



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:

PORT Group Homes - Girls

Address: 115 First Street N, Brainerd, MN 56401

MN Governing Rule: 2960 Children's Residential Facility

Inspection Type: Biennial **Inspected By:** Monaie Hebert – Senior Detention Facility Inspector

Inspected on: 03/21/2023 to 03/23/2023

Inspection Method: On site, in person.

Officials Present During Inspection: Administration Heather Kelm; Program Director Kirsten McKee

Officials Present for Exit Interview: Administration Heather Kelm; Program Director Kirsten McKee

Issued Inspection Report to: Administration Heather Kelm; Program Director Kirsten McKee; Regional Manager Jacob McLellan

RULE COMPLIANCE SUMMARY

Rule Chapter	Requirement Type	Total Applicable	Total Compliance	Total Non Compliance
2960	Mandatory	316	310	4

TERMS OF OPERATION

Authority to Operate: approval

Begins On: 04/01/2023 **Ends On:** 03/31/2025

Facility Type: Non-Secure Juvenile Residential Facility

Placed on Biennial Status: Yes

Biennial Status Annual Compliance Form Due On: 03/31/2024

Delinquent Juvenile Hold Approval:

Certificate Holder: PORT of Crow Wing County
PO Box 488
Brainerd, MN 56401

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	Unit Name: Non-secure residential, CRF #1057221.	None.

RULE COMPLIANCE DETAILS

Chapter 2960 - Mandatory Rules Not In Compliance

Total: 4

1. 2960.0070 ADMISSION POLICY AND PROCESS. Subpart 3.A.. Resident admission documentation.

Upon or within five working days after admission, the license holder must obtain and document the information in items A and B to the extent permitted by law: legal authority for resident placement;

Inspection Findings:

The facility admits both social service and justice involved youth into their program. A review of resident files revealed that in some cases there is inadequate documentation related to their authority to hold.

Corrective Actions:

Ensure that appropriate documents/court orders are received within appropriate timelines per this rule part. Court orders can refer to guardianship along with authorization for placement/placement agreements, criminal court orders indicating placement at the facility or probation authority to place.

Response Needed By: 05/23/2023

2. 2960.0070 ADMISSION POLICY AND PROCESS. Subpart 4.A.. Inventory and handling of resident property.

The license holder must inventory the resident's personal property, including clothing, and have the resident and the license holder sign the inventory upon admission. If the resident refuses to sign the inventory, two facility staff must sign the inventory. The license holder must ensure that a resident retain the use and availability of personal funds or property unless restrictions are justified in the resident's treatment plan. The license holder must ensure separation of resident funds from funds of the license holder, the residential program, or program staff.

Inspection Findings:

When reviewing property inventory documentation in resident files, it was revealed that the facility does not obtain resident/staff signatures for all property being placed into storage/inventory.

Corrective Actions:

Ensure that both the resident and a staff member are signing a property inventory sheet for all property being stored at the facility per this rule part.

Response Needed By: 05/23/2023

3. 2960.0070 ADMISSION POLICY AND PROCESS. Subpart 5.D.. Resident screening.

A resident admitted to a facility must be appropriately screened by a trained person, using screening instruments approved by the commissioner of human services and corrections. D. The screenings must include documented inquiries and the results of the inquiries regarding the degree to which the resident's family desires to be involved during the resident's stay at the facility. The resident and resident's family response must be documented.

Inspection Findings:

Many of the screenings are completed prior to the resident's arrival at the facility. Staff indicated they do talk with parents/guardians and residents regarding their desired level of involvement in care, however this information is not documented.

Corrective Actions:

Ensure that information regarding the extent to which the parents/guardians would like to be involved in the resident's care is documented. Also document the extent to which the resident would like the parents/guardians involved.

Response Needed By: 05/23/2023

4. 2960.0080 FACILITY OPERATIONAL SERVICES, POLICIES, AND PRACTICES. Subpart 11.D.2.. Health and hygiene services.

The license holder must meet the conditions in items A to F. D. The license holder, in consultation with a medically licensed person, must have a plan for the safe storage and delivery of medicine. The license holder must meet the requirements in subitems (1) to (5). (2) The license holder must document attempts to contact the child's parent or guardian to seek permission for the facility to administer the medication. If permission is denied and the parent has the legal right to deny permission, then the medication will be discontinued under the supervision of a physician unless a court order to administer the medication is obtained.

Inspection Findings:

A review of medical information and intake data revealed that in some cases there is no documentation regarding parental or guardian consent to administer over the counter or prescribed medications.

Corrective Actions:

Ensure that each resident has medication authorization information documented in their file. Document attempts to reach the parent or guardian if there is no contact made.

Response Needed By: 05/23/2023

Chapter 2960 - Mandatory Rules In Compliance With Concerns**Total: 2****1. 2960.0080 FACILITY OPERATIONAL SERVICES, POLICIES, AND PRACTICES. Subpart 11.D.5.b.. Health and hygiene services.**

The license holder must meet the conditions in items A to F. D. The license holder, in consultation with a medically licensed person, must have a plan for the safe storage and delivery of medicine. The license holder must meet the requirements in subitems (1) to (5). A medically licensed person must provide consultation and review of the license holder's administration of medications at least monthly.

Inspection Findings:

The facility contracts with an agency to review medication administration monthly. They are sending their medication administration forms to the company to review. There is no actual on-site review or audit of medications or counts.

Corrective Actions:

The facility will be required to review the process with their contract agency to ensure quality control and adherence to this rule part. The contract company should perform some sort of on-site, physical audit of medications and medication administration.

Response Needed By:

2. 2960.0190 DISCHARGE AND AFTERCARE. Subpart 1.B.. Discharge.

The license holder must meet requirements of items A and B. B. The transition services plan must include at least the elements in subitems (1) to (7): (1) housing, recreation, and leisure arrangements; (2) appropriate educational, vocational rehabilitation, or training services; (3) a budget plan and a description of the resident's financial and employment status; (4) transportation needs; (5) treatment services; (6) health services; and (7) personal safety needs. For a resident with a disability, the transition services plan must address the resident's need for transition from secondary education services to postsecondary education and training, employment provider participation, recreation and leisure, and home living according to Minnesota Statutes, section 125A.08.

Inspection Findings:

Transition/discharge reports do not provide the detail per this rule part. The information is available and discussed. It is not completely outlined in the document that is utilized as the discharge report.

Corrective Actions:

Ensure that all information relevant to discharge and transition is provided in the discharge report.

Response Needed By:

INSPECTION COMMENTS

The PORT Girl's Group Home biennial inspection was completed on March 21 - 23, 2023, 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, Detention, Corrections and Restrictive Procedures.

This scheduled inspection visit consisted of a physical plant safety and security inspection. The physical plant inspection included intake, medical area, resident living areas, bathrooms, visiting/meeting/group rooms, gym/recreation areas, kitchen and outside areas of the non-secure facility. All documentation relevant to the rule was reviewed including, but not limited to, randomly selected resident and staff files, training files and plans, medication administration records, staffing plans, restrictive procedure reports, well-being check data, policy and program manuals and other pertinent documents to review practices and 2960 rule compliance.

The inspection also included discussions with staff and administration and observation of staff interactions with residents. Residents of the facility were interviewed.

The following comments and concerns are observations and may provide constructive feedback. These are not necessarily related to rule violations.

Comments:

- 1) The facility plans to install new camera systems over the next year, which will enhance the ability to monitor residents and ensure quality supervision.
- 2) Programming has been added over the past two years that addresses sexual victimization and trauma.
- 3) The facility has added an activities director who has revised programming and activities so that residents are exposed to and participate in a wide variety of activities both on and off grounds.

Concerns:

- 1) Consider assigning a staff member to monitoring and ensuring that all intake/admission paperwork is appropriately signed by staff and external partners, and that all paperwork is received in the appropriate timelines.

I would like to thank PORT Administration and staff for their cooperation and assistance during this licensing process. Their transparency and willingness to engage in constructive conversations regarding program and process improvement is appreciated.

Please contact me if there are any questions regarding this report or any other licensing matter. I can be reached at 651-261-1657.

JJDPa Compliance

PORT Girls Group Home is non-secure.
All of the resident beds are non-secure.

Report completed By: Monaie Hebert – Senior Detention Facility Inspector

Signature: *Monaie Hebert*