



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
Telephone: 651-361-7146 Fax: 651-642-0314 Email: ie-support.doc@state.mn.us

INSPECTION DETAILS FOR:

Nexus-Mille Lacs Family Healing, Andover GH

Address: 3290 165th Lane, Andover, MN 55304

MN Governing Rule: 2960 Children's Residential Facility

Inspection Type: Biennial **Inspected By:** Lisa Becking – Senior Detention Facility Inspector **Inspected on:** 05/26/2021

Inspection Method: This inspection consisted of a physical plant tour, interviews with staff and residents, review of employee files, review of resident files, review of policy and procedures, review of grievances and a review of employee training.

Officials Present During Inspection: Administrative Director Shannon Amundson; Director Angela Decheine

Officials Present for Exit Interview: Administrative Director Shannon Amundson; Director Angela Decheine

Issued Inspection Report to: Administrative Director Shannon Amundson; Director Angela Decheine; Regional Manager Jacob McLellan

RULE COMPLIANCE SUMMARY

Rule Chapter	Requirement Type	Total Applicable	Total Compliance	Total Non Compliance
2960	Mandatory	316	313	2

TERMS OF OPERATION

Authority to Operate: approval **Begins On:** 06/01/2021 **Ends On:** 05/31/2023 **Facility Type:** Non-Secure Juvenile Residential Facility

Placed on Biennial Status: Yes **Biennial Status Annual Compliance Form Due On:** 05/31/2022

Delinquent Juvenile Hold Approval: **Certificate Holder:** Nexus
312 Elm Street S
Onamia, MN 56359

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	Pre 96 LTSR	Post 96 LTSR	Bed Details	Conditions
Non-secure residential	Female	14	100	14.00	0	0	None.	None.

RULE COMPLIANCE DETAILS

Chapter 2960 - Mandatory Rules Not In Compliance**Total: 2**

1. 2960.0080 FACILITY OPERATIONAL SERVICES, POLICIES, AND PRACTICES. Subpart 10. Exercise and recreation.

The license holder must develop and implement a plan that offers appropriate recreation for residents.

Inspection Findings:

Facility recreation plan fails to provide large muscle and leisure activity options. Documentation that recreation plan is followed is limited.

Corrective Actions:

Create a monthly recreation plan with daily recreation and leisure activities as part of the daily schedule. Assure staff are documenting when said recreation plan is followed and when alternative activities not set in the plan where implemented instead and why the change occurred.

Response Needed By: 07/30/2021

2. 2960.0080 FACILITY OPERATIONAL SERVICES, POLICIES, AND PRACTICES. Subpart 12. Food and nutrition.

The license holder must provide: A. a balanced diet consisting of foods and beverages that are palatable, of adequate quantity and variety, and prepared and served at appropriate temperatures to protect residents from foodborne illness and conserve nutritional value; B. a diet medically prescribed, if ordered by a resident's physician or, in the case of a pregnant resident, recommended or ordered by a prenatal care provider; and C. a diet that does not conflict with the resident's religious or cultural dietary regimen.

Inspection Findings:

The current menu has not been approved by a dietician.

Corrective Actions:

Provide monthly menus that have been approved by a dietician.

Response Needed By: 07/30/2021**Chapter 2960 - Mandatory Rules In Compliance With Concerns****Total: 1**

1. 2960.0570 FACILITY OPERATIONAL POLICIES AND PROCEDURES. Subpart 3. security policies and procedures.

The license holder must have security policies and procedures that include the topics in items A to K: A. control and recovery of contraband; B. delivery and service procedure; C. prohibition of firearms and other weapons in resident areas; D. search procedures; E. escort of residents outside security area; F. one half hour interval security inspection routines when residents are not under direct supervision; G. lock and key procedures; H. inspection of physical plant procedures; I. count procedures; J. weapons, tools, equipment, medications, and hazardous substances; and K. use of chemical irritants.

Inspection Findings:

Due to the change in operational structure, the security policies and procedures need to be reviewed and updated in the areas of: A. control and recovery of contraband; G. lock and key procedures; H. inspection of physical plant procedures; I. count procedures; J. weapons, tools, equipment, medications, and hazardous substances;

Corrective Actions:

Please update the policies as indicated above and forward to MN DOC inspector for approval no later than 07-30-2021.

Response Needed By:

INSPECTION COMMENTS

The Nexus-Mille Lacs Family Healing Girls Home located in Andover, MN, participated in the biennial inspection on May 26, 2021, using Minnesota Rules, Chapter 2960, governing juvenile residential facilities. Sections of the 2960 standards that are applicable to this facility include: Administrative Standards, Group Residential, and Corrections. This facility does not use Restrictive Procedures. Inspection results are contained in the various sections of this report.

This inspection visit consisted of a physical plant inspection, including the intake area, all resident living areas including all resident bedrooms and bathrooms. The inspection also included discussions with administration and staff members, review of staff personnel and training files, school distance learning schedule for all residents, resident files, review of daily logs, menus, resident rights, and other pertinent documentation.

This facility was purchased and taken over by Nexus Inc. in January, 2021. It was previously a residential program operated with a parent model. The change in operations has, for the most part been a smooth transition.

The following comments and concerns are a result of the inspection. While these are not specific rule violations, these are areas that provided constructive feedback to help address potential facility issues.

Comments:

1. The facility response to COVID-19 follows CDC guidelines and included masks for residents and staff, and ample amounts of hand sanitizer for all residents, staff and visitors prior to entering the facility.
2. The cleanliness and condition of the house was exceptional. Staff and residents take pride in their facility/home.
3. Increased use in the number of and length of phone calls between residents and parents/guardians.

Concerns:

1. The gas/open flame stove top is a concern for this facility. It is strongly recommended that the administration consider an electric alternative.

I would like to sincerely thank you and your team for your cooperation during this licensing visit.

Please contact me if you have any questions regarding this report or any licensing concerns at 507-382-9791.

JJDPA Compliance

This is a nonsecure facility.

Report completed By: Lisa Becking – Senior Detention Facility Inspector

Signature: _____

