



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

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

#### North Homes Boys TNT

**Address:** 916 NW 20th Drive, Grand Rapids, MN 55744

**MN Governing Rule:** 2960 Children's Residential Facility

**Inspection Type:** Biennial **Inspected By:** Monaie Hebert – Detention Facility Inspector **Inspected on:** 10/20/2021 to 10/22/2021

**Inspection Method:** Sections of Chapter 2960 standards that are applicable to the Teens in Transition Program include: Administrative Standards, Group Residential, Corrections, and Restrictive Procedures certifications. Licensing and inspection results are contained in the various sections of this report.

The licensing/inspection visit consisted of a tour of the Teens in Transition building, discussions with administration and staff members, review of staff files, review of resident files, a review of DRT, grievance and restrictive procedure documentation and interviews with residents.

**Officials Present During Inspection:** Quality Assurance Director Suzette Mallum

**Officials Present for Exit Interview:** Quality Assurance Director Suzette Mallum

**Issued Inspection Report to:** CEO Jim Christmas; Quality Assurance Director Suzette Mallum; Regional Manager Jacob McLellan

### RULE COMPLIANCE SUMMARY

Rule Chapter	Requirement Type	Total Applicable	Total Compliance	Total Non Compliance
2960	Mandatory	316	313	1

### TERMS OF OPERATION

**Authority to Operate:** approval **Begins On:** 11/01/2021 **Ends On:** 10/31/2023 **Facility Type:** Non-Secure Juvenile Residential Facility

**Placed on Biennial Status:** Yes **Biennial Status Annual Compliance Form Due On:** 10/31/2022

**Delinquent Juvenile Hold Approval:** **Certificate Holder:** North Homes, Inc.  
303 SE First Street  
Grand Rapids, MN 55744

**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	Male	10	100	10.00	0	0	None.	Ages 10 thru 21.

### RULE COMPLIANCE DETAILS

**Chapter 2960 - Mandatory Rules Not In Compliance****Total: 1**

1. 2960.0270 FACILITY OPERATIONAL POLICIES AND PROCEDURE REQUIREMENTS, SERVICES, AND PROGRAMS. Subpart 14.A.. Housekeeping, sanitation, and plant maintenance.

The license holder must meet the requirements of items A to C. A. The facility and all buildings, structures, or enclosures used by the facility, including walls, floors, ceilings, registers, fixtures, equipment, and furnishings, must be kept in good repair and maintained to protect the health, comfort, safety, and well being of residents and staff.

**Inspection Findings:**

A physical plant tour revealed areas in which air vents were dirty/dusty, bathrooms needed deep cleaning, carpeting was ripped, one bedroom had a pungent odor, the laundry room had built up dirt on the floor and in corners and vents. There were cardboard boxes and other flammable items next to the furnace. There was a dark shower area in which the lightbulb was noted to be out since September 2021.

**Corrective Actions:**

**Cleaning and maintenance tasks should be monitored closely by administration. The room in the lower level that houses the furnace should be cleaned in order to clear the furnace area of flammable items. Address odors that do not appear to be associated with daily living. The lightbulb and some other minor issues were corrected prior to completion of the inspection. There are cleaning logs, however some items are noted and not resolved for significant periods of time. The carpet is on the items to be replaced in 2022.**

**Response Needed By: 12/24/2021****Chapter 2960 - Mandatory Rules In Compliance With Concerns****Total: 2**

1. 2960.0270 FACILITY OPERATIONAL POLICIES AND PROCEDURE REQUIREMENTS, SERVICES, AND PROGRAMS. Subpart 14.B.. Housekeeping, sanitation, and plant maintenance.

The license holder must meet the requirements of items A to C. B. The license holder must have and implement a written plan to inspect and document daily housekeeping, sanitation, and plant maintenance needs in the occupied parts of the facility.

**Inspection Findings:**

There is a plan and a checklist was created in February of 2021 due to ongoing cleanliness concerns. However, some minor items on the checklist that can be resolved by staff were not handled within a reasonable amount of time. Logs addressed areas of concern for cleanliness/maintenance, however remained unresolved at the time of the inspection.

**Corrective Actions:**

**Consider a supervisor review weekly of both maintenance and housekeeping logs. This should include a physical inspection and a review of maintenance items.**

**Response Needed By:**

2. 2960.0560 PERSONNEL STANDARDS. Subpart 5. Individual staff development and evaluation plan.

The license holder must ensure that an annual individual staff development and evaluation plan is developed and implemented for each person who provides, supervises, or directly administers correctional program services. The plan must: A. be developed within 90 days after the person begins employment and at least annually thereafter; B. meet the staff development needs specified in the person's annual employee evaluation; and C. ensure that an employee who provides, supervises, or directly administers program services has sufficient training to be competent to deliver the correctional services assigned to the employee.

**Inspection Findings:**

A review of personnel records revealed that many staff annual evaluations were not accessible due to a change and transition to a new computer system. Indications are that the records exist and will be available in the future. New employees, onboarded after the system change had complete records.

**Corrective Actions:**

**Ensure that all staff evaluations are available for inspector review at the time of the inspection. Please provide this information to be in compliance with this rule part.**

**Response Needed By:**

**INSPECTION COMMENTS**

The North Homes TNT Program biennial inspection visit was completed on October 20-22, 2021, using Minnesota Rules, Chapter 2960, governing juvenile residential facilities. Sections of the 2960 standards that are applicable to the programs at this facility include: Administrative, Group Residential, Corrections and Restrictive Procedures.

This scheduled inspection visit consisted of a physical plant safety and security inspection. The physical plant inspection included all resident living areas, office areas, visiting areas and outdoor areas of the home.

The inspection also included discussions with staff, direct care staff, nursing staff and administration, as well as discussions with residents and observation of staff interactions with residents. Documentation review included staff personal and training files, resident files, daily logs, treatment plans, menus, recreation schedules, grievance documentation, well-being checks and other pertinent facility documentation. There was also a review of the facility policy and procedure manual, resident handbook and overviews of the program components.

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

1) The facility response to COVID 19 has been good. Staff wear masks and have adequate PPE. There is adequate space to quarantine residents when necessary. They are following CDC guidelines.

2) Residents indicate they feel safe and that staff is respectful and responsive.

Concerns not noted in inspection:

1) Consider revising the facility Due Process form to indicate that a refusal to sign the document and state a position, will not be considered a request for a hearing. A hearing will only be initiated if the resident signs the form and requests a hearing. This does not deviate from current practice, the addition would simply further inform the resident.

I would like to thank you and your staff for the cooperation and assistance during this licensing process. Please contact me if you have any questions regarding this report or any other licensing matter. You can reach me at (651)261-1657.

**JJDP A Compliance**

This is a nonsecure facility.

Report completed By: Monaie Hebert – Detention Facility Inspector

Signature:

Monaie Hebert