



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:

Otter Tail County Jail

Address: 416 S Mill Street, Fergus Falls, MN 56537

MN Governing Rule: 2911 Local Adult Detention Facilities

Inspection Type: Biennial **Inspected By:** Justin Roberts – Detention Facility Inspector **Inspected on:** 12/08/2022

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

Officials Present During Inspection: Jail Administrator Beth Carlson

Officials Present for Exit Interview: Jail Administrator Beth Carlson

Issued Inspection Report to: Jail Administrator Beth Carlson; Sheriff Barry Fitzgibbons; County Administrator Nichole Hansen; 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	127	119	3	5	97.64%	Compliance rating of 100%
2911	Essential	100	99	0	1	100.00%	Compliance rating of 90%

TERMS OF OPERATION

Authority to Operate: approval **Begins On:** 01/01/2023 **Ends On:** 12/31/2024 **Facility Type:** Jail
Placed on Biennial Status: Yes **Biennial Status Annual Compliance Form Due On:** 12/31/2023
Delinquent Juvenile Hold Approval: 24 hrs exclusive of weekends and holidays **Certificate Holder:** Otter Tail 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	111	90	99.90	None.	None.

RULE COMPLIANCE DETAILS

Chapter 2911 - Mandatory Rules Not In Compliance

Total: 3

- 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:

During policy review it was discovered that the facility's policy does not include all elements of the rule as required. Specifically, the facility's policy is missing elements A, K, and L of the rule.

Corrective Actions:

The Jail Administrator or designee must review the facility's policy and add the missing elements to the policy. Once completed it must be submitted to DOC for review.

Response Needed By: 02/28/2023

2. 2911.2525 ADMISSIONS. Subpart 3. Orientation to rules and services.

A facility shall develop a written policy and procedure that provides: A. a method for all newly admitted inmates to receive orientation information in a manner the inmates can understand; and B. documentation by a statement that is signed and dated by the inmate that the inmate completed orientation.

Inspection Findings:

The facility currently uses Turnkey kiosks to provide orientation to inmates. However, the Turnkey kiosks are not available to all inmates, this means that there are inmates that do not receive orientation as required. Additionally, this could alienate those that are not familiar with technology leaving those inmates without the knowledge that orientation provides.

Corrective Actions:

The facility must implement a process that provides orientation to all inmates. It is recommended that the facility complete this at the time of booking. Inmates should be provided an orientation form that explains important items such as how to submit medical requests, how to use the phones, what programs are available to them, and should guide inmates to the inmate handbook for more information concerning their stay at the jail. Example copies of orientation will be provided to the Jail Administrator. Once the process is completed, it must be submitted to the DOC for review.

Response Needed By: 01/31/2023

3. 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:

During policy review it was discovered that the facility's policy does not include a policy that addresses this rule.

Additionally, the facility does not conduct daily inspections as required by the rule.

Corrective Actions:

The Jail Administrator or designee must review the facility's policy and add the rule to the policy.

Additionally, the Jail Administrator or designee must create a process to complete daily inspections and document the inspections. Once this process is completed, it must be submitted to the DOC for review.

Response Needed By: 02/28/2023

Chapter 2911 - Mandatory Rules In Compliance With Concerns**Total: 5****1. 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:

During policy review it was discovered that the facility's policy does not include all elements of the rule as required. Specifically, the facility is missing elements A and D as required by the rule.

Corrective Actions:

The Jail Administrator or designee must review the facility's policy and add the missing elements to the policy.

Response Needed By:**2. 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:

During policy review it was discovered that the facility's policy does not include all elements of the rule as required. Specifically, the policy does not address more frequent observations for individuals experiencing withdrawals from drugs or alcohol.

Additionally, a review of well-being checks using video was completed. The video reviewed showed that the staff have made a lot of progress in well-being check quality and completing them on time. However, there was point when an inmate using a shower was not checked on.

Corrective Actions:

The Jail Administrator or designee must review the facility's policy and add the missing elements to the policy.

It was discussed with the Jail Administrator and Assistant Jail Administrator that even when an inmate is using the shower, well-being checks must be completed. It was discussed that these checks can be done by verbally communicating with the inmate and if necessary a correctional officer of the same gender could visibly check on the inmate.

Response Needed By:**3. 2911.6200 MEDICAL AND DENTAL RECORDS. Subpart 6. Transfer of records.**

A facility shall have a written policy and procedure regarding the transfer of health records and information that establishes the following requirements: A. summaries or copies of the health record are sent to the facility to which the inmate is transferred. Upon the request and written authorization of the inmate, physicians or medical facilities in the community shall be provided health record information; and B. The facility administrator or designee, which may include the responsible physician, health care personnel, or health-trained staff of the facility from which the inmate is being transferred, shall minimally share with the facility administrator of the facility designated to receive the inmate information regarding the inmate's medical management, security, and ability to participate in programs. In the absence of informed consent forms signed by the inmate involved, the information may be provided in summary manner to ensure a level of medical care consistent with the inmate's needs.

Inspection Findings:

During policy review it was discovered that the facility's policy does not include all elements of the rule as required. Specifically, the facility's policy does not address element B of the rule.

Corrective Actions:

The Jail Administrator or designee must review the facility's policy and add the missing elements to the policy.

Response Needed By:

4. 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:

During policy review it was discovered that the facility's policy does not include all elements of the rule as required. Specifically, the facility's policy does not address elements B and C of the rule.

Corrective Actions:

The Jail Administrator or designee must review the facility's policy and add the missing elements to the policy.

Response Needed By:

5. 2911.6600 DELIVERY. Subpart 9. Adverse reaction reports.

There shall be procedures for health-trained staff to report any adverse reaction incidents to health care personnel. The adverse reaction to a drug shall be documented.

Inspection Findings:

During policy review it was discovered that the facility's policy does not include all requirements of the rule. The facility's policy does not require that any adverse reactions be reported, the policy only requires that they be documented.

Corrective Actions:

The Jail Administrator or designee must review the facility's policy and add the missing elements to the policy.

Response Needed By:**Chapter 2911 - Essential Rules In Compliance With Concerns****Total: 1**

1. 2911.2850 INMATE DISCIPLINE PLAN. Subpart 6. Removing clothing and bedding.

The facility administrator or designee shall have a policy and procedure for removing clothing and bedding from an inmate. The following shall be included: A. clothing and bedding shall be removed from an inmate only when the inmate's behavior threatens the health, safety, or security of self, other persons, or property. When appropriate, alternative clothing and bedding shall be issued; B. clothing and bedding shall be returned to the inmate as soon as it is reasonable to believe the behavior that caused the action will not continue; C. the decision to deprive an inmate of articles of clothing or bedding shall be reviewed by the officer in charge or the supervisor during each eight-hour period; and D. the review shall be documented.

Inspection Findings:

The Jail Administrator or designee must review the facility's policy and add the missing elements to the policy. Specifically, the policy is missing elements B and D of the rule.

Corrective Actions:

The Jail Administrator or designee must review the facility's policy and add the missing elements to the policy.

INSPECTION COMMENTS

Physical plant:

The Otter Tail County Jail was built in 1987 and is reflective of jails built in that time period. The National Institute of Corrections estimates the life expectancy of a jail run 24 hours a day 7 days a week to be 30 years, depending on facility usage.

The main physical plant issues with Otter Tail County Jail are poor physical layout and design, lack of secure housing space, lack of support services space, and lack of storage space.

The Otter Tail County Jail is laid out on 3 different levels of the building, due to this there is an increased number of staff needed in order to operate the facility. Staff are required to be on each level if inmates are housed on that level, the 3rd level currently houses very few inmates but because there are inmates it is required to be staffed at all times. Because of the design of the facility there are several areas that are irregularly shaped, this results in blind spots and areas that aren't usable due to the shape. There are many blind spots throughout the facility due to large concrete support columns, this can be both an inmate and staff safety issue. Additionally, the facility's in-take is located on the 3rd floor of the facility, meaning that stairs or an elevator is needed to take new inmates to in-take. This can be a difficult task if an inmate is uncooperative.

There are several housing units within the jail that utilize dorm style housing, this limits who can be housed in those areas to only minimum security inmates. This style housing also limits the ability to control inmate movement within a housing unit because dorm style housing units do not have lockdown capabilities. Additionally, this style housing limits the ability to separate incompatibilities.

Spaces for support services such as medical and programs are limited. The current medical space is an office for medical staff, exam room, and medical storage all combined into one space. Because the space is used as both an office and exam room, staff must make sure that sensitive documents and items are secured before an inmate can use the exam room. Additionally, the medical space is located in the back of the jail away from areas where staff are, this limits the ability to supervise inmate medical visits unless staff are at the exam room also. For programming space, the jail utilizes a small library or a gym to conduct programming in. The library is small and can only fit a few inmates at a time, there is no other space to conduct classroom style programs in. The gym is of good size but does have limit sight lines into it given it's location and the large concrete column that is located near the door limits views into the space.

The facility is limited on spaces available for storage, the facility makes do with what it has but the situation is not ideal since areas and hallways have limited access due to items being stored there. Although the inmate property storage room was remodeled with the in-take remodel, the space is undersized and it would be a struggle to store all inmate property if the facility was close maximum capacity.

Policy:

A review of the facility's policy was conducted prior to the inspection, the policies do have some areas that don't meet all the elements of the rules. These were reviewed with the Jail Administrator during the inspection, but overall there was a relatively small number of policies that need to be adjusted. The Jail Administrator is working on resolving the issues with those policies.

Medical:

The facility recently changed contracted health authorities; the transition appears to have gone smoothly. The medical space is organized, forms appear to be properly completed, and medication and sharps counts were accurate. The only issue discovered was that the facility and health authority were not keeping inmate mental health screenings beyond a month, after a month the screenings were destroyed. It was discussed with the Jail Administrator and the RN that these screenings must be kept in the inmate's medical file and retained per their retention policy.

Well-Being Checks:

A review of well-being checks was conducted during the inspection using video, four different locations, dates, and times were selected. The results of the review show that the facility has made a lot of progress in the timeliness and quality of their well-being checks. All checks reviewed were completed on-time and of good quality, the only issue observed was an inmate in the bathroom went unchecked. This issue was addressed with the Jail Administrator and Assistant Jail Administrator, it is recommended that at a minimum that a process be put in place that in these types of situations that inmates are at least verbally checked on and if the need arises that a staff member of the same gender enter the area to verify the inmate's well-being.

Based on the overall inspection rating, the Otter Tail County Jail will be moved to a biennial inspection status.

JJDPA Compliance

On December 8, 2022, a Juvenile Justice and Delinquency Prevention (JJDP) Act Audit was conducted. A review of DOC Portal indicated that four (4) juveniles were processed in the Otter Tail County Jail from October 1, 2022, to December 8, 2022. A review of data identified no violations.

DSO: No violations determined of the facility holding status offenders in the jail.

Jail Removal: No violations of the jail removal standard.

Sight and Sound Separation: The facility design and policies allow for proper sight and sound separation.

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

Based on the documentation reviewed, zero (0) violations of the JJDP Act were identified during the Otter Tail County Jail inspection.

Report completed By: Justin Roberts – Detention Facility Inspector

Signature:

