



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:

McLeod County Jail

Address: 801 Tenth Street E, Glencoe, MN 55336

MN Governing Rule: 2911 Local Adult Detention Facilities

Inspection Type: Biennial **Inspected By:** Jen Pfeifer – Senior Detention Facility Inspector **Inspected on:** 02/28/2023

Inspection Method: This was an on-site annual inspection. The inspection included a facility tour, staff and inmate interviews, review of documentation, and review of video surveillance.

Officials Present During Inspection: Jail Administrator Will Feltman

Officials Present for Exit Interview: Jail Administrator Will Feltman; Sheriff Tim Langenfeld

Issued Inspection Report to: Jail Administrator Will Feltman; Sheriff Tim Langenfeld; County Administrator Sheila Murphy; District Supervisor Danya 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	126	121	4	1	96.83%	Compliance rating of 100%
2911	Essential	100	97	2	1	98.00%	Compliance rating of 90%

TERMS OF OPERATION

Authority to Operate: approval **Begins On:** 04/01/2023 **Ends On:** 03/31/2025 **Facility Type:** Jail

Placed on Biennial Status: Yes **Biennial Status Annual Compliance Form Due On:** 03/31/2024

Delinquent Juvenile Hold Approval: 24 hrs exclusive of weekends and holidays **Certificate Holder:** McLeod County Sheriff's Office
801 10th Street E
Glencoe, MN 55336

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	59	85	50.15	None.	None.

RULE COMPLIANCE DETAILS

Chapter 2911 - Mandatory Rules Not In Compliance**Total: 4**

1. 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 training plan does not describe curriculum, methods of instruction, or objectives as required by the rule. Additionally, the training plan does not differentiate between those completing orientation or those that have an established service time with the agency.

Corrective Actions:

Create a training plan that encompasses the requirements under the rule. Ensure the plan includes a detailed list of required trainings elements for new correctional officers.

Response Needed By: 04/28/2023

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:

Correctional staff are not receiving training in B, E, and F.

Corrective Actions:

Review the training curriculum to ensure it covers all required elements for medical training. Ensure that all staff are receiving training in recognizing signs and symptoms of medical distress and mental illness.

Response Needed By: 06/30/2023

3. 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:

The policy manual does not specifically address assistance for those inmates who are unable to care for themselves.

Corrective Actions:

Update policy manual to include the requirements in this rule part. Submit update policy to the Department of Corrections by April 1, 2023.

Response Needed By: 04/01/2023

4. 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:

Well-being checks were found to be out of compliance with the 30-minute time frame allowed in the rule. This appears to happen more frequently during meal collection times. This was discussed in detail with the Jail Administrator at the time of the inspection.

Corrective Actions:

The facility must provide all staff with well-being check training. The training must be documented and submitted to the Department of Corrections by April 28, 2023. Additionally, the facility shall address staffing levels during peak times to ensure well-being checks are completed on time.

Response Needed By: 04/28/2023

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

Staff are not receiving the required 16 hours of training each year.

Corrective Actions:

The facility shall provide 16 hours of training each year. Additionally, it is recommended that emergency drills such as person down, serious medical, attempted suicide, inmate death, and the use of the cut down tool be completed as part of the yearly training.

Response Needed By: 07/01/2023

2. 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 does not submit special incidents as required.

Corrective Actions:

The facility administrator shall enter all incidents as required under the rule. All medical incidents shall be submitted from 6 months prior to the inspection. All qualifying incidents shall be submitted into the DOC Portal for review.

Response Needed By: 04/29/2023

Chapter 2911 - Mandatory Rules In Compliance With Concerns

Total: 1

1. 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 utilizes the LexiPol policy manual which includes additional policies that do not reflect operational procedures in the jail.

Corrective Actions:

This concern was addressed in the last inspection. The Jail Administrator shall review the policy manual and ensure that all current policies are consistent with actual practice in the jail. Submit updated policy manual to the Department of Corrections by September 1, 2023.

Response Needed By:

Chapter 2911 - Essential Rules In Compliance With Concerns

Total: 1

1. 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 volunteer agreement does not include item E in the rule. There is no statement in the volunteer contract that the administrator may discontinue a volunteer activity at any time by written notice.

Corrective Actions:

Item E should be added to the volunteer contract. Submit to the Department of Corrections for review by April 28, 2023.

Response Needed By:

INSPECTION COMMENTS**COMMENTS:**

Staffing: The facility shall complete a staffing plan and submit to the Department of Corrections for review by May 1, 2023.

Physical Plant: The locks in the original area of the jail require correctional staff to carry multiple rings of keys for each individual unit. Staff also have to return to master control to exchange keys which appears to be cumbersome and inefficient and may cause safety concerns should an incident arise.

Well-being checks are being completed through an adjacent plumbing chase. The lighting in this area is insufficient to see in the inmate cells and is not electronically monitored. Well-being checks shall be conducted from the housing unit areas where officers can fully view inmates.

Medical: Medical staff were unaware of the requirements of pregnancy testing for female inmates. The specifics of the statute were discussed in detail at the time of the inspection.

The facility will remain on biennial inspections.

JJDPA Compliance**Juvenile Compliance Monitoring:**

On February 28th, 2023, a Juvenile Justice and Delinquency Prevention Act audit was conducted. The McLeod 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 DOC Portal System, the McLeod County Jail held or processed zero (0) juveniles for the Federal Fiscal year 2023. I reviewed approximately 100 percent of the juvenile data for this time period, and approximately 100 percent of the files. The findings are as follows:

DSO: There were no violation of the DSO requirements.

Jail Removal: According to data, all youth were removed within the 24-hour time frame as required by the JJDP Act.

Sight and Sound Separation: The facility design and policies allow for proper sight and sound separation. This includes the route taken to Court holding. Policies and the court schedule also indicate proper sight and sound separation are maintained. This was verified on previous visits.

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

Based on the documentation that I reviewed, there were no violations of the JJDP act based on the McLeod County juvenile holding data for the current Federal Fiscal year.

Report completed By: Jen Pfeifer – Senior Detention Facility Inspector

Signature:

