



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:

Norman County Jail

Address: 15 Second Avenue E, Ada, MN 56510

MN Governing Rule: 2911 Local Adult Detention Facilities

Inspection Type: Annual **Inspected By:** Jen Pfeifer – Senior Detention Facility Inspector **Inspected on:** 07/25/2023

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

Officials Present During Inspection: Administrator Carolyn Visser; Sheriff Ben Fall

Officials Present for Exit Interview: Administrator Carolyn Visser; Sheriff Ben Fall

Issued Inspection Report to: Administrator Carolyn Visser; Sheriff Ben Fall; County Administrator LeeAnn Hall; Regional Manager Jacob McLellan

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	122	103	18	1	85.25%	Compliance rating of 100%
2911	Essential	82	66	12	4	85.37%	Compliance rating of 90%

TERMS OF OPERATION

Authority to Operate: approval **Begins On:** 09/01/2023 **Ends On:** 08/31/2024 **Facility Type:** 72 Hour Holding

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

Delinquent Juvenile Hold Approval: no approval **Certificate Holder:** Norman 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	2	100	2.00	Two cells with one bunk in each cell - 07-07-2017.	7/25/23-No approval to house until corrective actions are complete, and facility is making substantial progress towards compliance.

RULE COMPLIANCE DETAILS

Chapter 2911 - Mandatory Rules Not In Compliance**Total: 18****1. 2911.0900 STAFFING REQUIREMENTS. Subpart 1. Staffing plan and staffing analysis.**

The facility administrator shall prepare and retain a staffing plan. The staffing plan shall identify: A. jail personnel assignments for: (1) facility administration and supervisors; (2) facility programs including exercise and recreation; (3) inmate admission, booking, supervision, and custody; (4) support services including medical, food services, maintenance, and clerical; and (5) other jail-relevant functions such as escort and transportation of inmates; B. the days of the week that the assignments are filled; C. the hours of the day that the assignments are covered; and D. any deviations from the plan with respect to weekends, holidays, or other atypical situations must be considered. The facility administrator or designee shall review the facility's staffing plan at least once each year. The review shall be documented in written form sufficient to indicate that staffing plans have been reviewed and revised as appropriate to the facility's needs or referred to the facility' governing body for funding consideration. A facility with a design capacity of more than 60 beds must have a staffing analysis and staffing plan approved by the commissioner of corrections. This staffing analysis shall include all posts, functions, net annual work hours appropriate to each post, and total number of employees to fill the identified posts and functions.

Inspection Findings:

The facility does not have a staffing plan.

Corrective Actions:

The Jail Administrator (JA) or Sheriff need to create a staffing plan as required in the rule. Once the plan is complete it must be submitted to the DOC for review.

Response Needed By:**2. 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 facility did not provide the inspector with an annual training plan. The rule requires the annual plan to include the description of the training, method of instruction (classroom, online, reading), and objective.

Corrective Actions:

The facility will need to create an annual training plan to include these elements. The updated training plan needs to be submitted to the DOC for review.

Response Needed By: 09/01/2023**3. 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:

The facility's policy is missing several elements of this rule, the missing elements are B, D, E, and F.

Corrective Actions:

These elements of the rule are required and must be added to policy. Once added to policy, the JA or Sheriff should review training records to make sure that the facility is meeting the training requirements under this rule. Once the policy is updated it must be submitted to DOC along with proof of plan that this training will be completed.

Response Needed By: 12/29/2023**4. 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:

No documentation was provided at the time of the inspection that the policy manual was reviewed and signed off by the Sheriff and Jail Administrator. Additionally, the policy manual is in need of updates. The facility's policy manual uses the 2911 rule numbers as their policy chapter numbers, this makes it easy for reference. There are several locations where policy doesn't match 2911 or where required elements in the 2911 rule are missing from policy.

Corrective Actions:

It is recommended that the Jail Administrator and/or Sheriff go through the policy manual and the 2911 Rules to make sure that all required elements are in policy and that policy numbers and information are up-to-date.

Response Needed By: 12/29/2023**5. 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 current classification plan doesn't take all elements of the rule into account. The policy also needs to be modified to meet all elements of the rule. This was pointed out in the last inspection.

Corrective Actions:

The Jail Administrator or Sheriff need to create a new plan for classification, policies also need to be adjusted to make sure all elements of the rule are in policy. The facility is interested in Northpointe, the inspector will obtain a copy of it for them.

Response Needed By: 10/01/2023**6. 2911.3700 EMERGENCIES AND UNUSUAL OCCURRENCES. Subpart 1. Emergency plan.**

A facility shall have a written disaster plan. The plan shall include policies and procedures designed to protect the public by securely detaining inmates who represent a danger to the community or to themselves when the facility must be evacuated in total. The plan shall also include: A. location of alarms and fire fighting equipment; B. an emergency drill policy as follows: (1) at least annual drills at all facility locations; and (2) drills shall be conducted even when evacuation of extremely dangerous inmates may not be included; C. specific assignments and tasks for personnel; D. persons and emergency departments to be notified; E. procedure for evacuation of inmates; and F. arrangements for temporary confinement of inmates.

Inspection Findings:

The facility has not conducted an annual evacuation drill as required in the rule.

Corrective Actions:

The facility needs to complete an annual evacuation drill and all staff should be included in this procedure. This drill must be completed even if inmates are not currently in custody. Once completed, submit documentation to the Department of Corrections for review.

Response Needed By: 12/29/2023

7. 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:

No documentation was provided to the inspector of quarterly emergency procedures being reviewed.

Corrective Actions:

All emergency procedures shall be reviewed quarterly and documented. Submit documentation of quarter three and four reviews to the inspector for approval by December 29, 2023.

Response Needed By: 12/29/2023

8. 2911.3700 EMERGENCIES AND UNUSUAL OCCURRENCES. Subpart 5. Inmate death.

A facility shall have a written policy and procedure that specifies actions to be taken in the event of an inmate death. When an inmate death occurs: A. the date, time, and circumstances of the inmate's death shall be recorded in the inmate's record; B. if the inmate dies in the facility, the coroner or medical examiner's office shall be notified; C. personal belongings shall be handled in a responsible and legal manner; D. records of a deceased inmate shall be retained for a period of time specified by county policy; E. the facility administrator or designee shall ensure observance of all pertinent laws and allow appropriate investigating authorities full access to all facts surrounding the death; and F. in the event the death involves a "vulnerable adult" notification procedures shall be followed in a manner consistent with statutory requirements.

Inspection Findings:

The facility has a policy that addresses this rule, however it does not address all of the elements of the rule as required. The facility's policy is missing elements D, E, and F.

Corrective Actions:

The Jail Administrator or Sheriff must review policy and update it to include all the elements of the rule. Submit to the Department of Corrections for review.

Response Needed By: 10/01/2023

9. 2911.3800 FOOD HANDLING PRACTICES.

Food service shall be provided according to Minnesota Department of Health rules.

Inspection Findings:

The facility does not currently have any one that is certified as a Minnesota Certified Food Protection Manager (CFPM).

Corrective Actions:

The facility needs to obtain this certification in order to prepare meals. The Jail Administrator or Sheriff must obtain certification under CFPM for the facility.

Response Needed By:

10. 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:

There was no menu review documented by a dietician.

Corrective Actions:

Obtain and document an approval letter from a dietician. Submit to the Department of Corrections by October 1, 2023.

Response Needed By: 10/01/2023

11. 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:

The facility does have a policy that addressed this rule, it is numbered 2911.5700, however it does not have all elements of the rule.

Corrective Actions:

The Jail Administrator or Sheriff must review the policy and modify it to meet all elements of the rule, once that is completed all staff must review the policy.

Response Needed By: 12/29/2023

12. 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:

Lock Inspections have not been completed weekly as required.

Corrective Actions:

Lock inspections shall be completed weekly. Each lock shall be listed individually and tested. Documentation shall be maintained and submitted to the inspector monthly beginning September 1, 2023.

Response Needed By: 09/01/2023

13. 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:

No documentation was provided of signed health care policies.

Corrective Actions:

Health care policies shall be reviewed and signed off by the medical authority. Submit to the Department of Corrections by September 1, 2023.

Response Needed By: 09/01/2023

14. 2911.5800 AVAILABILITY OF MEDICAL AND DENTAL RESOURCES. Subpart 8. Health complaints.

A facility shall develop a written policy and procedure that requires that inmates' health complaints are acted upon daily by health-trained staff, followed by triage and treatment by health care personnel if indicated.

Inspection Findings:

Currently jailer/dispatchers are collecting health complaints from the inmates, policy states that they are to set up a medical appointment if necessary. This means that jailer/dispatchers are making medical decisions as to whether a medical appointment or follow-up is needed.

Corrective Actions:

The public health RN should be more involved in this process, staff could still collect the health complaints but they should be forwarded to the public health RN for review and the RN will determine the next appropriate steps. Policies and procedures must be updated to follow the rule.

Response Needed By: 12/01/2023

15. 2911.6600 DELIVERY. Subpart 11. No medication deprivation punishment.

An inmate shall not be deprived of medication as a means of punishment.

Inspection Findings:

There is not a policy that addresses this rule.

Corrective Actions:

The Jail Administrator or Sheriff must update policy to address this rule.

Response Needed By: 12/01/2023

16. 2911.7100 INMATES WITH SPECIAL NEEDS. Subpart 1. Postadmission screening.

The facility written policy and procedure shall require postadmission screening and referral for care of inmates with special needs, whose adaptation to the correctional environment is significantly impaired.

Inspection Findings:

Policy contradicts whether these individuals will be housed in Norman County, under the classification section they will be housed in Northwest Regional Corrections Center (NWRCC) but under 2911.7100 they may be housed in Norman County.

Corrective Actions:

This policy should be reviewed to determine if these individuals will be housed in Norman County or in NWRCC.

Response Needed By: 12/01/2023

17. 2911.7100 INMATES WITH SPECIAL NEEDS. Subpart 3. Management of inmates.

A policy and procedure shall be developed for the management of inmates with special needs and shall include: A. procedures that require referral for emergency admission under Minnesota Statutes, chapter 253B, of persons considered to be mentally ill or developmentally disabled, and in imminent danger of injuring self or others if not immediately restrained; and B. procedures for accessing and using emergency services according to Minnesota Statutes, chapter 253B, for adults who are experiencing an emotional crisis or mental illness.

Inspection Findings:

This section is not clearly addressed in policy and is missing elements of the rule.

Corrective Actions:

The Jail Administrator or Sheriff must review this rule and policy, it should be updated to meet all elements of the rule.

Response Needed By: 12/01/2023

18. 2911.7300 FIRE INSPECTION. Subpart 1. Annual inspection.

Each facility shall be policy require that a fire inspection of the facility must be conducted in accordance with the applicable fire code on an annual basis by a state fire marshal or local fire official.

Inspection Findings:

Annual fire inspection documentation was not provided to the inspector at the time of the inspection.

Corrective Actions:

Obtain an updated fire inspection and submit to the Department of Corrections.

Response Needed By: 09/01/2023**Chapter 2911 - Essential Rules Not In Compliance****Total: 12**

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:

The facility was unable to produce any training records at the time of the inspection and tracks them for each year.

Additionally, the facility's policy does not include all elements of the rule as required. The policy is missing elements D, M, and N.

Corrective Actions:

The facility needs to create a form or process that tracks each staff members completed training for each year. This will allow the facility and the inspector to easily determine who needs or has met the required training.

The JA or Sheriff needs to review policy and address the required missing elements of this rule. Once update, staff should review the policy.

Response Needed By: 12/29/2023

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:

Currently if an individual is accused of violating a rule, they are automatically sent back to NWRCC. The facility is not following the elements of this rule or their own policy.

Corrective Actions:

The Jail Administrator or Sheriff need to create a plan to follow the rule and their policy. Once this plan is created it must be submitted to DOC for review.

Response Needed By: 10/01/2023

3. 2911.2850 INMATE DISCIPLINE PLAN. Subpart 4. Other limitations on disciplinary actions.

A facility shall have written policy, procedure, and practice that provides that whenever an inmate in segregation is deprived of any usually authorized item or activity, a report of the action is made and forwarded to the facility administrator.

Inspection Findings:

The facility doesn't have a policy that addresses this rule.

Corrective Actions:

Even though the facility is unlikely to house individuals on disciplinary sanctions, it should have a policy that addresses this rule.

Response Needed By: 10/01/2023

4. 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:

This is addressed in another rule part.

Corrective Actions:

Please see previously ordered corrective action for this rule.

Response Needed By: 10/01/2023

5. 2911.3100 INMATE ACTIVITIES AND PROGRAMS. Subpart 5. Substance abuse programs.

A facility shall have a written plan for providing services for inmate chemical dependency issues.

Inspection Findings:

The facility's policy states that AA is conducted every month at the facility, in speaking to the JA this is not the case.

Corrective Actions:

The facility should locate resources in the community to either provide this function at the facility or in the community to allow those on work release to attend. The facility should provide that information to all inmates.

Additionally the facility should update it's policies on programming.

Response Needed By: 10/01/2023

6. 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's policy address what occurrences are required to be reported as outlined in this rule. However, the policy is missing some of the elements of this rule, specifically elements A, F, K, L, N, O, and P are not included in the policy.

Corrective Actions:

The JA or Sheriff must review this policy and make sure that all elements of the rule are included in this policy.

Response Needed By: 10/01/2023

7. 2911.4900 SECURITY INSPECTION.

The facility shall have a written policy and procedure to require the facility administrator or designee to inspect all areas within the security perimeter, and equipment at least monthly and initiate corrective action if needed.

Inspection Findings:

No documentation of a security inspection was provided to the inspector.

Corrective Actions:

The facility shall ensure that all security equipment is in working order and that documented security inspections are being completed monthly. Submit monthly inspections to the inspector for review beginning October 1, 2023.

Response Needed By: 10/01/2023

8. 2911.4950 RESPONSE TO RESISTANCE. Subpart 1. Policies and procedures.

The facility administrator or designee shall have written policies and procedures to provide for response to resistance. All personnel directly involved in the response shall submit written reports to the facility administrator or designee no later than the conclusion of the shift. Submission of these reports may be delayed when a staff member, sustains serious injury, hospitalization, or both.

Inspection Findings:

Jail/dispatchers are not allowed to go hands-on and are to have no inmate contact. Back up resources from the county or outside agency would be required to handle any response to resistance incident.

Corrective Actions:

All staff shall be trained in response to resistance regardless of what policy allows. Current policy should also be updated to reflect the requirements in the rule.

Response Needed By: 12/01/2023

9. 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 facility does have post orders, however they have not been signed off on by all staff.

Corrective Actions:

The post orders must be reviewed annual by the Jail Administrator or Sheriff. Additionally all staff must review post orders annual and/or when modified. The facility must create a sign-off form that all staff sign acknowledging that they have completed the post order review.

Response Needed By: 09/01/2023

10. 2911.5800 AVAILABILITY OF MEDICAL AND DENTAL RESOURCES. Subpart 9. Sick call.

A facility shall develop a written policy and procedure that requires that there is a continuous response to health care requests and that sick call, conducted by a physician or other health care personnel is available to each inmate as follows: A. In small facilities of less than 60 inmates, sick call is held once per week at a minimum; B. in medium sized facilities of 60 to 200 inmates, sick call is held at least three days per week; C. in facilities of over 200 inmates, sick call is held a minimum of five days per week; and D. if an inmate's custody status precludes attendance at sick call, arrangements are made to provide sick call services in the place of the inmate's detention.

Inspection Findings:

No inmates have been housed in the jail since 2021.

Corrective Actions:

This will need to be addressed when the facility begins housing inmates.

Response Needed By:

11. 2911.6200 MEDICAL AND DENTAL RECORDS. Subpart 3. Available information.

Medical record file information available to health-trained staff and custody personnel shall minimally include summary medical information provided by the health authority or health care personnel that ensures sufficient detail to allow health-trained staff persons or other custody personnel to ensure medical care of inmates in their custody in a manner consistent with that prescribed by the responsible physician or health care personnel.

Inspection Findings:

The facility has a policy that addresses this rule, however it does not address all elements of the rule.

Corrective Actions:

The Jail Administrator or the Sheriff must update policy to include all elements of this rule.

Response Needed By: 12/01/2023

12. 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:

Weekly fire inspections are not being completed.

Corrective Actions:**Submit documentation of weekly fire inspections monthly until further notice for approval beginning September 1, 2023****Response Needed By: 09/01/2023****Chapter 2911 - Mandatory Rules In Compliance With Concerns****Total: 1**

1. 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:

Facility policy and procedure allows for a fifteen-minute visit which is not consistent with the requirements in the rule.

Corrective Actions:**Current policy shall be updated to allow for 20-minute visits in the facility.****Response Needed By:****Chapter 2911 - Essential Rules In Compliance With Concerns****Total: 4**

1. 2911.0900 STAFFING REQUIREMENTS. Subpart 14. Backup resource assistance.

In facilities that use the dispatcher or custody position as sole supervision, policy and procedures shall be implemented that assure a reasonable level of security and backup resource assistance for the dispatcher or custody person in circumstances that require emergency response assistance. The DOC shall review and approve the policy and procedures.

Inspection Findings:

Deputies and ADA PD on duty will provide backup to the facility. From approximately 3:00 am to 8:00 am there is not a deputy on duty, but they are on-call and will provide backup as needed.

Corrective Actions:**This information should be added to policy.****Response Needed By:**

2. 2911.0900 STAFFING REQUIREMENTS. Subpart 19. Class I exemptions.

Class I facilities are exempt from the requirement in subpart 18, except those facilities approved by the commissioner to house inmates serving alternative sentences.

Inspection Findings:

The facility does not provide programs within the facility. However they allow individuals to attend programs within the community.

Corrective Actions:

Since the facility allows individuals to attend programs within the community, they should put together a list of available programs in the community for individuals to attend. This list should include programs such as religious services, substance abuse such as NA and AA, and educational programming, the list should also include the day of the week and time the programs are available.

Response Needed By:

3. 2911.1400 ADMINISTRATIVE AND MANAGERIAL STAFF TRAINING.

A facility shall have a written policy and procedure that provides that the facility's administrative and managerial staff receive at least 16 hours of orientation. Orientation training shall include, at a minimum, general management and related subjects, data practices, decision-making processes, labor law, employee-management relations, the interaction of elements of the criminal justice system, and relationships with other service agencies. After orientation, a facility's administrative and managerial staff shall receive at least 16 hours of training annually.

Inspection Findings:

Policy is missing one element that is required in this rule, the policy is missing training on Data Practices for administrative or managerial staff.

Corrective Actions:

The policy must be updated to include the data practice training. The JA or Sheriff must review training records to make sure that this training has been completed.

Response Needed By:

4. 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:

Since the facility does house alternative sentences, such as work release, they are required to provide programming. The facility allows those on work release to attend programs in the community.

Corrective Actions:

Since the facility is allowing inmates to attend programs in the community, they should be providing a list of what programs are available with dates, times, and locations to attend. It should include at a minimum religious programs such as church services and bible study, substance abuse such as NA or AA, and educational services. This was discussed with the JA at the time of the inspection.

Response Needed By:

INSPECTION COMMENTS

An inspection of the Norman County Jail was completed on July 25, 2023. Carolyn Visser is the new Jail Administrator and at time of the inspection had been in the role for approximately three weeks.

Policy: The policy manual is in need of significant updates. The policy manual does not contain all required elements of the rules as required. Additionally, some of the facilities policy numbers do not accurately reflect the correct rule number. New required statute requirements shall also be added to update the manual.

Physical Plant: The facility is small and showing significant signs of age. The jail contains 2 cells with a small dayroom space. This space includes a TV, shower, phone, and table. The phone system is not ideal for the facility, the phone calls to the dispatch center and the inmate must ask the jailer/dispatcher to place a call. When the call is made it is transferred into the dayroom for the inmate to answer. The facility should consider an alternative solution. Additionally, inmate visitations are done through the phone in the dayroom and the visitor sits at a phone located at the dayroom door.

The facility updated its video camera system.

Medical: The facility uses public health as it's health authority. However, the use of public health is limited to setting up medications, reviewing annual policies, and providing training. The facility shall utilize public health to review medical screenings, health complaints, conduct sick call, and set up medical appointments as necessary. Currently many of these responsibilities are performed by the jailer/dispatcher staff and does not meet the requirements of the rule. The JA or Sheriff must work with public health to ensure these services are being addressed. Facility policy shall be updated to reflect these changes. Once these changes have occurred, they must be submitted to DOC for review. The facility is not using the mental health screen approved by the Commissioner of Corrections which is required by statute. The facility must discontinue use of the current screen and begin using the Brief Mental Health Screen as required.

Hardel Sherrell Act: The facility shall review the Hardel Sherrell Act (241.021) and make the required changes in policy. The areas include:

- Death Notification to the MN DOC 241.021 Subd 1;
- Death Review Team 241.021 Subd. 8;
- Deadly Use of Force, to include choke holds and prone restraint 243.52 Subd. 2;
- Duty to Report Excessive Use of Force or Neglect 243.52 Subd. 3;
- In-take Release of Information form.

The facility will move to an annual inspection to verify compliance with the rules. Additionally, the Department will make regular visits to the facility to ensure substantial progress is being made towards compliance.

Many of the discrepancies addressed in the inspection have been addressed multiple times with the facility.

JJDPA Compliance

On July 25, 2023, a Juvenile Justice and Delinquency Prevention Act audit was conducted. The Norman County Jail does not have the authority to hold juveniles as they do not have the ability to sight and sound separate. The Norman County Jail did not hold any juveniles in this period.

Report completed By: Jen Pfeifer – Senior Detention Facility Inspector

Signature:

