund – Detention Facility Inspector **Inspected on:** 06/29/2022 to 07/06/2022

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

Officials Present During Inspection: Jail Administrator Mark Ellerbusch; Sheriff Jason Boman

Officials Present for Exit Interview: Jail Administrator Mark Ellerbusch

Issued Inspection Report to: Jail Administrator Mark Ellerbusch; Sheriff Jason Boman; Regional Manager Jacob McLellan; County Auditor Treasurer Scott Peters

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	125	104	15	6	88.00%	Compliance rating of 100%
2911	Essential	95	80	10	5	89.47%	Compliance rating of 90%

TERMS OF OPERATION

Authority to Operate: approval **Begins On:** 09/01/2022 **Ends On:** 08/31/2023 **Facility Type:** 90 Day Lockup

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

Delinquent Juvenile Hold Approval: **Certificate Holder:** Marshall 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	15	86	12.90	None.	None.

RULE COMPLIANCE DETAILS

Chapter 2911 - Mandatory Rules Not In Compliance

Total: 15

- 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 facility must review and update their policy to reflect actual practices within the jail. Department inspector found many policies such as kitchen related policies, water supply, infirmary care, or policies that reference positions that don't exist like ADA coordinator, accident reduction programs and others. The facility does not follow some polices within manual. Additionally the facility is currently using two different policies to address the requirements in 2911.

Corrective Actions:

Policies should be located in one book and reviewed and amended as appropriate to facility changes.

The facility must add a written suicide prevention and intervention plan chapter per the rule.

The facility administrator must 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.

Response Needed By: 12/30/2022

2. 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:

While reviewing facility policy inspector was unable to find the required language required by the rule to include:

- 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

It doesn't appear that the facility has a shower for showering and hair cleansing in the booking area.

Corrective Actions:

Facility staff must update policy to include all the required language under the admissions rule 2911.2525 subpart 1.

Response Needed By: 12/30/2022

3. 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 reported having staff signed the inmate property receipt after taking inventory, however the inmate does not sign a receipt for property held.

Corrective Actions:

Similar to rule 2911.3600 subdivision 6, the inmate shall sign a receipt for all property held and again sign the property receipt when items are released.

Response Needed By: 12/30/2022

4. 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 doesn't notify inmates that any area used for inmate visiting may be subject to audio monitoring, recording, or both in the inmate handbook.

Corrective Actions:

The facility must notify inmates that any area used for inmate visiting may be subject to audio monitoring, recording, or both in the inmate handbook.

Response Needed By: 12/30/2022

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

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

Inspection Findings:

The facility reported doing quarterly reviews of emergency procedures however the quarterly reviews were not documented.

Corrective Actions:

The review shall be documented and require signature or initialing by all staff.

Response Needed By: 12/30/2022

6. 2911.4000 ANNUAL FOOD SERVICE REVIEW.

A facility's menu content and cycle shall be reviewed at least once annually by a registered dietitian or nutritionist to ensure compliance with part 2911.3900. The review the findings shall be documented and on file.

Inspection Findings:

No documentation could be located in regard to a licensed dietitian reviewing the facility's annual menu to ensure its compliance with 2911.3900.

Corrective Actions:

A licensed dietitian is required to provide documentation stating that they have reviewed the facilities menu and the menu is compliant with Minnesota rule 2911.3900. This must be documented in writing and on file.

Response Needed By: 12/30/2022

7. 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 completes daily inspections, but they are not documented that they were completed.

Corrective Actions:

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

Response Needed By: 12/30/2022

8. 2911.5450 DANGEROUS MATERIALS.

A facility shall have a written policy and procedure that specifies that materials dangerous to either security or safety shall be properly secured. Storage and use of flammable, toxic, and caustic materials must be in accordance with all applicable laws and regulations of governing jurisdictions. The policy must cover control and use of tools and culinary and medical equipment.

Inspection Findings:

The facility has an extensive policy to cover the control and use of culinary equipment however the facility is not following the policy nor is the policy current with daily jail operations.

Corrective Actions:

The facility policy must be modified to be consistent with jail operations and compliance with 2911.

Response Needed By: 12/30/2022

9. 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 last health care policy review that could be located was in 2018.

Corrective Actions:

Health care policy must be reviewed and documented at least annually under the direction of the health authority and revised as necessary.

Response Needed By: 12/30/2022

10. 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 separate refrigeration for medications only.

Corrective Actions:

There must be separate refrigeration for medications only, and the temperature must be checked daily and documented.

Response Needed By: 12/03/2022

11. 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:

No policy and procedure for keep on medication was located by facility inspector.

Corrective Actions:

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.

Response Needed By: 12/30/2022

12. 2911.6600 DELIVERY. Subpart 4. Documentation.

Initial and refresher training must be documented.

Inspection Findings:

No documentation of initial and refresher training could be located. Facility staff stated they don't keep those records.

Corrective Actions:

Initial and refresher training must be documented in sufficient form so facility inspector can readily verify that individual staff have received initial and refresher training as required by the rule.

Response Needed By: 12/30/2022

13. 2911.6800 CONTROL. Subpart 1. Records.

Records of receipt, the quantity of the drugs, and the disposition of all prescription medications shall be maintained in detail to enable an accurate accounting.

Inspection Findings:

Facility health trained staff we're unable to verify the amount of inmate medication on hand. The facility reported having a process for accurate counts of medication but it was currently not in use.

Corrective Actions:

The facility must record the delivery of medications in a manner approved by the health care authority and in a way that allows the facility to verify the distribution and accountability of medication.

Response Needed By: 12/30/2022

14. 2911.6800 CONTROL. Subpart 4. Destruction of medication.

The destruction of medication on expiration dates or when retention is no longer necessary or suitable must be consistent with requirements of the Minnesota Pollution Control Agency.

Inspection Findings:

The facility had multiple over the counter medications that were expired some dating back to 2014.

Corrective Actions:

The facility must appropriately discard expired medication. It is recommended that the facility upon taking in new medication write the month and year of expiration on the top of the container so it's easily identified as to when the medication expires.

Response Needed By: 12/30/2022

15. 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:

Documentation from the weekly sanitation inspection could not be located.

Corrective Actions:

Document weekly sanitation inspections and document deficiencies from the weekly sanitation inspection, if any, have been ordered.

Response Needed By: 12/30/2022**Chapter 2911 - Essential Rules Not In Compliance****Total: 10**

1. 2911.1600 DESIGNATED TRAINING OFFICER.

A facility shall have a designated training officer responsible for: A. maintenance of training plans as required in part 2911.1000; B. maintenance of training records in sufficient detail to allow inspector assessment of compliance with parts 2911.1100 to 2911.1700; and C. documentation of waivers of training requirements based on equivalent training received before employment or demonstrated competency through proficiency testing.

Inspection Findings:

The facility showed dates for annual training, but the training documents did not have signatures and dates attended. Inspectors were unable to verify who attended training.

Corrective Actions:

Facility staff must document and sign for training attended. The designated training officer must ensure that this is occurring and keep records in sufficient detail to allow inspectors to verify compliance.

Response Needed By: 12/30/2022

2. 2911.2700 INFORMATION TO INMATES. Subpart 2. Program options and activities.

An inmate shall be provided written information on program options and activities within 24 hours of admission, excluding weekends and holidays. A facility staff member shall review program options and activities with inmates who are unable to read, within 24 hours of admission, excluding weekends and holidays. A Class I facility is exempt from this requirement with the exception of those approved by the commissioner to house inmates serving alternative sentences.

Inspection Findings:

Written information on program options and activities could not be located by inspector.

Corrective Actions:

Inmates shall be provided written information on program options and activities within 24 hours of admission, excluding weekends and holidays.

Response Needed By: 12/30/2022

3. 2911.3100 INMATE ACTIVITIES AND PROGRAMS. Subpart 1. Written plan.

A facility administrator or designee shall have and implement a written plan for the constructive scheduling of inmate time. The plan shall: A. identify programs offered in the facility and when the programs are offered; B. identify persons conducting the program and whether or not the persons are facility staff, external community resources under contract, or volunteers; C. be consistent with established legal rights of inmates, type and status of inmates detained in the facility, and rule requirements associated with the facility's classification; D. provide inmates with the option to refuse to participate in facility programs, except work assignments and programs required by statute or court order; E. when males and females are housed in the same facility, provide comparable opportunities for participation in programs and services; and F. require documentation of programs offered and inmates participating in programs.

Inspection Findings:

No documentation inmates are participating in programs could be located.

Corrective Actions:

The facility must document the programs offered and the inmates participating in the programs.

Response Needed By: 12/30/2022

4. 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:

Recreational space in the jail is not adequate to serve the inmate population.

Corrective Actions:

This is a physical plant constraint and although space is limited the facility needs to update policies indicating this. Currently the recreation policy references inmates going outside and other activities that are not occurring. Additionally, the facility should have a plan for providing opportunities for physical exercise and recreational activities of geriatric and disabled offenders. The facility should make all attempts to try to meet the physical activity needs of the inmates they serve.

Response Needed By: 12/30/2022

5. 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 doesn't require inmate signed property release.

Corrective Actions:

Similar to rule 2911.2525 subdivision 4, inmates must sign the initial property inventory and property release.

Response Needed By: 12/30/2022

6. 2911.3675 LAUNDRY SERVICES AND LINEN EXCHANGE. Subpart 2. Linen.

Clean linens shall be furnished once each week, at a minimum. There shall be a posted schedule for linen exchange. Inmates detained in admission or release processing areas for periods of time not exceeding eight hours need not be issued linens and bedding.

Inspection Findings:

Everything is exchanged Monday and Thursday. But an inmate can request an exchange any time they want. The facility is small and inmates seem familiar with when and how laundry exchange occurs, however no posting schedule for linen exchange was observed.

Corrective Actions:

There shall be a posted schedule for linen exchange.

Response Needed By: 12/30/2022

7. 2911.4950 RESPONSE TO RESISTANCE. Subpart 4. Equipment.

The issue, storage, inspection, and use of chemical agents, impact devices, electronic control devices, and other security devices shall be governed by written policy and procedure. All unissued security devices and equipment shall be stored in a secure, readily accessible depository located outside inmate housing and activity areas, and inventoried at least monthly to determine condition and expiration dates of the devices and equipment.

Inspection Findings:

The facility does conduct a monthly security equipment check but the security equipment is not inventoried.

Corrective Actions:

It is recommended the security equipment be inventoried and checked for condition. Documentation should be kept for verification purposes.

Response Needed By:

8. 2911.4950 RESPONSE TO RESISTANCE. Subpart 5. Firearms.

Facility policy and procedure shall provide for the use of firearms and include the following: A. except in an emergency situation, firearms are not permitted within the secure perimeter; and B. there shall be a secure weapons locker located outside the security perimeter of the facility.

Inspection Findings:

The facility has a weapons locker inside of the secure perimeter. The dispatch center/control room contains a weapon locker. Facility inspector observed multiple firearms inside of the secure perimeter in the control room. Firearms must be secured outside of the secure perimeter.

Corrective Actions:

The facility is currently working on update to the facility. When the work is completed, it is anticipated that the control room will be outside of the secure perimeter. The weapons locker inside of the control room would then be compliant with the rule when used. Until construction is complete firearms must be secured outside of the secure perimeter.

Response Needed By: 12/30/2022

9. 2911.4950 RESPONSE TO RESISTANCE. Subpart 7. Record.

The facility shall maintain a written record of emergency distribution of security devices and equipment.

Inspection Findings:

A written record of emergency distribution security devices and equipment is not kept.

Corrective Actions:

The facility shall maintain a written record of emergency distribution of security devices and equipment.

Response Needed By: 12/30/2022

10. 2911.5000 POST ORDERS; FORMAL INMATE COUNT; WELL-BEING CHECKS. Subpart 1. Post orders and accountability.

There shall be written orders for every security post that are reviewed annually and updated if necessary. A written policy and procedure shall require that personnel read, sign, and date applicable post orders at least annually, or as needed for new posts or revisions. Medium and large facilities with multiple posts may need to conduct these reviews more often.

Inspection Findings:

The post orders are good in detail but staff do not sign and date applicable post orders at least annually, or as needed for new posts or revisions as required.

Corrective Actions:

Have staff review, sign and date applicable post orders annually or as needed for revisions.

Response Needed By: 12/30/2022

Chapter 2911 - Mandatory Rules In Compliance With Concerns

Total: 6

1. 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 policy states age in regard to a classification plan. No consideration for juvenile or adult status could be found in policy or the facility initial custody classification scale.

Corrective Actions:

Age alone cannot always determine whether inmate is a juvenile or an adult. Appropriate questions to identify status should be added to the classification scale and policy should be updated to identify juvenile or adult status.

Response Needed By:

2. 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:

It was reported that the facility does formal counts every three hours. The rule requires that they be conducted a minimum of every eight hours. Within policy it states that "inmates are personally identified by the jailer should be counted once a day." Most inmates are free to move around the facility.

Corrective Actions:

Confusing language should be removed from policy and being that formal counts are occurring so frequently facility supervisors should verify that the formal count are being completed in their entirety and that all pertinent information is logged. Facility supervisors must ensure that staff is abiding by facility policy to regulate inmate movements per the requirements of 2911.5000 subdivision 4.

Response Needed By:

3. 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:

The facility inspector did a review of well-being checks for June 25th at 0200 hours and June 23rd at 0200 hours. The facility has a long corridor with bars. This leaves for a very open environment and a clear viewing area for facility staff when conducting well-being checks. Although the entirety of the well-being check could not be viewed on camera it appeared that staff was checking for signs of life and conducting well-being checks within 30 minutes of each other.

The facility allows inmates to walk around throughout the facility during the day so well-being checks are difficult to observe. Staff reported that they count the inmates and being that there are so few inmates they know who the inmates are and where they are.

Corrective Actions:

Having less controlled movement within the facility allows for higher possibility for incidents to occur. The facility should consider moving towards more controlled movements.

Response Needed By:

4. 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 did not have any current medical health authority documents. Facility staff said nothing has changed since the last document was signed in 2018 and the agreement still stands.

Corrective Actions:

The facility must update documentation indicating who the responsible health authority is for the facility. Additionally the facility uses an electronic log to record the disposition of prescription medications. It appears the facility has no medical cart or laptop to record medication distribution. Medication and the electronic log is in the control room. Facility staff should never allow inmates into the control room to disperse medications. Additionally under current practice firearms are allowed in the control room, this too reaffirms that inmates should never be allowed in the control room to have medication disbursed to them. To prevent this from occurring the facility should have a medication cart and a laptop or remove the medications from the control room and dispense medications in medical room with access to electronic log.

Response Needed By:

5. 2911.6600 DELIVERY. Subpart 2. Training.

Only persons who have received training appropriate to this assignment may deliver medication.

Inspection Findings:

The facility reported having annual training on the delivery of medication however training records are not signed or saved.

Corrective Actions:

When facility staff receive training on delivery of medication this must be documented, signed and saved.

Response Needed By:

6. 2911.6600 DELIVERY. Subpart 3. Refresher training.

A nonmedical staff person delivering medication shall receive refresher training a minimum of once every three years.

Inspection Findings:

The facility reported having annual training on the delivery of medication however training records are not signed or saved.

Corrective Actions:

When facility staff receive training on delivery of medication this must be documented, signed and saved.

Response Needed By:**Chapter 2911 - Essential Rules In Compliance With Concerns****Total: 5**

1. 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 an inmate "should" receive a visit from the jail administrator or authorized designee every seven days.

Corrective Actions:

Policy language should be changed to SHALL receive a visit from the jail administrator or authorized designee a minimum of once every seven days.

Response Needed By:

2. 2911.2850 INMATE DISCIPLINE PLAN. Subpart 3. Due process.

Disciplinary segregation shall be used only in accordance with due process to include at a minimum: A. published rules of conduct and penalties for violation of rules; B. written notice of alleged violation of a rule; C. the right to be heard by an impartial hearing officer and to present evidence in defense: (1) the inmate may waive the hearing in writing; and (2) a written record is made of the disciplinary hearing and sanctions or other actions taken as a result of the hearing; D. the right to appeal; E. the status of an inmate placed on disciplinary segregation for more than 30 continuous days subsequent to a disciplinary hearing shall be reviewed, approved, and documented by the facility administrator or designee at least once every 30 days, and the facility shall develop written policy, procedure, and practice that provides that inmates in disciplinary segregation receive visits from the facility administrator or designee at least once every seven days as a part of the disciplinary segregation review process; F. an inmate placed in segregation for an alleged rule violation shall have a disciplinary hearing within 72 hours of segregation, exclusive of holidays and weekends, unless documented cause can be shown for delays. Examples of causes for delay are inmate requests for delay, or logistical impossibility, as in the case of mass disturbances; and G. the facility administrator or designee can order immediate segregation when it is necessary to protect the inmate or others. This action is reviewed and documented within three working days.

Inspection Findings:

Policy states that an inmate "should" receive a visit from the jail administrator or authorized designee every seven days.

Corrective Actions:

Policy language should be changed to SHALL receive a visit from the jail administrator or authorized designee a minimum of once every seven days.

Response Needed By:**3. 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:

Policy states "The calls are not intended to be lengthy conversations and the custody staff may use their judgment in determining the reasonable duration of the calls." Facility staff was advised that the minimum call time allowed must be 10 minutes except where there are substantial reasons to justify limitations. Jail staff stated they would modify their policy to be more consistent with the rule.

Corrective Actions:

Facility staff is already working on modifying policy to reflect that inmates have a minimum of 10 minutes per call except for their substantial reasons to justify limitations.

Response Needed By:**4. 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 facility is not currently using volunteers in facility programs. Should the facility start using volunteers they will need to have an agreement form. Additionally the facility must update their policy and procedure to include required language from 2911 stating that the administrator may discontinue volunteer activity anytime by written notice.

Corrective Actions:

Although the facility is currently not using volunteers, the facility must update their policy and procedure to have the required language from 2911 reflected in their policy stating that the administrator may discontinue a volunteer activity at any time by written notice.

Response Needed By:

5. 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:

The facility has only reported three special incidents in the last seven years. Three of those occurred in November of 2020 and were COVID related.

Corrective Actions:

The facility must review the reporting of unusual occurrences requirements within the rule and report all necessary special incidents to the facility within 10 days of occurrence. Additionally, it is recommended that the facility add attempted suicide to policy as a required reporting of unusual occurrence. The facility should note that any emergent unscheduled medical transport to a facility to receive care regardless of whether it was via ambulance or county vehicle must be reported to the Department of Corrections within 10 days.

Response Needed By:

INSPECTION COMMENTS

The facility is one of the oldest in the state of Minnesota, despite its age it appears to be clean and in working order. As the facility ages it becomes more and more difficult to be compliant with the rules as the physical plant deteriorates and limits the facilities ability to adapt to the needs of its inmates. Currently the facility is undergoing some updates to better meet the requirements of the rule. Inspector has discussed with leadership that even with the most recent updates to the facility, the facility will fail to be complaint with all requirements of the rule and long term solutions should be discussed at a county level.

The facility uses an electronic accounting system for dispensing medication. Additionally, medication is kept in the control room. Dispensing medication and then having to return to the control room to account for medication dispensed could become difficult. It is recommended that the facility invest in a mobile medical cart and electronic device that allows them to dispense medication and log it electronically throughout the facility.

When conducting the inspection, it was found that the facility appears not to have a compliant firearm locker. Currently firearms are brought into the secure perimeter and secured within dispatch. This practice must be discontinued until renovations are complete and it is found that the current locker is compliant and outside of the secure perimeter.

Currently the facility is working out of two procedure manuals. It is recommended that the facility combine the manuals into one and ensure that the policy and procedures put into place become common practice within the facility.

JJDPA Compliance

Compliance Report for the Monitoring Facilities Pursuit to the Juvenile Justice and Delinquency Prevention (JJDP) Act of 2002.

On June 29th 2021, a JJDP Act audit was conducted. The Marshall County Jail has received a "Rural Exception" to the JJDP Act. This allows the facility to hold a delinquent juvenile up to 24 hours, excluding weekends and holidays. The three core requirements that are looked at during the audit are Deinstitutionalization of Status Offenders (DSO), Removal of Juveniles for Adult Jail and Adult Lockups (Jail Removal), and Sight and Sound Separation.

According to the DOC Portal System, the Marshall County Jail held or processed no juveniles during the federal fiscal year 2021. The Marshall County jail does not hold juveniles per their policy.

DSO: No violations of the DSO standard.

Jail Removal: No violations of jail removal requirements.

Sight and Sound Separation: No violations. There is a holding cell that is sight and sound separated.

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

Court Holding - This area is non-secure.

Based on the documentation reviewed, there where zero JJDP Act violations for the Marshall County Jail audit for 2022.

Report completed By: Troy Okerlund – Detention Facility Inspector

Signature:

